

NATIONAL Assessment Centre Services.

(part 1 Jan 2005)

NA419051509

Date In: 22/04/2019 11:00	Job description	Date & Time Completed	Done by
Ref No: N/A/MC190070174	SAS e-filing		
Veh No: G6H 3643J	E-mail (w/ale 8hrs, A/C 2hrs)		
D.O.A: 18/04/2019 14:30	1-Motor Claim Form	MT104125-001	22/04/2019
OID / TP: Reporting Only	1-Motor W/O (Within: OD 2hrs, TP 4hrs)		15/11
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh 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 rep/rep.
() Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()
1) Apply for Transport Allowance () / Courtesy Car ()
2) QC Check / Post Repair Inspection ()
3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: _____
Date of Incident: _____
Location: _____
Weather: _____
Time of Day: _____
Witnesses: _____
Police Report: _____
Insurance Company: _____
Assessment Center: _____

NA1902974	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC (\$50)
Contact No:	3) TP: Towing Fee	\$10/245
Damaged Portion:	4) PT: Follow-Through Survey	\$120
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey)	\$30
	Forfeiting against INC Only (ver 10 Jan 2005)	
	6) TR: Re-inspection	\$75
	7) NI: Idea DA + SMRT Survey	\$160
	8) NTUC Additional Services:	
	9) NI: Idea Mobile	\$10
	10) NI: Idea Mobile	\$10
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FOR:

10-DEC-2018 MON 06:09

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	22/04/2019 11:00
Date Of Accident	18/04/2019 14:30
Exact Location Of Accident	LOYANG CRESCENT TURNING RIGHT TO LOYANG WALK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH3643J
Insured/Policyholder	
Name Of Registered Owner	ANNAT TRANSPORTATION & GENERAL SERVICES
Co Reg No	53187677B
Email Address	ANNAT@LIVE.COM.SG
Mobile Phone No	(LOCAL) +65-92220150
Alternative Phone No	OFFICE-92220150

Vehicle Particulars

Manufacturer	HYUNDAI
Model	H1 STAREX 2.5 CRDI MT 6DR
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100305230
Cover Note Number	

Driver

Name of Driver	TAN KOK HWA
NRIC No	S1187218B
Date Of Birth	29/11/1956
Occupation	OUTDOOR
Date Of Driving Pass	28/03/1977
Driving Experience	42 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92220150
Fax Number	
Contact Number	OTHERS-92220150
Email Address	ANNAT@LIVE.COM.SG

Address	BLK 54 TELOK BLANGAH DRIVE #10-36
Postcode	100054
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TELOK BLANGAH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 51 TELOK BLANGAH DRIVE , POSTCODE: 100051 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2729999 - FAX NO: 63772526
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190418/2135 (TYPE OF COLLISION IS HEAD TO SIDE)

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.

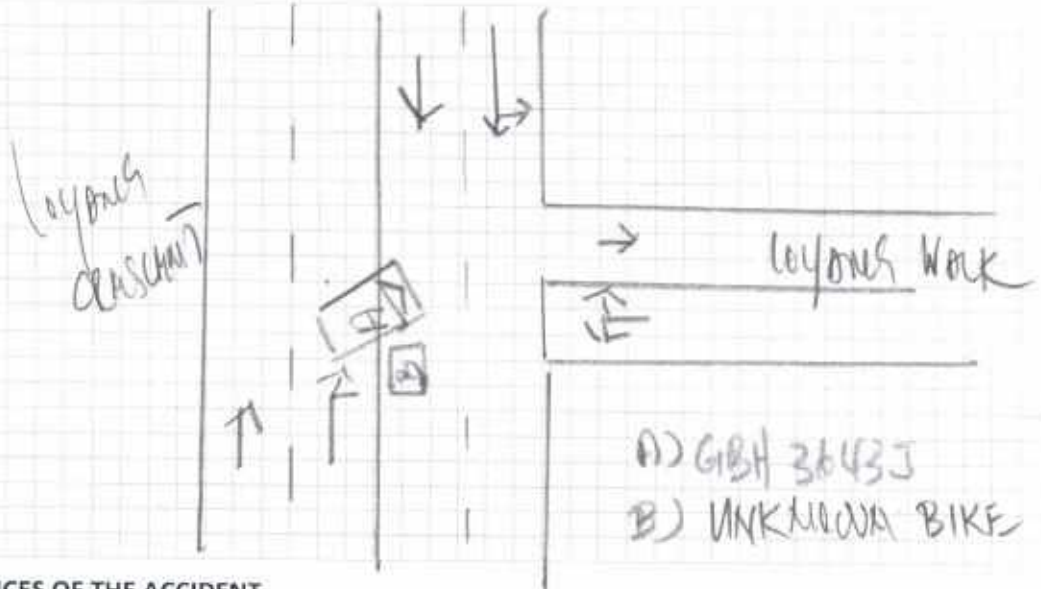


Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: *Bo Li Watters*
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Q18 Report to Police 17/09/2018/2135

REPORT

DECLARATION

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:

21/09/2018
Reporting Centre Personnel's Signature
Name: *Rashid Norton*
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20190418/2135

1 of 3

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

Report No. T/20190418/2135

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/04/2019 18:41	Vide Report No.: G/20190418/0104	Station Diary No.: 19
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Informant's Particulars

Name of Informant: TAN KOK HWA	Address: APT BLK 54 TELOK BLANGAH DRIVE #10-36 SINGAPORE 100054
ID Type / ID No.: NRIC NO / S1187218B	Contact No.: Home/Office: Mobile: 81446922
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male Age: 62 Date of Birth: 29/11/1956	Type of Informant: Driver
Race: Chinese	Language: Institution / School Name:
Occupation: DELIVERYMAN	Driving Licence Information: Class: Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/04/2019 14:30	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 LOYANG CRESCENT LOYANG WALK LOYANG CRESCENT TURNING RIGHT INTO LOYANG WALK				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH3643J	Van				Seriously Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190418/2135

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

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Report No. T/20190418/2135

CONTINUATION OF REPORT

Driver			
Name	TAN KOK HWA	ID No.	S1187218B
Related Vehicle	GBH3643J (Van)	Contact No.	81446922
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 18/04/2019 at about 1430hours, I was driving my vehicle, a delivery van bearing GBH3643J along Loyang Crescent. I was driving along lane 2 of the road, when I approached Loyang Walk, I wanted to make a right turn into Loyang Walk, as such I signaled right to signal my intention to turn right. I then saw that the road was clear from traffic, I then made the right turn into Loyang Walk from lane 2.

Whilst making the turn into Loyang Walk, I heard a loud impact sound and I saw a motorcyclist rolling on the floor and the motorcycle skidded to the front of my vehicle. I then alighted to make a check on the motorcyclist and also made a check on my vehicle and found out that my vehicle's front main door was dented and also the right side mirror was broken. After the accident, the motorcyclist called his father down to the accident scene. Shortly after the father arrive, he called for the ambulance, shortly after the ambulance arrived, I was advised by the ambulance to move my vehicle slightly ahead as it was blocking the traffic. I then tried to drive forward and discovered that the motorcycle had also hit onto my tires and because of that I could not turn right as the steering was stuck. The traffic police then arrived, I then moved my vehicle to the side of the road. The traffic police then informed me that I need to go down to the traffic police headquarters on Monday.

I wish to say that because of the shock I received from the accident, I did not managed to exchange particulars with the motorcyclist nor did I manage to get the number plate of the motorcycle. There is in-car camera in my van and the traffic police has taken the footage already.



**SINGAPORE
POLICE FORCE**



T/20190418/2135

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

3 of 3

Report No. T/20190418/2135

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report:

D /

Sgt 1 TAN YEW ANN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 2 HO JIEKANG, IVAN

Contact No.: 65476170

Signature Of Informant:

Date/Time:

18/04/2019 18:41

Classification Of Case:

Authentication Stamp

NP168



Claim Handling

Accident MT/1041125

Policy No.	5100305230	Vehicle No.	GBH36431	GST Registration No.	NA
Certificate No.					
Policyholder Name	ANNAT TRANSPORTATION & GENERAL SERVICES			Policyholder NRIC	531876778
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Preferred Workshop Plan	Loading	0
Contact No.(Mobile)	92220130	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
eFR	Yes	TCA	Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	5	Private Hire	No
Accident Details					
Report Date	22/04/2019 15:03	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major/Minor Road
Date of Accident	10/04/2019	Time of Accident (hh:mm)	14:10	Country of Accident	Singapore
Reporting Centre		Damage Force		ICM No.	
Accident Location	LOYANG CRESCENT TURNING RIGHT TO LOYANG WALK				
Excess					
Own Damage Excess	600.00	Additional Excess		Windscreen Excess	100.00
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 Status Verified	Yes
GST Registration No.					
Modification History	22/04/2019 13:06:52 System changed GST Registered from Yes to No 22/04/2019 13:08:52 System changed GST Registration No. from NA to null 22/04/2019 15:08:53 System changed GST Registration Date from 01/03/2015 to null				
Policyholder Mailing Address					
Address 1	10 ANSON ROAD	Address 2	#27-15 INTERNATIONAL PLAZA	Address 3	SINGAPORE 079903
Address 4		Address Type	Singapore address	Post Code	079903
Unit No.	#27-15	Related Policy Number	5100305230		
DI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TAN KOK HWA	Driver NRIC	511872188	Driver DOB	29/11/1956
Register Date of Driver License	28/03/1977	Driver Age	62	Driving Experience	42
Contact No.(Mobile)	91446522	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 54 #10-35	Address 2	TELOK BLANGAH DRIVE	Address 3	BLANGAH VIEW
Address 4	SINGAPORE 100054	Address Type	Foreign address	Post Code	100054
Unit No.	10-35				
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	GBH36431	Driver/Insurer Company	RTUC
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes = No		

Modification History

Claim 001 **New**

Claim Type *	CO-MR	Insured Name	ANNAT TRANSPORTATION & GENERAL SERVICES	Insured NRIC	531876778
Contact No.(Mobile)	92220130	Contact No.(Home)		Contact No.(Office)	
Email Address		DI Vehicle Number	GBH36431	TP Vehicle Number	UNKNOWN BIKE
Claim Description	GBH36431 / UNKNOWN BIKE ON 10 Apr 2019				
Preferred Workshop		Insured Liability	Party at Fault		
Consent No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	22/04/2019 15:10	Claim Close Date		Date Received	22/04/2019 00:00
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/1041125	Claim No.	001
Last Doc. Received	Yes No	Upload Date	22/04/2019 15:11
Path *		Category *	Confidential
Choose File No file chosen		Please Select	Normal
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Choose File No file chosen		Please Select	Normal
Message Read			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:11	Photos	Normal	Photos 2019-4-22	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:11	Photos	Normal	Photos 2019-4-22	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:11	Photos	Normal	Photos 2019-4-22	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:11	Photos	Normal	Photos 2019-4-22
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	Photos	Normal	Photos 2019-4-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	Photos	Normal	Photos 2019-4-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	Photos	Normal	Photos 2019-4-22
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	Photos	Normal	Photos 2019-4-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	Photos	Normal	Photos 2019-4-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	Photos	Normal	Photos 2019-4-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	Photos	Normal	Photos 2019-4-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	SAS	Normal	SAS 2019-4-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 Apr 2019 15:10	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-22

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: (18 / 4 / 2019) (DD/MM/YYYY). TIME: (14 : 30) (HH:MM)

LOCATION: Along Alayang Crescent gang, Layang Walk

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBH 3643J
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Hyundai
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: WORK
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: ANNA T. TRAN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 92220150
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Tan Kok Hwa (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 81187288 CONTACT: _____
c) ADDRESS: Blk 54 Telok Blangah drive #10-36, S (100054)

* d) DATE OF BIRTH: (29 / 11 / 1956) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

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

6. WAS ANYBODY INJURED (YES / NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: UN MODEL: _____

b) DRIVER'S NAME: _____

c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = ANNA.T@LVA.com.sg
VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1187218B



Name
TAN KOK HWA

陳國華

Race
CHINESE

Date of birth
29-11-1956

Country/Place of birth
SINGAPORE

Sex
M



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S1187218B

Name
TAN KOK HWA

Birth Date 29 Nov 1956

Issue Date 06 Feb 2003



5894737



NRIC No. S1187218B



Date of issue
20-03-2018

Address
APT BLK 54 TELOK BLANGAH DRIVE
#10-38
SINGAPORE 100054

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Pass DATE
20 Mar 1977

18 Apr 1979

cars and Motor cycles the weight of
unladen does not exceed 2500 kilograms

by Motor Cycle Motor Tractor the
weight of which unladen exceeds 2500 kilograms



NP 428A

Hello, NAC_BUKIT_MERAH_800676

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Policy Query

Policy No.

Date of Accident

Vehicle No. (For Motor)

Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5100305230		ANNAT TRANSPORTATION & GENERAL SERVICES	531876778	GCV	Preferred Workshop Plan	GBH3643J	GBH3643J	07/05/2018	06/05/2019

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 : 5100305230

Cover : Preferred Workshop Plan

1. Index mark and Registration Number of Vehicle : To Be Advised
Chassis Number : KMFWBX7KLH0848156
2. Name of Policyholder : ANNAT TRANSPORTATION & GENERAL SERVICES
3. Effective Date of Insurance : 05 May 2018
4. Expiry Date of Insurance : 04 May 2019
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.
(b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: MAYBANK
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 : AUTO INSURANCE AGENCY (00000613840)

Date of Issue : 30 Apr 2018 14:12 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	GBH3643J	Vehicle Scheme:	Normal
Vehicle Type:	A50 - Goods (Closed) Van/Van Panel (Delivery)		
Vehicle Attachment 1:	No Attachment	Vehicle Attachment 3:	-
Vehicle Attachment 2:	-	Vehicle Model:	H1 STAREX 2.5 CRDI MT 6DR
Vehicle Make:	HYUNDAI	Engine No.:	D4CBG054040
Chassis No.:	KMFWBX7KLHU848156	Trailer Chassis No.:	-
Motor No.:	-	Passenger Capacity:	2
Propellant:	Diesel	Power Rating:	-
Engine Capacity:	2497 cc		
Maximum Power Output:	-	Maximum Laden Weight:	3160 kg
Unladen Weight:	1800 kg	Secondary Colour:	-
Primary Colour:	Black	Original Registration Date:	07 May 2018
First Registration Date:	07 May 2018	Open Market Value:	\$20,895.00
Manufacturing Year:	2016	Minimum PARF Benefit:	\$0.00
PARF Eligibility:	No	Additional Registration Fee Rate:	5.00%
No. of Transfers:	0		
Actual ARF Paid:	\$1,045.00		

Owner Particulars

Owner Name:	ANNAT TRANSPORTATION & GENERAL SERVICES
Owner ID Type:	Business
Owner ID:	53187677B
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	10
Registered Street Name:	ANSON ROAD
Registered Unit No.:	# 26 - 04
Registered Building Name:	INTERNATIONAL PLAZA
Registered Postal Code:	079903
COE No. / Expiry Date:	2018050705000562E / 06 May 2028
COE Bld Category:	C - Goods Vehicle & Bus
PQP Paid:	\$29,611.00

Transaction Details

Business Transaction Ref. No.:	20180507083326128209
Business Transaction Date:	07 May 2018
Business Transaction Time:	08:33:26

Message

The above vehicle has been successfully registered.
Please note that \$23,420.00 will be deducted from your GIRO account.

OK

Save as PDF