NATIONAL Assessment Centre Services [illegible] MN94180-74-08

Date In: 18/06/2018 16:26	Job description	Date & Time Completed	Done by
Ref No: NBA/MC/18010967/Y	SAS e-filing		
Veh No: FBL 808	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 17/06/2018 10:00	i-Motor Claim Form	MT/0999013-001	18/06/2018 16:43
OD / TP (circled) / 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: FBM 86K 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

NA1803847

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt ($) 1st Bill	Amt ($) Add Bill
1) AR : Accident Reporting ($30);			
2) DA : Damage Assessment ($100);	INC ($80)		
3) TF : Towing Fee	$40/$45		
4) FT : Follow-Through Survey	$120		
5) FT : Follow-Through Survey (Resurvey)	$30		
For claiming against INC Only (wef 10 Jan 2005)			
6) TR : Re-inspection	$75		
7) N1 : Idac DA + SMRT Survey	$160		
8) NTUC Additional Services:-			
OD*			
*N5: Courtesy Car / Tpt Allowance	$5		
*N6: Repair Co-ordination	$10		
*N7: Post Repair Inspection	$25		
*N8: DV / Collect Excess Coordination	$5		
TP (N11) : TP (Non INC) against INC	$20		
9) N12: Idac Mobile	30		
Invoice dated	*Fee Charged*		[redacted]
Invoice dated	*Fee Charged*	[redacted]	

MNA418078408 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 18/06/2018 16:26
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

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	18/06/2018 16:26
Date Of Accident	17/06/2018 10:00
Exact Location Of Accident	JALAN 2 LORONG KM55.9 LEBUHRAYA UTARA SELATAN
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FBL30B
Insured/Policyholder	
Name Of Registered Owner	TOK AH CHUAN
NRIC No	S7117152C
Email Address	SANSONTOK@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-90733030
Alternative Phone No	OTHERS-90733030
Vehicle Particulars	
Manufacturer	BMW
Model	R1200GS-1.2 (M)
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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5090863045-01
Cover Note Number	
Driver	
Name of Driver	TOK AH CHUAN
NRIC No	S7117152C
Date Of Birth	19/05/1971
Occupation	INDOOR
Date Of Driving Pass	11/05/1993
Driving Experience	25 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90733030
Fax Number	
Contact Number	OTHERS-90733030
EMail Address	SANSONTOK@YAHOO.COM.SG

Address	10 BOON LAY DRIVE #07-26
Postcode	649929
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	COLLISION - HEAD TO REAR
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)	2
Passenger 1	NAME: : WIFE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	KLUANG (MALAYSIA)
Police Station Address	**ROAD**: KLUANG MALAYSIA , **POSTCODE**: S66270 , **COUNTRY**: MALAYSIA
Police Station Contact	**TEL NO**: 029-1193885 - **FAX NO**:
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND TRAFIK KLUANG/004421/18

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	FBM86K
Vehicle Make/Model/Colour	BMW/R NINET
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	EDWIN YEOW AIK HUANG
NRIC/Passport Number	E6391339N
Contact Number	96699199
Address	

Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

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.

18/06/2018

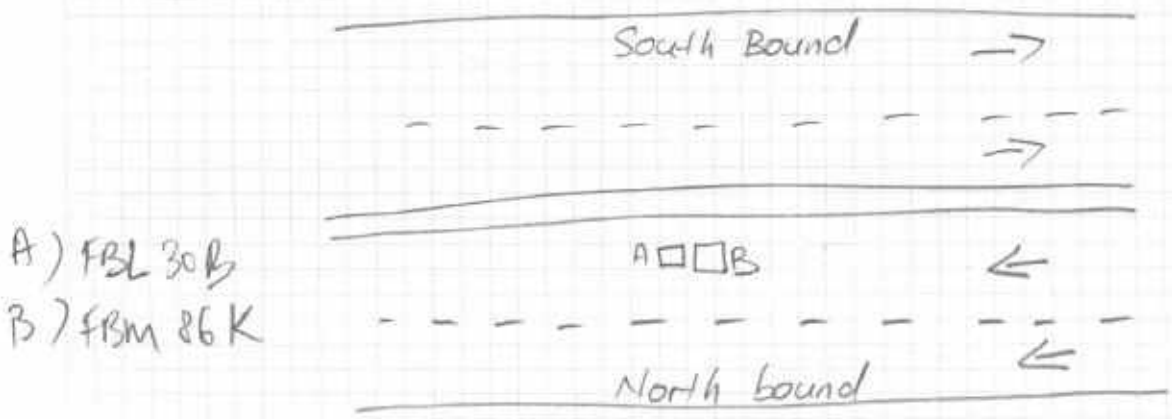
Policyholder's Signature
Date & Time:

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

18/06/2018

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

SKETCH PLAN JLN 2 LORONG KM 59, LEBUH RAYA UTARA SELATAN



A) FBL 30B
B) FBM 86K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 17/06/2018 AT ABOUT 0730HRS I WAS AT GERCOLOG PATAH & WAS RIDING MY MOTORCYCLE FBL30B & WANTED TO GO TO KLUANG WITH MY WIFE. ON 17/06/2018 AROUND 0930HRS WHEN I WAS RIDING AT RIGHT LANE AT JLN 2 LORONG KM 55.9 LEBUH HIGHWAY. I HEARD A BANG FROM THE REAR. I STOP MY BIKE & SAW A MOTORCYCLE FBM 86K BANG ONTO THE REAR OF MY BIKE. I & MY WIFE WAS NOT INJURED BUT MY BIKE TAIL LIGHT & EXHAUST PIPE BROKEN & MY RIGHT BOX BENDED & OTHER DAMAGE WHICH I DO NOT NOTICE

TRAFIK KLUANG/004421/18

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.:
		18/06/2018

CAWANGAN TRAFIK
IBU PEJABAT POLIS DAERAH
POLIS DIRAJA MALAYSIA

Resit Akuan Penerimaan Repot Polis :

Nama Pengadu : TOK AH CHUAN
No Kad Pengenalan / Paspot : E60414568
No Repot Polis : TRAFIK KLUANG/004421/18
Tarikh @ Masa Repot Polis : 17/06/2018 @ 15:15
Pengesahan Penerimaan Repot :

.....
Tandatangan Ketua Pejabat Pertanyaan

Pegawai Penyiasat :

Nama Pegawai Penyiasat : (R085237) SJN ISMAIL BIN MOHD YUSOF
Tempat Tugas : JOHOR , KLUANG
No Telefon Pejabat : **No Telefon Bimbit** : 017-7565237
Tarikh @ masa Perjumpaan : .....
Pengesahan Penerimaan Repot :

.....
Tandatangan Pegawai Penyiasat

Juru Gambar :

Nama : ..... **No Badan** : ..... **Pangkat** : .....

Tarikh @ Masa Gambar Diambil : .....
Pengesahan Gambar Diambil :

.....
Tandatangan Juru Gambar

Unit Pembekalan Dokumen Siasatan :

No Telefon Unit Pembekalan Dokumen : .....

Waktu Pejabat :
Isnin - Khamis :
08:00 Pagi - 01:00 Tengah Hari
02:00 Petang - 03:30 Petang
Jumaat :
08:00 Pagi - 12:30 Tengah Hari
Cuti Umum / Khas : Tutup

Jenis Dokumen Dibekal Kepada Pengadu :

1. Salinan Repot Polis ☑
2. Gambar Kenderaan ☑
3. Rajah Kasar Kemalangan ☑
4. Keputusan Siasatan ☑
5. Lain-lain Dokumen ☐

Tarikh @ Masa Dokumen Diserah : .....

Pengesahan Kaunter Pembekalan Dokumen :

.....
Tandatangan Pegawai Kaunter Pembekalan Dokumen

POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai	: TRAFIK KLUANG	**Pegawai Penyiasat**	: R085237
Daerah	: KLUANG		
Kontinjen	: JOHOR		
No Repot	: TRAFIK KLUANG/004421/18		
Tarikh	: 17/06/2018		
Waktu	: 1515 PM		
Bahasa Diterima	: B. Malaysia		

Butir-butir Penerima Repot

Nama : MOKHTAR B MUSTAPA **No Personel :** R111211 **Pangkat :** KPL

Butir-butir Jurubahasa (Jika Ada)

Nama : --- **No K/P (Baru) :** --- **No Polis/Tentera:** ---

No Paspot: --- **Bahasa Asal :** ---

Alamat: ---

Butir-butir Pengadu

Nama : TOK AH CHUAN

No K/P (Baru) : --- **No Polis/Tentera :** --- **No Paspot :** E6041456B

No Sijil Beranak : ---

Jantina : Lelaki **Tarikh Lahir :** 19/05/1971 **Umur :** 47 tahun 0 bulan

Keturunan : Cina **Warganegara :** Singapore

Pekerjaan : SWASTA

Alamat Tempat Tinggal : 10 BOON LAY DRIVE #07-26 S649929 SINGAPORE, 649929

Alamat Ibu/Bapa : ---

Alamat Pejabat : ---

No Tel (Rumah) : --- **No Tel (Pejabat) :** --- **No Tel (HP) :** 90733030

Emel : ---

Pengadu Menyatakan:-

PADA 17/06/2018 JAM LEBIH KURANG 0730HRS SAYA DARI GELANG PATAH DENGAN MENUNGGANG M/SIKAL NO.FBL30B JENIS BMW MAHU PERGI KLUANG BERSAMA SEORANG PEMBONCENG.PADA 17/06/2018 JAM LEBIH KURANG 0930HRS SEMASA MENUNGGANG DI LORONG KANAN JLN 2 LORONG KM55.9 L/RAYA UTARA SELATAN (U) TIBA-TIBA TERDENGAR DENTUMAN DARI BELAKANG .BILA BERHENTI PERIKSA DAPATI SEBUAH M/SIKAL NO.FBM86K TELAH MELANGGAR M/SIKAL SAYA DARI BELAKANG.SAYA DAN PEMBONCENG TIDAK CEDERA MANAKALA KEROSAKAN M/SIKAL LAMPU BELAKANG PECAH,EXZOS PAIP PATAH,BOX KANAN DAN ATAS KEMEK DAN LAIN-LAIN KEROSAKAN TIDAK PASTI LAGI.INILAH LAPURAN SAYA.

Tandatangan Pengadu: Tandatangan Jurubahasa(Jika ada) : Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak : R111211 | 17/06/2018 03:36:53 PM

Claim Handling

Exit

Accident MT/0999013

Policy No.	5090863045-01	Vehicle No.	FBL308	GST Registration No.	
Policyholder Name	TOK AH CHUAN			Policyholder NRIC	S7117152C
Product Code	MOTORCYCLE INSURANCE	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	90733030	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	● No ○ Yes	TCA	● No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	No

Accident Details

Report Date	18/06/2018 16:39	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	17/06/2018	Time of Accident hh:mm	10:00	Country of Accident	Outside Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JALAN 2 LORONG KMS5,9 LEBUHRAYA UTARA SELATAN				

Benefits

Excess

Own damage Excess	1,000.00	Additional Excess		Windscreen Excess	
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	Yes
Modification History			

Policyholder Mailing Address

Address 1	10 BOON LAY DRIVE	Address 2	#07-26 SUMMERDALE	Address 3	SINGAPORE 649929
Address 4		Address Type	Singapore address	Post Code	649929
Unit No.		Related Policy Number	5100659377		

OI Driver Info

Driver Name	TOK AH CHUAN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S7117152C	Driver DOB	19/05/1971
Register Date of Driver License	07/08/1987	Driver Age	47	Driving Experience	30
Contact No.(Mobile)	90733030	Contact No.(Office)		Contact No.(Home)	
Address 1	10 BOON LAY DRIVE	Address 2	#07-26 SUMMERDALE	Address 3	SINGAPORE 649929
Address 4		Address Type	Singapore address	Post Code	649929
Unit No.					
Does he own a Singapore Registered car?	○ Yes ● No	Driver Vehicle No.	FBL308	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ● No

Modification History

Claim 001 | New

Claim Type *	OD-MX	Insured Name	TOK AH CHUAN	Insured NRIC	S7117152C
Contact No.(Mobile)	90733030	Contact No.(Home)	63638484	Contact No.(Office)	
Email Address	samsontok@yahoo.com.sg	OI Vehicle Number	FBL308	TP Vehicle Number	FBM86K
Claim Description	FBL308 / FBM86K ON 17 Jun 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	18/06/2018 16:42	Claim Close Date		Date Received	18/06/2018 00:00
Report Taken By	ROSLI WAHAB				

✓ Print AK letter

Save | Submit

Attachment

Accident No.	MT/0999013	Claim No.	001
Last Doc. Received	● Yes ○ No	Upload Date	18/06/2018 16:43

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 (BUKIT MERAH)) on 18 Jun 2018 16:43	Photos		Normal	Photos 2018-6-18		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 18 Jun 2018 16:43	Photos		Normal	Photos 2018-6-18		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 18 Jun 2018 16:43	Photos		Normal	Photos 2018-6-18		Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:43	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:43	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:43	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	Photos	Normal	Photos 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	SAS	Normal	SAS 2018-6-18	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 18 Jun 2018 16:42	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-18	Edit

▼ Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 17/06/2018 (DD/MM/YYYY), TIME: 10:00 (HH:MM)

LOCATION: Jalan 2 Larong Km 59.9 L/Raja Utara Selatan

1. **DETAILS OF VEHICLE**
   a) VEHICLE NUMBER: FBL30B
   b) INSURANCE COMPANY: Income
   c) POLICY NUMBER: 5090863045-01
   d) POLICY TYPE: (COMPREHENSIVE / ~~THIRD PARTY / THIRD PARTY FIRE & THEFT~~)
   e) MAKE & MODEL: BMW / R1200GS Adventure
   f) TYPE: (~~SALOON / COUPE / MPV / VAN / LORRY~~ / MOTORCYCLE / ~~OTHERS~~)
   g) VEHICLE CATEGORY: (~~PRIVATE / COMMERCIAL~~ / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: Pte Use
   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: Tok AH CHUAN (MALE / ~~FEMALE~~)
   b) NRIC/FIN/PASSPORT: S7117152C CONTACT: 90733030
   c) ADDRESS: 10 Boon Lay Drive #07-26 (649929)

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

* No of passenger (including driver) (02)

3. **DRIVER**
   a) NAME: Tok AH CHUAN (MALE / ~~FEMALE~~)
   b) NRIC/FIN/PASSPORT: S7117152C CONTACT: 90733030
   c) ADDRESS: 10 Boon Lay Drive #07-26 (649929)

   *d) DATE OF BIRTH: (19/05/1971) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / ~~OUTDOOR~~)
   f) DATE OF DRIVING PASS: 11/05/1993

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (~~YES~~ / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner
5. a) WEATHER CONDITION: (CLEAR / ~~RAINING / OTHERS~~)
   b) ROAD SURFACE: (DRY / ~~WET / OTHERS~~)
6. WAS ANYBODY INJURED (~~YES~~ / ~~NO~~) NO
7. a) REPORTED TO POLICE (YES / ~~NO~~)
   IF YES, PLEASE STATE WHICH POLICE STATION: Kluang Traffic

* No of passenger (including driver) (01)

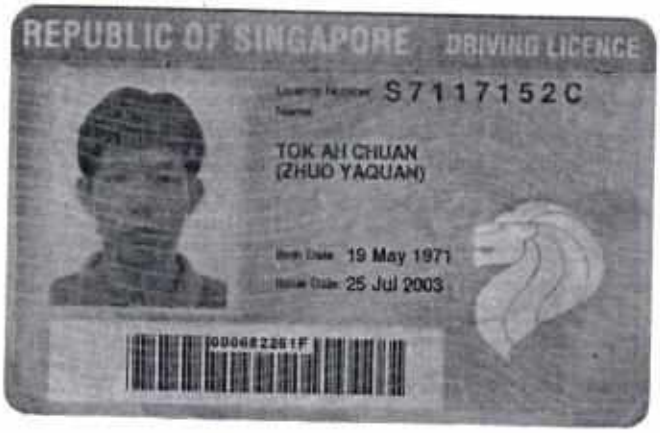
8. **THIRD PARTY VEHICLE**
   a) VEHICLE NUMBER: FBM86K MODEL: BMW / R NINET
   b) DRIVER'S NAME: EDWIN YEOW AIK HUANG
   c) ~~NRIC/FIN~~/PASSPORT: E6391339N CONTACT: 96699199
9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: MODEL:
   e) DRIVER'S NAME:
   f) NRIC/FIN/PASSPORT: CONTACT:

* No of passenger (including driver) (0)

email = samsortok@yahoo.com.sg

fax =


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7117152C
TOK AH CHUAN
(ZHUO YAQUAN)
CHINESE
19-05-1971
M
SINGAPORE


REPUBLIC OF SINGAPORE DRIVING LICENCE
S7117152C
TOK AH CHUAN
(ZHUO YAQUAN)
19 May 1971
25 Jul 2003


2835990
S7117152C
O+
26-05-1995
10 BOON LAY DRIVE #07-26
SINGAPORE 649929
NRIC No: S7117152C
Date: 08/01/2010
No: 6373658


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)
Class 2B Motorcycles not exceeding 200 cc 07 Aug 1957
Class 2A Motorcycles between 201 cc and 400 cc 12 Jun 1998
Class 2 Motorcycles exceeding 400 cc 11 May 1993
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 3500 kilograms 06 Jun 1958
Class 4 Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 3500 kilograms 15 Mar 1993
Class 6 Motor vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7200 kilograms 21 May 1993
Licence No: S7117152C
NP 42eA

made different

THE SCHEDULE

Motorcycle Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Insured 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	:	5090863045-01
The Policyholder	:	TOK AH CHUAN 10 BOON LAY DRIVE #07-26 SUMMERDALE SINGAPORE 649929

Period of Insurance	:	06 Jun 2018 To 05 Jun 2019
Sum Insured	:	Market Value of Insured Vehicle at Time of Loss
Premium (inclusive GST)	:	S$627.33

Interest Insured

Cover Type	:	Comprehensive			
Named Driver (1)	:	TOK AH CHUAN			
Named Driver (2)	:	N/A			
Make/Model	:	BMW/R 1200 GS ADVENTURE			
Capacity	:	1170cc	Number of Seater	:	2
Registration Number	:	FBL30B	Registration Year	:	2016
Chassis Number	:	WB10A0208GZ769052	Insure with COE	:	YES
Excess (Section 1)	:	S$1,000	NCD Entitlement	:	20%
Excess (Section 2)	:	N/A	Loyalty Discount	:	5%
Hire Purchase Company	:	UNITED OVERSEAS BANK LIMITED			

Memo A : N/A

Endorsement Operative : N/A

Agency	:	NLE INSURANCE AGENCIES PTE LTD (00000614580)
Date of Issue	:	30 Apr 2018 12:13 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