

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	29/11/2018 11:36
Date Of Accident	28/11/2018 22:15
Exact Location Of Accident	BUKIT BATOK WEST AVENUE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW8560X
Insured/Policyholder	
Name Of Registered Owner	SU WEIXIANG
NRIC No	S8603361E
Email Address	SUWEIXIANG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-81277109
Alternative Phone No	OTHERS-81277109

Vehicle Particulars

Manufacturer	TOYOTA
Model	HARRIER-2.0 ELEGANCE (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	5099248928
Cover Note Number	

Driver

Name of Driver	SU WEIXIANG
NRIC No	S8603361E
Date Of Birth	11/02/1986
Occupation	INDOOR
Date Of Driving Pass	11/06/2008
Driving Experience	10 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81277109
Fax Number	
Contact Number	OTHERS-81277109
Email Address	SUWEIXIANG@HOTMAIL.COM

Address	BLK 90B TELOK BLANGAH STREET 31 #11-237
Postcode	102090
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	COLLISION - MAJOR/MINOR RD
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)	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 (TYPE OF COLLISION IS HEAD TO SIDE)

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD7142L
Vehicle Make/Model/Colour	HYUNDAI SONATA
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN AI HING
NRIC/Passport Number	S1292290F
Contact Number	93682029
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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: 29/11 9:39

Driver's Signature

(If driver is not the policyholder)

Date & Time:

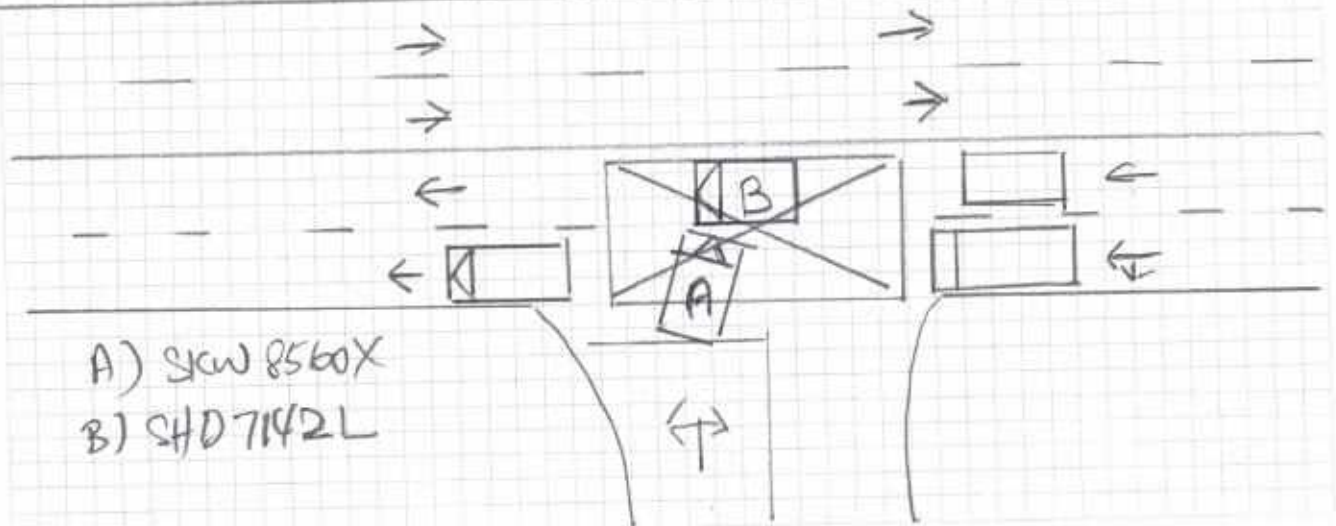
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

SKETCH PLAN

BAKIT BATOK WEST AVENUE 5



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was turning out of a carpark. Two lanes on both sides of the road. Traffic light turned red on my left so vehicles were stopping and queuing up. The van stopped before the yellow box and allowed me to move out. I was intending to make a right turn to the opposite side of the road. As I inch out slowly, I checked to see if any incoming traffic from the left. When I turn my head back the taxi (accident ^{counter} party) was right in front of me and we banged. You can see from the footage that I was moving out very slowly and my headlight and front of the car is clearly visible. The van that stopped for me to pass is proof that the traffic light was red. The taxi was moving at a relatively fast speed.

DECLARATION

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

Policyholder's Signature

Date & Time: 29/11 9:44

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

29/11/2018

Kelli 114/1100

2015-2016

2015

2015

2015

ASSOCIATED MOTORISTS

By Assessor- 1) Initial Assessment

- 1) Vehicle hit Vehicle:
 - a) Motorcycle ()
 - b) Moped ()
 - c) Bicycle ()
- 2) Vehicle hit:
 - a) Pedestrian ()
 - b) Animal ()
- 3) Vehicle hit Road Side Objects:
 - a) Govt. Property ()
 - b) Road Work Object ()
 - (E.g. signposts, barriers, trees etc)
 - c) Private Property ()
- 4) Vehicle drop into drain ()
- 5) Damage due to Act of God:
 - a) Fallen Object ()
 - b) Flood ()
 - c) Other ()
- 6) Parked & Found Damaged:
 - a) Vandalism ()
 - b) Hit by Moving Object ()
- 7) Theft Case
 - a) Stolen ()
 - b) Damage found when recovered ()
- 8) Fire
 - a) Whilst driving ()
 - b) Parked ()
- 9) Accident date more than 24hrs ()

By Assessor- 2) Initial Assessment

Vehicle: SKW 8560X Year: NOV 2015

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Private Motor /
Truck / Trailer or 1986cc

Make & Model: TOYOTA HARRIER Electric 2.0A

Colour: Black Transmission Type: Auto / Manual

Engine No: SZR6633915 Sp. Reading: 5736

C/Nr: ZSU600056728

Gen. Cond: Good / Fair / Poor / Burnt or

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modr: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 235/55R19
 R: 235/55R19

BS: BUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front		Rear	
R/Bal.	<u>6</u> mm	R/Bal.	<u>6</u> mm
L/Bal.	<u>6</u> mm	L/Bal.	<u>6</u> mm

Parallel Import: Yes / No

Repair Type: LS / I.B.I

No of Repair Days: 7

D.O.I. 29/11/2018

Towed-In: Yes / No

Towing Required: Yes / No

Vehicle in Idler: Yes / No

Time: 1200 Hrs

By Assessor- 2) Comments

- 1) Damages not due to recent accident.
- 2) Damages do not seem hit onto:
 - a. Vehicle () b. Motorcycle () c. Bicycle () d. Pedestrian ()
 - e. Animal () f. Govt Object () g. Road Work Object ()
 - h. Private Property () i. Drain () j. Road Kerb/Grass Verge ()
- 3) Vehicle does not seem damaged as a result of:
 - a. Fallen Object () b. Flood () c. Vandalism () d. Fire ()
 - e. Moving Object () f. Stolen () g. Stolen & Recovered ()

Time Started:

Time Completed:

1) CSO

2) ABS

3) Entire Operation Completed Time:

Remarks for Internal Information

Remarks to appear in Works Order & Assessment report

- 1) Potential Total Loss ()
- 2) SRS Light on ()
- 3) ABS Light on ()

Claim Handling

Accident NT/1021854

Policy No.	5099248928	Vehicle No.	SKW8560X	GST Registration No.	
Certificate No.					
Policyholder Name	SU WEIXIANG			Policyholder NRIC	58603361E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	81277109	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	+ No Yes	TCA	+ No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No
▼ Accident Details					
Report Date	29/11/2018 11:55	Accident Report Within 24 Hrs	Yes	Accident Type	Collision - Major/Minor Ro
Date of Accident	28/11/2018	Time of Accident hh:mm	22:13	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BUKIT BATOK WEST AVENUE 5				
▼ 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		
▼ Benefits					
▼ GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
▼ Policyholder Mailing Address					
Address 1	BLK 90B #11-237	Address 2	TELOK BLANGAH STREET 31	Address 3	TELOK BLANGAH PARKVE
Address 4	SINGAPORE 102090	Address Type	Singapore address	Post Code	102090
Unit No.		Related Policy Number	5099248928		
▼ O1 Driver Info					
Driver Name	SU WEIXIANG	Driver Type	Main Driver	Driver DOB	11/02/1986
Unnamed driver Name		Driver NRIC	58603361E	Driving Experience	10
Register Date of Driver License	11/06/2008	Driver Age	32	Contact No.(Home)	
Contact No.(Mobile)	81277109	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 90B #11-237	Address 2	TELOK BLANGAH STREET 31	Address 3	TELOK BLANGAH PARKVE
Address 4	SINGAPORE 102090	Address Type	Singapore address	Post Code	102090
Unit No.					
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.	SKW8560X	Driver Insurer Company	NTUC
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes + No		
Modification History					

Claim 001 OD-MD

New

Claim Type *	OD-MD	Insured Name	SU WEIXIANG	Insured NRIC	5860
Contact No.(Mobile)	81277109	Contact No. (Home)	69266916	Contact No. (Office)	
Email Address	SUWEIXIANG@HOTMAIL.COM	OT	SKW8560X	TP Vehicle Number	SHD
Claim Description	SKW8560X / SHD7142L ON 28 Nov 2018				
Preferred Workshop		Insured Liability	Fully at Fault		
Preferred Repair Option	Yes	Preferred Workshop, Name unknown		GIA report	Received
Date Registered	29/11/2018 11:57	Claim Close Date		Date Received	29/1
Report Taken By	BOSLI WANAS	Workshop Repairer		Total Loss but Repaired	
					OD Excess Collected by Workshop
☒ Print AK letter					
Save Submit					

Attachment

Accident No.

NT/1021854

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

29/11/2018 12:06

Path *

Category *

Confidential

Urgency *

Des

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No file chosen

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Attachment List

Attachment

Uploaded By/Date

Category

Urgency

Description

[illegible]



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Nov 2018 11:59	Photos	Normal	Photos 2018-11-29
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Nov 2018 11:58	Photos	Normal	Photos 2018-11-29
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NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Nov 2018 11:57	Photos	Normal	Photos 2018-11-29

Video List

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

Scan and uploading

Claim Handling

Task Transfer Exit

Accident MT/1021854

LOS SAL SUB

Policy No.	5099248928	Vehicle No.	SKW8560X	GST Registration No.	
Certificate No.					
Policyholder Name	SU WEIXIANG			Policyholder NRIC	S8603361E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	81277109	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	29/11/2018 11:55	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major/Minor Road
Date of Accident	28/11/2018	Time of Accident (hh:mm)	22:15	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTRE	Orange Force	No	ICM No.	
Accident Location	BUKIT BATOK WEST AVENUE 5				

Excess

Own damage Excess	500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	500.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 90B #11-237	Address 2	TELOK BLANGAH STREET 31	Address 3	TELOK BLANGAH PARVIEW
Address 4	SINGAPORE 102090	Address Type	Singapore address	Post Code	102090
Unit No.		Related Policy Number	5099248928		

O1 Driver Info

Driver Name	SU WEIXIANG	Driver Type	Main Driver	Driver DOB	11/02/1986
Unnamed driver Name		Driver NRIC	S8603361E	Driving Experience	10
Register Date of Driver License	11/06/2008	Driver Age	32	Contact No.(Home)	
Contact No.(Mobile)	81277109	Contact No.(Office)		Address 3	TELOK BLANGAH PARVIEW
Address 1	BLK 90B #11-237	Address 2	TELOK BLANGAH STREET 31	Post Code	102090
Address 4	SINGAPORE 102090	Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	☒ Yes ☐ No	Driver Vehicle No.	SKW8560X	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes ☒ No
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Modification History

Investigation

Claim 001 OD-MD

LOS SAL SUB

Claim Case Officer Zuraimie Bin Mantau

Claim Type	OD-MD	Insured Name	SU WEIXIANG	Insured NRIC	S8603361E
Contact No.(Mobile)	81277109	Contact No. (Home)	69266918	Contact No. (Office)	
Email Address	SUWEIXIANG@HOTMAIL.COM	O1 Vehicle Number	SKW8560X	TP Vehicle Number	SHD7142L
Claim Description	SKW8560X / SHD7142L ON 28 Nov 2018			Name of Preferred Workshop	
Preferred Workshop					
Preferred Repair Option					
Preferred Workshop Name	unknown				
Insured Liability report					
Fully at fault					
Date Registered	29/11/2018 14:26	Claim Close Date		Date Received	28/11/2018 12:06
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss but Repaired	
				OD Excess Collected by Workshop	

Print AK letter

Modification History

Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment Attachment

Vehicle Info

Vehicle Make	TOYOTA	Vehicle Model	HARRIER	Engine Capacity	
Date of Registration	18/11/2015	Classis No.	ZSU600056728		
Towing Required	☒ Yes ☐ No	Vehicle in IDAC	☒ Yes ☐ No	Parallel Import	☐ Yes ☒ No
Type of Tender	Own Damage	Assessor Name	ROSLI WAHAB	Survey Current Status	

IDAC/Workshop Name
NATIONAL ASSESSMENT CENTRE

Windscreen
Parts & Labour
Cost
Market Value(\$)

IDAC/Workshop Location
51 UB1 AVENUE 1 #01-25 PAYA

Total Loss * ☐ Yes ☒ No

Scrape Value(\$)

Economical Repair Value(\$)

Remark

1)AIR DUCT -1 REPLACE

Remark for Supplementary

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
root						
Not Applicable	1	32200101	NUMBER PLATE (FRONT)	1	Replace	X
ABS	2	32200201	NUMBER PLATE BASE (FRONT)	1	Replace	X
ABSORBER	3	32200501	NUMBER PLATE GARNISH (FRONT)	1	Replace	X
ACCELERATOR	4	16000101	BUMPER (FRONT)	1	Replace	X
ACTUATOR	5	16001301	BUMPER BRACKET (FRONT LEFT)	1	Replace	X
ADVERTISEMENT STICKER	6	16001302	BUMPER BRACKET (FRONT RIGHT)	1	Replace	X
AIR BAG	7	16002401	BUMPER CLIPS (FRONT)	1	Replace	X
AIR BLOWER	8	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Replace	X
AIR BOX	9	16002702	BUMPER FOG LAMP (FRONT RIGHT)	1	Unconfirm	X
AIR CHAMBER BOX	10	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Replace	X
AIR CLEANER	11	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Unconfirm	X
AIR COMPRESSOR	12	16003201	BUMPER GRILLE (FRONT)	1	Replace	X
AIR CON	13	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace	X
AIR CON (VWV)	14	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	X
AIR COOLER	15	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace	X
AIR DISTRIBUTOR	16	16005901	BUMPER SPONGE (FRONT)	1	Replace	X
AIR FILTER	17	16006701	BUMPER TOWING COVER (FRONT)	1	Replace	X
AIR FLOW	18	27100101	GRILLE (FRONT)	1	Replace	X
AIR GRILLE	19	27100801	GRILLE EMBLEM (FRONT)	1	Replace	X
AIR HORN	20	27100701	GRILLE CHROME (FRONT)	1	Replace	X
AIR INTAKE	21	41300101	SUPPORT PANEL (FRONT)	1	Replace	X
AIR RESONATOR BOX	22	41300201	SUPPORT PANEL GARNISH (FRONT)	1	Replace	X
ALARM	23	28500101	HORN (LEFT)	1	Unconfirm	X
ALTERNATOR	24	28500102	HORN (RIGHT)	1	Unconfirm	X
ALUMINIUM PANEL - SIDE	25	15600101	BRACE PANEL (FRONT)	1	Unconfirm	X
AMPLIFIER	26	27700101	HEAD LAMP (LEFT)	1	Replace	X
ANTENNA	27	27700102	HEAD LAMP (RIGHT)	1	Replace	X
ANTI ROLL	28	149001	BONNET	1	Replace	X
APRON	29	14903401	BONNET LOCK (LOWER)	1	Replace	X
ARCH	30	149029	BONNET INSULATOR	1	Unconfirm	X
ARM REST	31	149028	BONNET INNER RUBBER	1	Unconfirm	X
ASH TRAY	32	112023	AIR CON CONDENSER	1	Unconfirm	X
AUTO CLUTCH	33	112022	AIR CON COMPRESSOR SUCTION HOSE	1	Unconfirm	X
AUTO COOLER PIPE	34	344001	RADIATOR	1	Unconfirm	X
AUTO CRUISE MOTOR	35	344008	RADIATOR FAN	1	Unconfirm	X
AUTO TRANSMISSION	36	344011	RADIATOR FAN CLUTCH	1	Unconfirm	X
AXLE	37	344005	RADIATOR COWLING	1	Unconfirm	X
BACK REST (MC)	38	25400102	FENDER (FRONT LEFT)	1	Replace	X
BACK SEAT	39	25400801	FENDER INNER PANEL (FRONT LEFT)	1	Replace	X
BALANCER	40	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Replace	X
BATTERY	41	23300201	DOOR (FRONT LEFT)	1	Repair	X
BEADING (MC)						
BELT COVER (MC)						
BELT TENSIONER						
BODY						
BODY (MC)						
BOLT CAP (MC)						
BOLT HEAD COVER (MC)						
BONNET						
BOOT						
BOX (MC)						

Save Submit

rsbm

From: Zuraimee Bin Mantau <zuraimee.mantau@income.com.sg>
Sent: Friday, 30 November, 2018 12:36 PM
To: info@yewteegroup.com
Cc: LKK Bukit Merah (rsbm@lkkauto.com); utauto@singnet.com.sg
Subject: Vehicle SKW8560X, OD Claim No: MT/1021854-001, DOA: 28/11/2018

Dear Yew Tee Automobile

Excess \$600 applies.

Vehicle is currently at NAC Bukit Merah.

Please arrange to tow away the vehicle and update Mr Su Weixiang at 81277109 once vehicle is in the workshop.

Strictly no further supplementary is allowed. A **survey before repair** is required.

Please forward the invoice and DV within 7 working days to us once repairs has been done and survey conducted.
Update the 'Repair Status' when repairs are done.

XX

Our Ref: MT/CA/OD/051/1021854-001/ZBM

30 Nov 2018

YEW TEE AUTOMOBILE TECH PTE LTD

399F WOODLANDS ROAD

SINGAPORE 678006

YEW TEE IND EST

Dear Sir

CLAIM NUMBER: MT/1021854-001

REPAIR OF VEHICLE NUMBER: SKW8560X

We are pleased to inform you that you are successful in your tender to repair the vehicle. The details are as follows:

Award Date: 30 Nov 2018

Make: TOYOTA

Model: HARRIER

Estimated Repair Days: 7

Location: NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)

Address: BLK 1007 #01-11 BUKIT MERAH LANE 3 ALEXANDRA VILLAGE INDUSTRIAL ESTATE SINGAPORE 159721

Benefits Applicable: N/A

Excess Applicable: 600.00

Please note that supplementary items will not be allowed.

If you have any queries, please contact Zuraimee Bin Mantau at 64307891 or email us at motor@income.com.sg.

Yours sincerely

Jenny Pe

Deputy Vice President

Motor Insurance

Thank you

Zuraimee Bin Mantau
Senior Executive
Motor Insurance
T +65 6430 7891
www.income.com.sg



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you

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

ACCIDENT STATEMENT

ACCIDENT DATE: 28/11/2018 (DD/MM/YYYY). TIME: 22.17 (HH:MM)

LOCATION: Bukit Batuk West Ave 5

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: Skw 8560X
 b) INSURANCE COMPANY: NTUC INCOME
 c) POLICY NUMBER: 5099248928
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: Toyota Harrier
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Private
 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: SU WEIXIANG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8603361E CONTACT: 81277109
 c) ADDRESS: 90B Telok Blangah Street 31 #11-237
S 102096

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

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

*d) DATE OF BIRTH: (11/02/1986) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 11 Jun 2008

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

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: SHD 7142L MODEL: HYUNDAI SONATA
 b) DRIVER'S NAME: TAN AI HING
 c) NRIC/FIN/PASSPORT: S1292290F CONTACT: 93682029

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = suweixiang@hotmail.com

VIDEO

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: 5099248928

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SKW8560X
Chassis Number : ZSU600056728
2. Name of Policyholder : SU WEIXIANG
3. Effective Date of Insurance : 28 Mar 2018
4. Expiry Date of Insurance : 27 Mar 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	: SU WEIXIANG
NAMED DRIVER (1)	: WEE JACK YIN RACHEL (HUANG JIEYING)
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: DBS BANK LTD
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 : INSURE LINK PTE LTD (00000614836)
Date of Issue : 27 Mar 2018 10:41 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8603361E



Name

SU WEIXIANG

苏伟祥

Race

CHINESE

Date of birth

11-02-1986

Country/Place of birth

SINGAPORE

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8603361E

SU WEIXIANG

Birth Date: 11 Feb 1986

Issue Date: 07 Oct 2015



002480655C

SG
50

5696644



NRIC No. S8603361E



Date of issue

02-02-2017

APT BLK 90B TELOK BLANGAH STREET 31 #11-237
SINGAPORE 102090

NRIC No: S8603361E

Date: 25/04/2018

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

EFFECTIVE DATE

Class	Vehicle Class	Effective Date
Class 2B	Motorcycles <= 200 cc	14 Apr 2007
Class 2A	Motorcycles between 201 cc and 400 cc	27 Dec 2012
Class 3	Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	11 Jun 2008

NP 428A



Licence No: S8603361E