

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	11/04/2019 15:35
Date Of Accident	02/12/2018 15:00
Exact Location Of Accident	JURONG EAST AVENUE 1 NEAR BLK 341 JURONG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FL9009H
Insured/Policyholder	
Name Of Registered Owner	EFFENDY BIN AB RAHIM
NRIC No	S7616994B
Email Address	SHAKEYF@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90063638
Alternative Phone No	OTHERS-90063638

Vehicle Particulars

Manufacturer	SUZUKI
Model	HAYABUSA 1300-1.3 (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5099328832
Cover Note Number	

Driver

Name of Driver	EFFENDY BIN AB RAHIM
NRIC No	S7616994B
Date Of Birth	04/05/1976
Occupation	OUTDOOR
Date Of Driving Pass	18/07/2000
Driving Experience	18 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90063638
Fax Number	
Contact Number	OTHERS-90063638
Email Address	SHAKEYF@GMAIL.COM

Address	BLK 329 JURONG EAST AVENUE 1 #12-1682
Postcode	600329
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	COLLIDED INTO PEDESTRIAN
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

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

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4849999 - FAX NO: 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181202/2072

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	
Vehicle Make/Model/Colour	
Details Of Properties	PEDESTRIAN
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name UNKNOWN PEDESTRIAN

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

SKETCH PLAN

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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: 11/4/19
1500hrs

Driver's Signature

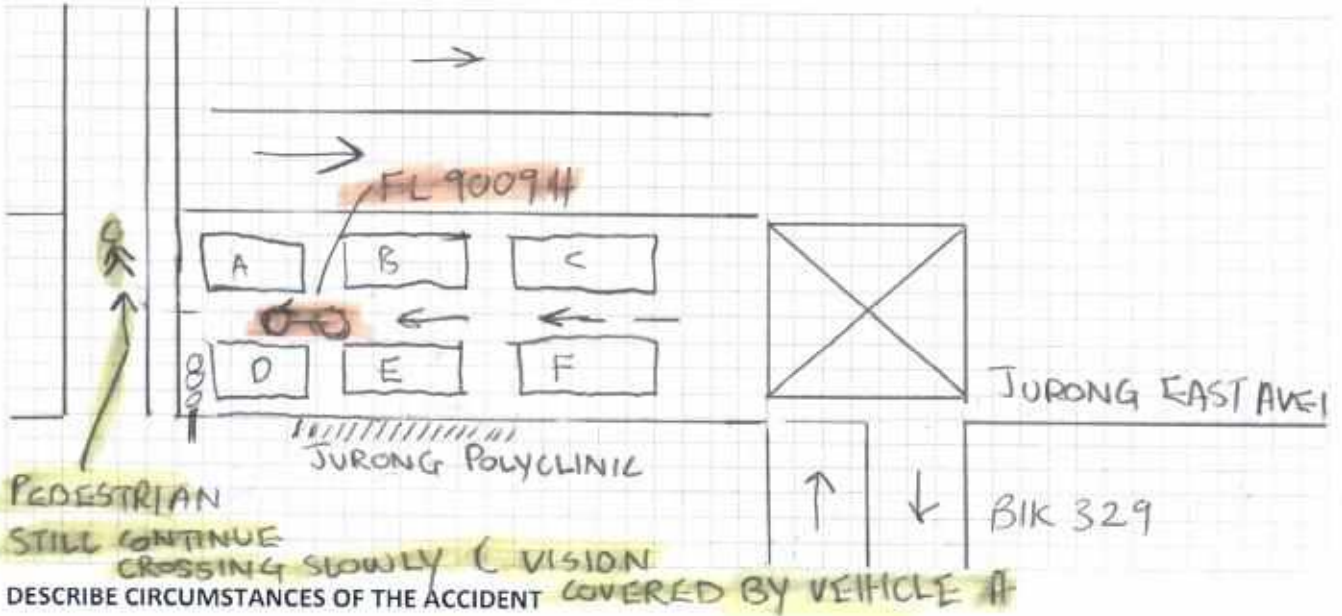
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: 11/04/2019
Rashid Hassan

NRIC/FIN No.:

SKETCH PLAN



Handwritten note across the form:

PLS REFER TO POLICE REPORT
7/20181202/2072

DECLARATION

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

Policyholder's Signature
Date & Time: 11/4/19 1508hrs

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

Reporting Centre Personnel's Signature
Name: 11/04/2019
NRIC/FIN No.: [Signature]



SINGAPORE POLICE FORCE

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Certified True Copy
pursuant to Sec. 78 of the
Evidence Act, Cap 97.



T/20181202/2072

1 of 3

Report No. T/20181202/2072

.....
Suriati Bte Buang (MX)
Traffic Police
Date : 11 APR 2019

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/12/2018 17:21		Vide Report No.: D/20181202/0092		Station Diary No.: 36
Informant's Particulars				
Name of Informant: EFFENDY BIN AB RAHIM		Address: APT BLK 329 JURONG EAST AVENUE 1 #12-1682 SINGAPORE 600329		
ID Type / ID No.: NRIC NO / S7616994B		Contact No.: Home/Office: Mobile: 90063638		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 42	Date of Birth: 04/05/1976	Type of Informant: Rider	
Race: Javanese		Language:	Institution / School Name:	
Occupation: Bus driver		Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 02/12/2018 15:00	Type of Location: Straight Road
Location: Along Road 1 JURONG EAST AVENUE 1 Along Jurong East Avenue 1 near to Blk 341 Jurong				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Moving Vehicle Against - Pedestrian			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FL9009H	Motorcycle	SUZUKI	GSX1300RA ZL4 (HAYABUSA ABS)	Red	No Damage	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FL9009H	NTUC Income Insurance Co-Operative Limited	5099328832	28/03/2018	27/03/2019



**SINGAPORE
POLICE FORCE**



T/20181202/2072

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

2 of 3

Report No. T/20181202/2072

CONTINUATION OF REPORT

Brief Details.

On the 02/12/2018 at about 1500hrs, I was riding my motorcycle bearing registration plate number of FL9009H. I had just turned left out from Blk 329 Jurong East carpark onto Jurong East Avenue 1. The traffic light just slightly in front of the bus stop was red in color.

As I was nearing the bus stop, the traffic light turned green. As I was moving in between cars, I did not notice my surroundings. As I was nearing the traffic light and looked up, I saw a Chinese old lady about 60 years old crossing the road slowly even though the pedestrian light was red.

I immediately applied my emergency brakes but as I could not stop fully, my motorcycle collided with the old lady and she fell down. Some passer-bys at the nearby bus stop came and shifted the old lady to the pavement and I shifted my motorcycle to the side of the road so as not to obstruct traffic.

There was a van opposite with Police officers and they came to check out the situation. They assisted to call for the ambulance and Traffic Police which arrived shortly after. The ambulance conveyed the old lady to Ng Teng Fong hospital as she suffered a swollen right elbow, back of the head was swollen and blister on the right ankle. She was not bleeding and there were no damages on my motorcycle.

The Traffic Police advised me to lodge a report as soon as possible.

Certified True Copy
pursuant to Sec. 78 of the
Evidence Act, Cap 97.

.....
Suriati Bte Buang (MX)
Traffic Police

Date : 11 APR 2019



**SINGAPORE
POLICE FORCE**



T/20181202/2072

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

3 of 3

Report No. T/20181202/2072

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Certified True Copy
pursuant to Sec. 78 of the
Evidence Act, Cap 97.

.....
Suriati Bte Buang (MX)
Traffic Police

Date : 11 APR 2019

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:
F /
Sgt 2 YEO JUN BIN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt RAZIZ BIN TAHAR
Contact No.: 65476200

Signature Of Informant:

Date/Time:
02/12/2018 17:21

Classification Of Case:

Authentication Stamp
NP168

Claim Handling

Accident MT/1038584

Policy No.	509328832	Vehicle No.	FL8009H	GST Registration No.	
Certificate No.					
Policyholder Name	EFFENDY BEN AB RAHM			Policyholder NRIC	S76169948
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party, Fire & Theft	Leading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	<input type="button" value="No"/>
KPI	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	03/04/2019 10:18	Accident Report Within 24 hrs	Yes	Accident Type	Collision into Pedestrian
Date of Accident	02/12/2018	Time of Accident Return	14:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	JURONG EAST AVE 1				

Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 329 #12-1682	Address 2	JURONG EAST AVENUE 1	Address 3	SINGAPORE 600329
Address 4		Address Type	Singapore address	Post Code	600329
Unit No.		Related Policy Number	509328832-01		

OT Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Office)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002

Claim Type *	CD-MX	Insured Name	EFFENDY BEN AB RAHM	Insured NRIC	S76169948
Contact No.(Mobile)	9063638	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address		Vehicle Number	FL8009H	TP	PEDESTRIAN
Claim Description	FL8009H / PEDESTRIAN ON 2 Dec 2018			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	NOK AT FAULT	GIA report	Received
Registered No. Privatisation	Yes <input type="checkbox"/>	Registered Repair Option	Preferred Workshop, Name unknown	Claim Close Date	15/04/2019 09:37
Date Registered		Report Taken By	ROSLI WAHAB	Date Received	15/04/2019 00:00
<input type="button" value="Print as letter"/>					

Attachment

Accident No.	MT/1038584	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	15/04/2019 09:37
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		
Message Read			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Reg Cert (CO)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	

4/15/2019

Claim Handling(Claim Task)

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	Photos	Normal	Photos 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-15	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 15 Apr 2019 09:37	SAS	Normal	SAS 2019-4-15	
Video List					
Uploaded By/Date	Folder Date	File Name		Source	Action
		Display in New Window	Scan and uploading		

rsbm

From: Desmond Foo Guo Hui <desmond.fooogh@income.com.sg>
Sent: Monday, 15 April, 2019 8:14 AM
To: rsbm@lkkauto.com
Subject: FL9009H - 02/12/2018 (Recreate file)

Hi

The file was created as a separate accident file to an existing file in MT/1038584.

With that, please re-create the file the file to MT/1038584.

Please select, 'MT/1038584' and click on 'Create new claim'.

Desmond Foo
Assistant Manager, Motor Insurance
T +65 6430 7976
www.income.com.sg



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in with you

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

ACCIDENT STATEMENT

ACCIDENT DATE: 02/12/2018 (DD/MM/YYYY), TIME: 1500hrs (HH:MM)

LOCATION: JURONG EAST AVE 1 NEAR PK 34, JURONG

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FL 9009 H
 b) INSURANCE COMPANY: NTUC INCOME INSURANCE CO-OPERATIVE
 c) POLICY NUMBER: 509932832
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: SUZUKI HAYABUSA 1300
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE
 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: EFFENDY BIN AB RAHIM (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S7616994B CONTACT: 90063638
 c) ADDRESS: BLK 329 JURONG EAST AVE 1
12-1692 S'PORE 600329

* 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: 04/05/1976 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 18 JULY 2000

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

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: ANG MO KIO

8. THIRD PARTY VEHICLE

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

9. THIRD PARTY VEHICLE

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

* No of passengers
 (Including driver)
 ()

* No of passengers
 (Including driver)
 ()

* No of passengers
 (Including driver)
 ()

email = Shakeyf@gmail.com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7616994B



Name

EFFENDY BIN AB RAHIM

Race

JAVANESE

Date of birth

04-05-1976

Country/Place of birth

SINGAPORE

Sex

M



5402585



NRIC No. S7616994B



Date of issue
22-12-2014

Address

APT BLK 329 JURONG EAST AVENUE 1
#12-1682
SINGAPORE 600329

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S7616994B

Portrait



EFFENDY BIN AB RAHIM

Birth Date: 04 May 1976

Issue Date: 22 Dec 2014



002377771K

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

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 cc	24 Aug 1994
Class 2A	Motorcycles between 201 cc and 400 cc	16 Sep 1996
Class 2	Motorcycles > 400 cc	16 Jul 2000
Class 3	Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	24 Aug 1996
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	25 Aug 1989
Class 5	Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	30 Dec 1999

NP 428A



License No: S7616994B

Hello, NAC_BUKIT_MERAH_800676

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="02/12/2018 14:49"/>							
Vehicle No. (For Motor)	<input type="text" value="FL9009H"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5099328832		EFFENDY BIN AB RAHIM	57616994B	GMC	Third Party, Fire & Theft	FL9009H	FL9009H	28/03/2018	27/03/2019
<input type="button" value="Continue"/>										