NATIONAL Assessment Centre Services. (Ref / Invoice) NMA41806387Y

Date In: 16/05/2018 15:12	Job description	Date & Time Completed	Done by
Ref No: NBO/MC1800890314	SAS e-filling		
Veh No: GBG 1193 J	E-mail (within 4hrs, AIO 3hrs)		
D.O.A: 14/05/2018 15:00	I-Motor Claim Form	MM1/0994059-001	17/05/2018 11:36
OD / (TP) Reporting Only	I-Motor W/O (within 00 3hrs, TP 1hrs)		
	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: YM 9994Y. INC ( ) / Non-INC ( )

Owner / Driver: (Tel:)

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

Confirmed by : (Date: Time:)

Insured/Driver Liability: (%) (Note: Bil. Slant (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 (sale) of (repeller)

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

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

Remarks (Hotline: 6788 0016)	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

NAI803104

Claimant Particulars

Driver/Owner:

Contact No:

Damaged Portion:

C. Checked by (Engr-In-Charge):

Invoice Preparation Checklist

1) AR : Accident Reporting ($30)

2) DA : Damage Assessment ($100) INC (A9)

3) TP : Towing Fee

4) FT : Follow Through Survey

5) FT : Follow Through Survey (Resurvey)

For claims ... INC Only ...

6) TR : Re-Inspection

7) NI : ... DA + SMART Survey

8) NTUC Additional Survey (...)

Others

NI: Courtesy Car / Tpt Allowance

NI: Repair Co-ordination

NI: Post Repair Inspection

NI: DY / Collect/Deliver Co-ordination

TP (NI) TP (Non INC) ...

9) NI : Idle Mobile

Invoice dated

Net Charge

Additional Comments

[1]

[2/2]

MNA418063674 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 16/05/2018 15:12
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 16/05/2018 16:01

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	16/05/2018 15:12
Date Of Accident	14/05/2018 15:00
Exact Location Of Accident	KJE TOWARDS JURONG NEAR LAMP POST 199
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBG1193J
Insured/Policyholder	
Name Of Registered Owner	LABEL-LINE CORPORATION PTE LTD
Co Reg No	199205360M
Email Address	SIMON@LABEL-LINE.COM.SG
Mobile Phone No	(LOCAL) +65-86086560
Alternative Phone No	OFFICE-62954321
Vehicle Particulars	
Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	NO
Policy Number	5091498828
Cover Note Number	
Driver	
Name of Driver	NAI HAI KIAT DANNY(LAI HAIJI DANNY)
NRIC No	S7521030B
Date Of Birth	17/07/1975
Occupation	OUTDOOR
Date Of Driving Pass	26/05/2008
Driving Experience	9 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86086560
Fax Number	
Contact Number	OFFICE-62954321
EMail Address	SIMON@LABEL-LINE.COM.SG

Address	BLK 485B CHOA CHU KANG AVENUE 5 #07-114
Postcode	682485
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
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	YM9784Y
Vehicle Make/Model/Colour	TRUCK
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YIP EE UNG
NRIC/Passport Number	F0371976Q
Contact Number	92391709
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBB7673C

Vehicle Make/Model/Colour	VAN
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	WU YIJUN
NRIC/Passport Number	
Contact Number	92480395
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	YN8553Z
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
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.**
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.

LABELLUXE CORPORATION PTE LTD

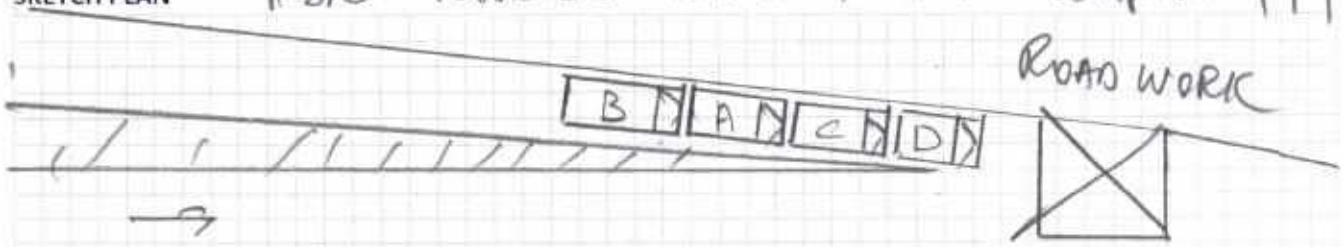
16/05/2018

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 KJE TOWARDS JURONG NEAR COMPORT 199



A) GBG 1193J
B) YM 9784Y
C) GBB 7673C
D) YN 8553Z

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 14/05/2018 AT ABOUT 15:00 I WAS AT CHUA CHU KANG WAY & WANTED TO GO TO JURONG AT THE SLIP ROAD DOWN TO KJE INFRONT I SEE A ROAD WORK. THE FRONT VEHICLE STOP & I WAS AT NUMBER 3 VEHICLE AND WE ARE ALL STATIONARY. SUDDENLY I FELT A HUGE BANG & MY LORRY MOVE FORWARD & HIT THE VEHICLE C & VEHICLE C HIT VEHICLE D. BUT VEHICLE D MOVE FROM THE SCENE. WE EXCHANGE PARTICULARS. BUT WE CANNOT GET THE PARTICULARS OF VEHICLE 'D' THAT ALL.

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:

16/05/2018

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

Claim Handling

Exit

Accident MT/0994659

Policy No.	5091498828	Vehicle No.	GBG1193J	GST Registration No.	M201103282
Policyholder Name	LABEL-LINE CORPORATION PTE LTD			Policyholder NRIC	199205360M
Product Code	COMMERCIAL VEHICLE INSURAI	Cover Type	Preferred Workshop Plan	Loading	0
Contact No.(Mobile)	86086560	Contact No.(Office)	62954321	Contact No.(Home)	
Email Address		Special Remark		eCode	No
eTA	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	15	Private Hire	No

Accident Details

Report Date	17/05/2018 11:27	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	14/05/2018	Time of Accident hh:mm	15:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	KJE TOWARDS JURONG NEAR LAMP POST 199				

Benefits

Excess

Own damage Excess	600.00	Additional Excess		Windscreen Excess	100.00
Uninsured Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	Yes	GST Registration Date	01/01/2015
GST Registration No.	M201103282	GST Status Verified	No
Modification History			

Policyholder Mailing Address

Address 1	30 KALLANG PLACE	Address 2	#05-12/14/15	Address 3	SINGAPORE 339159
Address 4		Address Type	Singapore address	Post Code	339159
Unit No.		Related Policy Number	5091498828		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	NAI HAI KIAT DANNY(LAI HAII	Driver NRIC	S7521030B	Driver DOB	17/07/1975
Register Date of Driver License	26/03/2008	Driver Age	42	Driving Experience	9
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 485B #07-114	Address 2	CHOA CHU KANG AVENUE 5	Address 3	SINGAPORE 682485
Address 4		Address Type	Foreign address	Post Code	682485
Unit No.	07-114				
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	GBG1193J	Driver Insurer Company	NTUC

Declaration

Breathaliser or Blood Test Reading?	0 mg	Any Injury?	Yes No

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	LABEL-LINE CORPORATION PTE	Insured NRIC	199205360M
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	62954321
Email Address		OI Vehicle Number	GBG1193J	TP Vehicle Number	YM5794Y
Claim Description	GBG1193J / YM5794Y ON 14 May 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	17/05/2018 11:31	Claim Close Date		Date Received	17/05/2018 00:00
Report Taken By	ABDUL WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/0994659	Claim No.	001
Last Doc. Received	Yes No	Upload Date	17/05/2018 11:36

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 (B UKIT MERAH)) on 17 May 2018 11:36	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-17		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 17 May 2018 11:36	SAS	Normal	SAS 2018-5-17		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 17 May 2018 11:36	Photos	Normal	Photos 2018-5-17		Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:35	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:35	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:35	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:35	Photos	Normal	Photos 2018-5-17	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:35	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:33	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:33	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:33	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:33	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:33	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:33	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:32	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:32	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:32	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:32	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:32	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:32	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:31	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:31	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:31	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:31	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:31	Photos	Normal	Photos 2018-5-17	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 17 May 2018 11:31	Photos	Normal	Photos 2018-5-17	Edit

Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: (14/05/2018) (DD/MM/YYYY), TIME: (15:00) (HH:MM)

LOCATION: KJE TOWARDS JURONG NEAR LAMPOST 199

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: GBG 1193J
   b) INSURANCE COMPANY: NTUC
   c) POLICY NUMBER: 5091498428
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: NISSAN CABSTAR
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: WORKING
   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: LABEL-LINE CORPORATION PTE LTD (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: # 199205360M CONTACT: 62954321
   c) ADDRESS:

   * CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No of passenger (including driver) (__)

3. DRIVER
   a) NAME: MAI HAI KIAT DANNY (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: CONTACT: 86086560
   c) ADDRESS:

   *d) DATE OF BIRTH: (17/07/1978) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS 28/05/2008

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: YM 9284Y MODEL: TRUCK
   b) DRIVER'S NAME: YIP EE YING
   c) NRIC/FIN/PASSPORT: F0371976Q CONTACT: 92591209

No of passenger (including driver) (__)

9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: GBB 7673C MODEL: VAN.
   e) DRIVER'S NAME: WU YISUN
   f) NRIC/FIN/PASSPORT: CONTACT: 92480395

10) YN 8553Z ~~VAN~~ LORRY

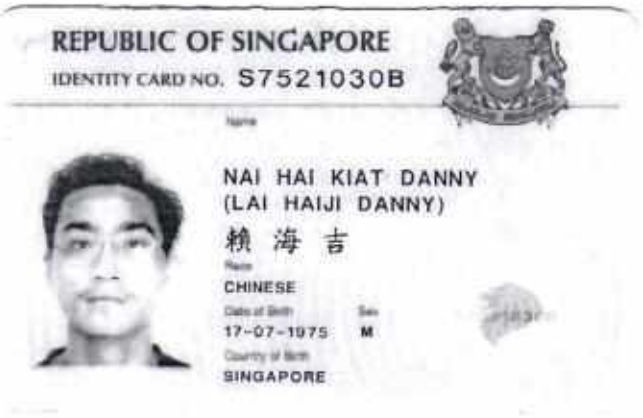
email = haikiatdannynai@gmail.com

fax =

simon@label-line.com.sg.

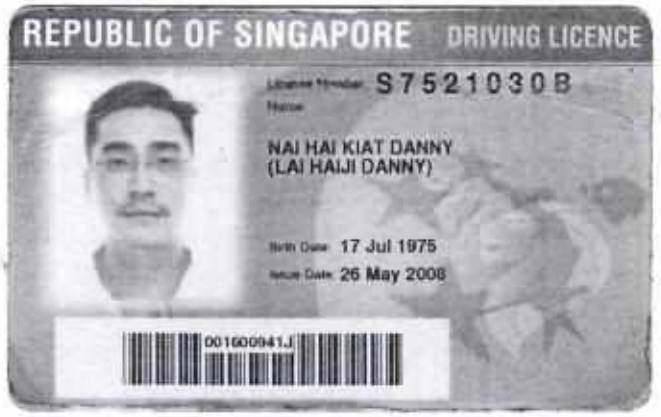
(Mr. Simon Ong)

INFORM INFO@TLSAUTO.COM.SG



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7521030B

NAI HAI KIAT DANNY
(LAI HAIJI DANNY)
賴 海 吉
Race
CHINESE
Date of Birth
17-07-1975
Sex
M
Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S7521030B
Name
NAI HAI KIAT DANNY
(LAI HAIJI DANNY)
Birth Date 17 Jul 1975
Issue Date 26 May 2008
001600941J

2955584
NRIC No S7521030B
Blood Group
B+
Date of issue
22-04-1997
APT BLK 485B CHOA CHU KANG AVENUE 5 #07-114
SINGAPORE 682485
NRIC No: S7521030B Date: 31/12/2009 No: 8406101

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)
PASS DATE
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg
Licence No: S7521030B
NP 428A

eBaoTech GeneralClaim

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

My Desktop
Notice of Loss

Policy Query

Policy No.
Vehicle No.(For Motor) GBG1193J
Date of Accident 14/05/2018 17:08

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5091498828	LABEL-LINE CORPORATION PTE LTD	199205360M	GCV	Preferred Workshop Plan	GBG1193J	GBG1193J	31/05/2017	30/05/2018

Continue