

NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

May 18/02617

Date In: 20/08/2018	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: N/A/INC/80/528314	E-mail (within 3hrs, AIC 2hrs):		
Veh No: SLE 2956 K	i-Motor Claim Form	ml/1008332001	23/08/2018
D.O.A: 19/08/2018 16:40	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		12:15
OD: TP Reporting Only	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: —	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

Claimant's Particulars:-	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
	1) AR: Accident Reporting (\$30);		Inc Bill	Add Bill
	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:-			
Driver/Owner:	QC Checked by (Engr-In-Charge):	OP:		
Contact No:		*N5: Courtesy Car / Tpl Allowance	\$5	
Damaged Portion:		*N6: Repair Co-ordination	\$10	
		*N7: Post Repair Inspection	\$25	
		*N8: DV / Collect Excess Coordination	\$5	
Auditors' Comments:-		TP (N11): TP (Non INC) against INC	\$20	
Cat. 1:		9) N12: Idao Mobile	\$0	
Cat. 2 / 3:		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	20/08/2018 14:55
Date Of Accident	19/08/2018 16:40
Exact Location Of Accident	AYE (TOWARDS TUAS) BEFORE NORMANTON PARK EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE2956K
Insured/Policyholder	
Name Of Registered Owner	LEE KOK SENG (LI GUOCHENG)
NRIC No	S8410032C
Email Address	NUCSON.LEE@KSB.COM
Mobile Phone No	(LOCAL) +65-97534315
Alternative Phone No	OFFICE-97534315

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5082025933-02
Cover Note Number	

Driver

Name of Driver	LEE KOK SENG (LI GUOCHENG)
NRIC No	S8410032C
Date Of Birth	20/04/1984
Occupation	OUTDOOR
Date Of Driving Pass	26/08/2004
Driving Experience	13 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97534315
Fax Number	
Contact Number	OFFICE-97534315
Email Address	NUCSON.LEE@KSB.COM

Address	BLK 127D KIM TIAN ROAD #22-553
Postcode	164127
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	HIT BY FALLEN TREE / OTHER OBJECTS
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	NA/UNKNOWN
Name of Driver	KEE
NRIC/Passport Number	
Contact Number	96948126
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
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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: 20/08/18
10am.

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

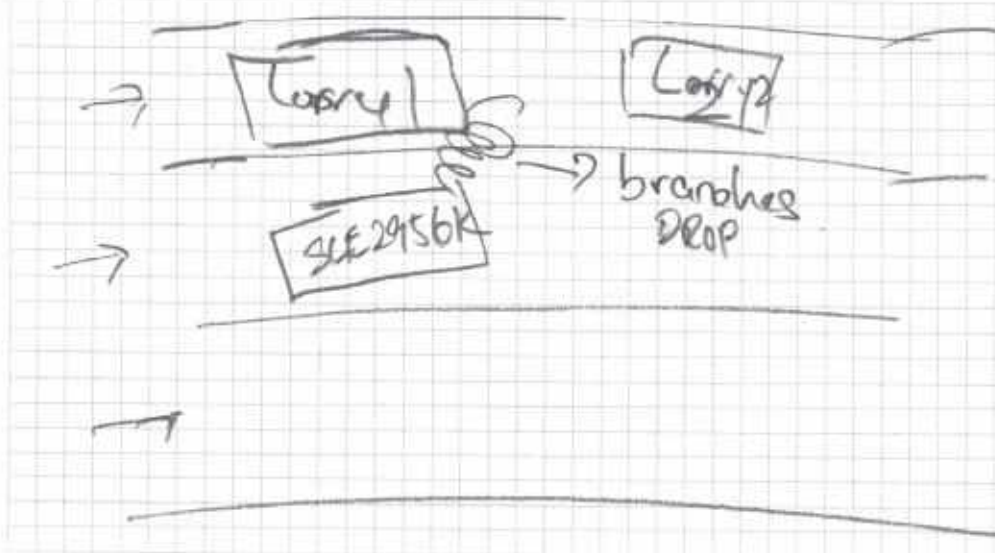
Name:

NRIC/FIN No:

AYE (tue)

Northward
Exit

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19/08/18 at approximately 1640 hrs, I was in the 2nd lane of AYE expressway (towards the) since there was road works in the 3rd lane. The road works were tree-branch cutting & out of sudden, I heard there were some ~~no~~ tree branches fall & hit my car.

I stopped in front of the 2nd lorry & confront the supervisor. He only gave me his name & contact & ask me to inform him about the claim. He was very reluctant to give me his company name but after several requesting, he told me he is worker (JT company).

DECLARATION

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

Policyholder's Signature

Date & Time:

20/08/18 10AM

QARMC (Accident Form, 2/1)

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

[Signature] 20/08/2018

Claim Handling

Accident MT/1008332

Policy No.	5082025935-02	Vehicle No.	SLE2956K	GST Registration No.	
Certificate No.					
Policyholder Name	LEE KOK SENG			Policyholder NRIC	S8410032C
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97534315	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFX	- No Yes	TCA	- No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	55	Private Hire	No
Accident Details					
Report Date	23/08/2018 12:10	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	19/08/2018	Time of Accident Minimum	16:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	AVE (TOWARDS TUAS) BEFORE NORMANTON PARK EXIT				
Benefits					
Excess					
Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	BLK 127D #22-553	Address 2	KOH TIAN ROAD	Address 3	SINGAPORE 164127
Address 4		Address Type	Singapore address	Post Code	164127
Unit No.		Related Policy Number	5082025933-02		
Q1 Driver Info					
Driver Name	LEE KOK SENG	Driver Type	Main Driver	Driver DOB	20/04/1984
Unnamed driver Name		Driver NRIC	S8410032C	Driving Experience	13
Register Date of Driver License	26/08/2004	Driver Age	34	Contact No.(Home)	
Contact No.(Mobile)	97534315	Contact No.(Office)		Address 3	SINGAPORE 164127
Address 1	BLK 127D #22-553	Address 2	KOH TIAN ROAD	Post Code	164127
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	SLE2956K	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	LEE KOK SENG	Insured NRIC	S8410032C
Contact No.(Mobile)	90085865	Contact No.(Home)	92758209	Contact No.(Office)	97534315
Email Address	ivgc10@hotmail.com	GT Vehicle Number	SLE2956K	TP Vehicle Number	
Claim Description	SLE2956K / - ON 19 Aug 2018				Name of Preferred Workshop
Preferred Workshop	Insured Liability	Not at Fault	GA report	Received	
Revised No. Finalisation	Yes	Revised Option	Preferred Workshop, Name unknown		
Date Registered	23/08/2018 12:14	Claim Close Date		Date Received	23/08/2018
Report Taken By	ROSLI WANAB				
Print AK letter					
Save Submit					

Attachment

Accident No.	MT/1008332	Claim No.	001
Last Doc. Received	Yes No	Upload Date	23/08/2018 12:15
Path *			
Choose File	No file chosen	Clear	Category *
Choose File	No file chosen	Clear	Confidential
Choose File	No file chosen	Clear	Urgency *
Choose File	No file chosen	Clear	Desc
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Message Read			
Attachment List			
Attachment	Uploaded By/Date	Category	Urgency
NAC_BUKIT_MERAH_800576(NATIONAL ASSESSMENT CENTRE SERVICE S(BUKIT MERAH)) on 23 Aug 2018 12:15		Photos	Normal
Description			
Photos 2018-8-23			

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:15	Photos	Normal	Photos 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:15	Photos	Normal	Photos 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:15	Photos	Normal	Photos 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:15	Photos	Normal	Photos 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	Photos	Normal	Photos 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	Photos	Normal	Photos 2018-8-23
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	Photos	Normal	Photos 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	Photos	Normal	Photos 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	SAS	Normal	SAS 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-23
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 12:14	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-23

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>	

ACCIDENT STATEMENT

ACCIDENT DATE: 19/08/2018 (DD/MM/YYYY), TIME: 16:40 (HH:MM)

LOCATION: AYE (towards bus), before Nanyang East

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLB7956K
 b) INSURANCE COMPANY: NTUC Income
 c) POLICY NUMBER: 5082025933-02
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Honda Vezel
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Own
 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: LEE KOK SEN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: SB410032C CONTACT: 97534315
 c) ADDRESS: Kim Hien Road #22-553, Block 129D Singapore 164127

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

*d) DATE OF BIRTH: 20/04/1984 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 26/08/2004

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)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: _____ MODEL: _____

b) DRIVER'S NAME: lee

c) NRIC/FIN/PASSPORT: _____ CONTACT: 76948026

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email = nicson.lee@ksb.com

fax =

DAD
MEM

No of passengers
(including driver)
(2)

No of passengers
(including driver)

No of passengers
(including driver)

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Portrait photo of a man with glasses.

Licence Number: **S8410032C**
Name: **LEE KOK SENG (LI GUOCHENG)**

Birth Date: **20 Apr 1984**
Issue Date: **26 Aug 2004**

Barcode: 001278359J

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

	PASS DATE
Class 3 Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg	26 Aug 2004

NP 428A

Licence No: S8410032C

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8410032C



Name

LEE KOK SENG
(LI GUOCHENG)

李 国 成

Race

CHINESE

Date of birth

20-04-1984

Sex

M

Country/Place of birth

SINGAPORE



5372326



NRIC No. S8410032C



Date of issue

21-10-2014

Address

APT BLK 127D KIM TIAN ROAD
#22-553
SINGAPORE 164127

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: 5082025933-02 **Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SLE2956K**
Chassis Number : **RU11117205**
2. Name of Policyholder : **LEE KOK SENG**
3. Effective Date of Insurance : **15 Jul 2018**
4. Expiry Date of Insurance : **14 Jul 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	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: LEE KOK SENG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: HL BANK
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 : JIN-SHI (HOLDINGS) PTE LTD (00000614399)
Date of Issue : 02 Jul 2018 17:24 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

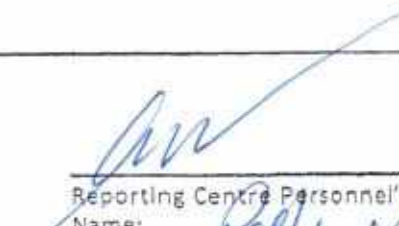
Original Report No: MHA418107617 Vehicle Registration No: SUE 2956K
Name (as shown in NRIC): LEE KOK SENG (LI QUN CHUAN) NRIC/FIN/Passport No: S24110032C
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address: _____ Singapore()
Contact (Tel): _____ Mobile No.: 97534315
Email Address: _____
Date of Accident: 19/08/2018 Time of Accident: 16:40
Place of Accident: BYK (TOWARDS TUAS) BEFORE NORMANNO PARK EXIT
Insurance Company: NMC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

TO INSERT TIP CONTACT NUMBER & NAME

Policyholder / Driver's Signature
Date:


Reporting Centre Personnel's Signature
Name: Redi ythors
NRIC/FIN No.: 28/08/2018
Date: