

# NATIONAL Assessment Centre Services.

(ver 1 Jan 2003)

MAH49023020

Date In: 19/01/2019 10:38	Job description	Date & Time Completed	Done by
Ref No: NBR/INC 90030044	SAS e-filing		
Veh No: SLR 8256A	E-mail (kajala 3hrs, AIC 2hrs)		
D.O.A: 16/01/2019 20:40	I-Motor Claim Form	MT/1032613-001	19/01/2019 12:08
OID / TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/WKSP		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: 810 7364	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:	Completed by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )	
2) QC Check / Post Repair Inspection ( )	
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )	

Injury: \_\_\_\_\_

Date/Time	Actions

MAH4901327	Invoice	Amount	Payable
Claimant's Particulars:	1) AR: Accident Reporting (\$30)		
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$40)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	Forfeiting against INC Only (ver 10 Jan 2003)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (Nil) / TP (N-in INC) against INC \$20		
	9) N12: Idao Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	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	19/02/2019 10:38
Date Of Accident	16/02/2019 20:40
Exact Location Of Accident	JUNCTION OF BRAS BASAH ROAD/NORTH BRIDGE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP8256A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	METRO CAR LEASING PTE LTD
Co Reg No	201810490D
Email Address	KAZAF07@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97543574
Alternative Phone No	OFFICE-97543574

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER EX-1.6 LED TAIL LAMP (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES (GO JEK)
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	5100798940
Cover Note Number	

### Driver

Name of Driver	KERK CHIN HAUR (GUO JINHAO)
NRIC No	S8270281D
Date Of Birth	01/02/1982
Occupation	OUTDOOR
Date Of Driving Pass	28/07/2005
Driving Experience	13 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97543574
Fax Number	
Contact Number	OTHERS-97543574
Email Address	KAZAF07@GMAIL.COM

Address	BLK 863 YISHUN AVENUE 4 #11-73
Postcode	760863
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8522999 - FAX NO: 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190216/2147

#### 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	SHD736U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	YANG QILONG
NRIC/Passport Number	S8402318C
Contact Number	83838228
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

1

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBM7259H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	IRWAN BIN ARSAD
NRIC/Passport Number	S7443556D
Contact Number	87424121
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	IRWAN BIN ARSAD
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBM7259H
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	



### 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.

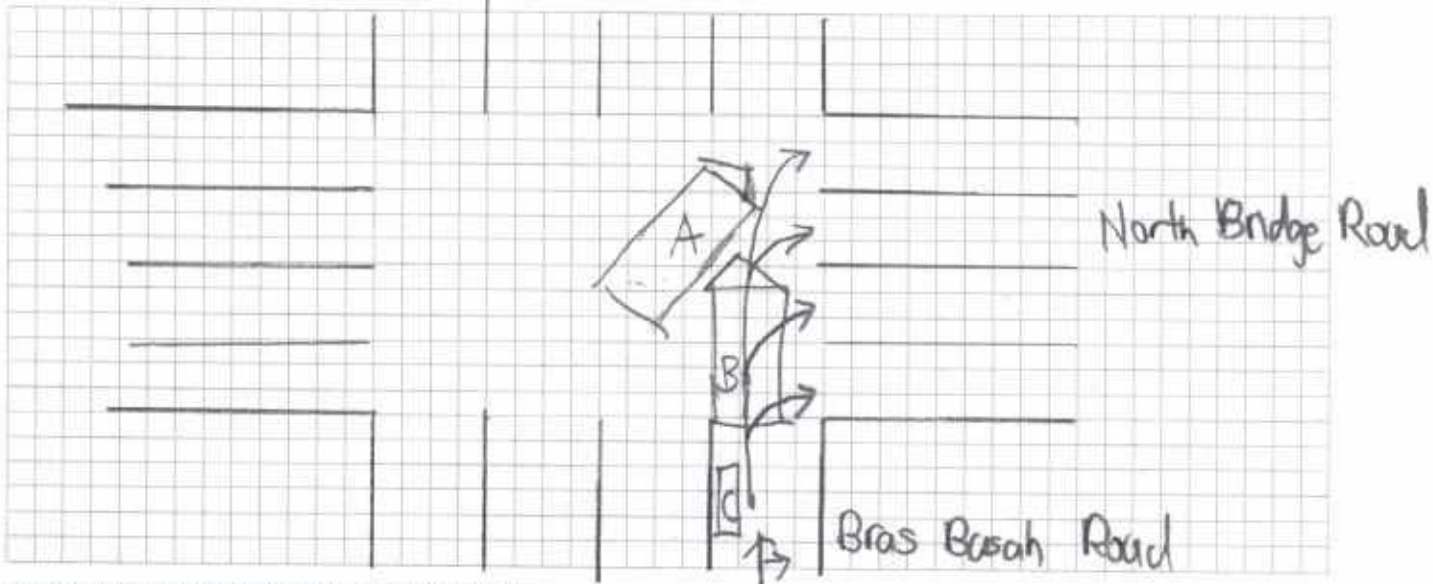


Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: Rose, Lisa  
NRIC/FIN No.: 9201 1234 5678

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A : SLP8256A  
 B : 8HD736U  
 C : FBM7259H

*Refer to police report  
 T/20190216/2147*

## DECLARATION

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

Policyholder's Signature  
 Date & Time: 19/2/19 9.35am

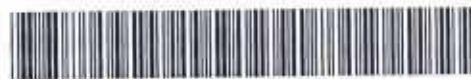
Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 19/2/19 9.35am

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





# SINGAPORE POLICE FORCE



T/20190216/2147

1 of 3

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

Report No. T/20190216/2147

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 16/02/2019 23:26		Vide Report No.: A/20190216/0145		Station Diary No.: 125	
<b>Informant's Particulars</b>					
Name of Informant: KERK CHIN HAUR			Address: APT BLK 863 YISHUN AVENUE 4 #11-73 SINGAPORE 760863		
ID Type / ID No.: NRIC NO / S8270281D			Contact No.: Home/Office: Mobile: 97543574		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 37	Date of Birth: 01/02/1982	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: ENGINEER		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:			

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/02/2019 20:40	Type of Location: X-Junction
Location: Along Road 1 BRAS BASAH ROAD NORTH BRIDGE ROAD Junction of Bras Basah Road and North Bridge Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBM7259H	Motorcycle				Slightly Damaged	0
SHD736U	Car				Slightly Damaged	0
SLP8256A	Car				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20190216/2147

2 of 3

Report No. T/20190216/2147

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

**CONTINUATION OF REPORT**

**Brief Details.**

On 16/02/2019 at about 2040hrs, I was driving my vehicle bearing registration number SLP8256A along Bras Basah Road. When I was at the junction of Bras Basah Road and North Bridge Road, I received a job whereby I need to turn right into North Bridge Road. I was at the center lane of the 4 lanes, either 2nd or 3rd lane. I turned right as I saw 4 arrows turning right into North Bridge Road and thought that I can turn right. While turning, suddenly a taxi bearing registration number SHD736U hit the right side of my rear door. Subsequently I then realized that a motorcycle bearing number FBM7259H had hit the rear side of the taxi as well. After the accident, when I got down from my vehicle that I realized that my lane was a straight lane only. The police attended to my accident and the motorcyclist was conveyed to hospital by ambulance.





**SINGAPORE  
POLICE FORCE**



T/20190216/2147

3 of 3

Report No. T/20190216/2147

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

**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:  
L /  
Sr Staff Sgt **NIRATNA NINGSEH BINTE ABD JALIL**

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
Insp **TAN CHIN YONG**  
Contact No.: 65476178

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
16/02/2019 23:26

Classification Of Case:

SN 003



LEASE AGREEMENT NO.:  
DATE:

PERSON IN CHARGE : TERRY

Schedule

This is a Rental Agreement made between us, **METRO CAR LEASING PTE LTD** (hereinafter referred to as "the Company" which shall include its successors-in-title and assigns), identified as the Lessor and having our registered address at 210 Turf Club Road Lot A8 The Grandstand Car Mall Singapore 287995 **AND YOU**, the person(s) identified as the Hirer below include (which shall include your successors-in-title and assigns):-

NAME OF HIRER : KERK CHIN HAUR  
NRIC/PASSPORT/RC/RB NO. : S8270281D  
ADDRESS : BLK 863 YISHUN AVE 4 #11-73 SIN 760863  
TELEPHONE : 9754 3574  
EMAIL ADDRESS : KAZAF07@GMAIL.COM

NAME OF RELIEF :  
NRIC/PASSPORT NO. :  
ADDRESS :  
TELEPHONE :  
EMAIL ADDRESS :

1. DESCRIPTION OF VEHICLE ("THE VEHICLE")

REGISTRATION NO. : SLP8256A  
MAKE / MODEL : MITSUBISHI LANCER EX 1.6 AT LED TAIL LAMP  
COLOUR : RED  
ENGINE NO. : 4A92CP4459  
CHASSIS NO. : JMYSRCY1AGU006792  
TYPE : PASSENGER / COMMERCIAL\*  
(\*delete where inapplicable)  
Date, Time and Mileage for Collection: 29.01.19 (date) 1PM (time) (mileage)  
Date, Time and Mileage for Return : (date) (time) (mileage)  
Petrol Out : Empty / ¼ tank / ½ tank / ¾ tank / Full\*  
(Vehicle must be returned with same level of petrol)

2. PERIOD OF LEASE ("LEASE PERIOD")

Daily/Weekly/Monthly/Yearly\* Basis  
From 29.01.19 ("Commencement Date") to 29.04.19 ("End Date")

\* delete where not applicable

3. LEASE CHARGES

Amount S\$ 1500 per day/week/month/year\* exclusive of Goods and Services Tax ("GST")  
(collectively, "Lease Charges") payable in advance on the 5<sup>TH</sup> day of each day/week/month/year\*  
("Payment Date").



## Claim Handling

Accident MT/1031613

Policy No.	5100788940	Vehicle No.	SLP235A	GST Registration No.	
Certificate No.				Policyholder NRIC	2018104900
Policyholder Name	METRO CAR LEASING PTE LTD	Cover Type	drive CLASSIC	Leading	0
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)		Contact No. (Home)	
Contact No. (Mobile)	97543574	Special Remark		eCode	No *
Email Address		TCA	No Yes	eCode Reason	
ePK	No Yes	NCD Entitlement(%)	0	Private Hire	Yes
NCD Protection	No				
<b>Accident Details</b>					
Report Date	19/02/2019 10:18	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	19/02/2019	Time of Accident Infract	20:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	JUNCTION OF BRAS BASAH AND NORTH BRIDGE ROAD				
<b>Excess</b>					
Own damage Excess	1,500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	1,500.00		
Third Party Excess	1,300.00	Outside Singapore TP Excess	1,500.00		
<b>Benefits</b>					
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
<b>Policyholder Mailing Address</b>					
Address 1	210 TURF CLUB ROAD	Address 2	#LOTAB THE GRANOSTAND	Address 3	SINGAPORE 287995
Address 4		Address Type	Singapore address	Post Code	287995
Unit No.	LOTAB	Related Policy Number	5107561174		
<b>OT Driver Info</b>					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	01/02/1962
Unnamed driver Name	KERK CHEN HAIK (GUD JENHAD)	Driver NRIC	S82702410	Driving Experience	11
Register Date of Driver License	28/07/2005	Driver Age	57	Contact No. (Home)	
Contact No. (Mobile)	97543574	Contact No. (Office)		Address 3	KHATIS EVERGREEN II
Address 1	BLK 863 # 11-73	Address 2	YISHUN AVENUE 4	Post Code	767863
Address 4	SINGAPORE 760863	Address Type	Foreign address		
Unit No.	11-73				
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SLP235	Driver Insurer Company	NTUC
<b>Declaration</b>					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes No		
Modification History					

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	METRO CAR LEASING PTE LTD	Insured NRIC	2018104900
Contact No. (Mobile)	97543574	Contact No. (Home)		Contact No. (Office)	NIL
Email Address		OT Vehicle Number	SLP235A	TP Vehicle Number	SHD736U
Claim Description	SLP235A / SHD736U ON 16 Feb 2019				
Preferred Workshop	Insured Liability	Fully at Fault			
Salvage No. Finalisation	Repair Option	Preferred Workshop, Name unknown	GIA report	Received	
Date Registered	19/02/2019 10:12	Claim Close Date		Date Received	19/02/2019 00:00
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss Out Request	

Print out letter

Save Submit

## Attachment

Accident No.	MT/1031613	Claim No.	001
Last Doc. Received	Yes No	Upload Date	19/02/2019 12:08
Path *			
Choose File	No file chosen	Clear	Category *
Choose File	No file chosen	Clear	Confidential
Choose File	No file chosen	Clear	Urgency *
Choose File	No file chosen	Clear	Description *
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Message Read		Clear	

Send Message

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19	
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19	
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19	

	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	Photos	Normal	Photos 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-2-19
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 19 Feb 2019 12:08	SAS	Normal	SAS 2019-2-19

Video List

Uploaded By/Date	Folder/Date	File Name	Source	Action
		<a href="#">Display in New Window</a> <a href="#">Scan and uploading</a>		



# ACCIDENT STATEMENT

ACCIDENT DATE: 16 / 01 / 2019 (DD/MM/YYYY), TIME: 20 : 40 (HH:MM)

LOCATION: Bras Basah and North Bridge Road Junction

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLP 8256A  
 b) INSURANCE COMPANY: NTUC Income  
 c) POLICY NUMBER: 5100798940  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: Mitsubishi Lancer EX 1.6  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Go Jek  
 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: Metro Car Leasing Pte Ltd (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 2018104900D CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

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

## DRIVER

- a) NAME: Keric Chin Hau (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S87702810 CONTACT: 97543574  
 c) ADDRESS: Blk 863 Yishun Ave 4 #11-13  
S760863

\* d) DATE OF BIRTH: 01 / 02 / 1987 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 28/07/2005

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

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: Nee San South

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SHD 736U MODEL: Taxi  
 b) DRIVER'S NAME: Yang Qilong  
 c) NRIC/FIN/PASSPORT: S8402318C CONTACT: 8383 8228

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: FBM 7259H MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: IRWAN BIN ARSHAD  
 f) NRIC/FIN/PASSPORT: S7443556D CONTACT: 87424121

\* No of passenger  
 (including driver)  
(1)

\* No of passenger  
 (including driver)  
(1)

\* No of passenger  
 (including driver)  
(1)

email = Kazaf07@gmail.com  
 VIDEO

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8270281D



Name  
KERK CHIN HAUR  
(GUO JINHAO)  
郭进豪

Race  
CHINESE

Date of birth  
01-02-1982

Country of birth  
MALAYSIA

Sex  
M





REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S8270281D



KERK CHIN HAUR  
(GUO JINHAO)

Birth Date: 01 Feb 1982

Issue Date: 03 Aug 2016

002585079H



3623629



NRIC No. S8270281D



Date of Issue  
28-10-2004

Address  
APT BLK 863 YISHUN AVENUE 4  
#11-73  
SINGAPORE 760863

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

		EFFECTIVE DATE
Class 2B	Motorcycles <= 200 cc	16 Nov 2004
Class 2A	Motorcycles between 201 cc and 400 cc	10 Oct 2006
Class 3	Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	28 Jul 2005

NP 428A





## 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: S100798940

Cover : drive CLASSIC

- |  |                             |
|--|-----------------------------|
| 1. Index mark and Registration Number of Vehicle | : 51P8756A                  |
| Chassis Number                                   | : JMYSRCY1AGU006792         |
| 2. Name of Policyholder                          | : METRO CAR LEASING PTE LTD |
| 3. Effective Date of Insurance                   | : 17 May 2018               |
| 4. Expiry Date of Insurance                      | : 16 May 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.

WINDSCREEN EXCESS	: S\$100	<p>德威信貸私人有限公司 TECK WEI CREDIT PTE LTD Co. Reg. No. 200512300K 210 Turf Club Road, The Grandstand Lot A8 Singapore 287995 Tel: 6465 0020 Fax: 6465 0017 Email: info@teckwei.com.sg</p>
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	: TECK WEI CREDIT PTE 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 : TECK WEI CREDIT PTE. LTD. (00000572499)  
Date of Issue : 18 May 2018 09:07 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

> Back to OneMotoring

## Enquire Transfer Fee

### Vehicle Details

Vehicle No.: SLP8256A  
Vehicle Type: Z10 - Private Hire (Chauffeur) Motor Car  
Vehicle Attachment 1: No Attachment  
Vehicle Scheme: Normal  
Vehicle Make: MITSUBISHI  
Vehicle Model: LANCER EX 1.6 AT LED TAIL LAMP  
Chassis No.: JMYSRCY1AGU006792  
Propellant: Petrol  
Engine No.: 4A92CP4459  
Engine Capacity: 1590 cc  
Maximum Power Output: 86.0 kW (115 bhp)  
Maximum Laden Weight: 1750 kg  
Unladen Weight: 1284 kg  
Year Of Manufacture: 2017  
Original Registration Date: 20 Jun 2017  
Lifespan Expiry Date: -  
COE Category: A - Car up to 1600cc & 97kW (130bhp)  
Quota Premium: \$50,889.00  
COE Expiry Date: 19 Jun 2027  
Road Tax Expiry Date: 19 Dec 2018  
PARF Eligibility Expiry Date: 19 Jun 2027  
Inspection Due Date: 19 Jun 2020  
Intended Transfer Date: 17 Aug 2018  
CO2 Emission: 171.00 (g/km)  
CEV/VES Rebate Utilised Amount: -  
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 (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Total Amount Payable:			25.00

You may print this page for reference.

OK

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