

NATIONAL Assessment Centre Services (w/et 1 Jan 2011) MAH/1903388			
Date In: 06/08/2019 17:52	Job description	Date & Time Completed	Done by
Ref No: MAH/1903388/1	SAS e-filing		
Veh No: FRK 7691C	E-mail (within 4hrs, AIG 2hrs)		
D.O.A: 05/08/2019 15:00	I-Motor Claim Form	MAH/1056758-001	18:09
☒ TP : Reporting Only	I-Motor W/O (Within 48 hrs, TP 4hrs)		06/08/2019
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner / Whse		

Preferred Wksp / MNC Assign Wksp / QW: ()		Tel: ()	Fax: ()
TP Particulars:	Veh No: GBC 1876.7	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% F: 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

NA2003706	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Customer Particulars:	1) AR: Accident Reporting (\$30)			
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC (\$80)		
Contact No:	3) TP: Towing Fee	\$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey	\$120		
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey)	\$30		
Auditors' Comments:	Excludes repair (INC Only) (w/ 10 Jan 2019)			
Cal. J:	6) TR: Its Inspection	\$75		
	7) N1: Idnu DA + SMRT Survey	\$160		
	8) NTUC Additional Services:			
	9) N12: Idnu Mobile	\$30		
	* N3: Courtesy Car / Tpt Allowance	\$5		
	* N6: Repair Coordination	\$10		
	* N7: Post Repair Inspection	\$25		
	* N8: DV / Collect Excess Coordination	\$5		
	* TP (N11) : TP (N-in INC) against INC	\$20		

Inv. 2/3:	Invoice date:	Pen Charged
1/1	Invoice date:	Pen Charged

07-MAY-2018 16:38

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	06/08/2019 17:52
Date Of Accident	05/08/2019 15:00
Exact Location Of Accident	SGH (WILSON CARPARK NEAR BLK 4)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK7691C
Insured/Policyholder	
Name Of Registered Owner	DAX KALDIP SINGH
NRIC No	S1853987Z
Email Address	DAXBANTO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81137345
Alternative Phone No	OTHERS-81137345

Vehicle Particulars

Manufacturer	PIAGGIO
Model	MP3 YOURBAN LT 300 IE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	MOTORCYCLE
------------------	------------

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5087052261-02
Cover Note Number	

Driver

Name of Driver	DAX KALDIP SINGH
NRIC No	S1853987Z
Date Of Birth	23/11/1960
Occupation	OUTDOOR
Date Of Driving Pass	09/07/1979
Driving Experience	40 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81137345
Fax Number	
Contact Number	OTHERS-81137345
Email Address	DAXBANTO@GMAIL.COM

Address	BLK 56 JALAN MA'MOR #01-16
Postcode	320056
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) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBC1876T
Vehicle Make/Model/Colour	TOYOTA HIACE
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NASIR BIN HASSAN
NRIC/Passport Number	S7838775J
Contact Number	86616031
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

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: 6-MAR-2019
1700

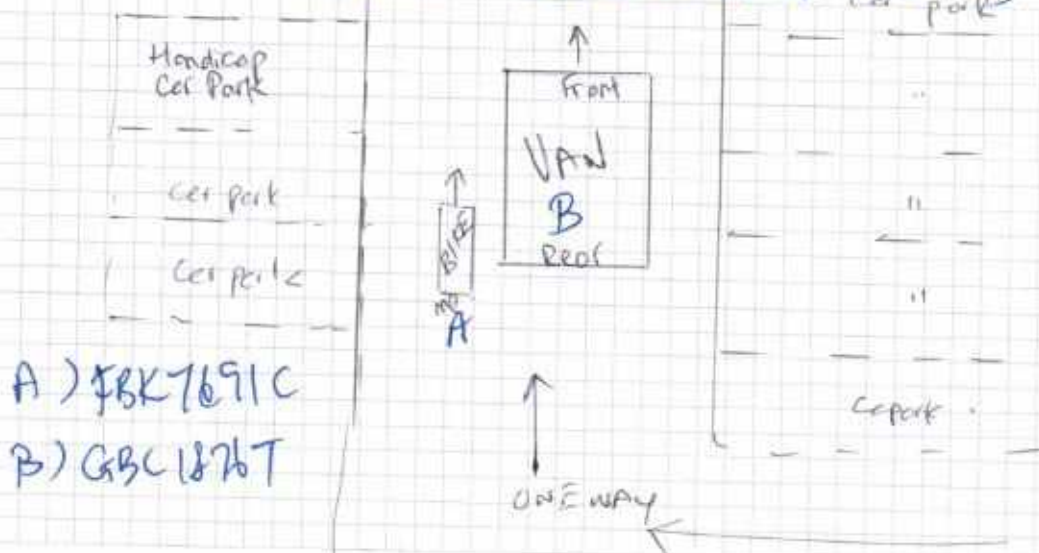
Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:

SGH (WILSON CARPARK MAR BLK 4)



WHILE I WAS ^{NEAR} STATIONERY, THE VAN WHICH ALSO NEAR TO STATIONERY SUDDENLY TURNED TO LEFT IN FRONT OF ME AND SANDWICHED MY BIKE. I TOOK SOME AVOIDING ACTION BY GOING LEFT BUT IT WAS INADEQUATE AS I WAS NEAR STATIONERY SPEED.

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

Date & Time: 6. Aug. 2019
1200

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

Claim Handling

Accident HT/1056758

Policy No.	8087152261-02	Vehicle No.	PBK7691C	GST Registration No.	
Certificate No.					
Policyholder Name	DAX KALDIP SINGH	Cover Type	Comprehensive	Policyholder NRIC	S16539672
Product Code	MOTORCYCLE INSURANCE	Contact No.(Office)		Leading	0
Contact No.(Mobile)	81137345	(Special Remark)		Contact No.(Home)	
Email Address		TCA	- No Yes	eCode	No *
KTR	- No Yes	RCD Entitlement(N)	20	eCode Reason	
RCD Protection	No			Private hire	No
Accident Details					
Report Date	04/08/2019 18:07	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	05/08/2019	Time of Accident (mm)	15:00	Country of Accident	Singapore
Reporting Centre		Damage Force		ICR No.	
Accident Location	SGH (WILSON DRIVE NEAR BLK 4)				
Excess					
Own damage Excess	500.00	Additional Excess		Windscreen Excess	
Uninsured Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	BLK 56 #01-18	Address 2	JALAN HAYHOB	Address 3	SINGAPORE 220056
Address 4		Address Type	Singapore address	Post Code	320056
Unit No.		Related Policy Number	8087052261-02		
Q1 Driver Info					
Driver Name	DAX KALDIP SINGH	Driver Type	Main Driver	Driver DOB	23/11/1980
Uninsured driver Name		Driver NRIC	S16539672	Driving Experience	8
Register Date of Driver License	05/01/2018	Driver Age	38	Contact No.(Home)	
Contact No.(Mobile)	81137345	Contact No.(Office)		Address 1	SINGAPORE 320056
Address 1	BLK 56 #01-18	Address 2	JALAN HAYHOB	Post Code	320056
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	PBK7691C	Driver Insurer Company	NTUC
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes - No		
Modification History					

Claim 001 New

Claim Type *	OD-ND	Insured Name	DAX KALDIP SINGH	Insured NRIC	S16539672
Contact No.(Mobile)	81137345	Contact No.(Home)	87281071	Contact No.(Office)	+81137345
Email Address	slaxingh@icmfub.net.sg	Q1		IC	
Claim Description	PBK7691C / GBC1876T ON 5 Aug 2019	Vehicle Number	PBK7691C	Vehicle Number	GBC1876T
Preferred Workshop	81237469	Insured Liability	Not at Fault	Name of Preferred Workshop	LEONG BEING TRADING
Repair Option	Yes	Preferred Workshop (refer Delay)			
Date Registered		GIA report	Received		
Report Taken By		05/08/2019 18:07	Cash Close Date		Date Received
		BOSLI WAHAB			05/08/2019 00:00
Print AK letter					
OD Excess Collected by Workshop					
Save Submit					

Attachment

Accident No.	HT/1056758	Claim No.	001
Last Doc. Received	* Yes No	Upload Date	05/08/2019 18:08
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Description *	
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			
Attachment List			
Attachment	Uploaded By/Date	Category	Urgency
		Photos	Normal
		Photos	Normal
		Photos	Normal

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:09	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:09	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:08	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:07	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:07	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:07	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:07	Photos	Normal	Photos 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:07	SAS	Normal	SAS 2019-8-6
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Aug 2019 18:07	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-8-6
Video List				
Uploaded By/Date	Folder Date	File Name	Source	Action
Display in New Window Scan and uploading				

ASSIGNMENT (IDAC)**By CSO- Nature of Accident:****1) Vehicle hit Vehicle:**

a) Motorcar ()

b) M/cycle ()

c) Bicycle ()

2) Vehicle hit ??

a) Pedestrian ()

b) Animal ()

3) Vehicle hit Road Side Objects:a) Govn. Property ()
(Eg: signboard, barrier, tree etc)

b) Road Work Object ()

c) Private Property ()

4) Vehicle drop into drain ()**5) Damage due to Act of God:**

a) Fallen Object ()

b) Flood ()

c) Other: _____

6) Parked & Found Damaged:

a) Vandalism ()

b) Hit by Moving Object ()

7) Theft Case

a) Stolen ()

b) Damage found ()
when recovered.**8) Fire**

a) Whilst driving ()

b) Parked ()

9) Accident date more than 24hrs ()**Remarks for internal information****Remarks to appear in Works Order & Assessment report**

1) Potential Total Loss ()

2) SRS Light on ()

3) ABS Light on ()

By Assessor- 1) Vehicle InformationVeh No: PKK 7681C Yr Regn: JAN 2016Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV
/ Truck / Trailer orMake & Model: HAGGIO MP3 Year: 2008Colour: BLACK Transmission Type: Auto / ManualEng/No: M712M10/2449 Sp. Reading: 26003C/No: ZAPM7510000010100

Gen. Cond: Good / Fair / Poor / Burnt or

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: NH / S/Rim / STD A/Rim orTyre Size: F: 110/70-13R: 110/70-13

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. mmParallel Import: Yes / No Towed-In: Yes / NoRepair Type: LS / I.B.I Towing Required: Yes / NoNo of Repair Days: Vehicle in Idac: Yes / NoD.O.I. 07/08/2012 Time: 1000**By Assessor- 2) Comments**

1) Damages not due to recent accident.

2) Damages do not seem hit onto:

a. Vehicle () b. Motorcycle () c. Bicycle () d. Pedestrian ()

e. Animal () f. Govn Object () g. Road Work Object ()

h. Private Property () i. Drain () j. Road Kerb/Grass Verge ()

3) Vehicle does not seem damaged as a result of:

a. Fallen Object () b. Flood () c. Vandalism () d. Fire ()

e. Moving Object () f. Stolen () g. Stolen & Recovered ()

Time Started:

Time completed:

1) CSO

2) ASS

3) Final Operation Completed Time

Original Copy

Condition (CON)

(01)Bent (02)Dented (03)Distorted (04)Cracked (05)Cut (06)Scratched
(07)Deformed (08)Shipped (09)Buckled (10)Broken (11)Necessary
(12)Missing (13)Tom (14)Unconfirmed (15)Not Working

FOR MOTORCYCLE

ACTION (AC)

1. Replace (✓) 1 2. Repair (X) 3. Check (?)
4. Not Consistent (NC)

May 2005

Motorcycle

NAC	INC	Item	CON	AC	Qty
1001	991886	Front Number Plate			
3001	995065	Front Tyre		2	2
3002	995095	Front Rim		2	2
3003	994872	Front Tyre Rim Spoke			
3004	991771	Front Fender Wheel Guard	SCR	✓	2
3005	991283	Front Brake Disc	DIS	✓	1
3006	991281	Front Brake Caliper	DIS	✓	1
3007	991785	Front Fork Assy		2	2
3008	991787	Front Fork Inner Tube			
3009	991789	Front Fork Outer Tube			
3010	991167	Front Fork Bracket		✓	2
3011	991182	Front Fork Oil Seal			
3012	991174	Front Fork Garnish		✓	2
3013	992376	Front Headlamp Rim			
3014	992328	Front Headlamp			
3015	992337	Front Headlamp Bracket			
3016	992345	Front Headlamp Fairing			
3017	992130	Front Windshield			
3018	992134	Front Wing Mirror	CM?	✓	2
3019	995245	Front LH Signal Lamp	CM?	✓	1
3020	995246	Front RH Signal Lamp			
3021	992556	Meter Casing			
3022	992553	Meter Assy			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
3023	992446	Ignition Switch			
3024	992442	Ignition Key Assy			
3025	990706	Cowling Stay			
3026	994470	Steering Stem		✓	2
3027	994427	Steering Cone		✓	2
3028	992299	Handle Bar	BT	✓	
3029	992312	Handle Bar Switch			
3030	992310	Handle Bar Grip			
3031	995184	Handle Bar Balancer LH	BT	✓	
3032	992300	Handle Bar Balancer RH			
1252	992179	Fuel Tank			
3033	990438	Brake Reservoir			
3034	990621	Clutch Lever			
3035	992293	Hand Brake Lever	CM?	✓	
3036	991119	Side Fairing		✓	
3037	994220	Side Fairing Top Garnish		✓	
3038	994219	Side Fairing Inner Garnish		✓	
3039	991118	Fairing Shield		✓	
3040	992047	Front Top Fairing Inner Garnish		✓	
3041	991123	Fairing Top Garnish		✓	2
3042	990538	Center Fairing		✓	
3043	993378	Rear Fairing		✓	
3044	991121	Fairing Stopper		✓	
3045	991117	Fairing Lower		✓	

Vehicle No:

NAC	INC	Item	CON	AC	Qty
1052	995074	Radiator			
1053	992738	Radiator Cowling			
3046	994146	Seat Assy			
3047	990915	Engine Crash Bar			
3048	990928	Engine Guard			
1067	990219	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
3049	991144	Foot Brake			
3050	991154	Front Foot Rest			
3051	991779	Front Foot Rest Bracket			
3052	994269	Side Stand			
3053	992549	Main Stand		2	2
3054	990615	Clutch Engine Cover	an	✓	
3055	992478	Kick Starter Rubber			
3056	992477	Kick Starter Lever			
3057	991145	Foot Gear Shifter			
3058	993500	Rear Foot Rest	CM?	✓	
3059	993501	Rear Foot Rest Bracket			
3060	992581	Exhaust Muffler Heat Shield			
3061	991058	Exhaust Muffler Assy			
1405	993719	Rear LH Shock Absorber			
1445	993720	Rear RH Shock Absorber			
3062	995065	Rear Tyre			
3063	991200	Rear Rim			
3064	994872	Rear Tyre Rim Spoke			
3065	993474	Rear Fender Wheel Guard			
3066	993443	Rear Fender Mudflap		✓	
3067	992940	Rear Brake Disc			
3068	992936	Rear Brake Caliper			
3069	995236	Rear Spocket			
3070	990585	Chain			
3071	990580	Chain Guard			
3072	994530	Swing Arm			
1420	993819	Rear Sub frame			
3073	995245	Rear LH Signal Lamp			
3074	995246	Rear RH Signal Lamp			
3075	995251	Rear Taillamp			
1137	993626	Rear Number Plate			
3076	994192	Side Box			
3077	992927	Rear Box			
3078	992928	Rear Box Bracket			
3079	991328	Emblem		✓	
1136	990247	Sticker		✓	
		air filter casing		✓	
		tie rod		✓	
		front foot board		✓	
		tail bar		✓	

No of Items: _____

Assessor: _____

ACCIDENT STATEMENT

ACCIDENT DATE: (05 / AUG 2009) (DD/MM/YYYY), TIME: (150:00) (HH:MM) ^{ABT}

LOCATION: SGH (WILSON CAR PARK near BLK 4)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBK 7691 C
b) INSURANCE COMPANY: Income
c) POLICY NUMBER: 5087052261-02
d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: PIAGGIO (YQUBAN) MP3
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: SELF USE
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: DAX KALDIP SINGH (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 31853987/2 CONTACT: 81137345
c) ADDRESS: BLK 56, 01-16, JALAN MA'MOR, STORE 320056

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: DAX KALDIP SINGH (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 31853987/2 CONTACT: 81137345
c) ADDRESS: BLK 56, 01-16, JALAN MA'MOR, STORE 320056

* d) DATE OF BIRTH: (23 / 11 / 1960) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 9-7-1979

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) CLEAR

b) ROAD SURFACE: (DRY / WET / OTHERS) DRY

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBC 1876T MODEL: TOYOTA HIACE
b) DRIVER'S NAME: NASIR BIN HASSAN
c) NRIC/FIN/PASSPORT: 57838775J CONTACT: 86616031

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = daxbanto@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1853987Z



Name

DAX KALDIP SINGH

For LKK/NAC Use Only

Race

SIKH

Date of birth

23-11-1960

Country/Place of birth

SINGAPORE

Sex

M

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S1853987Z

DAX KALDIP SINGH

For LKK/NAC Use Only

Birth Date: 23 Nov 1960

Issue Date: 29 Aug 2016



5997745

NRIC No. S1853987Z

For LKK/NAC Use Only

Date of issue

10-08-2016

Address

APT BLK 56 JALAN MA'MOR
#01-16
SINGAPORE 320056

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

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 cc	09 Jul 1979
Class 2A	Motorcycles between 201 cc and 400 cc	09 Jul 1979
Class 2	Motorcycles > 400 cc	09 Jul 1979
Class 3	Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	09 Jul 1979

For LKK/NAC Use Only



NP 428A

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 : 5087052261-02

Cover : Comprehensive

- | | |
|--|---------------------|
| 1. Index mark and Registration Number of Vehicle | : FBK7691C |
| Chassis Number | : ZAPM7510000010100 |
| 2. Name of Policyholder | : DAX KALDIP SINGH |
| 3. Effective Date of Insurance | : 13 Jan 2019 |
| 4. Expiry Date of Insurance | : 12 Jan 2020 |

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

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 business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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)	: S\$500
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: DAX KALDIP SINGH
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)

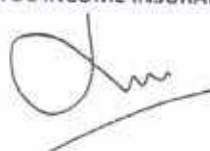
Agency : JG MOTOR AGENCY (00000613374)
 Date of issue : 02 Nov 2018 10:26 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

 Authorised Officer



 Chief Executive