NATIONAL Assessment Centre Services. [illegible] XTNA418056080

Date In: 30/04/2018 10:08	Job description	Date & Time Completed	Done by
Ref No: NBA/ZIUC18007896/Y	SAS e-filing		
Veh No: SJT 7833 J	E-mail (vehicle photo, AIC form)		
D.O.A : 28/04/2018 01:30	I-Motor Claim Form	MTC992407-001	30/04/2018 15:17
OD / TP Reporting Only	I-Motor W/O (within OD [illegible])		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: (Tel: Fax:)

TP Particulars: Veh No: GBG 9555 X , INC ( ) / Non-INC ( )

Owner / Driver: (Tel:)

Policy No: ( ) Period: ( ) Cover Type: ( )

Confirmed by : (Date: Time:)

Insured/Driver Liability: (%) (Note: B.L Status (WO): N: 0-20%; P: 21-79%; F: 80-100%)

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: ($) Loading : $1,000 ( ) / $2,000 ( )

General Remarks:

( ) Walk-in Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case : to e-mail Insurer URGENTLY.

Drive-in ( ) / Towed-in ( ) : Invoice: YES ( ) / NO ( ) : Towing Co: ( )

Remarks [illegible] 6788 6046	Date/Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo (Repair Cost > $3000) ( )		

Injury :

Date/Time/Action:

NA1802757

Damage Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Other Comments:

Invoice Preparation/Checklist		
1) AR : Accident Reporting ($30)		
2) DA : Damage Assessment ($100)	INC (WO)	
3) TF : Towing Fee		
4) FT : Follow Through Survey		
5) FT : Follow Through Survey (Resurvey)		
[illegible] INC Only [illegible]		
6) TR : [illegible]		
7) NT : [illegible] DA + SMRT Survey		
8) NTUC Additional Services		
Other		
NT: Courtesy Car / Tpt Allowance		
NT: Repair Coordination		
NT: Post Repair Inspection		
NT: DY / Collect Excess Coordination		
TP (NT) : TP (Non INC) [illegible] INC		
9) NT: [illegible]		
Invoice Prep'd	Pre Charged	

MNA418056080 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 30/04/2018 10:08
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

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 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.
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	30/04/2018 10:08
Date Of Accident	28/04/2018 01:30
Exact Location Of Accident	TOA PAYOH LOR 6 SLIP ONTO BRADDELL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT7833T
Insured/Policyholder	
Name Of Registered Owner	ALPHONSUS
Co Reg No	53352627B
Email Address	ALPHONSUS_T@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96275744
Alternative Phone No	OFFICE-96275744
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5052035663-06
Cover Note Number	
Driver	
Name of Driver	TAN CHUN GUAN, ALPHONSUS
NRIC No	S8723166F
Date Of Birth	01/08/1987
Occupation	INDOOR
Date Of Driving Pass	10/12/2007
Driving Experience	10 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96275744
Fax Number	
Contact Number	OTHERS-96275744
EMail Address	ALPHONSUS_T@YAHOO.COM

Address	1 SIN MING AVENUE #15-02
Postcode	575728
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 - HEAD TO REAR
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?	NO
Was any injured conveyed to hospital by ambulance?	NO
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?	NO
If Yes,Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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	GBG9555X
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	91127337/82368730
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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 liability.
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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.

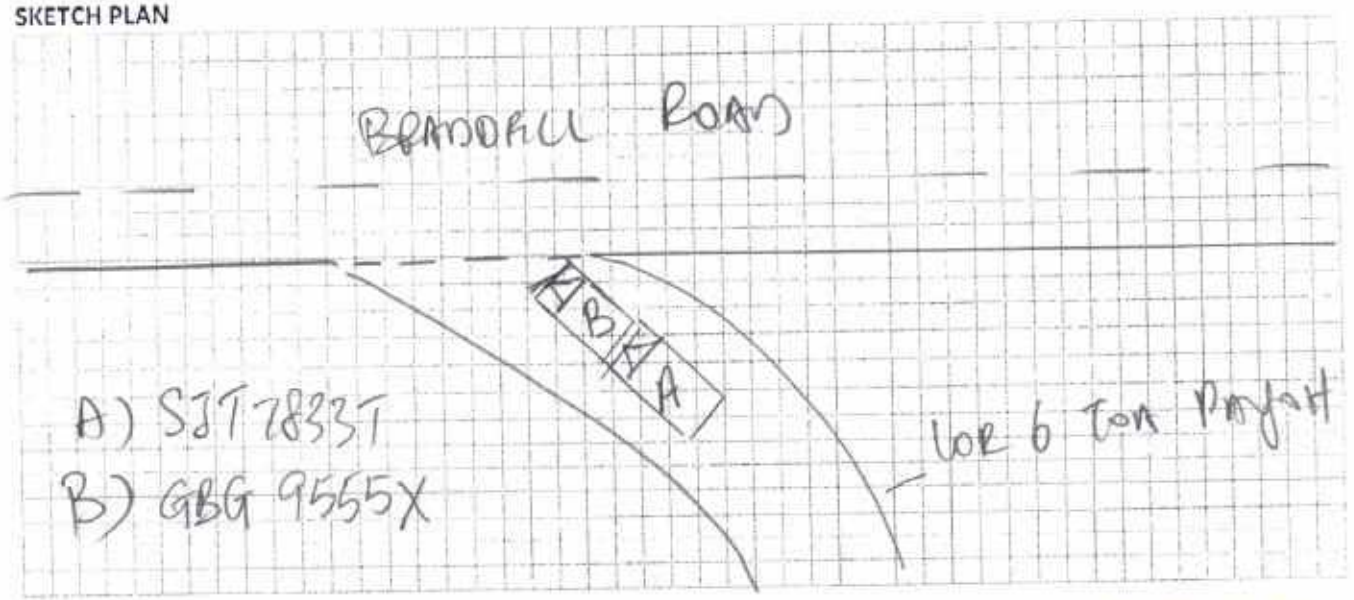
   (e) the information so collected under (d) above may be shared / disclosed:

   (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: 30/4/18 10am	Driver's Signature (if driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.: 30/04/2018

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At Ton Panah Lor 6.

On the 28th April 2018, I was entering slip road onto Braddell Road. The van in front had jam bracked after on coming Taxi sped and horn past. He was. The van had already past the line. and was already on Braddell Road. I had little time to react and was also not speeding. The van had minor scratches as the impact was not great.

DECLARATION

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

Policyholder's Signature
Date & Time: 30/4/18 10am

Driver's Signature
(If driver is not the policyholder)
Date & Time: 30/4/18 10am.

30/04/2018

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

INFORMATION RESOURCES

Business Profile (Business) of ALPHONSUS (53352627B)

Date: 30/04/2018

The Following Are The Brief Particulars of :

Name of Business	ALPHONSUS
Former Name(s) if any	
Date of Change of Name	
Registration No.	53352627B
Registration Date	20/12/2016
Commencement Date	20/12/2016
Status of Business	Live
Status Date	24/12/2017
Renewal Date	24/12/2017
Expiry Date	20/12/2018
Renewal via GIRO	NO
Constitution of Business	Sole-Proprietor
Principal Place of Business	1 SIN MING AVENUE #15-02 FLAME TREE PARK SINGAPORE (575728)
Date of Change of Address	

Principal Activities

Activities (I)	PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (49219)
Description	
Activities (II)	
Description	

Particulars of Authorised Representative(s)

Name	ID	Nationality	Address	Address Source	Date of Appointment

Authentication No. : M18287581Y

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Business) of ALPHONSUS (53352627B)

Date: 30/04/2018

Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position
TAN CHUN GUAN ALPHONSUS	S8723166F	SINGAPORE CITIZEN	1 SIN MING AVENUE #15-02 FLAME TREE PARK SINGAPORE (575728)	ACRA	20/12/2016 Owner

Withdrawn Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position	Date of Withdrawal

Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

Note :

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.

- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sg.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA180430154167

DATE : 30/04/2018

This is computer generated. Hence no signature required.

Authentication No. : M18287581Y

Claim Handling

Exit

Accident MT/0992407

Policy No.	5092341266	Vehicle No.	SJT7833T	GST Registration No.	
Policyholder Name	ALPHONSUS			Policyholder NRIC	S3352627B
Product Code	COMMERCIAL VEHICLE INSURAN	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	96275744	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

Accident Details

Report Date	30/04/2018 15:10	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	30/04/2018	Time of Accident hh:mm	01:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	TOA PAYOH LOR 6 SLIP ONTO BRADDELL ROAD				

Benefits

Excess

Own damage Excess	2,000.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	2,000.00	Outside Singapore TP Excess			

GST Registered Information

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

Policyholder Mailing Address

Address 1	1 SIN MING AVENUE	Address 2	#15-02 FLAME TREE PARK	Address 3	SINGAPORE 575729
Address 4		Address Type	Singapore address	Post Code	575729
Unit No.	15-02	Related Policy Number	5092341266		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TAN CHUN GUAN, ALPHONSUS	Driver NRIC	S8723166F	Driver DOB	01/08/1987
Register Date of Driver License	10/12/2007	Driver Age	30	Driving Experience	10
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1	1 SIN MING AVENUE	Address 2	# FLAME TREE PARK	Address 3	SINGAPORE 575729
Address 4		Address Type	Foreign address	Post Code	575729
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SJT7833T	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	ALPHONSUS	Insured NRIC	S3352627B
Contact No.(Mobile)	97581936	Contact No.(Home)		Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SJT7833T	TP Vehicle Number	GBG9555X
Claim Description	SJT7833T / GBG9555X ON 30 Apr 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	30/04/2018 15:15	Claim Close Date		Date Received	30/04/2018 00:00
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/0992407	Claim No.	001
Last Doc. Received	Yes No	Upload Date	30/04/2018 15:17

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Read

Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)	Action
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:17	Photos	Normal	Photos 2018-4-30		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:17	Photos	Normal	Photos 2018-4-30		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:17	Photos	Normal	Photos 2018-4-30		Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:17	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:17	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:17	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:17	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:16	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:15	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:15	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:15	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:15	Photos	Normal	Photos 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:15	SAS	Normal	SAS 2018-4-30	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 30 Apr 2018 15:15	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-4-30	Edit

Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: (28 / 4 / 2018) (DD/MM/YYYY). TIME: (1 : 30) (HH:MM)

LOCATION: SLIP ROAD ONTO BRADDEL ROAD.

1. **DETAILS OF VEHICLE**
   a) VEHICLE NUMBER: SJT 7833T
   b) INSURANCE COMPANY: NTUC INCOME
   c) POLICY NUMBER: 5093341266
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: TOYOTA ALTIS 1.6
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: _____
   i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES / NO)
   IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. **INSURED / POLICY HOLDER**
   A) NAME: ALPHONSUS (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S8723166F CONTACT: 96275744
   c) ADDRESS: 1 SIN MING AVE #15-02
   SINGAPORE 575728

   * CONTINUE TO **3.d** IF DRIVER ALSO POLICY HOLDER

* No of passenger (including driver) (1)

3. **DRIVER**
   a) NAME: TAN CHUN GUAN ALPHONSUS (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S8723166F CONTACT: _____
   c) ADDRESS: 1 SIN MING AVE #15-02
   SINGAPORE 575728
   *d) DATE OF BIRTH: (01 / 08 / 1987) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS: 10/12/07.
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____
5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS NA)
   b) ROAD SURFACE: (DRY / WET / OTHERS NA.)
6. WAS ANYBODY INJURED (YES / NO)
7. a) REPORTED TO POLICE (YES / NO)
   IF YES, PLEASE STATE WHICH POLICE STATION: _____
8. **THIRD PARTY VEHICLE**
   a) VEHICLE NUMBER: GBG9555X MODEL: TOYOTA REGIUSACE
   b) DRIVER'S NAME: _____
   c) NRIC/FIN/PASSPORT: _____ CONTACT: 91127337/82368730

\# No of passenger (including driver) (_____)

9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: _____ MODEL: _____
   e) DRIVER'S NAME: _____
   f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

\# No of passenger (including driver) (_____)

email = alphonsus_t@yahoo.com

fax =

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8723166F

Name

TAN CHUN GUAN, ALPHONSUS
(CHEN JUNYUAN)

陳 俊 元

Race
CHINESE

Date of birth
01-08-1967

Sex
M

Country of birth
SINGAPORE

S8723166F

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence No. S8723166F

TAN CHUN GUAN, ALPHONSUS
(CHEN JUNYUAN)

Birth Date: 01 Aug 1967

Issue Date: 22 Apr 2017

002577152G

A0201881

S8723166F

Blood Group
O+

Date of issue
16-08-2002

Address
1 SIN MING AVENUE
#15-02
SINGAPORE 575728

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

		EFFECTIVE DATE
Class 3A	Motor cars without clutch pedals (Auto) with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight =< 2500kg	10 Dec 2007

NP 428A

Licence No:S8723166F

eBaoTech GeneralClaim

Hello, NAC_BUKIT_MERAH_800676 · Change Language · Change Password · Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.
Date of Accident 28/04/2018 09:48
Vehicle No.(For Motor) SJT7833T

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5092341266	ALPHONSUS	S3352627B	GCV	Comprehensive	SJT7833T	SJT7833T	30/06/2017	28/10/2018

Continue