Date In: 06/5/20	19 12:59	Services (197 : 15 10.4		
	19007906 Ky	Job description	Date &Tune Completed	Done by
Veh No SML	9441J	SAS e-filing		
Onk (		E-mail (within Shrs. AIC 2hrs,	1	
	019 10:35	i-Motor Claim Form	MT/104334	1-001 9/5/19
OD ( 3P /) Reporting (	Only	i-Motor W/O (Within: OD 2h	rs, TP 4hrs)	1 001 9(3)(9)
		i-Photo Uploaded	1	
TP Insurer:	4	Assessment/Survey Report		
Preferred Wksp / INC Assig		Ass't Report by Fax / Hand	to Owner/Wksp	
TP Particulars:		FORM SHIP-SCIDENCE CONTROL CONTROL	Tel: Fa	x:
Owner / Driver: (	Veh No: SM	C14434 . INC(		
Policy No: (	\ \		Tel:	)
Confirmed by : (	) Perio	d: ( )	Cover Type: (	
Insured/Driver Liability:		Date:	Time:	)
Year of Registration: (	7 [	te-Est. Status (WO): N: 0-20	0%; P: 21-79%. P: 80-100	0%1
Excess: (\$	/ · · · ·	ranty. 1ES ( )/NO (	)	
eneral Remarks:-	Loading: \$1,000	( )/\$2,000( )		
and the second s	HISE HARACE	Societal Market Constitution	235 Viz. 4 20 10 10 10 10 10 10 10 10 10 10 10 10 10	
- Zir Chstonier	: Customer's informa	ition strictly Confidential & Str	ictly NO sets and	
	to e-mail Insurer U	RGENTLY	city NO rater of repairer.	
Prive-In ( ) / Towed-In	n ( ); Invoice: Y	PG /		
marks: ONC bottle		ES( )/NO( ); To	wing Co. (	)
	ne: 6788 6616)		Date&Time Completed	
Apply C		5 kg 2 - 180, 14 SC, 15, 17 V 42, 42, 42, 26, 26, 26, 26, 26, 27, 28, 27, 28, 28, 28, 28, 28, 28, 28, 28, 28, 28	11 Jale Of 1 Ime Completed	Daniel .
Apply for Transport Allo	wance ( ) / Cour	tesy Car (	westeraning Compte.od	Done by
QC Check / Post Repair I	Inspection	tesy Car ( )	The same of the sa	Done by
QC Check / Post Repair I	Inspection	1	The state of the s	Done by
QC Check / Post Repair I Upload Resurvey Photo [	Inspection	1	The state of the s	Done by
QC Check / Post Repair I Upload Resurvey Photo [ Injury :	Inspection	1		Done by
QC Check / Post Repair I Upload Resurvey Photo [ Injury :  Te/Time Actions	Inspection Repair Cost > \$3000	1	- Comparad	Done by
QC Check / Post Repair I Upload Resurvey Photo [ Injury :  Te/Time Actions	Inspection Repair Cost > \$3000	( )	Comparation of the control of the co	Done by
Upload Resurvey Photo [ Injury:  te/Time Actions  119@ 125ths - Conno	Inspection Repair Cost > \$3000  t upland photo	( )	Completed and the second secon	Done by
QC Check / Post Repair I Upload Resurvey Photo [ Injury:  Te/Time Actions  19 @ 1925#85 - Conno	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	( ) ] ( )		
QC Check / Post Repair I Upload Resurvey Photo [ Injury:  Te/Time Actions  19 @ 1925#85 - Conno	Inspection Repair Cost > \$3000  t upland photo	( ) ] ( )		
QC Check / Post Repair I Upload Resurvey Photo [ Injury:  Te/Time Actions  19 @ 1925#85 - Conno	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	( ) ] ( )		teng & in come
QC Check / Post Repair I Upload Resurvey Photo [ Injury: e/Time Actions III C 1925HPS - Conno	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	( )  ( )  ( )  ( )  ( )  ( )  ( )  ( )	inoil to / Kenleong	teng & in come
QC Check / Post Repair I Upload Resurvey Photo [ Injury: e/Time Actions III @ (125HBS - Canno III @ 1007 - Word a III @ 1007 - Upload	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	( ) ) ( ) ) ( )  Ary ok . Photos 6 pcs E	inon 1 to / Kenleong	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury: e/Time Actions III @ (125HBS - Canno III @ 1007 - Word a III @ 1007 - Uploade	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	( )  ( )  ( )  ( )  ( )  ( )  ( )  ( )	ration Checklist	teng & in come
QC Check / Post Repair I Upload Resurvey Photo [ Injury: e/Time Actions Itage (125HBs - Canno 19 e 1027 - Word a 19 e 1027 - Uploade	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	Invoice: Prepa  1) AR: Accident Re 2) DA: Damage Ass 3) TF: Towing Fee	ration Checklist porting (\$30); essment (\$100); INC (\$80)	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury :  re/Time Actions  19 @ top 7 - hand a  19 @ top 7 - uplend  nant's Particulars:-  r/Owner:	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	Invoice: Prepa    1) AR: Accident Re   2) DA: Damage Ass   3) TF: Towing Fee   4) FT: Follow-Three	ration Checklist porting (\$30); essment (\$100); INC (\$80) \$40/\$45	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury:  e/Time Actions  II Pe 1925 - Conno II Pe 1027 - Wood a II Pe 1027 - Upload  ant's Particulars:  r/Owner:  ct No:	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	Invoice Prepa  Invoice Prepa  I) AR: Accident Re  I) DA: Damage Ass  IF: Towing Fee  I) FT: Follow-Through For claiming again	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  Igh Survey (Resurvey) \$30  st INC Only (wef 10 Inn 2005)	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury:  e/Time Actions  II Pe 1925 - Conno II Pe 1027 - Wood a II Pe 1027 - Upload  ant's Particulars:  r/Owner:  ct No:	Inspection  Repair Cost > \$3000  t upland photoc.  gen don this	Invoice Prepa  Invoice Prepa  I) AR: Accident Re  I) DA: Damage Ass  I) F: Towing Fee  I) FT: Follow-Through For Claiming again  I) TR: Re-inspection	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  \$40/\$45  igh Survey \$120  igh Survey (Resurvey) \$30  st INC Only (wef 10 Jan 2005)  \$75	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury :  e/Time Actions  In C 1925HPS - Conno In C 1027 - Word a In C 1027 - Upload  nant's Particulars :  t/Owner:  ct No:  ged Portion:	Inspection  Repair Cost > \$3000  topland photoe  gein at on this  ed the wrong  NA19032	Invoice Prepa  Invoice Prepa  I) AR: Accident Re  2) DA: Damage Ass  3) TF: Towing Fee  4) FT: Follow-Through again  6) TR: Re-inspection  7) N1: Idao DA + SN  8) NTUC Additional	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  Standard (\$100); INC (\$100)  Standard (\$100); IN	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury :  e/Time Actions  In C 1925HPS - Conno In C 1027 - Word a In C 1027 - Upload  nant's Particulars :  t/Owner:  ct No:  ged Portion:	Inspection  Repair Cost > \$3000  topland photoe  gein at on this  ed the wrong  NA19032	Invoice: Prepa  Invoice: Prepa  I) AR: Accident Re  DA: Damage Ass  TF: Towing Fee  For claiming again  The Re-inspection  NI: Idae DA + SN  NTUC Additional	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  \$40/\$45  igh Survey (Resurvey) \$30  st INC Only (wef 10 Jan 2005)  \$75  ART Survey \$160  Services:-	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury : Interpretations In P. 1925 Actions In P. 1925 - Conno In P. 1027 - Wood a In P. 1027 - Upload In ant's Particulars: It No: It No: It was a second connocional connoc	Inspection  Repair Cost > \$3000  topland photoe  gein at on this  ed the wrong  NA19032	Invoice Prepa  Invoice Prepa  I) AR: Accident Re  DA: Damage Ass  TF: Towing Fee  TF: Follow-Throut  For claiming again  The Re-inspection  No: Re-inspection  No: Repair Co-ore  No: Respair Co-ore	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  Standard (\$100); INC (\$100)  Standard (\$100); IN	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury : Interpretations In P. 1925 Actions In P. 1925 - Conno In P. 1027 - Wood a In P. 1027 - Upload In ant's Particulars: It No: It No: It was a second connocional connoc	Inspection  Repair Cost > \$3000  topland photoe  gein at on this  ed the wrong  NA19032	Invoice: Prepa  Invoice: Prepa  I) AR: Accident Re  I) DA: Damage Ass  IF: Towing Fee  I) FT: Follow-Throut  For claiming again  If The Courtespection  Invoice: Prepa  I) AR: Accident Re  Invoice: Prepa  Invoic	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  \$40/\$45  igh Survey \$120  igh Survey (Resurvey) \$30  st INC Only (wef 10 Jan 2005)  \$4RT Survey \$160  Services:-  / Tpt Allowance \$5  lination \$10  isspection \$225	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury : Ite/Time Actions In a log - Act	Inspection  Repair Cost > \$3000  topland photoe  gein at on this  ed the wrong  NA19032	Invoice Prepa  Invoice Prepa  I) AR: Accident Re  I) AR: Accident Re  I) Damage Ass  I) F: Towing Fee  I) F: Follow-Throu  For claiming again  If the DA + SN  Invoice Prepa  I) AR: Accident Re  Invoice Prepa  I) AR: Accident Re  Invoice Prepa  In	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  Std/\$45  Igh Survey \$120  Igh Survey (Resurvey) \$30  St INC Only (wef 10 Jan 2005)  ART Survey \$160  Services:  / Tpt Allowance \$5  lination \$10  Ispection \$25  Excess Coordination \$55	teng Einceme
QC Check / Post Repair I Upload Resurvey Photo [ Injury : Ite/Time Actions Ita C 1925#25 - Commo Ita C 1027 - Wood a Ita C 1027 - Upload Ita C 102	Inspection  Repair Cost > \$3000  topland photoe  gein at on this  ed the wrong  NA19032	Invoice Prepa  Invoice Prepa  I) AR: Accident Re  I) AR: Accident Re  I) Damage Ass  I) F: Towing Fee  I) F: Follow-Through For claiming again  If the DA + SN  Invoice Prepa  I) AR: Accident Re  I Follow-Through Invoice In	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  Igh Survey \$120  Igh Survey (Resurvey) \$30  St INC Only (wef 10 Jan 2005)  ART Survey \$160  Services:-  / Tpt Allowance \$5  ination \$10  ispection \$25  excess Coordination \$5  in INC) against INC \$20	teng Einceme
dia a di	Inspection  Repair Cost > \$3000  topland photoe  gein at on this  ed the wrong  NA19032	Invoice Prepa  Invoice Prepa  I) AR: Accident Re  2) DA: Damage Ass  3) TF: Towing Fee  4) FT: Follow-Throut  For claiming again  6) TR: Re-inspection  7) N1: Idao DA + SN  8) NTUC Additional  OD*  *N5: Courtesy Car  *N6: Repair Co-ore  *N7: Post Repair Ir  *N8: DV / Collect I  TP (N11): TP (N-)	ration Checklist  porting (\$30); essment (\$100); INC (\$80)  Std/\$45  Igh Survey \$120  Igh Survey (Resurvey) \$30  St INC Only (wef 10 Jan 2005)  ART Survey \$160  Services:  / Tpt Allowance \$5  lination \$10  Ispection \$25  Excess Coordination \$55	teng Einceme

#### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 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.

SULTY SULT	
	ACCIDENT STATEMENT
Date Of Report	06/05/2019 12:59
Date Of Accident	06/05/2019 10:35
Exact Location Of Accident	BEDOK SOUTH AVE 1 TWDS BEDOK SOUTH RD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMK6441J
Insured/Policyholder	
Name Of Registered Owner	EK AUTO (EXPORT) PTE LTD
Co Reg No	200515917R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97877391
Alternative Phone No	OFFICE-97877391
Vehicle Particulars	
Manufacturer	HONDA
Model	JAZZ 1.3L AT
Exact Purpose for which vehicle was being used at time of accident	WORK
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5069581330-04
Cover Note Number	
Driver	
Name of Driver	CHNG HO ENG
NRIC No	S0584308A
Date Of Birth	02/11/1947
Occupation	INDOOR
Date Of Driving Pass	22/10/1969
Driving Experience	49 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97877391
Fax Number	
Contact Number	OTHERS-97877391

NOEMAIL

10 SIMEI RISE Address

#10-27

528804 Postcode

Was driver an employee of the Insured's Company NO

OTHER - HIRER 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

COLLISION - HEAD TO REAR Type Of Accident

Weather Conditions CLEAR DRY Road Surface

### 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

YES

NO

2

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

: CAMPOSAGRADO DORLYN PAULES NAME:

GENDER: : FEMALE

# **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

#### Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

# Attachment(s)

Are accident photos available for attachment?

YES NO

Was there any video captured by Car Camera? Was there any audio recorded?

NO

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SMC1443H

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

YANG SHENGWEN Name of Driver

S8708369A NRIC/Passport Number 98217681 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

# No. Of Passenger (Including Driver)

# **DETAILS OF INJURED PERSON 1**

Name CHNG HO ENG

Approximate Age

Injuries Sustain SLIGHT
Injured person in which vehicle? SMK6441J
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance? Address

Postcode

DETAILS OF INJURED PERSON 2

Name CAMPOSAGRADO DORLYN PAULES

Approximate Age

Injuries Sustain SLIGHT
Injured person in which vehicle? SMK6441J
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

Address Postcode

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

I understand, acknowledge, agree and consent that:

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

NRIC/FIN No .:

Termasek To	
Bedix South Rd St. B.	
LAL SMAC SOUL	A-5MK644 B-5MC144
SCRIBE CIRCUMSTANCES OF THE ACCIDENT	
I was travelley along	Bedok South Ave 1
	· along the filter
Rd Towards Bedok South	Rd. 1 Stop to
give way for on coming	y vehicle, suddenly
5mc 144Bit Coming at his	h speed and
Collided outo my back	as the result
	magad also my
maid & sitting behind suy	yer shot shock
injured '	

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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

#### **Enquire Vehicle Registration Details** Owner Particulars NRIC/Passport/Company Cert No.: 200515917R Owner ID Type: Company Owner Name: EK AUTO (EXPORT) PTE. LTD. (Temporary Transfer) Registered Address: 18 UBI ROAD 4 #01-10 SINGAPORE 408616 Mailing Address: Birth Date: Vehicle Particulars Vehicle No.: 5MK6441J Previous Vehicle No.: Effective Date of Ownership: 22 Apr 2019 Original Regn Date: 22 Oct 2009 Registration Date: 22 Oct 2009 Temporary Transfer Start Date: 22 Apr 2019 Temporary Transfer End Date: 21 Jul 2019 Maximum Temporary Ownership Period: 12 months Year of Manufacture: 2008 Vehicle Type: Passenger Motor Car Vehicle Scheme: Vehicle Attachment 1: No Attachment Vehicle Attachment 2: Vehicle Attachment 3: Vehicle Make: HONDA Vehicle Model: JAZZ 1.3L AT Primary Colour: Red Secondary Colour: Passenger Capacity: 4 Chassis No.: JHMGE68509S222402 Engine No.: L13Z11022406 Engine Capacity / Power Rating: 1339 cc/-Maximum Power Output: 73.0 kW (97 bhp) Propellant: Petrol Max Unladen Weight: 1060 kg Maximum Laden Weight: 1540 kg Open Market Value: \$18,948.00 PARF Eligibility: Yes PARF Eligibility Expiry Date: 21 Oct 2019 Minimum PARF Benefit: \$9,321.00 No. of Transfers: 1 IU Label No.: 1123391516 COE No .: 2009110101000073D COE Expiry Date: 21 Oct 2019 COE Category: A - Car (1600cc & below) COE Registration Category: A - Car (1600cc & below) Quota Premium (QP) / Prevailing Quota \$16,201.00/-Premium: Actual QP Paid: \$9,986.00

QP (Regn Cat): \$16,201.00 OPC Cash Rebate Eligibility: No

QP during COE Bidding Exercise: \$16,201.00 Additional Registration Fee Rate: 100.00 % Actual ARF Paid: \$18,642.00 Vehicle Lifespan Expiry Date: No Lifespan

CO2 Emission: CO Emission: HC Emission: NOx Emission: PM Emission:

Message:

To renew the COE, the Prevailing Quota Premium payable is that of Category A.



# LIST OF AUTHORISED DRIVER(S) ATTACHING TO POLICY NUMBER: 5069581330-04

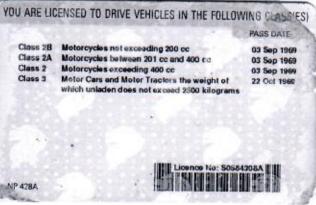
No.	Name	ID Number	Driver's Licence Reg. Date
1	CHNG HO ENG	S****308A	01 Jan 2000
2	KER BENG HWEE	S****808Z	01 Jan 2000
3	ANG SEOW ENG	S****192D	01 Jan 2000
4	ALICIA ONG PEI YI	S****377H	03 Mar 2011
5	SEGAR S/O A NADESAN	S****055H	09 Jul 2014

Total number of authorised driver(s): 5











# Certificate of Insurance

TOR VEHICLES (THIRD PARTY RISKS AND CON	AMERICAN CONTRACTOR OF THE CON
TOR VEHICLES (THIRD PARTY RISKS AND COM	MPENSATION) RULES, 1960
AD TRANSPORT ACT, 1987 (MALAYSIA)	
TOR VEHICLES (THIRD PARTY RISKS) RULES, 1	.959 (MALAYSIA)
tificate Number : 5069581330-04	Cover : Third Party
Index mark and Registration Number of Veh	
Any Motor Vehicle the property of the Polic	cyholder or in their custody or control. All steam-driven vehicles are excluded
Name of Policyholder	: EK AUTO (EXPORT) PTE LTD
	: 04 Feb 2019
2010 000 0000	: 03 Feb 2020
	ve
	d in accordance with the line of
Motor venicle or has been so permitted and	is not disqualified by order of a Court of Law or by reason of any enactment
Limitations as to Use*	1000000001270-70000000000000000000000000
(a) Use only for Motor Trade purposes.	
Policy does not cover	
(a) Use for hire or reward.	
(b) Use for racing, pace-making, reliability to	trial or speed-testing.
(c) Use solely for 'Breakdown' purposes is a	not deemed to be use for hire or reward.
CV TVPF	MOTOR TRUES WELL
	: MOTOR-TRADE INSURANCE : CAR DEALERS
AL AULINADED OF AUTHORISED DOGGE	: CAR DEALERS
TO THE PROPERTY OF THE PROPERT	
	7 N
AILS OF AUTHORISED DRIVER(S)	: REFER TO LIST ATTACHED
	7 N
	Effective Date of Insurance Expiry Date of Insurance Persons or Classes of Persons entitled to dri Refer to List Attached Provided that the person driving is permitted Motor Vehicle or has been so permitted and or regulation in that behalf from driving the Limitations as to Use* (a) Use only for Motor Trade purposes.  Policy does not cover (a) Use for hire or reward. (b) Use for racing, pace-making, reliability to (c) Use solely for 'Breakdown' purposes is to  * Limitations rendered inoperative by Sec Act (Chapter 189) and Section 95 of the headings.  CY TYPE  OF TRADE/BUSINESS

**eBao**Tech

GeneralClaim

Hello, NAC_PAYA_UBI_80060	01							· Change	e Language · Change	e Password	· Log Ou
My Desktop Notice of Loss	Policy Query									300000000	
	Policy No. 50  Vehicle No.(For Motor)		-	5069581330-04		Date of Accident  Certificate Numbe			06/05/2019 10:35		
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC		Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	9	5069581330- 04		EK AUTO (EXPORT) PTE LTD	200515917R	GMT	Third Party		CHNG HO ENG/S0584308A_KER BENG HWEE/S1683808Z_ANG SEOW ENG/S1667192D_ALICIA ONG PEI YI/S9014377H_SEGAR S/O A NADESAN/S1390055H	04/02/2019	03/02/2020

Continue

OIZO IS			Policy information		
→ Policy Inform	mation				
Policy No.	5069581330-04	Policyholder Name	EK AUTO (EXPORT) PTE LTD	Policyholder NRIC	200515917R
Certificate No.					
Address	51 UBI AVENUE 1 #01-29 PAYA UBI	I INDUSTRIAL PARK SINGAP	ORE 408933		
Product Name	MOTOR TRADE INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	01/02/2019	Effective Date	04/02/2019 00:00	Expiry Date	03/02/2020 23:59
Third Party Excess	0.0	Own damage Excess	0	Windscreen Excess	
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	THIS MARKETING INSURANCE A	Agent Tel.	63444479	GST Flag	Y
Co-insurance Flag Open Policy Info Certificate Info	No				
Policyholder Ma	iling Address				
Address 1	51 UBI AVENUE 1	Address 2	#01-29 PAYA UBI INDUSTRIAL F	Address 3	SINGAPORE 408933
Address 4		Address Type	Singapore address	Post Code	408933
Unit No.		Related Policy Number	5069581330-04		
Insured Object: 0	CHNG HO ENG/S0584308A_KER BEN	G HWEE/S1683808Z_AN	G SEOW ENG/S1667192D_ALICIA	ONG PEI YI/S9014377	H_SEGAR S/O A NADESAN/S139005
Sequence	Date of Endorsement	Endorsement	Type Endorsem	ent Status	Endorsement Content
1	25/03/2019 00:00	Basic Information Endor	sement Entry Rejected		Thank you for giving us the opportunity to serve you. We confirm that from 25 Mar 2019, the following amendment(s) is/are made to this policy: INCLUSION OF NAME DRIVER 1. ANG KOK POH (HONG GUOBAC 2. WONG CRI WAH In view of this amendment, an additional premium of \$550.24 (inclusive of GST) is payable und your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate if you could make payment to us within 11 days from the date of this letter. For cheqipayment, please issue the cheque in favor of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash, credit card or NETS.

# Claim Handling Accident MT/1043361

Policy No.  Certificate No.  Policyholder Name  Product Code  Motor Trade Plate No.  Contact No. (Mobile)  Email Address  KFK  No. Yes  No.  Accident Details  Report Date  Date of Accident  Accident Location  Excess  Own damage Excess  Unnamed Driver Excess  Third Party Excess  Third Party Excess  GST Registered  GST Registered  Froduct Code  MOTOR TRADE INSURANCE  MOTOR TRADE INSURANCE  NO.  97877391  Excended House 107877391  Excended No.  97877391  Excended No.  97877391  Excended No.  97877391  Froduction No.  97877391  Froducti	Cover Type Motor Trade Driver Name Contact No.(Office) Special Remark TCA NCD Entitlement(%)  Accident Report Within 24 hn Time of Accident hh:mm Orange Force  Additional Excess Outside Singapore TP Excess	10:35 No	GST Registration N Policyholder NRIC Loading Motor Trade Driver Contact No.(Home eCode eCode Reason Private Hire  Accident Type Country of Acciden ICM No. Windscreen Excess
Policyholder Name EK AUTO (EXPORT) PTE LTD Product Code MOTOR TRADE INSURANCE Motor Trade Plate No. SMK6441J Contact No.(Mobile) 97877391 Email Address KFK No Yes NCD Protection No Accident Details Report Date 07/05/2019 16:19 Date of Accident 06/05/2019 Reporting Centre administrator Accident Location BEDOK SOUTH AVE 1 TWDS BEDOK Excess Own damage Excess Unnamed Driver Excess Third Party Excess Benefits GST Registered Information GST Registered GST Registered GST Registeration No.	Motor Trade Driver Name Contact No.(Office) Special Remark TCA NCD Entitlement(%)  Accident Report Within 24 hr Time of Accident hh:mm Orange Force  Additional Excess Outside Singapore OD Excess	CHNG HO ENG	Loading Motor Trade Driver Contact No.(Home eCode eCode Reason Private Hire  Accident Type Country of Acciden ICM No.
Product Code MOTOR TRADE INSURANCE  Motor Trade Plate No. SMK6441J  Contact No.(Mobile) 97877391  Email Address  KFK No Yes  NCD Protection No  Accident Details  Report Date 07/05/2019 16:19  Date of Accident 06/05/2019  Reporting Centre administrator  Accident Location BEDOK SOUTH AVE 1 TWDS BEDOC SOUTH AVE 1 TWDS BEDOC SOUTH PRODUCT OF TWO S	Motor Trade Driver Name Contact No.(Office) Special Remark TCA NCD Entitlement(%)  Accident Report Within 24 hr Time of Accident hh:mm Orange Force  Additional Excess Outside Singapore OD Excess	CHNG HO ENG	Loading Motor Trade Driver Contact No.(Home eCode eCode Reason Private Hire  Accident Type Country of Acciden ICM No.
Motor Trade Plate No. SMK6441J Contact No.(Mobile) 97877391 Email Address KFK ■ No. Yes NCD Protection No.  Accident Details Report Date 07/05/2019 16:19 Date of Accident 06/05/2019 Reporting Centre administrator Accident Location BEDOK SOUTH AVE 1 TWDS BEDOC SEXES Unnamed Driver Excess Third Party Excess  Benefits  GST Registered Information GST Registered GST Registration No. SMK6441J 978877391  No. Yes No.	Motor Trade Driver Name Contact No.(Office) Special Remark TCA NCD Entitlement(%)  Accident Report Within 24 hr Time of Accident hh:mm Orange Force  Additional Excess Outside Singapore OD Excess	CHNG HO ENG	Motor Trade Driver Contact No.(Home eCode eCode Reason Private Hire  Accident Type Country of Accident ICM No.
Contact No.(Mobile) 97877391  Email Address  KFK * No Yes  NCD Protection No  Accident Details  Report Date 07/05/2019 16:19  Date of Accident 06/05/2019  Reporting Centre administrator  Accident Location BEDOK SOUTH AVE 1 TWDS BEDO  Excess  Own damage Excess Unnamed Driver Excess  Third Party Excess  Benefits  GST Registered Information  GST Registered  GST Registration No. 200515917R	Contact No.(Office)  Special Remark  TCA  NCD Entitlement(%)  Accident Report Within 24 hr  Time of Accident hh:mm  Orange Force  Additional Excess  Outside Singapore OD Excess	0 (e) No (a) Yes 15  S Yes 10:35 No	Contact No.(Home eCode eCode Reason Private Hire  Accident Type Country of Accident ICM No.,
Email Address  KFK # No Yes  NCD Protection No  Accident Details  Report Date 07/05/2019 16:19  Date of Accident 06/05/2019  Reporting Centre administrator  Accident Location BEDOK SOUTH AVE 1 TWDS BEDO  Excess  Own damage Excess Unnamed Driver Excess  Third Party Excess  GST Registered Information  GST Registered  GST Registration No. Yes  200515917R	Special Remark TCA NCD Entitlement(%)  Accident Report Within 24 hr Time of Accident hh:mm Orange Force  K SOUTH RD  Additional Excess Outside Singapore OD Excess	No  Yes     15     Yes     10:35     No	eCode eCode Reason Private Hire  Accident Type Country of Accident ICM No.
NCD Protection No  Accident Details  Report Date  O7/05/2019 16:19  Date of Accident O6/05/2019  Reporting Centre Accident Location ■ Excess  Own damage Excess Unnamed Driver Excess  Third Party Excess ■ O.00 ■ Benefits ■ GST Registered Information  GST Registered GST Registration No.	TCA  NCD Entitlement(%)  Accident Report Within 24 hr Time of Accident hh:mm Orange Force  K SOUTH RD  Additional Excess Outside Singapore OD Excess	15 S Yes 10:35 No	eCode Reason Private Hire  Accident Type Country of Accident ICM No.
NCD Protection  Report Date  Or/05/2019 16:19  Date of Accident  Reporting Centre  Accident Location  Excess  Own damage Excess  Unnamed Driver Excess  Third Party Excess  GST Registered  GST Registered  GST Registered  Party Excess  GST Registered  ST Registered  NO  Or/05/2019 16:19  Administrator  BEDOK SOUTH AVE 1 TWDS BEDOC  BEDOK SOUTH AVE 1 TWDS BEDOC  OR OF TWDS BEDOK  OR OF TWDS BEDOK  OR OF TWDS BEDOK  OR OF TWDS BEDOK  Ves  GST Registered  Yes  GST Registered  Yes  GST Registered  Yes  GST Registeration No.	Accident Report Within 24 hr Time of Accident hh:mm Orange Force  Additional Excess Outside Singapore OD Excess	15 S Yes 10:35 No	Accident Type Country of Accider ICM No.
Report Date 07/05/2019 16:19 Date of Accident 06/05/2019 Reporting Centre administrator Accident Location BEDOK SOUTH AVE 1 TWDS BEDO Excess Own damage Excess Unnamed Driver Excess Third Party Excess Benefits GST Registered Information GST Registered GST Registration No. 200515917R	Accident Report Within 24 hr Time of Accident hh:mm Orange Force OK SOUTH RD  Additional Excess Outside Singapore OD Excess	s Yes 10:35 No	Accident Type Country of Accider ICM No.
Report Date 07/05/2019 16:19 Date of Accident 06/05/2019 Reporting Centre administrator Accident Location BEDOK SOUTH AVE 1 TWDS BEDO  Excess 0,000 Unnamed Driver Excess Third Party Excess 0,000  Benefits  GST Registered Information  GST Registered Yes GST Registration No. 200515917R	Time of Accident hh:mm Orange Force  IK SOUTH RD  Additional Excess Outside Singapore OD Excess	10:35 No	Accident Type Country of Accider ICM No.
Date of Accident 06/05/2019 Reporting Centre administrator Accident Location BEDOK SOUTH AVE 1 TWDS BEDO  Excess Own damage Excess Unnamed Driver Excess Third Party Excess  GST Registered Information  GST Registered GST Registration No. 200515917R	Time of Accident hh:mm Orange Force  IK SOUTH RD  Additional Excess Outside Singapore OD Excess	10:35 No	Country of Accider
Reporting Centre administrator  Accident Location BEDOK SOUTH AVE 1 TWDS BEDO  Excess  Own damage Excess Unnamed Driver Excess  Third Party Excess  Benefits  GST Registered Information  GST Registered  GST Registration No. 200515917R	Orange Force  K SOUTH RD  Additional Excess  Outside Singapore OD Excess	No 5	Country of Accider
Accident Location BEDOK SOUTH AVE 1 TWDS BEDO  Excess  Own damage Excess Unnamed Driver Excess Third Party Excess  Benefits  GST Registered Information  GST Registered  Yes  GST Registration No.  200515917R	Additional Excess Outside Singapore OD Excess	No 5	ICM No.
© Excess  Own damage Excess  Unnamed Driver Excess  Third Party Excess  ■ Benefits  ■ GST Registered Information  GST Registered  GST Registered  Yes  GST Registration No. 200515917R	Additional Excess Outside Singapore OD Excess	90001	TANA PARA TELEFORMATION AND A
Own damage Excess 0,00 Unnamed Driver Excess Third Party Excess 0.00  Benefits  GST Registered Information GST Registered Yes GST Registration No. 200515917R	Outside Singapore OD Excess		Windscreen Excess
Unnamed Driver Excess Third Party Excess  Benefits  GST Registered Information  GST Registered Yes GST Registration No. 200515917R	Outside Singapore OD Excess		Windscreen Excess
Third Party Excess 0.00   ■ Benefits  ■ GST Registered Information  GST Registered Yes  GST Registration No. 200515917R			
■ Benefits           ■ GST Registered Information           ✓ GST Registered           Yes           SST Registeration No.           200515917R	Outside Singapore TP Excess		
GST Registered Information         Yes           GST Registration No.         200515917R			
GST Registered Yes GST Registration No. 200515917R			
GST Registration No. 200515917R			
		GST Registration Date	01/01/2
		GST Status Verified	Yes
	24:03 System changed GST Registration Date fro 24:03 System changed GST Status Verified from	om 01/01/2015 to 01/01/2006 No to Yes	
Policyholder Mailing Address			
Address 1 51 UBI AVENUE 1	KA KANDA K	VIVITA VOLUMENTO DE SE LA CARGO DE LA CARGO DEL CARGO DEL CARGO DE LA CARGO DE	
Address 4	Address 2	#01-29 PAYA UBI INDUSTRIAL F	Address 3
Unit No.	Address Type	Singapore address	Post Code
▼ OI Driver Info	Related Policy Number	5069581330-04	
Driver Name CHNG HO ENG	N		
Unnamed driver Name	Driver Type	Named Driver	
Register Date of Driver License 01/01/2000	Driver NRIC	S0584308A	Driver DOB
Contact No.(Mobile) 97877391	Driver Age	71	Driving Experience
Address 1 10 SIMEL RISE	Contact No.(Office)	0	Contact No.(Home)
Address 4	Address 2	# CHANGI RISE CONDOMINIUM	Address 3
Unit No.	Address Type	Singapore address	Post Code
Does he own a Singapore			
Registered car? Yes • No	Driver Vehicle No.		Driver Insurer Com
Declaration			
Breathaluser or Blood Test			
Reading? 0 mg	Any injury?	O Yes No	
Modification History			
V. 100 (14 to 10 t			
Claim 001 OD-MX New			
Claim Tune 4			
Claim Type *		OD-MX	Insured EK AUT
Contact No.(Mobile)			Contact
		22	No. (Home)
Email Address		ekauto@ymail.com	OI Vehicle SMK644
		Ended & Privations	Number
Claim Description		/ SKR4078A ON 6 M	fay 2019
Preferred Institute Instit			
SURFERS NO. Van	lot at Fault   GIA		
	rkshop, Name unknown Feport Receive	ed •	Claim
Finalisation Preferred Wo		09/05/2019 10:30	Close
Finalisation 1 tes Repair Preferred Wo			
Finalisation Preferred Wo		e	Date

Save Submit Attachment Accident No. MT/1043361 Claim No. 001 Last Doc. Received Yes No Upload Date 09/05/2019 09:21 Path \* Category \* Confidential Choose File No file chosen Clear Please Select \* NO Choose File No file chosen Clear Please Select ٠ NO Chaose File No file chosen Clear Please Select NO Choose File No file chosen Clear Please Select NO Choose File No file chosen Clear Please Select \* NO Choose File No file chosen Clear Please Select \* NO Message Read Attachment List Attachment Uploaded By/Date Category Urgency Des NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 09 May 2019 10:30 NRIC/ Driving License Normal NRIC/ Driving NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on SAS Normal SAS 2 09 May 2019 10:28 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos 09 May 2019 10:27 Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 09 May 2019 10:27 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 09 May 2019 10:27 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal 09 May 2019 10:27 Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Photos 09 May 2019 10:27 NAC\_PAYA\_UB1\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 09 May 2019 10:27 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos NAC\_PAYA\_UBI\_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos 09 May 2019 10:27 Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 09 May 2019 10:14 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 09 May 2019 10:14 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal 09 May 2019 10:14 Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal 09 May 2019 10:14 Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal 09 May 2019 10:14 Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal 09 May 2019 10:14 Photos NAC\_PAYA\_UBI\_80D601( NATIONAL ASSESSMENT CENTRE SERVICES) on 07 May 2019 16:26 Photos Normal wrong ph NAC\_PAYA\_UBI\_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on

Photos

Normal

wrong ph