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REFNO: NBA/INC19004298/K			
Veh No GRE 3774A	E-mail'(trions shirt, AlCahri		
D.OA: 67/03/2019 17:15	I-Motor Claim Form	MT/ 103529	18-001 11/3/19
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OD (TP) Reporting Only	I-Photo Uploaded		
	Assessment/Survey Repor		
TP Insurer:	Ass't Report by Pax/Han		
Proforred Wisp / INC Assign Wksp / QW: (The state of the s	Tol:	Fax:
TP Painticularer Veh No:	3.857400JING	(,)/Non-INC().	
Owner / Driver: (Tel:)
Policy No: () Perio	od: () Cover Type: () .
Confirmed by ; (· Datet,	Times)
Insured/Driver Liability: (%) [N	ote-Est. Status (WO): N: 0	0-20%; P: 21-79%. P: 80-	-100%]
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful 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.

2. 美国大学的大学的大学的大学	ACCIDENT STATEMENT
Date Of Report	08/03/2019 15:50
Date Of Accident	07/03/2019 17:15
Exact Location Of Accident	JUNC OF JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE
THE PROPERTY OF THE PROPERTY O	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBF3774A
Insured/Policyholder	
Name Of Registered Owner	YONG SENG COFFEE POWDER
Co Reg No	09891600M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86465533
Alternative Phone No	OFFICE-86465533
Vehicle Particulars	
Manufacturer	NISSAN
Model	The state of the s
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094319495-01
Cover Note Number	
Driver	
Name of Driver	TAY WENG HOCK
NRIC No	S0878355A
Date Of Birth	27/09/1946
Occupation	OUTDOOR
Date Of Driving Pass	31/10/1964
Driving Experience	54 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86465533
Fax Number	
0-1-11	

OTHERS-86465533

NOEMAIL

Address BLK 64 TELOK BLANGAH DRIVE

#07-204

Postcode 100064

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle -

•

General Information of the Accident

Type Of Accident 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?

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

YES

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

PLS REFER TO THE ATTACHED STATEMENT.

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

SBS7400J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

BUS

Name of Driver

FOO KIM WEI

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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
 - (ii) for complying with requirements under any regulations, laws or court orders.

水性 咖啡 粉 YENG SENG COFFEE POWDER BLM 77, SENG POH ROAD #01-75 KINGAPORE 161077

Policyholder skignature 2232393

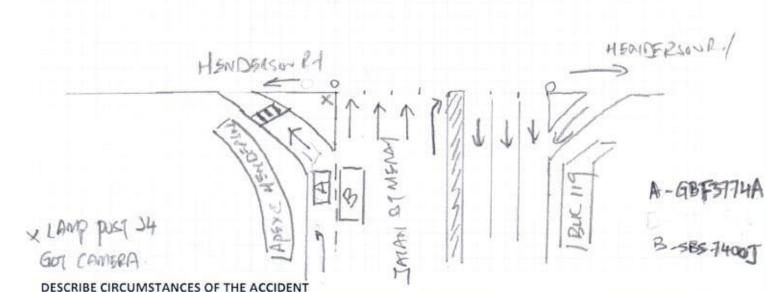
Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Aersonnel's Signature

Name: NRIC/FIN No.:



MEGN.

NAS DRIVING ALONG 3/2019 ABT 1715 HR 7 ON MERAN CONTEM. AS I IMTEND TUNARD 137 THE TRAFFIC LIGHT JO. I SIGNAL LEFT TURN LET 742 LONG QUEUR LA CHE NATING TO Aur. FOLOW 743 QUEUZ GIOVEL SLOWLY AND ENTRYMELY LE17. ZELA CROSSING ANE. STOP AS THERE COMES 3 to 4 CAME AND 25 COUPCELED Distro SBS SBI BUINO STATIONARY N+32 7HZ (BUS CSEVICE NO 14 ML FOO KIM WEI DEIVEN THE REAR OF MY VAN. AS A RESULT UT IS BADY DANAGE VAN REAK BACK LIGHT MY IMPAT RIGHT REST. 500 25 ALOW BADLY DOWACED Ano Jacsu Marie AW-CT A12 SMATCH 743 U Art. DIDNY SWI IMMEDIATELY 142 Rus 1347 PLOCERA FURTHER -AND TRATFIC.

DECLARATION

TWO declare the foregoing particulars are true in every respect. BLE 77, SENG POH ROAD #01-75 SINGAPORB 161077

Policyholder's Signature 2232895

Date & Time:

Driver's Signature

48M12

(If driver is not the policyholder)

Date & Time: 8-3-2019

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:



MT/NB/WELCOM/001

05 Sep 2018

YONG SENG COFFEE POWDER BLK 77 #01-75 SENG POH ROAD TIONG BAHRU ESTATE SINGAPORE 161077

Dear Policyholder

COMMERCIAL VEHICLE INSURANCE POLICY NUMBER: 5094319495-01

Thank you for insuring with Income. We are pleased to be able to help you with your protection and financial planning needs.

Please read the enclosed policy documents to make sure that the benefits meet your needs.

The main documents in this pack carry the Crystal Mark, an international seal of approval for the clarity of a document. It guarantees that a document is written in plain English and offers simple, clear and concise information. We are the first insurance company in Asia to carry out a major Crystal Mark initiative. We know that our customers want information that is easy to understand. By being as clear as possible, we help our customers make informed decisions.

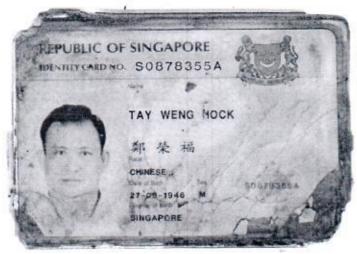
For any correspondence on your Commercial Vehicle Insurance policy, please quote your policy number. This will allow us to help you quickly. Please also let us know if there are any changes to your home address and contact numbers.

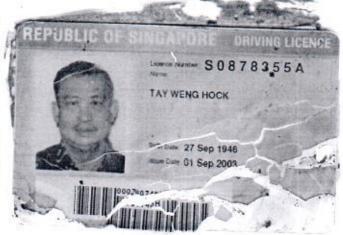
If you have any queries, please contact our customer service officers on 6788 6616 or email us at csquery@income.com.sg. Alternatively, you may contact your agent META AGENCY PTE. LTD. at 98585076 or email charliembpl@gmail.com. Thank you.

Yours sincerely

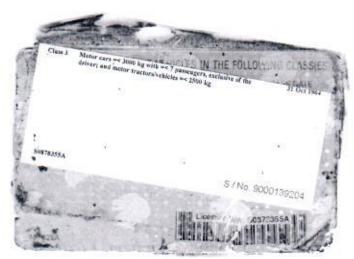
Ken Ng Chief Executive TP

SBS 7400 J. SV14 79310 Foo kim WZI 17:15 JLn Buti Merah











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)

Cover : Comprehensive Certificate Number: 5094319495-01 : GBF3774A Index mark and Registration Number of Vehicle : VM20099677 Chassis Number : YONG SENG COFFEE POWDER 2. Name of Policyholder

: 28 Sep 2018 3. Effective Date of Insurance : 27 Sep 2019 4. Expiry Date of Insurance

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.

(b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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.

: \$\$600 EXCESS (SECTION 1) : N/A EXCESS (SECTION 2) : \$\$100 WINDSCREEN EXCESS : YES INSURE WITH COE : N/A HIRE PURCHASE COMPANY : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency

: META AGENCY PTE. LTD. (00000573430)

Date of Issue

: 05 Sep 2018 16:47 hrs

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBaoTech			General						Claim		
Hello, NAC_BUKIT_MERAH	800676				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· Change L	anguage	· Change	Password	· Log Out
My Desktop	Poli	cy Query									
Notice of Loss Policy No.		No.				Date	of Accident	07/0	03/2019 17	15	
	Vehicle	No.(For Motor)	GBF377	4A		Certif	icate Number				
						Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
		5094319495- 01		YONG SENG COFFEE POWDER	09891600M	GCV	Comprehensive	GBF3774A			27/09/2019
					= 0	Continue					

Sequen	ce Date of Endorsement	E	ndorsemer	nt Type	Endorsement	Status	Endorsement Content
○ Endors	ements						
Insure	d Object: GBF3774A						
Unit No.	01-75	Relate Number	d Policy er	5094319495-01			
Address 4	SINGAPORE 161077	Addres	s Type	Singapore address		Post Code	161077
Address 1	BLK 77 #01-75	Addres	is 2	SENG POH ROAD	- 9	Address 3	TIONG BAHRU ESTATE
Policyh	older Mailing Address						
Certificate Info							
Open Policy Info							
insurance Flag	No						
Co-	manusculer and expression	WANTED COLLEGE				in.	
Agent	META AGENCY PTE. LTD.	Agent Tel.	98585076	=	GST Flag	Ÿ	
Outside Singapore OD Excess		Outside Singapore TP Excess				Youn	g/Inexperience Driver Excess
Additional Excess		OS Premium	0				
Third Party Excess	0	Own damage Excess	600		Windscreen Excess	100	
Excess Type		All Claims Excess					
Policy issue Date	05/09/2018	Effective Date	28/09/201	18.00:00	Expiry Date	27/09/2019 2	23:59
Product Name	COMMERCIAL VEHICLE INSURAI	Plan			Group Policy Flag	N	
Address	BLK 77 #01-75 SENG POH ROAD	TIONG BAHR	U ESTATE	SINGAPORE 161077			
Certificate No.		1191509-11			MAG:		
Policy No.	5094319495-01	Policyholder Name	YONG SEN	NG COFFEE POWDER	Policyholder NRIC	09891600M	

Claim Handling Accident MT/1035298

Policy No.	5094319495-01	Vehicle No.	GBF3774A		GST Registration N	
Certificate No.						
Policyholder Name	YONG SENG COFFEE POWDER				Policyholder NRIC	
Product Code	COMMERCIAL VEHICLE INSURAL	Cover Type	Comprehensive		Loading	
Contact No.(Mobile)	86465533	Contact No.(Office)	0		Contact No.(Home	
Email Address		Special Remark			eCode	
KFK	No Yes	TCA	No Ses		eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20		Private Hire	
Report Date	11/03/2019 11:05	Accident Report Within 24 hrs	Yes		Accident Type	
Date of Accident	07/03/2019	Time of Accident hh:mm	17:15		Country of Acciden	
Reporting Centre		Orange Force			ICM No.	
Accident Location	JUNC OF JALAN BUKIT MERAH					
⇒ Excess						
Own damage Excess	600.00	Additional Excess			Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			Tributa de la caración	
Third Party Excess	0.00	Outside Singapore TP Excess				
▽ Benefits						
▽ GST Registered Informat	tion					
GST Registered	No		GST Regis	stration Date		
GST Registration No.				us Verified	No	
Modification History						
Policyholder Mailing Add	Iress					
Address 1	BLK 77 #01-75	Address 2	SENG POH ROAD		Address 3	
Address 4	SINGAPORE 161077	Address Type	Singapore address		Post Code	
Unit No.	01-75	Related Policy Number	5094319495-01		Post Code	
		and the property of	3094319493-01			
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver			
Unnamed driver Name	TAY WENG HOCK	Driver NRIC	S0878355A		Driver DOB	
Register Date of Driver License	31/10/1964	Driver Age	72		Driving Experience	
Contact No.(Mobile)	86465533	Contact No.(Office)	0		Contact No.(Home	
Address 1	BLK 64 #	Address 2	TELOK BLANGAH (ODIVE :	Address 3	
Address 4	SINGAPORE 100064	Address Type	Singapore address		Post Code	
Unit No.	3410N-0NL 100001	routess type	Singapore address		Post Code	
Does he own a Singapore Registered car?	○ Yes ■ No	Driver Vehicle No.			Driver Insurer Com	
Declaration						
Breathalyser or Blood Test Reading?	0 mg	Any injury?	⊖ Yes 🛞 No			
Modification History						
Claim 001 OD-MX New						
Claim Type *				OD-MX	Insured YONG	
Contact No.(Mobile)					Contact No. (Home)	
Email Address					OI Vehicle GBF37	
Claim Description				GBF3774A ON 7 Mar 2019	Number	
Preferred	Insured Liability Bloom Select					
Workshop Benuet No. Finalisation Yes	Preference Please Select Please Select	▼ GIA Pending				
Date Registered	Option Presse Select	report Pending	*	11/03/2019 18:44	Claim Close Date	
Report Taken By					Workshop Repairer	
Print AK letter						

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