

NATIONAL Assessment Centre Services. [ver 1 Jan 00]		Date & Time Completed		Done by
Date In: 08/01/2019 14:18	Job description: SAS e-filing			
Ref No: NPA/INC/9000481/4	E-mail (update 2hrs, A/C 2hrs)			
Veh No: STP 2533	1-Motor Claim Form			
D.O.A: 07/01/2019 09:50	1-Motor W/O (Within: OD 2hrs, TP 4hrs)			
OID: TP & Reporting Only	1-Photo Uploaded			
TP Insurer:	Assessment/Survey Report			
	Ass't Report by Fax / Hand to Owner/Whan			
Preferred Wksp / INC Assign Wksp / QW: (Tel:		Fax:
TP Particulars:	Veh No: SGT 1952H	INC () / Non-INC ()		
Owner / Driver: (Tel:		
Policy No: (Period: (Cover Type: (
Confirmed by: (Date:		Time:
Insured/Driver Liability: (% [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]				
Year of Registration: (Warranty: YES () / NO ()		
Excess: (\$		Loading: \$1,000 () / \$2,000 ()		
General Remarks:				
() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.				
() Total Loss Case: to e-mail Insurer URGENTLY.				
Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()				
Remarks: (INC/21/01/19 07:18:00)				
1) Apply for Transport Allowance () / Courtesy Car ()				
2) QC Check / Post Repair Inspection ()				
3) Upload Resurvey Photo [Repair Cost > \$3000] ()				
Injury: ()				
Date/Time: ()				
Action: ()				
NPA/900200				
Comments/Particulars:				
Driver/Owner:				
Contact No:				
Damaged Portion:				
QC Checked by (Engr-In-Charge):				
Auditors' Comments:				
Tel: 1				
2/3				
Invoice dated				
Invoice dated				
Fee Charged				
Fee Charged				

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	08/01/2019 14:18
Date Of Accident	07/01/2019 09:50
Exact Location Of Accident	BLK 107 TAMPINES STREET 11 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP253J
Insured/Policyholder	
Name Of Registered Owner	AVANT AUTOMOBILE PTE LTD
Co Reg No	201500597E
Email Address	ARIVANPROPERTY@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-93831143
Alternative Phone No	OFFICE-93831143

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	DRIVING GOJEK
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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096363642-01
Cover Note Number	

Driver

Name of Driver	KATHIRARIVAN KASINATHAN
NRIC No	S7282706F
Date Of Birth	18/05/1972
Occupation	OUTDOOR
Date Of Driving Pass	10/04/2014
Driving Experience	4 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93831143
Fax Number	
Contact Number	OTHERS-93831143
Email Address	ARIVANPROPERTY@YAHOO.COM.SG

Address	BLK 121A EDGEDALE PLAINS #10-257
Postcode	821121
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

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?	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)	3
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE
Passenger 2	NAME: : PASSENGER GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TAMPINES NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 6 TAMPINES AVE 4 , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5871999 - FAX NO: 65871699
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190107/2046

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	SGT1952H
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JOHNSON QUEK FEI LOONG

NRIC/Passport Number S76705111

Contact Number 97437047

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

SKETCH PLAN

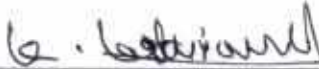
IMPORTANT NOTICE


1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

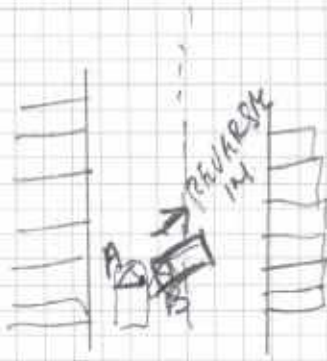
Policyholder's Signature
Date & Time:


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


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

SKETCH PLAN

BLK 107 TAMPAKES ST 11 OPEN SPACE CARPARK



A) SGP 253J
B) SGT 1952H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
7/20190107/2046

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20190107/2046

1 of 4

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No: T/20190107/2046

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/01/2019 11:53	Vide Report No.:	Station Diary No.: 47
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Informant's Particulars

Informant's Particulars				
Name of Informant: KATHIRARIVAN KASINATHAN			Address: APT BLK 121A EDGEDALE PLAINS #10-257 SINGAPORE 821121	
ID Type / ID No.: NRIC NO / S7282706F			Contact No.: Home/Office:	Mobile: 93831143
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 46	Date of Birth: 18/05/1972	Type of Informant: Driver	
Race: Indian			Language: English	Institution / School Name:
Occupation: DRIVER			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 07/01/2019 09:50	Type of Location: Car Park
Location: Along Road 1 TAMPINES STREET 11 BLK 107 TAMPINES STREET 11 OPEN SPACE CARPARK			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Opposite Direction			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGT1952H	Car	NISSAN		Silver	Slightly Damaged	1
SJP253J	Car	HYUNDAI	AVANTE	Brown	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJP253J	NTUC Income Insurance Co-Operative Limited	5096363642	21/08/2018	20/08/2019



SINGAPORE POLICE FORCE



T/20190107/2046

2 of 4

Report No. T/20190107/2046

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Details of Person Involved					
Any Pedestrian Involved: No			Use of Pedestrian Crossing: NA		
No. of Pedestrians Injured: NIL					
Driver					
Name	JOHNSON QUEK FEI LOONG		ID No.	S7670511I	
Related Vehicle	SGT1952H (Car)		Contact No.	97437047	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Discharge	NIL	
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL	
Driver					
Name	KATHIRARIVAN KASINATHAN		ID No.	S7282706F	
Related Vehicle	SJP253J (Car)		Contact No.	93831143	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Discharge	NIL	
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL	

Brief Details.

On 07/01/2019 at about 0950hrs, I was driving my car Reg no: SJP253J and entered the carpark of B/107 Tampines Street 11 to send my passengers to their destination. As I entered the parking gantry, I slowed down as there are vehicles in front of me. There I a car Nissan Silver in colour Reg no: SGT1952H was on my right side facing towards the exit of the carpark. I did not notice the vehicle have any hazard light on indicating it is stopping or parking in a lot when suddenly the said vehicle was reversing to his left and during that motion the front right side had hit my front driver door. Upon the contact with my car, I look at the driver and signaled him to stop as I was getting out from my car from the left passenger door. During this time the driver move his car and when I managed to get out of my car, I saw the car was proceeding towards the carpark exit. He was about to leave when I had to stand in front of his car to stop him from driving out of the car. The driver eventually stopped. He then reversed and parked the car in a nearby lot. He then came out of his vehicle and denied that he was running away. I have also called for the police at that time as he does not seems happy with my claim that he is running away from the accident scene. I did manage to get his particulars and also took down his car Registration number. He did the same and both of us took photos of the vehicles before leaving the scene.

My two passengers and me are not injured. He has a passenger and he also do not informed me of any injury to him or his passenger. My car front right driver door had scratches. His front right side of bumper also had some light scratches.



**SINGAPORE
POLICE FORCE**



T/20190107/2046

3 of 4

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

Report No. T/20190107/2046

CONTINUATION OF REPORT

AVANT AUTOMOBILE PTE LTD

17.12.2018

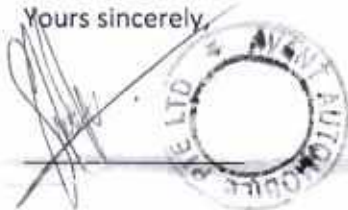
Authorisation - KATHIRARIVAN KASINATHAN(S7282706F)

Vehicle Reg No: SJP 253J

Make & Model : HYUNDAI AVANTE 1.6A

The letter serves to confirm the above vehicle can be entered and added under the hirer's account and that the said hirer will be handling his own earning.

Yours sincerely,

A handwritten signature in black ink is written over a circular stamp. The stamp contains the text "AVANT AUTOMOBILE PTE LTD" around the perimeter. The signature is a cursive-style name, possibly "K. Kasinathan", written in black ink.



AVANT AUTOMOBILE PTE LTD
 61 Ubi Ave 2 #04-16 AML Building Singapore 408898
 Tel: 6842 3331 Fax: 6842 2311
 Co. Reg. No: 201500597E
 GST Reg. No: 201500597E

AUTOMOBILE LEASE AGREEMENT

Agreement No.: 1506

Agreement Date: 17/12/18

Lessor	AVANT AUTOMOBILE PTE LTD	ROC No.	201500597E
Address	No. 61 Ubi Avenue 2 #04-16 AML Building Singapore 408898	Office No.	6842 3331

Lessee	KATHIRAVAN KASINATHAN	NRIC/UEN No.	S7282706F	Contact 1	93531143
Address	BLK DIA, Edgedale Place #10-257 S(521121)			Contact 2	
Main Driver		NRIC/UEN No.		Contact 1	
Address	any property in yam-12 road, Singapore			Contact 2	
Company				Occupation	
Co. Address					
Driving Pass Date		Driving Class		D.O.Birth	

Co-Lessee / GTR		NRIC/UEN No.		Contact 1	
Address				Contact 2	
Named Driver 2		NRIC/UEN No.		Contact 1	
Company				Occupation	
Co. Address					
Driving Pass Date		Driving Class		D.O.Birth	

DESCRIPTION OF VEHICLE

(Personal/Grab)

Registration No.	SSD 253 J	Colour	Maroon
Make / Model	HYUNDAI AVANTE 1.6A	Chassis No.	As Lett CAR 1)
Reg. Date	10 Mar 2009 ** (New / Used)	Engine No.	As Lett CAR 1)

TERMS OF RENTAL PAYMENT & PERIOD

Leasing Period	3 months	Deposit	\$300 / to be top weekly
Leasing Start Date	17/12/18	1st Rental Fee	\$315/-
Leasing End Date	20/3/19	Weekly Rental Fee	
Termination Charge	As contract	Weekly Rental Due on	
Other Charges		Estimated Residual Value	

Claim Handling

The premium on this policy has not been collected.

Accident HT/1020861

Policy No.	505638343-01	Vehicle No.	SJP2533	GST Registration No.	201500597E
Certificate No.				Policyholder NRIC	201500597E
Policyholder Name	AVANT AUTOMOBILE PTE LTD	Cover Type	drive CLASSIC	Loading	0
Product Code	FLEET INSURANCE	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	93831143	Special Remarks		eCode	No *
Email Address		TCA	No Yes	eCode Reason	
KFK	No Yes	NCD entitlement(%)	0	Private Hire	Yes
NCD Protection	No				
Accident Details					
Report Date	08/01/2019 14:34	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	07/01/2019	Time of Accident hh:mm	09:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BLK 107 TAMPAKES STREET 11 OPEN SPACE CARPARK				
Excess					
Own damage Excess	2,500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
Benefits					
GST Registered Information					
GST Registered	Yes	GST Registration Date	08/01/2015		
GST Registration No.	201500597E	GST Status Verified	Yes		
Modification History					

Policyholder Mailing Address

Address 1	61 UBI AVENUE 2	Address 2	#04-16/17 AUTOMOBILE MEGA	Address 3	SINGAPORE 408898
Address 4		Address Type	Singapore address	Post Code	408898
Unit No.	04-16/17	Related Policy Number	\$105983234		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	18/03/1972
Unnamed driver name	KATHIRAROVAN KASINATHAN	Driver NRIC	5T262766F	Driving Experience	4
Register Date of Driver License	10/04/2014	Driver Age	46	Contact No.(Home)	
Contact No.(Mobile)	93831143	Contact No.(Office)		Address 3	PUNGGOL EDOE
Address 1	BLK 121A #10-257	Address 2	EDGEDALE PLAINS	Post Code	821121
Address 4	SINGAPORE 821121	Address Type	Foreign address		
Unit No.	10-257			Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	No Yes	Driver Vehicle No.	SJP2533		

Declaration

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

Claim 001 New

Claim Type *	OO-MX *	Insured Name	AVANT AUTOMOBILE PTE LTD	Insured NRIC	201500
Contact No.(Mobile)		Contact No. (Home)	NIL	Contact No. (Office)	
Email Address		OI		TP	
Claim Description		Vehicle Number	SJP2533	Vehicle Number	SGT19
Preferred Workshop		SJP2533 / SGT1952H ON 7 Jan 2019		Name of Preferred Workshop	
Insured Liability	Not at Fault *	SIA report	Received	Claim Close Date	08/01/2019 14:43
Insured Repair Option	Preferred Workshop, Name unknown *			Data Received	08/01/
Date Registered					
Report Taken By					
Print All letter					
Save Submit					

Attachment

Accident No.	HT/1020861	Claim No.	001
Last Doc. Received	Yes No	Upload Date	08/01/2019 14:51
Path *			
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
Choose File	No file chosen	Clear	Please Select *
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			
Attachment List			
Attachment	Uploaded By/Date	Category	Urgency
RAC_BIKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE		NRIC/ Driving License	Normal
Description			
NRIC/ Driving License 2019-1-8			

S (BUKIT MERAH)) on 08 Jan 2019 14:51

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 08 Jan 2019 14:51

SAS

Normal

SAS 2019-1-8

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 08 Jan 2019 14:51

Photos

Normal

Photos 2019-1-8

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 08 Jan 2019 14:51

Photos

Normal

Photos 2019-1-8

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 08 Jan 2019 14:52

Photos

Normal

Photos 2019-1-8

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 08 Jan 2019 14:43

Photos

Normal

Photos 2019-1-8

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S (BUKIT MERAH)) on 08 Jan 2019 14:43

Photos

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Photos

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NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 08 Jan 2019 14:43

Photos

Normal

Photos 2019-1-8

NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE
S (BUKIT MERAH)) on 08 Jan 2019 14:43

Photos

Normal

Photos 2019-1-8

Video List

Uploaded By/Date

Folder Date

File Name



Source

Display in New Window

Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 07.01.2019 (DD/MM/YYYY), TIME: 9:50:00 (HH:MM)

LOCATION: BK 107 Tempines St 11 Car Park

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: 53P2535
b) INSURANCE COMPANY: NTUC Income
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: HYUNDAI AVANTE 1.6A
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: DRIVING TO WORK
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: AVANT AUTOMOBILE PTE LTD (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER 3

- a) NAME: KATHIRAVAN KASINATHAN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 372827066 CONTACT: 93831143
c) ADDRESS: BK 121A Bedale Plain #10-257 5821121

* d) DATE OF BIRTH: 18/05/1972 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 10/04/2014

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HEIRAR

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) Clear

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: Tempines NPLG

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SGT 1952H MODEL: NISSAN
b) DRIVER'S NAME: JOHNSON OVER PEI LOUNG
c) NRIC/FIN/PASSPORT: 57670512 CONTACT: 97437047

9. THIRD PARTY VEHICLE

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

ariven

Email = arivenproperty@yahoo.com.sg

VIDEO - NO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7282706F



Name

KATHIRARIVAN KASINATHAN

கதிர்அறிவன் காசிநாதன்

Race

INDIAN

Date of birth

18-05-1972

Country/Place of birth

INDIA

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE

S7282706F



KATHIRARIVAN KASINATHAN

Birth Date: 18 May 1972

Issue Date: 18 Apr 2018



6013572



NRIC No. S7282706F



Date of issue

14-08-2018

Address

APT BLK 121A EDGEDALE PLAINS
#10-257
SINGAPORE 821121

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

EFFECTIVE DATE

Class 3

Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg

10 Apr 2014

NP 428A



Licence No: S7282706F

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: 5096363642

Cover : drive CLASSIC

- | | |
|---|----------------------------|
| 1. Index mark and Registration Number of Vehicle | : SJP253J |
| Chassis Number | : KMHDU41BR9U707973 |
| 2. Name of Policyholder | : AVANT AUTOMOBILE PTE LTD |
| 3. Effective Date of Insurance | : 21 Aug 2018 |
| 4. Expiry Date of Insurance | : 20 Aug 2019 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission. | |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. | |

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
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	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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 : DQ INSURE (00000572952)
Date of Issue : 30 Nov 2017 12:11 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive