NATIONAL Assessment Centre	Services (we' : Jan'96)			
Date In: 13/04/19	Job description	Date &Time Completed	Done by	
Rei Nu NA/INC19006598/13	SAS e-filing			
Veh No 5154546	E-mail (within 8hrs, AIC 2hrs	s)		
DOA 12/04/19 1950	i-Motor Claim Form	:MT/1040041-	001	
OD TP' Reporting Only	i-Motor W/O (Within: OD	2hrs. TP 4hrs)		
	Assessment/Survey Repo	rt i		
TP Insurer:	Ass't Report by Fax / Ha	nd to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (	My CAR	Tel:	Fax:	
TP Particulars: Veh No:	MD 57864 IN	C( )/Non-INC( )		
Owner / Driver: (		Tel:	)	
Policy No: ( ) Peri	od: (	) Cover Type: (	)	
Confirmed by : (	Date:	Time:	)	visite (misself)
Insured/Driver Liability: ( %) [N	ote-Est. Status (WO): N:	0-20%; P: 21-79%. F: 80-	100%]	
Year of Registration: ( ) W	'arranty: YES ( ) / NO	( )		
Excess: (\$ ) Loading: \$1,00	0()/\$2,000()			
General Remarks;-			V-6"	
( ) Walk-In Customer: Customer's inform	mation strictly Confidential	& Strictly NO refer of repairer		W-1824-1783
( ) Total Loss Case : to e-mail Insure	URGENTLY.		1	
Drive-In ( )/ Towed-In ( ); Invoice:	YES( ) / NO( )	; Towing Co. (		)
		Date&Time Completed	Donel	ov.
Remarks:- (INC horline: 6788 6616)	- C - ( )	Dates: Hite Comple of	1.0.00	-
	ourtesy Car ( )			
2) QC Check / Post Repair Inspection	0001 ( )			
3) Upload Resurvey Photo [Repair Cost > \$3	000] ( )			
Injury:		IPP .		
Date/Time Actions			Cara James	
				100
				- 478 . 644
191902788	Invoice	Preparation Checklist	Amt (\$)	Amt (\$)
Company of the compan	1) AR : A	ccident Reporting (\$30);		
Claimant's Particulars :-	2) DA : D	amage Assessment (\$100); INC	(\$80) \$40/\$45	
Oriver/Owner:	3) TF : To 4) FT : Fo	illow-Through Survey	\$120	
Contact No:	5) FT : Fo	ollow-Through Survey (Resurvey) iming against INC Only (wef 10 Jan 2	\$30 005)	
	6) TR: R	e-inspection	\$75	
Damaged Portion:	7) N1 : 16	lac DA + SMRT Survey Additional Services:-	\$160	
QC Checked by (Engr-In-Charge):	OD*	Courtesy Car / Tpt Allowance	\$5	
Concerns of (Digi-in-charge).	*N6: F	Repair Co-ordination	\$10	
Auditors' Comments :-	*N7: F	Post Repair Inspection DV / Collect Excess Coordination	\$25 \$5	
Cat. 1:	TP (N	H): TP (Non INC) against INC	\$20	-
		dae Mobile	30 red	the said
Cat 2/3;	Invoice of		BARRIOT CO.	

#### 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.
- 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

	ACCIDENT STATEMENT
Date Of Report	13/04/2019 14:51
Date Of Accident	12/04/2019 19:50
Exact Location Of Accident	LOWER DELTA RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJS454E
Insured/Policyholder	
Name Of Registered Owner	JUN EXPRESS GROUPS PTE. LTD.
Co Reg No	201420728H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-92270221
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ALLION
Exact Purpose for which vehicle was being used at time of accident	GRAB
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	A STATE OF THE PARTY OF THE PAR
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100017940
Cover Note Number	
Driver	

### Driver

Name of Driver GOH GEOK KOON(WU YUJUN) NRIC No S7315270D

Date Of Birth 19/04/1973 Occupation OUTDOOR Date Of Driving Pass 28/01/2003

Driving Experience 16 YEARS AND 2 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-83381811

Fax Number Contact Number

EMail Address NOEMAIL

BLK 840 YISHUN STREET 81 Address

#09-380 760840

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

Postcode

Insurance Company of Driver's Own Vehicle

2

NO

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? YES

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver)

Passenger 1

NO 2

NAME: : UNKNOWN

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

YES

### Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20190413/7011

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: FRONT ONLY

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMD5786H Vehicle Make/Model/Colour HONDA

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver NG TENG HUI, CONNIE

NRIC/Passport Number S8119353C Contact Number

93379232

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF INJURED PERSON 1**

Name GOH GEOK KOON(WU YUJUN)

Approximate Age

Injuries Sustain

NECK & BACK

Injured person in which vehicle?

SJS454E

Were seat belts worn?

YES

Was this injured conveyed to hospital by

NO

ambulance?

Address Postcode

### SKETCH PLAN

### **IMPORTANT NOTICE**

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
# 5 Jalan But it to Swee A my car \$58 454 E (A) Swee
155 Val.
18/ Tran B
ON PUEN
1 8 SMD 5 786 H (ET) 14
137 A MY CON 3015 454 E CAN 300 80
14
/ 从 \
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
100
Pls refer to the attached statement.
Ms right to the attached statement.

# DECLARATION

3 (201420)

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:

der) Na

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20190413/7011

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/04/2019 13:54		/lade:	Vide Report No.:	Station Diary No.:	
Informan	t's Partic	ulars	The second second second	A STATE OF THE PARTY OF THE PAR	
Name of Informant: GOH GEOK KOON			Address: APT BLK 840 YISHUN STRE 760840	ET 81 #09-380 SINGAPORE	
ID Type / ID No.: NRIC NO / S7315270D		70D	Contact No.: Home/Office:	Mobile: 83381811	
Nationality: SINGAPORE CITIZEN		EN	Email: jenngoh73@gmail.com		
Sex: Female	Age: 45	Date of Birth: 19/04/1973	Type of Informant: Driver		
Race: Chinese		10-	Language: English	Institution / School Name:	
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/04/2019 19:50	Type of Location Straight Road
Location: LOWER DEL	TA ROAD			
Weather:		Road Surface:		oad Speed Limit:
Clear		Dry	50	Km/h
Clear Traffic Flow: One Way		Traffic Control: Not Controlled	Tr	

Details of V	ehicle Invo	lved	LA CHARLES			A STATE OF THE PARTY OF THE PAR
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJS454E	Car	TOYOTA	Allion		Seriously Damaged	2
SMD5786H	Car	HONDA				0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20190413/7011

### CONTINUATION OF REPORT

Driver		OF STREET	CANADA SA	32260		CHARLES OF THE PARTY OF THE PAR
Name	GOH GEOK KOON			ID No	).	S7315270D
Related Vehicle	SJS454E (Car)  UNITED HEALTH FAMILY CLINIC & SURGERY		/ehicle SJS454E (Car) Contact No. 8		83381811	
Hospital/Clinic			Class of Driving Licence & Expiry Date	g ce &	Class: 3 Date of Expiry: NIL	
Date Treatment	13/04/2019 Date Dis		charge	NIL		
No. of Days granted Medical Leave 03		Degree o		Slight		

### Brief Details.

On the stated date and time. I was travelling along lower delta road at lane 2 using my vehicle SJS454E, Infront of me is a cross junction traffic. So my vehicle was stationery waiting for the car infront of me to move, suddenly I felt a great impact from the back. I went down my vehicle and saw vehicle SMD5786H collided with the rear of my vehicle.

I felt pain on my neck and back so I went to consult a doctor and was given 3 days MC.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20190413/7011

### CONTINUATION OF REPORT

Sketch Plan

NP168

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 13/04/2019 13:54
Officer In Charge Of Case: TP / TPIB / MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case:
Authentication Stamp	

# ACCIDENT STATEMENT

ACC	DENT DATE: 15 104 12019	)(DD/MM/YYYY), TIN	AE: (19:50)(HH:MM)
	ATION: LOWER DET DE		
	DETAILS OF VEHICLE  a) VEHICLE NUMBER: ST  b) INSURANCE COMPANY: c) POLICY NUMBER: 51000 d) POLICY TYPE: (COMPREHE e) MAKE & MODEL: 10/0 TA  f) TYPE: (SALOON) COUPE / A	NTUC 17940 NSIVE V THIRD PARTY / MPV /V AN / LORRY / M	OTORCYCLE / OTHERS)
2.	g) VEHICLE CATEGORY: (PRIV h) PURPOSE OF USING AT ACI i) ARE YOU CLAIMING UNDER IF NO, PLEASE STATE (THIRD INSURED / POLICY HOLDER A) NAME:	CIDENT TIME: GRAF	DRIVER DE (YES/NO))
	b)NRIC/FIN/PASSPORT: c)ADDRESS:	C	ONTACT: 92270221
W 15 St		¥/.	
The of passenger (1nduding driver)		400 40520 00522	(MALEV FEMALE) ONTACT: \$335 1811
(F)	*d)DATE OF BIRTH: (	OUTDOORD YRS	10 mm. out
	IF NO, RELATIONSHIP OF TO A) WEATHER CONDITION: (CLE	HE DRIVER WITH INS	SURED: HIRER
6	b)ROAD SURFACE: (DRY) WE WAS ANYBODY INJURED (YES		)
7.	a) REPORTED TO POLICE (YES , IF YES, PLEASE STATE WHICH	(NO)	
Little of his	THIRD PARTY VEHICLE	E 786 H	110.101
the of passenger	a) VEHICLE NUMBER: SMI b) DRIVER'S NAME: NG TEN	GHILL CANNIE	DDEL: HONDA
( 1 )	c) NRIC/FIN/PASSPORT: 3 8 THIRD PARTY VEHICLE	19353C C	ONTACT: 93379233
4 No of passenger	d) VEHICLE NUMBER:	мс	DDEL:
(Induding driver)	DRIVER'S NAME:  f) NRIC/FIN/PASSPORT:		
( )	T) NRIC/FIN/PASSPORT:	CC	ONTACT:
	*		
	86 10		i .
104/19	email =	30	M 12
a hij	fax =		A.
ome upo	VIDEO =	yes, INFR	T -

# REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7315270D





GOH GEOK KOON (WU YUJUN)

吳 玉 君

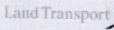
CHINESE

Date of Birth

19-04-1973

SINGAPORE







PDVL/TDVL 33 688 88888



# VOCATIONAL LICENCE

Licence No : \$7315270D Name :GOH GEOK KOON (WU YUJUN)

Card Issue Date : 05/02/2018

Please visit www.lta.gov.sg to check the status of this vocational licence

# REPUBLIC OF SINGAPORE

DRIVING LICENCE

S7315270D

GOH GEOK KOON (WU YUJUN)

Beth Date 19 Apr 1973

Issue Duty 28 Jan 2003





NRIC No. S7315270D

Sood Group Case of some

+ 06-01-2000

APT BLK 840 YISHUN STREET 81 #09-380

SINGAPORE 760840 NRIC No: \$73152700

'00 ' Date: 16/02/2015

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type

Description

Issue Date

3116991

13

PRIVATE HIRE CAR VL

05/02/2018



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

CACCOL

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

of 28 Jun 2003

Licence No: 5/3/15270

NP 426A



### 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 (MALAYS	IA)
MOTOR VEHICLES (THIRD PARTY RISKS	RULES, 1959 (MALAYSIA)

Certificate Number: 5100017940 Cover : drivo CLASSIC

Index mark and Registration Number of Vehicle : SJS454E

Chassis Number : NZT260303729

Name of Policyholder
 JUN EXPRESS GROUPS PTE. LTD.
 Effective Date of Insurance
 18 Apr 2018

3. Effective Date of Insurance : 18 Apr 2018
4. Expiry Date of Insurance : 26 Jul 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 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)	: S\$2,000	
EXCESS (SECTION 2)	: S\$1,000	
WINDSCREEN EXCESS	: S\$100	
ADDITIONAL EXCESS	: N/A	
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF	
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO	
INSURE WITH COE	: YES	
NCD PROTECTION	: NO	
TRANSPORT ALLOWANCE	: NO	
EXCESS WAIVER	: NO	
PRIMARY DRIVER	: N/A	
NAMED DRIVER (1)	: N/A	
NAMED DRIVER (2)	: N/A	
HIRE PURCHASE COMPANY	: LAKE-VIEW CREDIT PTE LTD	
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 : YAN XUDONG (00000630999)
Date of Issue : 18 Apr 2018 13:36 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

**Authorised Officer** 

**Chief Executive** 



**Enquire Vehicle Registration Details** 

# Owner Particulars

NRIC/Passport

/Company Cert

201420728H

No.:

Owner ID Type:

Company

Owner Name:

JUN EXPRESS GROUPS PTE. LTD.

Registered

Address:

68 KAKI BUKIT AVENUE 6 #02-08 ARK@KB SINGAPORE 417896

Mailing Address:

Birth Date:

### Vehicle Particulars

Vehicle No.:

SJS454E

Previous Vehicle

No.:

Effective Date of

Ownership:

18 Apr 2018

Original Regn Date: 27 Jul 2009

Registration Date:

27 Jul 2009

Year of

Manufacture:

2008

Vehicle Type:

Private Hire (Chauffeur) Motor Car

Vehicle Scheme:

Vehicle

Attachment 1:

No Attachment

Vehicle

Attachment 2:

Vehicle

Attachment 3:

Vehicle Make:

TOYOTA

Vehicle Model:

ALLION 1.5 A BI-FUEL

Primary Colour:

Black

Secondary Colour:

Passenger

Capacity:

Chassis No.:

NZT2603037293

Engine No.:

1NZD282073

**Engine Capacity** 

1496 cc/-

/Power Rating: Maximum Power

Output:

81.0 kW (108 bhp)

Propellant:

Petrol-CNG

DIZ

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of JUN EXPRESS GROUPS PTE. LTD. (201420728H)

Date: 14/02/2019

The Following Are The Brief Particulars of :

Registration No.

: 201420728H

Company Name.

JUN EXPRESS GROUPS PTE. LTD.

Former Name if any

Incorporation Date.

15/07/2014

Company Type

EXEMPT PRIVATE COMPANY LIMITED BY SHARES

Status

Live Company

Status Date

15/07/2014

**Principal Activities** 

Activities (I)

PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR

AND TRISHAWS) (49219)

Description

Activities (II)

RENTING AND LEASING OF PRIVATE CARS WITHOUT OPERATOR (77101)

Description

Capital

Issued Share Capital

Number of Shares \*

Currency

**Share Type** 

(AMOUNT)

100000

100000

SINGAPORE, DOLLARS

ORDINARY

\* Number of Shares includes number of Treasury Shares

Paid-Up Capital

Number of Shares

Currency

Share Type

(AMOUNT)

100000

SINGAPORE, DOLLARS

ORDINARY

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

**Number Of Shares** 

Currency

Authentication No.: B19100086W

Note: Chief Executive Officer was formerly known as Manager before 03-JAN-2016 for local companies.

Page 1 of 4

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of JUN EXPRESS GROUPS PTE. LTD. (201420728H)

Date: 14/02/2019

Registered Office Address

68 KAKI BUKIT AVENUE 6

#02-08

ARK@KB

SINGAPORE (417896)

Date of Address

08/06/2017

Date of Last AGM

.

Date of Last AR

: 10/07/2018

FYE As At Date of Last AR

31/07/2017

**Audit Firms** 

NAME

Charges

Charge No. Date Registered

Currency

Amount Secured

Chargee(s)

# Officers/Authorised Representative(s)

Name	ID	Nationality	Source of	Date of Appointment	
Address	Position Held		Address		
WANG XIAOGANG	S9077679G	CHINESE	ACRA	30/11/2015	
933 TAMPINES STREET 91 #06-383 TAMPINES PALMSPRING SINGAPORE (520933)		Director			
LIU HENG	S9176455E	CHINESE	OSCARS	15/07/2014	
203 SERANGOON CENTRAL #10-86 SINGAPORE (550203)		Director			
WANG XIAOGANG	S9077679G	CHINESE	ACRA	15/12/2014	
933 TAMPINES STREET 91 #06-383 TAMPINES PALMSPRING SINGAPORE (520933)		Chief Executive Officer			
LIU HENG	S9176455E	CHINESE	OSCARS	15/07/2014	

Authentication No.: B19100086W

Note: Chief Executive Officer was formerly known as Manager before 03-JAN-2016 for local companies.

Page 2 of 4

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of JUN EXPRESS GROUPS PTE. LTD. (201420728H)

Date: 14/02/2019

### Abbreviation

UL - Local Entity not registered with ACRA

UF - Foreign Entity not registered with ACRA

AR - Annual Return

AGM - Annual General Meeting

FS - Financial Statements

FYE - Financial Year End

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

#### Note:

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES SINGAPORE

RECEIPT NO.

: ACRA190214125864

DATE

: 14/02/2019

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Business Profile (Company) of JUN EXPRESS GROUPS PTE. LTD. (201420728H)

Date: 14/02/2019

Officers/Authorised Repres	sentative(s)	ı
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80000

Nam	0	ID	Nationality	Source of	<b>Date of Appointment</b>
Addr	ess		<b>Position Held</b>	Address	
#10	SERANGOON CENTRAL -86 GAPORE (550203)		Secretary		
LIU	HENG	S9176455E	CHINESE	OSCARS	07/04/2016
#10	SERANGOON CENTRAL -86 GAPORE (550203)		Managing Director		
Shar	eholder(s)				
Nam	e	ID	Nationality/Place of incorporation/Origin	Source of Address	Address Changed
Addi	ress		incorporationorigin	Address	
1	WANG XIAOGANG	S9077679G	CHINESE	ACRA	28/09/2016
	933 TAMPINES STREET 91 #06-383 TAMPINES PALMSPRING SINGAPORE (520933)				
	Ordinary(Number)	Currency			
	20000	SINGAPORE, D	OOLLARS		
2	LIU HENG	S9176455E	CHINESE	OSCARS	21/02/2015
	203 SERANGOON CENTRAL #10-86 SINGAPORE (550203)				
	Ordinary(Number)	Currency			

SINGAPORE, DOLLARS

# Claim Handling Accident MT/1040041

Policy No.	5100017940	Vehicle No.	535454E		GST Regi	istration N
Certificate No.						
Policyholder Name	JUN EXPRESS GROUPS PTE. LTD.				Policyhok	der NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	
Contact No.(Mobile)	92270221	Contact No.(Office)	0		Contact I	No.(Home
Email Address		Special Remark			eCode	
KFK	No Yes	TCA	No Yes		eCode Re	ason
NCD Protection	No	NCD Entitlement(%)	o		Private H	lire
Accident Details						
Report Date	13/04/2019 17:30	Accident Report Within 24 hrs	Yes		Accident	Туре
Date of Accident	12/04/2019	Time of Accident hh:mm	19:50		Country	of Acciden
Reporting Centre		Orange Force			ICM No.	
Accident Location	LOWER DELTA RD					
▼ Excess						
Own damage Excess	2,000.00	Additional Excess	0		Windscre	en Excess
Unnamed Driver Excess		Outside Singapore OD Excess		2,000.00		
Third Party Excess	1,000,00	Outside Singapore TP Excess		1,000.00		
→ Benefits						
GST Registered Informa	tion					
GST Registered	No		GST Registrat	tion Date		
GST Registration No.			GST Status V	erified		Yes
Modification History	13/04/2019 17:32:40 Sy	stem changed GST Status Verified from No	to Yes			
Policyholder Mailing Add	Contract of the Contract of th	314U0042-0 U00				
Address 1 Address 4	68 KAKI BUKIT AVENUE 6	Address 2	#02-08 ARK@KB		Address 3	1
	(1200)	Address Type	Singapore address		Post Code	ke .
Unit No.  ✓ OI Driver Info	01-16	Related Policy Number	5108743723			
Driver Name	Unnamed Driver					
Unnamed driver Name		Driver Type	Unnamed Driver			
Register Date of Driver License	GOH GEOK KOON(WU YUJUN)	Driver NRIC	S7315270D		Driver DO	В
Contact No.(Mobile)	28/01/2003	Driver Age	45		Driving Ex	perience
Address 1	83381811	Contact No.(Office)	0		Contact N	o.(Home)
Address 4	BLK 840	Address 2	YISHUN STREET 81		Address 3	ij.
Unit No.		Address Type	Singapore address		Post Code	
Does he own a Singapore	#09-380					
Registered car?	Yes * No	Driver Vehicle No.			Driver Ins	urer Com
Declaration						
Breathalyser or Blood Test	0 mg	Any injury?	to War in No.			
Reading?		Ady injury?	Wes No			
Modification History						
Claim 001 OD-MX New						
Service Control of the Control of th					70.77.01.00.00	
Claim Type *			0	D-MX	▼ Insured Name	JUN EX
Contact No.(Mobile)			E.		Contact	
			81	1383333	No. (Home)	NIL
Email Address			hu	nexpressgroups@gm	nail.com Vehicle	SJS454
			201	nexpressgroups gri	Number	975454
Claim Description			SI	IS454E / SMD5786H	ON 12 Apr 2019	
Preferred	I have and the time.		_			
Workshop Bontwet No. Finalisation Yes	Preferered Preferred Workshop	1 GIA				
Finalisation Tes  Date Registered	Repair Preferred Workshop Option	(refer below) Teport Received	· ·		Claim	
wate Acquatered			13	/04/2019 17:34	Close Date	
Report Taken By			-		Workshop	
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Print AK letter						

	Uploaded By/Date	Folder Date		File Name		9	
♥ Video List	NAC_PAYA_UBI_800601( NATION 13 A)	NAL ASSESSMENT CENTRE SERVICES) on pr 2019 17:34	Photos		Normal		Photos
	NAC_PAYA_UBI_800601( NATIO 13 A	NAL ASSESSMENT CENTRE SERVICES) on pr 2019 17:34	Photos		Normal		Photos
	NAC_PAYA_UBI_800601( NATIO 13 A	NAL ASSESSMENT CENTRE SERVICES) on pr 2019 17:34	Photos		Normal		Photos
4	NAC_PAYA_UBI_800601( NATIO 13 A	NAL ASSESSMENT CENTRE SERVICES) on pr 2019 17:34	Photos		Normal		Photos
	NAC_PAYA_UBI_800601( NATIO 13 A	NAL ASSESSMENT CENTRE SERVICES) on pr 2019 17:34	Photos		Normal		Photos
1	NAC_PAYA_UBI_800601( NATIO 13 A	NAL ASSESSMENT CENTRE SERVICES) on pr 2019 17:34	Photos		Normal		Photos
	NAC_PAYA_UBI_800601( NATIO 13 A	NAL ASSESSMENT CENTRE SERVICES) on pr 2019 17:34	Photos		Normal		Photos
	NAC_PAYA_UBI_800601( NATIO 13 A	NAL ASSESSMENT CENTRE SERVICES) on opr 2019 17:34	Photos		Normal		Photos
	NAC_PAYA_UBI_800601( NATIO	ONAL ASSESSMENT CENTRE SERVICES) on oper 2019 17:34	Photos		Normal		Photo
1	NAC_PAYA_UBI_B00601( NATIO	ONAL ASSESSMENT CENTRE SERVICES) on Apr 2019 17:34	SAS		Normal		SAS
Add To	NAC_PAYA_UBI_800601( NATIO 13 /	ONAL ASSESSMENT CENTRE SERVICES) on Apr 2019 17:34	NRIC/ Driving License	8	Normal		NRIC/ Driving
Attachment	Upl	oaded By/Date	Category	9	Urgency		De
<b>▽</b> Attachment	List						
Message Read	THE SHOOTS			Clear	Please Select	•	NO
Choose File No				Clear	Please Select	*	NO
Choose File No				Clear	Please Select	•	NO
Choose File No				Clear	Please Select	•	NO
Choose File No	o file chosen			Clear	Please Select	-	NO
Choose File No	o file chosen			Clear	Category * Please Select		Confidentia
		Path •	38388		13/04/2019 00:00		1 2000
Last Doc. Received	• Yes 🗇 N	lo .	Upload Date		001		
Accident No.	MT/1040041		Claim No.		28		
79							
Attachment							
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