

NATIONAL Assessment Centre Services

(wef: Jan'05)

MA6811470

Date In: 10/09/2018 18:14	Job description	Date & Time Completed	Done by
Ref No: N8011160/68904	SAS e-filing		
Veh No: STM 6533C	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 09/09/2018 18:30	i-Motor Claim Form	Mil/1010965-001	11/09/2018
OD: TP: Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		12:34
	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: PH04871218a	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% P: 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>MA6805780</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>Cat. 1:</p> <p>Cat. 2 / 3:</p>	<p>Invoice Preparation Checklist</p> <p>1) AR : Accident Reporting (\$30);</p> <p>2) DA : Damage Assessment (\$100); INC (\$80)</p> <p>3) TF : Towing Fee \$40/\$45</p> <p>4) FT : Follow-Through Survey \$120</p> <p>5) FT : Follow-Through Survey (Resurvey) \$30</p> <p>For claiming against INC Only (wef 10 Jan 2005)</p> <p>6) TR : Re-inspection \$75</p> <p>7) N1 : Idac DA + SMRT Survey \$160</p> <p>8) NTUC Additional Services:-</p> <p>ON*</p> <p>*N5: Courtesy Car / Tpf Allowance \$5</p> <p>*N6: Repair Co-ordination \$10</p> <p>*N7: Post Repair Inspection \$25</p> <p>*N8: DV / Collect Excess Coordination \$5</p> <p>TP (N11) : TP (Non INC) against INC \$20</p> <p>9) N12: Idac Mobile 30</p> <p>Invoice dated: Fee Charged</p> <p>Invoice dated: Fee Charged</p>	<p>Amt (\$)</p> <p>1st Bill</p> <p>Amt (\$)</p> <p>Add Bill</p>
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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	10/09/2018 18:14
Date Of Accident	09/09/2018 18:30
Exact Location Of Accident	JUNCTION OF SOON LEE DRIVE AND PIONEER ROAD NORTH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM6533C
Insured/Policyholder	
Name Of Registered Owner	KARZ-TA LEASING
Co Reg No	53318368E
Email Address	KARZTALEASING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96791346
Alternative Phone No	OFFICE-96791346

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5083195710-02
Cover Note Number	

Driver

Name of Driver	CHIA TECK HEE
NRIC No	S1153937H
Date Of Birth	16/03/1955
Occupation	OUTDOOR
Date Of Driving Pass	27/09/1977
Driving Experience	40 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96791346
Fax Number	
Contact Number	OTHERS-96791346
Email Address	KARZTALEASING@GMAIL.COM

Address	BLK 823 JURONG WEST STREET 81 #06-468
Postcode	640823
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLIDED INTO PEDESTRIAN
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	1
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: : PASSENGER GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	RIVER VALLEY NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 4 DELTA AVENUE , POSTCODE: 161004 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2789999 - FAX NO: 62786427
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180909/2050

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	JAYAVEL MURUGAN THIAGARAJAN
NRIC/Passport Number	G8014937H
Contact Number	90289698
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.
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.

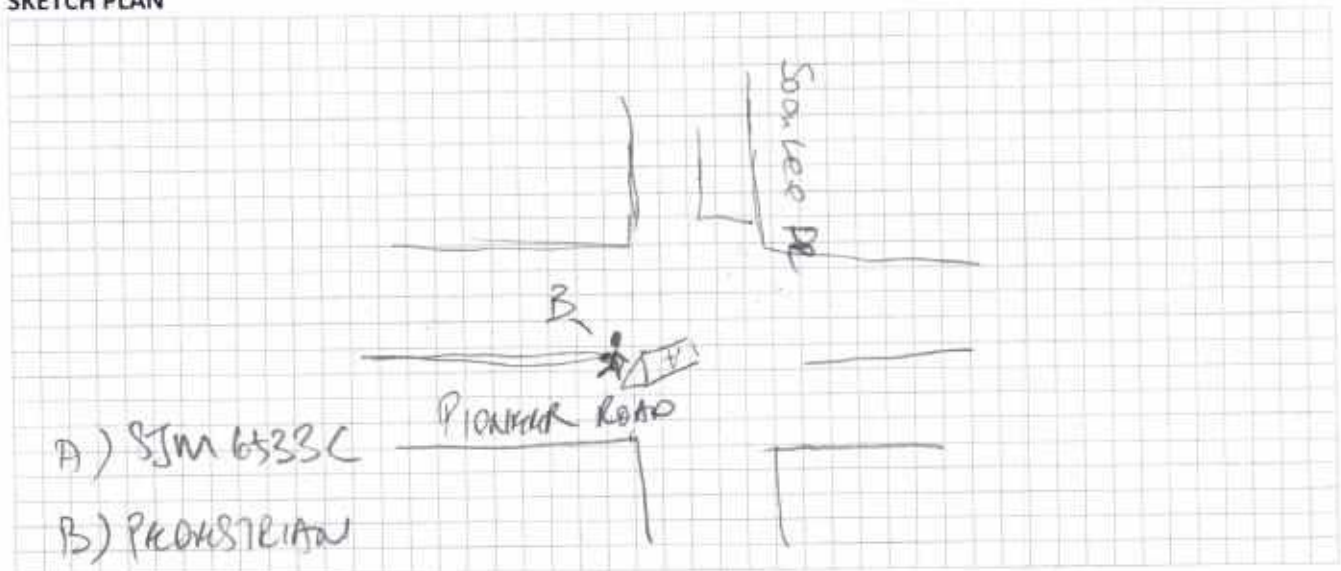


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



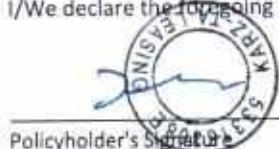
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police Report T/20180909/2050

Pedestrian was ok Not Injury.

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: *Rashid*
NRIC/FIN No.: *10/09/2018*



SINGAPORE POLICE FORCE



T/20180909/2050

1 of 3

Report No. T/20180909/2050

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/09/2018 15:24	Vide Report No.:	Station Diary No.: 21
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Informant's Particulars

Name of Informant: CHIA TECK HEE			Address: APT BLK 823 JURONG WEST STREET 81 #06-468 SINGAPORE 640823	
ID Type / ID No.: NRIC NO / S1153937H			Contact No.: Home/Office:	Mobile: 96791346
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 63	Date of Birth: 16/03/1955	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 09/09/2018 06:30	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 SOON LEE DRIVE PIONEER ROAD NORTH Traffic junction of Soon Lee Dr and Pioneer Rd North				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Pedestrian				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJM6533C	Car				No Damage	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20180909/2050

2 of 3

Report No: T/20180909/2050

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

CONTINUATION OF REPORT

Driver			
Name	CHIA TECK HEE	ID No.	S1153937H
Related Vehicle	SJM6533C (Car)	Contact No.	96791346
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Pedestrian			
Name	JAYAVEL MURUGAN THIAGARAJAN	ID No.	G8014618W
Related Vehicle	NIL	Contact No.	90289698
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL 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 09/09/2018 at around 0630hrs, my vehicle was at the traffic junction of Soon Lee Dr and Pioneer Rd North. When the light turned green, I proceed to make a right turn to Pioneer Rd North. When turning, I heard a bang on the right side of my vehicle. I stopped my vehicle and realized one pedestrian sitting on the road. I then rendered assistance to him. I asked him if he wanted ambulance but he said no need. I observed there was no visible injuries on him. He mentioned his backside hurt as such I then sent him to Ng Teng Fong Hospital to make a check.

I am not sure if there was any green arrow or any green man. There was no in-car camera in my vehicle and I was not sure if there was any LTA camera at the vicinity.



**SINGAPORE
POLICE FORCE**



T/20180909/2050

3 of 3

Report No. T/20180909/2050

Police Station Of Origin:

River Valley NPP

4 Delta Avenue #01-02 SINGAPORE 161004

Tel No: 1800-2789999

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 /

Sgt 3 GERALD WONG HOONG TEIK

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Contact No.:

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

09/09/2018 15:24

Classification Of Case:

SN 060



SINGAPORE
POLICE FORCE

SIGNATURE

Claim Handling

Accident MT/1010669

Policy No.	5083195710-02	Vehicle No.	SJM6533C	GST Registration No.	
Certificate No.					
Policyholder Name	KARZ-TA LEASING	Cover Type	Third Party	Policyholder NRIC	533183688
Product Code	FLEET INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	96791346	Special Remark		Contact No.(Home)	
Email Address		TCA	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	eCode	<input type="button" value="No"/>
KPK	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes
Accident Details					
Report Date	11/09/2018 12:26	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Pedestrian
Date of Accident	09/09/2018	Time of Accident hh:mm	18:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ECM No.	
Accident Location	JUNCTION OF SOON LEE DRIVE AND PIONEER ROAD NORTH				
Excess					
Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,000.00	Outside Singapore TP Excess	1,000.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	No
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	317 OUTRAM ROAD	Address 2	#01-03 CONCOQUE SHOPPING	Address 3	SINGAPORE 169075
Address 4		Address Type	Singapore address	Post Code	169075
Unit No.	B1-03	Related Policy Number	5083195710-02		
OT Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	16/03/1955
Unnamed driver Name	CHIA TECK HEE	Driver NRIC	S1153957H	Driving Experience	40
Register Date of Driver License	27/09/1977	Driver Age	63	Contact No.(Home)	
Contact No.(Mobile)	96791346	Contact No.(Office)		Address 3	SINGAPORE 640823
Address 1	BLK 823 #06-468	Address 2	ILANG WEST STREET 81	Post Code	640823
Address 4		Address Type	Foreign address		
Unit No.	06-468			Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Driver Vehicle No.	SJM6533C		
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		

Modification History




Claim 001

New

Claim Type *	OD-MX	Insured Name	KARZ-TA LEASING	Insured NRIC	533183688
Contact No.(Mobile)	83223232	Contact No. (Home)		Contact No. (Office)	NIL
Email Address		Vehicle Number	SJM6533C	TP	PEDES
Claim Description	SJM6533C / PEDESTRIAN ON 9 Sept 2018				
Preferred Workshop		Insured Liability	Not at Fault	Name of Preferred Workshop	
Repair Option	Yes	Preferred Workshop, Name unknown			
Date Registered		GTA report	Received	Claim Close Date	11/09/2018 12:31
Report Taken By	RUSLI WAHAB				
<input checked="" type="checkbox"/> Print AK letter					
<input type="button" value="Save"/> <input type="button" value="Submit"/>					

Attachment

Accident No.	MT/1010669	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	11/09/2018 12:34
Path *			
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	Category *	Confidential <input type="button" value="Normal"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	Urgency *
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="Normal"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="Normal"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="Normal"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="Normal"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="Normal"/>
<input type="button" value="Message Read"/>			
Attachment List			
Attachment	uploaded By/Date	Category	Urgency
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:34		Photo	Normal
Description			
Photos 2018-9-11			

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:34	Photos	Normal	Photos 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:34	Photos	Normal	Photos 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:34	Photos	Normal	Photos 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:31	Photos	Normal	Photos 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:31	Photos	Normal	Photos 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:31	Photos	Normal	Photos 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:31	Photos	Normal	Photos 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:31	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-9-11
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Sep 2018 12:31	SAS	Normal	SAS 2018-9-11

Video List

Uploaded By/Date	Folder Date	File Name	Source
		Display in New Window Scan and Uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: 09/09/2018 (DD/MM/YYYY), TIME: 18:30 (HH:MM)

LOCATION: Soon Lee Drive

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJM6533 C
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: Kara-TA Leasing
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Toyota Altis
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Hirer
 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: YA (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: CHIA TECK HEE (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S115393711 CONTACT: _____
 c) ADDRESS: B/K 823 Jurong West St 81 #06-468
S 640823

* d) DATE OF BIRTH: 16/03/1955 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 27 Sep 1977

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

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: Delta Ave. P Post

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: NA MODEL: _____

b) DRIVER'S NAME: _____

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

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: NA MODEL: _____

e) DRIVER'S NAME: _____

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

EMAIL = kartzaleasing@gmail.com

VIDEO = NA

1784990



IPC No: S1153937H




Blood Group: B+ Date of issue: 10-03-1994

Address:
APT BLK B23 JURONG WEST STREET 81
#06-468
SINGAPORE 2264

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(IES):

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	14 May 1977
Class 2A	Motorcycles between 201 cc and 400 cc	14 May 1977
Class 2	Motorcycles exceeding 400 cc	14 May 1977
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	27 Sep 1977
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	18 Jan 1978

Licence No: S1153937H



428A

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please turn to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	08/05/1987



Land Transport Authority

VOCATIONAL LICENCE

Licence No: S1153937H

Name: CHIA TECK HEE

Issue Date: 29/3/2011

Please visit www.lta.gov.sg to check the status of this vocational licence



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S1153937H

Name: CHIA TECK HEE

Date of Birth: 10 Mar 1955

Valid Until: 03 Apr 2003




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1153937H

Name: CHIA TECK HEE

Race: CHINESE

Date of Birth: 16-03-1955

Country of Birth: SINGAPORE

Sex: M





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: 5083195710-02

Cover : Third Party

1. Index mark and Registration Number of Vehicle

: **SJM6533C**

Chassis Number

: **MR053EE106131150**

2. Name of Policyholder

: **KARZ-TA LEASING**

3. Effective Date of Insurance

: **18 Aug 2018**

4. Expiry Date of Insurance

: **17 Aug 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 or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) 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)	: N/A
EXCESS (SECTION 2)	: S\$1,000
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : **COWELL INSURANCE (AGENCY) PTE LTD (00000610380)**

Date of Issue : **23 Jul 2018 12:07 hrs**

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Transaction ref 20180626121230237964

The owner and vehicle particulars for Vehicle No. SJM6533C as at 26 Jun 2018 are as follows:

1.	Name	: KARZ-TA LEASING
2.	Identification No. Type	: Business
3.	Identification No.	: 53318368E
4.	Country/Region	: -
5.	Vehicle No.	: SJM6533C
6.	Previous Vehicle No.	: -
7.	Effective Date of Ownership	: 21 Jun 2018
8.	Original Registration Date	: 13 Jan 2009
9.	First Registration Date	: 13 Jan 2009
10.	Vehicle Type	: Z10 - Private Hire (Chauffeur) Motor Car
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	: -
14.	Attachment 3	: -
15.	Vehicle Make	: TOYOTA
16.	Vehicle Model	: COROLLA ALTIS 1.6 AUTO
17.	Year of Manufacture	: 2008
18.	Primary Colour	: Beige
19.	Secondary Colour	: -
20.	Passenger Capacity	: 4
21.	Chassis/Trailer Chassis No.	: MR053ZEE106131150 / -
22.	Propellant	: Petrol
23.	Engine No./Motor No.	: 3ZZ4837897 / -
24.	Engine Capacity(cc)/Power Rating(kW)	: 1598 / -
25.	Maximum Power Output(kW/bhp)	: 80.0 / 107
26.	Unladen Weight(kg)	: 1195
27.	Maximum Laden Weight(kg)	: 1630
28.	Open Market Value	: \$16,167.00
29.	PARF Eligibility	: Yes
30.	PARF Eligibility Expiry Date	: 12 Jan 2019
31.	Minimum PARF Benefit	: \$8,083.00
32.	No. of Transfers	: 1
33.	IU Label No.	: 1122705130
34.	COE No.	: 2009020101000097G
35.	COE Expiry Date	: 12 Jan 2019
36.	COE Category	: A - Car (1600cc & below)
37.	Quota Premium/Prevailing Quota Premium	: \$5,001.00
38.	Actual Quota Premium/PQP Paid	: \$5,001.00
39.	Actual ARF Paid	: \$16,167.00
40.	CO2 Emission(g/km)	: -
41.	CO Emission(g/km)	: -
42.	HC Emission(g/km)	: -
43.	NOx Emission(g/km)	: -
44.	PM Emission(mg/km)	: -
45.	Actual CEVS/VES Rebate Utilised	: -
46.	CEVS/VES Surcharge Paid	: -
47.	Actual Green Vehicle Rebate Utilised	: -
48.	Vehicle Lifespan Expiry Date	: -
49.	Nett Road Tax Amount	: -
50.	Road Tax Start Date	: -