

NATIONAL Assessment Centre Services

MNA 11806845

Date In: 12/05/2018 12:30	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA / INC 18008699/Y	E-mail (within 8hrs, AP: 2hrs)		
Veh No: SKP 3041 Y	i-Motor Claim Form	m18994059-001	12/05/2018
D.O.A: 11/05/2018 14:45	i-Motor W/O (Within OD: 2hrs, TP: 4hrs)		12:40
GD: (TP) Reporting Only	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: SKP 885R	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 ()	
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

NA1803023	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100), INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 1:	6) TR: Re-inspection \$75		
Cat. 2/3:	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	Q1:		
	*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 (N-n INC) against INC \$20		
	9) N12: Idac Mobile \$10		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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	12/05/2018 11:50
Date Of Accident	11/05/2018 14:45
Exact Location Of Accident	JALAN EUNOS TOWARDS ECP AFTER JALAN ISMAIL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP3041Y
Insured/Policyholder	
Name Of Registered Owner	ALLCAN TRADING TRANSPORT
Co Reg No	53324843D
Email Address	ALLCANTRADING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91077341
Alternative Phone No	OFFICE-91077341

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.6 VTI (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	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5085299622-01
Cover Note Number	

Driver

Name of Driver	MOHAMED ASLAM BIN SARPAR
NRIC No	S1398218E
Date Of Birth	26/10/1959
Occupation	OUTDOOR
Date Of Driving Pass	29/05/1980
Driving Experience	37 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91077341
Fax Number	
Contact Number	OTHERS-91077341
EMail Address	ALLCANTRADING@GMAIL.COM

Address	BLK 617 BEDOK RESERVOIR ROAD #05-1298
Postcode	470617
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	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	SLP8385K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAI OI CHUN
NRIC/Passport Number	
Contact Number	96730597
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	4
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE

SKETCH PLAN

IMPORTANT NOTICE

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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

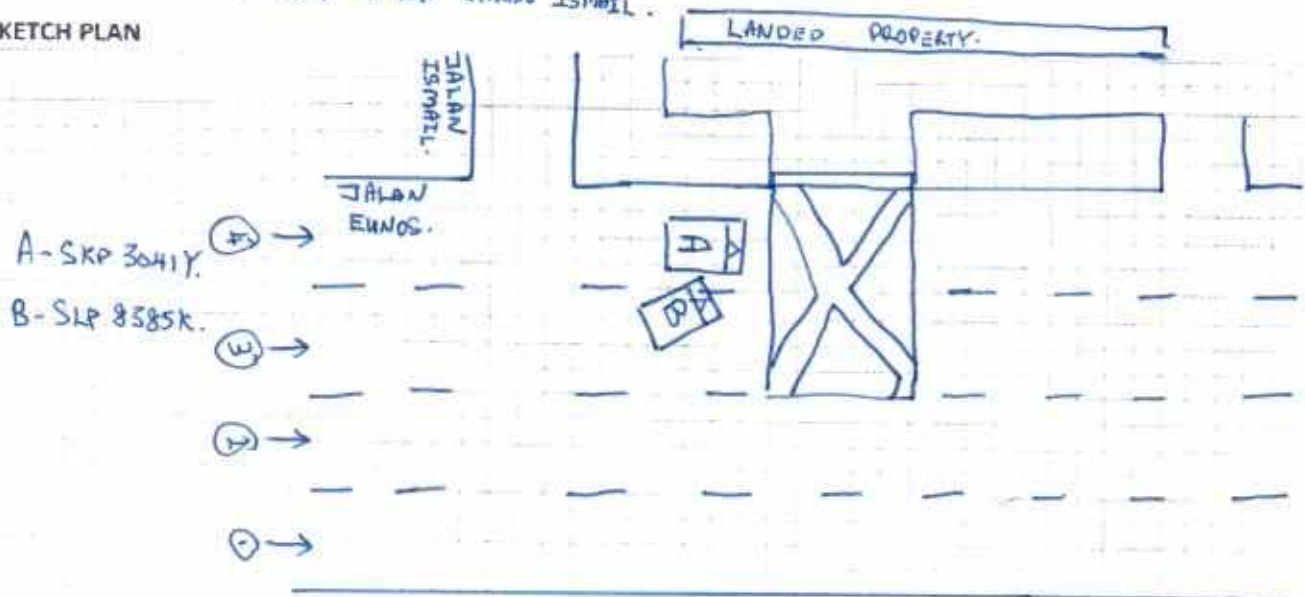
Name:

NRIC/FIN No:

12/05/2018
[Signature]
[Signature]

JALAN EUNOS TOWARDS ECP AFTER JALAN ISMAIL.

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Jalan Eunus towards ECP on the extreme left lane of 4-lanes, carriageway. Somewhere after JALAN Ismail road, Veh(B) from lane 3 on my right suddenly filtered to the left without signaling encroached my path. Veh(B) front left portion collided onto my right portion of my vehicle. Therefore, I alighted and exchanged particulars with veh(B) driver.

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:

Claim Handling

Accident MT/0994059

Policy No.	5065299622-01	Vehicle No.	SKP3041Y	GST Registration No.	
Policyholder Name	ALLCAN TRADING TRANSPORT	Cover Type	Third Party	Policyholder NRIC	53324843D
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	91077341	Special Remark		Contact No.(Home)	
Email Address		TCA	<input type="radio"/> No <input checked="" type="radio"/> Yes	eCode	<input type="text" value="No"/>
KFE	<input type="radio"/> No <input checked="" type="radio"/> Yes	NCD Entitlement(%)	10	eCode Reason	
NCD Protection	No			Private Hire	Yes

▼ Accident Details

Report Date	12/05/2018 12:21	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	11/05/2018	Time of Accident hh:mm	14:45	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JALAN EUNOS TOWARDS ECP AFTER JALAN ISMAIL				

▼ Benefits

▼ Excess

Own damage Excess	0.00	Additional Excess	0.00	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	BLK 517 #05-1298	Address 2	BEDOK RESERVOIR ROAD	Address 3	EUNOS GROVE
Address 4	SINGAPORE 470617	Address Type	Singapore address	Post Code	470617
Unit No.	05-1298	Related Policy Number	5065299622-01		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	26/10/1959
Unnamed driver Name	MUHAMMAD ASLAM BIN SARPAR	Driver NRIC	51309210E	Driving Experience	37
Register Date of Driver License	29/05/1960	Driver Age	58	Contact No.(Home)	
Contact No.(Mobile)	91077341	Contact No.(Office)		Address 3	EUNOS GROVE
Address 1	BLK 517 #05-1298	Address 2	BEDOK RESERVOIR ROAD	Post Code	470617
Address 4	SINGAPORE 470617	Address Type	Foreign address		
Unit No.	05-1298	Driver Vehicle No.	SKP3041Y	Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input checked="" type="radio"/>				

Declaration

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

Claim 001 New

Claim Type *	OD-MX	Insured Name	ALLCAN TRADING TRANSPORT	Insured NRIC	53324843D
Contact No.(Mobile)	91077341	Contact No.(Home)		Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SKP3041Y	TP Vehicle Number	SLP6385K
Claim Description	SKP3041Y / SLP6385K ON 11 May 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	12/05/2018 00:00
Date Registered	12/05/2018 12:38	Claim Close Date			
Report Taken By	ROSLI WAHAB				

Print AX letter

Save Submit

Attachment

Accident No.	MT/0994059	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	12/05/2018 12:40

Path *	Category *	Confidential	Urgency *	Descr
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

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Message Read

Clear Please Select NO Normal

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Clear Please Select NO Normal

561

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:40	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:40	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:40	Photos	Normal	Photos 2018-5-12
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:39	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:39	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:39	Photos	Normal	Photos 2018-5-12
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:39	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	Photos	Normal	Photos 2018-5-12
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	Photos	Normal	Photos 2018-5-12
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	Photos	Normal	Photos 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	SAS	Normal	SAS 2018-5-12
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 12 May 2018 12:38	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-12

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Vehicle No.	SKP 3041Y	Model / Make	HONDA CIVIC
Date of Accident	11/5/18		
Time of Accident	1445	HRS	
Location of Accident	JALAN Eunos towards ECP After JALAN Ismail.		
Exact purpose use during accident	Personal		
Name of Owner	ALLAN TRADING TRANSPORT		
Telephone No.	H/P: 91077341	Home:	Office:
NRIC	53324843D		
Address	APT BLK 617 BEDOK RESERVOIR ROAD #05-1298 S(470617)		
Claim type	OD	<u>THIRD PARTY</u>	REPORTING ONLY
Insurance Company	NTUC.		
Type of Coverage	Comprehensive	<u>Third Party</u>	Third Party / Fire / Theft
Policy No.	5085299622-01		
Name of Driver	As Above If No, MOHAMED ASLAN BIN SARPAH MOHAMED.		
NRIC	S1399218E	Any Passengers: NZL.	
Date of birth	26/10/1959		
Occupation	<u>Outdoor</u>	/	Indoor
Driving License Pass Date	29/05/1980		
Gender	<u>Male</u>	/	Female
Contact No.	H/P: 91077341	Home:	Office:
Address	APT BLK 617 BEDOK RESERVOIR ROAD #05-1298 S(470617)		
Driver have any own vehicle	<u>No</u>	If yes, Reg No.	
Relationship	Employee,	If no, state <u>OWNER</u> .	
Weather condition	<u>Clear</u>	Raining	Other
Road Surface	<u>Dry</u>	Wet	Other
Any Injuries	<u>No</u>	If Yes, Who?	
Name And Contact No.			
Name And Contact No.			
Police Report	<u>No</u>	If Yes, Where?	
Vehicle B No.	SLP 8385K	Any Passengers: 3 (FEMALE).	
Name of Driver	LAI OI HUN	Contact No.: 9673 0597	
Vehicle C No.		Any Passengers:	
Vehicle D No.		Any Passengers:	
Vehicle E no.		Any Passengers:	
Vehicle F No.		Any Passengers:	
Vehicle G No.		Any Passengers:	
Witness Name		Witness Contact:	
Accident Portion	RIGHT PORTION.		
Camera Recorder	Yes / <u>No</u>		
Email Address	ALLCANTRADING@gmail.com.		
HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?			
Yes / <u>No</u>			
PARTICULAR WORKSHOP	NSI AUTOMOTIVE PTE LTD.		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	HUI XIN.		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@nsi.com.sg		

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1399218E**

Name: **MOHAMED ASLAM BIN SARPAR MOHAMED**

Birth Date: **26 Oct 1959**

Issue Date: **26 Dec 2007**

001554865D



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1399218E**

Name: **MOHAMED ASLAM BIN SARPAR MOHAMED**



Race: **PAKISTANI**

Date of birth: **26-10-1959**

Country of birth: **SINGAPORE**

Sex: **M**

1399218E

Land Transport Authority


VOCATIONAL LICENCE

Licence No: **S1399218E**

Name: **MOHAMED ASLAM B S MOHD**

Issue Date: **24/8/2012**

Please visit www.lta.gov.sg to check the status of this vocational licence



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	PASS DATE
Class 2B	Motorcycles < 200 cc	05 Feb 1982
Class 3	Motor Cars < 3000kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg	29 May 1980
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	15 Apr 1982
	Motor vehicles which are not constructed to carry load and the unladen weight < 2500kg	

Licence No: **S1399218E**

HP 428A



4742712

NRIC No: **S1399218E**

Date of issue: **24-06-2011**

APT BLK 617 BEDOK RESERVOIR ROAD #05-1208
SINGAPORE 470617


NRIC No: **S1399218E** Date: **08/03/2013 (R)**




This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701

Type	Description	Issue Date
02	TAXI VI	18/04/1991

0685.2760



THE SCHEDULE

Private Car Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Policyholder named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this insurance is subject to:

1. any Endorsement specified as operative in the Schedule
2. the Conditions and General Exclusions of this Policy, and
3. the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document.

GST Reg No. M4-0003030-8

Policy Number	: 5085299622-01		
The Policyholder	: ALLCAN TRADING TRANSPORT		
	: BLK 617 #05-1298		
	: BEDOK RESERVOIR ROAD		
	: EUNOS GROVE		
	: SINGAPORE 470617		
Period of Insurance	: 02 Jan 2018 To 01 Jan 2019		
Sum Insured	: N/A		
Premium (inclusive GST)	: S\$1,369.74		
Interest Insured			
Cover Type	: Third Party		
Primary Driver	: N/A		
Named Driver (1)	: N/A		
Named Driver (2)	: N/A		
Make/Model	: HONDA/CIVIC	Capacity	: 1600cc
Registration Number	: SKP3041Y	Registration Year	: 2009
Chassis Number	: JHMFD452085200093	Off-peak Car	: No
Repair at Owner's Preferred Workshop	: No	Insure with COE	: N/A
Excess (Section 1)	: N/A	NCD Entitlement	: 10%
Excess (Section 2)	: S\$1,500	NCD Protection	: No
Additional Excess	: N/A		
Unnamed Driver Excess	: N/A		
Hire Purchase Company	: TAI THONG LEE TRADING PTE LTD		

Memo A : 1) The Policy does not cover any driver who is below 22 years old or with less than 2 years driving experience.
2) Section 1 clause 8 on Unnamed driver excess will not apply.

Endorsement Operative : M1

Agency	: S & M ALLIANCE PTE LTD (00000614373)
Date of Issue	: 29 Dec 2017 16:47 hrs

DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors



Chief Executive

The owner and vehicle particulars for Vehicle No. SKP3041Y as at 28 Oct 2016 are as follows:

1.	Name	: ALLCAN TRADING TRANSPORT
2.	Identification No. Type	: Business
3.	Identification No.	: 53324843D
4.	Place Of Passport Issue	: -
5.	Vehicle No.	: SKP3041Y
6.	Previous Vehicle No.	: -
7.	Effective Date of Ownership	: 28 Oct 2016
8.	Original Registration Date	: 02 Jan 2009
9.	First Registration Date	: 02 Jan 2009
10.	Vehicle Type	: N18 - Passenger (Co) Company Car (Single Rate)
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	: -
14.	Attachment 3	: -
15.	Vehicle Make	: HONDA
16.	Vehicle Model	: CIVIC 1.6L VTI 5MT
17.	Year of Manufacture	: 2007
18.	Primary Colour	: Red
19.	Secondary Colour	: -
20.	Passenger Capacity	: 4
21.	Chassis/Trailer Chassis No.	: JHMFD45208S200093 / -
22.	Propellant	: Petrol
23.	Engine No./Motor No.	: R16A13000447 / -
24.	Engine Capacity(cc)/Power Rating(kW)	: 1595 / -
26.	Unladen Weight(kg)	: 1190
27.	Maximum Laden Weight(kg)	: 1640
28.	Open Market Value	: \$17,473.00
29.	PARF Eligibility	: Yes
30.	PARF Eligibility Expiry Date	: 01 Jan 2019
31.	Minimum PARF Benefit	: \$8,736.00
32.	No. of Transfers	: 2
33.	IU Label No.	: 1122662992
34.	COE No.	: 2008120107000261H
35.	COE Expiry Date	: 01 Jan 2019
36.	COE Category	: E - Open Category
37.	Quota Premium/Prevailing Quota Premium	: \$10,455.00 / -
38.	Actual Quota Premium/PQP Paid	: \$10,490.00
39.	Actual ARF Paid	: \$17,473.00
44.	Vehicle Lifespan Expiry Date	: -
45.	Road Tax Amount	: -
46.	Road Tax Start Date	: -
47.	Road Tax End Date	: -
48.	Remarks	: COE rebate, if applicable, will be based on the QP of \$10,455.00. This is the lower of QP from Category E and the corresponding Category A in the same tender exercise. To renew the COE, the Prevailing Quota Premium payable is that of Category A. The PARF eligibility of the vehicle will expire on 01 Jan 2019.

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 : MNA18061845 Vehicle Registration No: SKP 2041Y
Name (as shown in NRIC) MOHAMMED ASLAM BIN SARPAR MOHAMMED NRIC/FIN/Passport No : S1399218E
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : 91077341
Email Address : _____
Date of Accident : 11/05/2018 Time of Accident : 14:45
Place of Accident : JALAN EUNOS TOWARDS ECP AFTER JALAN 18MALL
Insurance Company: MZUC

(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:

DRIVER NAME To MOHAMMED ASLAM BIN SARPAR MOHAMMED

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Koral MATHAS
NRIC/FIN No: _____
Date: 12/05/2018