

# NATIONAL Assessment Centre Services.

[wef 1 Jan 2005]

MAA419040735

Date In: 28/03/2019 11:09	Job description	Date & Time Completed	Done by
Ref No: MAA419005601/Y	SAS e-filing		
Veh No: SMJ 3710J	E-mail (w/plate 3hrs, AIC 2hrs)		
D.O.A: 28/03/2019 09:30	I-Motor Claim Form	MT11031934001	28/03/2019 11:09
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/WHAR		

Preferred Wksp / INC Assign Wksp / QW: ( )	Tel: ( )	Fax: ( )
TP Particulars: ( )	Veh No: SIM 3596R	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: ( )

Repairer's Instructions:

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

2) QC Check / Post Repair Inspection ( )

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

Injury: ( )

Date/Time	Action

MAA41902284	Invoice No: MAA41902284
Driver/Owner:	1) AR: Accident Reporting (\$30)
Contact No:	2) DA: Damage Assessment (\$100) INC (\$30)
Damaged Portion:	3) TP: Towing Fee \$10/\$45
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120
	5) FT: Follow-Through Survey (Resurvey) \$30
	For claiming against INC Only (wef 10 Jan 2005)
	6) TR: Re-inspection \$75
	7) NI: Idau DA + SMRT Survey \$160
	8) NTUC Additional Services:
	ON:
	* NI: Courtesy Car / Tpr Allowance \$3
	* NI: Repair Coordination \$100
	* NI: Post Repair Inspection \$25
	* NI: DV / Collect Excess Coordination \$5
	TP (Nil) / TP (Non INC) \$100
	9) NI: Idau Mobile \$30
	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	28/03/2019 17:55
Date Of Accident	28/03/2019 09:30
Exact Location Of Accident	WHITLEY ROAD TURNING TOWARDS DUNEARN ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ3770J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KARZ-TA LEASING
Co Reg No	53318368E
Email Address	KARZTALEASING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94508445
Alternative Phone No	OFFICE-81802030

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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	REPORTING ONLY
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	5083195710-02
Cover Note Number	

### Driver

Name of Driver	LIM SOO HENG
NRIC No	S1356202D
Date Of Birth	31/10/1959
Occupation	OUTDOOR
Date Of Driving Pass	10/05/1979
Driving Experience	39 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94508445
Fax Number	
Contact Number	OTHERS-81802030
EMail Address	KARZTALEASING@GMAIL.COM

Address	BLK 131 JALAN BUKIT MERAH #04-1571
Postcode	160131
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE

#### 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 SKETCH PLAN

#### 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	SJM3596R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHING SHIQ CLIVE
NRIC/Passport Number	S9203713D
Contact Number	81183339
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.
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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**.
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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.

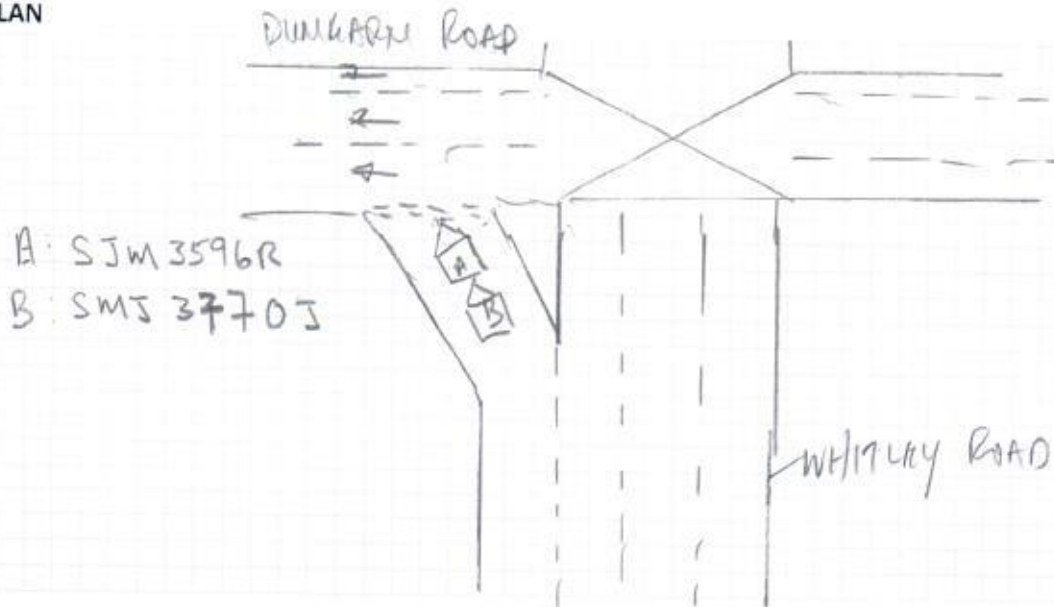


Policyholder's Signature  
Date & Time:

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

29/03/2015  
  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

**SKETCH PLAN**



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I was traveling from Whitley Road turning toward Dunearn Road. SJM 3596R stop and I just stop in time and only touch on the bumper. Car SJM 3596R was doing Hitach at the time of accident. Passage of SJM 3596R no injured. and just walk off. Damage was very slight.

**DECLARATION**

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

Policyholder's Signature  
Date & Time:

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

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



## Claim Handling

The premium on this policy has not been collected.

Accident MT/1037934

Policy No.	5083195710-02	Vehicle No.	SMJ37701	GST Registration No.	
Certificate No.					
Policyholder Name	KARZ-TA LEASING			Policyholder NRIC	53318368E
Product Code	FLEET INSURANCE	Cover Type	Third Party	Leading	0
Contact No.(Mobile)	94508445	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

## Accident Details

Report Date	29/03/2019 11:23	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	28/03/2019	Time of Accident hh:mm	09:30	Country of Accident	Singapore
Reporting Centre		Damage Party		ICM No.	
Accident Location	WHISLEY ROAD TURNING TOWARDS DUNNARY ROAD				

## Excess

Own Damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,000.00	Outside Singapore TP Excess	1,000.00		

## Benefits

## GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## Policyholder Mailing Address

Address 1	517 OUTRAM ROAD	Address 2	#B1-03 CONCORDE SHOPPING	Address 3	SINGAPORE 149075
Address 4		Address Type	Singapore address	Post Code	169075
Unit No.	B1-03	Related Policy Number	5083195710-02		

## OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	31/10/1959
Unnamed driver Name	LIN SOO HENG	Driver NRIC	S1356202D	Driving Experience	39
Register Date of Driver License	28/05/1979	Driver Age	59	Contact No.(Home)	
Contact No.(Mobile)	81802030	Contact No.(Office)		Address 3	KIM TIAN VISTA
Address 1	BLK 131 #04-1571	Address 2	JALAN BUKIT MERAH	Post Code	160131
Address 4	SINGAPORE 160131	Address Type	Foreign address		
Unit No.	04-1571				
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	SMJ3596R	Driver Insurer Company	NTUC

Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any Injury?	Yes - No		

## Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	KARZ-TA LEASING	Insured NRIC	53318368E
Contact No.(Mobile)	83223232	Contact No. (Home)		Contact No. (Office)	NIL
Email Address		OT		TP	
Claim Description		Vehicle Number	SMJ37701	Vehicle Number	SMJ3596R
Preferred Workshop		SMJ37701 / SMJ3596R ON 28 Mar 2019		Name of Preferred Workshop	
Preferred Workshop Finalisation	Yes	Insured Liability	Fully at Fault	GIA report	Received
Date Registered	29/03/2019 11:43	Claims Close Date		Date Received	29/03/2019 00:00
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

## Attachment

Accident No.	MT/1037934	Claim No.	001
Last Doc. Received	* Yes - No	Upload Date	29/03/2019 11:44
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Description *	
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29	
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29	
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29	



NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29
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NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	SAS	Normal	SAS 2019-3-29
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Mar 2019 11:44	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-3-29

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	



# ACCIDENT STATEMENT

ACCIDENT DATE: (28 / 03 / 19) (DD/MM/YYY). TIME: (09 : 30) (HH:MM)

LOCATION: Whitley Road Turning Toward Duncarn Road

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SMJ 3770 J  
 b) INSURANCE COMPANY: NTUC  
 c) POLICY NUMBER: 5083195710  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: Toyota Altis  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Hirer  
 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: Karzta Leasing (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 533183685 CONTACT: 94508445  
 c) ADDRESS: 217 Outram Road Concord shopping centre  
Holiday Inn Atrium B1-03

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

### DRIVER

- d) NAME: LIM Soo Heng (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: 513562029 CONTACT: 81802030  
 c) ADDRESS: 131 Jalan Bukit Merah #04-1571  
S(160131)

\* d) DATE OF BIRTH: (31 / 10 / 1954) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 10 May 1979

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

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: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: STM 3596 R MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: Ching shi a clive  
 c) NRIC/FIN/PASSPORT: 392037130 CONTACT: 8118 3339

## 9. THIRD PARTY VEHICLE

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

Email = KarztaLeasing@gmail.com

VIDEO

PAX (F)

\* No of passengers  
 (including driver)  
 (2)

\* No of passengers  
 (including driver)  
 ( )

\* No of passengers  
 (including driver)  
 ( )

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1356202D



LIM SOO HENG

林順興

CHINESE

Date of Birth: 31-10-1959 Sex: M

Country of Birth: SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1356202D

Name: LIM SOO HENG

Birth Date: 31 Oct 1959

Issue Date: 24 Mar 2009

001723386C



1140875



NRIC No: S1356202D



Board Group: O+ Date of issue: 27-07-1993

APT BLK 131 JALAN BUKIT MERAH #04-1571  
SINGAPORE 160131

NRIC No: S1356202D Date: 20/04/1999 (R)

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

CLASS DATE

Class 2B Motorcycles <= 200 cc 68 Sep 1990

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 16 May 1979

NP 428A

Licence No: S1356202D





## 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:** 5083195710-02

**Cover :** Third Party

1. Index mark and Registration Number of Vehicle : **SMJ3770J**  
 Chassis Number : **MR053ZEC107118605**
2. Name of Policyholder : **KARZ-TA LEASING**
3. Effective Date of Insurance : **07 Mar 2019**
4. Expiry Date of Insurance : **06 Mar 2020**
5. Persons or Classes of Persons entitled to drive#  
 (a) The Policyholder.  
 (b) Any other person who is driving on the Policyholder's order or with his/her permission.  
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#  
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

**This Policy does not cover**

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

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,000
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

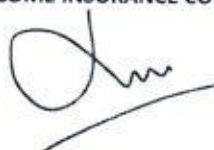
Agency : COWELL INSURANCE (AGENCY) PTE LTD (00000610380)  
 Date of Issue : 23 Jul 2018 12:07 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

## Enquire Vehicle Information

## Vehicle No.

Vehicle No. : SMJ3770J

## Vehicle Details

Vehicle Type : Private Hire (Chauffeur) Motor Car

Vehicle Attachment 1 : No Attachment

Make / Model : TOYOTA / COROLLA 1.6

Primary Colour : Gold

Year of Manufacture : 2006

Maximum Laden Weight : 1600 kg

Unladen Weight : 1115 kg

No. Of Axles : 2

Engine No. : 3ZZ4562625

Chassis No. : MR053ZEC107118605

Engine Capacity : 1598 cc

Maximum Power Output : 81.0 kW ( 108 bhp )

IU Label No. : 1120013907

Propellant : Petrol

Passenger Capacity : 4

Original Registration Date : 08 May 2006

First Registration Date : 08 May 2006

Open Market Value : \$15,950.00

Additional Registration Fee Rate : 110.00 %

Actual ARF Paid : \$17,545.00

PARF Eligibility : Forfeited

Minimum PARF Benefit : -

COE No. : 2006050101000927D

COE Category : A - Car (1600cc &amp; below)

COE Expiry Date : 07 May 2021

Quota Premium (QP) : \$11,901.00

PQP Paid : \$22,789.00

OPC Cash Rebate Eligibility : No

QP during COE Bidding Exercise : \$11,901.00

CO2 Emission: -

CO Emission: -

HC Emission: -

NOx Emission: -

PM Emission: -

Previous

OK



**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : M/NA419040735 Vehicle Registration No: SMJ 3770 J

Name (as shown in NRIC) : Lim Soo Han NRIC/FIN/Passport No : S1356202D

(\* Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate

Address : \_\_\_\_\_ Singapore ( )

Contact (Tel) : \_\_\_\_\_ Mobile No. : 81802030

Email Address : \_\_\_\_\_

Date of Accident : 28/03/2019 Time of Accident : 09:30

Place of Accident : WATERLOO ROAD TURNING TOWARDS DUNDEE ROAD

Insurance Company : NAC


**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To Inform T/P in the Report

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Policyholder / Driver's Signature  
Date:

  
Reporting Centre Personnel's Signature  
Name: Ms. Lim Jia Jia  
NRIC/FIN No: 29/03/2019  
Date: