

(over 1 Jan 68)

ХНМА49050690

Preferred Wksp / INC Assign Wksp / QW: (

Toll

**Final:**

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

( ) Total Loss Case : to e-mail Insurer URGENTLY.  
Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

Repair Milestones (60 days)		Complete	Not Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )			
2) QC Check / Post Repair Inspection ( )			
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )			

*Injury:*

[illegible]

NA/902644		NA/902644	
Driver/Owner:		1) AR: Accident Reporting (\$30)	
Contact No:		2) DA: Damage Assessment (\$100)	INC (\$40)
Damaged Portion:		3) TP: Towing Fee	\$40/\$45
		4) PT: Follow-Through Survey	\$120
		5) PT: Follow-Through Survey (Resurvey)	\$30
		6) TR: Re-inspection	\$75
		7) NI: Idax DA + SMRT Survey	\$160
		8) NTUC Additional Services:	
		ON:	\$5
		• NI: Courtesy Car / TP Allowance	\$10
		• NI: Repairs Coordination	\$25
		• NI: Post Repair Inspection	\$5
		• NI: DV / Collect Excess Coordination	\$20
		TP (NI): TP (NI) INC	\$30
		9) NI: Idax Mobile	
		Invoice dated	Fee Charged
		Invoice dated	Fee Charged

FOR:



## 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	18/04/2019 14:51
Date Of Accident	18/04/2019 07:40
Exact Location Of Accident	ALONG JURONG TOWAN HALL ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FE4950J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MUHAMMAD AARIF S/O HASSAN SHARIFF
NRIC No	S8305323B
Email Address	AARIF_24@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-92969420
Alternative Phone No	OTHERS-92969420

### Vehicle Particulars

Manufacturer	YAMAHA
Model	RXK-135CC (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	THIRD PARTY
Vehicle Category	MOTORCYCLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5096873769-01
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD AARIF S/O HASSAN SHARIFF
NRIC No	S8305323B
Date Of Birth	10/02/1983
Occupation	INDOOR
Date Of Driving Pass	15/03/2006
Driving Experience	13 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92969420
Fax Number	
Contact Number	OTHERS-92969420
Email Address	AARIF_24@HOTMAIL.COM

Address	BLK 490C CHOA CHU KANG AVENUE 5 #05-285
Postcode	683490
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?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190418/2020

#### 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	SLX633E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	VIJAYAKUMAR BALAJI
NRIC/Passport Number	S7782734Z
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.
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3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature

Date & Time:

18/4/2019

1300HRS.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

18/04/2019

1081, 1001/003



SKETCH PLAN

Along Jambak Town Hall Road



A) FE 4950J

B) SIX 633E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

NO REFERR TO Police report  
1/20190418/2020

DECLARATION

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

Policyholder's Signature

Date & Time: 18/4/2019  
1300HRS.

Driver's Signature

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

Reporting Centre Personnel's Signature

Name: 18/04/2019  
Resh Kohli

NRIC/FIN No.:



# SINGAPORE POLICE FORCE



T/20190418/2020

1 of 3

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

Report No. T/20190418/2020

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 18/04/2019 09:36	Vide Report No.:	Station Diary No.: 45
--	------------------	--------------------------

<b>Informant's Particulars</b>		
Name of Informant: MUHAMMAD AARIF S/O HASSAN SHARIFF		Address: APT BLK 490C CHOA CHU KANG AVENUE 5 #05-285 SINGAPORE 683490
ID Type / ID No.: NRIC NO / S8305323B		Contact No.: Home/Office: Mobile: 92969420
Nationality: SINGAPORE CITIZEN		Email:
Sex: Male	Age: 36	Date of Birth: 10/02/1983
Type of Informant: Rider		
Race: Indian		Language: Institution / School Name:
Occupation: COFFEE ROASTER		Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/04/2019 07:40	Type of Location: Straight Road
Location: Along Road 1 JURONG TOWN HALL ROAD Towards Teban Garden				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FE4950J	Motorcycle	YAMAHA	RXZ	White	Seriously Damaged	0
SLX633E	Car				Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FE4950J	NTUC Income Insurance Co-Operative Limited	5096873769-01	26/10/2018	25/10/2019



Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

**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	MUHAMMAD AARIF S/O HASSAN SHARIFF	ID No.	S8305323B
Related Vehicle	FE4950J (Motorcycle)	Contact No.	92969420
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	VIJAYAKUMAR BALAJI	ID No.	S7782734Z
Related Vehicle	SLX633E (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above mentioned date, time and location, I was travelling on Lane 1 with FE4950J. Suddenly a car bearing SLX633E changes into my lane abruptly. I sounded my horn at him but to no avail. I tried to brake but could not slow down in time thus I hit his rear and injured myself. I have yet to see a doctor.





**SINGAPORE  
POLICE FORCE**



T/20190418/2020

3 of 3

Report No. T/20190418/2020

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report:

J /

Sgt 2 CHUA KEE LENG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 YEO GEAK ENG CECILIA

Contact No.: 65476404

Signature Of Informant:

Date/Time:

18/04/2019 09:36

Classification Of Case:

Authentication Stamp

NP168

## Claim Handling

Accident MT/1040801

Policy No.	3095873769-01	Vehicle No.	FE49503	GST Registration No.	
Certificate No.					
Policyholder Name	MUHAMMAD AARIF S/O HASSAN SHARIFF	Driver Type	Third Party	Policyholder NRIC	S83051238
Product Code	MOTORCYCLE INSURANCE	Contact No.(Office)		Leasing	0
Contact No.(Mobile)	92969420	Special Remark		Contact No.(Home)	
Email Address		TCA	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	eCode	No *
KPI	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	NCD Entitlement(%)	10	eCode Reason	
NCD Protection	No			Private Hire	No
<b>Accident Details</b>					
Report Date	18/04/2019 15:11	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	18/04/2019	Time of Accident in:mm	07:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG JURONG TOWN HALL ROAD				
<b>Excess</b>					
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			
<b>Benefits</b>					
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					

## Policyholder Mailing Address

Address 1	BLK 554 #05-44	Address 2	CHOA CHU KANG NORTH 6	Address 3	SINGAPORE 680554
Address 8		Address Type	Singapore address	Post Code	680554
Unit No.		Related Policy Number	3095873769-01		
<b>OT Driver Info</b>					
Driver Name	MUHAMMAD AARIF S/O HASSAN SHARIFF	Driver Type	Main Driver	Driver DOB	10/02/1983
Unnamed driver Name		Driver NRIC	S83051238	Driving Experience	13
Register Date of Driver License	15/03/2006	Driver Age	36	Contact No.(Home)	
Contact No.(Mobile)	92969420	Contact No.(Office)		Address 3	SINGAPORE 680554
Address 1	BLK 554 #05-44	Address 2	CHOA CHU KANG NORTH 6	Post Code	680554
Address 8		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Driver Vehicle No.	FE49503	Driver Insurer Company	NTUC
<b>Declaration</b>					
Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

## Modification History

Claim 001 **Now**

Claim Type *	OD-MX	Insured Name	MUHAMMAD AARIF S/O HASSAN	Insured NRIC	S83051238
Contact No.(Mobile)	92969420	Contact No.(Home)	87645213	Contact No.(Office)	
Email Address	WIL@VERIFIED.CO	OC	FE49503	TP	SLX633E
Claim Description	FE49503 / SLX633E ON 18 Apr 2019			Vehicle Number	
Preferred Workshop		Insured Liability	Not at Fault	Name of Preferred Workshop	
Reason for Initiation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	USA report	Received
Date Registered	18/04/2019 15:13	Claim Close Date		Date Received	18/04/2019 00:00
Report Taken By	ROSLI WAHAB				

Print Ack letter

Save Submit














<b>Attachment</b>					
<div> <div>Choose File No file chosen</div> <div>Choose File No file chosen</div> <div>Choose File No file chosen</div> <div>Choose File No file chosen</div> <div>Choose File No file chosen</div> <div>Choose File No file chosen</div> <div>Message Read</div> </div>					
<div> <div>Accident No.</div> <div>MT/1040801</div> <div>Claim No.</div> <div>001</div> <div>Last Doc. Received</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div> <div>Upload Date</div> <div>18/04/2019 15:14</div> </div>					
<div> <div>Path *</div> <div>Category *</div> <div>Confidential</div> <div>Urgency *</div> <div>Description *</div> </div>					
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Send Message

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)
	NAC_BUKIT_MERAH_8006762 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 18 Apr 2019 15:14	Photo	Normal	Photo 2019-4-18	
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 18 Apr 2019 15:14	Photo	Normal	Photo 2019-4-18	
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 18 Apr 2019 15:14	Photo	Normal	Photo 2019-4-18	



	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:14	Photos	Normal	Photos 2019-4-18
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	Photos	Normal	Photos 2019-4-18
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	Photos	Normal	Photos 2019-4-18
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	Photos	Normal	Photos 2019-4-18
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	Photos	Normal	Photos 2019-4-18
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	Photos	Normal	Photos 2019-4-18
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	Photos	Normal	Photos 2019-4-18
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	Photos	Normal	Photos 2019-4-18
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-18
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 18 Apr 2019 15:13	SAS	Normal	SAS 2019-4-18

▼ Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		<a href="#">Display in New Window</a> <a href="#">Scan and uploading</a>		

# ACCIDENT STATEMENT

ACCIDENT DATE: 18/4/2019 (DD/MM/YYYY), TIME: 07:40 (HH:MM)

LOCATION: JURONG TOWN HALL ROAD

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FE4950J  
 b) INSURANCE COMPANY: NTUC  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: \_\_\_\_\_  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: \_\_\_\_\_  
 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: MUHAMMAD AARIF s/o HASAN SANCHEZ (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S83053233 CONTACT: 92969420  
 c) ADDRESS: 31K 490 C CHOA CHU KANG AVE 5  
#05-285 S(683-490)

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: AS ABOVE CONTACT: 92969420  
 c) ADDRESS: AS ABOVE

\* d) DATE OF BIRTH: 10/02/1983 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 15/3/2006

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) CLEAR

b) ROAD SURFACE: (DRY / WET / OTHERS) DRY

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: CHOA CHU KANG NPL

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLX 633 E MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: VJAYAKUMAR BALAJI  
 c) NRIC/FIN/PASSPORT: S77827342 CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE


- d) VEHICLE NUMBER: AS ABOVE MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: AS  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Email = aarif\_24@hotmail.com

VIDEO



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8305323B



Name  
MUHAMMAD AARIF S/O  
HASSAN SHARIFF  
محمد عارف بن حسن شريف

Race  
INDIAN

Date of birth  
10-02-1983

Sex  
M

Country of birth  
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S8305323B

Name  
MUHAMMAD AARIF S/O  
HASSAN SHARIFF

Birth Date: 10 Feb 1983

Issue Date: 15 Mar 2006


NRIC No. S8305323B



Date of issue  
25-03-2013

Block 990C CHUA CHU KANG AVENUE 5 #05-227

NRIC No: S8305323B Date: 17/11/2017

VEHICLE DRIVE WEIGHTS IN THE FOLLOWING

Class 2B	Motorcycles - 200 CC	15 Mar 2006
Class 2A	Motorcycles between 201 CC and 400 CC	01 Apr 2007
Class 2	Motorcycles > 400 CC	15 Apr 2008
Class 3	Motor cars -< 3600 kg with -< 7 passengers, exclusive of the drivers and motor tractors/vehicles -< 2500 kg	19 Oct 2006
Class 4	Heavy motor cars and motor tractors > 2500 kg	09 Nov 2007

S8305323B

S / No. 9000086525



## 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** : 5096873769-01

**Cover** : Third Party

1. Index mark and Registration Number of Vehicle

: FE4950J

Chassis Number

: 55K001514

2. Name of Policyholder

: MUHAMMAD AARIF S/O HASSAN SHARIFF

3. Effective Date of Insurance

: 26 Oct 2018

4. Expiry Date of Insurance

: 25 Oct 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

INSURE WITH COE

: N/A

NAMED DRIVER (1)

: MUHAMMAD AARIF S/O HASSAN SHARIFF

NAMED DRIVER (2)

: MUHAMMAD KAMIL S/O HASSAN SHARIFF

HIRE PURCHASE COMPANY

: N/A

SUM INSURED

: N/A

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

Agency

: TELESales-DIRECT MARKETING (00000601661)

Date of Issue

: 22 Oct 2018 12:36 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive