

NATIONAL Assessment Centre Services

(ref: 1 Jan 2005)

MNA418073926

Date In: 07/06/2018 12:28	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: N/A/MC/07036814	E-mail (within 8hrs, AIC 2hrs)		
Veh No: VP 1045T	i-Motor Claim Form	M/10997660-001	07/06/2018
D.O.A: 05/06/2018 17:00	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		13:00
OD TP: <u>Reporting Only</u>	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: SCJ3339R	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

<p>N/A/1803616</p> <p>Claimant's Particulars :-</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments :-</p> <p>Cat. 1:</p> <p>Cat. 2 / 3:</p>	<p>Invoice Preparation Checklist</p> <p>1) AR: Accident Reporting (\$30);</p> <p>2) DA: Damage Assessment (\$100); INC (\$80)</p> <p>3) TF: Towing Fee \$40/\$45</p> <p>4) FT: Follow-Through Survey \$120</p> <p>5) FT: Follow-Through Survey (Resurvey) \$30</p> <p>For claiming against INC Only (wef 10 Jan 2005)</p> <p>6) TR: Re-inspection \$75</p> <p>7) N1: Idac DA + SMRT Survey \$160</p> <p>8) NTUC Additional Services:-</p> <p>OD:</p> <p>*N5: Courtesy Car / Tpt Allowance \$5</p> <p>*N6: Repair Co-ordination \$10</p> <p>*N7: Post Repair Inspection \$25</p> <p>*N8: DV / Collect Excess Coordination \$5</p> <p>TP (N11): TP (Non INC) against INC \$20</p> <p>9) N12: Idac Mobile \$10</p>	<p>Amt (\$) 1st Bill</p> <p>Amt (\$) Add Bill</p>

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	07/06/2018 12:28
Date Of Accident	05/06/2018 17:00
Exact Location Of Accident	BLK 30 DEFU LANE OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP1085T
Insured/Policyholder	
Name Of Registered Owner	SOON SOON HENG RECYCLING & TRADING
Co Reg No	53136391X
Email Address	RECYCLE@SSHRT.COM
Mobile Phone No	(LOCAL) +65-82330229
Alternative Phone No	OFFICE-82330229

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO
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	REPORTING ONLY
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	5098555728
Cover Note Number	

Driver

Name of Driver	LEE WEI JUN
NRIC No	S9050446J
Date Of Birth	27/12/1990
Occupation	OUTDOOR
Date Of Driving Pass	10/09/2009
Driving Experience	8 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82330229
Fax Number	
Contact Number	OTHERS-82330229
Email Address	RECYCLE@SSHRT.COM

Address	BLK 255 PASIR RIS STREET 21 #05-265
Postcode	510255
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	COLLIDED INTO PARKED VEHICLE
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	SCJ3339R
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN ENG KIAT
NRIC/Passport Number	S11457811
Contact Number	97698838
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.
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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**.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

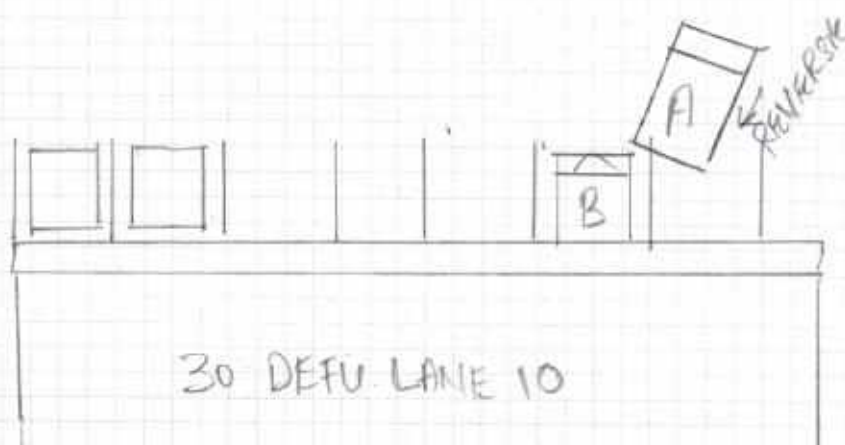
Name:

NRIC/FIN No.:

07/06/2018

Robi Luthans

07/06/2018
11:07am



A) YP1085T
B) SCJ3339R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was reversing and did NOT estimate the distance properly hence my back light scratched onto the bonnet of the mercedes. I waited for the driver to come back but to no avail hence I left a note to contact me also because no one in the vicinity knows who the owner of the car was. Karen called me thereafter and then decided to have it fix at my workshop however yesterday 5 June 2018, they decided to claim insurance hence I am making this report now. They decided not to settle privately as they claim that there may be color loss after time after spraying and would like to change the whole bonnet.

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: Rafael
NRIC/FIN No: 9201 1234 5678

BIZ CHECK PLUS

SOON SOON HENG RECYCLING & TRADING
53136391X

SINGAPORE
COMMERCIAL
CREDIT BUREAU

REQUEST DATE	REQUEST NO.	CLIENT'S A/C REF.	REMARKS
06/06/2018 17:01:13	ONL180518845		

**ACCOUNTING AND CORPORATE REGULATORY
AUTHORITY BUSINESS PROFILE INFORMATION**

ACRA
ACCOUNTING AND CORPORATE
REGULATORY AUTHORITY

REGISTRY

REGISTRATION DATE	24/02/2009
NAME EFFECTIVE DATE	24/02/2009
COMPANY TYPE / CONSTITUTION	SOLE PROPRIETOR
REGISTERED ADDRESS	259 ONAN ROAD, #--- 424651 SINGAPORE
CHANGE ADDRESS DATE	22/09/2016
COMPANY STATUS	LIVE
STATUS EFFECTIVE DATE	31/01/2018
REGISTERED ACTIVITIES	1. 46651 - WHOLESALE OF SCRAP, JUNK AND WASTE DEALERS (-) 2. 49232 - MOVING SERVICES (EG DELIVERY SERVICES, BAGGAGE TRANSFER SERVICES, FURNITURE MOVING SERVICES) (-)
EXPIRY DATE	24/02/2019
RENEWAL DATE	26/01/2018

CHANGE OF BUSINESS NAME

PREVIOUS NAME	EFFECTIVE DATE
Nil	

OFFICER(S)/ OWNER(S)

OFFICER NAME/ ADDRESS/ CHANGE ADDRESS DATE	IDENTITY NO. / PA REG. NO.	POSITION	APPOINTMENT DATE	CESSATION DATE	NATIONALITY/ COUNTRY OF INCORPORATION
LEE WEI JUN 255 PASIR RIS STREET 21,05-265, - 510255, SINGAPORE	S9050446J	OWNER	10/05/2018	-	SINGAPORE CITIZEN

OFFICER NAME/ ADDRESS/ CHANGE ADDRESS DATE	IDENTITY NO. / PA REG. NO.	POSITION	APPOINTMENT DATE	CESSATION DATE	NATIONALITY/ COUNTRY OF INCORPORATION
14/04/2014					
LEE CHEE WEI 1 JALAN BUKIT MERAH, 12-4518, 150001, SINGAPORE	S1657571B	OWNER	24/02/2009	10/05/2018	SINGAPORE CITIZEN

EMPLOYEE SIZE

ELEMENTS	AMOUNT
Employee size	N/A

(Information is as available in D&B Singapore database. Whilst every effort has been made to ensure that the information is complete, correct & up-to-date, D&B Singapore shall not be liable for any damage or loss that may be caused as a result of any error, omission or reliance on the information.)

SALES REVENUE AMOUNT

ELEMENTS	YEAR	AMOUNT
Nil		

(The above XBRL data is obtained from ACRA.)

LITIGATION

Case No.	Date of Writ	Status / Status Date	Nature of Claim Amount	Defendant Status Def. Status Date Def. Solicitor Def. Solicitor ID Def. Law Firm Def. File Ref.	Plaintiff Status Plaintiff Status Date Plaintiff ID Plaintiff Pla. Solicitor Pla. Solicitor ID Pla. Law Firm Pla. File Ref.
NO RECORD FOUND					

* The writ filed does not indicate latest status of action. Please purchase Latest Detailed Litigation report to obtain its complete status.

(Litigation information is provided to D&B Singapore by a third party and may or may not reflect the status and details as at the time of original filing. As such, D&B Singapore is unable to guarantee it is complete, correct or up-to-date and shall not be liable for any damage or loss that may be caused as a result of any error, omission or reliance on the information.)

WINDING UP

CASE NO. / CASE TYPE	ACTION DATE	ACT OF WINDING UP	HEARING DATE	AMOUNT	PLAINTIFF PLA. SOLICITOR PLA. SOLICITOR ID PLA. LAW FIRM PLA. FILE REF.
NO RECORD FOUND					

(Winding up information is provided to D&B Singapore by a third party and may or may not reflect the status and details as at the time of original filing. As such, D&B Singapore is unable to guarantee it is complete, correct or up-to-date and shall not be liable for any damage or loss that may be caused as a result of any error, omission or reliance on the information.)

SEARCH BY FINANCIAL SECTORS

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018	1	0	0	0	1	0	0	0	0	0	0	0

SEARCH BY NON-FINANCIAL SECTORS

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018	0	0	0	0	0	0	0	0	0	0	0	0
2017	0	0	0	0	0	0	0	0	0	0	0	0
2016	0	0	0	0	0	0	0	0	0	0	0	0

DISCLAIMER THIS REPORT MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM OR MANNER WHATSOEVER.

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Claim Handling

Edit

Accident NT/0997660

Policy No.	509555728	Vehicle No.	YP1085T	GST Registration No.	
Policyholder Name	SOON SOON HENG RECYCLING & TRADING			Policyholder NRIC	S3136791X
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	82330228	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No *
KPK	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

▼ Accident Details

Report Date	07/06/2018 12:53	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Parked Vehicle
Date of Accident	05/06/2018	Time of Accident (hours)	17:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BLK 30 DEPU LANE OPEN CARPARK				

▼ Benefits

▼ Excess

Own damage Excess	000.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	BLK 1 #12-451B	Address 2	JALAN BUKIT PERAH	Address 3	SINGAPORE 150001
Address 4		Address Type	Singapore address	Post Code	150001
Unit No.	12-451B	Related Policy Number	509555728		

▼ DT Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	LEE WEI JUN	Driver NRIC	S00504461	Driver DOB	27/12/1990
Register Date of Driver License	10/04/2008	Driver Age	27	Driving Experience	8
Contact No.(Mobile)	82330228	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 225 #05-265	Address 2	PASIR RIS STREET 23	Address 3	SINGAPORE 110225
Address 4		Address Type	Foreign address	Post Code	510225
Unit No.	05-265				
Does he own a Singapore Registered car?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Driver Vehicle No.	YP1085T	Driver Insurer Company	NTUC

Declaration:			
Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Modification History

Claim 001

New

Claim Type *	OD-NK	Insured Name	SOON SOON HENG RECYCLING	Insured NRIC	S3136791X
Contact No.(Mobile)	93624725	Contact No.(Home)		Contact No.(Office)	62721294
Email Address		OT Vehicle Number	YP1085T	TP Vehicle Number	SC233388
Claims Description	YP1085T / SC233388 ON 5 Jun 2018	Name of Preferred Workshop			
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	07/06/2018 13:00	Claim Close Date		Date Received	07/06/2018 00:00
Report Taken By	ROSLI WAHAB				

☒ Print AK letter

Save Submit

Attachment

Accident No.	NT/0997660	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	07/06/2018 13:00
Path *		Category *	Confidential
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Message Read		Clear	Please Select

Send Message Upload

▼ Attachment List

Attachment	uploaded By/Date	Category	Urgency	Description	Msg Sent? Author (COI)
	NAC_BUKIT_MERAH_800678(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800678(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800678(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	Photos	Normal	Photos 2018-6-7	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-7	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 07 Jun 2018 13:00	SAS	Normal	SAS 2018-6-7	Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: (05/06/2018) (DD/MM/YYYY), TIME: (17:00) (HH:MM)
LOCATION: 30 Jalan lama 10, 51539211

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: YP10857
b) INSURANCE COMPANY: NTUC income
c) POLICY NUMBER: 504855578
d) POLICY TYPE: [COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT]
e) MAKE & MODEL: Mitsubishi L200
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: Gan Soon Heng Recycling & Trading (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S3136391X CONTACT: 82330229
c) ADDRESS: 753 Pagar Rd S1 21 05-765 915255

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

3. DRIVER

a) NAME: Lee Wei Jim (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S90504463 CONTACT:
c) ADDRESS: 255 Pagar Rd S1 21 05-765 915255

*d) DATE OF BIRTH: (27/12/1990) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 10 Sep 2009

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: SC33339R MODEL: Mercedes
b) DRIVER'S NAME: Tan Eng Kiat
c) NRIC/FIN/PASSPORT: S11457816 CONTACT: 97698838

9. THIRD PARTY VEHICLE

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

(1)
NUMBER OF
PASSENGER
INCLUDING DRIVER

(0)
NUMBER OF
PASSENGER
INCLUDING DRIVER
()
NUMBER OF
PASSENGER
INCLUDING DRIVER

1) EMAIL : 4 Recycle@sshrt.com

2) VIDEO :

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9050446J



Name

LEE WEI JUN

李 伟 俊

Race

CHINESE

Date of birth

27-12-1990

Country of birth

SINGAPORE

Sex

M

S9050446J

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence No. S9050446J

Name

LEE WEI JUN

Birth Date 27 Dec 1990

Issue Date 10 Sep 2009



001783435A

3863553



NRIC No. S9050446J



Date of issue

07-04-2006

APT BLK 255 PASIR RIS STREET 21 #05-285
SINGAPORE 510255

NRIC No: S9050446J

Date: 14/04/2014

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

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 10 Sep 2009



Licence No: S9050446J

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 : 5098555728

Cover : Comprehensive

- | | |
|--|--------------------------------------|
| 1. Index mark and Registration Number of Vehicle | : YP1085T |
| Chassis Number | : FEB21EA20243 |
| 2. Name of Policyholder | : SOON SOON HENG RECYCLING & TRADING |
| 3. Effective Date of Insurance | : 08 Mar 2018 |
| 4. Expiry Date of Insurance | : 14 Jan 2019 |
| 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	: DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC 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 : JUN SHI INSURANCE AGENCY (00000572596)
Date of Issue : 08 Mar 2018 15:09 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive