

NATIONAL Assessment Centre Services

[wef 1 Jan'05] **NA19090596**

Date In: 11/7/19-11:55	Job description	Date & Time Completed	Done by
Ref No: NA/INC19012644	SAS e-filing		
Veh No: SURV36R	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 10/7/19-07:55	i-Motor Claim Form	11/7/19 05:00	11/7/19 11:21
OD / TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: **1139807**

INC () / Non-INC ()

Owner / Driver: (

Tel:

Policy No: (

Period: (

Cover Type: (

Confirmed by: (

Date:

Time:

Insured/Driver Liability: (

%)

[Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]

Year of Registration: (

Warranty: YES (

)/ NO (

Excess: (\$

)

Loading: \$1,000 () / \$2,000 ()

General Remarks:-

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

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In (

) / Towed-In (

); Invoice: YES (

) / NO (

); Towing Co: (

Remarks:

(INC hotline: 6788 6616)

Date & Time Completed

Done by

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury:

Date/Time

Actions

NA190517

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Sat 1:

Sat 2 / 3:

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

In Bill

Add Bill

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

3) TF: Towing Fee \$40/\$45

4) FT: Follow-Through Survey \$120

5) FT: Follow-Through Survey (Resurvey) \$30

For claiming against INC Only (wef 10 Jan 2005)

6) TR: Re-inspection \$75

7) N1: Idac DA + SMRT Survey \$160

8) NTUC Additional Services:-

ON:

*N5: Courtesy Car / Tpt Allowance \$5

*N6: Repair Co-ordination \$10

*N7: Post Repair Inspection \$25

*N8: DV / Collect Excess Coordination \$5

TP (N11): TP (Non INC) against INC \$20

9) N12: Idac Mobile 30

Invoice dated

Fee Charged

Invoice dated

Fee Charged

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	11/07/2019 11:55
Date Of Accident	10/07/2019 07:55
Exact Location Of Accident	JURONG TOWN HALL RD TWDS WEST COAST RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK4136R
Insured/Policyholder	
Name Of Registered Owner	BENEFIT AUTO
Co Reg No	53121670E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	AUDI
Model	A1 SPORTBACK
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5082417995-02
Cover Note Number	

Driver

Name of Driver	TAN CHOON MEI (CHEN CHUNMEI)
NRIC No	S8015549B
Date Of Birth	11/05/1980
Occupation	OUTDOOR
Date Of Driving Pass	20/05/2005
Driving Experience	14 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-93670200
Fax Number	
Contact Number	OFFICE-93670200
Email Address	NOEMAIL

Address	BLK 368 BUKIT BATOK STREET 31 #12-479
Postcode	650368
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JTB9807 (MOTORCYCLE)
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	2
Passenger 1	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 92 BOON LAY WAY , POSTCODE: 609962 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8999999 - FAX NO: 66655791
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20190710/2026.

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	JTB9807
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN


IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the Insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

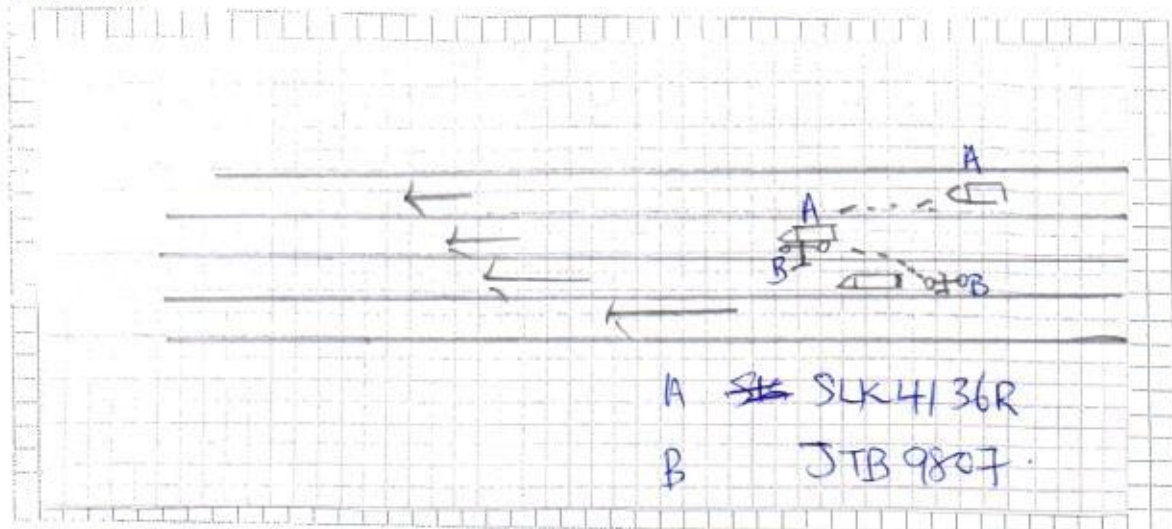
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


Policyholder's Signature
Date & Time: 


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


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten notes in the description area:

police report

DR per

DECLARATION

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

Policyholder's Signature
Date & Time:



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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

GLASMO SketchPad form V.3

2

** PLEASE EMAIL A COPY TO : WHEELSEXPRESSRENTAL@GMAIL.COM

VEHICLE NO: SLK 4136R

MAKE & MODEL: Audi A1

DATE OF ACCIDENT	10 / 07 / 2019	
TIME OF ACCIDENT	07:55 (AM/PM)	
LOCATION OF ACCIDENT	Jurong Town Hall Rd, west coast Rd.	
Exact Purpose use during accident		
NAME OF OWNER	BENEFIT Auto.	
TELP NO		
NRIC		
CLAIM TYPE	OD / THIRD PARTY / <u>Reporting Only</u>	
PRIVATE HIRE	<u>YES</u> / NO ?	
INSURANCE CO.	NTUC	
TYPE OF CAVERAGE	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft	
POLICY NO.	5082417995-02	
NAME OF DRIVER	As above / If No: TAN CHUAN MEI	
NRIC	S8015549B	Any passengers: one (male passenger)
DATE OF BIRTH	11 / 05 / 1980	
OCCUPATION	<u>Outdoor</u> / Indoor	
DATE OF DRIVING PASS	20 / 05 / 2005	
GENDER	Male / <u>Female</u>	
CONTACT NO.	93670200	Office: Home:
ADDRESS	368 Bukit Batok St 31 H12-479 (650368)	
DRIVER HAVE ANY OWN Vehicle	<u>NO</u> / If yes: Reg No:	
RELATIONSHIP	<u>Employee</u> / If No: Hire	
WEATHER CONDITION	<u>Clear</u> / Raining / Other:	
ROAD SURFACE	<u>Dry</u> / Wet / Other:	
ANY INJURIES	<u>No</u> / If yes: Who?	
CONTACT NO.		
POLICE REPORT	<u>No</u> / If yes: Where? Jurong EAST NPC	
VEHICLE B NO.	JTB 9807 Any Passenger: -	
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO	
PARTICULAR WORKSHOP	Sme Motor Pte Ltd	
TELP NO	1 Kaki Bukit ave 6 #02-15	
CONTACT PERSON	Autobay @ kaki bukit	
FAX NO.	Singapore 417883	
	Tel: 67476106 (6 lines)	
	6 Speed Autowerkz Pte Ltd	
	68 Kaki Bukit Avenue 6	
	#02-05 ARK @ KB, Singapore 417896	
	Tel: 6384 7037 Fax: 6384 7039	
	Email: 6speedautowerkz@gmail.com	



SINGAPORE POLICE FORCE



T/20190710/2026

1 of 3

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

Report No. T/20190710/2026

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/07/2019 09:12	Vide Report No.: D/20190710/0021	Station Diary No.: 32
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Informant's Particulars

Name of Informant: TAN CHOON MEI			Address: APT BLK 368 BUKIT BATOK STREET 31 #12-479 SINGAPORE 650368	
ID Type / ID No.: NRIC NO / S8015549B			Contact No.: Home/Office:	Mobile: 93670200
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 39	Date of Birth: 11/05/1980	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 10/07/2019 07:55	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 JURONG TOWN HALL ROAD WEST COAST ROAD Before Jurong East Ave 1 cross junction near lamppost 15				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JTB9807	Motorcycle	OTHERS		White	Slightly Damaged	1
SLK4136R	Car	AUDI	A1	Black	Slightly Damaged	1

Details of Person Involved

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



SINGAPORE POLICE FORCE



T/20190710/2026

2 of 3

Report No. T/20190710/2021

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

CONTINUATION OF REPORT

Rider			
Name	LEE SHI JING		ID No. G2667446N
Related Vehicle	JTB9807 (Motorcycle)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TAN CHOON MEI		ID No. S8015549B
Related Vehicle	SLK4136R (Car)		Contact No. 93670200
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3A Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/07/2019 at about 0755hrs, I was driving my vehicle (SLK4136R) along Jurong Town Hall road towards West Coast Road before the cross junction of Jurong East Avenue 1 on the most right lane. When I am about to change lane to the second lane, I signaled left and checked my blindspot and was clear thus I proceed to change the lane. Suddenly, I felt an impact on my left side and discovered that a Malaysian motorcycle (JTB9807) had hit my vehicle however the rider did not stopped thus I horned at him to alert him to stop. Subsequently, we stopped along the cross junction of Jurong Town Hall Road and Boon Lay Way.

The rider informed that I did signaled left. When I wanted to exchange particulars with him however he did not want to give me thus I called for the police.

I wish to add that there are scratches, dent and peeled at my vehicle's front left bumper. I also wish to add that we are not injured.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999



T/20190710/2026

3 of 3

Report No. T/20190710/2026

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report:

D /

Sgt 2 TEOH YI TING

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65472076

Signature Of Informant:

Date/Time:

10/07/2019 09:12

Classification Of Case:

Authentication Stamp
POLICE FORCE

SN 35

SIGNATURE

**BENEFIT AUTO**

ROC : 53121670E

OCBC CURRENT : 588-000604-001

PAY NOW UEN : 53121670E

61 Ubi Ave 2, Automobile Megamart, #05-04 Singapore 408898

CHEW 9060 3343 / MARK 9832 5030 / TEO 91076963

VEHICLE RENTAL & LEASING AGREEMENT

Hirer's Name : <u>Tan Chuan Mei (Chief Driver)</u>	
NRIC No: <u>80155491B</u>	Hirer's Contact No: <u>93670200</u>
License Pass Date: <u>20-5-2025</u>	Next of Kin Name & Contact No (In Case of Emergency):
Address: <u>BLK 461 Jurong West St 41 #04-656</u> (Singapore <u>640461</u>)	
Occupation / Office Address	(Singapore)
Vehicle Reg No: <u>SLK 4136A</u>	Make & Model: <u>AUDI A1</u>
Commencing Start Date: <u>2-7-2019</u>	Commencing End Date: <u>6 month</u>
Handover Time: <u>11:40 am</u>	Handover Time:
Rental Per Day/Week/Month: <u>weekly - \$400</u>	Deposit: <u>\$1,000</u>
Add Driver:	NRIC No:
License Pass Date:	Contact No:
Remarks:	

1. In the event Hirer decides to terminate the contract before the contract end date, deposit will NOT BE REFUNDED, ADDITIONAL PENALTY will be enforced upon 50% of the remaining outstanding rental.
2. In the event Hirer decided to cancel a reservation whereby a booking deposit is already been placed, there shall be NO REFUND on the deposit collected. Strictly no refund after deposit.
3. Failing to inform us of any existing scratches, dents & faults (if any) within 30 minutes after the collection of the vehicle, repair charges will incur when the vehicle is returned.
4. In the event that rental payment is not paid on expected date, at company discrepancy, we will tow the vehicle without notice. Belongings will NOT be kept.
Benefit Auto shall at no time be liable for the loss of belongings left in the vehicle.
5. Late payment of \$20 will be imposed per day due to any reasons if rental not received on rental due date.
6. Upon signing the contract, Hirer will be obliged to maintain the vehicle with due diligence at our respective workshop, failing to maintain the vehicle thereafter resulting in major faults, repair cost will be borne by the Hirer.

Hirer Bank Account Details :

1st Party Excess: \$3000	3rd Party Excess: \$3000	CDW: Y / N (additional \$3.21/day)
		CDW if yes, excess @ \$1,500

Signature of Hirer:

Signature of Authorized Person

LOCAL TOW SERVICE (24HRS) : 91828211
MALAYSIA TOW SERVICE (24HRS) : YONG - 016-704 7552 / 012-220 8076
TYRE & BATTERY SERVICE (24HRS) : AM KEE 98751699

BENEFIT AUTOCARE : ERIC 9489 4845 | 11 Kaki Bukit Raod 1 #01-02 Eunos Technolink (S415939)
LUSH AUTOMOTIVE : PATRICK 94357824 | 8 Kaki Bukit Ave 4, #03-47 Premier @ Kaki Bukit (S415875)
AIRCON : PATRICK 94357824 | Blk 3021A, Ubi Road 1, #01-39 (S408715)

REPUBLIC OF SINGAPORE DRIVING LICENCE

Automatic Number (NAC) S8015549B

TAN CHOON MEI
(CHEN CHUNMEI)

Birth Date: 11 May 1980
Issue Date: 20 May 2005

001342974K

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8015549B



Name
TAN CHOON MEI
(CHEN CHUNMEI)
陈春美

Race
CHINESE

Date of birth
11-05-1980

Sex
F

Country of birth
SINGAPORE

S8015549B

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3A Motor cars without clutch pedals =< 3000kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles without clutch pedals =< 2500 kg

PASS DATE
20 May 2005

Licence No: S8015549B

NP 428A

For LKK/NAC Use Only

4714170



NRIC No. S8015549B



Date of Issue
29-04-2011

APT BLK 368 BUKIT BATOK STREET 31 #12-479
SINGAPORE 650368

NRIC No: S8015549B Date: 11/02/2019

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5082417995-02 Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SLK4136R
Chassis Number : WAUZZZ8XXGB118622

2. Name of Policyholder : BENEFIT AUTO

3. Effective Date of Insurance : 14 Jul 2018

4. Expiry Date of Insurance : 13 Jul 2019

5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these Headings.

EXCESS (FIRST DRIVER)	: S\$2,000
EXCESS (REST OF VEHICLE)	: S\$1,500
EXCESS (REST OF PERSONS)	: S\$500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

Agency : BENEFIT AUTO INSURANCE AGENCY (00000573333)
Date of Issue : 03 Jul 2018 10:59 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text" value="5082417995-02"/>	Date of Accident	<input type="text" value="10/07/2019 07:55"/>
Vehicle No. (For Motor)	<input type="text" value="SLK4136R"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5082417995-02		BENEFIT AUTO	53121670E	GFT	drive CLASSIC	SLK4136R	SLK4136R	14/07/2018	
<input type="button" value="Continue"/>										

▼ Policy Information

Policy No.	5082417995-02	Policyholder Name	BENEFIT AUTO	Policyholder NRIC	53121670E
Certificate No.					
Address	2 SIMS CLOSE #01-08 GEMINI @ SIMS SINGAPORE 387298				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	03/07/2018	Effective Date	14/07/2018 00:00	Expiry Date	13/07/2019 23:59
Excess Type		All Claims Excess			
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00	Young/Inexperience Driver Excess	
Agent	BENEFIT AUTO INSURANCE AGÉ	Agent Tel.	64445313	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	2 SIMS CLOSE	Address 2	#01-08 GEMINI @ SIMS	Address 3	SINGAPORE 387298
Address 4		Address Type	Singapore address	Post Code	387298
Unit No.		Related Policy Number	5110923222		

▶ Insured Object: SLK4136R

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	14/07/2018 00:00	Basic Information Endorsement	000001286861050	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SKG1091M 14-07-2018 \$1,206.64 2. SLP3332X 14-07-2018 \$1,435.83 In view of this amendment, a refund of \$2,642.47 (inclusive of GST) will be adjusted against the outstanding premium.</p> <p>Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SJM7230U 25-09-2018 \$1,024.63 2. SKL1279M 25-09-2018 \$1,148.66 In view of this amendment, a refund of \$2,173.29 (inclusive of GST) will be adjusted against the outstanding premium.</p> <p>Thank you for giving us the opportunity to serve you. We confirm that from 30 Sep 2018, the following amendment(s) is/are made to this policy:</p> <p>Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this</p>
2	27/09/2018 00:00	Basic Information Endorsement	000001286911288	Endorsement Take Effective	
3	30/09/2018 00:00	Basic Information Endorsement	null	Underwriting Rejected	

Claim Handling

Accident MT/1052905

Exit

Policy No.	S082417995-02	Vehicle No.	SLK4136R	GST Registration No.	
Certificate No.					
Policyholder Name	BENEFIT AUTO			Policyholder NRIC	53121670E
Product Code	FLEET INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	0	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	12
KPK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

Accident Details

Report Date	11/07/2019 12:08	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Change / Cross lane
Date of Accident	10/07/2019	Time of Accident (h:mm)	07:55	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JURONG TOWN HALL RD TWO'S WEST COAST RD				

Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OO Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	2 SIMS CLOSE	Address 2	#01-08 GEMINI @ SIMS	Address 3	SINGAPORE 387298
Address 4		Address Type	Singapore address	Post Code	387298
Unit No.		Related Policy Number	5110923222		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	11/05/1980
Unnamed driver Name	TAN CHON MEI (CHEN CHUNG)	Driver NRIC	S8015549B	Driving Experience	14
Register Date of Driver License	20/05/2005	Driver Age	39	Contact No.(Home)	0
Contact No.(Mobile)	93670200	Contact No.(Office)	0	Address 3	SINGAPORE 650368
Address 1	SLK 368	Address 2	BUKIT BATOK STREET 31	Post Code	650368
Address 4		Address Type	Singapore address		
Unit No.	12-479				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001 New

Claim Type *	DO-MX	Insured Name	BENEFIT AUTO	Insured NRIC	53121670E
Contact No.(Mobile)	94247885	Contact No.(Home)		Contact No.(Office)	64445913
Email Address	JOBENEFITAUTO@GMAIL.COM	OI Vehicle Number	SLK4136R	TP Vehicle Number	JTB9807
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SLK4136R / JTB9807 ON 10 Jul 2019				
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	G3A report	Received
Date Registered	11/07/2019 12:09	Claim Close Date		Date Received	11/07/2019 00:00
Report Taken By	Jackson				

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1052905	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	11/07/2019 12:10

Path *

Browse...	Clear	Category *	Confidential	Urgency *	Description *
Browse...	Clear	Please Select	NO	Normal	
Browse...	Clear	Please Select	NO	Normal	
Browse...	Clear	Please Select	NO	Normal	
	Clear	Please Select	NO	Normal	

Browse...

Browse...

Browse...

Clear
Please Select

10
Normal

Clear
Please Select

10
Normal

☐ Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	NRJC/ Driving License	Normal	NRJC/ Driving License 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	SAS	Normal	SAS 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 11 Jul 2019 12:10	Photos	Normal	Photos 2019-7-11		Edit

Video List

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