

# NATIONAL Assessment Centre Services (W&A) (2010)

MA04/18139059

Date In: 26/10/2018 11:02	Job description	Date & Time Completed	Done by
Ref No: N/A/18139059/9488/4	S&S e-Milling		
Veh No: CB 7350Y	E-mail (within 3hrs, AIC 3hrs)		
D.O.A: 25/10/2018 18:15	1-Motor Claim Form	MT/1017258-001	26/10/2018 11:26
OD / TP & Reporting Only	1-Motor W/O (within 3hrs, TP 3hrs)		
	1-Photo Uploaded		
TP Insured:	Assessment/Survey Report		
	Ass'l Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / OW: (	Tel: (	Fax: (
TP Particulars: Yeh No: SJM 929 J	INC ( ) / Non-INC ( )	
Owner / Driver: (	Tel: (	
Policy No: (	Period: (	Cover Type: (
Confirmed by: (	Date: (	Time: (
Insured/Driver Liability: ( %)	(Note: BSL 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 ( ) / Non-INC ( )	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

Human's Particulars	Invoice Preparation Checklist	Amount (\$)	Amount (\$)
Driver/Owner:	1) AR: Accident Reporting (330)		
Contact No:	2) DA: Damage Assessment (3100)	INC (330)	
Damaged Portion:	3) TP: Towing Fee	\$40/\$43	
	4) FT: Follow-Through Survey	\$130	
	5) RT: Follow-Through Survey (Resurvey)	\$30	
	6) TR: Re-inspection	\$33	
	7) NI: IDA + SMRT Survey	\$160	
	8) NTUC Additional Services		
C. Checked by (Ungr-In-Charge):	9) NI: IDA + SMRT Survey	\$160	
	10) NTUC Additional Services		
	11) NI: IDA + SMRT Survey	\$160	
	12) NTUC Additional Services		
	13) NI: IDA + SMRT Survey	\$160	
	14) NTUC Additional Services		
	15) NI: IDA + SMRT Survey	\$160	
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	17) NI: IDA + SMRT Survey	\$160	
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	97) NI: IDA + SMRT Survey	\$160	
	98) NTUC Additional Services		
	99) NI: IDA + SMRT Survey	\$160	
	100) NTUC Additional Services		



## 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 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.

### ACCIDENT STATEMENT

Date Of Report	26/10/2018 11:02
Date Of Accident	25/10/2018 18:15
Exact Location Of Accident	ALONG TELOK BLANGAH ROAD TOWARDS CITY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	CB7350Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HU YANPING
NRIC No	S2682551B
Email Address	ANNAGARY97@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-98188008
Alternative Phone No	OTHERS-84537988

### Vehicle Particulars

Manufacturer	JOYLONG
Model	HKL6540RC-2.8 D LWB (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095587773-01
Cover Note Number	

### Driver

Name of Driver	CHONG GUAN LENG
NRIC No	S1431928Z
Date Of Birth	05/07/1960
Occupation	OUTDOOR
Date Of Driving Pass	15/03/1978
Driving Experience	40 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84537988
Fax Number	
Contact Number	OTHERS-98188008
EMail Address	ANNAGARY97@YAHOO.COM.SG

Address	BLK 45 TELOK BLANGAH DRIVE #14-163
Postcode	100045
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	SIDE SWIPE
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)	4
Passenger 1	NAME: : WORKING COLLEAGUE GENDER: : FEMALE
Passenger 2	NAME: : SCHOOL CHILDREN GENDER: : MALE
Passenger 3	NAME: : SCHOOL CHILDREN GENDER: : MALE

#### 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	SJM929J
Vehicle Make/Model/Colour	TOYOTA VELLFIRE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PETER NG
NRIC/Passport Number	
Contact Number	97659253

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



## SKETCH PLAN

### IMPORTANT NOTICE

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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:

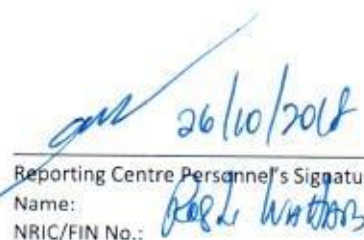
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:



26/10/2018  
Reporting Centre Personnel's Signature  
Name: *Paul Watson*  
NRIC/FIN No.:

SKETCH PLAN

ALONG TOLAK BERINGHAY ROAD TOWARDS CITY

TAXI STATION

SURROUNDS

X1

X2

SUDDENLY BRIDGE

A1

X1

A2

B1

A) CB 7350Y  
B) SJM 929J  
X) UNKNOWN TAXI

A) CB 7350Y  
B) STM 929J  
X) UNKNOWN TAXI

ON 25/10/2018 AT ABOUT 18:15 HRS I WAS DRIVING MY VAN CB7350Y  
ALONG TELUK BLANGAH ROAD ON THE 1ST LANE & ON THE  
2ND LANE A TAXI SUDDENLY SWITCH LANE & BRAKE & MANOEuvre  
TO SWERVE TO THE RIGHT BUT MY VAN SIDE SWIPED WITH  
A CAR SPM 929J WHICH WAS ON THE 3RD LANE. WE STOP AT THE  
SIDE ROAD & EXCHANGE PARTICULARS.

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

Reporting Centre Personnel's Signature  
Name: Res. Wright  
NRIC/FIN No.: 26/10/2018



## Claim Handling

Accident MT/1017258

Policy No.	509558773-01	Vehicle No.	CB7350Y	GST Registration No.	
Certificate No.					
Policyholder Name	HU YANPING			Policyholder NRIC	S26825518
Product Code	FLEET INSURANCE	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	98188008	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	+ No Yes	TCA	+ No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No
<b>Accident Details</b>					
Report Date	26/10/2018 11:21	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	25/10/2018	Time of Accident hh:mm	18:15	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG TELOK BLANGAH ROAD TOWARDS CITY				
<b>Excess</b>					
Own damage Excess	2000.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	1500.00	Outside Singapore TP Excess			
<b>Benefits</b>					
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
<b>Policyholder Mailing Address</b>					
Address 1	BLK 86 #29-273	Address 2	TELOK BLANGAH HEIGHTS	Address 3	SINGAPORE 100086
Address 4		Address Type	Singapore address	Post Code	100086
Unit No.		Related Policy Number	5087460825-01		
<b>Q1 Driver Info</b>					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	05/07/1960
Unnamed driver Name	CHONG GUAN LENG	Driver NRIC	S14319288	Driving Experience	40
Register Date of Driver License	15/03/1978	Driver Age	58	Contact No.(Home)	
Contact No.(Mobile)	84537988	Contact No.(Office)		Address 3	BLANGAH COURT
Address 1	BLK 45 #14-163	Address 2	TELOK BLANGAH DRIVE	Post Code	100045
Address 4	SINGAPORE 100045	Address Type	Foreign address		
Unit No.	14-163				
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.	CB7350Y	Driver Insurer Company	NTUC
<b>Declaration</b>					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes + No		

Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	HU YANPING	Insured NRIC	S2682	
Contact No.(Mobile)		Contact No.(Home)	NIL	Contact No.(Office)		
Email Address		Q1 Vehicle Number	CB7350Y	TP Vehicle Number	SJM92	
Claim Description	CB7350Y / SJM9291 ON 25 Oct 2018				Name of Preferred Workshop	
Preferred Workshop Finalisation	Yes	Preferred Repair Option	Preferred Liability	Fully at Fault	GIA report	Received
Date Registered	26/10/2018 11:25	Claim Close Date		Date Received	26/10/	
Report Taken By	ROSLI WAHAB					
<input checked="" type="checkbox"/> Print AK letter						

Save Submit

## Attachment

Accident No.	MT/1017258	Claim No.	001		
Last Doc. Received	Yes No	Upload Date	26/10/2018 11:26		
Path *					
Choose File	No file chosen	Clear	Please Select		
Choose File	No file chosen	Clear	Please Select		
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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		Clear	Please Select		
<b>Attachment List</b>					
Attachment	Uploaded By/Date	Category	Urgency	Description	M
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 26 Oct 2018 11:26		Photos	Normal	Photos 2018-10-26	

	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	Photos	Normal	Photos 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	SAS	Normal	SAS 2018-10-26
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Oct 2018 11:26	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-10-26

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: 25/10/18 (DD/MM/YYYY), TIME: 18:15 pm (HH:MM)  
LOCATION: Telok Blangah Road

## 1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: CB7350Y  
b) INSURANCE COMPANY: NTUC  
c) POLICY NUMBER: 5095587773-01  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: TOYOTA  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: WORKING  
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: HU YOUNG (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S2682551B CONTACT: 98788008  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

a) NAME: CHENG GUAN HUI (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S14319282 CONTACT: 84537988  
c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 05/07/1960 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 15/03/1978

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

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: SJM 929J MODEL: TOYOTA VALVE  
b) DRIVER'S NAME: PETER NG  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 97659253

## 9. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: \_\_\_\_\_  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

email = anna gary 97 @ yahoo.com.sg

fax =

VIDEO

Driver

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1431928Z



Name

CHONG GUAN LENG

莊源龍

Race

CHINESE

Date of birth

05-07-1960

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1431928Z

Name

CHONG GUAN LENG

Birth Date: 05 Jul 1960

Issue Date: 17 Feb 2004



Land Transport Authority

VOCATIONAL LICENCE

Licence No: S1431928Z

Name: CHONG GUAN LENG

Issue Date: 30/9/2011

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence



4674279

NRIC No: S1431928Z



Date of issue

11-01-2011

APT BLK 45 TELOK BLANGAH DRIVE #14-163  
SINGAPORE 100045

NRIC No: S1431928Z

Date: 20/02/2011

No: 6574344

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PAS DATE

Class 2B Motorcycles <= 200 CC  
Class 3 Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg  
Class 4 Heavy motor cars and motor tractors > 2500 kg

11 Feb 1985

15 Mar 1978

28 Nov 2004

S1431928Z

S / No. 9000028557



NP 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 return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	04/11/1998
02	TAXI VL	22/03/1991
04	BUS ATTENDANT	04/11/1998





swanah

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2682551B



Name

HU YANPING

胡燕萍

Race

CHINESE

Date of birth

15-12-1965

Sex

F

Country of birth

CHINA



3849014



NRIC No S2682551B



Date of issue

02-03-2006

Address

APT BLK 86 TELOK BLANGAH HEIGHTS  
#29-373  
SINGAPORE 100086

## 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 : 5095587773-01

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle : **CB7350Y**  
Chassis Number : **LJKA3BG4DD850124**
2. Name of Policyholder : **HU YANPING**
3. Effective Date of Insurance : **17 Jan 2018**
4. Expiry Date of Insurance : **16 Jan 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 the carriage of passengers in connection with the Policyholder's business.
  - (b) Limited to carry 14 passengers.

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

\* 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.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: S\$2,000
EXCESS (SECTION II)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: NO
HIRE PURCHASE COMPANY	: ABWIN PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE LESS RESIDUAL COE/ PARF VALUE 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 : NLE INSURANCE AGENCIES PTE LTD (00000614580)

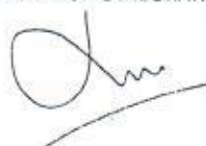
Date of Issue : 09 Jan 2018 17:50 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



**Enquire Vehicle Registration Details****Owner Particulars**

NRIC/Passport/Company  
Cert No.: S2682551B  
Owner ID Type: Singapore NRIC  
Owner Name: HU YANPING  
Registered Address: APT BLK 86 TELOK BLANGAH HEIGHTS #29-373 SINGAPORE 100086  
Mailing Address: -  
Birth Date: 15 Dec 1965

**Vehicle Particulars**

Vehicle No.: CB7350Y  
Previous Vehicle No.: -  
Effective Date of Ownership: 31 Dec 2013  
Original Regn Date: 31 Dec 2013  
Registration Date: 31 Dec 2013  
Year of Manufacture: 2013  
Vehicle Type: School Transport Bus/Coach/Minibus  
Vehicle Scheme: School Bus with AWC  
Vehicle Attachment 1: Air-Conditioned  
Vehicle Attachment 2: -  
Vehicle Attachment 3: -  
Vehicle Make: JOYLONG  
Vehicle Model: HKL6540RC LWB  
Primary Colour: Multi-Colored  
Secondary Colour: -  
Passenger Capacity: 14  
Chassis No.: LJSKA3BG4DD850124  
Engine No.: ISF28S5129T89594609  
Engine Capacity/Power  
Rating: 2776 cc / -  
Maximum Power Output: -  
Propellant: Diesel  
Max Unladen Weight: 2480 kg  
Maximum Laden Weight: 3490 kg  
Open Market Value: \$33,900.00  
PARF Eligibility: No  
PARF Eligibility Expiry Date: -  
Minimum PARF Benefit: -  
No. of Transfers: 0  
IU Label No.: 1550234925  
COE No.: -  
COE Expiry Date: -  
COE Category: -  
COE Registration Category: -