| NATIONAL Assessment Cent   | Le Services (met : James)   | MUAGENEO:  | 207  |
|--|---|--|--|
| Date In 200 200 2016   | Jeb description   | Date & Tune Completed  | Done by  |
| REFNUMBA/MSG18011320/V   | SAS e-filing  |  | The state of the s |
| Veh No STN 29491   | E-mail (within Shis, AIC 2his)  |  |  |
| DOA 3500 201 15:0  |   |  |  |
| 2 (30)   |   |  |  |
| OD TP Reporting Only   | i-Motor W/O (within OD)   | 2hrz (17 4turs)  |  |
|  | Assessment/Survey Report  |  |  |
| TP Insurer:  | Ass't Report by Fax / Han   |  |  |
| Preferred Wksp / INC Assign Wksp / QW: (   | Assirteport by Paxi Hail  | Same and the same  |  |
| TP Particulars:   Veh No:  | GY MD7 INC  |  | ax:  |
| Owner / Driver: (  | 4/10(   | Tel:   |  |
| Policy No. ( ) Pe  | riod: (   | Cover Type: (  |  |
| Confirmed by : (   | Date:   | Tone:  |  |
| - September 1990 Committee | Note-Est Status (WO): N: 0-   |  | )  |
|  | Warranty: YES ( )/NO (  | 2070, F. 21-7970. F. SU-II   | 10%0]  |
| Excess: (\$ ) Loading: \$1,0   | TANDAL POST OF THE STANDARD AND PROPERTY OF   | 1  |  |
| General Remarks:-  | 2 ACA 289 AND SECTION 14-15 2   | 2000 N C 1   |  |
| ( ) Walk-In Customer: Customer's info  | TALL OF THE WASSESSMENT OF THE PARTY OF THE | STREAM COLUMN STATE  | 12.5   |
| ( ) Total Lass Case and to a most to   | Thation strictly Confidential & S   | Strictly NO rafer of repairer.   |  |
| Drive-In ( ) / Towed-In ( ); Invoice   |   |  |  |
| Drive-In ( ) / Towed-In ( ); Invoice   | e: YES ( ) / NO ( ) ;   | Towing Co. (   | )  |
| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3  Injury:  | ( )   |  |  |
| Date/Time Actions  |   |  |  |
| NA1803910  | 27 Martin 1997  | eparation Checklist  | Ant (\$) Am  |
| laimant's Particulars :-   | 1) AR : Accide<br>2) DA : Damag   | e Assessment (\$100); INC (\$30)   |  |
| river/Owner:   | 3) TF : Towing  | Fee \$40/S   |  |
| ontact No:   | 5) FT : Fellow-   | Through Survey (Resurvey) \$   | 30   |
| maged Portion:   | 6) TR: Re-iusp  |  | 75   |
| process of suppliers and the suppliers are suppliers and the suppliers are suppliers and the suppliers and the suppliers are sup |   | + SMRT Survey 51   | 60   |
| C Checked by (Engr-In-Charge):   | QI)*  |  |  |
| - A  |   | The state of the s | \$5  |
| uditors! Comments :-   | *N7: Post Re  | pair Inspection 3  | 25   |
| E and the second   |   | The second secon | 20   |
| 2/3:   | 9) N12: Idae M  |  | 30   |
| 1.001.00   | Involce dated   | Fee Charged  | AND THE REAL PROPERTY.   |
|  | Investor dated  | Fee Charged  | CONTRACTOR OF THE PARTY OF THE  |

### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Gender

Mobile Number

Fax Number Contact Number

EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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   | 21/06/2018 20:48                               |
| Date Of Accident   | 30/08/2017 15:00                               |
| Exact Location Of Accident   | CROSS JUNCTION OF HOLLAND ROAD AND TAMAN WARNA |
| Country/State of Loss  | SINGAPORE                                      |
|  | ETAILS OF OWN VEHICLE                          |
| Vehicle Registration Number  | SJN2949H                                       |
| Insured/Policyholder   |  |
| Name Of Registered Owner   | ONG ZHU XING (WANG ZHUSHENG)                   |
| NRIC No  | S8014784H                                      |
| Email Address  | MARSK,ONG@GMAIL.COM                            |
| Mobile Phone No  | (LOCAL) +65-91008232                           |
| Alternative Phone No   | OTHERS-96801881                                |
| Vehicle Particulars  |  |
| Manufacturer   | NISSAN   |
| Model  | TEANA  |
| Exact Purpose for which vehicle was being used at<br>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                                       | REPORTING ONLY                                 |
| Vehicle Category   | PRIVATE CAR                                    |
| Insurance Company  |  |
| Name of Insurance Company  | MSIG INSURANCE (SINGAPORE) PTE. LTD.           |
| Type Of Coverage   | COMPREHENSIVE                                  |
| Fleet Policy   | NO   |
| Policy Number  | A 28681154 QMX                                 |
| Cover Note Number  |  |
| Driver   |  |
| Name of Driver   | LIM SAI KHIM                                   |
| NRIC No  | S0062324E                                      |
| Date Of Birth  | 03/02/1949                                     |
| Occupation   | INDOOR   |
| Date Of Driving Pass   | 11/09/1978                                     |
| Driving Experience   | 38 YEARS AND 11 MONTHS                         |

FEMALE

(LOCAL) +65-91008232

MARSK.ONG@GMAIL.COM

OTHERS-96801881

Address

5 CORONATION DRIVE

Postcode

269560

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

PARENT

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CROSS JUNCTION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

YES

Foreign Vehicle Registration Number

JQY1707 (MOTORCYCLE)

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance? Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 1 DUKE ROAD, POSTCODE: 268914, COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-4629999 - FAX NO: 64628933

Was notice of intended Prosecution given?

NO

If Yes against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20170830/2151(TYPE OF COLLISION IS HEAD TO SIDE)

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 Witness 1

Name

FANG YING

Phone Number

90402422

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

JQY1707

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

MOTORCYCLE

Name of Driver

WONG KEE THONG

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Passenger 1

2

NAME:

GENDER:

## SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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.
- 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
- 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.
- 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.:

NRIC/FIN No.:

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

| ESCRIBE CIRCOMSTANCES OF THE ACCIDENT     |
|---|
|   |
|   |
|   |
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| (1)                                       |
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## DECLARATION

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

Policyholder's Signature

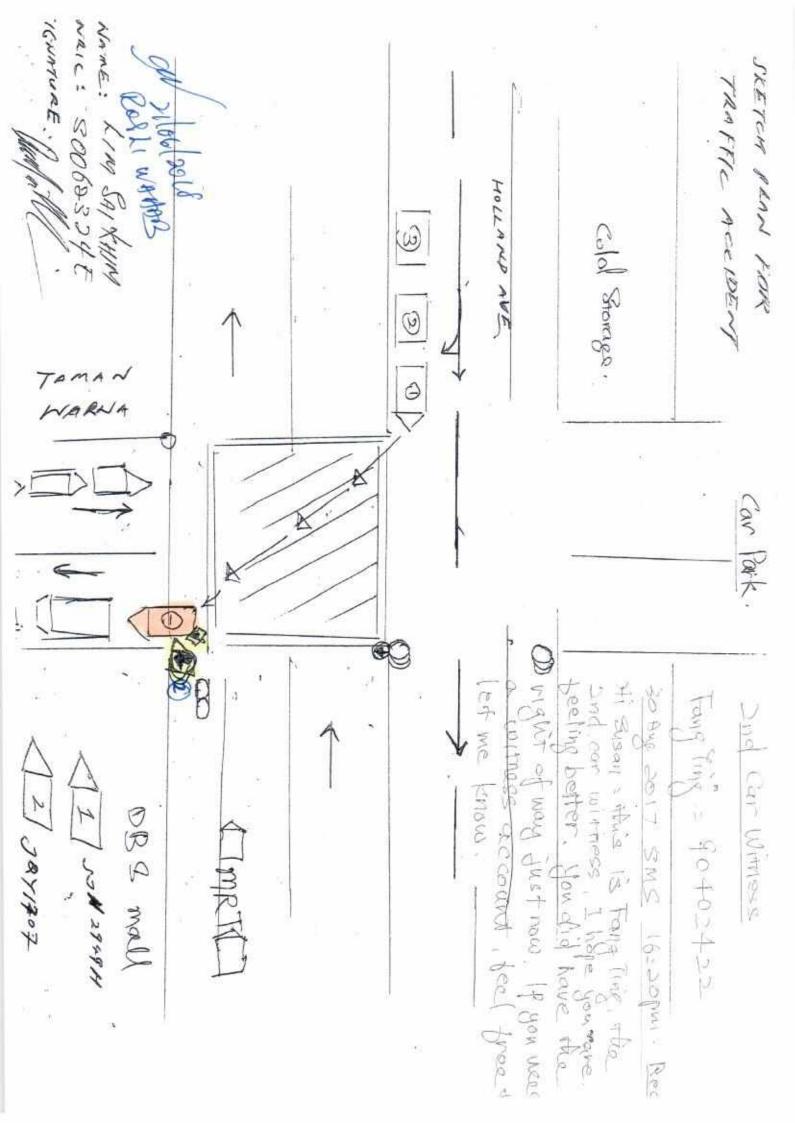
Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

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





Marsk Ong <marsk.ong@gmail.com>

## Notice of Traffic Offence: TP/IP/46281/2017

Marsk Ong <marsk.ong@gmail.com> To: arman mohammed ali@spf.gov.sq Cc: spf\_feedback\_tp@spf.gov.sg

Sat. Dec 30, 2017 at 12:29 PM

Dear Inspector Arman, and to any other officers that it may concern.

- 1. I, ONG ZHU XING (NRIC No. S8014784H) am writing on behalf of my mother, LIM SAI KHIM (NRIC No. S0062324E), as she is not English literate and requires language representation. Attached for reference in this email is our summons letter, police report to the case, and supporting documents you might or might not have in your possession.
- 2. As you may recall earlier, initially I tried to get in touch with Station Inspector Zaini (who is the officer in charge of this investigation), but was unable to get a hold of him. I was then provided with your contact number, upon which you have instructed me to write in regarding this issue. It was a few weeks since then and I apologize for my delay, as I was to get married on 16th December 2017 in Singapore and 23rd December in Ball, and was unable to complete my communication with you.
- 3. We write in regards to the above case, and am inquiring to understand and to challenge on how my mother, LIM SAI KHIM, was charged with driving a motor vehicle without reasonable consideration for other persons using the road, by failing to exercise care when making a PROTECTED right turn?
- 4. The fact of the matter is that the green arrow had turned in my mother's favour when making the right turn, meaning that the signal for the oncoming traffic on HOLLAND AVENUE is red. My mother's car had exercised quality care, and had already turned and stopped at the entrance of TAMAN WARNA, as there was a car in front of her who had stopped to alight passengers. It was only later that the motorcycle, JQY1707, had ignored the red light signal, ran it, and crashed into my mother's car. This accident did not happen immediately after the turn; this only happened after my mother's car had already stopped for a few seconds.
- 5. My mother, when speaking to the police, had also previously reported that a witness, Fang Ying, had approached the party on the scene and can verify and vouch that my mother was not in the wrong. Fang Ying's mobile phone number is 9040-2422. Was the witness not contacted regarding this issue to verify the facts of this case? Was her testimony not given consideration to the case?
- 6. How is it that my mother, while making a right turn under a protected green arrow signal in her favour, could be put at fault? Doesn't this mean that she has the right of way, and protected by the green arrow signal in her favour?
- While not in any admission of guilt, and understanding that the deadline is drawing very near, on 29th December 2017 we have tried to pay the fine first and to appeal the case later. However, while trying to pay, the system was down and prevented us from paying the fine. Please find attached screenshot of the SPF website, showing that the website is down.
- 8. I am currently overseas and will return on the 6th January 2017. Whilst I may be contacted by my cell phone 9100-8232, I might not be able to reach my phone due to reception issues. If need be, you may also contact me via email to schedule a phone call.

av siloc roll wattors

Thank you and I look forward to your response and reply, and hope that we are able to settle this issue with confidence.

Yours faithfully,

ONG ZHU XING S8014784H email, marsk.ong@gmail.com tel. +65.9100.8232

2 attachments





Police Station Of Origin: Bukit Timah N.P.C 1 Duke's Road SINGAPORE 268914 Tel No: 1800-4629999

1 of 3 Report No. T/20170830/2151

## REPORT OF A TRAFFIC ACCIDENT

| 30/08/201                         | e Report N<br>17 18:32 | Made:                     | Vide Report No.:<br>E/20170830/0110                    | Station Diary No.:   |  |  |  |
|-----------------------------------|------------------------|---------------------------|--|--|--|--|--|
| Informan                          | t's Partic             | ulars                     |  | THE RESIDENCE OF THE PARTY OF T |  |  |  |
| Name of<br>LIM SAI F              | Informant:<br>KHIM     |                           | Address:<br>5 CORONATION DRIVE SINGAPORE 269560        |  |  |  |  |
| ID Type /<br>NRIC NO              | ID No.:<br>/ S00623    | 24E                       | Contact No.:<br>Home/Office: 64662121 Mobile: 96801881 |  |  |  |  |
| Nationality:<br>SINGAPORE CITIZEN |                        | EN                        | Email:   |  |  |  |  |
| Sex:<br>Female                    | Age:<br>68             | Date of Birth: 03/02/1949 | Type of Informant:                                     |  |  |  |  |
| Race:<br>Chinese                  |                        |                           | Language:<br>English                                   | Institution / School Name:   |  |  |  |
| Occupation:<br>RETIREE            |                        |                           | Driving Licence Information:<br>Class: 3               | Date of Expiry:  |  |  |  |

| Type of<br>Accident:           | Injury<br>Conveyed By Ambul       | ance [         | Orink<br>Orive:<br>No                 | Date/Time of<br>Accident:<br>30/08/2017 15:00 |  | Type of Location<br>X-Junction |  |
|--------------------------------|-----------------------------------|----------------|---------------------------------------|---|--|--------------------------------|--|
| HOLLAND AN                     |                                   | arman W        | /arna.                                |   |  | M F                            |  |
| Weather:<br>Clear              |                                   | Road Su<br>Dry |                                       |   |  | d Speed Limit:                 |  |
| Traffic Flow:<br>Dual Carriage | 111010001911                      |                | ffic Control:<br>ffic Light - Working |   |  | Traffic Volume:<br>Moderate    |  |
| Type of Collis                 | ion:<br>ing Vehicles - Head To Si | english t      |                                       | (1  |  | one conveyed by                |  |

| Details of Vehicle Involved |            |      |       |       |                      |                 |
|-----------------------------|------------|------|-------|-------|----------------------|-----------------|
| Vehicle No.                 | Туре       | Make | Model | Color | Condition            | No of Passenger |
| JQY1707                     | motorcycle |      |       |       | Seriously<br>Damaged | 1               |
| SJN2949H                    | Car        |      |       |       | Slightly<br>Damaged  | 0               |

| Details of Person Involved      |                                |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No     |                                |
| No. of Pedestrians Injured; NIL | Use of Pedestrian Crossing: NA |



T/20170830/2151

Police Station Of Origin: Bukit Timah N.P.C 1 Duke's Road SINGAPORE 268914 Tel No: 1800-4629999 2 of 3 Report No. T/20170830/2151

## CONTINUATION OF REPORT

| Driver           |                   | 9 6 6 |             | 1010                                | SK TILL  |                                 |
|------------------|-------------------|-------|-------------|-------------------------------------|----------|---------------------------------|
| Name             | LIM SAI KHIM      |       |             | ID No                               |          | S0062324E                       |
| Related Vehicle  | SJN2949H (Car)    |       | Contact No. |                                     | 64662121 |                                 |
| Hospital/Clinic  | NIL               |       |             | Class<br>Drivin<br>Licena<br>Expiry | g        | Class: 3<br>Date of Expiry: NIL |
| Date Treatment   | NIL Date Dis      |       | Date Disc   | charge                              | NIL      |                                 |
| No. of Days gran | ted Medical Leave | NIL   | Degree o    |                                     | NIL      |                                 |

## Brief Details.

On the 30/08/2017 at about 3pm, I was driving my son's car, reg SJN 2949H, a black Nissan Teana at the cross junction of Holland Ave and Taman Warna, when an incoming Malaysian Registered motorcycle, reg plate no: JQY 1707 had crashed into the left side of the rear bumper of my car while I was turning right into Taman Warna. The green arrow had appeared in my favour and I was turning right into the minor road, Taman Warna. I had seen that both the Malaysian rider and its pillion rider had fallen off the bike onto the cross junction and both of them were conveyed in separate ambulances to an unknown hospital. I was attended by police vide E/20170830/0110 and the TP in-charge case, IO Sharifah had informed me to lodge a traffic accident report in the nearest police station. My damages of my car included dent and scratches on the left side of my rear bumper. I did not suffer any injuries and no government property was involved. I am lodging this report for TP's investigations and for my car insurance company for insurance claims.





Police Station Of Origin: Bukit Timah N.P.C 1 Duke's Road SINGAPORE 268914 Tel No: 1800-4629999

3 of 3 Report No. T/20170830/2151

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:<br>E /<br>Sr Staff Sgt KUM KIN MUN | Signature Of Informant:        |
|---|--------------------------------|
| Signature Of Interpreter:<br>Not applicable                                   | Date/Time:<br>30/08/2017 18:32 |
| Officer In Charge Of Case: SN 170   | Classification Of Case:        |
| Staff Sgt MOHAMED HUSNUL TAUFIQ BIN MD YUSOF Contact No.: 65476358            | ATA CATE                       |

## **ACCIDENT STATEMENT**

|                 | ACCI             | DENT DATE: (30/08/                                 | LO 17/10D/MM/YYYY    | ), TIME: ( 15: 15      | _)(HH:MM)  |
|-----------------|------------------|--|----------------------|------------------------|------------|
| 4.7             | LOCA             | MON: JUNICION B                                    | 7= HOLLAND           | AVE /TAMA              | N WARN     |
|                 | LOCA             | IION. J. J. S. |                      | 1                      |            |
| 59              | 1,               | DETAILS OF VEHICLE  a) VEHICLE NUMBER:             | SIN 2949H            |                        |            |
|                 |                  | b)INSURANCE COMPANY                                | MS19                 |                        |            |
|                 | 10               | c)POLICY NUMBER:                                   |                      |                        |            |
|                 |                  | d)POLICY TYPE: (COMPRE                             | EHENSIVE / THIRD PAR | RTY / THIRD PARTY FI   | RE &THEFT) |
|                 |                  | OMAKE & MODEL: N                                   |                      |                        |            |
|                 |                  | f)TYPE: (SALOON / COUPE                            |                      |                        | OTHERS)    |
|                 |                  | g) VEHICLE CATEGORY: (P                            | RIVATE / COMMERC     | IAL / MOTORCYCLE       | )          |
|                 |                  | h) PURPOSE OF USING AT                             | ACCIDENT TIME:       | POLL ATH USE           | _          |
|                 |                  | I) ARE YOU CLAIMING UND                            | DER YOUR OWN INSU    | RANCE (YES (NO)        |            |
|                 |                  | IF NO, PLEASE STATE (THI                           | RD PARTY CLAIM / RE  | EPORTING ONLY)         | (E)        |
|                 | 2.               | INSURED / POLICY HOLDE                             |                      |                        |            |
|                 |                  | AJNAME: DNG ZHU                                    |                      | (MALE) F               |            |
|                 |                  | b) NRIC/FIN/PASSPORT:                              | 3801478417           |                        | 008232     |
|                 |                  | CIADDRESS: 5 CORON                                 | ATION DR SIN         | VINAPORE 2695          | 60         |
| F 21            |                  | 4  |                      |                        |            |
| A               | 1020             | * CONTINUE TO 3.d IF DRIV                          | VER ALSO POLICY HO   | OLDER                  |            |
| AHO of baz      | isen gab         | DRIVER   | DILLINA              | 11 1 1 1 2 2 2 2       | F14415W    |
| Clarkuding      | driver)          | DINAME: LIM SATE                                   | m060301LE            | (MALE XE               |            |
| CIS             |                  | CIADDRESS: 5 CORON                                 | ATION DE CIN         | GROOPE 2696            | 100        |
|                 |                  | CJADDRESS. 7 CONTO                                 | 1111000 07 3/10      | dillo c                | - 4        |
|                 |                  | *d)DATE OF BIRTH: (03/                             | 02/1949 100/         | MM/YYYY)               |            |
|                 |                  | e)OCCUPATION: (INDOO!                              |                      | STOCKE CHICKE          | 5.75       |
|                 |                  | PATEL OF DRIVING PA                                |                      | 978                    | 122        |
|                 | 4,               | WAS DRIVER AN EMPLO                                | YEE OF THE INSUR     | ED'S COMPANY? (Y       | ES /(NO)   |
|                 |                  | IF NO, RELATIONSHIP O                              | F THE DRIVER WIT     | H INSURED: M.O.        | THER       |
|                 |                  | a) WEATHER CONDITION; (                            | CLEAR / RAINING /    | OTHERS                 |            |
|                 |                  | b)ROAD SURFACE: (DRY)                              |                      |                        |            |
|                 |                  | WAS ANYBODY INJURED (                              |                      |                        |            |
|                 | 7.               | a) REPORTED TO POLICE ((                           | (ES) NO)             | RILLY TIMAL            | I NPC.     |
|                 |                  | IF YES, PLEASE STATE WHI                           | CH POLICE STATION    | - Servin Charle        |            |
| the of person   | 8.               | THIRD PARTY VEHICLE  O) VEHICLE NUMBER:            | 1207                 | MODEL:                 |            |
| 1 No. 34 (4.25) | May 21           | b) DRIVER'S NAME: W                                | ONE KEE THON         |                        |            |
| . Andredien     | dun te )         | c) NRIC/FIN/PASSPORT:_                             |                      | CONTACT:               |            |
| ( )             | 0                | THIRD PARTY VEHICLE                                |                      |                        |            |
| 1012 B          | 7.9              | d) VEHICLE NUMBER:                                 |                      | MODEL:                 | 4.00       |
| 4.5.0 (4.6.0)   | 22.192-          | 그리아 내는 네일 마시다면 아이지만 얼마나 이 어떻게 했다. ^~~~~            |                      |                        | F 7        |
| to taking       | define)          | f) NRIC/FIN/PASSPORT:_                             |                      | CONTACT:               |            |
| 9 8             | All and a second |  |                      | Section 1 to Control 1 | 1)         |
|                 |                  | S70.   |                      |                        |            |

email = marsk.ong@gment.com

# NTITY CARD NO. S0062324E





LIM SAI KHIM

林赛岭

FINDS

CHINESE

Case of Birth

Sex

03-02-1949 F

Country of Birth

PERAK



# REPUBLIC OF SINGAPORE DRIVE



License Number S 0 0 6 2

LIM SAI KHIM

Ben Date 03 Feb 1949 tasse Date 15 Sep 2003



2140323



NRIC No. S0062324E

Blood Group

Date of issue

17-06-1994

ATION DRIVE RE 269560 S0062324E

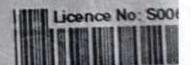
27/01/2012 (R) No: 6911487

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOW

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

NP 428A



## RENEWAL INVITATION

Insured Name and Address

Ong 2hu Xing

Coronation Drive Singapore 269560 06/12/2017

Policy No. Client No. A 28681154 QMX

11479523 Expiry Date 10/02/2018

MARKET VALUE

SGD600

(or F

Account No. 170071D Place of Issue Singapore

Thank you for insuring with MSIG. We are pleased to invite renewal of your policy which is due for renewal soon.

To enjoy continuity of cover, please return this Renewal Invitation with your instruction and payment early. Please speak to your servicing agent should you have any enquiries on your renewal. If you are paying your road tax by GIRO, online or by AXS, kindly send your renewal instruction to your servicing agent at least 2 weeks before the insurance expiry.

If there is any change to your personal particulars, please provide updates on the last page of this Renewal Invitation.

We look forward to continuing as your preferred general insurance partner.

## RENEWAL DETAILS

Policy Class

Period of Insurance

Premium Payable (inclusive of 7% GST)

MOTOR MAX

11/02/2018 to 10/02/2019

SGD743.13

Scope of Cover

Comprehensive

## Interest Insured

Registration No. Make/Model **Engine Number** Chassis Number

SJN2949H Nissan Teana 2.5 CVT

V025408847A

JN1BBUJ32Z0001235

2008

2496 C.C.

Seating Capacity

Year of Mfg

Windscreen

Capacity

(incl. Driver)

UNLIMITED

Incl. COE/PARF YES Off-Peak Car NO No Claim Discount 50.00% Good Driver's Discount 5.00% NOT COVERED **NCD Protector** 

Sum Insured

Excess

## **Authorised Drivers**

ng Zhu Xing

## REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8014784H



Name

ONG ZHU XING (WANG ZHUSHENG)

王权盛

CHINESE Data of birth Se

27-05-1980 M Country of birth SINGAPORE





OWNER

4729676



WIIC No. S8014784H

Date of lease

01-06-2011

Address

5 CORONATION DRIVE SINGAPORE 269560 YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSICS

PASS DATE

Class 3 Motor Cars=< 5000kg with =</ passengers, exclusive 11 May 2010 of the driver; and other motor vehicles << 2500kg

NP 42BA

Licence No: S8014784H