NATIONAL Assessment Centre	Services, w	1 1 Jan'05] . 1	JAU 41900	107:35-		
Dute in: 28 03 20 8 11 68	Jeb description		Date &Time Co	mpleted	Done by	
Rei No. NBA/Ju (19005601 /	SAS c-filing					•
Veh No: SMT 27707	E-malf (ajula she	s, AlC 2hrs)	1			1 - 10
D.OA: 08/02/2015 09:30	l-Motor Claim	l'orm	m1 103193	34001	2463	200
,	I-Motor W/O	Vithia: OD 2hrs,	TP (brs)		11:44	
OD / TPC Reporting Only	i-Photo Upload	led				
The second	Assessment/Surv	ey Report			· ~.	
TP Insurer:	Ass't Report by	Pax/Hand to	Owner/Wksp		****	meters.
Proforred Wksp / INC Assign Wksp / QW: (Teli	Fext		
TP Particulars: Veh No: SW	1 3596R	. INC()/Non-INC	().	ـــبــــ	
Owner / Driver: (Tel:			
Policy No: () Perio	od: ()	Cover Type: (-	
Confirmed by : (Dater,	Thue	-	//	
	ote-Est. Status (Wo		70; P; 21-1970	. 1100-100	-1	
Year of Registration: () W Excess: (\$ ') Loading: \$1,000	arrenty: YES ()/NO(/			
TENNING THE CONTRACT OF THE CO	NACTOS MINO	ANT YEAR SHE	PARTIE STATE	ATTENNA .	A	, , ,
() Walk-In Customer : Customer's Inform	nation strictly Conf	Idential & Str	ctly NO rafer of	repairer.		
() Total Loss Case : to e-mail Insurer		1.	· "" ·	,7		
Drive-In ()/ Towed-In (); Invoice:);T(wing Co: ('	')
				REAL PROPERTY.	FLYLIONS D	y
1) Apply for Transport Allowance ()/Co	urtesy Car ()	a company same and	All this and the Asia Asia A			
2) QC Check / Post Repair Inspection	(·)	Mark and a state of the state of				
3) Upload Resurvey Photo [Repair Cost> \$30	000] ()					
Injurý:						
Barrer Committee of the	asilalaran Digital	AND THE STATE OF		17/2/1/27/27	PACKE THE	THE PARTY OF THE
THE TRANSPORT OF THE PROPERTY	W. TOWN DESIGNATIONS	INTERNITIONAL PROPERTY CONTROL	*FIGURASCOURALINGSON	ALAHIDA KASE MANDA		<u> </u>
			<u>'</u>			
	_1				 	
*	TO THE REAL PROPERTY.		THE PARTY AND TH		TUDEN	(LANUX3)
XH140.2294 ···		My bike High	100000	The state of the s		Indibin.
Charles and a compatible of the control of	160	1) AR! Acciden	Vitariment (2100)); INC (250)	75	
Driver/Owner:	S. I.	3) TF: Towing	hearh Survey	\$1	20	
Contact No:		C) UT . Hallawe	hrough Survey (Res	ref 10 Jin 200)	30	
		6) TR: Relam	ption		75	
Damäged Portion:	<u> </u>	A) NTUC Addit	+ SMRT Survey			
QC Checked by (Engr-In-Churge):		OIL	y Coff Tor Allowen	Ų ų	31	
QC. Cheered by (Bright-Line-Strat Re).	SECTION 18	M ANG Bapale	Contdination (F)	00070	120 +00 0	10-61
Additors Comments Pine		L NE DV/C	nelr Inspection	netion	35 520 T.C.	1140
Tal. 1:	,	(9) N13: Ideo M	P (Non INC) • galles		30	WHEN WELL
2/3:		Involve dated	THE STREET	Fee Charged Pee Charged		
		Invoice dated				

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 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.	g of the report of the control and to copies of the report being made available
	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
Insured/Policyholder	
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

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

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

OTHER - HIRER

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

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)

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.
- 2. 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.
- 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.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's S

Name:

NRIC/FIN No.

Accident MT/1037934					
folicy No.	2003542570-05	Vehicle No.	SM(3770)	GST Registration No.	
ertificate No.					
olicyholder Name	KARZ-TA LEASING			Policyholder NRIC	51318368E
oduct Code	FLEET INSURANCE	Cover Type	Third Party	Loading	0
ontact No.(Mobile)	94508445	Contact No.(Office)		Contact No.(Home)	-
mail Address		Special Remark		eCode	No *
×	No Yes	TC4	- No. Yes	«Code Reason	10.
CD Protection	No	NCD Entitlement(%)		Private Hire	Yes
Accident Details					144
port Date	29/03/2019 11:21	Accident Report Within 24 hrs	Vez	Acodent Type	Parties to the same
ste of Accident	28/03/2019	Time of Acadent his min	09:38	Country of Accident	Collision - Head to Rear
eporting Centre		Orange Force	(100)	ICM No.	Singapore
roident Location	WHILEY ROAD TURNING TOWARDS DUNBARN R	IOAD:		150.40	
v Excess					
en damage Excess	0.00	Additional Excess	6	Maria Control W	
mamed Driver Excess		Outside Singapore OD Excess		Windstreen Excess	0.00
and Party Excess	1,000.00	Outside Singapore TP Excess	0.00		
▼ Benefits		Sugarore in Estate	1,000.90		
GST Registered Informa	tion				
T Registered	No		무섭섭하다 분통 시원에 있습니다.		
T Registration No.	NO.		GST Registration Date		
dification History			GST Status Verified	Tex	
Policyholder Mailing Ade	dress-				
dress 1	SEF OUTRAM ROAD	Address 2			
dress 4	AND THE BASE THE	Address Type	#81-01 CONCORDE SHORVING	Address 3	SINGAPORE 169075
e No.	B1-03		Singapore address	Post Code	169075
OI Driver Info	7077778	Related Policy Number	5083185710-02		
iver Name	Unnamed Driver	Driver Type	Charles of Harris		
harried driver Name	LIN SOO HENG	Driver NRIC	Unhamed Driver		
gister Date of Driver License	38/05/1979	Driver Age	\$1356202D	Oriver DDB	31/10/1959
ritect No.(Poblie)	81802030	Contact No.(Office)	59	Onving Experience	39
dress 1	BLX 131 #04-1571	Address 2	and the minutes of the Co.	Contact No (Home)	
dress 4	SINGAPORE 160131		JALAN BUKIT MERAH	Address 3	KIM TIAN VISTA
vt No.	G4-1571	Address Type	Foreign address	Post Code	160131
ses he own a Singapore	Yes - No	-42-0-2002-00-00-00-00-00-00-00-00-00-00-0			
rgistered car?	Yes - No	Oriver Vehicle No.	SJM2596R	Driver Indurer Company	NTUC
claration					
eachalyser or Blood Test ading?	0 mg	Any injury?	Yes - No		
Claim 001 New					
			ОО-МХ	Itoured KARZ-TA LPASING	Insured 533163665
sim Teps •			***************************************	Insured KARZ-TA LEASING Contect	NRIC (33340300C
sim Teps •			ОО-МХ #3223232		Corract No. No.
nim Tape * ntact No.[Mobile]			***************************************	Contact No. (Hume)	NRIC Contact No. (Office) TP
sim Tape * sitact No.(Mobile)			***************************************	Contact No. (Home)	Corriect No. NII. Office
aim Type * sitact No.(Mobile) rial/ Address			93223232	Coreact No. (Hums) OI Vehicle SM337701 Number	Contact No. (Office) TP Wehicle SIM35968 Number
nim Tupe * ritact No.(Mobile) rielf Address kim Description			***************************************	Coreact No. (Hums) OI Vehicle SM337701 Number	Contact No. NIL. (Office) TP Venicle SIM35968
nim Type * ntact No.(Mobile) iell Address int Description iffered	Protected Liability Fully of Fault	•]	\$13223232 \$M137703 / \$2M3696	Coreact No. (Hums) OI Vehicle SM337701 Number	Contact No. (Office) TP Vehicle Number Name of Preferred
nitact No.[Mobile] rial Address sim Description efformed ethylop staytop	* Repair Preferred Workshop, Name		\$13223232 \$M137703 / \$2M3696	Contact No. (Huma) (Huma) OI SMIST701 Number Farmer 2019	Contact No. (Office) TP Vehicle Number Name of Preferred
nitact No.(Mobile) rial Address aim Description efferred private No. (Yes	Proferred Liability Fully of Fault Figure Proferred Workshop, Name Option		\$13223232 \$M137703 / \$2M3696	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Contact No. (Office) TP Vehicle Number frame of Preferred Workshop
nim Type * nitact No.[Mobile] niel Address nim Description offerred crestrop mark No. Yes nikeren No. Yes	* Repair Preferred Workshop, Name		#3223232 \$ML37703./ \$2M3694 \$ 29/03/2019 11-43	Cortact Mo. (Huma) OI SMISTROI MAINTHER SMISTROI CON 28 Mar 2010	Contact No. (Office) TP Wehicle Number Kame of Preferred Workshop
nim Type * nitact No.[Mobile] niel Address nim Description offerred crestrop mark No. Yes nikeren No. Yes	* Repair Preferred Workshop, Name		#3223232 \$M137701./ \$JM3696 ▼	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Centact No. (Office) TP Vehicle Number Name of Preferred Workshop
nim Type * ntact No.(Mobile) nim Description in Description inferred resistop must No. Vee te Registered port Taken By	* Repair Preferred Workshop, Name		#3223232 \$ML37703./ \$2M3694 \$ 29/03/2019 11-43	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Centact No. (Office) TP Vehicle Number Name of Preferred Workshop
nitact No. (Mobile) nelf Address aim Description eferred stration situation (Yee situation (Yee) situation (Yee) situation (Yee) situation (Yee) situation (Yee)	* Repair Preferred Workshop, Name		\$3223232 \$MI37703 / \$3M3696 \$	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Contact No. (Office) TP Vehicle Number frame of Preferred Workshop
ontact No.(Mobile) mail Addruse laim Description referred ersprog ensuring ensuring extension Yee ste Registered sport Taken By Print AK letter	* Repair Preferred Workshop, Name		#3223232 \$ML37703./ \$2M3694 \$ 29/03/2019 11-43	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Corriect No. (Office) TP Vehicle Number frame pf Preferred Workshop
orien Type * pritact No. (Mobile) mail Address aim Description efferred orkshop misset No. Yes Misset No. Attachment	* Repair Preferred Workshop, Name		\$3223232 \$MI37703 / \$3M3696 \$	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Corriect No. (Office) TP Vehicle Number frame pf Preferred Workshop
nitact No.[Mobile] niel Addrase aim Description efferred existing elsert no. Yes altachment Attachment	Option Proferred Workshop, Name	e unknown v report Received	\$3223232 \$MI37703 / \$3M3696 \$	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Contact No. (Office) TP Vehicle Number frame of Preferred Workshop
nitact No.[Mobile] itali Address i	Option Preferred Workshop, Name	e unknowin GIA Received R	\$3223232 \$MI37703 / \$3M3696 \$	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Contact No. (Office) TP Vehicle Number frame of Preferred Workshop
im Type * ntact No. (Mobile) iel Address im Description forred rkstrop stact No. Yes at school yes Print AK letter Attachment	Option Proferred Workshop, Name	e unknown v report Received	#3223232 \$MU37700 / \$3M3696 # 29M25/2019 11 43 ROSLI WAHAB	Coreact No. (Huma) OI Vehicle SMUS7701 Number FAUmber Claim Close	Centact No. (Office) TP Vehicle Number Name of Preferred Workshop
im Type * itact No. (Mobile) all Address im Description ferred existop stact No. Yes all subson Print AK letter Attachment ident No. Doc. Received	Option Preferred Workshop, Name	e unknowin GIA Received R	#3223232 \$MI37703 / \$3M3696 \$	Coreact No. (Hums) OI Vehicle Number SR 04 26 Mar 2010 Claim Close Date	Centact No. Office) TP Vehicle Number Frierred Workshop Date Received 29/03/2019 00:
im Type * itact No. (Mobile) all Address im Description ferred existop stact No. Yes all subson Print AK letter Attachment ident No. Doc. Received	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	#3223232 SMI37703 / \$3M3696 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Conflict No. (Hums) OI Vehicle Sex On 28 Mar 2010 Claims Close Date Confidential Urger	Octraed No. NIL. Ottoo) TP Vehicle Number Name of Preferred Workshop Date Received 29/03/2019 00:
im Type * stact No.(Mobile) eli Address im Description ferred restract restract stactan e Registered port Taken By Print AK letter stachment dent No. t Dec. Received	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	#3223232 SML37703 / S.M3696 \$	Contact No. (Hums) OI Vehicle SMIST701 Number SR 04 25 Mar 2019 Claims Close Date Confidential Urger No. (No. (No. (No. (No. (No. (No. (No.	Contact No. 10ttcol TP Vehicle Number Name of Preferred Workshop Date Received 28903/2019 00:
in Type * stact No.[Mobile] bil Address in Description ferred ferred ferred ferred station ferred station ferred for Taken By Print AK letter thackment charten thoose File No file chosen hoose File No file chosen	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	#3223232 SMI37703 / RM3698 *	Conflict No. (Hams) OI Vehicle Service	Contact No. 10ttco) TP Vehicle SUM35968 Number Name of Preferred Workshop Date Received 28/03/2019 00:1
im Type * stact No.[Mobile] sil Address im Description ferred fer	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	Save Submit Save Submit Obj 29/03/2019 11:44 Category * Clear Please Select Chair Please Select	Contact No. (Huma) OI Vehicle SMUST701 Number Claims Close Date V NO V Normal V NO V Normal V NO V Normal	Contact No. 10ttco) TP Venicle Number Name of Preferred Workshop Date Received 28/03/2019 00:
im Type * Ittact No.[Mobile] Itel Addruse Im Description Informat Infor	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	Save Submit Obl 29/03/2019 11:44 Category * Clear Please Select	Contact No. (Huma) OI SMUST701 Normal Charact No. (Cantidential Urge Date Normal Normal Normal No. Normal No. No. (No. Normal No.	Date Received 28/03/2019 00:1
im Type * ittact No.[Mobile] all Addruse im Description ferred ferred festred festred port Taken By Print AK letter Ident No. I Doc. Received hoose File No file chosen	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	Save Submit 29/03/2019 11:43 ROSII WAHAB OUL 29/03/2019 11:44 Category * Clear Please Select	Contact No. (Huma) OI Vehicle SMUSS7701 Normal Oise Delte Delte Oise	NRIC Contact No. 10ttce) TP Vehicle Number Number Name of Preferred Workshop Date Received 28/03/2019-00:
in Type * Itact No. [Mobile] If Addruse In Description (arred course) (ar	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	Save Submit Obl 29/03/2019 11:44 Category * Clear Please Select	Contact No. (Huma) OI SMUST701 Normal Charact No. (Cantidential Urge Date Normal Normal Normal No. Normal No. No. (No. Normal No.	Contact No. 10ttce) TP Vehicle Number Number Preferred P
in Type * stact No. (Mobile) sil Addruse in Description ferred ferred ferred ferred ferred ferred ferred ferred fostrep alsobian Type Registered ort Taken By Print AK letter ttachment ttachment No file chosen hoose File No file chosen	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	Save Submit 29/03/2019 11:43 ROSII WAHAB OUL 29/03/2019 11:44 Category * Clear Please Select	Contact No. (Huma) OI Vehicle SMUSS7701 Normal Oise Delte Delte Oise	Contact No. 10ttce) TP Vehicle Number Name of Preferred Workshop Date Received 28/03/2019 00: 1cy * Description * T
in Type * stact No.[Mobile] sil Address in Description ferred ferred ferred festrep all sation out Taken By Print AK letter stachment dent No. Doc. Received hoose File No file chosen	Proferred Workshop, Name Option MT/103/934 * Yes No Poth *	e unknowin GIA Received R	Save Submit 29/03/2019 11:43 ROSII WAHAB OUL 29/03/2019 11:44 Category * Clear Please Select	Contact No. (Huma) OI Vehicle SMUSS7701 Normal Oise Delte Delte Oise	Determination of the control of the
in Type * stact No.[Mobile] sil Addruse in Description ferred festred festred festred over Taken By Print AK letter Attachment Attachment Attachment No file chosen hoose File No file chosen	Option Preferred Workshop, Name Option MT/1033934 * Yes No	e unknowin GIA Received R	Save Submit 29/03/2019 11:43 ROSII WAHAB OUL 29/03/2019 11:44 Category * Clear Please Select	Contact No. (Huma) OI Vehicle SMUSS7701 Normal Oise Delte Delte Oise	NRIC Contact No. (Office) TP Vehicle Number Rame to Preferred Workshop Date Received 28/03/2019 0000 1000
in Type * stact No.[Mobile] bil Address in Description ferred express ferred ferred express ferred ferred express ferred ferred ferred express ferred fer	Proferred Workshop, Name Option MT/1037614 * Yes No Poth *	Claim No. Upload Date Category	Save Submit Obj 29/03/2019 11:44 ROSLI WAFAS Save Submit Clear Please Select	Contact No. (Huma) OI Vehicle SMASS7701 Number CR ON 28 Mar 2019 Claims Close Date V NO V Normal	Serial Mess Contact No. No. Office) Ty Verticle Number Number Number Preferred Vertiches Vertic
in Type * intact No. [Mobile] iell Address im Description iferred exstrap iferred exst	Proferred Workshop, Name Option MT/103/934 * Yes No Poth *	e unknowin GIA Received Claim No. Upload Date Category	Save Submit Obj 29/03/2019 11:44 ROSLI WAFAS Save Submit Clear Please Select	Contact No. (Huma) OI Vehicle SMASS7701 Number CR ON 28 Mar 2019 Claims Close Date V NO V Normal	NRIC Contact No. (Office) TP Wehicle Name of Preferred Workshop Date Received 28/03/2019 000 Ney * Description * * Send Mess Mag Sent*
in Type * tact No.(Mobile) bil Address in Description ferred rishtop ferr	Option Preferred Workshop, Name Option Preferred Workshop, Name MT/103/914 * Yes No Poth * Upbladed By/Date Upbladed By/Date IT_MERAH_BODG P6(NATIONAL ASSESSMENT CENTR S.(BUKIT MERAH) on 29 Mar 2019 12:44	Claim No. Upload Date Category E SERVICE Photos	Save Submit Sa	Contact No. (Huma) OI Vehicle Number SR ON 28 Mar 2010 Claims Close Date V NO T Normal T NO Normal T NO Normal T NO Normal V NO T Normal	NRIC Contact No. (Office) TP Vehicle Number Nume of Preferred Workshop Date Received 29/03/2019 00: **P ** ** ** ** ** ** ** **
in Type * stact No. [Mobile] bil Address in Description ferred expring dest No. It substan dens No. I Dec. Received choose File No file chosen hoose File No file chosen	Proferred Workshop, Name Option MT/1037614 * Yes No Poth *	Claim No. Upload Date Category E SERVICE Photos	Save Submit Sa	Contact No. (Huma) OI Vehicle Number SR ON 28 Mar 2010 Claims Close Date V NO T Normal T NO Normal T NO Normal T NO Normal V NO T Normal	NRIC Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date Received 28/03/2019 00:1
im Type * Intact No.[Mobile] Intel Address Im Description Informed Instruct Instruct No. In Secretary In Se	Proferred Workshop, Name Option MT/1037914 * Yes No Poth * Uphaded By/Date IT_MERAH_BOOG 76(NATIONAL ASSESSMENT CENTE S (BUKIT MERAH) on 29 Mar 2019 11:64 IT MERAH BOOG 76 NATIONAL ASSESSMENT CENTE	Claim No. Upload Date Category E SERVICE Photos E SERVICE Photos	Save Submit 29/03/2019 11:43 ROSLI WAFAE Save Submit Clear Please Select	Contact No. (Huma) OI Vehicle No. (SMISTRO) For Confidential Urger Claims Close Date V NO T Normal	NRIC Contact No. (Office) TP Wehale Number Number Preferred Workshop Date Received 28/03/2019 00:0 ** ** ** ** Send Moss Msg Sent*

3/29	/2019
	act S
	1
	N
	William)
	W36
	N. P.
	200
	443
	\$ - Sm

Uploaded By/Date	Folder Date		File Name	Source	
NAC_BUNIT_MENA 6	H_B00070(NATIONAL ASSESSMENT CENTRE SERVICE BUKIT MEMAH)) on 29 Mar 2019 11:44	NRIC/ Onlying Deense	Normal	NRIC/ Driving Licenser 2019-3-29	
NAC_BUKIT_NERA S (H_800676; NATIONAL ASSESSMENT CENTRE SERVICE BUKIT MERAH)] en 29 Mar 2019 11:44	SAS	Normal	5AS 2019-3-29	
NAC_BURIT_MERA S (H_500676; NATIONAL ASSESSMENT CENTRE SERVICE BUKIT MERAN); on 29 May 2019 11:44	Photos	Taurrigh	Photos 2019-3-29	
NAC_BUKIT_MERA S.(IN 800676(NATIONAL ASSESSMENT CENTRE SERVICE BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Reprincial	Photos 2019-3-29	
NAC_BUKI7_MERA S	HL BD9676(NATIONAL ASSESSMENT CENTRE SERVICE BLIKIT MERAH)) on 29 Mar 2019-21-44	Photos	Normal	Photos 2019-3-29	
NAC_BURTT_MERA S	UL BD0676(NATIONAL ASSESSMENT CENTRE SERVICE BLACIT MERAH)) on 79 Mar 2019 31:44	Photos	Normal	Photos 2019-3-29	
NAC_BUKIT_HERA S	H_BODG76(NATIONAL ASSESSMENT CENTRE SERVICE (BUKIT MERAH)) on 29 May 2019 11:44	Photos	Normal	Photos 2019-3-29	
NAC_BUKIT_MERA S	H, BODE76 (NATIONAL ASSESSMENT CENTRE SERVICE BUKIT MERAH)) on 29 Mar 2019 11:44	Photos	Normal	Photos 2019-3-29	
NAC_BUKIT_NEW 5.	NI_SODE76; NATIONAL ASSESSMENT CENTRE SERVICE (BUKIT MEKAH)) on 29 May 2019 11:44	Photos	Normal	Postox 2019-3-29	
NAC_BUKIT_MERA S	M_BOO676(NATIONAL ASSESSMENT CENTRE SERVICE (BURTT MERAH)) on 29 Mar 2019 51:44	Photos.	Normal	Photos 2019-3-29	
NAC_BUKIT_MER/ S	NH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE (BUKIT MERAH)) on 29 Mar 2019 11 44	Photos	Normal	Photos 2019-3-29	

Display in New Window Scan and uploading

Action

ACCIDENT STATEMENT

	ACCIDENT DATE:(28) 63) 1.9)(DD/MM/)	YYYI TIME! 09 30 WILLIAM
	LOCATION: Whitley Road Turning	Toward Dungary Roge
	1. DETAILS OF VEHICLE SM 3 3770 3	
	DINSURANCE COMPANY: HTUC OPPOLICY NUMBER: 5083195710	
	D) MAKE & MODEL TOVOTO A THIRD	PARTY / THIRD PARTY FIRE &THEFT)
	f)TYPE: (\$ALOON) / COUPE / MPV / VAN / LO .g) VEHICLE CATEGORY: (PRIVATE / COMME h) PURPOSE OF USING AT ACCIDENT TIME:_	KCIALY MOTORCYCLE)
	IF NO, PLEASE STATE (THIRD PARTY CLAIM	Hirer HISURANCE (YES/NO)
	A) NAME: Karzta Leasing.	W117-12-
AX (F)	b) NRIC/FIN/PASSPORT: 533183685 c) ADDRESS: 217 Outram Road Cor Holiday Inn Attrium	cord shopping centre
Atro of baz	SON AND DRIVER ALSO POLICY	HOLDER
(1) (2)	UNRICHINIPASSPORT: SI > 6 20 2 V	CONTACT: 81802030
	S (160 1 3 1) - d) DATE OF BIRTH: (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	4. WAS DRIVER AN EMPLOYER OF THE INCH	Y 1979 RED'S COMPANY? (YES / NO)
	5. GIWEATHER CONDITION: (CLEAR / RAINING) bIROAD SURFACE: (DRY / WET / OTHERS	ITH INSURED: Hiver
	7. a) REPORTED TO POLICE (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATION	100 and 100 an
Who of passon Clududing dr	ast of VEHICLE NUMBER STAN 3591 R	Day was server
000000000000000000000000000000000000000	o) DRIVER'S NAME: Ching shi a clice c) NRIC/FIN/PASSPORT: 392037135 9. THIRD PARTY VEHICLE	2_CONTACT: 8118 3339
* No of passe (Including d	e) DRIVER'S NAME:	MODEL:
()	f) NRIC/FIN/PASSPORT:	CONTACT:

email = Karzta Leasing @gmail.com VIDEO











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

Chassis Number

Name of Policyholder

3 Effective Date of Leaves

3. Effective Date of Insurance

Expiry Date of Insurance

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.

: SMJ3770J

: MR053ZEC107118605

: KARZ-TA LEASING

: 07 Mar 2019

: 06 Mar 2020

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

CO2 Emission: CO Emission: HC Emission: NOx Emission: PM Emission:

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 & 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

> Previous OK



PARK Sections 4

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay x18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 - 17:00 UEN: SE65500200 / OST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre With whom you submitted the Original Report.

	1	ADDENDUM .:	5
PARTICULARSOFPE	RSON MAKING THE AM	ENDMENTS:	· · · · · ·
Original Report No	: MUAY 19040735	Vehicle Registratio	n No. SMJ 3770 J
Name(as shownin NRIC)	1. 0 11 1		tNo: \$1356202D
	hicle Owner) (*) Please		(110)
Address	•		Singapore(
Contact (Tel)			
Email Address		Mobile No. :	
Date of Accident	Riosimilac	224 225 221	08170
	12 hours 1 Coan	Time of Accident:	Duragell Post
Place of Accident	: WATTUNG MID	which works	DYNIHOUM 10001
Insurance Company	· NAC		
		M	

Date: