

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	12/03/2018 19:20
Date Of Accident	10/03/2018 15:00
Exact Location Of Accident	ALONG HILLVIEW AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FS3762T
Insured/Policyholder	
Name Of Registered Owner	HUANG WEI JHIN
NRIC No	S9814232J
Email Address	WJHUANG15@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91380598
Alternative Phone No	OTHERS-91380598

Vehicle Particulars

Manufacturer	HONDA
Model	RVF400RT-399CC (M)
Exact Purpose for which vehicle was being used at time of accident	TRAVELLING HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5095022884
Cover Note Number	

Driver

Name of Driver	HUANG WEI JHIN
NRIC No	S9814232J
Date Of Birth	01/05/1998
Occupation	INDOOR
Date Of Driving Pass	11/10/2017
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91380598
Fax Number	
Contact Number	OTHERS-91380598
EMail Address	WJHUANG15@GMAIL.COM

Address	BLK 137 PETIR ROAD #11-434
Postcode	670137
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG SOUTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 124 PENDING ROAD , POSTCODE: 670124 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7609999 - FAX NO: 67636614
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180310/2150(COLLISION TYPE IS HEAD TO SIDE)

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH7944X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	COLLIN
NRIC/Passport Number	
Contact Number	90126636
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

2

DETAILS OF INJURED PERSON 1

Name

HUANG WEI JHIN

Approximate Age

Injuries Sustain

SERIOUS INJURY

Injured person in which vehicle?

FS3762T

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

SKETCH PLAN

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

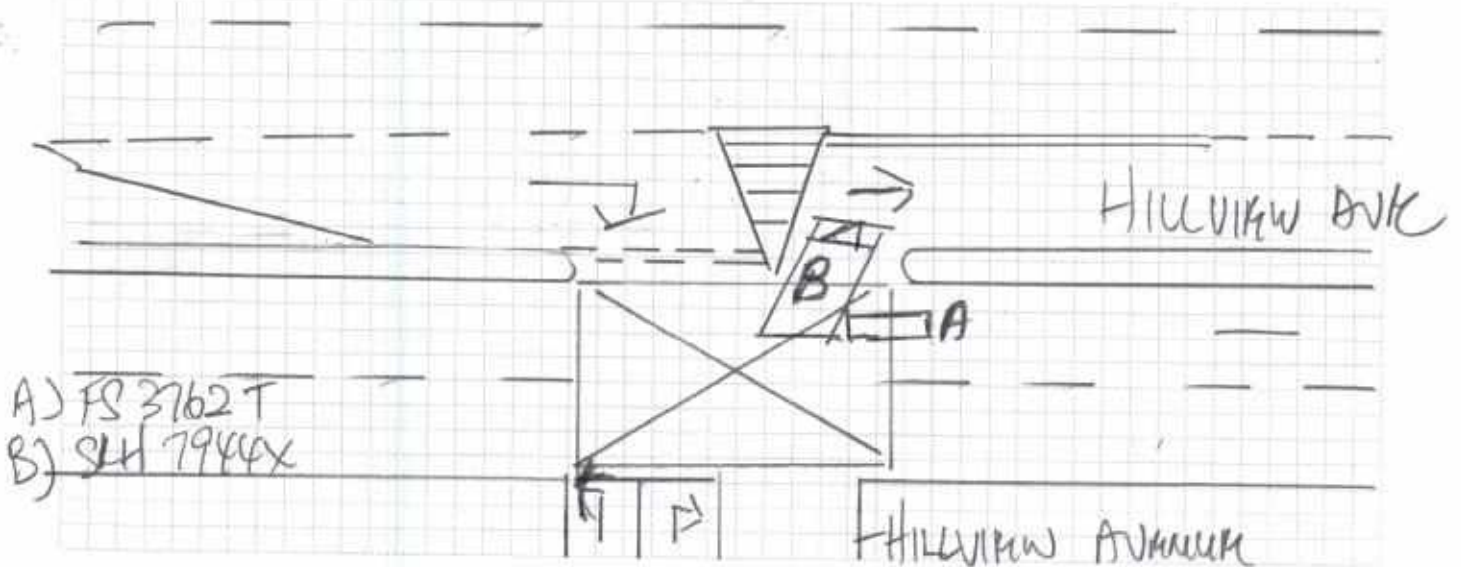
12/2/18

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:

12/03/2018
Rosa L. W. Tan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten note across the section:
 PS Refer to Police Report 17080310/2150

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
 Date & Time: 12/2/18

Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

Reporting Centre Personnel's Signature
 Name: [Signature]
 NRIC/FIN No.: 12/03/2018



SINGAPORE POLICE FORCE



T/20180310/2150

Police Station Of Origin:
Bukit Panjang South NPP
124 Pending Road #01-00 SINGAPORE
670124
Tel No: 1800-7609999

1 of 3

Report No. T/20180310/2150

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/03/2018 19:05	Vide Report No.:	Station Diary No.: 49
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Informant's Particulars

Name of Informant: HUANG WEI JHIN			Address: APT BLK 137 PETIR ROAD #11-434 SINGAPORE 670137		
ID Type / ID No.: NRIC NO / S9814232J			Contact No.: Home/Office: Mobile: 81380598		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 19	Date of Birth: 01/05/1998	Type of Informant: Rider		
Race: Chinese			Language:		Institution / School Name:
Occupation: STUDENT			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/03/2018 15:00	Type of Location: Straight Road
Location: Along Road 1 HILLVIEW AVENUE				
Hill View Avenue heading towards Hill View Link				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FS3762T	Motorcycle	HONDA	RVF400RT	White	Seriously Damaged	0
SLH7944X	Car				Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FS3762T	NTUC Income Insurance Co-Operative Limited	5095022884	12/10/2017	11/10/2018



**SINGAPORE
POLICE FORCE**



T/20180310/2150

2 of 3

Report No. T/20180310/2150

Police Station Of Origin:
Bukit Panjang South NPP
124 Pending Road #01-00 SINGAPORE
670124
Tel No: 1800-7609999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	HUANG WEI JHIN	ID No.	S9814232J
Related Vehicle	FS3762T (Motorcycle)	Contact No.	81380598
Hospital/Clinic	NG TENG FONG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	10/03/2018	Date Discharge	NIL
No. of Days granted Medical Leave	17	Degree of Injury	Serious
Driver			
Name	Collin	ID No.	NIL
Related Vehicle	SLH7944X (Car)	Contact No.	90126636
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/03/2018 at about 1500hrs, I was driving along Hill view road towards Hill View Link, when a vehicle of car plate no (SLH7944X, Silver Honda shuttle), suddenly turned across and stopped momentarily at the yellow box of the road. My motorcycle of bike no (FS3762T, Honda RVF400) could not brake in time and hit the rear right side of the vehicle. My motorcycle front and left side was seriously damaged and I was injured and conveyed to the hospital by the ambulance. 17 days Mc was given to me. I am lodging this police report for insurance purposes.



**SINGAPORE
POLICE FORCE**



T/20180310/2150

Police Station Of Origin:
Bukit Panjang South NPP
124 Pending Road #01-00 SINGAPORE
670124
Tel No: 1800-7609999

3 of 3

Report No. T/20180310/2150

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

J /

Sgt 1 CHUA KAI ZE JOEL

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt MOHAMMAD ABDILLAH BIN PALIL

Contact No.: 65476246

SN 117

Authentication Stamp

NP168

Signature :

Signature Of Informant:

Date/Time:

10/03/2018 19:05

Classification Of Case:



**SINGAPORE
POLICE FORCE**



J/20171028/2017

1 of 2

POLICE REPORT (NP322)

Report No. J/20171028/2017

Police Station Of Origin
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

IC 3262T

Date/Time Report Made 28/10/2017 04:04	Vide Report No.	Station Diary No. 28
Name Of Informant HUANG WEI JHIN	Address APT BLK 137 PETIR ROAD #11-434 SINGAPORE 670137	
ID Type / ID No. NRIC NO / S9814232J	Contact No. Home/Office Mobile 81380598	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Student	Sex Male	Age 19
Institution/School Name	Date of Birth 01/05/1998	Race Chinese
Date/Time Of Incident 26/10/2017 22:00	Location Of Incident 1 JURONG WEST CENTRAL 2 JURONG POINT SINGAPORE 648886 Jurong Area	

Brief details.

On the above mentioned date time and place, I lost the below mentioned items.

Property Information

Signature Of Officer Recording The Report:

J / Sgt 2 CHIN WEI JIE

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
Insp ONG ZHEN WEI
Contact No.: 67910000

Signature Of Informant:

Date/Time:
28/10/2017 04:04

Classification Of Case:

Authentication Stamp



Signature :

SN 117

Singapore Police Force

FUPO hotline number: 63429645



**SINGAPORE
POLICE FORCE**



J/20171028/2017

2 of 2

POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. J/20171028/2017

S/N	Item	Type	Brand/ Account/ Property/ Security- Type	Make/ Model/ Bank/ Address/ Counter	Serial No./ IMEI/ Acct No.	Quantity	Value	Description
1	General property	Lost				1		One light blue silicon wallet
2	Identity Card	Lost	SINGAP ORE NRIC		S981423 2J	1		One SG Pink IC
3	General property	Lost			S981423 2J	1		One SG driving license
4	Ezlink Card	Lost				1		One EZ-Link card
5	General property	Lost				1		One ESSO smile card

Signature Of Officer Recording The Report:

J / Sgt 2 CHIN WEI JIE

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
Insp ONG ZHEN WEI
Contact No.: 67910000

Authentication Stamp



Signature

SN 117

Singapore Police Force

Signature Of Informant:

Date/Time:
28/10/2017 04:04

Classification Of Case:

FUPO hotline number: 68429645

Claim Handling

Accident MT/0985954

Policy No.	5095022884	Vehicle No.	FS3762T	GET Registration No.	
Policyholder Name	HUANG WEI JHEN			Policyholder NRIC	
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading	
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KPK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
MCD Protection	No	NCD Entitlement(%)	0	Private Hire	Not available

Accident Details

Report Date	14/03/2018 10:45	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	10/03/2018	Time of Accident hh:mm	14:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	NA				

Benefits

Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 137 #11-434	Address 2	PETIR ROAD	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	11-434	Related Policy Number	5095022884		

OI Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	Yes <input checked="" type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002

New



























Claim Type *	OD-MX	Insured Name	HUANG WEI JHEN	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OT Vehicle Number	FS3762T	TP Vehicle Number	
Claim Description	FS3762T / SLH7944X ON 10 Mar 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	
Date Registered	23/03/2018 14:47	Claim Close Date		Date Received	
Report Taken By	ROSLI WAHAB				

☐ Print AK letter

Save Submit

Attachment

Accident No.	MT/0985954	Claim No.	002		
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	23/03/2018 14:50		
Path *		Category *		Confidential	Urgency
		<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Normal
		<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Normal
		<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Normal
		<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Normal

		<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	<input type="text" value="N/A"/>	Normal
		<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	<input type="text" value="N/A"/>	Normal
Attachment List						
Attachment	Uploaded By/Date	Category		Urgency	De	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:50	NRIC/ Driving License		Normal	NRIC/ Driving	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:50	NRIC/ Driving License		Normal	NRIC/ Driving	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:50	NRIC/ Driving License		Normal	NRIC/ Driving	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:50	NRIC/ Driving License		Normal	NRIC/ Driving	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:49	SAS		Normal	SAS	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:49	Photos		Normal	Photo	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:49	Photos		Normal	Photo	
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:47	Photos		Normal	Photo	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 23 Mar 2018 14:47	Photos		Normal	Photo	
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IT MERAH)) on 23 Mar 2018 14:47

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK
IT MERAH)) on 23 Mar 2018 14:47

Photos

Normal

Photo

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK
IT MERAH)) on 23 Mar 2018 14:47

Photos

Normal

Photo

Video List

Uploaded By/Date	Folder Date	File Name	Source
		Display in New Window	Scan and uploading

PRIVACY / DRIVING LICENCE

ACCIDENT STATEMENT

ACCIDENT DATE: 10/02/2018 (DD/MM/YYYY), TIME: 15:00 (HH:MM)

LOCATION: Along Hillview Ave

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FS 37627
b) INSURANCE COMPANY: NIC
c) POLICY NUMBER: 509505524
d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: _____
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE TRAVELLING HOME
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY

2. INSURED / POLICY HOLDER

- a) NAME: Henry Wan Jhin (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3, d IF DRIVER ALSO POLICY HOLDER

No of passengers
(including driver)
(1)

- DRIVER as above (MALE / FEMALE)
a) NAME: _____ CONTACT: _____
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* d) DATE OF BIRTH: _____ (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 11/10/2017

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) NO
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: CLEAR / RAINING / OTHERS
b) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED (YES/NO) NO

7. a) REPORTED TO POLICE (YES/NO) NO

IF YES, PLEASE STATE WHICH POLICE STATION: BUKIT PONGSONG

8. THIRD PARTY VEHICLE

No of passengers
(including driver)
(2)

- a) VEHICLE NUMBER: SLD 79444 MODEL: _____
b) DRIVER'S NAME: _____ CONTACT: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

No of passengers
(including driver)
()

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____ CONTACT: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = WJTHUAN15@GMAIL.COM

fax =

video

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9814232J



Name

HUANG WEI JHIN

黄 威 锦

Race

CHINESE

Date of birth

01-05-1998

Sex

M

Country of birth

SINGAPORE

4 3 5 1 2 1 4



NRIC No. S9814232J



Date of issue

15-03-2013

Address

APT BLK 137 PETIR ROAD
#11-434
SINGAPORE 670137

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9814232J

HUANG WEI JHIN

Birth Date: 01 May 1998

Issue Date: 30 Aug 2017



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B	Motorcycles =< 200 cc	30 Aug 2016
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	25 Aug 2016

NP 428A



Licence No: S9814232J

Status of Driving Licence

QUALIFIED DRIVING LICENCE

Qualified Driving Licence No. : S9814232J
Status of Qualified Driving Licence : Valid
Class of Qualified Driving Licence : A,2B,3
Expiry Date : Valid for life unless revoked,
suspended or disqualified.

PROVISIONAL DRIVING LICENCE

Provisional Driving Licence No. : S9814232J
Status of Provisional Driving Licence : Expired (Click [here](#) for
explanation)
Class of Provisional Driving Licence : 2B,3
Expiry Date : 15/11/2016

The above information is accurate as at 22/03/2018 12:01 AM.

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number 5095027884 Cover : Third Party

- | | |
|---|----------------|
| 1. Index mark and Registration Number of Vehicle | FS3762T |
| Chassis Number | NC351103111 |
| 2. Name of Policyholder | HUANG WEI JHIN |
| 3. Effective Date of Insurance | 12 Oct 2017 |
| 4. Expiry Date of Insurance | 11 Oct 2018 |
| 5. Persons or Classes of Persons entitled to drive# | |

(a) Named Driver(s) Only:

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	N/A
EXCESS (SECTION 2)	N/A
INSURE WITH COE	N/A
NAMED DRIVER (1)	HUANG WEI JHIN
NAMED DRIVER (2)	N/A
HIRE PURCHASE COMPANY	N/A
SUM INSURED	N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : COMMERCIAL AGENCY PTE LTD (00000614425)

Date of Issue : 12 Oct 2017 16:19 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

