

NATIONAL Assessment Centre Services.

[ver 1 Jan'05]

NA/9009406

Date In: 21/01/2019 10:36	Job description	Date & Time Completed	Done by
Ref No: NA/INC/9001251/4	SAS e-filing		
Veh No: SK 8989M	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 19/01/2019 19:30	I-Motor Claim Form	21/01/2019 10:49	
OID: TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ()

Tel: ()

Fax: ()

TP Particulars:

Veh No: PEDESTRIAN

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 () / Non-INC ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

Date/Time:

Actions:

Invoice Information: Client Name: ()

Claimants Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors Comments:

Int. 1:

2 / 3

1) AR: Accident Reporting (\$30)	
2) DA: Damage Assessment (\$100)	INC (\$80)
3) TP: Towing Fee	\$40/\$45
4) FT: Follow-Through Survey	\$120
5) FT: Follow-Through Survey (Resurvey)	\$30
For claiming against INC Only (ver 10 Jan 2005)	
6) TR: Re-Inspection	\$75
7) NI: Idao DA + SMRT Survey	\$160
8) NTUC Additional Services:-	
ON:	
• N5: Courtesy Car / Tpt Allowance	\$3
• N6: Repair Co-ordination	\$10
• N7: Post Repair Inspection	\$23
• N8: DV / Collect Excess Coordination	\$3
TP (Nil): TP (Non INC) against INC	\$20
9) N12: Idao Mobile	\$0

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	21/01/2019 10:26
Date Of Accident	19/01/2019 19:30
Exact Location Of Accident	ALONG SMITH STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBK8989M
Insured/Policyholder	
Name Of Registered Owner	LEE KOK
NRIC No	S2507301J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83387689
Alternative Phone No	OFFICE-62215438

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	FETCHING WIFE
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5015315951-12
Cover Note Number	

Driver

Name of Driver	LEE KOK
NRIC No	S2507301J
Date Of Birth	14/11/1945
Occupation	INDOOR
Date Of Driving Pass	08/03/1973
Driving Experience	45 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83387689
Fax Number	
Contact Number	OFFICE-62215438
Email Address	NOEMAIL

Address	BLK 122 KIM TIAN ROAD #22-76
Postcode	160122
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	COLLIDED INTO PEDESTRIAN
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	1
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TIONG BAHRU NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 128 KIM TIAN ROAD #01-123/ 125 , POSTCODE: 160128 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2739999 - FAX NO: 62785651
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT A/20190120/2023

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	
Vehicle Make/Model/Colour	
Details Of Properties	PEDESTRIAN
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

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: 21.01.19

Driver's Signature

(If driver is not the policyholder)

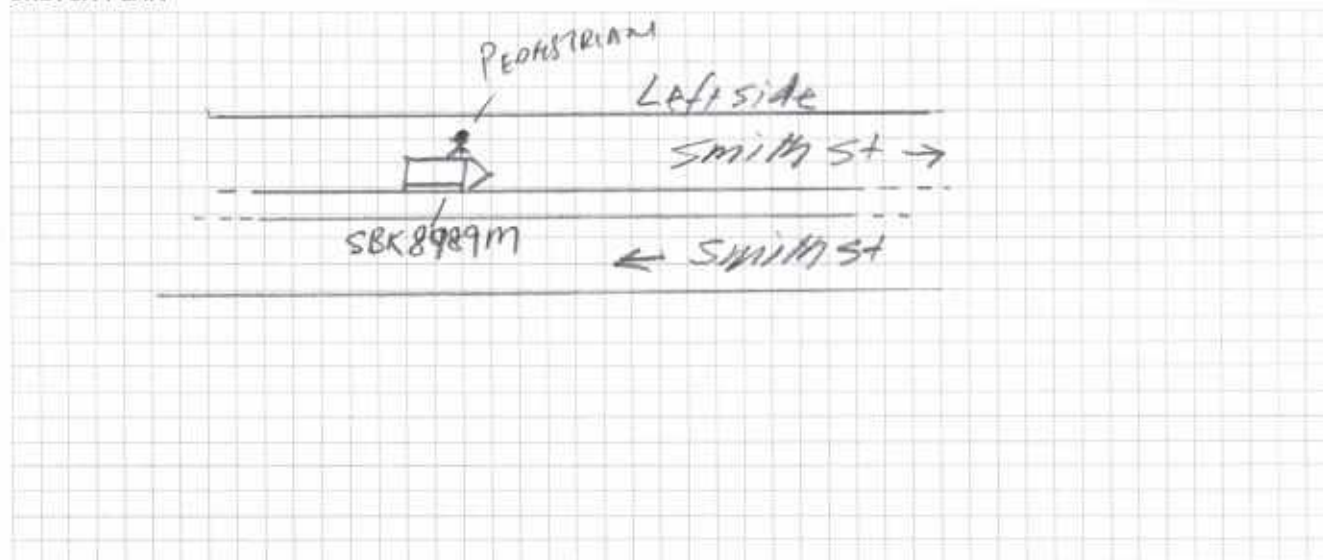
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER 2 POLICE REPORT
A/20190120/2023

DECLARATION

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

[Signature]

Policyholder's Signature

Date & Time: 21.01.19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

[Signature] 21/01/2019

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

[Signature]



**SINGAPORE
POLICE FORCE**



A/20190120/2023

1 of 2

POLICE REPORT (NP299)

Report No. A/20190120/2023

Police Station Of Origin
Tiong Bahru NPP
128 Kim Tian Road #01-123 SINGAPORE
160128
Tel No: 1800-2739999

Date/Time Report Made 20/01/2019 12:21	Vide Report No.	Station Diary No. 5		
Name Of Informant LEE KOK	Address APT BLK 122 KIM TIAN ROAD #22-76 SINGAPORE 160122			
ID Type / ID No. NRIC NO / S2507301J	Contact No. Home/Office 62215438	Mobile 83387689		
Nationality MALAYSIAN	Email Address			
Occupation SALES	Sex Male	Age 73	Date of Birth 14/11/1945	Race Chinese
Institution/School Name	Language			
Date/Time Of Incident 19/01/2019 19:30	Location Of Incident SMITH STREET SINGAPORE			

Brief details.

On 19/01/2019 at about 1930hrs, I drove my car SBK8989M along Smith St. There were many people occupying the left side of the road due to the Chinese New Year event there. As such, I drove closer to the right side of the road at a dead slow speed and used my horn lightly and regularly to signal to the pedestrians that there was a car incoming. Suddenly a man came up the side of my car and used his right hand to hit the left side of my car. I do not recognize the man and when I looked at him, I saw that he was holding onto a shoe. I stopped my car immediately and spoke to the man through the front passenger window. As a sign of courtesy, I apologies

Signature Of Officer Recording The Report: A / Sgt 2 PANG LIN TONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 20/01/2019 12:21
Officer In-Charge Of Case: A / Central Police Divisional Investigation Branch / Insp MOHAMED SHARIFF AHMED MUNSHI Contact No.: 62240000	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



A/20190120/2023

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20190120/2023

to the man and asked if there was any problem. The man did not say anything and walked away. As there were cars behind of my at the time, I moved forward and made a U-turn back into Smith St. When I returned back to the incident location, I could not find the man anymore. I also made a check on my car and found that there was no damages to my car. I am making this report as I am worried the man might be injured.

Signature Of Officer Recording The Report:

A / Sgt 2 PANG LIN TONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
A / Central Police Divisional Investigation Branch /
Insp MOHAMED SHARIFF AHMED MUNSHI
Contact No.: 62240000

Authentication Stamp

Signature Of Informant:

Date/Time:
20/01/2019 12:21

Classification Of Case:

Claim Handling

Accident MT/1028670

Policy No.	5015315951-12	Vehicle No.	SBK9898H	GST Registration No.	
Certificate No.				Policyholder NRIC	525073011
Policyholder Name	LEE KOK	Cover Type	Third Party, Fire & Theft	Loading	0
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	62215438	Contact No.(Home)	
Contact No.(Mobile)	87367689	Special Remark		eCode	No *
Email Address		TCA	Yes No	eCode Reason	
KPK	Yes No	NCD Entitlement(%)	50	Private Hire	No
NCD Protection	Yes				
Accident Details					
Report Date	21/01/2019 10:44	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Pedestrian
Date of Accident	19/01/2019	Time of Accident hh:mm	19:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG SMITH STREET				
Excess					
Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess	0.00	Outside Singapore OO Excess	0.00		
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 122 #22-76	Address 2	KOH TIAN ROAD	Address 3	SINGAPORE 160122
Address 4		Address Type	Singapore address	Post Code	160122
Unit No.		Related Policy Number	5015315951-12		
OI Driver Info					
Driver Name	LEE KOK	Driver Type	Main Driver	Driver DOB	14/11/1945
Unnamed driver Name		Driver NRIC	525073011	Driving Experience	45
Register Date of Driver License	08/03/1973	Driver Age	73	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	SINGAPORE 160122
Address 1	BLK 122 #22-76	Address 2	KOH TIAN ROAD	Post Code	160122
Address 4		Address Type	Singapore address		
Unit No.		Driver Vehicle No.	SBK9898H	Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	Yes No				
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No		

Modification History

Claim 001

New

Claim Handling

Accident MT/1028670

Policy No.	5015315951-12	Vehicle No.	SBK9898H	GST Registration No.	
Certificate No.				Policyholder NRIC	525073011
Policyholder Name	LEE KOK	Cover Type	Third Party, Fire & Theft	Loading	0
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	62215438	Contact No.(Home)	
Contact No.(Mobile)	87367689	Special Remark		eCode	No
Email Address		TCA	Yes No	eCode Reason	
KPK	Yes No	NCD Entitlement(%)	50	Private Hire	No
NCD Protection	Yes				
Accident Details					
Report Date	21/01/2019 10:44	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Pedestrian
Date of Accident	19/01/2019	Time of Accident hh:mm	19:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG SMITH STREET				
Excess					
			Total Excess Applicable		
Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess	0.00	Outside Singapore OO Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
Excess Type		Windscreen Excess	0.00		
All Claims Excess		Driver is Covered?			
YIED All Claim Excess					
Total All Claim Excess Applicable		TP Standard Excess		Driver is Covered?	
OO Standard Excess		YIED TP Excess			
YIED OO Excess					
Additional Excess		Total TP Excess Applicable			
Total OO Excess Applicable					
Benefits					
GST Registered Information					
Policyholder Mailing Address					
Address 1	BLK 122 #22-76	Address 2	KOH TIAN ROAD	Address 3	SINGAPORE 160122
Address 4		Address Type	Singapore address	Post Code	160122

Unit No.	Related Policy Number				S015315933-12	
BE Driver Info						
Driver Name	LEE MOW	Driver Type	Main Driver	Driver DOB	14/11/1945	
Unnamed driver Name		Driver NRIC	S25073013	Driving Experience	45	
Register Date of Driver License	09/03/1973	Driver Age	73	Contact No.(Home)		
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)		
Address 1	BLK 122 #22-76	Address 2	KIM TIAN ROAD	Address 3	SINGAPORE 140122	
Address 4		Address Type	Singapore address	Post Code	140122	
Unit No.		Driver Vehicle No.	S8K9999H	Driver Insurer Company	NTUC	
Does the own a Singapore Registered car?	Yes - No					
Declaration						
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes - No			

Modification History

Claim 001 OD-MX **NEW**

Claim Type *	OD-MX	Insured Name	LEE KOK	Insured NRIC	S250
Contact No.(Mobile)	91791389	Contact No.(Home)	62762186	Contact No.(Office)	
Email Address		OT Vehicle Number	S8K9999H	TP Vehicle Number	PEDE
Claim Description	S8K9999H / PEDESTRIAN ON 19 Jan 2019				
Preferred Workshop		Insured Liability	Not at fault	Name of Preferred Workshop	
Damage No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	21/01/2019 10:48	Claim Close Date		Date Received	21/0
Report Taken By	KOSLI WAHAB	Workshop Reparer		Total Loss but Repaired	

Print All letter

Save Submit

Attachment

Accident No.	HT1028670	Claim No.	001
Last Doc. Received	Yes No	Upload Date	21/01/2019 10:49
Path *			
Choose File	No file chosen	Clear	Category *
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	NO
Choose File	No file chosen	Clear	NO
Choose File	No file chosen	Clear	NO
Choose File	No file chosen	Clear	NO
Choose File	No file chosen	Clear	NO
Choose File	No file chosen	Clear	NO
Message Read		Clear	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	Photos	Normal	Photos 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	Photos	Normal	Photos 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	Photos	Normal	Photos 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	Photos	Normal	Photos 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	Photos	Normal	Photos 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	Photos	Normal	Photos 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	Photos	Normal	Photos 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Jan 2019 10:49	SAS	Normal	SAS 2019-1-21

Video List

Uploaded By/Date	Folder Date	File Name	Source

Display in New Window Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 19/01/19 (DD/MM/YYYY), TIME: about 7.30 pm (HH:MM)

LOCATION: Smith Street, Singapore

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SBK 8989M
 b) INSURANCE COMPANY: NTUC Income
 c) POLICY NUMBER: 5015315951-12
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Honda
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: to fetch wife
 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: LEE KOK (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S2507301-J CONTACT: 62215438
 c) ADDRESS: No 60, Smith St, Singapore 8387689

* 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: 14/11/45 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 08.03.1973

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

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: Tiong Bahru NPP

8. THIRD PARTY VEHICLE Pedestrian

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

9. THIRD PARTY VEHICLE

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

* No of passenger
 (Including driver)
(1)

* No of passenger
 (Including driver)
()

* No of passenger
 (Including driver)
()

Fax: 62229836

Email = _____

VIDEO _____

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S2507301J



Name
LEE KOK
 李國

Race
CHINESE

Date of Birth
14-11-1945

Country of Birth
MALAYSIA

Sex
M



REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S2507301J**

Name
LEE KOK

Birth Date: **14 Nov 1945**
 Issue Date: **11 Aug 2004**




001272417F

8298901




NRIC No: **S2507301J**

Nationality
MALAYSIAN

Blood Group: **O+** Date of Issue: **27-07-1998**

Address
APT BLK 122 KIM TIAN ROAD
#22-76
SINGAPORE 160122

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

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	05 Mar 1973
Class 2A	Motorcycles between 201 cc and 400 cc	05 Mar 1973
Class 2	Motorcycles exceeding 400 cc	05 Mar 1973
Class 3	Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver, and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg	05 Mar 1973

NP 428A

Licence No: **S2507301J**



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: 5015315951-12

Cover : Third Party, Fire & Theft

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : 50K8989M |
| Chassis Number | : JHME5568045203834 |
| 2. Name of Policyholder | : LEE KOK |
| 3. Effective Date of Insurance | : 30 Jul 2018 |
| 4. Expiry Date of Insurance | : 29 Jul 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)	: N/A
EXCESS (SECTION 2)	: N/A
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
PRIMARY DRIVER	: LEE KOK
NAMED DRIVER (1)	: LEE CHEE SIONG
NAMED DRIVER (2)	: LEE HUI JUN
HIRE PURCHASE COMPANY	: OCBC 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 : INCOME - MAIN SERVICING (00000600057)
Date of Issue : 13 Jul 2018 10:48 hrs
Reprint : 13 Jul 2018 10:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

1DAC - 68410055