

# NATIONAL Assessment Centre Services

[wef 1 Jan'05] MNA 11805969-01

Date In: 7/5/18-19:58	Job description	Date & Time Completed	Done by
Ref No: NA/14C18008360/24	SAS e-filing		
Veh No: 6BD3899J	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 6/5/18 16:40	i-Motor Claim Form	MT/0995347-001	7/5/18 22:44
OD TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: 6B3793K	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% P: 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:- (INC hotline: 6788 6616)	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	Actions

NA1802841	Invoice Preparation Checklist	Ant (\$) Est Bill	Ant (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
Auditors' Comments:-	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

Pat 1:

Pat 2 / 3:



## 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	07/05/2018 19:58
Date Of Accident	06/05/2018 16:40
Exact Location Of Accident	BLK 104 TOA PAYOH LOR 1 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD3899J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TOPMAST ENGINEERING PTE LTD
Co Reg No	20095138K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62580325

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 3.0 DIESEL TURBO M/T 2WD LORRY
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5092319951
Cover Note Number	

### Driver

Name of Driver	PHUA KONG YANG
NRIC No	S1456736D
Date Of Birth	13/01/1960
Occupation	OUTDOOR
Date Of Driving Pass	18/08/1999
Driving Experience	18 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94843478
Fax Number	
Contact Number	OFFICE-94843478
Email Address	NOEMAIL

Address	BLK 448 YISHUN RING ROAD #10-78
Postcode	760448
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
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)	3
Passenger 1	NAME: : MEL SOH YONG YONG GENDER: : FEMALE
Passenger 2	NAME: : - GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8522999 - FAX NO: 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180506/2094.

#### 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 Witness 1

Name	LEONG
Phone Number	91715661
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB793K
Vehicle Make/Model/Colour	

**Details Of Properties**

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUHAMMAD AFIQ BIN MOHAMED NOORZIHAN
NRIC/Passport Number	S9742389Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

**DETAILS OF INJURED PERSON 1**

Name	PHUA KONG YANG
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	GBD3899J
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

**DETAILS OF INJURED PERSON 2**

Name	MEL SOH YONG YONG
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	GBD3899J
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	



## 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.
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. 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.
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:

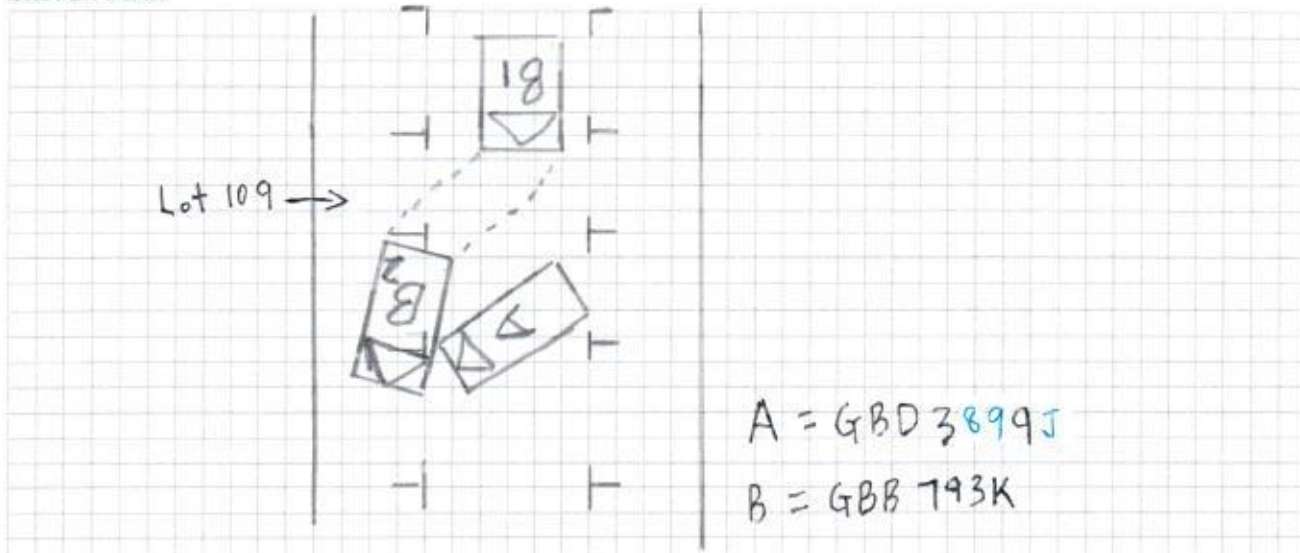
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

3899J

On the stated time and date, I vehicle A (GBD ~~3539B~~ <sup>3899J</sup>) was reversing into a carpark lot, suddenly vehicle B (GBB 793K) tried to overtake me by driving into the empty lots ahead but he miscalculated the distance and collided into the front right portion of my vehicle. A passer-by, Mr Leong, Handphone no: 91715661, witnessed how the accident happened and is willing to assist.

## DECLARATION

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



Policyholder's Signature  
Date & Time:





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



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



# ACCIDENT STATEMENT

ACCIDENT DATE: 06 / 05 / 2018 (DD/MM/YYYY), TIME: 16 : 40 (HH:MM)

LOCATION: BK-104 TOA PAYOH LORONG 1 CARPARK LOT NEAR LOT 110

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBD3899J  
 b) INSURANCE COMPANY: NTUC  
 c) POLICY NUMBER: 5092319951  
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: TOYOTA DYNA  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY) / MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL) / MOTORCYCLE  
 h) PURPOSE OF USING AT ACCIDENT TIME: WORK  
 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: TOPMAST ENGINEERING PTE LTD 200915138K (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 6258 0325  
 c) ADDRESS: 15 YISHUN INDUSTRIAL STREET 1 #03-17 WINS  
SINGAPORE 768091

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

## DRIVER

- a) NAME: PHUA KONG YANG (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S1426736D CONTACT: 98 9484 3478  
 c) ADDRESS: 81K 448 YISHUN RING RD #10-78  
SINGAPORE 760448

\*d) DATE OF BIRTH: 13 / 01 / 1960 (DD/MM/YYYY)

- e) OCCUPATION: (INDOOR / OUTDOOR)  
 f) YEARS OF DRIVING EXPERIENCE: 15

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  
 b) ROAD SURFACE: (DRY) / WET / OTHERS

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: GBB793K MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: MUHAMMAD AFIQ BIN MOHAMED NOORZIHAN  
 c) NRIC/FIN/PASSPORT: S9742389Z CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

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

\* No of passengers  
 (including driver)  
(03)

\* No of passengers  
 (including driver)  
(01)

\* No of passengers  
 (including driver)  
( )

Email = rico60autoservices@gmail.com

fax = 6286 7060 19069 7882

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MNA118059619 Vehicle Registration No: 6BD3899J  
Name (as shown in NRIC) : Phua Kong Yong NRIC/FIN/Passport No : \_\_\_\_\_  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : Blk 448 Yishun Ring Road #10-78 Singapore (766448)  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 94843478  
Email Address : \_\_\_\_\_  
Date of Accident : 6/5/18 Time of Accident : 16:40  
Place of Accident : Blk 104 Tan Ruyah Lor 1 open space carpark  
Insurance Company : NTUC

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

1. Add in police report - 1/20180506/2094 (page 3)
2. Amend driving licence pass date (18/8/1999)

Policyholder / Driver's Signature  
Date:

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





# SINGAPORE POLICE FORCE



T/20180506/2094

1 of 3

Report No. T/20180506/2094

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made:  
06/05/2018 23:24

Vide Report No.:

Station Diary No.:  
93

**Informant's Particulars**

Name of Informant:  
PHUA KONG YANG

Address:  
APT BLK 448 YISHUN RING ROAD #10-78 SINGAPORE  
760448

ID Type / ID No.:  
NRIC NO / S1456736D

Contact No.:  
Home/Office: Mobile: 94843478

Nationality:  
SINGAPORE CITIZEN

Email:

Sex: Age: Date of Birth:  
Male 58 13/01/1960

Type of Informant:  
Driver

Race:  
Chinese

Language:  
English

Institution / School Name:

Occupation:  
DRIVER

Driving Licence Information:  
Class: 2B,3

Date of Expiry:

**General Information of the Accident**

Type of  
Accident:

Non-Injury  
Others

Drink  
Drive:  
No

Date/Time of  
Accident:  
06/05/2018 16:40

Type of Location:  
Car Park

Location:  
Along Road 1  
LORONG 1 TOA PAYOH

open carpark of Blk 104. Near lot 110

Weather:

Road Surface:  
Dry

Road Speed Limit:

Clear

Traffic Control:  
Not Controlled

Traffic Volume:  
Light

Traffic Flow:  
One Way

Type of Collision:  
Between Moving Vehicles - Head To Side

Anyone conveyed by  
ambulance:  
No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB793K	Lorry			White	Slightly Damaged	1
GBD3899J	Lorry	TOYOTA		Blue	Seriously Damaged	2

**Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA





# SINGAPORE POLICE FORCE



T/20180506/2094

2 of 3

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

Report No. T/20180506/2094

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	PHUA KONG YANG	ID No.	S1456736D
Related Vehicle	GBD3899J (Lorry)	Contact No.	94843478
Hospital/Clinic	ONEDOCTORS FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	06/05/2018	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight
<b>Passenger</b>			
Name	MEL SOH YONG YONG	ID No.	S9270357F
Related Vehicle	GBD3899J (Lorry)	Contact No.	94558684
Hospital/Clinic	INTEMEDICAL 24HR CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	06/05/2018	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 06/05/2018 at about 1640hrs at the open carpark of Blk 104 Toa Payoh Lorong 1 near lot 110, I was reversing my lorry bearing plate number: GBD 3899J into the parking lot near lot 110. As I was in the midst of reversing, all of a sudden another lorry bearing plate number GBB 793K came from the right side and collided with the right side of my vehicle.

The said lorry did not wait for me to full reversing my lorry into the carpark lot. The carpark is a one way road and there is no surrounding vehicles near the lot I was parking at. No traffic police/ambulance or govt property was damaged. We both exchanged particulars and agreed to settle via insurance claim. At that juncture, my daughter in law mentioned in the above section, and my son was inside as well. I was given 3 days MC from 7/5/18 - 9/5/18 and my daughter was given 3 days MC from 6/5/18 - 8/5/18.

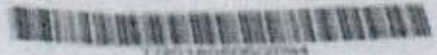
There was also a passerby who witnessed the whole accident namely Leong HP: 91715661.





SINGAPORE  
POLICE FORCE

Police Station Of Origin  
Yishun South N.P.C  
32 Yishun Street #1 SINGAPORE 768456  
Tel No: 1800-8522999



Report No: 1/20180506/2004

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:  
F/  
Sgt 2 MUHAMMAD RIDWAN BIN SA'MION

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time: 1  
06/05/2018 23:24

Officer In Charge Of Case:

TP / GIA /  
Staff Sgt TANG SIEW PING  
Contact No.: 65476430

Classification Of Case:

SN 085

Authentication Stamp

Signature:  
Singapore Police Force



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1456736D



Name

PHUA KONG YANG

潘光揚

Race

CHINESE

Date of birth

13-01-1960

Sex

M

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1456736D

Name:

PHUA KONG YANG



Birth Date: 13 Jan 1960

Issue Date: 17 Jul 2003





4300866



NRIC No. **S1456736D**

Date of issue  
**01-11-2008**

**APT BLK 448 YISHUN RING ROAD #10-78  
SINGAPORE 760448**

NRIC No: **S1456736D**

Date: **16/05/2011**

No: **6710518**

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

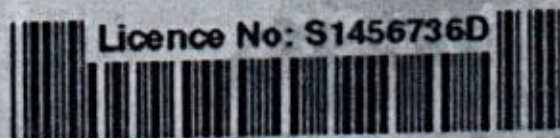
**PASS DATE**

**Class 2D  
Class 2B  
Class 2C**

**Motorcycles not exceeding 200 cc  
Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms**

**15 Jul 1993  
18 Aug 1999**

**NP 428A**



**Licence No: S1456736D**



## 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 : 5092319951

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle : GBD3899J  
Chassis Number : KDY2318016562

2. Name of Policyholder : TOPMAST ENGINEERING PTE LTD

3. Effective Date of Insurance : 01 Jul 2017

4. Expiry Date of Insurance : 30 Jun 2018

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

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.

(b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

# 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) : S\$600

EXCESS (SECTION 2) : N/A

WINDSCREEN EXCESS : S\$100

INSURE WITH COE : YES

HIRE PURCHASE COMPANY : ABWIN PTE LTD

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

: YAN XUDONG (00000630999)

Date of Issue

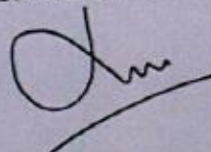
: 30 Jun 2017 09:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.

Date of Accident

06/05/2018 16:40

Vehicle No. (For Motor)

GBD3899J

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5092319951	TOPMAST ENGINEERING PTE LTD	200915138K	GFT	Comprehensive	GBD3899J	GBD3899J	01/07/2017	

## Policy Information

Policy No.	5092319951	Policyholder Name	TOPMAST ENGINEERING PTE LT	Policyholder NRIC	200915138K
Address	15 YISHUN INDUSTRIAL STREET 1 #03-17 SINGAPORE 768091				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	30/06/2017	Effective Date	01/07/2017 00:00	Expiry Date	30/06/2018 23:59
Excess Type		All Claim Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess		Young/Inexperience Driver Excess	
Agent	YAN XUDONG	Agent Tel.		GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

## Policyholder Mailing Address

Address 1	15 YISHUN INDUSTRIAL STREET	Address 2	#03-17 WIN 5	Address 3	SINGAPORE 768091
Address 4		Address Type	Singapore address	Post Code	768091
Unit No.	03-17	Related Policy Number	5092439010		

## Insured Object: GBD38993

## Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	12/07/2017 00:00	Basic Information Endorsement	000001286597707	Endorsement Take Effective	updated address

Continue

Cancel



Exit

## Claim Handling

Accident MT/0903347

Policy No.	SD92319951	Vehicle No.	GBD3899J	GST Registration No.	200915138K
Policyholder Name	TOPMAST ENGINEERING PTE LTD	Cover Type	Comprehensive	Policyholder NRIC	0
Product Code	FLEET INSURANCE	Contact No.(Office)	62580325	Loading	0
Contact No.(Mobile)	0	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<input type="text" value="N"/>
KPK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	No
<b>Accident Details</b>					
Report Date	07/05/2018 22:41	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	06/05/2018	Time of Accident (h:mm)	18:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BLK 104 TDA PAYOH LOR 1 OPEN SPACE CARPARK				
<b>Benefits</b>					
<b>Excess</b>					
Own Damage Excess	600.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	No		
Modification History					

## Policyholder Mailing Address

Address 1	15 YISHUN INDUSTRIAL STREET	Address 2	#01-17 WIN 5	Address 3	SINGAPORE 768091
Address 4		Address Type	Singapore address	Post Code	768091
Unit No.	03-17	Related Policy Number	SD92439010		

## Q1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	13/01/1960
Unnamed driver Name	PHUA KONG YANG	Driver NRIC	S14567360	Driving Experience	18
Register Date of Driver License	18/08/1999	Driver Age	38	Contact No.(Home)	0
Contact No.(Mobile)	94843478	Contact No.(Office)	0	Address 3	JADE SPRING @ YISHUN
Address 1	BLK 448	Address 2	YISHUN RING ROAD	Post Code	760448
Address 4	SINGAPORE 760448	Address Type	Singapore address		
Unit No.	10-78			Driver Insurer Company	
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.			

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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## Modification History

Claim 001 New

Claim Type *	CO-MX	Insured Name	TOPMAST ENGINEERING PTE LTD	Insured NRIC	200915138K
Contact No.(Mobile)		Contact No.(Home)	NIL	Contact No.(Office)	
Email Address		OE Vehicle Number	GBD3899J	TP Vehicle Number	GBB793K
Claim Description	GBD3899J / GBB793K ON 6 May 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	07/05/2018 00:00
Date Registered	07/05/2018 22:44	Claim Close Date			
Report taken by	Jackson				
<input checked="" type="checkbox"/> Print AK letter					
Save Submit					

## Attachment

Accident No.	MT/0903347	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	07/05/2018 22:45
Path *			
Browse...	Clear	Category *	Please Select
Browse...	Clear	Confidential	<input type="radio"/> No <input type="radio"/> Yes
Browse...	Clear	Urgency *	Normal
Browse...	Clear	Description *	
Browse...	Clear		
Browse...	Clear		
Browse...	Clear		
Browse...	Clear		
Browse...	Clear		
<input type="checkbox"/> Send Message Upload			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:45	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:45	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:45	SAS	Normal	SAS 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2018 22:44	Photos	Normal	Photos 2018-5-7		<a href="#">Edit</a>
<b>Video List</b>						
Uploaded By/Date	Folder Date	File Name	Source	Action		
		<a href="#">Display in New Window</a>	<a href="#">Scan and uploading</a>			