. p/1 il 1 /7" [well | Jari05] NATIONAL Assessment Centre Services. Done by Date &Time Completed Date In: Jeb description SAS c-filling E-mail (Sidin ther, AlC thes) 16:00 I-Motor Claim Form DOA I-Motor W/O (Within: OD 2hrs, TP 4hrs) OD TP & Reporting Only I-Photo Uploaded Assessment/Survey Report TP Insurer: Ass't Report by Fax / Hand to Owner/Whan Faxt Tol Proformed Wksp / INC Assign Wksp / QW: ()/Non-INC(INC () TP Particuliers: Veh No: Owner / Driver: (Tcl: Policy No: (Cover Type: (Period: (Confirmed by : (Times Dates %) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%] Insured/Driver Liability: (Warranty: YES (Year of Registration: ()/NO(Execss: (\$ Loading: \$1,000 ()/\$2,000 (Concentration of the contration of the contratio) Walle-In Cuscomer: Customer's Information strictly Confidential & Strictly NO refer of repairer.) Total Loss Case : to e-mail Insurer URGENTLY.) ; Towing Co: Drive-In ()/ Towed-In (); Invoice: YES () / NO (1) Apply for Transport Allowance () / Courtesy Car (2) QC Check / Post Repair Inspection .) 3) Uplond Resurvey Photo [Repair Cost > \$3000] Injury : Dure Cing & Action 1) AR 1 Academ Reporting (\$30); 2) DA 1 Dames Assessment (\$100) \$40/\$45 3) TF 1 Towing Fee \$120 Driver/Owner: 4) PT : Follow-Through Survey 3) PT : Pullow-Through Survey (Resurvey) 330 Por glaiming against ING Only (waf 10 Jan 200) Contact No: 6) TR : Ra-laspestion \$160 7) NI : Idao DA + SMRT Survey Darnaged Portion: 1) NTUC Additional Services:-On: 22 *NS: Courtery Car / Tpl Allowance QC Checked by (Engr-In-Charge): 510 *No: Rapels Co-ordination \$25 *N/ Foat Repair Inspection *No: DV / Collect Excess Coordination 33 Auditors Comments TP (NII): TP (Non INC) against 1946 320 9) N121 Idao Mobile STATE THE Cat. It Per Charge Involve dated Fee Charged 1 2/3 Involce dated

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.

By the lodgement of this report to the insurers, you hereby consideresaid.	sent to the archiving of this report at the centre and to copies of the report being made available
tel i capiti inconstato en la la	ACCIDENT STATEMENT
Date Of Report	13/07/2019 12:51
Date Of Accident	12/07/2019 16:00
Exact Location Of Accident	REDHILL ROAD TOWARDS TIONG BAHRU ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLR6466M
Insured/Policyholder	A THE RESIDENCE OF THE PARTY OF
Name Of Registered Owner	RICKY GIAM TEE HOCK
NRIC No	S1682163B
Email Address	RICKYGIAM88@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81895511
Alternative Phone No	OTHERS-97816636
Vehicle Particulars	
Manufacturer	KIA
Model	NIRO HYBRID-1.6 (A)
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

REPORTING ONLY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5108113172

Cover Note Number

Driver

Name of Driver RICKY GIAM TEE HOCK

NRIC No S1682163B Date Of Birth 24/07/1965 Occupation OUTDOOR Date Of Driving Pass 14/01/1986

Driving Experience 33 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81895511

Fax Number

Contact Number OTHERS-97816636

EMail Address RICKYGIAM88@GMAIL.COM Address

BLK 118A JALAN MEMBINA

#25-139

Postcode

161118

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

YES

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?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

YP540C

Vehicle Make/Model/Colour

MITSUBISHI FUSO

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

PITCHAIKKANNU THUYAVAN

NRIC/Passport Number

S8279221Z

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.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Pers

Name:

NRIC/FIN No.:

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

and the state of the Added to
At 1600hrs driving along Red hill (EWIB) on 12/07/2019 toward
Tiong Bahry Road. I was on the right lane and the lorny was
at the left lane. The larry came close to my left of my
car and I try to hom him. I try to move toward might a bit
and there is incoming traffic. I heard a bank sound and
the lorry hit my left nurror. The lorry number plate was
YP 540'C and was carry goods. The lorry did not had any
damage.

DECLARATION

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

Policyholder's Signature

7/2019

Driver's Signature

(If driver is not the policyholder)

1545hrs

Name:

NRIC/FIN No.:

Reporting Centre Personnel's Agnatus

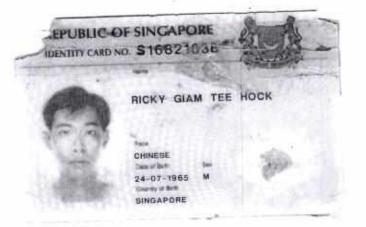
Claim Handling

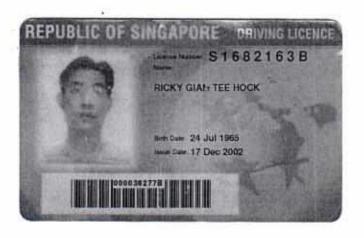
ccident MT/1053219						
olicy No.	5108113172	Vehicle No.	SLR6466M		GST Registr	ation No.
ertificate No.						
olicyholder Name	GIAM TEE HOCK RICKY				Policyholder	NRIC
mduct Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	
Contact No.(Mobile)	81895511	Contact No.(Office)			Contact No.	(Home)
mail Address	CAPTORNAL:	Special Remark			eCode	
CFK.	« No Yes	TCA	a No Yes		eCode Reas	on
ICB Protection	No	NCD Entitlement(%)	0		Private Hire	
▼ Accident Details						
leport Date	13/07/2019 13:02	Accident Report Within 24 hrs	Yes		Accident Ty	pe
Date of Accident		Time of Accident hhimm	16:00		Country of	Accident
	12/07/2019	Orange Force			ICM No.	
Reporting Centre	COLUMN TO AN ADMINISTRATION OF THE PARTY OF	Grange ruice				
Accident Location	REDHILL ROAD TOWARDS TIONG BAHRU ROAD					
▼ Total Excess Applicable	AND ANDROSE	Windstein France		100.00		
Excess Type	Per Accident	Windscreen Excess		100,00		
DD Standard Excess	2,000,00	TP Standard Excess		1,500.00		
VIED OD Excess	0.00	YIED TP Excess		0.00	Driver is Co	overed?
Additional Excess	0					
Total OD Excess Applicable	2000.00	Total TP Excess Applicable		1,500.00		
▽ Benefits						
	ion					
GST Registered	No		GST Registr	ration Date		
75T Registration No.			GST Status		29	res .
Modification History						
Policyholder Mailing Add	THE RESERVE OF THE PERSON OF T	2022-2021-0-40	NAME OF THE PARTY AND ADDRESS OF THE PARTY AND		Address T	
Address 1	BLK 118A #25-139	Address 2	JALAN MEMBINA		Address 3	
Address 4	SINGAPORE 161118	Address Type	Singapore address		Post Code	
Unit Na.	25-139	Related Policy Number	5108113172			
⇒ 01 Driver Info	STATE STATE OF STATE STATE OF	Elitaria Elitaria	-10-1 We 122 WA 14-16			
Driver Name	RICKY GIAM TEE HOCK	Driver Type	Main Driver		22/20/20/20 (20/20/20/20/20/20/20/20/20/20/20/20/20/2	415
Unnamed driver Name		Driver NR3C	S16821638		Driver DOS	
Register Date of Driver License	14/01/1986	Driver Age	53		Driving Ex	
Contact No.(Mabile)	9781663fi	Contact No.(Office)			Contact No	(Home
Address 1	BLK 118A #25-139	Address 2	JALAN MEMBINA		Address 3	
Address 4	SINGAPORE 161118	Address Type	Singapore address		Post Code	
Unit No.	25-139					
Does he own a Singagore Registered car?	Yes * No	Driver Vehicle No.	5LR6466M		Driver Inst	urer Con
SCHOOLS THAY						
Declaration						
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes a No			
Modification History						
STATE OF THE STATE						
Claim 001 New						
China Timore				Tan un	▼ Insured	Grau 7
Claim Type •				OD-MX	Name Contact	GIAM T
Contact No.(Mobile)				97816636	No.	627112
				11	(Home)	15
Email Address					Vehicle Number	5LR64
Claim Description				SLR5466M / YPS40C ON	12 Jul 2019	
Preferred	FEETINGS (1025)0EV.					
	Profesered Liability Not at Fault Profesered Preferred Workshop, Nam	te unknown * GIA Receive	ed •	1		

ACCIDENT STATEMENT

ACCIDENT DATE: 12 07 2019 JOD/MM/YYY), TIME: (1600 hrs)(HH:MM)
LOCATION: EW18 Redhill Road toward Trong Bahry Road.
I. DETAILS OF VEHICLE GIVEHICLE NUMBER: SLR 6466M DINSURANCE COMPANY: INCOME CIPOLICY NUMBER: 5108 113 172
BIMAYE & HODE
9) VEHICLE CATEGORY (PRIVATE (SOUNDERY / MOTORCYCLE / OTHERS)
IF NO. PLEASE STATE UNDER YOUR OWN INSURANCE (YES/NO)
ANAME: GEAM TEE HOLK RICKY
DINRIC/FIN/PASSPORT: S1682163/B CONTACT: 8189 5511/9781663
WHO of passongs DRIVER DRIVER ALSO POLICY HOLDER
(Including driver) a) NAME: 18. ABOVA (MALE / FEMALE) C) ADDRESS: CONTACT: CONTACT:
ODATE OF BIRTH: (24 107) (DD/MM/YYY) 1965: ODOCUPATION: (INDOOR / OUTDOOR) ODATE OF DRIVING PASC
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:
b)ROAD SURFACE: (DRY / WET / OTHERS Dry . 6. WAS ANYBODY INJURED (YES ANO) 7. a) REPORTED TO POLICE (YES /NO)
8. THIRD PARTY VEHICLE
() DRIVER'S NAME: PITCHAIKKANNU THU YAVAN
No of passanger d) VEHICLE NUMBER:
Including driver) () DRIVER'S NAME:
email = rickygiam 88@gmail-com.

VIDEO











Certificate of Insurance

MOTOR VEHICLES	(THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES	(THIRD PARTY RISKS AND COMPENSATION) RULES, 1950
ROAD TRANSPORT	ACT; 1987 (MALAYSIA)
MOTOR VEHICLES.	THURS BARTY RIEVEL BUILDE TOER INANIAVEIAL

Michally Activered Litting Educationals	JOSES 1535 (DOMENISTA)	
Certificate Number: 5108113172	Cover :	drive CLASSIC

Printenea	Linitian microsch	Company of the Company	

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

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.

: SLR6466M

: 12 Mar 2019

: 11 Mar 2020

1 KNACCS1CVJ5096593

GIAM TEE HOCK RICKY

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 (SECTION 1)	: \$\$2,000
EXCESS (SECTION 2)	: \$\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
BEELIN AN ALLENS AN ALLENS AN ALLENS AND ALL	

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE : YES NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO EXCESS WAIVER : NO

PRIMARY DRIVER : RICKY GIAM TEE HOCK

NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY : N/A

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

: ASSURE PTE. LTD. (00000572842)

Date of Issue

: 11 Mar 2019 16:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Authorised Officer

Chief Executive

Countersigned By:

Please check that the owner and vehicle details are correct:

1.	Name	: RICKY GIAM TEE HOCK
2.	Identification No. Type	: Singapore NRIC
3.	Identification No.	: S1682163B
4.	Country/Region	1-
5.	Vehicle Registration No.	: SLR6466M
6.	Previous Vehicle Registration No.	1-
7.	Effective Date of Ownership	; 22 Mar 2019
8.	Original Registration Date	: 23 Aug 2017
9.	First Registration Date	: 23 Aug 2017
10.	Vehicle Type	: P11 - Passenger Station Wagon/Jeep/Land Rover
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: With Sun Roof
13.	Attachment 2	1-
14.	Attachment 3	17
15.	Vehicle Make	: KIA
16.	Vehicle Model	: NIRO HYBRID 1.6 GDI DCT SUNROOF
17.	Year of Manufacture	: 2017
18.	Primary Colour	: Blue
19.	Secondary Colour	2*
20.	Passenger Capacity	: 4
21.	Chassis/Trailer Chassis No.	: KNACC81CVJ5096593 / -
22.	Propellant	: Petrol-Electric
23.	Engine No./Motor No.	: G4LEHS216286 / HM03H6N230HJ
24.	Engine Capacity(cc)/Power Rating(kW)	: 1580 / 32.0
25.	Maximum Power Output(kW/bhp)	: 103.6 / 138
26.	Unladen Weight(kg)	: 1425
27.	Maximum Laden Weight(kg)	: 1930
28.	Open Market Value	: \$27,110.00
29,	PARF Eligibility	: Yes
30.	PARF Eligibility Expiry Date	: 22 Aug 2027
31.	Minimum PARF Benefit	: \$2,500.00
	No. of Transfers	: 1