

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

MAH8068662

Date In	26/08/2018 15:52	Job description	Date & Time Completed	Done by
Ref No	NA/INC18009595/Y	SAS e-filing		
Veh No	SJT 5709 K	E-mail (within 8hrs, AIC 2hrs)		
D.O.A	25/05/2018 18:20	i-Motor Claim Form	ml/0996032-001	26/05/2018 17:03
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: SJH 22034	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

NA1803326	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill
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) NI: 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		

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	26/05/2018 15:52
Date Of Accident	25/05/2018 18:20
Exact Location Of Accident	AYE TOWARDS TUAS NEAR CLEMENTI ROAD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ5709K
Insured/Policyholder	
Name Of Registered Owner	TAN JIN LIENG ALVIN
NRIC No	S7804343A
Email Address	ALVIN.TAN.JL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81114366
Alternative Phone No	OTHERS-81114366

Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095352225
Cover Note Number	

Driver

Name of Driver	TAN JIN LIENG ALVIN
NRIC No	S7804343A
Date Of Birth	09/02/1978
Occupation	INDOOR
Date Of Driving Pass	08/05/1999
Driving Experience	19 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81114366
Fax Number	
Contact Number	OTHERS-81114366
Email Address	ALVIN.TAN.JL@GMAIL.COM

Address	BLK 339D KANG CHING ROAD #19-364
Postcode	614339
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	CHAIN COLLISION
Weather Conditions	CLOUDY
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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: : TAN YONG ZHI ,ALVIS (CHEN YONGZHI) GENDER: : MALE
Passenger 2	NAME: : TAN JIA ZHI ,ALSON (CHEN JIAZHI) GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG NPP
Police Station Address	ROAD: 158 YUNG LOH ROAD #01-58 , POSTCODE: 610158 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180526/2064

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJH2203H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN BEE PHENG

NRIC/Passport Number	S6935900J
Contact Number	90015583
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	3
Passenger 1	NAME: : GENDER: :
Passenger 2	NAME: : GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLS7603Y
Vehicle Make/Model/Colour	TOYOTA PRIUS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NEO KIAN KIONG
NRIC/Passport Number	S7033416Z
Contact Number	85223408
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	TAN JIN LIENG ALVIN
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SJJ5709K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	TAN JIA ZHI ,ALSON (CHEN JIAZHI)
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SJJ5709K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 3

Name	TAN YONG ZHI ,ALVIS (CHEN YONGZHI)
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SJJ5709K

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.

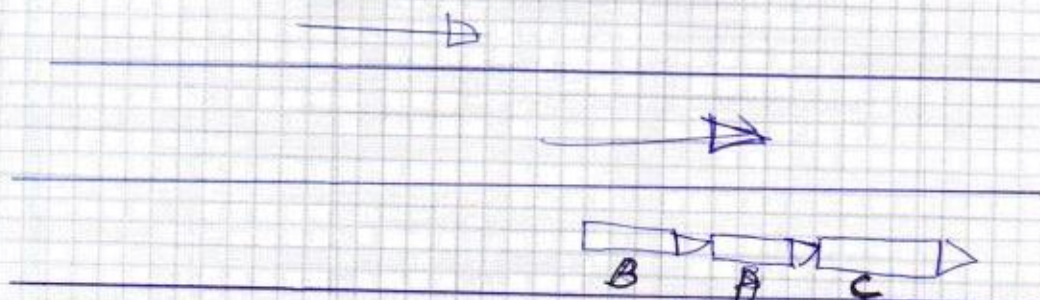

Policyholder's Signature
Date & Time: 26/5/17

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


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

SKETCH PLAN

B SJH 2203H
H 8JJ5709K
C SLS 7603Y A4E towards Thas - Near Clementi Road Exit



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police Report.

I have in car video cam front & Rear
to support / proof my car was hit from the
rear and jerk forward & and hit the car
ahead.

DECLARATION

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

Policyholder's Signature

Date & Time: 26 May 18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

26/05/2018
[Signature]
[Signature]



SINGAPORE POLICE FORCE



T/20180526/2064

Police Station Of Origin:
Jurong NPP
158 Yung Loh Road #01-58 SINGAPORE
610158
Tel No: 1800-2659999

1 of 4
Report No. T/20180526/2064

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/05/2018 13:10	Vide Report No.:	Station Diary No.: 15
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Informant's Particulars

Name of Informant: TAN JIN LIENG, ALVIN			Address: APT BLK 339D KANG CHING ROAD #19-364 SINGAPORE 614339		
ID Type / ID No.: NRIC NO / S7804343A			Contact No.: Home/Office: Mobile: 81114366		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 40	Date of Birth: 09/02/1978	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SENIOR MANAGER			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/05/2018 18:20	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY before Clementi Road exit				
Weather: Cloudy		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJH2203H	Car	HYUNDAI		Black	Seriously Damaged	2
SJJ5709K	Car	TOYOTA	ESTIMA AERAS 2.4 A	Black	Slightly Damaged	2
SLS7603Y	Car	TOYOTA	PRIUS	Silver	No Damage	0



SINGAPORE POLICE FORCE



T/20180526/2064

Police Station Of Origin:
Jurong NPP
158 Yung Loh Road #01-58 SINGAPORE
610158
Tel No: 1800-2659999

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Report No. T/20180526/2064

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SJJ5709K	NTUC Income Insurance Co-Operative Limited	5095352225	28/10/2017	17/09/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	TAN BEE PHENG		ID No.	S6935900J
Related Vehicle	SJH2203H (Car)		Contact No.	90015583
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Driver				
Name	TAN JIN LIENG, ALVIN		ID No.	S7804343A
Related Vehicle	SJJ5709K (Car)		Contact No.	81114366
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL		Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	25/05/2018		Date Discharge	25/05/2018
No. of Days granted Medical Leave	04		Degree of Injury	Slight

Driver				
Name	NEO KIAN KIONG		ID No.	S7033416Z
Related Vehicle	SLS7603Y (Car)		Contact No.	85223408
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL



**SINGAPORE
POLICE FORCE**



T/20180526/2064

4 of 4

Report No. T/20180526/2064

Police Station Of Origin:
Jurong NPP
158 Yung Loh Road #01-58 SINGAPORE
610158
Tel No: 1800-2659999

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:
J /
Staff Sgt MOHAMMED AMIRULHAFIZ BIN
RAMLAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SSI KASMAWATI BTE SAMIAN
Contact No.: 65476179

SN 124

Authentication Stamp
NP168

Signature :

Singapore Police Force

Signature Of Informant:

Date/Time:
26/05/2018 13:10

Classification Of Case:

Claim Handling

Accident MT/0996032

Policy No.	5095352225	Vehicle No.	SJJ5709K	GST Registration No.	
Policyholder Name	TAN JIN LIENG ALVIN			Policyholder NRIC	S7804343A
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	81114366	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

▼ Accident Details

Report Date	26/05/2018 16:59	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	25/05/2018	Time of Accident hh:mm	18:20	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	AYE TOWARDS TUAS NEAR CLEMENTI ROAD EXIT				

▼ Benefits

▼ Excess

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

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	BLK 339D #19-364	Address 2	KANG CHING ROAD	Address 3	SINGAPORE 614339
Address 4		Address Type	Singapore address	Post Code	614339
Unit No.	19-364	Related Policy Number	5095352225		

▼ OI Driver Info

Driver Name	TAN JIN LIENG, ALVIN	Driver Type	Main Driver	Driver DOB	09/02/1978
Unnamed driver Name		Driver NRIC	S7804343A	Driving Experience	19
Register Date of Driver License	08/05/1999	Driver Age	40	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	SINGAPORE 614339
Address 1	BLK 339D #19-364	Address 2	KANG CHING ROAD	Post Code	614339
Address 4		Address Type	Singapore address		
Unit No.	19-364				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.	SJJ5709K	Driver Insurer Company	NTUC

Declaration

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

Claim 001

New

Claim Type *	OD-MX	Insured Name	TAN JIN LIENG ALVIN	Insured NRIC	S7804343A
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SJJ5709K	TP Vehicle Number	SJH2203H
Claim Description	SJJ5709K / SJH2203H ON 25 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	26/05/2018 17:01	Claim Close Date		Date Received	26/05/2018 00:00
Report Taken By	ROSLI WAHAB				

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/0996032	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	26/05/2018 17:03

Path *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Category *

Confidential

Urgency *

Descr

Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	

SINGAPORE ACCIDENT STATEMENT

ACCIDENT STATEMENT

Date Of Accident * 25 May 18 Time 18:30 Hrs
 Exact Location Of Accident * AVE towards Tuas - Near Clementi Road Exit.

DETAILS OF OWN VEHICLE (VEHICLE A)

Vehicle Registration Number * SJJ 5709 K
 Insured Policyholder:
 Name of Registered Owner * Tan Jin Liang, Alvin.
 NRIC/FIN/Passport Number * S7804348A.
 Vehicle Particulars:
 Manufacturer Toyota Estima
 Model
 Exact Purpose for which vehicle was being used at time of accident
 * Private use ☒ Commercial use ☐ Hire & reward ☐
 Others ☐ - please specify
 Are you claiming under your own insurance policy for repair to your vehicle?
 * Yes ☐ No ☒ Others ☐
 If No, please state action to be taken
 * Third Party Claim ☒ Reporting Only ☐
 Vehicle Category
 * Private ☒ Commercial ☐ Motorcycle ☐

Insurance Company:
 Name of Insurance Company * NTUC
 Type of Coverage
 Fleet Policy Yes ☐ No ☐
 Policy Number * 509535225
 Cover Note Number

Driver:
 Name of Driver * Tan Jin Liang, Alvin
 NRIC/FIN/Passport Number * S7804348A
 Date of Birth * 09 02 1978
 Occupation * Manager
 Date of Driving Pass * 08 May 1999.
 Gender * Male ☒ Female ☐
 Mobile Number * 9119366
 Address * Blk 329D, Kang Ching Road #19-364
 Email Address * Plindano JL@ig mail.com.

Was driver an employee of the Insured's Company?
 * Yes ☐ No ☒
 If no, Relationship of the Driver with the insured
 * Owner.

Vehicle Registration Number of Driver's Own Vehicle (if applicable)		
Insurance Company of Driver's Own Vehicle (if applicable)		
General Information of the Accident		
Type of Accident	* <u>Chain Collision</u>	
Weather Conditions	* Clear <input type="checkbox"/> Raining <input type="checkbox"/> Others <u>Cloudy</u>	
Road Surface	* Dry <input type="checkbox"/> Wet <input checked="" type="checkbox"/> Others <input type="checkbox"/>	
Other Information		
Was any body injured in the Accident?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Was any other material or property damaged?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Details of Injured Persons		
Name	* <u>Tan Jin Lieng, Alvin</u>	
Address	<u>Blk 339D, Kang Ching Road, #19-364</u>	
Approximate Age	* <u>40</u>	
Injuries Sustained	*	
If vehicle Occupants, state in which vehicle?		
Were seat belts worn?	* Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Was injured conveyed to hospital by ambulance?	* Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Details of Police Action		
Was the Accident reported to the Police?	* Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
If Yes, please state which Police Station	<u>Jurong NPP</u>	
Was notice of intended Prosecution given?	* Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, against whom?		
DETAILS OF OTHER VEHICLE(S) / PROPERTIES (VEHICLE B)		
Vehicle Registration Number	* <u>SJH 2203 FH</u>	
Vehicle Make / Model / Colour	<u>Hyundai</u>	
Detail Of Properties		
Name of Driver	* <u>Tan Bee Pheng</u>	
NRIC/Passport Number	<u>S6935900J</u>	
Contact Number	* <u>90015583</u>	
Email Address		
Address		
Insurance Company Name		
Nature of Damage		
Details of Witness		
Name		
Phone Number		
Email Address		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7804343A



Name

TAN JIN LIENG, ALVIN
(CHEN JUNLIN)

陳君麟

Race

CHINESE

Date of birth

09-02-1978

Sex

M

Country/Place of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LIC



Identity Card No. S7804343A

TAN JIN LIENG, ALVIN
(CHEN JUNLIN, ALVIN)

Birth Date: 09 Feb 1978

Issue Date: 12 Mar 2004



5485616



NRIC No. S7804343A



Date of issue

17-06-2015

Address

APT BLK 339D KANG CHING ROAD
#19-364
SINGAPORE 614339

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

Class 2B	Motorcycles not exceeding 200 cc
Class 2A	Motorcycles between 201 cc and 400 cc
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

27 Aug 1997
10 Nov 1998
08 May 1999

NP 426A



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: 5095352225

Cover : drivo CLASSIC

- | | |
|---|-----------------------|
| 1. Index mark and Registration Number of Vehicle | : SJ5709K |
| Chassis Number | : ACR507069293 |
| 2. Name of Policyholder | : TAN JIN LIENG ALVIN |
| 3. Effective Date of Insurance | : 28 Oct 2017 |
| 4. Expiry Date of Insurance | : 17 Sep 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.

This Policy does not cover

- (a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.
(d) Use for any purpose in connection with the Motor Trade.

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
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TAN JIN LIENG, ALVIN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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 : DICKSON AUTO AGENCY (00000614645)

Date of Issue : 26 Oct 2017 16:38 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company Cert No. :	S7804343A
Owner ID Type :	Singapore NRIC
Owner Name :	TAN JIN LIENG, ALVIN
Registered Address :	APT BLK 339D KANG CHING ROAD #19-364 SINGAPORE 614339
Mailing Address :	-
Birth Date :	09 Feb 1978

Vehicle Particulars

Vehicle No. :	SJJ5709K
Previous Vehicle No. :	-
Effective Date of Ownership :	31 Oct 2017
Original Regn Date :	18 Sep 2008
Registration Date :	18 Sep 2008
Year of Manufacture :	2008
Vehicle Type :	Passenger Station Wagon/Jeep/Land Rover
Vehicle Scheme :	-
Vehicle Attachment 1 :	No Attachment
Vehicle Attachment 2 :	-
Vehicle Attachment 3 :	-
Vehicle Make :	TOYOTA
Vehicle Model :	ESTIMA AERAS 2.4 A
Primary Colour :	Black
Secondary Colour :	-
Passenger Capacity :	6
Chassis No. :	ACR507069293
Engine No. :	2AZF189427
Engine Capacity / Power Rating :	2362 cc / -
Maximum Power Output :	125.0 kW (167 bhp)
Propellant :	Petrol
Max Unladen Weight :	1750 kg
Maximum Laden Weight :	2135 kg
Open Market Value :	\$26,946.00
PARF Eligibility :	Yes
PARF Eligibility Expiry Date :	17 Sep 2018
Minimum PARF Benefit :	\$8,764.00
No. of Transfers :	3
IU Label No. :	1127739829
COE No. :	2008100103000977K
COE Expiry Date :	17 Sep 2018
COE Category :	B - Car (1601cc & above)
COE Registration Category :	B - Car (1601cc & above)
Quota Premium (QP) / Prevailing Quota Premium :	\$13,389.00 / -
Actual QP Paid :	\$13,389.00
QP (Regn Cat) :	\$13,389.00
OPC Cash Rebate Eligibility :	No
QP during COE Bidding Exercise :	\$13,389.00
Additional Registration Fee Rate :	100.00 %
Actual ARF Paid :	\$17,529.00
Vehicle Lifespan Expiry Date :	No Lifespan
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-
Message :	To renew the COE, the Prevailing Quota Premium payable is that of Category B.

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