Enguire Vehicle & Owner Information (Vehicle No. SHD4914X As At 15 Dec 2018 / 21:20:00)

w Firm Search Details

Sparch Reason:

insurance claim in relation to traine accident

Law Firm Case No.:

FP8708J

Current Owner Details

Chance ID Type:

Company

Owner 105

199305821R

Owner Name:

COMFORT TRANSPORTATION PTE LTD

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 383

Registered Street Name;

SIN MING DRIVE

Registered Unit No:

Registered Building Name: GAS BUILDING

Registered Postal Code.

575717

Current Vehicle Details

Vehicle No..

SHD4914X

Make Description/Model: HYUNDAI/ MO 1.7L CRDI AT ABS AIRBAG 4DR

Insurance Company Name: INDIA INT LINS PTÉ LTD

62244174



EROFIA MOTOR TRADING PTE LTD 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

E-Mail: erofia@singnet.com.sg / erofia2@gmail.com

Tel: 67527740 Fax: 67528669

TO ARRANGE PRE-REPAIR SURVEY BIKE IS IN / NOT IN WORKSHOP TEL: 90696165 - MR TEO

EROFIA MOTOR TRADING PTE LTD

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883 Tel: 67527740 Fax: 67528669 Co. Reg No. 201202259N

Vehicle No: FP 8708 J

Vehicle Model: Honda CB400

Estimated Renair Costs

	Estimated Repair Costs			
Oty	Description		Amo	unt S(\$)
	<u>List Items</u>			
1	Front lender		\$	196.00
1	Headlamp		\$	380.00
2	Fork inner tubes		\$	620,00
2	Fork outer tubes		\$	640.00
1	Fork under bracket		\$	335.00
2	Front brake discs		\$	910.00
1	Front rim shaft		\$	68.00
1	Front sport rim		\$	850.00
1	Meter		\$	880.00
1	Handle bar		\$	145.00
1	Hand grip (1 set)		\$	95.00
1	Side mirror -R/H		\$	95.00
1	Brake lever		\$	65,00
1	Front signal -R/H		\$	85.00
1	Fuel tank		\$	950.00
1	Front footrest -R/H		\$	75.00
1	Front footrest bracket -R/H		\$	245.00
1	Brake pedal		\$	98.00
1	Rear footrest -R/H		\$	70.00
1	Exhaust pipe		\$	865.00
1	Exhaust pipe bracket		\$	55.00
1	Rear signal -R/H		\$	85.00
1	Rear tailboard		\$	335.00
1	Rear fender		\$	95.00
1	Rear taillamp		\$	280.00
	•		\$	8,517.00
	1	Less 10%	\$	851.70
			\$	7,665.30

		c/f:	\$	7,665.30
	Special Nett Items			
1	Number plate (1 set)		\$	28.00
2	Fork oils		\$	30.00
2	Fork oil scals		\$	56.00
1	Steering cone (1 set)		\$	80.00
1	Helmet		\$	150.00
1	Rear box		\$	780.00
1	Rear box bracket		\$	150,00
1	Crash bar (1 set)		\$	250.00
			\$	1,524.00
<u>5/No.</u>	Labour		_	Ea 20
1	To provide towing service.		\$	50.00
2	To check wiring and reset headlamp focusing.		\$	80.00
3	To provide labour.		\$	480.00
			\$	610.00
	Grand Tot	al	- \$	9,799.30

Dollars: Nine Thousand Seven Hundred Ninety-Nine And Thirty Cents Only.

EROFIA MOTOR TRADING PTE LTD

4/ 15

MVAD18186297 / VAC - Kaki Bukit ENTRY DATE & TIME: 27/12/2018 13:57 SUBMITTED BY: Norhaint Bte Abdul Majid

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 27/12/2018 14:04

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number

Contact Number 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.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misroprosontation 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 (lability 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 erchiving 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 erchiving of this report at the centre and to copies of the report being made available aforosald.

Date Of Accident		ACCIDENT STATEMENT
Exact Location Of Accident Country/State of Loss SINGAPORE DETAILS OF OWN VEHICLE Vehicle Registration Number FP8708J Insured/Policyholder Name Of Registered Owner NRIC No S78709196 Email Address NOEMAIL (LOCAL) +65-90493823 OFFICE-90493823 Alternative Phone No Vehicle Particulars Manufacturer Monufacturer Monuf	Date Of Report	27/12/2018 13:57
Details of Loss Details of OWN VEHICLE Vehicle Registration Number FP8708J Insured/Policyholder Name Of Registered Owner NRIC No S7870919G Email Address NOEMAIL (LOCAL) +65-90493823 Alternative Phone No OFFICE-90493823 Alternative Phone No Vehicle Particulars Manufacturer HONDA CB 400 F3VJ Exact Purpose for which vehicle was being used at lime of accident Are you claiming under your own insurance polley for repair to your vehicle? If No, Please state action to be taken Vehicle Category NOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number Cover Note Number Driver Name of Driver NSAME OF BIRTH	Date Of Accident	15/12/2018 21:20
Vehicle Registration Number FP8708J Insuracl/Policyholder Name Of Registered Owner NG KWAN (WU JUN) NRIC No S78709196 Email Address NCEMAIL Mobile Phone No (LOCAL) +65-90493823 Alternative Phone No OFFICE-90493823 Vehicle Particulars Wanufacturer HONDA Model CB 400 F3VJ Exact Purpose for which vehicle was being used at at lime of accident Are you clasting under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number 5028852669-10 (TP) Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1988 Driving Experience Gender	Exact Location Of Accident	ANG MO KIO STREET 24 / ANG MO KIO STREET 22
Vehicle Registration Number FP8708J Insured/Policyholder Name of Registered Owner NG KWAN (WU JUN) NRIC No S7870919G Email Address NOEMAIL (LOCAL) +65-90493823 Mobile Phone No (LOCAL) +65-90493823 Alternative Phone No OFFICE-90493823 Vehicle Particulars Manufacturer HONDA CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance polley for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number S028852669-10 (TP) Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth O4/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1988 Driving Experience Gender MALE	Country/State of Loss	SINGAPORE
Insured/Policyholder Name Of Registered Owner NRIC No S78709193 NOEMAIL Mobile Phone No (LOCAL) +65-90493823 OFFICE-90493823 Alternative Phone No OFFICE-90493823 Vehicle Particulars Manufacturer HONDA CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance polley for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number Cover Note Number Driver Name of Driver NSIC No S7870919G Date Of Birth O4/03/1978 Occupation Date Of Driving Pass Driving Experience Gender MALE	0	DETAILS OF OWN VEHICLE
Name Of Registered Owner NRIC Ne S7870919G NRIC Ne S7870919G NOEMAIL Mobile Phone No (LOCAL) +65-90493823 Vehicle Particulars Manufacturer Model Model Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance polley for repair to your vehicle? If No. Please state action to be taken Vehicle Category NoTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD THRD PARTY Pollcy Number S028852669-10 (TP) Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth O4/03/1978 Occupation OutDOOR Date Of Driving Pass Driving Experience Gender MALE	Vehicle Registration Number	FP8708J
NRIC Ne \$7870919G Email Address NOEMAIL Mobile Phone No (LOCAL) +65-90493823 Alternative Phone No OFFICE-90493823 Alternative Phone No OFFICE-90493823 Vehicle Particulars HONDA Manufacturer HONDA C8 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance polley for repair to your vehicle? NO If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD THIRD PARTY THIRD PARTY Fleet Policy NO Policy Number 5028852669-10 (TP) Cover Note Number Diver Name of Driver NG KWAN (WU JUN) NRIC No \$7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS	Insured/Policyholder	
Email Address NOEMAIL Mobile Phone No (LOCAL) +65-90493823 Alternative Phone No OFFICE-90493823 Vehicle Particulars Manufacturer HONDA Model CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance polley for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Type Of Coverage THIRD PARTY Fleet Policy NO Polley Number 5028952669-10 (TP) Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience 20 YEARS AND 6 MONTHS Gender	Name Of Registered Owner	NG KWAN (WU JUN)
Mobile Phone No (LOCAL) +65-90493823 Alternative Phone No OFFICE-90493823 Vehicle Particulars Manufacturer HONDA CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance polley for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Polley Number 5028852669-10 (TP) Cover Note Number Driver NAME OF Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	NRIC No	S7870919G
Alternative Phone No OFFICE-90493823 Vehicle Particulars Manufacturer HONDA CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance polley for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number 502852669-10 (TP) Cover Note Number Driver Name of Driver Name of Driver Name of Driver Name of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience MALE	Email Address	NOEMAIL
Vehicle Particulars Manufacturer HONDA CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance pollcy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Pollcy Number Soze852669-10 (TP) Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth O4/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Mobile Phone No	(LOCAL) +65-90493823
Manufacturer HONDA Model CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vohicle Category MOTORCYCLE Insurance Company Name of Insurance Company Name of Insurance Company NO Policy Number Cover Note Number Driver Name of Driver Name of Driver Name of Driver Name of Birth O4/03/1978 Occupation Date Of Driving Pass Driving Experience Gender MODA NO POLICY AND HOND NO STATO9198 Driving Experience SU YEARS AND 6 MONTHS MALE	Alternative Phone No	OFFICE-90493823
Model CB 400 F3VJ Exact Purpose for which vehicle was being used at time of accident Are you clalming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company Name of Insurance Company Name of Insurance Company NPUC INCOME INSURANCE CO-OPERATIVE LTD THIRD PARTY Fleet Policy NO Policy Number Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth O4/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience Gender MALE	Vehicle Particulars	
Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category MOTORCYCLE Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number Cover Note Number Driver Name of Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth O4/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience Gender MALE	Manufacturer	HONDA
time of accident Are you claiming under your own insurance polley for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Wehicle Category MOTORCYCLE Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Polloy Number Cover Note Number Driver Name of Driver Name of Driver NAME (WU JUN) NRIC No S7870919G Date Of Birth Occupation OutDoor Date Of Driving Pass Driving Experience Gender MALE	Model	CB 400 F3VJ
for repair to your vehicle? If No, Please state action to be taken Wehicle Category Name of Insurance Company Name of Insurance Company North Policy Policy No Policy Number Cover Note Number Driver Name of Drive	Exact Purpose for which vehicle was being used at time of accident	
Vehicle Category Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy Policy No Policy Number 5028852669-10 (TP) Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience 20 YEARS AND 6 MONTHS MALE	Are you claiming under your own insurance policy for repair to your vehicle?	NO
Insurance Company Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Pollcy Number 5028852669-10 (TP) Cover Note Number Driver Name of Driver Name of Driver NRIC No S7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience 20 YEARS AND 6 MONTHS Gender	If No, Please state action to be taken	THIRD PARTY
Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number S028852669-10 (TP) Cover Note Number Driver Name of Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth O4/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience 20 YEARS AND 6 MONTHS Gender	Vehicle Category	MOTORCYCLE
Type Of Coverage THIRD PARTY Fleet Policy NO Pollcy Number 5028852669-10 (TP) Cover Note Number Driver Name of Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Insurance Company	
Fleet Policy NO Pollcy Number 5028852669-10 (TP) Cover Note Number Driver Driver NG KWAN (WU JUN) NRIC No \$7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Policy Number	Type Of Coverage	THIRD PARTY
Cover Note Number Driver NG KWAN (WU JUN) Name of Driver NG KWAN (WU JUN) NRIC Na \$7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Fleet Policy	NO
Driver NG KWAN (WU JUN) NRIC No S7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Policy Number	5028852669-10 (TP)
Driver NG KWAN (WU JUN) NRIC No \$7870919G Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Cover Note Number	
Name of Driver NG KWAN (WU JUN) S7870919G Date Of Birth Occupation OUTDOOR Date Of Driving Pass Driving Experience QUYEARS AND 6 MONTHS MALE	Driver	
Date Of Birth 04/03/1978 Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Name of Driver	
Occupation OUTDOOR Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	NRIC Na	S7870919G
Date Of Driving Pass 28/05/1998 Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Date Of Birth	04/03/1978
Driving Experience 20 YEARS AND 6 MONTHS Gender MALE	Occupation	OUTDOOR
Gender MALE	Date Of Driving Pass	28/05/1998
	Driving Experience	20 YEARS AND 6 MONTHS
Mobile Number (LOCAL) +65-90493823	Gender	MALE
	Mobile Number	(LOCAL) +65-90493823

OFFICE-90493823

NOEMAIL

;67528669

Address

BLK 212 #08-1488 ANG MO KIO AVENUE 3

Postcode

OWNER

Was driver an employee of the Insured's Company NO

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

DRIZZLING

Road Surface

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Datails of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

Police Station Address

KEBUN BARU NEIGHBOURHOOD POLICE POST

ROAD: BLK 111 ANG MO KIO AVENUE 4, POSTCODE: 560111,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-4589999 - FAX NO: 64574454

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

Attachment(s)

YES

Are accident photos available for attachment?

NO

Was there any video captured by Car Camera?

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHD4914X

Vehicle Make/Model/Colour

HYUNDAI 140 1.7L CRDI AT ABS AIRBAG 4DR

Details Of Properties

Vehicle Category

TAX

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

	DETAILS OF INJURED PERSON 1
Name	NG KWAN (WU JUN)
Approximate Age	40
Injuries Sustain	
Injured person in which vehicle?	FP8708J
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan Pg. 1



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 Oriver.
- 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.
- The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for Investigation.
- 5. The report will be forwarded by the insurers of the GIA Records Management Centro 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)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims:
 - (III) investigating the accident and/or my claims;
 - (III) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administoring 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/mall packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the
- (b) all insurer(s) who have insured vehicle(s) involved in this accident end 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
- 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.

IDAC KAKI

: 4

33

Driver's Signature

23 Kal- 🕆 Singar

Te<u>l: 6741ē</u>6

Effering Emire Personnel usifina (#1).

5749230.

Policyholder's Signature

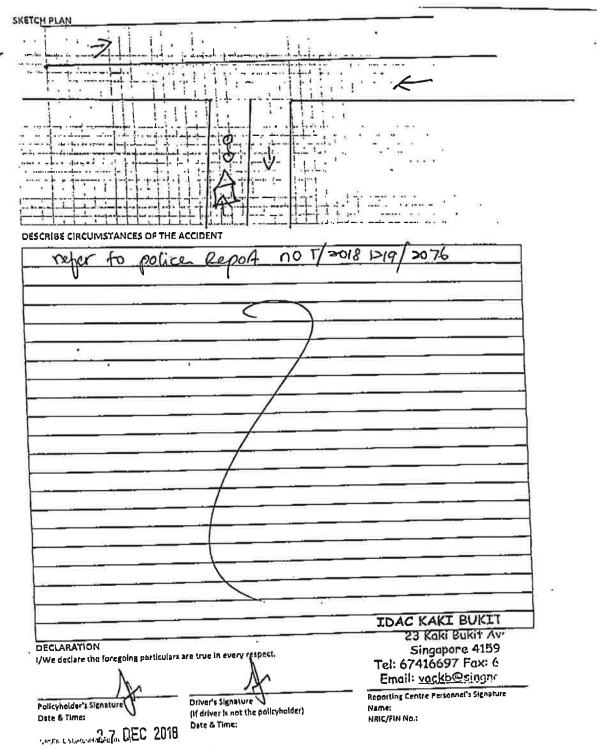
Date & Time;

2 7 DEC 2018

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

NRIC/FIN No.:

Sketch Plan #2 Pg. 1







Police Station Of Origin: Kebun Baru NPP 111 Ang Mo Kio Avenue 4 SINGAPORE 560111

Report No. 7/20181219/2076

Tel No: 1800-4589999

KEPORT	OF	A	TRAFFIC	ACCIDENT

13/12/2	me Report N 018 14:57		Vide Report No.:	Station Diary No.
Informa	nt's Partic	ulars		
NG KW,	f Informant: AN		Address: APT BLK 212 ANG MO KIO A SINGAPORE 560212	AVENUE 3 #08-1488
NRIC N	/ ID No.: O / S78709	19G	Contact No.: Home/Office:	Mobile: 90493823
National SINGAP	lity: PORE CITIZ	EN	Email:	1-10-011-1-04-1000-2-0
Sex; Male	Age: 40	Date of Birth: 04/03/1978	Type of Informant:	The state of the s
Race: Chinese			Language: English	Institution / School Name:
Occupation: Interior designer			Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

General Inform	nation of the Accident					
Type of Accident:	Injury Conveyed By Ambu	lance	Drink Drive; No	Date/Time of Accident: 15/12/2018 21:20	7	Type of Location; F-Junction
ANG MO KIO ANG MO KIO		nd And	ı Mo Kio St	. 22		
Weather: Drizzling			Surfaçe;		Road S	Speed Limit:
Traffic Flow:	¥*	Traffic	Control;		Traffic Light	Volume:
Type of Collisi Between Movi	on: ng Vehicles - Head To Ro	еаг		TAM OF OFT	Anyon ambul	e conveyed by ance:
				Ch 111 Ang 1/2		

Details of V	ehicle involve	d		100	LIKEO	6.444 Dir. H-	
Vehicle No.	Type	Make	Model	Color			No of Passenger
FP8708J	Motorcycle	HONDA	CB 400 F3VJ	Black	11		0
SHD4914X	Car					Daniaged	1

Insurance No	Effective	Expiry Date
5028852669-10		22/07/2019
		FOODGEDOOD



T/20181218/2076

Police Station Of Origin: Kebun Baru NPP 111 Ang Mo Kio Avenue 2 of 4 Report No. T/20181219/2076

111 Ang Mo Kio Avenue 4 SINGAPORE 560111

Tel No: 1800-4589999

CONTINUATION OF REPORT

Details of Perso			- 50		
Any Pedestrian Ir		- in-		~	THE NA
No. of Pedestrian	s Injured; NIL	Use of Pede	estrian	Cross	ing, NA
Rider					
Name	NG KWAN		ID No.		S7870919G
Related Vehicle	FP8708J (Motorcycle)		Conta	st No.	90493823
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class Driving Licent Expiry	:e &	Class; 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	16/12/2018	Date Disch			/2018
No. of Days gran	ted Medical Leave 20	Degree of I	injury	NIL	
Driver.	, V				• • • • • • • • • • • • • • • • • • • •
Name	TEO LEE YEE		ID No.		S7940878F
Related Vehicle	SHD4914X (Car)		Conta	ct No.	NIL
Hospital/Clinic	NIL.		Class Drivin Licend Expin	9	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	narge	NIL	
Date fragiliting	ted Medical Leave . NIL	Degree of	Injury	NIL	

Brief Dotalls.

On 15/12/2018 at about 2120hrs, I was riding my motorcycle FP8708J along Ang Mo Kio St 24 towards Ang Mo Kio St 22. As I approached the T-junction between Ang Mo Kio St 24 and St 22, I saw from the right that there is a vehicle driving fast along Ang Mo Kio St 22. Therefore, I slowed down my bike and stopped at the stop line, before I completely stopped at the stop line, I was hit by a vehicle from behind.

Then my motorcycle slid forward and fell on the side due to the impact and I flew forward out of my motorcycle. I called for the ambulance and exchanged particulars with the taxi driver who hit me. Ambulance arrived after about 10 minutes and Traffic Police came about 5 minutes after the ambulance. I spoke to the officers for a while before being conveyed to Tan Tock Seng Hospital. I was given a 4 days medical leave by Tan Tock Seng Hospital.

On 16/12/2018, I admitted into Mount Alvernia hospital because I felt pain on my back and I was discharged on 19/12/2018. I was also given 20 days hospitalization leave by the doctor from 16/12/2018 to 04/01/2019, I am not sure what were the damages on my motorcycle. I was advised to lodge a report by my insurance company to claim against the taxi driver.

I am lodging this report for insurance claims,



Police Station Of Origin: Kebun Baru NPP 111 Ang Mo Kio Avenue 4 SINGAPORE 560111 Tel No: 1800-4589999



3 014 Report No. 1/20181219/2076

CONTINUATION OF REPORT





Police Station Of Origin: Kebun Baru NPP 111 Ang Mo Kio Avenue 4 SINGAPORE 560111 Tel No: 1800-4589999

4 of 4 Report No. T/20181219/2076

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: F / Sr Staff Sgt NEO ZE HWEE, EDMUND	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/12/2018 14:57
Officer in Charge Of Case: TP / GIT / Sr Staff Sgt NOR FAIZAL BIN YAHYA Contact No.: 65476202	Classification Of Case:
Authentication Stamp	



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTS	R 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960	H
ROAD TRANSPORT ACT 1007 LLLA AVEIA	

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5028852669-10

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only,

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.

Cover : Third Party

: NG KWAN (WU JUN)

: FPB708J

: NC311555130

: 23 Jul 2018

; 22 Jul 2019

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.

N/A EXCESS (SECTION 1) N/A EXCESS (SECTION 2) N/A INSURE WITH COE NG KWAN NAMED DRIVER (1) NG LAI NAMED DRIVER (2) N/A HIRE PURCHASE COMPANY N/A SUM INSURED

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

: INCOME - MT DEPT (00000600471)

Date of Issue

: 22 Jun 2018 16:41 hrs

Reprint

: 22 Jun 2018 16:42 hrs

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

EPUBLIC OF SINGAPORE ENTITY CARD NO. S7870919G





Name

NG KWAN (WU JUN)

吴 鋆

CHINESE Date of birth 04-03-197B

5-370919 3

CHINA

REPUBLIC OF SINGAPORE DRIVING LICENCE

Date of Insue 19-03-2008-

APT BLK 212 ANG MO KIO AVENUE 3 #08-1488 SINGAPORE 580212

NRIC No: \$78709196

Pate: 23/11/2008

No: 6058327

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Mierorayalas 🔫 388 CC

Class 2A Metoroyalis holysom 201 CC and 400 CC

Class 2 Aleteroyeles > 400 GC

Morey and moter traductively like < 2 parameters, exclusive of the driver, and moter traductively like < 2500 kg Çþu 1

28 htay 1998 27 Jul 1999

\$ / No. 20001909\$4

S7670919G NF 42BA

Licanos No: 87870919G

> Back to OneMotoring

Enquire Transfer Fee

Vehicle Details

Vehicle No.:

FP8708J

Vehicle Type:

P00 - Passenger Motorcycle/Autocycle/Moped

Vehicle Attachment 1:

No Attachment

Vehicle Scheme:

Normal

Vehicle Make:

HONDA

Vehicle Model:

CB 400 F3VJ

Chassis No.:

NC311555130

Propellant:

Petrol

Engine No.:

NC23E1855131

Engine Capacity:

399 cc

Maximum Power Output:

Maximum Laden Weight: Unladen Weight:

Year Of Manufacture:

1997

Original Registration Date:

22 Jan 1998

Lifespan Expiry Date:

30 Jun 2028

COE Category:

D - Motorcycle

PQP Paid:

\$1,856.00

COE Explry Date:

Road Tax Expiry Date:

31 Dec 2022

Inspection Due Date:

22 Jul 2019

22 Jul 2019

Intended Transfer Date:

02 Jan 2019

CO2 Emission:

CO Emission:

HC Emission:

NOx Emission:

PM Emission:

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred, **Amount Payable**

	Amount Before GST	GST Amount	Amount After GST
	(\$\$)	(\$\$)	(S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable:			25.00
Message			

Please note that the National Environment Agency (NEA) is offering an incentive for the owner of this motorcycle to deregister the motorcycle on or before 5 April 2023.

This motorcycle is currently eligible for an incentive of \$3,500 from NEA. If the COE is renewed from now till its deregistration on or before 5 April 2023, the incentive will be reduced to \$2,000. The last registered owner of this motorcycle will receive the incentive from NEA.

This motorcycle will no longer be allowed for use on Singapore's roads after 30 June 2028.

For more information, please visit http://www.nea.gov.sg/mtcIncentive or contact NEA at 1800-2255-632.

You may print this page for reference.

OK

Print