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	Survey Report		
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Preferred Wksp / INC Assign Wksp / QW: (		Tol: F:	on the second se
TP Particulars: Veh No: Let 26 10H	INC(	)/Non-INC( ).	
Owner / Driver: (		Tel:	)
Policy No: ( ) Period: (	)	Cover Type: (	)
Confirmed by ; (	Date:	Times	)
Insured/Driver Liability: ( %) [Note-Est. Status		%; P: 21-79%. P: 80-10	0%]
Year of Registration: ( ) Warranty: YES	( )/NO( )		
Excess: (\$ ) Loading: \$1,000 ( )/\$2,0	00()		
Emilia de la		MINISTER STATES	State
( ) Walk-In Customer: Customer's information strictly to	Confidential & Stric	tly NO refer of repairer.	
( ) Total Loss Case : to e-mail Insurer URGENTLY			
Drive-In ( )/ Towed-in ( ); Invoice: YES ( )/	NO( ); To	wing Co: ( · , '	. )
	NOTE SEE STATE		Virginiano by
1) Apply for Transport Allowance ( )/Courtesy Car (	)		377.4
2) QC Check / Post Repair Inspection (	.)	. *	
3) Upload Resurvey Photo [Repair Cost>\$3000] (	) ::		
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Checked by (Engr-In-Charge):	OD:		55
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nditors Comments of the Commen	*NE: DV / Collec	t Excess Coordination	55
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#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

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 misrepresentation 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 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	20/02/2019 10:53
Date Of Accident	08/02/2019 16:30
Exact Location Of Accident	MACPERSON RD TOWARDS ALJUNIED RD A/F PAYA LEBAR
Country/State of Loss	SINGAPORE
PART DE LA CONTRACTOR D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJP5957D
Insured/Policyholder	
Name Of Registered Owner	SRS AUTO HOLDINGS PTE. LTD.
Co Reg No	201709236H
Email Address	FARHANARMAN22@GMAIL.COM
Mobile Phone No	(LOCAL) +65-84847991
Alternative Phone No	OFFICE-84847991
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	AVANTE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5107093948
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD FARHAN BIN ARMAN
NRIC No	S9629248A
Date Of Birth	22/08/1996
Occupation	OUTDOOR
Date Of Driving Pass	26/07/2016
Driving Experience	2 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84847991
Fax Number	
Contact Number	OTHERS-84847991

FARHANARMAN22@GMAIL.COM

BLK 411 BEDOK NORTH AVENUE 2 Address

#05-102

Postcode 460411

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

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

please refer to police report t/20190209/2039

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

FBH2680H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

SHAFIQ

NRIC/Passport Number

Contact Number

87141476

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1** 

Name

SHAFIQ

Page 2 of 18

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBH2680H

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

#### SKETCH PLAN

## **IMPORTANT NOTICE**

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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 companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
  - 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

12/2019

(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 :

GIARMU SketchPlanForm\_V3





1 of 3

Report No. T/20190209/2039

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

REPORT	OF A	TRAFFIC	ACCIDENT
MEI OIL		201000000	

EPORT OF	A TRAFFIC A	CCIDENT	Vide Report No.:	Station Diary No.:
0ate/Time Report Made: 09/02/2019 11:02		G/20190208/0156	22	
E I	t's Particul Informant: MAD FARH	AN BIN ARMAN	Address: APT BLK 411 BEDOK NO SINGAPORE 460411	ORTH AVENUE 2 #05-102
ID Type /	D Type / ID No.: NRIC NO / S9629248A Nationality: SINGAPORE CITIZEN		Contact No.: Home/Office:	Mobile: 84847991
Nationali			Email:	
Sex:	Age:	Date of Birth: 22/08/1996	Type of Informant: Driver	Institution / School Name:
Male Race:	22	22100110	Language: English	SIPSSE
Occupa DRIVER			Driving Licence Informa Class: 3	tion: Date of Expiry:

eneral Infort	nation of the Accident	Drink	D	ate/Time of	Type of Location:
Type of Accident:	Injury Conveyed By Ambular		. A	ccident: 8/02/2019 16:30	Straight Road
MACPHERS	Traveling Toward Road 2 ON ROAD				
after Pava L	ebar Road	Road Surfa	ce:		Road Speed Limit:
ALJUNIED F after Paya Li Lamp Post M Weather: Clear	ebar Road lumber: 116	Road Surfa Dry Traffic Con			Road Speed Limit: Traffic Volume:
after Paya L Lamp Post N Weather:	ebar Road Jumber: 116 ge Way		trol:		

Details of V	ehicle Involve	d	Model	Color	Condition	No of Passenger
Vehicle No.	Туре	Make	FZ 16	Black	Slightly	0
FBH2680H	Motorcycle	YAMAHA	FZ 10	E ASIECTO	Damaged	
	A CONTRACTOR OF THE PARTY OF TH	LOCUMDAI	AVANTE	Black	Slightly	0
SJP5957D	Car	HYUNDAI	(HD) 1.6 DOHC AT ABS AIRBAG 2WD		Damaged	





T/20190209/2039

2 of 3

Report No. T/20190209/2039

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

#### CONTINUATION OF REPORT

Details of Perso	n Involved	Land Street	THE REAL PROPERTY.		BARY.	FAREST FORES
Any Pedestrian In	nvolved: No					
No. of Pedestrian	s Injured: NIL		Use	of Pedestria	n Cross	sing: NA
Driver						
Name	MUHAMMAD FARHAN BIN ARMAN			ID N	0.	S9629248A
Related Vehicle	SJP5957D (Car)			Cont	act No.	84847991
Hospital/Clinic	NIL			41765315175		Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Dat	e Discharge	NIL	
No. of Days gran	ted Medical Leave	NIL		ree of Injury		

#### Brief Details.

On the above mentioned date and time, I was driving my car bearing plate number SJP5957D along Macpherson Road and I intent to go to Mactaggart Road. I was driving on the right of 2 lanes along Macpherson Road. At the junction of Macpherson Road and Paya Lebar Road the traffic light was showing green.

While approaching the junction, I noticed that there was a white in colour van at the slip road from Paya Lebar Road merging to Macpherson Road. As I pass the junction, the van drove out from the slip road and wanted to join into my lane which was the second lane. I honk at the van and it manage to change lane back to the left lane. At the same time, there was a motorcycle that came out of the slip road together with the van and wanted to join the second lane. I continue honking my horn and step on my brake pedals hard. However, the motorcycle did not go change back to the first lane. Thus, the front left side of my car hit the rear of the motorcycle.

The hit caused the motorcyclist to lose balance and fell on his left side. I wish to state that I had press so hard on the brakes that it caused my front left tire to burst. The accident also caused my car's front left bumper to be dislodged, sustained slight dent and scratches. I wish to state that I do not have any in-car camera installed in my vehicle. After the accident, I alight my vehicle and there was another motorcycle that stop and the rider called for ambulance.





3 of 3

Report No. T/20190209/2039

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676

CONTINUATION OF REPORT Tel No: 1800-2449999

# 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: G / Sgt 2 RADIN SALIHUL 'IMRAN BIN RADIN' FADLI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 09/02/2019 11:02
Officer In Charge Of Case: TP / GIT / Sgt 3 MUHAMMAD RIZWAN BIN KAMALUDIN Contact No.: 65476185	Classification Of Case:

Authentication Stamp NP168



cident MY/1033858							
iley Na.	5107093948	enicle his.	SIPSISTO		GGT Registration No.	NA	
trificate No.							
cyholder Name	SRS AUTO HOLDINGS PTE, LTD.				Policyholder NIGC	2017092364	
duct Code	PHIDVATE CAR INSURANCE	Sover Type	Treed Party		Loeding	1 III	
vtact for (Mobile)	ACCEPTANCE 1	Contact No.(Office)			Contact No.(Home)	Prince 1	
neil Address		ipecial Nemark			eGirde:	No T	
N.		rca.	- No Yes		eCode Resson		
D Protection	No. 1	VCD Entitlement(%)	tt.		Private Hirs	946	
P Accident Details					A SECURITY OF THE PARTY OF THE	Carrier of Carrier Carrier	coatica.
port Dale	20/02/2019 12:30	Accident Report Within 24 hrs	Yes		Accident Type	Coldston - Major Min	or Road
ite of Accident	DB/02/2019	Time of Acadent In:mm	16:30		Country of Accident	Singapore	
porting Centre		Orange Force			ICM No.		
Loders Lecution	MACPERSON RD TOWARDS ALJUNIED BD A/F FRYA C	ESWR					
T Encore					TO CONTROL DESIGN	-2007	
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and Party Example	1,500.00	Outside Singapura TP Excess		1_500.00			
♥ Benefits							
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ST Registered	Yes		GST Region	retion Date	01/01/2015 No.		
ST Regretration No.	9/6		Table School	- Andreas	(777)		
odification History							
Policyholder Mailing Add	- W	Address 2	#01-01		Address 3	SPAGAPORE MORSE	9
odress 1	09 000 0 0000000	Address Type	Singapore address		Prist Code	400569	
rddress A		Related Policy Number	5107601011				
onit fee.		- Annual Control of the Control of t					
TO Driver Info	Utrianed Driver	Driver Type	Unnamed Driver				
Innamed driver hame		Driver MRIC	59679748A		Driver DOS	22/06/2996	
egister Date of Driver Licensa	CONTRACTOR AND	Driver Age:	32		Driving Experience	2	
ontact No (Mobile)	Land to be a second	Contact No.(Office)			Contect No.(Home)		
Address 1	CONTRACTOR CONTRACTOR	Address 2	BEDICK MORTH AV	ewir 2	Address 3	SINGAPORE 46041	¥.(
diress 4		Address Type	Foreign address		Post Code	460413	
init No.	05-103						
Sees he swin a Singapore	THE S NO	Driver Vehicle Inc.	53750570		Driver Insurer Company	NTUC	
legistered ray?							
Audification History							
Claim 001 haw							
				OD-MV	■ Insured Sass auto HOLDII  ■ Insured Sass auto HOLDIII  ■ Insured Sass	NGS FTE LTD I INSURA	Ба1709238н
				ос-ик	Insured Sets AUTO HOLDIN     Center	Contact	203709238H
Claim Type *				OC-MX	Centert No.	NESS FIEL LIVE NRSC	201709238H 854824H
Claim Type *				ОС-НК	Centwell Nix. (Harme) OI	Contact No. (DRC=)	88482444
Claim Type * Contact No.(Hotele)				ОС-МУ	Centract No. (Hame)	Contact No. (Dffice) Type Vehicle Number	-
Claim Type * Contact No.(Noble)					Centred No. (Harms) (Harms) (OI Variable (GPS # 575) Number 1	Nasa PTE, LTM3 NRSC Contact No. (Diffice) TP Vehicle Name of	83402444 F8H2080H
Claim Type * Contact No. (Mobile) Emel Address Cham Description				00-MX 5:P55970 / PBH28dDH (	Centred No. (Harms) (Harms) (OI Variable (GPS # 575) Number 1	Contact No. (Dffice) Type Vehicle Number	89402444 F9H268CH
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Claim Type *  Contact Ns.(Mobile)  Emeil Address  Claim Description  Preferrol  workshop  flaming Ns. Yes  Date Registered	* Repair Freferred Workshop, Name	GIA Facción	ed :	SIPSSOTO / PRINCEADH (	Centred No. (Home) Of Vertice Number Number Calm	Mass Plan Mass Contact No. (Diffice) TP Velecte Number Name of Preferred Workshop	ESRT2444 FBH7208CH
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2/20/2019		Claim Handling(acc	cident reporting Cla	im Task )	
	NAC_BUKIT_MERAH_800676; NATJONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Teb 2019 11:48	Photos	Normal	Photos 2010-2-20	
	NAC_BURIT_RERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE 9 (BURIT MERAH)) on 20 Feb 2019 11:48	Photos	Teleroreal	Photos 2519-2-20	
	NAC_BURIT_MERAH_900676; NATIONAL ASSESSMENT CENTRE SERVICE 5 (BURIT MERAH) 00 20 Feb 2018 11:48	Photos	Normal	Photos 2019-2-20	
Vine	NAC_BUKIT_MERAH, BS0676; NATJONAL ASSESSMENT CENTRE SERVICE S (BLN:IT MERAH) on 20 Feb 2010 L1:48	Photos	Normal	Photos 2019-2-20	
	NAC_BURIT_MERAH_6006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BLIKIT MERAN() on 29 Feb 2019 11:48	Phines	Normal	Photos 2019-2-20	
3	NAC_BUKST_MERAH_B00676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKST MERAH)) on 20 Feb 2019 LT:47	Pretton	Normal	Photos 2019-2-20	
	MAC_BUNJT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUNJT MERAH)) on 20 Feb 2018 (L.47	Photos	Normal	Phobis 3019-2-20	
Œ	NAC_BURIT_HERAY_BOSEPM_NATIONAL ASSESSMENT CENTRE BERVICE S (BURIT MERAH)) or 30 Feb 2019 11:47	NRSC/ Driving Ucerse	Normal	NRIC/ Driving Literate 2019-2-20	
Alex	NAC, SKAIT, HIBRAH, BOOS/IS; NATIONAL ASSESSMENT CENTRE SERVICE S (SURIT HERAH)) on 20 Feb 2019 11:47	NASC/ Oriving License	Normal	NRIC/ Driving License 2019-2-20	
***	NAC_BURIT_HERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT HERAM)) on 20 Feb 2019 11:47	NASC/ Driving License	Normal	MRIC: Criving License 2019-3-20	
199	NAC_BURIT_HERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) == 20 Pe6-2019 11:47	SAS	Normal	545 2019-2-20	

Prior Norms

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Fielder Date

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Source

Action

# ACCIDENT STATEMENT

ACCIDENT DATE: (8 . 12 ) 2010 )(DD/MM)	MYYY), TIME: ( 4 30 ) (HH:MM)
LOCATION: MOT Phonosin vid tomaris s	Shandara VI often on tol
	- Good of allier buyer to
1. DETAILS OF VEHICLE	25 SE2 ST III
a) VEHICLE NUMBER: SJP5957D	
DINSURANCE COMPANY: NTUC	•
CIPOLICY NUMBER: C 1670 93948	
d)POLICY TYPE: (COMPREHENSIVE THIRD	D DA DON STATE OF THE STATE OF
B)MAKE & MODEL: HYLANDA ANATE	DPARTY HIRD BARTY FIRE & THEFT
TYPE: (SALOON / COUPE / MPV /VAN / L	CORY (LICES CALLED A CALLED
.g) VEHICLE CATEGORY: (PRIVATE / COMM	LORRI / MOTORCYCLE / OTHERS)
h) PURPOSE OF USING AT ACCIDENT TIME:	- Langer Of
I) ARE YOU CLAIMING UNDER YOUR OWN	INICIA ANDE PRESENTA
IF NO, PLEASE STATE (THIRD PARTY CLAIN	INSURANCE (YES/NO)
2. INSURED / POLICY HOLDER	KEFORTING ONLY)
AINAME SRS Auto Hulding.	
b) NRIC/FIN/PASSPORT: 2017 0925 6H	(MALE / FEMALE)
c)ADDRESS:	CONIACI:
*CONTINUE TO 3.d IF DRIVER ALSO POLIC	YHOLDER
The of passange DRIVER	
(Including driver) diNAME: MULY FOLLOW DIE AVMON-	(MALE / FEMALE)
C) S DINKIC/FIN/PASSPORT: STEETING OF THE	CONTACT: 84847991
CIADDRESS: BEZUL MOREN AVE D. BIK	411,05-167
-d) DATE OF BIRTH: (27 08 1656 )	DD/MM/YYYY) ·
eloccupation: (INDOOR / OUTDOOR)	
DATE OF DRIVING PASS 76 TU	14 2016
4. WAS DRIVER AN EMPLOYEE OF THE INS	SURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER	WITH INSURED: MITTE
5. DIWEATHER CONDITION: (CLEARY RAINING	G / OTHERS
6. WAS ANYBODY INJURED (YES NO)	
7. a) REPORTED TO POLICE (YES INO)	25 No. 1924 No.
IF YES, PLEASE STATE WHICH POLICE STATE	ION: Bilet Police Station.
A THIRD PARTY VELICIE	ON INTER POLICE SIMILARY
He of passenger a) VEHICLE NUMBER: FRH 2680H	Manu E2
Including driver) b) DRIVER'S NAME: Shorting	MODEL: FZ.
( ) NRIC/FIN/PASSPORT:	CONTACT: 8714147(.
9. THIRD PARTY VEHICLE	CONTACT: STATES
No of passanger d) VEHICLE NUMBER:	MODEL: ***
of Doll/Edic Plant	, , , , , , , , , , , , , , , , , , ,
Induding driver 1 NRIC/FIN/PASSPORT:	CONTACT::-
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email = Forman owner 22@ gman 1.com.
VIDEO TIBY & HUOL @ HUMA 1.com.

## REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$9629248A





#### MUHAMMAD FARHAN BIN ARMAN

MALAY Date of berts 22-08-1996



Country of tieth

MICH. S9629248A

21-07-2011

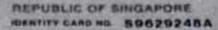
APT BLK 411 BEDOK NORTH AVENUE 2 #05-102 SINGAPORE 460411

NEIG No: \$9629248A

Date:

19/08/2016

4753454







MUHAMMAD FARMAN DIN

#ALAY P2-08-1998 SINGAPORE

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MUHAMMAD FARHAN BIH ARMAH

n= 0= 22 Aug 1996

902592450K



21-07-2011

APT BLX 411 BEDOK NORTH AVENUE 2 PO5-102 SINGAPORE 460411

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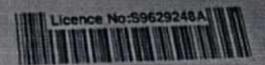
Date: 19/08/2018

YOU ARE LITENTED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Motor cars with unleden weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unleden weight =< 2500kg Cinas 3

26 Jul 2015



**eBao**Tech GeneralClaim Hello, NAC\_BUKIT\_MERAH\_800676 · Change Language · Change Password · Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 08/02/2019 10:50 Vehicle No.(For Motor) SJP5957D Certificate Number Search Certificate Number Policyholder Name Policyholder NRIC Select Vehicle No. Policy No. Insured Product Cover Type Commence Date Expiry Date Object SRS AUTO HOLDINGS PTE, LTD. 5107093948 201709236H GPC Third Party SJP5957D SJP5957D 17/01/2019 29/03/2019 Continue