

NATIONAL Assessment Centre Services.

Date In: 02/04/2018 11:20	Job description	Date & Time Completed	Done by
Ref No: NIA 190057164	SAS e-filing		
Veh No: SL8 4342U	E-mail (48hrs, AIC 2hrs)		
D.O.A: 06/03/2017 14:30	I-Motor Claim Form	02/04/2018 11:38	
OID / TIR Reporting Only	I-Motor W/O (Within 60 days, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ()	Tel: ()	Fax: ()
TP Particulars:	Veh No: SKX 4248U	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 ()	

() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repeler.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

1) Apply for Transport Allowance () / Courtesy Car ()	
2) QC Check / Post Repair Inspection ()	
3) Upload Resurvey Photo [Repair Cost > \$3000] ()	

Injury: _____

Date: _____

MA1902404	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$50)	
Contact No:	3) TP: Towing Fee \$40/\$45	
Damaged Portion:	4) PT: Follow-Through Survey \$120	
	5) PT: Follow-Through Survey (Resurvey) \$30	
	6) TR: Re-inspection \$75	
	7) NI: Idax DA + SMRT Survey \$160	
	8) NTUC Additional Services:-	
	ON:	
	*NI: Courtesy Car / Transport Allowance	
	*NI: Repair Coordination	
	*NI: Post-Repair Inspection	
	*NI: DV / Collect Excess Coordination	
	TP (NI) / TP (Non INC) against INC	
	9) NI: Idax Mobile	
	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	02/04/2019 11:20
Date Of Accident	06/03/2019 14:30
Exact Location Of Accident	BLK 28 DOVER CRESCENT CARPARK DECK 3A
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS4342U
Insured/Policyholder	
Name Of Registered Owner	YANG AH YEOW
NRIC No	S0565139E
Email Address	WYAHYEOW@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97407963
Alternative Phone No	OTHERS-97407963

Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 AD GLS (A)
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094671383-01
Cover Note Number	

Driver

Name of Driver	YANG AH YEOW
NRIC No	S0565139E
Date Of Birth	11/11/1945
Occupation	INDOOR
Date Of Driving Pass	11/06/1963
Driving Experience	55 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97407963
Fax Number	
Contact Number	OTHERS-97407963
Email Address	WYAHYEOW@GMAIL.COM

Address	BLK 27 DOVER CRESCENT #06-27
Postcode	130027
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	NO COLLISION
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	DOVER NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 3 DOVER ROAD , POSTCODE: 130003 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7788999 - FAX NO: 67762859
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190329/2211

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	SKX4248U
Vehicle Make/Model/Colour	HONDA CRV
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	EDWIN
NRIC/Passport Number	
Contact Number	97602661
Address	
Postcode	
Insurance Company Name	

SKETCH PLAN

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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**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes;
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

no collision

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

no collision

DECLARATION

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

Signature
Date & Time:

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

Signature
Name:
NRIC/FIN No.:



Police Station Of Origin:
Dover NPP
3 Dover Road #01-368 SINGAPORE 130003
Tel No: 1800-7788999

1 of 3
Report No. T/20190329/2211

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/03/2019 21:25	Vide Report No.:	Station Diary No.: 21
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Informant's Particulars

Name of Informant: YANG AH YEOW			Address: APT BLK 27 DOVER CRESCENT #06-27 SINGAPORE 130027		
ID Type / ID No.: NRIC NO / S0565139E			Contact No.: Home/Office: Mobile: 97407963		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 73	Date of Birth: 11/11/1945	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 06/03/2019 14:30	Type of Location: Car Park
Location: Along Road 1 DOVER CRESCENT at the multi storey carpark, level 3.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKX4248U	Car				Slightly Damaged	0
SLS4342U	Car	HYUNDAI	ELANTRA AD 1.6 GLS AT	Silver	No Damage	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20190329/2211

Police Station Of Origin:

Dover NPP

3 Dover Road #01-368 SINGAPORE 130003

Tel No: 1800-7788999

2 of 3

Report No. T/20190329/2211

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLS4342U	NTUC Income Insurance Co-Operative Limited	5094671383-01	23/09/2018	22/09/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	EDWIN	ID No.	NIL
Related Vehicle	SKX4248U (Car)	Contact No.	97602661
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	YANG AH YEOW	ID No.	S0565139E
Related Vehicle	SLS4342U (Car)	Contact No.	97407963
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 06/03/2019 @ 1428hrs at a/m location, the said owner of the vehicle left a note on my windscreen and informed me that while I was trying to park my car and hit onto his vehicle and I wished to inform that I do not recall that there was any collision while I was parking my car. I also wished to inform that the said driver came down to check that there was no damage on my vehicle at all. Ref : TP/IP/16959/2019.



**SINGAPORE
POLICE FORCE**



T/20190329/2211

3 of 3

Police Station Of Origin:

Dover NPP

3 Dover Road #01-368 SINGAPORE 130003

Tel No: 1800-7788999

Report No: T/20190329/2211

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:
D /
Staff Sgt YIP KUM HOONG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
29/03/2019 21:25

Classification Of Case:

Claim Handling

Accident NT/1037072

Policy No.	SDW673383-01	Vehicle No.	SL54342U	GST Registration No.	
Certificate No.					
Policyholder Name	YANG AH HEOH	Cover Type	IRHS PREMIUM	Policyholder NAJC	SDW673383
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)		Working	0
Contact No. (Mobile)	NA	Special Remarks		Contact No. (Home)	
Email Address		TCA	No Yes	eCode	No
KIK	No Yes	ACU Endorsement(s)	30	eCode Reason	
NCD Protection	Yes			Empty Here	Not available

Accident Details

Report Date	22/03/2019 17:18	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	06/03/2019	Time of Accident (Hr:Min)	14:25	Country of Accident	Singapore
Reporting Centre		Damage Force		ICH No.	
Accident Location	BLK 38 DRIVER CRESCENT CARRIAGE DECK SA				

Excess

Den Damage Excess	000.00	Additional Excess	0	Whichever Excess	100.00
Uninsured Driver Excess	0.00	Outside Singapore OD Excess	000.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 27 #06-27	Address 2	DRIVER CRESCENT	Address 3	DRIVER GARDENS
Address 4	SINGAPORE 130027	Address Type	Singapore address	Post Code	130027
Unit No.		Related Policy Number	SDW673383-01		

QT Driver Info

Driver Name		Driver Type		Driver DOB	
Uninsured Driver Name		Driver NAJC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No. (Home)	
Contact No. (Mobile)		Contact No. (Office)		Address 2	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
UIC No.					
Does he own a Singapore Registered car?	Yes / No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002 **New**

Claim Type *	CO-MK *	Insured Name	YANG AH HEOH	Insured NAJC	SDW673383
Contact No. (Mobile)		Contact No. (Home)	82788676	Contact No. (Office)	
Email Address		OT	SL54342U	TP	SL54342U
Claim Description		Vehicle Number		Vehicle Number	SL54342U
Preferred Workshop		SL54342U / SLX1248U ON 6 Mar 2015		Name of Preferred Workshop	
Selected No. Extension	Yes	Insured Liability	Not at Fault		
Date Registered		Preferred Workshop, Name unknown	OTA report	Received	
Report Taken By		03/04/2018 11:37	Claim Close Date		02/04/2019 00:00
Print As Letter		ROSLI WARAB			

Attachment

Save Submit

Accident No.	NT/1037072	Claim No.	002
Last Disc. Received	Yes No	Upload Date	02/04/2019 11:38

Path *

Choose File	Category *	Confidential *	Urgency *	Description *
No file chosen	Please Select	NO	Normal	
No file chosen	Please Select	NO	Normal	
No file chosen	Please Select	NO	Normal	
No file chosen	Please Select	NO	Normal	
No file chosen	Please Select	NO	Normal	
No file chosen	Please Select	NO	Normal	
No file chosen	Please Select	NO	Normal	

Message Read

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CS)
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2	0
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2	0
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2	0
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2	0

Send Message

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:38	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:37	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:37	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:37	Photos	Normal	Photos 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:37	SAS	Normal	SAS 2019-4-2
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 11:37	NRIC Driving License	Normal	NRIC Driving License 2019-4-2
Video List				
Uploaded By/Date	Folder Date	File Name	Source	Action
Display in New Window Stop and uploading				

ACCIDENT STATEMENT

ACCIDENT DATE: (6/3/19) (DD/MM/YYYY). TIME: (1430) (HHMM)

LOCATION: Blk 27 multi storey Car Park Dover Crescent

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLS 4342 u
 b) INSURANCE COMPANY: INCOMC
 c) POLICY NUMBER: 5094671383-01
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: ELGNTA
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Car Park
 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: Jang M. Yeon (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S05651396 CONTACT:
 c) ADDRESS: 27 Dover Crescent #06-27
S130027

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: As above (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: CONTACT:
 c) ADDRESS:

* d) DATE OF BIRTH: (11/11/45) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 11-Jun-63

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Owner NPP

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: Dover

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKX 4248U MODEL: CRV HONDA
 b) DRIVER'S NAME: EDWIN
 c) NRIC/FIN/PASSPORT: CONTACT: 97802661

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: MODEL:
 b) DRIVER'S NAME:
 c) NRIC/FIN/PASSPORT: CONTACT:

* No of passenger
 (Including driver)
 (1)

* No of passenger
 (Including driver)
 ()

* No of passenger
 (Including driver)
 ()

Email = wyahyeon@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0565139E



YANG AH YEOW

Race
CHINESE
Date of Birth
11-11-1945 M
Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S0565139E
Name



YANG AH YEOW

Birth Date 11 Nov 1945
Issue Date 27 Nov 2003



1208973

NRIC No. S0565139E



Medical Group A+ Date of issue 21-08-1993

APT BLK 27 DOVER CRESCENT #08-27
SINGAPORE 130027

NRIC No. S0565139E Date: 10/10/2018

YOU ARE LICENCED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

ISSUE DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 11 Jun 1983

NP 428A



Licence No. S0565139E

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: 5094671383-01

Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle : **SLS4342U**
Chassis Number : **KMHD841CMJU545365**
2. Name of Policyholder : **YANG AH YEOW**
3. Effective Date of Insurance : **23 Sep 2018**
4. Expiry Date of Insurance : **22 Sep 2019**
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section B 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 2)	SS600
EXCESS (SECTION 2)	N/A
WINDSCREEN EXCESS	SS100
ADDITIONAL EXCESS	N/A
UNNAMED DRIVER EXCESS	PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	YES
INSURE WITH COE	YES
NCD PROTECTION	YES (FREE)
TRANSPORT ALLOWANCE	NO
EXCESS WAIVER	NO
PRIMARY DRIVER	YANG AH YEOW
NAMED DRIVER (1)	N/A
NAMED DRIVER (2)	N/A
HIRE PURCHASE COMPANY	N/A
SUM INSURED	MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

Agency : KOMOCO TRADING PTE LTD (00000614810)

Date of Issue : 11 Sep 2018 20:59 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive