

# NATIONAL Assessment Centre Services

(Ref: J400)

MMAY18095997

Date In: 25/07/2018 11:55	Job description	Date & Time Completed	Done by
Ref No: NBA/MC180135087	SAS e-filing		
Veh No: 8W 4916R	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 26/07/2018	i-Motor Claim Form	MT/1003223-002	25/07/2018
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: SKK 8771Z	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>MMAY1804719</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>Ref: 1:</p> <p>Ref: 2/3:</p>	<b>Invoice Preparation Checklist</b>		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: Idao DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
ON* *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 (N'n INC) against INC \$20 9) N12: Idao 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	25/07/2018 11:55
Date Of Accident	06/07/2018 20:30
Exact Location Of Accident	BLK 53 CHIN SWEE ROAD MCSP
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN4916R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN TECK HUAT
NRIC No	S0971258E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93231213
Alternative Phone No	OTHERS-85265546

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HARRIER-2.0 (A)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5090830797-01
Cover Note Number	

### Driver

Name of Driver	LOW HOR YEN
NRIC No	S2010819C
Date Of Birth	02/05/1954
Occupation	INDOOR
Date Of Driving Pass	01/02/1979
Driving Experience	39 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-85265546
Fax Number	
Contact Number	OTHERS-93231213
Email Address	NOEMAIL



Address	83 MEYER ROAD #14-02
Postcode	437910
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	NO COLLISION
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: : FRIEND GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180710/2076

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKK8171Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

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.
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:

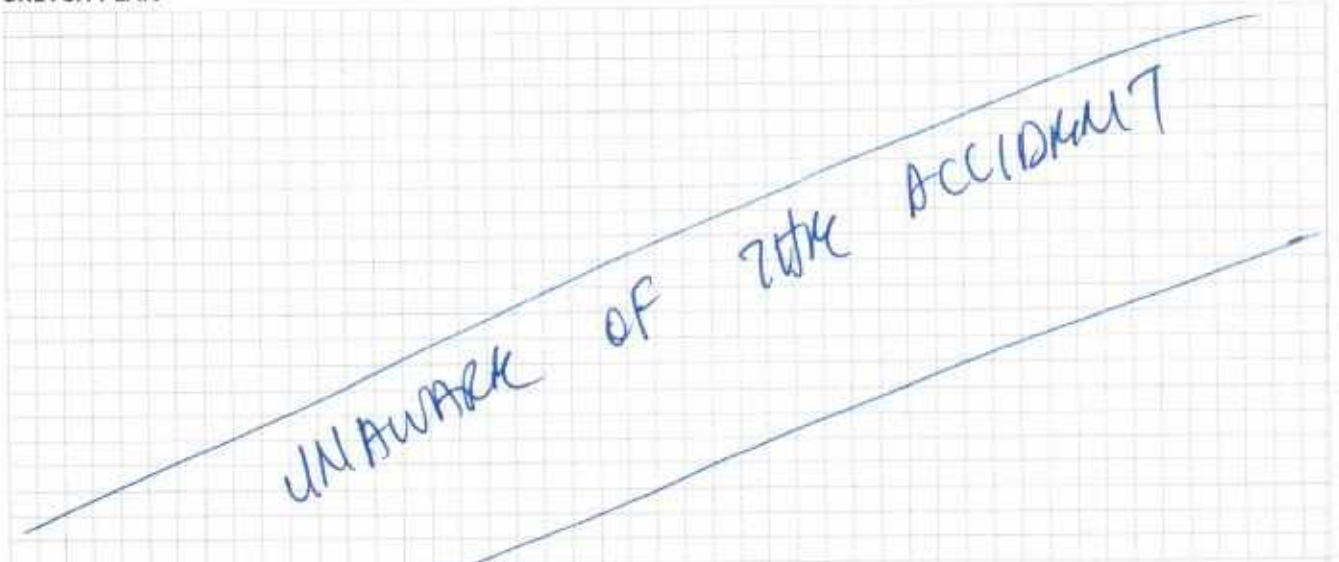


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



25/07/2018  
Reporting Centre Personnel's Signature  
Name: *Polli Winters*  
NRIC/FIN No.

SKETCH PLAN




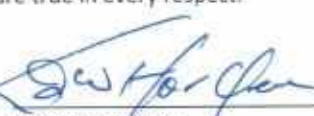
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

NOT REPORTED TO POLICE REPORT  
1/2018 0710/2076

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.:





# SINGAPORE POLICE FORCE



T/20180710/2076

1 of 3

Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

(Report No. T/20180710/2076)

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/07/2018 13:36	Vide Report No.:	Station Diary No.: 40
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**Informant's Particulars**

Name of Informant: LOW HOR YEN			Address: 83 MEYER ROAD #14-02 SINGAPORE 437910	
ID Type / ID No.: NRIC NO / S2010819C			Contact No.: Home/Office:	Mobile: 85265546
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 64	Date of Birth: 02/05/1954	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: UNEMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 06/07/2018 20:30	Type of Location: CARPARK
Location: Along Road 1 CHIN SWEE ROAD  OPEN SPACE CARPARK OF B/52 CHIN SWEE ROAD				
Weather: Drizzling	Road Surface: Wet		Road Speed Limit:	
Traffic Flow:	Traffic Control:		Traffic Volume: Moderate	
Type of Collision: UNKNOWN				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLN4916R	Car				Slightly Damaged	1

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20180710/2076

2 of 3

Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

Report No: T/20180710/2076

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	LOW HOR YEN	ID No.	S2010819C
Related Vehicle	NIL	Contact No.	85265546
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 09/07/2018 at about 1839hrs, my friend received a phone call from Traffic Police asking me if he had gotten into an accident on 06/07/2018 at the open space carpark of Chin Swee Road. He remembered that we were at the location but we were not aware that we got into any accident. During that day, I was the driver of the vehicle. I was then advised to lodge a police report.

On 06/07/2018 at about 2030hrs, I parked my car at B/52 Chin Swee Road open space carpark. I then left the location to eat dinner at the location and also purchase some groceries at Sheng Shiong Supermarket. I then went back to my car at around 2130hrs and subsequently drove off from the location. At that point of time, I did not find anything amiss.

After the phone call, I then went to check my vehicle and realized that there was a bit of paint scratch mark on the rear left side of my vehicle.

The vehicle I was driving is a white colored Toyota Harrier.





**SINGAPORE  
POLICE FORCE**



T/20180710/2076

3 of 3

Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

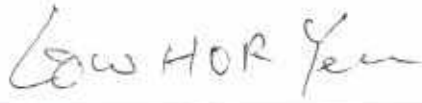

Report No. T/20180710/2076

**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: D / Sgt 2 LIM PEI HAO	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 10/07/2018 13:36
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168 	



SINGAPORE  
POLICE FORCE

4天

Traffic Police  
Singapore Police Force  
10, Ubi Avenue 3  
Singapore 408665  
Tel : 6547 0000  
Fax : 6547 6259

Date : 10 Jul 2018

Your Ref :

Our Ref : TP/IP/38649/2018

TAN TECK HUAT  
APT BLK 90 REDHILL CLOSE  
#08-432  
SINGAPORE 150090

000050

交警正在調查一案交通事故。



Dear Sir / Madam,

**CASE OF TRAFFIC ACCIDENT ALONG CHIN SWEE ROAD ON 07 JUL 2018 @ 12.46 AM**

Please be informed that Traffic Police is investigating into the above matter and will update you the status in due course.

2 IF you have not lodged a Police Report of a Traffic Accident (NP168) in respect of the said accident which is now required for police investigation, please do so as soon as possible at the nearest police station, Neighbourhood Police Centre (NPC), Neighbourhood Police Post (NPP) or online via Singapore Police Force Electronic Police Centre (<http://www.police.gov.sg/epc>).

3 Please note that the information given by you in the Police Report of a Traffic Accident (NP168) will be carefully considered. You may not be called upon for an interview if the information in the Police Report is sufficient for our investigation. However, if you have any further information or other evidence (such as CCTV footages) which you have not stated in your report and which you think will assist in the investigation, you are advised to contact the Investigation Officer within 2 weeks of this letter to arrange for an appointment.

4 You may contact the Investigation Officer SHAH RUL NIZAM at his / her office number: 65476904 or the supervisor MOHD JAMAL BIN MARZUKI at 65476354 if you have any further queries.

5 Thank you.

Yours faithfully,

TAN CHEE SING (ASP)  
CHIEF INVESTIGATION OFFICER  
INVESTIGATION BRANCH  
TRAFFIC POLICE

This is computer generated and does not require a signature.

Handwritten signature and initials.

## Claim Handling

Accident MT/1003223

Policy No.	5090830797-01	Vehicle No.	SLN4916R	GST Registration No.	
Policyholder Name	TAN TECK HUAT			Policyholder NRIC	50971298E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	Not available

## ▼ Accident Details

Report Date	16/07/2018 18:16	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	06/07/2018	Time of Accident hh:mm	20:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG CHIN SWEE ROAD MULTISTOREY CARPARK AT BLK S3 CHIN SWEE ROAD				

## ▼ Benefits

## ▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Uninsured Driver Excess	0.00	Outside Singapore GD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

## ▼ GST Registered Information

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

## ▼ Policyholder Mailing Address

Address 1	BLK 90 #06-432	Address 2	REDHILL CLOSE	Address 3	SINGAPORE 150090
Address 4		Address Type	Singapore address	Post Code	150090
Unit No.		Related Policy number	5090830797-01		

## ▼ O1 Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claims 002

New

Claim Type *	GD-MX	Insured Name	TAN TECK HUAT	Insured NRIC	50971298E
Contact No.(Mobile)	93231213	Contact No.(Home)	NIL	Contact No.(Office)	NIL
Email Address		O1 Vehicle Number	SLN4916R	TP Vehicle Number	SKR8171Z
Claim Description	SLN4916R / SKR8171Z ON 6 Jul 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	25/07/2018 00:00
Date Registered	25/07/2018 12:28	Claim Close Date			
Report Taken By	BOSLI WAHAB				

☒ Print AK letter

Save Submit

## Attachment

Accident No.	MT/1003223	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	25/07/2018 12:30
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		Urgency *	Normal
		Send Message	Upload

## ▼ Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Req. Sent? (CO)	Action
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 Jul 2018 12:30	Photos	Normal	Photos 2018-7-25		Edit
	NAC_BUKIT_MERAH_800678( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 Jul 2018 12:30	Photos	Normal	Photos 2018-7-25		Edit
	NAC_BUKIT_MERAH_800679( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 Jul 2018 12:30	Photos	Normal	Photos 2018-7-25		Edit
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 Jul 2018 12:30	Photos	Normal	Photos 2018-7-25		Edit
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 25 Jul 2018 12:30	Photos	Normal	Photos 2018-7-25		Edit



UKIT\_MERAH)) on 25 Jul 2018 12:30

NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B  
UKIT\_MERAH)) on 25 Jul 2018 12:30

Photos

Normal

Photos 2018-7-25

[Edit](#)NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B  
UKIT\_MERAH)) on 25 Jul 2018 12:30

Photos

Normal

Photos 2018-7-25

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UKIT\_MERAH)) on 25 Jul 2018 12:30

Photos

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Photos 2018-7-25

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UKIT\_MERAH)) on 25 Jul 2018 12:30

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UKIT\_MERAH)) on 25 Jul 2018 12:30

Photos

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Photos 2018-7-25

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UKIT\_MERAH)) on 25 Jul 2018 12:29

Photos

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Photos 2018-7-25

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UKIT\_MERAH)) on 25 Jul 2018 12:29

Photos

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Photos 2018-7-25

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UKIT\_MERAH)) on 25 Jul 2018 12:29

Photos

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UKIT\_MERAH)) on 25 Jul 2018 12:29

Photos

Normal

Photos 2018-7-25

[Edit](#)NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B  
UKIT\_MERAH)) on 25 Jul 2018 12:29

Photos

Normal

Photos 2018-7-25

[Edit](#)NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B  
UKIT\_MERAH)) on 25 Jul 2018 12:29

NRIC/ Driving License

Normal

NRIC/ Driving License 2018-7-25

[Edit](#)NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B  
UKIT\_MERAH)) on 25 Jul 2018 12:28

SAS

Normal

SAS 2018-7-25

[Edit](#)

Video List

Uploaded By/Date

Folder/Date

File Name

?

Source

Action

[Display in New Window](#)[Scan and uploading](#)

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2010819C



Name  
LOW HOR YEN

劉河燕

Race  
CHINESE

Date of Birth  
02-05-1954

Sex  
F

Country of Birth  
MALAYSIA



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number  
S2010819C

Name  
LOW HOR YEN

Birth Date  
02 May 1954

Issue Date  
15 Jan 2003



000121088G

2610485




NRC No. S2010819C

Blood Group  
O+


Date of issue  
10-04-1995

Address  
83 MEYER ROAD  
#14-02  
SINGAPORE 1543

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

CLASS DATE  
01 Feb 1979

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms



Licence No: S2010819C

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:** 5090830797-01

**Cover :** drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SLN4916R**  
Chassis Number : **ZSU600083688**
2. Name of Policyholder : **TAN TECK HUAT**
3. Effective Date of Insurance : **05 May 2018**
4. Expiry Date of Insurance : **04 May 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.

**This Policy does not cover**

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

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TAN TECK HUAT
NAMED DRIVER (1)	: LOW HOR YEN
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: UNITED OVERSEAS BANK LIMITED
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 : LECO AUTOMOBILE PTE LTD (00000571429)  
Date of Issue : 04 May 2018 14:26 hrs  
Reprint : 04 May 2018 14:29 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive