NATIONAL Assessment Centre Services.	[wef & Jan'os] .	MA 41907117	6
Date In: 31 05 000 10 21 Jeb descript		Date & Time Completed	Done by
Rei No: NBA/ INC/900968 7/4 SAS C-11111			
DOC TOWN	hìn thes, AIC 2hrs)		1 /-
10-7	lalm Form	W110470920	01 . 31 05/5
I-Motor V	VO (Within: OD 2hrs, TP	4hrs)	16 47
OD TP Reporting Only			
Assessmen	/Survey Report		· ~.
11' Insurer:	t by Fax / Hand to O	wner/Wksp	
Proforred Wksp / INC Assign Wksp / QW: (the state of the s		Fax:
TP Particulars: Veh No: YN 36567	. INC()/Non-INC().	•
Owner driver: (Tel:)
Policy No: () Period: () C	over Type: ().
Confirmed by : (Date:	Times)
		P: 21-79%. P: 80-	100%]
Year of Registration: () Warranty: YES			
Excess: (\$) Loading: \$1,000 ()/\$2,0	00 ()	www.twr.transec	ARTIC TO THE
Company of the second of the s	enternative designation and the	annicas (participal)	NECOST PRODUCTION
() Walk-In Customer: Customer's information strictly () Total Loss Case : to e-mail Insurer URGENTL'			
		ing Co: (· , '	· ···
The control of the co	MOTO / 110W	STREET, CO.	* TANKET TO THE PARTY OF THE PA
Remarks and the confidence of	Physical Administration	机造物的现象对的外 等机	White House by
1) Apply for Transport Allowance ()/ Courtesy Car (?		•
2) QC Check / Post Repair Inspection (3) Upload Resurvey Photo [Repair Cost > \$3000] (·)		-,
)		
Injurý :	"		
Daller Date 2: A Grand San St.			MS/MSONTH-
			1 marine marine
1/0/00/00/2			Think visit
NA1904012	1) AR 1 Accident Repo	orting (330);	ASSESSMENT IN A MARIE
ditionite substitution (#150 - 150 -	2) DA I Damege Asse	sament (\$100); INC (\$2	0/545
river/Owner:	3) TF : Towing Fee 4) PT : Follow-Threat	h Survey	\$120
ontact No:	S) PT . Fullow-Through	h Survey (Resurvey) UNC Only (Wef 10 Jan 200)	\$30
rmäged Portion:	6) TR: Re-improtion		\$160
inagott rotuon.	7) N1 : Idau DA + SM 8) NTUC Additional S		
C Checked by (Engr-In-Charge):	Ont .		23
Constitution of Congression Constitution of Constitution of Congression of Congre	*N6: Repair Co-ord	instion	\$10 \$25
nditors Comments:	NS: DV / Collect I	lycess Coordination	23
();	TP (N11) : TP (No.	i INC) egalnat INC	30
: 2/3;	Involve dated	Per Charged Per Charged	CONTINUE DE LA CONTIN

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.
- 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

	ACCIDENT STATEMENT
Date Of Report	31/05/2019 16:21
Date Of Accident	30/05/2019 09:30
Exact Location Of Accident	ALONG ADAM ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC6605B
Insured/Policyholder	
Name Of Registered Owner	YIN CHU TRADING
Co Reg No	53139166C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96723580
Alternative Phone No	OFFICE-96723580
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350 PANEL VAN 5DR 2.5 5AT
Exact Purpose for which vehicle was being used at time of accident	
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	NO
Policy Number	5107619782
Cover Note Number	
Driver	

Name of Driver CHANG YIN KEONG

NRIC No S2691090J Date Of Birth 17/02/1960 Occupation OUTDOOR Date Of Driving Pass 03/01/1983

Driving Experience 36 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96723580

Fax Number

Contact Number OTHERS-96723580

EMail Address NOEMAIL

BLK 6 JALAN BATU Address

#09-173

Postcode 431006

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OWNER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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

NO

ambulance?

Was any other material or property damaged?

YES

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

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

YN3656T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

LI WEIMING

NRIC/Passport Number

G2270793R

Contact Number

85358864

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

CHANG YIN KEONG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address Postcode SLIGHT INJURY

GBC6605B

YES

NO

SKETCH PLAN

IMPORTANT NOTICE



- Please report <u>correctly</u> 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.
- 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

complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

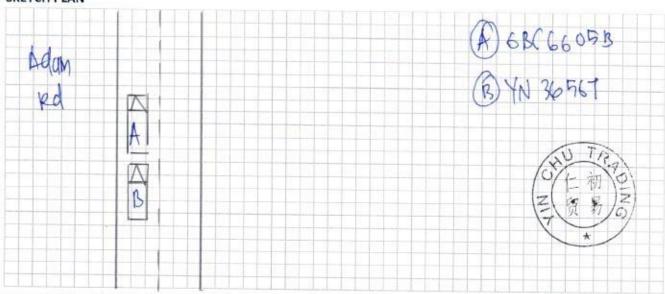
Driver's Signature

(If driver is not the policyholder)

Date & Time:

Name:

NRIC/FIN No .:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30-05.2019 at about 0950hr, I was framelling
alone Adam Road. Aread of me, Here's a vehicle slow down &
stop. I follow suit. While on stationary, all of a soulden of
felt an hard impact from the rear. Then I realised a long
IN 3656 had collided and my near. That's all.
(V TA
マーヤックラン ストランス 日 男 ア

DECLARATION

I/We declare the oregoing 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.:

Policy No.					
and the same of th	5107619782	Vehicle No.	GBCGG0SB	GST Registration No.	
ertificate No.				The second state of the se	
tilicyholder Name	YIN CHU TRADING			Participation Company	
roduct Code	COMMERCIAL VEHICLE INSURAR	Cover Type	Comprehensive	Policyhalder NRJC Loading	53139166C
arkect No.(Mobile)	96723580	Contact No.(Office)			0
mail Address		Special Remark		Contact No.(Home)	200
PK	* No Yes	TCA		eCode	No Y
ICD Protection	No	NCD Entitlement(%)	= No Yes	eCode Reason	
Accident Details		reco enodement(4e)	20	Private Hine	No
eport Date	31/05/2019 16:28				
ate of Accident		Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
	30/05/2019	Time of Accident tin:mm	09:30	Country of Accident	Singapore
eporting Centre		Drange Force		ICM No.	Zingapore.
coident Location	ALONG ADAM ROAD			0.700,000	
▼ Total Excess Applicable					
xcess Type	Per Accident	Windscreen Excess	50000		
		The state of the s	100.00		
D Standard Excess	800.DQ	TP Standard Excess	0.00		
ED OD Excess	0.00	YIED TP Excess			
dditional Excess			0.00	Driver is Coveres?	Covered
otal OD Excess Applicable	600.00	Total TP Excess Applicable			
♥ Benefits	400,00	Total IP excess Applicable	0,00		
▽ GST Registered Informat	ien				
T Registered					
T Registration No.	No		GST Registration Date		
dification History	31.05/30/0.16 41.40 5		GST Status Verified	Yes	
	30,40,2014 16,41,49 5	stem changed GST Status Verified from No	to Yes		
9 Religional des Marries Const	-				
Policyholder Hailing Add					
ddress 1	BLK 6 #09-173	Address 2	JALAN BATU	Address 3	SINGAPORE 431006
ddress 4		Address Type	Singapore address	Post Code	
Nt No.	09-173	Related Policy Number	5107619782	- day before	431006
OI Driver Info					
tver Name	Unnamed Driver	Driver Type	Unnamed Driver		
nnamed driver Name	CHANG YEN KEONS	Driver NRIC			
egister Date of Driver License	03/01/1983	Driver Age	\$2691090)	Driver DOB	17/02/1960
ontact No.(Mobile)		Sec. 1 (1980) (1980) (1980) (1980)	59	Oriving Experience	36
idress 1	War a was 125	Contact No.(Office)		Contact No.(Home)	
ddress 4	BLK 6 #09-173	Address 2	JALAN BATU	Address 3	DI TANJONG RHU
nit No.	SINGAPORE 431006	Address Type	Foreign address	Post Code	431006
nes he own a Singapore	09-173				
egistered car?	Yes + No	Driver Vehicle No.	GBC6605B	Driver Insurer Company	200
				arrest present company	NTUC
eclaration					
reakhalyser or Blood Test eading? odification History	0 mg	Any injury?	Yes + No		
eading?	0 mg	Any injury?	Yes + No		
ading? rdification History Claim 001 <u>New</u>	0 mg	Any injury?	00.000		
edification History Claim 001 Nex	0 mg	Any injury?	Yes + No	Insured VIN CHU TRADING	Insured 53139166C
edification History Claim 001 Nex	0 mg	Any injury?	OD-MX	Contact	Contact E31,39169C
edification History Claim 005 Nex Nex Nex No. (Mobile)	0 mg	Any injury?	00.000	Contact No. (Home)	NAIC Barrateer
edification History Claim 005 Nex Nex Nex No. (Mobile)	0 mg	Any injury?	OD-MX	Contact No. (Home)	NAIC B21,791696 Contact No. 63649837 (Office)
edification History Claim 001 Nex Birm Type * Pricact No. (Mobile) mail Address	0 mg	Any injury?	OD-MX	Contact No. (Home)	NA3C D3179(69) Contact No. 63649837 (Office) TP Vehicle YN3656T Number
edification History Claim 001 Nex Birm Type * Pricact No. (Mobile) mail Address	0 mg	Any injury?	GD-MX 96723580	Centact No. (Home) OI Vehicle 08cososa	No. Contact No. 63649837 Office TP Vehicle YN3656T Number Name of
edification History Claim 001 Nex aim Type * ontact No. (Mobile) mail Address aim Description eferred			GD-MX 96723580	Contact No. (Home) OI Vehicle Gacesosa Number	NA3C D3179(69) Contact No. 63649837 (Office) TP Vehicle YN3656T Number
coding? codification History Claim 001 New arm Type * arm Type * arm Address aim Description eferred orkshop Heidt No.	Insured Liability Not as F	out •	96723580 GBC56058 / YN3	Contact No. (Home) OI Vehicle Gacesosa Number	NNIC E3179(69)
edification History Claim 005 Nex Imm Type * Internal Address Imm Description eferred orising price of the control of the control orising price or the control orising the control orising the control original or the control or the co	Insured Liability	out •	GD-MX 96723580	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019	Contact No. (Office) TP Vehicle Number Name of Preferred
coling? colination History Colination History Colination Mexical arm Type * infact No.(Mobile) notification Description efferred prissing Page 100	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	96723580 GBC56058 / YN3	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim 7 Claim	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date
adification History Claim 00.5 Nex arm Type * Address arm Description eferred orishing finalit No. [Mobile] finalit No. [Yes te Registered	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	GD-MX 96723580 GBC66058 / YN3 4	Centact No. (Home) OI Vehicle GBC0605B Number 656T ON 30 May 2019	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop
dification History Claim 00\$ Nex Im Type * ritact No. (Mobile) hall Address Im Description eferred pricition finds No. (Mobile) resistation Yes te Registered	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	GBC56058 / YN3	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim 7 Claim	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date
dification History Claim 003 Nex Imm Type * ritact No. (Mobile) hall Address sim Description eferred prishop fination No. Yes silination te Registered port Taken By	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	GD-MX 96723580 GBC66058 / YN3 4	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim 7 Claim	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date
dification History Claim 003 Nex Imm Type * ritact No. (Mobile) hall Address sim Description eferred prishop fination No. Yes silination te Registered port Taken By	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	GD-MX 96723580 GBC66058 / YN3 4	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date
coling? Claim 003 Nex Imm Type * Infact No. (Mobile) Inall Address Imm Description efferred prishing finals No. Yes Interesting the New Interestin	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	GD-MX 96723580 GBC66058 / YN3 4	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop
eading?	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	00-MX 96723580 CBC66058 / YN3 V DL/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop
coding? Claim 001 New aim Type * ontact No. (Mobile) mall Address aim Description eferred orisish op Missist No. (Mobile) reflected orisish op altisation Yes with Registered port Taken By Print AK letter	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	GD-MX 96723580 GBC66058 / YN3 4	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop
coling? Claim 003 Nex Imm Type * Infact No. (Mobile) Inall Address Imm Description efferred prishing finals No. Yes Interesting the New Interestin	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	00-MX 96723580 CBC66058 / YN3 V DL/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop
coling? colination History Claim 001 Nex Interpolation History Interpolation (Mobile) Interpolati	Freferered Prepair Preferered Prepair	out Same uniques V GBA Research	00-MX 96723580 CBC66058 / YN3 V DL/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date
diffication History Claim 001 Nex If the content of the content	Prefere of V Prepair Prefered Workshop Option	out Resource Name uniquent V GBA Resource	00-MX 96723580 CBC66058 / YN3 V DL/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop
claim 001 Nex Claim 001 Nex If the control of the	Freferered Prepair Preferered Prepair	out Resource Name uniquent V GBA Resource	00-MX 96723580 08/266058 / YN3 Y 31/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop
sification History Claim 001 Nex Im Type * Intact No. (Mobile) Im Address Im Oescription Interest No. (Mobile) Intact No. (Mobile) Interest No. (Mobile) Intact No. (Mobile) Interest No. (Mobile) Inte	Prefere of V Prepair Prefered Workshop Option	wit GUA Name unknown GUA Received Claim No.	00-MX 96723580 08C66058 / YN3 V 31/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) OI Vehicle GBC6605B Number 656T ON 30 May 2019 Claim Close	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date
diffication History Claim 001 Nex Him Type * nfact No. (Mobile) Hall Address Him Description Eferred Print Address Print AK letter Attachment P Sident No.	Preferred United HT/1047092	wult GBA , Name unknown Toport Received	00-MX 96723580 CBC66058 / YN3 V 31/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) Of Vehicle Discososa Number Claim Claim Claim Close Date	Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date
diffication History Claim 001 Nex If Type * If Address If Address If Description If Type If Address If A	Preferred Workshop Preferred Workshop Coption Preferred Workshop Att/1047092	wit GUA Name unknown GUA Received Claim No.	GBC56058 / YN3 V 31/05/2019 16:47 Category Category	Contact No. (Home) Of Vehicle Discososa Number Claim Claim Claim Close Date	NNIC EDIFFICATION CONTACT NO. (Office) TP Vehicle Number Number Name of Preferred Workshop Date Received 31/05/2019 00
diffication History Claim 001 Nex If Type * If Address If Address If Description If Print AK letter Attachment If Doc. Received Choose File No file chosen	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	00-MX 96723580 CBC66058 / YN3 V 31/05/2019 16:4 ROSLI WAHAB	Contact No. (Home) Of Vehicle Nicososs Number 656T ON 30 May 2019 Claim 7 Claim Chose Date	NO. CONTACT NO. (Office) TP Vehicle Number Name of Preferred Workshop Date Received 31/05/2019 00
diffication History Claim 001 Next If Type * If Address If Address If Description If Address If	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	GBC56058 / YN3 V 31/05/2019 16:47 Category Category	Centact No. (Home) Of Vehicle Discososa Number Claim Close Date Confidencial Urger Y No Y Normal	NNIC EDIFFICACE Contact No. (Office) TP Vehicle Number Number Name of Preferred workshipp Date Received 3 M05/2019 00
claim 001 Nex Claim 001 Nex Interpretation (Mobile) Interpretation (Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590	Centact No. (Home) Of Vehicle Discososa Number Claims Close Date Y NO T Normal Y NO T Normal	NNIC EDIFFICACE Contact No. (Office) TP Vehicle Number Name of Preferred Workship Date Received 3:M05/2019 00 Preferred Type Type Type Type Type Type Type Type
coling? Claim 001 New Imm Type * Imm Ty	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC66058 / VN3 V 31/05/2019 16:47 ROSLI WAHAB DOI 31/05/2019 16:47 Categor Clear Please Select Please Select Please Select Please Select	Centact No. (Home) Of Vehicle Discososs Number Claim Close Date 7 Claim Close Date 7 NO 7 Normal 7 NO 7 Normal 7 NO 7 Normal	NAIC EDIFFICAC Contact No. (Office) TP Vehicle Number Number Name of Preferred Workshipp Date Beceived 31/05/2019 00
claim 001 Next Claim 001 Next Imm Type * Intact No. (Mobile) Intact	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC66058 / VN3 V BL/05/2019 16:47 ROSLI WAPAB D01 31/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select Clear Please Select	Centact No. (Home) Of Vehicle Discososa Number Claims Close Date Y NO T Normal Y NO T Normal	NAIC D21.91091.
edification History Claim 001 Nex Imm Type * Intact No. (Mobile) Intact No. (No. (Mobile) Intact No. (Mobile) Intact No. (No. (Mobile) Intact No. (Mobile) Intact No. (No. (Mobile) Intact No. (Mobile) Intact N	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC66058 / VN3 V 31/05/2019 16:47 ROSLI WAHAB DOI 31/05/2019 16:47 Categor Clear Please Select Please Select Please Select Please Select	Centact No. (Home) Of Vehicle Discososs Number Claim Close Date 7 Claim Close Date 7 NO 7 Normal 7 NO 7 Normal 7 NO 7 Normal	NRIC Contact No. (Office) TP Vehicle Number Name of Preferred Workship Date Racelved 3 M05/2019 00 Pescription * Description *
claim 001 Next Claim 001 Next Interest No. (Mobile) Interest No.	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC66058 / VN3 V BL/05/2019 16:47 ROSLI WAPAB D01 31/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select Clear Please Select	Centact No. (Normal No. (Normal No. (Normal Normal Normal Normal Normal Normal No. Normal No. Normal No. Normal No. Normal No.	NAIC DESCRIPTION Contact No. (Office) TP Vehicle VN3656T Number Name of Preferred workshop Date Received 31/05/2019 00
claim 001 Nex Claim 001 Nex Interpretation (Mobile) Interpretation (Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC66058 / VN3 V BL/05/2019 16:47 ROSLI WAHAB DOI 71/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select Clear Clear Please Select Clear Clear Please Select	Centact No. (Normal No. No. No. No. Normal No. Normal No. Normal No. No. Normal No. No	NAIC EDIFFICAC Contact No. (Office) TP Vehicle Number Name of Preferred workshop Date Received 31/05/2019 00 For the contact of the contact
claim 001 Next Claim 001 Next Imm Type * Intact No. (Mobile) Intact No. (Yes Intact No. (No. (No. (No. (No. (No. (No. (No.	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC66058 / VN3 V BL/05/2019 16:47 ROSLI WAHAB DOI 71/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select Clear Clear Please Select Clear Clear Please Select	Centact No. (Normal No. No. No. No. Normal No. Normal No. Normal No. No. Normal No. No	NNIC EDIFFICAC Contact No. (Office) TP Vehicle Number Name of Preferred workship Date Received 31/05/2019 00 TY
diffication History Claim 003 Nex Image: Im	Preferred Liability Not at F Repair Preferred Workshop Option MT/1047092 Yes No Path •	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC6605B / YN3 V 31/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select	Centact No. (Normal No. No. No. No. Normal No. Normal No. Normal No. No. Normal No. No	NNIC ESTRICTS Contact No. (Office) TP Vericia Number Name of Preferred workship Date Received 31/05/2019 00 TY
diffication History Claim 003 Next Image: Mark Image:	Preferred United HT/1047092	wit GUA Name unknown GUA Received Claim No.	OD-MX 96723590 OBC66058 / VN3 V BL/05/2019 16:47 ROSLI WAHAB DOI 71/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select Clear Clear Please Select Clear Clear Please Select	Centact No. (Normal No. No. No. No. Normal No. Normal No. Normal No. No. Normal No. No	NNIC DELEVISOR Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date Received 31/05/2019 00 TO THE TRANSPORT OF TRAN
in Type * Tract No. (Mobile) all Address Im Oescription Ifferred Print AK letter Attachment Print No. L Dos. Received Thoose File No file chosen Thoose File Th	Preferred Liability Not at F Repair Preferred Workshop Option HT/1047092 Yes No Path • Uploaded By/Oate	Category GBA Received Claim No. Upload Date	OD-MX 96723590 OBC6605B / YN3 V 31/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select	Centact No. (Normal No. Normal No. Normal Normal Normal Normal Normal Normal Normal No. No. Normal No. No. Normal No. Normal No. Normal No. Normal No. Normal No.	NAIC EDIFFICATION Contact No. (Office) TP Vehicle Number Name of Preferred Workship Date Received 31/05/2019 00 Poscription * T T T T T T T T T T T T T T T T T T
claim 001 Mem Claim 001 Mem Image = Intact No. (Mobile) Intact No. (Preferred Liability Not at F Repair Preferred Workshop Option MT/1047092 Yes No Path •	Category GBA Received Claim No. Upload Date	OD-MX 96723590 OBC6605B / YN3 V 31/05/2019 16:47 Categor Clear Please Select Clear Clear Please Select	Centact No. (Normal No. Normal No. Normal Normal Normal Normal Normal Normal Normal No. No. Normal No. No. Normal No. Normal No. Normal No. Normal No. Normal No.	NNIC EDIFFICION Contact No. (Office) TP Vehicle Number Name of Preferred Workshop Date Received 31/05/2019 00 TO TENTION OF TENTIO

File Name

Display in New Window Scan and uploading

MUC/ Driving License 2019-5-31

Source

Action

9

NAC_BURIT_MERAH_BEOGFG(NATIONAL ASSESSMENT CENTRE SERVICE | NRIC/ Driving License | S (BUKIT MERAH)) on 31 May 2019 16:47

Folder Date

Uploaded By/Date

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 30:05. 2019 TIME:	(hh:mm) 24 hrs Format
LOCATION AGAIN READ	
VEHICLE NUMBER 6BC 6605B	
INSURED NAME TIN CHI TRADING	
NRIC/FIN 53 39 660	CONTACT:
	Parel Van 5DR 2.55AT
Are you claiming under your own insurance policy for repair to	your vehicle?
() Yes, If No, Pls Select : (✓) Third Party () Rep	orting Only
INSURANCE COMPANY TUC	
TYPE OF POLICY () COMPREHENSIVE () THIS	RD PARTY () TPFT
POLICY NUMBER :	
NAME DRIVER: Chang In Keong	() SAME AS INSURED
NRIC/FIN \$ 26 9 090J	CONTACT: 14 0612 3580
DATE OF BIRTH: 17.02.960	
DRIVING PASS DATE: 05.01. 1993	
OCCUPATION: () INDOOR (V) OUTDOOR	
GENDER: (✓) MALE () FEMALE	
EMAIL ADDRESS:	() NO EMAIL
ADDRESS OF DRIVER: 6 Julan Batu \$69-173 b	Tanjont Rhu 5(431006)
Number Of Bassassas Include Date of 10051 0	
Number Of Passenger Include Driver: While only	
	G ₁
Was driver an amplace of the Lead I C	M.
the as indiced an employee of the inclination (commonly) () VE	E (NO
Was driver an employee of the Insured's Company? () YES	S (V) NO
If No, Relationship Of The Driver With The Insured	
If No, Relationship Of The Driver With The Insured (V) Owner () Spouse () Friend () Relative () Children () Sibling () Others
If No, Relationship Of The Driver With The Insured () Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES ()) Children () Sibling () Others NO
If No, Relationship Of The Driver With The Insured () Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle:) Children () Sibling () Others NO
If No, Relationship Of The Driver With The Insured () Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle: Insurance Company Of Driver's Own Vehicle) Children () Sibling () Others NO
If No, Relationship Of The Driver With The Insured () Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle: Insurance Company Of Driver's Own Vehicle Weather Conditions: () Clear () Raining () Children () Sibling () Others NO) Drizzling () Others
If No, Relationship Of The Driver With The Insured () Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle: Insurance Company Of Driver's Own Vehicle Weather Conditions: () Clear () Raining (Road Surface : () Dry () Wet ()) Children () Sibling () Others NO) Drizzling () Others Others
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO) Drizzling () Others Others) YES (V) NO
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO) Drizzling () Others Others
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO) Drizzling () Others Others) YES (V) NO
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO) Drizzling () Others Others) YES (V) NO
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO) Drizzling () Others Others) YES (V) NO
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO) Drizzling () Others Others) YES () NO) NO
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO) Drizzling () Others Others) YES () NO) NO
If No, Relationship Of The Driver With The Insured () Children () Sibling () Others NO Drizzling () Others Others) YES (V) NO) NO SS () NO
If No, Relationship Of The Driver With The Insured () Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle: Insurance Company Of Driver's Own Vehicle Weather Conditions: () Clear () Raining (Road Surface : () Dry () Wet () Was Any Foreign Vehicle Involved In This Accident? (Was Anybody Injured In The Accident? () YES () YES, Injured details: Convey By Ambulance: () YES () NO Was There Any Video Capture By Car Camera? () YES Police Report Number (if any) Details Of 3rd Party Name / NRIC) Children () Sibling () Others NO) Drizzling () Others Others) YES () NO) NO () NO If Yes Attach Police Report No.of Paxs (incl'driver) Contact
If No, Relationship Of The Driver With The Insured () Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle: Insurance Company Of Driver's Own Vehicle Weather Conditions: () Clear () Raining (Road Surface : () Dry () Wet () Was Any Foreign Vehicle Involved In This Accident? (Was Anybody Injured In The Accident? () YES If YES, Injured details: Convey By Ambulance: () YES () NO Was There Any Video Capture By Car Camera? () YES Police Report Number (if any) Details Of 3rd Party Name / NRIC Veh B 36567 Name / NRIC) Children () Sibling () Others NO Drizzling () Others Others) YES (
If No, Relationship Of The Driver With The Insured (Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle: Insurance Company Of Driver's Own Vehicle Weather Conditions: (Others Others Others Others Others) YES (\subseteq) NO) NO NO NO NO CS () NO (\subseteq) NO If Yes Attach Police Report No.of Paxs (incl'driver) (\subseteq) / Not Sure ()
If No, Relationship Of The Driver With The Insured (Others Others Others YES () NO) NO NO ONO ONO ONO ONO ONO
If No, Relationship Of The Driver With The Insured (Owner () Spouse () Friend () Relative (Does The Driver Own Any Other Vehicle? : () YES () If Yes, Vehicle Registration Number Of Driver's Own Vehicle: Insurance Company Of Driver's Own Vehicle Weather Conditions: () Clear () Raining (Road Surface : () Dry () Wet () Was Any Foreign Vehicle Involved In This Accident? (Was Anybody Injured In The Accident? () YES () If YES, Injured details: Convey By Ambulance: () YES () NO Was There Any Video Capture By Car Camera? () YES Police Report Number (if any) Details Of 3rd Party Name / NRIC Veh B	Others Others Others Others YES () NO) NO NO NO NO NO Solve of Paxs (incl'driver) () / Not Sure () () / Not Sure ()
If No, Relationship Of The Driver With The Insured (Others Others Others YES () NO) NO NO ONO ONO ONO ONO ONO

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$2691090J





CHANG YIN KEONG

CHINESE

Date of birth 17-02-1960

Country/Place of birth MALAYSIA

For LKK/NAC Use Only





22-07-2016

APT BLK 6 JALAN BATU #09-173 SINGAPORE 431006



For LKK/NAC Use Only





OTOR VEHICLES (THIRD PARTY RISKS	S AND COMPENSATION) ACT (CHAPTER 189)
TOTOR VEHICLES (THIRD PARTY RISKS	S AND COMPENSATION) RULES, 1960
THE PORT ACT 1007 (MALAY	SIAI
OAD TRANSPORT ACT, 1987 (MALE) NOTOR VEHICLES (THIRD PARTY RISK	S) RULES, 1959 (MALAYSIA) Cover : Comprehensive
ertificate Number: 5107619782	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
. Index mark and Registration Num	ber of Vehicle : To Be Advised
Chassis Number	
. Name of Policyholder 1	: YIN CHU TRADING
. Effective Date of Insurance	: 28 Feb 2019
Expiry Date of Insurance	: 27 Feb 2020
Persons or Classes of Persons ent	titled to drive#
(a) The Policyholder.	and the same of th
the American who is drive	ving on the Policyholder's order or with his/her permission. iving is permitted in accordance with the licensing or other laws or regulations to drive conso permitted and is not disqualified by order of a Court of Law or by reason of any
(b) Any other person dri	iving is permitted in accordance with the licensing of other law or by reason of any
the Motor Vehicle or has be	iving is permitted in accordance with the licensing or other laws or regarders of any seen so permitted and is not disqualified by order of a Court of Law or by reason of any that he half from driving the Motor Vehicle.
enactment or regulation in t	Olde Delicit Have a second of the second of
6. Limitations as to Use#	pleasure purposes and in connection with the Policyholder's business or profession.
(a) Use for social domestic and	pleasure purposes and in connection with the Policyholder's business.
(b) Use for the carriage of pass	engers or goods in connection with the Policyholder's business.
This Policy does not cover	
(a) Use for hire or reward.	g, reliability trial or speed-testing.
(b) Use for racing, pace-making	g, reliable of any one disabled mechanically propelled venicle.
the standing a trailor	r except the towing or any one organization
(c) Use whilst drawing a trailer	r except the towing of any one
(c) Use whilst drawing a trailer	r except the towing of any one and respect to the proper section.
(c) Use whilst drawing a trailer	r except the towing of any one and respect to the proper section.
# Limitations rendered inope Act (Chapter 189) and Sect	r except the towing of any one
(c) Use whilst drawing a trailer	r except the towing of any one and respect to the proper section.
 (c) Use whilst drawing a trailer # Limitations rendered inope Act (Chapter 189) and Sect headings. 	r except the towing of any one and respect to the proper section.
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1)	r except the towing of any one of the Motor Vehicle (Third Party Risks and Compensation) erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these
(c) Use whilst drawing a trailer # Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2)	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A - \$\$100
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : S\$600 : N/A : S\$100 : YES
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : S\$600 : N/A : S\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS
(c) Use whilst drawing a trailer # Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS cy to which this Certificate relates is issued in accordance with the provisions of the Motor ompensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS cy to which this Certificate relates is issued in accordance with the provisions of the Motor ompensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS cy to which this Certificate relates is issued in accordance with the provisions of the Motor ompensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS by to which this Certificate relates is issued in accordance with the provisions of the Motor compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) TIC INSURANCE AGENCY (00000573090) 2019 17:46 hrs
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS cy to which this Certificate relates is issued in accordance with the provisions of the Motor ompensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS by to which this Certificate relates is issued in accordance with the provisions of the Motor compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) TIC INSURANCE AGENCY (00000573090) 2019 17:46 hrs
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS by to which this Certificate relates is issued in accordance with the provisions of the Motor compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) TIC INSURANCE AGENCY (00000573090) 2019 17:46 hrs
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS by to which this Certificate relates is issued in accordance with the provisions of the Motor compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) TIC INSURANCE AGENCY (00000573090) 2019 17:46 hrs
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS by to which this Certificate relates is issued in accordance with the provisions of the Motor compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) TIC INSURANCE AGENCY (00000573090) 2019 17:46 hrs
# Limitations rendered inope Act (Chapter 189) and Sect headings. EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Polic Vehicles (Third Party Risks and Co	erative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) tion 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these : \$\$600 : N/A : \$\$100 : YES : TAN CHONG CREDIT PTE LTD : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS by to which this Certificate relates is issued in accordance with the provisions of the Motor Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) TIC INSURANCE AGENCY (00000573090) be 2019 17:46 hrs

Register New Vehicle (Acknowledgement) Vehicle Particulars

Vehicle No.:

GBC6605B

Vehicle Type:

A50 - Goods (Closed) Van/Van Panel

(Delivery)

Vehicle Attachment 1:

No Attachment

Vehicle Attachment 2: Vehicle Make:

NISSAN

Vehicle Attachment 3:

Vehicle Scheme:

NV350 PANEL VAN 5DR 2.5 5AT

Chassis No.:

JN1MC2E26Z0030942

Vehicle Model: Engine No.:

Motor No.:

Trailer Chassis No.:

YD25045007B

Propellant:

Diesel

Passenger Capacity:

Normal

Engine Capacity:

2488 cc

Power Rating:

2

Maximum Power Output:

1780 kg

Maximum Laden Weight:

3300 kg

Unladen Weight: Primary Colour:

Grey

Secondary Colour:

First Registration Date:

28 Feb 2019

Original Registration Date: 28 Feb 2019

Manufacturing Year:

2018

Open Market Value:

\$26,390.00

PARF Eligibility:

No

Minimum PARF Benefit:

\$0.00

No. of Transfers:

Additional Registration Fee

5.00%

Actual ARF Paid:

\$1,320.00

Owner Particulars

Owner Name:

YIN CHU TRADING

Owner ID Type:

Business

Owner ID:

53139166C

Private Residential (Condo Apt or House) /

Registered Address Type:

Shopping / Office Complexes

Registered Block/House No.:6

Registered Street Name:

JALAN BATU

Registered Unit No.:

09 - 173

Registered Building Name: DI TANJONG RHU

Registered Postal Code:

431006

COE No. / Expiry Date:

2019030105000067M / 27 Feb 2029

COE Bid Category:

C - Goods Vehicle & Bus

QP Paid:

\$26,378.00

Transaction Details

Business Transaction Ref.

20190228111015058325

Business Transaction Date: 28 Feb 2019

Business Transaction Time: 11:10:15

Message

The above vehicle has been successfully registered.

Please note that \$18,003.00 will be deducted from your GIRO account.

There will be a delay of notification delivery to the recipient due to need for validation with the source agency.