NATIONAL Assessment Centre 's	el Pices best Charges N/ATHULL XZC)Z	
Date In: 151101200 11:54. 11	ch description Date &Time Completed Done	16
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Salah Mar Mill TO TI	E-mail (within Shrs, AIC 2hrs)	
DO: 10 11-10-11 10-11	AMULIANO AL	010
	-Motor W/O (Within: OD 2hrs, TP 4hrs)	alo
	i-Photo Uploaded	*13
	Assessment/Survey Report	11
	Ass't Report by Fax / Hand to Owner/Wksp	0.00
Preferred Wksp / INC Assign Wksp / QW: (Tel: Fax:	
TP Particulars: Veh No: SMI	7852C . INC()/Non-INC()	
Owner / Driver: (Tel:	
Policy No: () Period: ((1888)	
Confirmed by : (Date: Time:	
Insured/Driver Liability: (%) [Note-	Est Status (WO): N: 0-20%; P: 21-79%, F: 80-100%]	
Year of Registration: () Warra	nty: YES ()/NO ()	
Excess: (\$) Loading: \$1,000 ()/\$2,000()	
General Remarks;-	在"性性是我egg 并且要是是一种的特殊是是这种。"	-
() Walk-In Customer: Customer's information	on strictly Confidential & Strictly NO refer of repairer.	-
() Total Loss Case : to e-mail Insurer UR	GENTLY.	
Drive-In () / Towed-In (); Invoice: YES		V.
TV Factor and the second secon	, , , , , , , , , , , , , , , , , , ,	
1) 4 - 1 6 - 7	Date&Time Completed Done b	/
1) Apply for Transport Allowance () / Courtes	sy Car ()	
2) OC Check / Pour Rennis Inspection		
QC Check / Post Repair Inspection Upload Resurvey Photo [Persair Cost > \$2000]		
3) Upload Resurvey Photo [Repair Cost > \$3000]	()	
	()	
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July: Date/Time Actions Claimant's Particulars:- river/Owner: ontact No:	1) AR : Accident Reporting (530); 2) DA : Damage Assessment (\$100); INC (\$80) 3) TF : Towing Fee \$44/\$45 4) FT : Follow-Through Survey \$120	
July: Date/Time Actions Claimant's Particulars:- river/Owner: ontact No:	1) AR : Accident Reporting (530); 2) DA : Damege Assessment (\$100); INC (\$80) 3) TF : Towing Fee \$44/\$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	
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3) Upload Resurvey Photo [Repair Cost > \$3000] Injury: Date/Time Actions Claimant's Particulars:- Oriver/Owner: Contact No: Camaged Portion: C Checked by (Engr-In-Charge):	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 : Idae DA + SMRT Survey \$160 8) NTUC Additional Services:- OD: *N5: Courtesy Car / Tpt Allowance \$5 *N6: Repair Co-ordination \$10 *N7: Post Repair Inspection \$25	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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. 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.

THE PARTY WILLIAM TO SERVE	ACCIDENT STATEMENT
Date Of Report	15/10/2018 11:54
Date Of Accident	12/10/2018 19:15
Exact Location Of Accident	ALONG BALESTIER ROAD TOWARDS SERANGOON ROAD
Country/State of Loss	SINGAPORE
25 (a) 1 3 (A) (4 (a) (b) (b) (b) (b) (b) (b) (c) (b)	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GY1619U
Insured/Policyholder	
Name Of Registered Owner	HOME CLEANZ CLEANING & LAUNDRY SERVICES PTE. LTD.
Co Reg No	201130544H
Email Address	RYKPANG@YAHOO,COM
Mobile Phone No	(LOCAL) +65-96818208
Alternative Phone No	OFFICE-96818208
Vehicle Particulars	
Manufacturer	NISSAN
Model	URVAN
Exact Purpose for which vehicle was being used at time of accident	GOING BACK HOME FROM WORK
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5053322165-06
Cover Note Number	
Driver	
Name of Driver	PANG YUK KWEI RICHARD
NRIC No	S0154880H
Date Of Birth	22/11/1953
Occupation	INDOOR
Date Of Driving Pass	22/06/1975/
Driving Experience	43 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96818208
Fax Number	ATHEOROGICAL DESCRIPTION OF STREET
Contact Number	OTHERS-96818208
29813767 ²⁰⁰	

RYKPANG@YAHOO.COM

Address

BLK 476 ANG MO KIO AVENUE 10

#11-816

Postcode

560476

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

£

Insurance Company of Driver's Own Vehicle

*

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

NO

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO NO

YES

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

4

Details of Police Action

Was the accident reported to the police?

Number of Passengers (Including Driver)

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?

Was there any video captured by Car Camera?

YES NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMA7852C

Vehicle Make/Model/Colour

NISSAN

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

S7028675J

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.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 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:
 - 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 policy)

Date & Time:

Reporting Centre Persoonel's Signature

Name:

NRIC/FIN No

The Accordance of the Accordance	
On the 12-10-20/8 (Fri Fay), around 1917 hrs, while diving	along
balesties road forante scrongon Road, from vehicle, 1	
Res No SNA 7852C, suddenly stepped on his bake. Upe	
it, I applied my brake too, but, due to heavy i	ainera,
my vehicle GY1619h stor plided towards 8x1 785	DC and
dightry het the sear of his vehicle-Photos ner.	e teken
to show no serious donage to vehicle EMA 7853C	
Both parties exchanged particulars and left in an	
to avoid traffir Jan to other wors.	
det's are	
JhDay L	
Rulerd fory Yule Klive	
58/57880H	
	2

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 Rignature
Name:
NRIC/FIN No.:

| NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN No.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: | NRIC/FIN NO.: |

ccident MT/1015610					
today No. Sertificate No.	1053792165-06	Weblick No.	0Y1819U ,	GST Registration his	2011305446
		0.0000000000000000000000000000000000000		25000 HOVER DESCRIPTION	
Policyholder Name Product Cade	HOME CLEANZ CLEANING & LAUNDRY SERVI	99.0 (Maring St. 1997)		Policyhalaer NRIC	20113US#4#
	COMMERCIAL VEHICLE INSURAL.	Cover Type	Third Party, Fire & Theft	Loading	II.
Contact No (Mobile) Email Address	96818208	Contact No.(Office) Special Remark		Contact No. (Home)	Territoria de la compansión de la compan
RFR.	- No 145	TCA	+ No VEN	eCode Welsson	[Ma 7]
NCD Frenenties	Tan	NCO Entitlement(%)	15	Private Hire	No
Accident Details	en-	-1500-5100-6100-4200		COMME THE	100
Report Date	15/10/2018 12:13	Accident Report Witten 24 hrs	Tel	Accident Type	Collision - Head to Rear
Date of Accident	±3/10/2018 > X	Time of Accident his non	19:20	Country of Accident	Sinsepore
Reporting Contra		Urange Force		JCM No.	
Acodem Location	ALONG BALESTIER RUAD TOWARDS SERAND				
₩ Excess					
Own deinage Excess	0.00	Additional Excess		Windscreen Evcest	0.00
Unnamed Driver Excess		Quantité Singapore DO Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			
Benefita					
GST Registered Informat	lion				
GST Nayetered	Yes		GST Registration Date	01/01/2013	
GST Registration No.	2011305449		GST Status Verified	Xes	
Modification History					
	200				
Policyholder Hailing Add	Inflante recognise victorial	HENWEST		1000000	- Jugar-Jag-Januari
Address I	7 JALAN SAUDARA KU	Appress 2	SEASCOE PARK	Address 3	SINGAPORE 457444
2766		Address Type	Singapore address	Post Code	HS7444
Unit No.		Related Palicy Number	5104197216		
Driver Name	Unitamed Driver	manuscript.	Upramed Driver		
unnamed gover Name	PANE YUK KWEI RICHARD	Driver Type Driver NATIC	S0154880H	Driver OOR	22/11/2017
Register Date of Driver Livenise	22/06/1975	Driver Age	64	Driving Experience	22/11/1951
Contact No. (Mobile)	96818200	Cirriatz No.(Diffice)	37.	Contact Neutrome:	25%
Address 1	BLK 476 #11-816	Address I	ANG MO KID AVENUE 10	Address 3	TEDX GHEE HORIZON
Address 4	SINSAPORE 566476	Address Type	Foreign address	Fost Code	360475
Gers Wei.:	11-016	DIFFE STOWNS			-
Dies he own a Singapore Registered car?	Yes + No	Driver Velocite No.	G11619U	Driver Insurer Company	NTUC
Declaration					
Breathalyser or Blood Test	0 mg	Any injury?	Yes - No		
(MEMAZ)					
WHI WALL					
Modification History Claim 001 Nave	20		CO-Mx	* Insured HOME CLEANZ CLI	EANING & LAL Shaured 201.
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Claim 1001 Nave Claim Type * Contact No. (Moddle) Email Address Claim Description Preferred Workshop Balanet No. Yes Date Registered Report Yaxen By ** Point AK letter Attachment ** Accident No. Leel Doc. Reperced	# Tagair Preferred Workship. Preferred Workship. Preferred Workship. Preferred Workship.	Name unknown QLE Recorder	PHILIMUTE GHOME: O'12619U / SMA/PE ES/10/2019 12/10 ROSLI WAHAE Save Submit	Comatt No. (Parme) ILEANZ.COM Vehicle GY3539J Number Claim Claim Claim Claim	Contract No. 649 (Office) TP Veticle Number Name of Perferred Workshop Date Received 15/1
Claim 19pe * Contact No. (Modele) Email Address Claim Description Professed Workshop Edelect No. Yes Date Registered Report Texes By # Point AK letter Attachment	# Tagair Preferred Workship. Preferred Workship. Preferred Workship. Preferred Workship.	Name unknown QLE Recorder	#HUIMUTEGHOME: #HUIMUTEGHOME: EV1019U / SMAPE EV10/2018 12:19 ROSLI WAHAE Sawe Submit 001 15/13/2018 12:19	Comatt No. (Parme) ILEANZ.COM Vehicle GY3539J Number Claim Claim Claim	Contract Contra
Claim 001 New Claim 001 New Claim Type * Contact No. (Moddle) Email Address Claim Description Preferred Workshop Estates No. Yes Date Registered Report Taxen By * Point AK letter Attachment ** Accelent No. Leel Doc. Sec	# Tagair Preferred Warkship. Preferred Warkship. Preferred Warkship. # True - No. Path -	Name unknown QLE Recorder	######################################	Comatt No. (Parme) IEANZ.COM Vehicle (CY3639U) Number Clare Clare Date Confidential Un	Contact No. (Game) (Office) (Office) (No. (Game) (No.
Claim Type * Contact No. (Moddle) Email Address Claim Description Preferred Workshop Ballest No. Yes Date Registered Report Taxen By # Point AK letter Attachment # Accelert No. Leel Doc. Received Choose File No file chosen	# Tegor Preferred Workshop ###################################	Name unknown QLE Recorder	######################################	Comatt No. Charme Clare	Contract Contract No. Contract N
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Uploaded By/Date

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開業	NAC_BURIT_MERAH_BODG/OF NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 13 Oct 2018 12:19	NRIC/ Driving License	Normal	NRICE Driving License 2018-12-15
663	NAC_BURIT_MERAH_BOOKTA(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BURIT MERAH)) on 15 Oct 2018 12:19	SAS	Normal	SAS 2018-10-15
	NAC_BURIT_MERAH_HOOK26(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 15 Oct 2018 12:19	Photos	Fiormal	Photos 2018-10-15
	NAC_BURIT_MERAH_BO0678(NATIONAL ASSESSMENT CENTRE SERVICE \$ (BURIT MERAH)) On 15 Oct 2018 12-19	Prerena	Normal	Photos 2018-10-15
	NAC_BURIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 15 Oct 2016 12:19	Photos	Normal	Photos 2018-10-18
	NAC_BURIT_MERAH_BOOKFA(NATIONAL ASSESSMENT CENTRE REFVICE S UNIXE MERAH)) on 15 Dit 2018 12:19	Photus	Normal	Protos 2018-10-15
	NAC_BURLT_MERAH_MOSS76/ NATIONAL ASSESSMENT CENTILE SERVICE 5 (BURLT MERAH)) on 15 Oct 2018 12-19	Protos	Normal	Photos 2018-10-18
	NAC_BURTT_MERAH_BOORZE; NATIONAL ASSESSMENT CENTRE SERVICE 5 (BURCT MERAH)) on 15 Oct 2018 12-18	Photos	Normal	Phinos 2018-10-15
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2	NAC_BURIT_MERAH_BOOK/S(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH) on 15 Oct 2016 12:19	Phutas	Normal	Photos 2018-18-18
77				

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File Name

Folder Date

rsbm

From:

rsbm <rsbm@lkkauto.com>

Sent:

Thursday, 25 October, 2018 5:45 PM

To:

'Theresa Vimala D/O Balagangadharan'

Subject:

MT/1015610-001 GY1619U

Hi Theresa the above mention date of accident date should be 12/10/2018 instead of 13/10/2018 type wrongly in the ebao thanks.

Thanks & Best Regards,

ROSLI WAHAB

NACS Bukit Merah Tel: 6898 0055

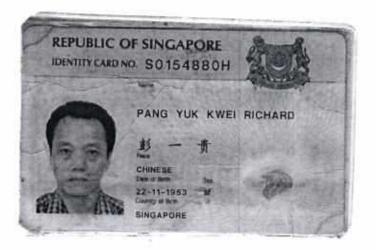
Fax: 6271 8802

Email: rsbm@lkkauto.com

ACCIDENT STATEMENT

ACCI	DENT DATE: 12 10 2018 (DD/MM/YYYY).	TIME:(15 : 1 +)(HH:MM) .
2 -	N 01.01 - D 1	
LOCA	TION: 15/0-10 Dallie Food Rea	
1	DETAILS OF VEHICLE	*ACCORD
(4.4	alvehicle NUMBER: GY1619 L1	***
		utr e
4	700 - 211 - 61	
		The second control of
	O POLICY TYPE: (COMPREHENSIVE / THIRD PART))
	I)TYPE: (SALOON / COUPE / MPV /VAN / LORRY /	
		/ / / / / / / / / / / / / / / / / / /
	h) PURPOSE OF USING AT ACCIDENT TIME:	A CANA FACE HOME A/F VOI
	I) ARE YOU CLAIMING UNDER YOUR OWN INSUR-	ANCE (YES/NO)
	IF NO, PLEASE STATE (THIRD PARTY CLAIM / REP.	
2	INSURED / POLICY HOLDER	
4-1	A)NAME: HOMECHANZ CHEFTIN , NOW day See	VICE PLYMALE / FEMALE)
	b) NRIC/FIN/PASSPORT:	CONTACT:
	CLADDRESS: I Daton Sandara K	L
	SALASAAA ASSA SALASA	
	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOL	DER
St Ho of passongs	DRIVER BANK 10 10 6 mm = 12 Can 1	
(Including driver)	a) NAME: 1000/ 1000 - WELL COLLEGE	(MALE / FEMALE)
(1)	DINKIC/FIN/F A33FOKI.	CONTACT: 960 000
(1)	CIADDRESS: At 476 by Mo Keo bus	10 # 11-816
	5/560776)	1 to account
20	*d)DATE OF BIRTH: (33/ 1/ //543) (DD/M	M/YYYY)
	e OCCUPATION: (INDOOR / OUIDOOR)	Luio .
4	MAS DRIVER AN EMPLOYEE OF THE INSURE	O'S COMPANY? (YES / NO)
1 2 990	IF NO, RELATIONSHIP OF THE DRIVER WITH	
5	DIWEATHER CONDITION: (CLEAR / RAINING / O	
54	b)ROAD SURFACE: (DRY / WET / OTHERS	
6.	WAS ANYBODY INJURED (XES / NO)	
7.		
	IF YES, PLEASE STATE WHICH POLICE STATION:_	
. 8.	THIRD PARTY VEHICLE	MODEL WISSEL
total of Missinger	O) VEHICLE NUMBER: SMA 7852 C	MODEL: N.33 & L
Charlesting det in	b) DRIVER'S NAME: 5 70 28 674 7	
T	C) INRIC/FIN/F ASSFORT.	_CONTACT: (1/c=
	THIRD PARTY VEHICLE	LANDEL .
History protessor	d) VEHICLE NUMBER:	_MODEL:
The Countries which was	e) DRIVER'S NAME:	_CONTACT:
e or a may entry) f) NRIC/FIN/PASSPORT:	_CONTACTO
	.7	

EMPLL = rykporg @ yahoo.com VIOEO = NiC









eBaoTech Hello, NAC_BUKIT_MERAH_800676

GeneralClaim

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Policy Query

Policy No. Vehicle No.(For Motor) GY1619U

Date of Accident Certificate Number

12/10/2018 10:16

Search

Certificate Number Select Policy No.

Policyholder Name HOME

Policyholder NRIC Product Cover Type

Vehicle No.

Insured Commence Object Date

Expiry Date

5053322165-

CLEANZ CLEANING & LAUNDRY SERVICES PTE. LTD.

201130544H

Third Party, GY1619U GY1619U 13/01/2018 12/01/2019

Continue