NATIONAL Assessment Cer	mire services.	A CONTRACTOR OF THE PARTY	10-(51 65-61) NAII9051		
Date In: 3/0/19-1312	Jeb description		Date &Time Completed	Don	e by:
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OD TP Reporting Only	i-Motor W/C	O (Within: OD 2hr			-11
ob in reporting Only	i-Photo Uplo				
TP Insurer:	Assessment/Si	urvey Report			
	Ass't Report b	y Fax / Hand t	o Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW:	(Tel:	Fax:	
TP Particulars: Veh No: 6	25655	, INC ()/Non-INC().	v.	
Owner / Driver: (Tel:)	
Policy No: ()	Period: ()	Cover Type: ()	
Confirmed by : (Date:	Time:)	
Insured/Driver Liability: (%) [Note-Est. Status (V	WO): N: 0-20	0%; P: 21-79%. P: 80-	100%]	-
Year of Registration: ()	Warranty: YES ()/NO()		
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() Walk-In Customer : Customer's i	nformation strictly Cor	nfidential & Str	ictly NO refer of renairer		
() Total Loss Case : to e-mail Ins			hour to raid or repailer.		
Drive-In ()/ Towed-In (): Invo	pice VES () / N	IO () . T.	awing Co. (4	1
	pice: YES () / N	10 () ; To	owing Co: ()
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

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	ACCIDENT STATEMENT
Date Of Report	07/05/2019 17:23
Date Of Accident	06/05/2019 19:00
Exact Location Of Accident	YISHUN IND CARPARK
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBE515G
Insured/Policyholder	
Name Of Registered Owner	FUTUREAIR ENGINEERING PTE LTD
Co Reg No	201417824R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	NISSAN
Model	CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number 5091785675-01

Cover Note Number

Driver

Name of Driver YONG FOO YOONG

 NRIC No
 G8062539T

 Date Of Birth
 23/04/1988

 Occupation
 OUTDOOR

 Date Of Driving Pass
 14/02/2014

Driving Experience 5 YEARS AND 2 MONTHS

Gender MALE

Mobile Number +65-97152799

Fax Number

Contact Number OFFICE-97152799

EMail Address NOEMAIL

Address 15 YISHUN INDUSTRIAL STREET 1

#02-23 WIN 5

Postcode 768091

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

3

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

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

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

0

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

REFER TO STATEMENT.

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

GZ565S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GBD6352A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

COMMERCIAL VEHICLE

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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
- 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
- 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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
- (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
- 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.
- 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.

FUTUREAIR ENGINEERING PTE LTD No. 15 Yishun Ind. St 1 #02-23 Win 5

Singapore 768091 Fax: +65 6803 9974

Tel. +65 6901 942 Fax +65 Email 1uture 9 kb 0000 Go Reji No. CST 2014 20141782412

Policyholder's Signature

Date & Time:

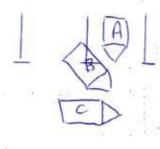
7

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

	7
My lorry was purked stationary inside	the parking
lot, sudderly uch B while moved on	t from the
1	
parking lot accident with which is de	we to the
impact moved of hit onto my weh R	a portion.
	18
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DECLARATION

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

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Bersonnel's Signature

Name:

NRIC/FIN No.:

Policyholder's Signature Date & Time:

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Personal Pa						
Date of Acciden	it: 6 5 19		Time of Accider	nt: <u> </u>	pm	
Exact Location	of Accident:	Yishun	Ind (A Po	sh Bizho	16
Owner's Name	Future A	ir Engineer	19 Pfe Ctulin	IC No:	HP No:	
Driver's Name:	Young Foo	Young -) NR	IC No: G80625	291 HP NO: 9715	52
Date of Birth: _	23 4 7988 Driv no	g Licence Passin	g Date: 14 2	2014 Occupati	on: Indoor / Outdoor	•
Address:[s tishun I	nd St 1	#02-2	3 Din 5	(768091))
Relationship of	Driver with Insured:	Em	ail Address:			
Vehicle No:(GBE 515 G	Mal	e & Model:			_
Insurance Co: _	NTUC	Cover	age:	Policy No	:	220
Durana of	Reporting?	Nun Damaga Ci:	sion / and Da feet	laim / Not Claims	ing luck Paparting (mlu
The second secon	95-1 S-75 - 58-7 50-7 \$1-5 k-7-5		SKING ANDRESS HAVE			
*Exact Purp	ose of The Vehicl	e Was Being	Used At Time	of Accident	: Private Use / Wor	15
*Weather C	ondition? q	Gar / Raining / G	Others:	Wet //	Ory / Others:	
* Any passe	nger inside vehic	le involved?	(Yes / No) If y	es, Vehicle N	lo & How many :	zax
۸.	0				D:	
A:	ь.	av ag vo	Ci_		D:	
*Was Anybo	ody Injured ? (Yes	; / No) If yes,				
Name / NRIC	/ In Vehicle:					
≑Was The A	ccident Reported	To The Police	e ?			
O No O Yes,	Which Police Station	?				
	river Own Any O					
	, Vehicle Registration					
	reign vehicle inv					
					gory:	
*Was there	any video captur	ed by Car Ca	mera? (Yes/(10)		
Third Party	Driver's Particula	ars				
Vehicle & No: _	GZ 5655	- Ma	ke & Model:			
Driver's Name:						
	6BD 63528	3				
Driver's Name:						
			and the second s	ACCOUNT OF THE PARTY OF THE PAR	CONT. C. S.	
Witness Par	ticulars		₩		-	d/acie



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: 566550020G / G5T Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: MNA119059153 _____Vehicle Registration No: GBE515G Original Report No: Name(as shown in NRIC): FUTUREAIR ENGINEERING PTE LTD NRIC/FIN/Passport No : 201417824R (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate Address Singapore() Mobile No.:____ Contact (Tel) Email Address : 06/05/2019 Date of Accident ____Time of Accident: 19:00 YISHUN IND CARPARK Place of Accident Insurance Company: NTUC Income Insurance Co-operative Ltd (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: Forgot to sign in the sketch plan.

Policyholder / Driver's Signature Date:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:







YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS
 EFFECTIVE DATE

Class 2B Motorcycles =< 209 cc Class 3 Motor class with undade weight =< 3000kg with =< 7 14 Feb 20 kc Class 3 Motor class with undaden weight =< 2500kg vehicles with unladen weight =< 2500kg

NP 428A

Licence No538062539T



Certificate of Insurance

Cover : Comprehensive

FUTUREAIR ENGINEERING PTE LTD

GBES1SG

: 21 Jun 2018

: 20 Jun 2019

JN1SC2F24Z0857305

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: 5091785675-01

Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

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 anactment 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

EXCESS (SECTION 1)

EXCESS (SECTION 2) WINDSCREEN EXCESS

INSURE WITH COE

HIRE PURCHASE COMPANY

SUM INSURED

: 55600

: N/A

: 5\$100

· YES

: TAN CHONG CREDIT PTE LTD

. 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

: ONG HUI SENG LIFE & GENERAL INS AGENCY (00000571953)

Date of Issue

: 19 Jun 2018 11:29 hrs

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBao Tech									0	GeneralC	laim
Hello, NAC_PAYA_UBI_80	0601					-	· Change Lan	guage	· Change Pa	assword	Log Out
My Desktop	Poli	cy Query									
Notice of Loss	Policy N	lo.				Date of	Accident	06/0	5/2019 19:00		
	Vehicle	No.(For Motor)	GBE515	G		Certifica	ste Number				
					Se	earch					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured	Commence Date	Expiry Date
	0	5091785675- 01		FUTUREAIR ENGINEERING PTE LTD	201417824R	GFT	Comprehensive	GBE515G	GBE515G	21/06/2018	
					Cor	ntinue					

Policy No.	5091785675-01	Policyholder Name	FUTURE	AIR ENGINEERING PTE I	Policyholder NRIC	201417824	3
Certificate No.					Control of		
Address	15 YISHUN INDUSTRIAL STREE	T 1 #02-23 WI	IN 5 SING	APORE 768091			
Product	FLEET INSURANCE	Plan			Group		
Name	TEELT INSONANCE	riali			Policy Flag	N	
Policy ssue Date	19/06/2018	Effective Date	21/06/20	018 00:00	Expiry Date	20/06/2019	23:59
Excess Type		All Claims Excess					
Third Party Excess	0.00	Own damage Excess	600.00		Windscreen Excess	100.00	
Additional excess		OS Premium	0				
Outside Singapore OD Excess		Outside Singapore TP Excess				You	ng/Inexperience Driver Excess
Agent	ONG HUI SENG LIFE & GENERA	I Agent Tel.	6841090	00	GST Flag	Υ	
Co- insurance Flag Open Policy Info Certificate Info	No						
Policyl	holder Mailing Address						
Address 1	15 YISHUN INDUSTRIAL	STREE Addre	ess 2	#02-23 WIN 5		Address 3	SINGAPORE 768091
Address 4		Addre	ess Type	Singapore address		Post Code	768091
Unit No.	#03-538		ed Policy	5091785675-01			
D Incure	ed Object: GBE515G	Numb	per	3031703073-01			
I CONTRACTOR OF THE REAL							
♥ Endors	20119-51-50						
Sequer 1	05/10/2018 00:00	Endorseme Basic Informa Endorsement		Endorsement Numbe	Endorseme Effective	ent Take	Endorsement Content Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: CHASSIS NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. JN1MC2E26Z0030571 09-10-2018 \$837.99 In view of this amendment, an additional premium of \$837.99 (Inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque favour 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 or NETS.
			tion	000001286919091	Endorseme	nt Take	Thank you for giving us the opportunity to serve you. We confirm that from 09 Oct 2018, the following amendment(s) is/are

eterned Workshop Contact	07;05;2019 22:37 Jackson MT/1043420 ● Yes ○ No Peth *	Contraction of the Contraction o	DOI: 07/05/2019 22:38 Category *	Confidential Urgen	cy * Description *
eterned Workshop Contact (), spuine Finalisation ste Registered sport Taken By Print AK letter	NT/1043420	Claim No.	oor		
eterned Workshop Contact puppine Finalisation state Registered sport Taken By Print AK letter Attachment	Sackson	(4.5)			
warm Description of the Control Control squire Finalisation ate Registered eport Taken By d Print AK letter Attachment		Contraction of the Contraction o	Save Subma		
eferred Workshop Contect quire Finalisation te Registered port Taken By Print AK letter		Contraction of the Contraction o	Sere Submit		
terned Workshop Contact quire Finalisation te Registered port Taken By		Claim Close Serie	~~ 00000 a contra		
terred Workshop Contect pure Finalisation e Registered oort Taken By		Claim Close Date		000000000000000000000000000000000000000	
terred Workshop Contact pure Finalisation a Registered		Craim Cross Date		400000000000000000000000000000000000000	
ferred Workshop Contact	Control of the Contro	Claim Close Date		Date Received	07/05/2019 00:00
ferred Workshop Contact	Yes 🔍	Preference Repair Option	Preferred Workshop, Name unknown	GIA report	Received
		Insured Liability *	Not at Fault		
	GBE515G / GZ56SS ON 6 May 2019	100		Name of Preferred Workshop	
mant Address					
imant Name *	22	Cleiment NR3C *			
imant Type Claimant Type •	Please Select	Type of Benefit •	Please Select		-Active
ail Address		Ot Vehicle Number	GRES15G	TP Vehicle Number	GZ5655
ntact No.(Mobile)	97850900	Contact No.(Home)		Contact No.(Office)	NIL.
im Type +	OD-MX	Insured Name	FUTUREAIR ENGINEERING PTE	Insured NRIC	201417824R
Claim 001 New					
dification History					
sading?	2000	Any injury?	○ Yes ® No		
eathalyser or Blood Test	D mg	And Indian	O (D		
claration					
es he own a Singapore gistered car?	○ Yes ® No	Driver Vehicle No.		Driver Insurer Company	
it No.	02-23				
dress 4		Address Type	Singapore address	Post Code	768091
iress 1	L5 YISHUN INDUSTRIAL STREET	Address 2	WIN 5	Address 3	SINGAPORE 768091
rtact No.(Mobile)	97152799	Contact No. (Office)	0	Contact No. (Home)	0
later Date of Driver License	14/02/2014	Driver Age	31	Driving Experience	5
named driver Name	YONG FOO YOUNG	Oriver NRIC	G8062539T	Driver DOB	23/04/1988
ver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Ol Driver Info	#U3:438	Related Policy Number	5091785675-01		
ress 4	#03-538	Address Type	Singapore address	Post Code	768091
frest 1	15 YISHUN INDUSTRIAL STREE	Address 2	#02-23 WIN 5	Address 3	SINGAPORE 768091
Policyholder Mailing Ad				Wilders	all source and a second
dification History	D/141/D24K		GST Status Verified	Yes	
T Registered T Registration No.	Yes 201417824R		GST Registration Date	20/01/2016	
GST Registered Informa					
P Benefits	Secret				
hird Party Excess	0.00	Outside Singapore TP Excess			
nnamed Driver Excess		Outside Singapore OD Excess			
wn damage Excess	600,00	Additional Excess		Windscreen Excess	100.00
₽ Excess					
cident Location	YISHUN IND CARPARK	SUSTANDON.		(FR) (R)	
eporting Centre		Orange Force		ICM No.	Singapore
ite of Accident	06/05/2019	Time of Accident Inh:mm	19:00	Country of Acodent	Singapore
port Date	07/05/2019 22:36	Accident Report Within 24 hrs.	Yes	Accident Type	Damaged whilst parked
Accident Details	39	and the second second second	170	Private Hire	No
CD Protection	No.	NCD Entitlement(%)	® No ⊜Yes o	eCode Reason	464.7
K :	® No ○ Yes	Special Remark TCA	9 to 0 to	eCode	In v
sali Address	0	Contact No.(Office)	0	Contact No.(Home)	0
med worksome)	FLEET INSURANCE	Cover Type	Comprehensive	Loading	0
	FUTUREAIR ENGINEERING PTE LTD			Policyholder NR3C	201417824R
oduct Code	The second secon				
rtificate No. Rcyholder Name aduct Code mtact No. (Mobile)		Vehicle No.	GBE515G	GST Registration No.	201417824R

