Date In: 9 4 8 - 14:54	Jeb description	Date &Time Completed	Done b	i.
Res No: NA) INC 1800 Afg > 724	SAS e-filing			
Veh No: SIX/03 U	E-mail (within Shrs, AIC 2hrs)		91
D.O.Y : 3/1/18 -16:17	i-Motor Claim Form	M7/2989549	9/4/18 15	42
	i-Motor W/O (Within: OD	2hrs, 7P 4hrs)		
OD / TP / Reporting Only	i-Photo Uploaded			
	Assessment/Survey Repor	t		
TP Insurer:	Ass't Report by Fax / Har	nd to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QV	V; (Tel:	Fax:	
	supsygyz . INC	()/Non-INC().		
Owner / Driver: (Tel:)	
Policy No: ()	Period: () Cover Type: ()	
Confirmed by : (Date:	Time:)	
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: (0-20%; P: 21-79%. F: 80-	100%]	_
Year of Registration: () Warranty: YES ()/NO ()		- 17
Excess: (\$) Loading	:\$1,000()/\$2,000()			
General Remarks:	THE PLAN SERVICE STATE		Ser S	
Drive-In ()/ Towed-In (); In Remarks: (INC hotline: 6788 66		; Towing Co: (Date& Limis Completed	Done b) y
1) Apply for Transport Allowance (
2) QC Check / Post Repair Inspection	()			
3) Upload Resurvey Photo [Repair Co.	st > \$3000] ()	2		
Injury:	W = 00000000000000000000000000000000000			W
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Date/Time Actions		and the second s	Michigan St.	
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NA18 02149		dent Reporting (\$30);	fit Bill	Add B
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Inimant's Particulars':- river/Owner: ontact No:	3) TF: Towi 4) FT: Follo 5) FT: Follo For claimi 6) TR: Re-ii 7) N1: Idao	w-Through Survey w-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200 aspection DA + SMRT Survey	\$120 \$30 25)	
Inimant's Particulars:- river/Owner: ontact No: amaged Portion:	3) TF: Towi 4) FT: Follo 5) FT: Follo For claimi 6) TR: Re-ii 7) N1: Idao 8) NTUC Ac	w-Through Survey w-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200 aspection DA + SMRT Survey idditional Services:-	\$120 \$30 25) \$75 \$160	
Inimant's Particulars:- river/Owner: ontact No: armaged Portion: C Checked by (Engr-In-Charge):	3) TF: Towi 4) FT: Follo 5) FT: Follo For claimi 6) TR: Re-ii 7) N1: Idao 8) NTUC Ac QIL* * N5: Cou	w-Through Survey w-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 20) aspection DA + SMRT Survey iditional Services:-	\$120 \$30 25) \$75	
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por it to

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 witholding 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.

Any false reporting may be referred to the Police for investigation.

- 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

09/04/2018 14:54 Date Of Report 07/04/2018 16:55 Date Of Accident

ALONG SOMERSET RD BEFORE 313@SOMERSET Exact Location Of Accident

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

SBX100U Vehicle Registration Number

Insured/Policyholder

CHEE HAN CHOON Name Of Registered Owner

53360127D Co Reg No NOEMAIL Email Address

(LOCAL) +65-90093994 Mobile Phone No OFFICE-90093994 Alternative Phone No

Vehicle Particulars

TOYOTA Manufacturer WISH 1.8 A Model

Exact Purpose for which vehicle was being used at

time of accident

COMMERCIAL

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

REPORTING ONLY If No. Please state action to be taken PRIVATE HIRE Vehicle Category

Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

5089923745 Policy Number

Cover Note Number

Driver

YONG SWEE ING (YAO RUIYING) Name of Driver

S7435478E NRIC No 22/10/1974 Date Of Birth OUTDOOR Occupation 21/01/1993 Date Of Driving Pass

25 YEARS AND 2 MONTHS **Driving Experience**

FEMALE Gender

(LOCAL) +65-92705994 Mobile Number

Fax Number

OFFICE-92705994 Contact Number

NOEMAIL EMail Address

Address

BLK 54 PIPIT ROAD

#04-78

Postcode

370054

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

NO COLLISION

Weather Conditions

RAINING

Road Surface

WET

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?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance,

West.

soliciting/offering accident claims assistance,

NO

Number of Passengers (Including Driver)

6

Passenger 1

NAME:

. . .

er 1

GENDER: : F

: FEMALE

Passenger 2

NAME:

. -

GENDER:

: FEMALE

Passenger 3

NAME:

.

GENDER:

: FEMALE

Passenger 4

NAME:

. .

GENDER:

: FEMALE

: FEMALE

Passenger 5

NAME:

. .

GENDER:

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG LANE 1 SOMERSET RD AND IT WAS CONGESTED. SUDDENLY VEHICLE B (DRIVER) COME DOWN FROM HIS CAR AND LOOK AT HIS CAR REAR PORTION AND THEN MY CAR FRONT. I ALSO GOT DOWN FROM MY CAR AND HE SAID THAT I HIT INTO HIS CAR AND ASK ME FOR MY LICENSE WHICH I PASS IT TO HIM. HE TOOK PHOTO AND RETURN TO ME. HE SAID THAT I HIT INTO HIS CAR AND SO I TOLD HIM AS IT WAS JUST VERY SLIGHT DAMAGE I DID OFFERED TO PAY FOR THE REPAIRS AND SETTLE THE MATTER PRIVATELY AND TO DO A PRIVATE SETTLEMENT AND HE TEXT ME ONE HOUR LATER AND TOLD ME THAT THE REPAIR COST MORE THAN \$3,000 SO I DECIDED TO LODGE A INSURANCE REPORT. IT WAS RAINING THAT DAY AND THAT IS NO DAMAGE AT ALL TO MY CAR.

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

SLP5494Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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 liability.
- 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.
- The 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.
- 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:
 - 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:
 - 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: Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:



Application to Register Person(s) and Business Name

Entity Information

Number of Years

1 Year (\$\$ 100)

Commencement Date

Entity Name

CHEE HAN CHOON

Are you registering a professional partnership?

Business Activity

Primary Activity

PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERA TOR AND TRISHAWS) (497.19)

Secondary Activity

Primary User-Described Activity

Secondary User-Described Activity

Principal Place of Business

54 PIPIT ROAD #04 - 78 Singapore 370054

Position Details [1 of 1]

Position Held

Type

Individual

Date of Appointment

06/04/2017

CHEE HAN CHOON

Identification Type

NRIC (CITIZEN) Date of Birth

19/10/1967

Contact Information

Local Fixed Line No.

Email Address

CIRCUITROAD123@GMAIL.COM

Local Address

54 PIPIT ROAD#04 - 78

Singapore 370054

Do you want to provide an Alternate Address?

In-Principle Approval from Referral Authorities

In-Principle Approval Obtained from Other Authorities?

Declaration

I. CHEE HAN CHOON, declare that:

- · The owner(s) is/are not bankrupt.
- The authorised representative(s) is/are not bankrupt.
- The owner(s)/authorised representative(s) who is/are bankrupt have obtained written permission from the Official Assignee/Leave of the High Court to take part in and manage the business.
- The owner(s) who is a corporation, is not under liquidation.
- The above information submitted is true and correct to the best of my knowledge and I am authorised to file this application.

Identification No. S1790176A Nationality SINGAPORE CITIZEN

Local Mobile No. +65 90292594

FAD

bızfıle

HELP

GLOSSARY

BUSINESS TOOLS

717

Font Resize: A- A A+

Singapore Government

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SEARCH: SEARCH INFORMATION

Search

Public Accountant

CONDUCT ENTITY SEARCH



Buch

Read More 3



RECEIPT

Receipt No.

EP Reference No. Paid By Paid Via

: ACRA170406086626

: 20170406214106842 : CHEE HAN CHOON

(see estapaint on

: Credit/Debit Card through Enets

GST Registration No.: M9-0008879-T

Date/Time

: 06/04/2017 21:41:03

S/No.	Transaction No.	Entity Name/UEN	Description	Amount (SGD)	Status
1	B170045592	CHEE HAN CHOON 53360127D	Application to Register Person(s) and Business Name	100.00	Completed
			Application for a New Business Name	15.00	

Application for a New Business Name

with Business Profile (Biz) CHEE HAN CHOON Registration 53360127D

TOTAL (SGD) 118.30

Completed

This is a computer-generated receipt. No signature is required. It is important to print a copy of the receipt for future reference.

Print

3.30

Back

Value Added Services

Exit to Dashboard

1170186706

GST(SGD) 0.22

Exit to eservice List

Agree

Disclaimer: Value Added Services

ACRA has implemented a suite of Value Added Services for new business entities as part of our one-stop business facilitation initiative. These services include Customs account activation, corporate bank account opening, domain name reservation, GST registration and subscription for GeBIZ alerts and/or the Enterprise One newsletter.

To access these services, please read and acknowledge the following disclaimer by clicking on I Agree.

- (a) This interface is maintained for the purposes of facilitating the application of the above Value Added Services. The application for the Value Added Service is administered by the corresponding Agency and not ACRA.
- By proceeding with this transaction, you are agreeing to the transmission of the information in the following screens to the corresponding Agency for the purposes of the Value Added Service.

Disclaimer:

- (c) ACRA shall in no event be liable for any damages, loss or expenses (whether direct, indirect, incidental, punitive, exemplary and/or consequential) arising from or in connection with
 - Any access, use or the inability to access or use the Value Added Service; or Any system, server or connection failure, error, omission or delay in transmission or computer virus encountered when using the Value
 - Added Service interface.

m Print

Exit to Dashboard

Exit to eService List

LAgrac

Freedback our eServices: Click Here

lluy Information

Instant Information

Shop Membership

Package Information

Explore eServices

Business

Limited Partnership

Limited Liability Partnership

) Local Company

Foreign Company

Public Accounting Firm > Public Accountant

Corporate Service Providers

Others

Initiatives of ACRA

File Online at

File Financial Statements at

bizfin

About Bizfile

) About Bizfile

> Learn About IShop @ACRA

BIZFINX

Guided Assistant

) eService Guides

Need Assistance @

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Best viewed using IE 9.0+ or Google Chrome 43.0+

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Last Updated/Reviewed on 2 Jan 2016.



Acknowledgement

Transaction Details

UEN 53360127D

Transaction Number

EP Reference No.

20170406214106842

Proposed Entity Name CHEE HAN CHOON

Receipt Number ACRA170406086626

Payment Date 06/04/2017 21:41:03

Descriptions

Amount(SGD)

Application to Register Person(s) and Business Name

100.00

Application for a New Business Name

15.00

BUSINESS PROFILE (Business) With Registration

3.30

Message Section

The entity has been registered successfully.

Value Added Services

Disclaimer: Value Added Services

ACRA has implemented a suite of Value Added Services for new business entities as part of our one-stop business facilitation initiative. These services include Customs account activation, corporate bank account opening, domain name reservation, GST registration and subscription for GeBIZ alerts and/or the Enterprise One newsletter.

SGD 118.30

Paid Amount

To access these services, please read and acknowledge the following disclaimer by clicking on I Agree.

Important Note:

(a) This interface is maintained for the purposes of facilitating the application of the above Value Added Services. The application for the Value Added

By proceeding with this transaction, you are agreeing to the transmission of the information in the following screens to the corresponding Agency for the purposes of the Value Added Service.

Disclaimer:

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Any access, use or the inability to access or use the Value Added Service; or

ii. Any system, server or connection failure, error, omission or delay in transmission or computer virus encountered when using the Value Added Service interface.

Message

Subject

iShop@ACRA - Instant Information (Receipt No:ACRA170406086626)

Received Date

06/04/2017

Expire Date

06/05/2017

Dear Sir/Mdm.

YOUR ORDER IS READY FOR DOWNLOAD

Thank you for your purchase(s).

Please download your product(s) by 13/04/2017 21:42:58.

Your order summary is as follows:

ENTITY NAME	UEN	PRODUCT DESCRIPTION	AMOUNT ORDER T
CHEE HAN CHOON	53360127D	BUSINESS PROFILE (BIZ)	3,30 117018670

This email is also available in your message box upon login at http://www.bizfile.gov.sg if your order is ma CorpPass / SingPass.

You may view your order status at Bizfile.Gov.Sg > Quick Access > Transaction Status Enquiry within 1 hou purchase.

Requestor's Name : CHEE HAN CHOON

Requestor's ID : XXXXX176A

Date of Request : 06/04/2017 21:42:58

If you need any assistance, please contact ACRA Helpdesk at 6248 6028 from 9am to 6pm Mondays to Frid on Saturdays, Sundays & Public Holidays).

Yours sincerely

Accounting and Corporate Regulatory Authority (ACRA) 10 Anson Road, #05-01/15, International Plaza, Singapore 079903

Important Information: The download link is valid for 7 days from the date of purchase.

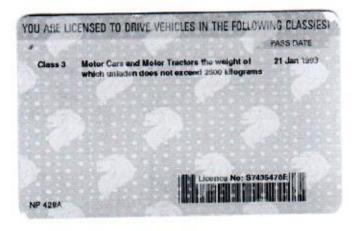
There will be no replacement or refund after the link expiry date.

Refer to this guide if you are using internet Explorer Version 11 to download the product(s).









eBaoTech								Gene	ralClaim
Hello, NAC_PAYA_UBI_80	0601			C I I AND WALL		Change Lan	guage	· Change Passwor	d • Log Out
My Desktop	Policy Query								
Notice of Loss	Policy No.				Date of Acci	dent	07/04	/2018 06:55	
	Vehicle No.(For Motor)	58X100U							
					Search				
	Select Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	O 5089923745	CHEE HAN	53360127D	GCV	Comprehensive	SBX100U	SBX100U	11/04/2017	10/04/2018
				- 1	Continue				

Policy No.	5089923745	Policyholder Name	CHEE HAN CHOON	Policyholder NRIC	53360127D	
Address	BLK 54 #04-78 PIPIT ROAD	SINGAPORE 3700	54			
Product Name	COMMERCIAL VEHICLE INSU	RAI Plan		Group Policy Flag	N	
Policy ssue Date	07/04/2017	Effective Date	11/04/2017 00:00	Expiry Date	10/04/2018 23:59	
Third Party Excess	2000	Own damage Excess	2000	Windscreen Excess	100	
Additional Excess		OS Premium	0			
Outside Singapore OD Excess		Outside Singapore TP Excess				
Agent	GRABCAR PTE. LTD.	Agent Tel.	65703925	GST Flag	Y	
Co- nsurance Flag Open Policy Info Certificate Info	No nolder Mailing Address					
Address 1	BLK 54 #04-78	Address 2	PIPIT ROAD	Address 3	SINGAPORE 370054	
Address 4	BLK 54 #04-78	Address	Singapore address	Post Code	370054	
Unit No.	04-78	Type Related Policy Number	5089923745-01			
	d Object: SBX100U					
	2 22 0	. Endores	ement Type E	Indorsement Status	Endorsement Content	
Sequent	11/04/2017 00:00	NCD Endors		sement Take Effective	Thank you for giving us the opportunity to serve you. Whave confirmed that the NC entitlement from your previous insurer is 10% and not 15% as declared in you policy application. In view of the reduction of NCD, an additional premium of \$88.0 (inclusive of GST) is payable under your present policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within days from the date of this letter. For cheque payment please issue the cheque in favour of "NTUC Income" wour name and policy number the please issue the cheque in favour name and policy numbers.	
					indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash,	

Claim Handling									Exit
Accident MT/0989549	11.0077040003251	tradebase and	SBX100U	G	ST Registration No.				
Policy No.	5089923745	Vehicle No.	58X1000		oncyholder NRIC		533601270		
Policyholdar Name	CHEE HAN CHOON	8 877	200000000		pading		0		
Product Code	COMMERCIAL VEHICLE INSURA	Cover Type	Comprehens		ontact No (Home)		a		
Contact No.(Mobile)	90093994	Cornact No.(Office)	0		Code		EV.		
Email Address	7 P	Special Remark	® No ⊜ Yes		Code Reason		1-2		
RTH	® No ○ Yes	TCA NCD Emitiement(%)	10		rivate Hire		Ves		
NCO Protection	No.	MCD Eutereusztun)	20						
Accident Details		Acadent Report Within 24 hrs.	Yes	A	coldent Type		No collision		
Report Date	09/04/2018 15:39	Time of Accident hitchmin	16:55	c	ountry of Accident		Singapore		
Date of Acodenic	07/04/2016	Orange Force		1	CH No.				
Reporting Centre									
Accident Excation	ALONG SOMERSET RD BEFORE 313050	HEKSE!							
9 Benefits									
♥ Excess	2,000.00	Additional Excess			Vindsoreen Excess			100.00	
Dwn damage Excess	2,000.00	Outside Singapore OD Excess							
Unnamed Driver Excess	2000	Outside Singapore TP Excess							
Third Perty Excess	2,000.00	Cuttage Singapore in Excess							
S GST Registered Inform			ggr	Registration Date					
GST Registered	tyo.			Status Verified	Yes				
GST Registration No. Modification History									
⇒ Policyholder Hailing A	ddress			100					
Address 1	BLK 54 #04:78	Address 2	PIPIT ROAD		Address 3		SINGAPORE 370	054	
Address 4		Address Type	Singapore a		Post Code		370054		
Unit No.	04-78	Related Folicy Number	5089923745	5-01					
□ OI Driver Info									
Oriver Name	Unnamed Driver	Driver Type	Unnamed Dr		Driver DDS		22/10/1974		
Unnamed driver Name	YONG SWEE ING (YAO RUIVING	Driver NRIC	57435478E		Driving Experience :		25		
Register Date of Driver Licens	se 21/01/1993	Driver Age	43				0		
Contact No.(Mobile)	92705994	Contact No.(Office)	0		Contact No.(Home)		SINGAPORE 370	054	
Address 1	BLK SA	Address 2	PIPIT ROAD		Address 3		370054	***	
Address 4		Address Type	Singapore a	ddress	Post Code		370004		
Unit No.	04-78								
Does he dwn a Singapore Registered car?	○.Yes ® Np	Driver Vetecle No.		63	Driver Insurer Comp	lany			
Declaration									
Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ® N	io					
Modification History									
Claim 001 New									
	75	to and them	CHEE HAN	CHICAN	Insured NRIC		\$33601270		
Claim Type *	9093994 9093994	Intured Name Contact No.(Home)	The Field	01001	Contact No.(Office)		+		
Contact No.(Mobile)	sweehor 100@gmail.com	DI Vehicle Number	S8X100U		TP Vehicle Number		SLPS494Z		
Email Address		2006.01008.1000010	THE REAL PROPERTY.		Name of Preferred V	Warkshop			
Claim Description	SEX100U / SL95494Z ON 7 Apr 2018	240202 VIVESTOR				20			
Preferred Workshop Comact No.		Insured Liability *	Not at Faul		are contain		Described	141	
Require Finalisation	Yes 🖳	Preferered Repair Option	Preferred V	77	GIA report		Received 09/04/2018 00		
Date Registered	09/04/2018 15:42	Claim Close Date			Date Received		0904/2016 00	W 10	
Report Taken By	Jackson .								
D Print AK letter									
			Save Sub	mit					
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