

NATIONAL Assessment Centre Services. MAY 19 04 9562

|                             |  |                        |                  |
|-----------------------------|--|------------------------|------------------|
| Date In: 16/04/2019 14:07   | Job description: SAS e-filing            | Date & Time Completed: | Done by:         |
| Ref No: 151042009/190067647 | E-mail (by date sheet, AIC sheet)        |                        |                  |
| Veh No: FBI 21404           | I-Motor Claim Form                       | 15/04/2019 18:30       | 16/04/2019 15:33 |
| D.O.A: 15/04/2019 18:30     | I-Motor W/O (Within: OD sheet, TP sheet) |                        |                  |
| OD / TP: Reporting Only     | I-Photo Uploaded                         |                        |                  |
| TP Insurer:                 | Assessment/Survey Report                 |                        |                  |
|                             | Ass't Report by Fax / Hand to Owner/Wksp |                        |                  |

Preferred Wksp / INC Assgn Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars: Vch No: UNKNOWN BIKE 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%, F: 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 repolar.

( ) 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: \_\_\_\_\_

| <p>X/A1902800</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engi-In-Charge):</p> <p>Additional Comments:</p> <p>Date:</p> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2">Invoice Item / Description</th> <th>Amount</th> </tr> <tr> <td>1) AR: Accident Reporting (\$30)</td> <td></td> <td></td> </tr> <tr> <td>2) DA: Damage Assessment (\$100)</td> <td>INC (\$50)</td> <td></td> </tr> <tr> <td>3) TP: Towing Fee</td> <td></td> <td>\$40.245</td> </tr> <tr> <td>4) FT: Follow-Through Survey</td> <td></td> <td>\$120</td> </tr> <tr> <td>5) FT: Follow-Through Survey (Resurvey)</td> <td></td> <td>\$30</td> </tr> <tr> <td colspan="2">Enrolment against INC Only (wef 10 Jun 2005)</td> <td></td> </tr> <tr> <td>6) TR: Re-inspection</td> <td></td> <td>\$75</td> </tr> <tr> <td>7) NI: (Inc DA + SMRT Survey</td> <td></td> <td>\$160</td> </tr> <tr> <td colspan="2">8) NTUC Additional Services:</td> <td></td> </tr> <tr> <td>    ON:</td> <td></td> <td></td> </tr> <tr> <td>    * NS: Courtesy Car / TP Allowance</td> <td></td> <td>\$1</td> </tr> <tr> <td>    * NG: Repair Coordination</td> <td></td> <td>\$10</td> </tr> <tr> <td>    * NI: Post Repair Inspection</td> <td></td> <td>\$25</td> </tr> <tr> <td>    * ND: DV / Collect Excess Coordination</td> <td></td> <td>\$5</td> </tr> <tr> <td>    * TP (NI) / TP (Non INC)</td> <td></td> <td>\$20</td> </tr> <tr> <td>    * NI: Idxo Mobile</td> <td></td> <td>\$0</td> </tr> <tr> <td>Invoice dated</td> <td>Fee Charged</td> <td></td> </tr> <tr> <td>Invoice dated</td> <td>Fee Charged</td> <td></td> </tr> </table> | Invoice Item / Description |  | Amount | 1) AR: Accident Reporting (\$30) |  |  | 2) DA: Damage Assessment (\$100) | INC (\$50) |  | 3) TP: Towing Fee |  | \$40.245 | 4) FT: Follow-Through Survey |  | \$120 | 5) FT: Follow-Through Survey (Resurvey) |  | \$30 | Enrolment against INC Only (wef 10 Jun 2005) |  |  | 6) TR: Re-inspection |  | \$75 | 7) NI: (Inc DA + SMRT Survey |  | \$160 | 8) NTUC Additional Services: |  |  | ON: |  |  | * NS: Courtesy Car / TP Allowance |  | \$1 | * NG: Repair Coordination |  | \$10 | * NI: Post Repair Inspection |  | \$25 | * ND: DV / Collect Excess Coordination |  | \$5 | * TP (NI) / TP (Non INC) |  | \$20 | * NI: Idxo Mobile |  | \$0 | Invoice dated | Fee Charged |  | Invoice dated | Fee Charged |  |
|---|---|----------------------------|--|--------|----------------------------------|--|--|----------------------------------|------------|--|-------------------|--|----------|------------------------------|--|-------|---|--|------|--|--|--|----------------------|--|------|------------------------------|--|-------|------------------------------|--|--|-----|--|--|-----------------------------------|--|-----|---------------------------|--|------|------------------------------|--|------|--|--|-----|--------------------------|--|------|-------------------|--|-----|---------------|-------------|--|---------------|-------------|--|
| Invoice Item / Description  |   | Amount                     |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 1) AR: Accident Reporting (\$30)  |   |                            |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 2) DA: Damage Assessment (\$100)  | INC (\$50)  |                            |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 3) TP: Towing Fee   |   | \$40.245                   |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 4) FT: Follow-Through Survey  |   | \$120                      |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 5) FT: Follow-Through Survey (Resurvey)   |   | \$30                       |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| Enrolment against INC Only (wef 10 Jun 2005)  |   |                            |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 6) TR: Re-inspection  |   | \$75                       |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 7) NI: (Inc DA + SMRT Survey  |   | \$160                      |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 8) NTUC Additional Services:  |   |                            |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| ON:   |   |                            |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| * NS: Courtesy Car / TP Allowance   |   | \$1                        |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| * NG: Repair Coordination   |   | \$10                       |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| * NI: Post Repair Inspection  |   | \$25                       |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| * ND: DV / Collect Excess Coordination  |   | \$5                        |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| * TP (NI) / TP (Non INC)  |   | \$20                       |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| * NI: Idxo Mobile   |   | \$0                        |  |        |                                  |  |  |                                  |            |  |                   |  |          |                              |  |       |   |  |      |  |  |  |                      |  |      |                              |  |       |                              |  |  |     |  |  |                                   |  |     |                           |  |      |                              |  |      |  |  |     |                          |  |      |                   |  |     |               |             |  |               |             |  |
| 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             | 16/04/2019 14:07        |
| Date Of Accident           | 15/04/2019 18:30        |
| Exact Location Of Accident | ALONG WOODSVILLE TUNNEL |
| Country/State of Loss      | SINGAPORE               |

### DETAILS OF OWN VEHICLE

|                             |                           |
|-----------------------------|---------------------------|
| Vehicle Registration Number | FBJ2740H                  |
| <b>Insured/Policyholder</b> |                           |
| Name Of Registered Owner    | RAVI CHANDRAN S/O PALANI  |
| NRIC No                     | S7247050H                 |
| Email Address               | KRIISHTRADINGPL@GMAIL.COM |
| Mobile Phone No             | (LOCAL) +65-92396935      |
| Alternative Phone No        | OTHERS-92396935           |

### Vehicle Particulars

|  |                |
|--|----------------|
| Manufacturer   | YAMAHA         |
| Model  | FZ16-153CC (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             | 5083247326-02                          |
| Cover Note Number         |  |

### Driver

|                      |                           |
|----------------------|---------------------------|
| Name of Driver       | RAVI CHANDRAN S/O PALANI  |
| NRIC No              | S7247050H                 |
| Date Of Birth        | 04/12/1972                |
| Occupation           | INDOOR                    |
| Date Of Driving Pass | 14/11/1991                |
| Driving Experience   | 27 YEARS AND 5 MONTHS     |
| Gender               | MALE                      |
| Mobile Number        | (LOCAL) +65-92396935      |
| Fax Number           |                           |
| Contact Number       | OTHERS-92396935           |
| EEmail Address       | KRIISHTRADINGPL@GMAIL.COM |

|   |                                |
|---|--------------------------------|
| Address   | BLK 108B MCNAIR ROAD<br>15-204 |
| Postcode  | 323108                         |
| 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   | SIDE SWIPE |
| 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)   | 1   |

#### 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 POLICE REPORT T/20190415/7025

#### 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         | UNKNOWN    |
| Vehicle Make/Model/Colour           |            |
| Details Of Properties               |            |
| Vehicle Category                    | MOTORCYCLE |
| Name of Driver                      |            |
| NRIC/Passport Number                |            |
| Contact Number                      |            |
| 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**.
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.

*Ravi 16/4/19*

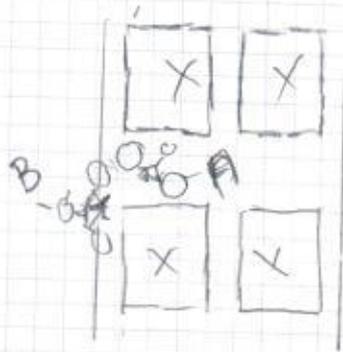
Policyholder's Signature  
Date & Time:

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

*16/04/2019*  
Reporting Centre Personnel's Signature  
Name: *Ravi W. Raju*  
NRIC/FIN No.:

SKETCH PLAN

Along Woodville Turnpike



A) FBS 2746H

B) UNKNOWN MOTORCYCLE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*PS REFER TO POLICE REPORT  
7/2019/15/1025*

DECLARATION

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

*Ravi 16/4/19*

Policyholder's Signature  
Date & Time:

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

*ca 16/04/2019*  
Reporting Centre Personnel's Signature  
Name: *Ravi*  
NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



T/20190415/7025

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

1 of 3

Report No. T/20190415/7025

**REPORT OF A TRAFFIC ACCIDENT**

|  |                  |                    |
|--|------------------|--------------------|
| Date/Time Report Made:<br>15/04/2019 21:07 | Vide Report No.: | Station Diary No.: |
|--|------------------|--------------------|

**Informant's Particulars**

|   |            |   |                             |
|---|------------|---|-----------------------------|
| Name of Informant:<br>RAVI CHANDRAN S/O PALANI                                |            | Address:<br>APT BLK 108B MCNAIR ROAD #15-204 SINGAPORE 323108 |                             |
| ID Type / ID No.:<br>NRIC NO / S7247050H                                      |            | Contact No.:<br>Home/Office: Mobile: 92396935                 |                             |
| Nationality:<br>SINGAPORE CITIZEN   |            | Email:<br>kriishtradingpl@gmail.com                           |                             |
| Sex:<br>Male  | Age:<br>46 | Date of Birth:<br>04/12/1972                                  | Type of Informant:<br>Rider |
| Race:<br>Indian   |            | Language:<br>English  | Institution / School Name:  |
| Occupation:<br>Technical/Vocational/Commercial<br>education institute teacher |            | Driving Licence Information:<br>Class: 2B                     | Date of Expiry:             |

**General Information of the Accident**

|   |                  |                                    |   |   |
|---|------------------|------------------------------------|---|---|
| Type of Accident:   | Injury<br>Others | Drink<br>Drive:<br>No              | Date/Time of<br>Accident:<br>15/04/2019 18:30 | Type of Location:<br>Woodsville<br>Tunnel |
| Location:<br><br>Woodsville Tunnel                                  |                  |                                    |   |   |
| Weather:<br>Clear   |                  | Road Surface:<br>Dry               |   | Road Speed Limit:<br>50 Km/h              |
| Traffic Flow:<br>One Way  |                  | Traffic Control:<br>Not Controlled |   | Traffic Volume:<br>Heavy                  |
| Type of Collision:<br>Stationary motorbike hit by another motorbike |                  |                                    |   | Anyone conveyed by<br>ambulance:<br>No    |

**Details of Vehicle Involved**

| Vehicle No. | Type       | Make   | Model | Color | Condition    | No of Passenger |
|-------------|------------|--------|-------|-------|--------------|-----------------|
| FBJ2740H    | Motorcycle | YAMAHA | FZ 16 | Blue  | No<br>Damage | 0               |

**Details of Vehicle Insurance**

| Vehicle No. | Insurance Company                             | Insurance No  | Effective  | Expiry Date |
|-------------|---|---------------|------------|-------------|
| FBJ2740H    | NTUC Income Insurance Co-Operative<br>Limited | 5083247326-02 | 19/08/2018 | 18/08/2019  |



**SINGAPORE  
POLICE FORCE**



T/20190415/7025

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

2 of 3

Report No. T/20190415/7025

**CONTINUATION OF REPORT**

| <b>Details of Person Involved</b> |                          |  |                                  |
|-----------------------------------|--------------------------|--|----------------------------------|
| Any Pedestrian Involved: No       |                          |  |                                  |
| No. of Pedestrians Injured: NIL   |                          | Use of Pedestrian Crossing: NA         |                                  |
| <b>Rider</b>                      |                          |  |                                  |
| Name                              | RAVI CHANDRAN S/O PALANI | ID No.                                 | S7247050H                        |
| Related Vehicle                   | FBJ2740H (Motorcycle)    | Contact No.                            | 92396935                         |
| Hospital/Clinic                   | NIL                      | Class of Driving Licence & Expiry Date | Class: 2B<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                      | Date Discharge                         | NIL                              |
| No. of Days granted Medical Leave | NIL                      | Degree of Injury                       | Slight                           |

Brief Details.

On 15 Apr 2019 around 6.30pm, I was travelling from Serangoon Road towards Potong Pasir. As traffic was heavy, I came to a complete stop under Woodsville Tunnel. As there was a car in front of me, I moved to the left of the road. Suddenly, a motorbike came from the emergency lane and banged the side of my motorbike (FBJ2740H). We moved to the side of the road and checked both our motorbike and ourselves. There was no major injuries, but slight cut on the other rider's foot. No particulars were exchanged. The rider accepted \$50 from me as a compassionate and we left our own ways. This report is for record purpose.



**SINGAPORE  
POLICE FORCE**



T/20190415/7025

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

3 of 3

Report No. T/20190415/7025

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
JUREMAH BINTE AHMAD  
Contact No.: 65472076

Authentication Stamp

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
15/04/2019 21:07

Classification Of Case:

**Claim Handling**

Accident MT/1040434

|                     |                          |                     |                           |                      |           |
|---------------------|--------------------------|---------------------|---------------------------|----------------------|-----------|
| Policy No.          | 5083247326-02            | Vehicle No.         | FB12740H                  | GST Registration No. |           |
| Certificate No.     |                          |                     |                           |                      |           |
| Policyholder Name   | RAVI CHANDRAN S/O PALANI |                     |                           | Policyholder NRIC    | S7247050H |
| Product Code        | MOTORCYCLE INSURANCE     | Cover Type          | Third Party, Fire & Theft | Loading              | 0         |
| Contact No.(Mobile) | 92396935                 | Contact No.(Office) |                           | Contact No.(Home)    |           |
| Email Address       |                          | Special Remark      |                           | eCode                | No        |
| KPK                 | + No - Yes               | TCA                 | + No - Yes                | eCode Reason         |           |
| NCD Protection      | No                       | NCD Entitlement(%)  | 15                        | Private Hire         | No        |

**Accident Details**

|                   |                         |                               |       |                     |            |
|-------------------|-------------------------|-------------------------------|-------|---------------------|------------|
| Report Date       | 16/04/2019 15:30        | Accident Report Within 24 hrs | Yes   | Accident Type       | Side Swipe |
| Date of Accident  | 15/04/2019              | Time of Accident hh:mm        | 18:30 | Country of Accident | Singapore  |
| Reporting Centre  |                         | Orange Force                  |       | ICM No.             |            |
| Accident Location | ALONG WOODSVILLE TUNNEL |                               |       |                     |            |

**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 108B #15-204 | Address 2             | MCAJIR ROAD       | Address 3 | SINGAPORE 323108 |
| Address 4 |                  | Address Type          | Singapore address | Post Code | 323108           |
| Unit No.  |                  | Related Policy Number | 5083247326-02     |           |                  |

**Q1 Driver Info**

|                                 |                          |                     |                  |   |                   |                        |                  |
|---------------------------------|--------------------------|---------------------|------------------|---|-------------------|------------------------|------------------|
| Driver Name                     | RAVI CHANDRAN S/O PALANI | Driver Type         | Main Driver      | Driver NRIC                             | S7247050H         | Driver DOB             | 04/12/1972       |
| Unnamed driver Name             |                          | Driver NRIC         |                  | Driver Age                              | 46                | Driving Experience     | 28               |
| Register Date of Driver License | 01/01/1991               | Contact No.(Office) |                  | Contact No.(Home)                       |                   | Address 3              | SINGAPORE 323108 |
| Contact No.(Mobile)             | 92396935                 | Address 1           | BLK 108B #15-204 | Address 2                               | MCAJIR ROAD       | Post Code              | 323108           |
| Address 1                       | BLK 108B #15-204         | Address 4           |                  | Address Type                            | Singapore address | Driver Vehicle No.     | FB12740H         |
| Address 4                       |                          | Unit No.            |                  | Does he own a Singapore Registered car? | Yes - No          | Driver Insurer Company | NTUC             |

**Declaration**

|                                     |      |             |          |
|-------------------------------------|------|-------------|----------|
| Breathalyser or Blood Test Reading? | 0 mg | Any injury? | Yes - No |
|-------------------------------------|------|-------------|----------|

Modification History

Claim 001 **New**

**Claim Type \***

|                      |                          |                            |              |
|----------------------|--------------------------|----------------------------|--------------|
| Insured Name         | RAVI CHANDRAN S/O PALANI | Insured NRIC               | S7247050H    |
| Contact No. (Mobile) | 92396935                 | Contact No. (Office)       |              |
| Contact No. (Home)   | 62989442                 | TP Vehicle Number          | UNKNOWN BIKE |
| Vehicle Number       | FB12740H                 | Name of Preferred Workshop |              |

Claim Description: FB12740H / UNKNOWN BIKE ON 15 Apr 2019

Preferred Workshop:  Insured Liability: **Not at Fault** Repair Option: **Preferred** Preferred Workshop, Name unknown:  GIA report: **Received**

Date Registered: 16/04/2019 15:33 Claim Close Date:  Date Received: 16/04/2019 00:00

Report Taken By: ROSLI WAHAB

Print AK letter

Save Submit

**Attachment**

|                    |   |             |                  |
|--------------------|---|-------------|------------------|
| Accident No.       | MT/1040434  | Claim No.   | 001              |
| Last Doc. Received | <input checked="" type="radio"/> Yes <input type="radio"/> No | Upload Date | 16/04/2019 15:33 |

Path \*

| Category *   | Confidential                      | Urgency *                             | Description * |
|--|-----------------------------------|---------------------------------------|---------------|
| <input type="button" value="Clear"/> Please Select | <input type="button" value="NO"/> | <input type="button" value="Normal"/> |               |
| <input type="button" value="Clear"/> Please Select | <input type="button" value="NO"/> | <input type="button" value="Normal"/> |               |
| <input type="button" value="Clear"/> Please Select | <input type="button" value="NO"/> | <input type="button" value="Normal"/> |               |
| <input type="button" value="Clear"/> Please Select | <input type="button" value="NO"/> | <input type="button" value="Normal"/> |               |
| <input type="button" value="Clear"/> Please Select | <input type="button" value="NO"/> | <input type="button" value="Normal"/> |               |
| <input type="button" value="Clear"/> Please Select | <input type="button" value="NO"/> | <input type="button" value="Normal"/> |               |

Message Read

**Attachment List**

| Attachment | Uploaded By/Date   | Category | Urgency | Description      | Hsg Sent? (CO) |
|------------|--|----------|---------|------------------|----------------|
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos   | Normal  | Photos 2019-4-16 |                |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos   | Normal  | Photos 2019-4-16 |                |
|            | NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos   | Normal  | Photos 2019-4-16 |                |



|  |                       |        |                                 |
|--|-----------------------|--------|---------------------------------|
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos                | Normal | Photos 2019-4-16                |
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos                | Normal | Photos 2019-4-16                |
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos                | Normal | Photos 2019-4-16                |
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos                | Normal | Photos 2019-4-16                |
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos                | Normal | Photos 2019-4-16                |
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | Photos                | Normal | Photos 2019-4-16                |
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | SAS                   | Normal | SAS 2019-4-16                   |
| NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Apr 2019 15:33 | NRIC/ Driving License | Normal | NRIC/ Driving License 2019-4-16 |

Video List

| Uploaded By/Date | Folder Date | File Name  | Source | Action |
|------------------|-------------|--|--------|--------|
|                  |             | <input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/> |        |        |

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7247050H



Name  
**RAVI CHANDRAN S/O PALANI**

Race  
**INDIAN**

Date of Birth  
**04-12-1972**

Country of Birth  
**SINGAPORE**

Sex  
**M**



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7247050H**

Name  
**RAVI CHANDRAN S/O PALANI**

Birth Date: **04 Dec 1972**

Issue Date: **31 Oct 2003**




3046532



NRIC No. **S7247050H**



Blood Group: **O+** Date of issue: **28-09-1998**

APT BLK 108B MCNAIR ROAD #15-204  
SINGAPORE 323108  
NRIC No: S7247050H Date: 13-10-2004 No: 8046192

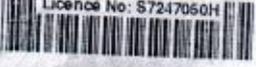
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles not exceeding 200 cc

PASS DATE  
**14 Nov 1991**

NP 428A

Licence No: S7247050H



## 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** : 5083247326-02

**Cover** : Third Party, Fire & Theft

- |  |                            |
|--|----------------------------|
| 1. Index mark and Registration Number of Vehicle | : <b>FBJ2740H</b>          |
| Chassis Number                                   | : ME121C0GAD2035443        |
| 2. Name of Policyholder                          | : RAVI CHANDRAN S/O PALANI |
| 3. Effective Date of Insurance                   | : 19 Aug 2018              |
| 4. Expiry Date of Insurance                      | : 18 Aug 2019              |

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

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 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)               | : N/A   |
| EXCESS (THEFT OUTSIDE SINGAPORE) | : PLEASE REFER OVERLEAF                           |
| INSURE WITH COE                  | : YES   |
| NAMED DRIVER (1)                 | : RAVI CHANDRAN S/O PALANI                        |
| NAMED DRIVER (2)                 | : RAJENDRAN S/O PALANI                            |
| 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 : THINK ONE AUTOMOBILE & TRADING PTE LTD (00000571089)  
 Date of Issue : 26 Jul 2018 15:24 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED




Countersigned By:

\_\_\_\_\_  
Authorised Officer

\_\_\_\_\_  
Chief Executive