

NATIONAL Assessment Centre Services (wef 1 Jan 2005) MAA8080307			
Date In: 21/06/2018 20:48	Job description:	Date & Time Completed	Done by
Ref No: NBA/M898011320/4	SAS e-filing		
Veh No: SDN 2949H	E-mail (within 8hrs; AIC 2hrs)		
D.O.A: 30/08/2017 15:00	i-Motor Claim Form		
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: 294 1107	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

MA803910	Invoice Preparation Checklist		Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);			
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) N1 : Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	9) N12: Idac Mobile			
	*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	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

DETAILS 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 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
Gender	FEMALE
Mobile Number	(LOCAL) +65-91008232
Fax Number	
Contact Number	OTHERS-96801881
Email Address	MARSK.ONG@GMAIL.COM

Address	5 CORONATION DRIVE
Postcode	269560
Was driver an employee of the Insured's Company	NO
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 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?	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)

2

Passenger 1

NAME: :

GENDER: :

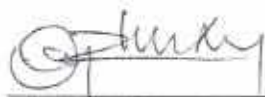
SKETCH PLAN

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:



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



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

SKETCH PLAN

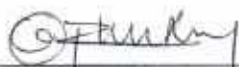
REFER TO ATTACHED MAP?

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
7/20/10830/2151

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: Reshi w...
NRIC/FIN No.:



Marsk Ong <marsk.ong@gmail.com>

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

Marsk Ong <marsk.ong@gmail.com>

Sat, Dec 30, 2017 at 12:29 PM

To: arman_mohammed_ali@spf.gov.sg

Cc: spf_feedback_tp@spf.gov.sg

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 Bali, 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?

7. 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.

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

*aw 21/06/2018
Resli wntars*

2 attachments

SKETCH PLAN FOR TRAFFIC ACCIDENT

Car Park.

2nd Car Witness

Cold Storage.

Fang Ling = 90402422

20 Aug 2017 SMS 16:20pm. Rec

Hi Susan = this is Fang Ling, the
2nd car witness, I hope you are
feeling better. You did have the

right of way just now. If you need
a witness account, feel free to
let me know.

HOLLAND AVE


③ ② ①

MRT

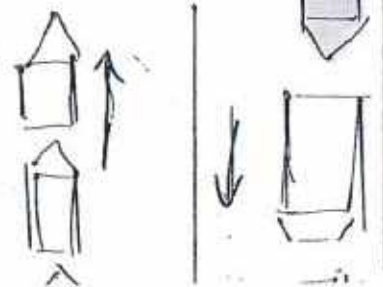
DBS mall

1 504 2949H

2 304 1707

21/06/2018
Rakhi Wadhwa
NAME: LIM SAI KHIM
NRIC: S0062324E
SIGNATURE: 

TAMAN
WARNA





**SINGAPORE
POLICE FORCE**



T/20170830/2151

2 of 3

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

Report No. T/20170830/2151

CONTINUATION OF REPORT

Driver			
Name	LIM SAI KHIM	ID No.	S0062324E
Related Vehicle	SJN2949H (Car)	Contact No.	64662121
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	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.



SINGAPORE POLICE FORCE



T/20170830/2151

1 of 3

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

Report No: T/20170830/2151

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/08/2017 18:32		Vide Report No.: E/20170830/0110		Station Diary No.: 113	
Informant's Particulars					
Name of Informant: LIM SAI KHIM			Address: 5 CORONATION DRIVE SINGAPORE 269560		
ID Type / ID No.: NRIC NO / S0062324E			Contact No.: Home/Office: 64662121 Mobile: 96801881		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 68	Date of Birth: 03/02/1949	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: RETIREE			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 30/08/2017 15:00	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 HOLLAND AVENUE TAMAN WARNA Cross junction of Holland Avenue and Tarman Warna.				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JQY1707	motorcycle				Seriously Damaged	1
SJN2949H	Car				Slightly Damaged	0

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



**SINGAPORE
POLICE FORCE**



T/20170830/2151

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:
E /
Sr Staff Sgt KUM KIN MUN

Signature Of Interpreter:
Not applicable

Signature Of Informant:

Date/Time:
30/08/2017 18:32

Classification Of Case:

ATA CASE

Officer In Charge Of Case: SN 170
TP / GIT /
Staff Sgt MOHAMED HUSNUL TAUFIQ BIN MD
YUSOF
Contact No.: 65476358
Authentication Stamp
NP168

cc Force

ACCIDENT STATEMENT

ACCIDENT DATE: 30/08/2017 (DD/MM/YYYY), TIME: 15:15 (HH:MM)

LOCATION: JUNCTION OF HOLLAND AVE / TAMAN WARNA

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SN 2049H
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: NISSAN 2000
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE 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: DNG ZHU XING (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S801478414 CONTACT: 91008232
 c) ADDRESS: 5 CORONATION DR SINGAPORE 269660

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: LIM SAI KHIM (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S0062324E CONTACT: 96801881
 c) ADDRESS: 5 CORONATION DR SINGAPORE 269660

*d) DATE OF BIRTH: 03/02/1949 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 11/09/1978

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: MOTHER

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: BUKIT TIMAH NPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: JAX 1707 MODEL: _____
 b) DRIVER'S NAME: WONG KEE THONG
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

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

Email = marisk.ong@gmail.com

fax =

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0062324E



Name

LIM SAI KHIM

林赛吟

Race

CHINESE

Date of Birth

03-02-1949

Sex

F

S0062324E

Country of Birth

PERAK

REPUBLIC OF SINGAPORE

DRIVER



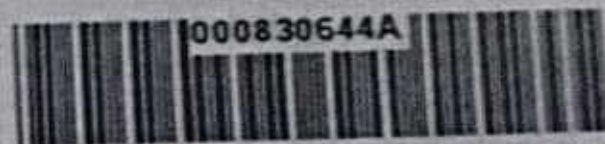
License Number S00623

Name

LIM SAI KHIM

Birth Date 03 Feb 1949

Issue Date 15 Sep 2003



000830644A

2140323



NRIC No. S0062324E



Blood Group

Date of issue

A+

17-06-1994

ATION DRIVE
RE 269560

S0062324E

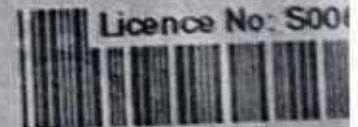
Date: 27/01/2012 (R) No: 6911487

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING

Class 3

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

NP 428A



Licence No: S0062324E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8014784H



Name

ONG ZHU XING
(WANG ZHUSHENG)

王 祝 盛

Race

CHINESE

Date of birth

Sex

27-05-1980 M

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8014784H

Name: ONG ZHU XING (WANG ZHUSHENG)

Birth Date: 27 May 1980

Issue Date: 11 May 2010

0018552408

owner



4728578

NRIC No: S8014784H



Date of issue

01-06-2011

Address

5 CORONATION DRIVE
SINGAPORE 269560

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

Class 3 Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg 11 May 2010

R/P 42BA



Licence No: S8014784H

MOTOR MAX
RENEWAL CERTIFICATE

Policy Number	Period of Insurance	Place of Issue
A 28681154 QMX	11/02/2017 to 10/02/2018	SINGAPORE
Name and Address of Insured		Date of Issue
Ong Zhu Xing 5 Coronation Drive Singapore 269560		20/01/2017
		Account Number
		170071D
Premium	GST	Total Due
SGD694.51	SGD48.62	SGD743.13

RISK NUMBER 1
MOTORMAX
OCCUPATION

Director

SCOPE OF COVER Comprehensive

INTEREST INSURED

REGISTRATION NO. SJN2949H
MAKE/MODEL Nissan Teana 2.5 CVT
ENGINE NUMBER VQ25408847A
CHASSIS NUMBER JN1BBUJ32Z0001235
YEAR OF MFG 2008
CAPACITY 2496 C.C.
SEATING CAPACITY 5 (INCL. DRIVER)
WINDSCREEN UNLIMITED

SUM INSURED
INCL. COE/PARF YES
OFF-PEAK CAR NO
NO CLAIM DISCOUNT 50.00% (or F/D)
GOOD DRIVER'S
DISCOUNT SGD36.55
NCD PROTECTOR NOT COVERED
EXCESS SGD600
ANNUAL PREMIUM SGD694.51

ACCESSORIES Aircon, radio/cassette/compact disc player, in-vehicle unit, rust-proofing and other accessories that are factory fitted.

AUTHORISED DRIVERS

Ong Zhu Xing
Any other person provided he is driving on the Insured's order or with the Insured's permission.

LIMITATION AS TO USE