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Resno: NGA/NOSSOTI	SAS c-filing		18/3/19 1741	m TH		
Veh No. SFG 5221M	E-mail (widen 8)	hrs. AIC 2hrs;	8/0/19 1750	mty		
D.O.A: 8/8/19	i-Motor Claim	Form .	8/8/19 1800	un TH	1.	
OD (TP): Reporting Only	I-Mator W/O	(Within: OD Thra	(1°17° 4 hrs)			
OD . (17). Escholling Oliv	i-l'hoto Uploa	ded	!			
11' Insurer:		arvey Report by <u>Fax / Hand to Owner/Wksp</u>				
Preferred Wksp /HNC Assign Wksp / QW: (Ass't Report by	Pax / Hand O				
TP Particulars: Veh No:		. INC(Tel: F	Fax:		
Owner / Driver: (. 1110(Tel:	<u> </u>		
	Period: (Cover Type: (
Confirmed by : (Vian. (Dates	Time	i		
	(Note-Est Status (W		0%; P: 21-79%. F: 80-	100%)		
Year of Registration: ()	Warranty: YES ()/NO()	:		
	,000 () / \$2,000 (
	AND DESCRIPTION OF THE PARTY OF	The second second second	FF Whale Falls	1.41		
() Walk-In Customer's in						
() Total Loss Case : to e-mail Insu	irer URGENTLY.					
Drive-In ()/ Towed-In (); Invo	ice: YES () / N	O();T	owing Co: ()	
Remarks (INC, harling 6788 6616)	Paradulos postalistos	10)25(152)	Dates Time Completed	Done by		
	/ Courtesy Car ())	744 700 400 400			
2) QC Check / Post Repair Inspection	()					
3) Upload Resurvey Photo (Repair Cost >	\$3000] ()				an and the second	
Injury:						
	SECTION AND ASSESSMENT	MAINTE PONTER		REPORT	-	
Date/Dime Action		NE SONISSON	AFRICANO OF PROMISE SECTION	Yesterant, at the	<u> </u>	
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2. S. Ja CV. 115 has been 2 company 2 in more was \$ 200 to make 12 20 miles		1) AR : Acciden	(\$30);			
Inimantia Particulars :-		2) DA : Dumoge 3) TF : Towing	Fee S	(\$80) \$40/\$45		
Oriver/Owner:		4) FT : Fallow	Through Survey (Reservey)	\$120		
Contact No:		Forslaiming	negical NC Only (wol 10 Jan 20			
Damaged Portion:		7) NI : (day DA	+ SMRT Survey	\$160		
		8) NTUC Addit				
QC Checked by (Engr-In-Charge):		* NS: Courteay Cor / Tpt Allowance 55				
The considerable was a security of the water	V vole / it Amore les All end V	*N6; Repair	Co-ordination	\$10		
Additions Comments:		*N8: DV / Collect Excess Coordination \$5				
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nt. 2 / 3:		Invoice dated	Fee Charge Fee Charge	N. MARTINES	en Ta	
1 /1 ,9				AY-2018 16:39	M-YO	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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 aforesaid.

	ACCIDENT STATEMENT
Date Of Report	08/08/2019 17:41
Date Of Accident	08/08/2019 13:10
Exact Location Of Accident	ALONG CAIRNHILL ROAD SLIP ROAD OF BIDEFORD ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFG5221M
Insured/Policyholder	
Name Of Registered Owner	STH CAR SERVICE
Co Reg No	53322435K
Email Address	HANCARREPAIRS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93854333
Alternative Phone No	OFFICE-93854333
Vehicle Particulars	
Manufacturer	HONDA
Model	STREAM-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088637722-02
Cover Note Number	
Driver	
Name of Driver	SIM TIAM HUAT
NRIC No	S1429050H
Date Of Birth	29/04/1960
Occupation	OUTDOOR
Date Of Driving Pass	04/12/2001
Driving Experience	17 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93854333
Fax Number	

HANCARREPAIRS@GMAIL.COM

Address BLK 850 JURONG WEST ST 81 #03-275

Postcode 640850

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 Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

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 NO

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

YES

NO

Was any other material or property damaged?

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

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

NO NO

YES

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLC518R

Vehicle Make/Model/Colour

Details Of Properties

NRIC/Passport Number

Vehicle Category

PRIVATE CAR

Name of Driver TAN POH SENG

S0003646C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

SKETCH PLAN

IMPORTANT NOTICE

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

Lunderstand, 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)
 - (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

Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature
Name: Turk

NRIC/FIN No.:

Claim Handling Accident MT/1057098									
Policy No.	5088637722-02	Vehicle No.	SPG5221M		GET Pag	scration No.			
Certificate No.	Control of the Contro	Province and a second	37.3342.191		GSI KEJ	ocration with			
Policyholder Name	STH CAR SERVICE				Palicyhal	der NBIC	822	22435K	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC					E E 4 3 3 PT	
Contact No. (Mobile)	93854333	Contact No.(Office)	0 OF WELLASSON		Loading		0		
Email Address	13634133	Special Remark	0			Vo.(Home)	0	271	
KFK	No Yes				eCode		No	•	
		TCA	- No Yes		eCade R				
NCD Protection	No.	NCD Entitlement(%)	u.		Private H	ire	fes		
Report Date	06/06/2019 17:58	Accident Report Within 24 hrs	Yes		Accident	Type	Cell	sion - Hajor M	Neor Road
Date of Accident	08/08/2019	Time of Accident hhimm	13:10		Country	of Accident	Sing	apore	
Reporting Centre		Orange Force			ECM No.				
Accident Location	ALONG CAIRNHILL ROAD SLIP ROAD OF BID	REFORD ROAD							
▼ Total Excess Applicable									
Excess Type	Per Accident	Windscreen Excess		100.00					
		CONTRACTOR OF CONTRACTOR		400,000					
OD Standard Excess		TP Standard Excess		1,500.00					
YIED OD Excess		YIED TP Excess		0.00	October in	Covered?	Feet	and .	
Additional Excess		1100 11 01100		0.00	Driver of	Covered	Dove	ereo	
Total OD Excess Applicable		Total TP Excess Applicable		00000000					
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□ GST Registered Informat									
GST Registered	No			gistration Date					
GST Registration No.				etus Verified		Yes			
Modification History	08/08/2019 t8:05:35 Sys	em changed GST Status Verified from No	to Yes						
P Policyholder Mailing Add	ress								
Address 1	BLK 850 #01-275	Address 2	JURONG WEST S	STREET SI	Address	3	SDV	SAPORE 64065	50
Address 4		Address Type	Singapore addre		Post Cod		640		
Unit No.	03-275	Related Policy Number	5088637722-02	50	10110	163	D-4U	100	
♥ OI Driver Info		JOSEPH GOVERNMENT STREET							
Driver Name	Unnamed Driver	Driver Type	Unnamed Oriver						
Unnamed driver Name	SIM TIAM HUAT	Driver NRIC	S1429050H		Driver Di		200		
Register Date of Driver License	04/12/2001	Driver Age	39					M/1960	
Contact No.(Mobile)	93854333	Contact No.(Office)	0			xperience.	17		
Address 1	BLK 850 ±03-275	Address 2				io.(Home)	0		
Address 4	MEK 030 4/37275		JURONG WEST S		Address			SAPORE 64085	50
		Address Type	Singapore addres	56	Post Cod	0	6408	950	
Unit No.	03-275								
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	SPG5221M		Oriver in	surer Company	ATU	c	
Declaration									
Modification History									
Madification History Claim 001 OD-MX New									
Claim 001 OD-MX New				DOWN	, Insured	With our own	dire.	Insured	bases ye.
Claim 001 OD-MX New				00-MX	Ensured Name	STH CAR SERV	VICE	Insured NRIC	53322435K
Claim 001 OD-MX New				DO-MX 93854333	Contact No.	STH CAR SERV	vice	NRIC Contact	53322435K
Claim 001 OD-MX New				processor and a second	Contact No. [Home]	STH CAR SERV	VICE	NRIIC Contact No. (Office)	53322435K
Claim 001 OD-MX New Claim Type * Contact No. (Mobile)				processor and a second	Contact No. (Home) OI Vehicle	STH CAR SERV	vice	NRIIC Contact No. (Office) TP Vehicle	53322435K
Claim 001 OD-MX Nee				processor and a second	Contact No. (Home)		vice	NRIIC Contact No. (Office) TP Vehicle Number	
Claim 001 OD-MX Nee				processor and a second	Contact No. Dismej Oli Vehide Number		vice	NRIC Contact No. (Office) TP Vehicle Number Name of Preferred	SLC518R HAN CAR REPAIR
Claim 001 OD-MX New Claim Type + Contact No. (Mobile) Email Address Claim Description				93854333	Contact No. Dismej Oli Vehide Number		VICE	NRUC Contact No. (Office) TP Vehicle Number Name of	SLC518R HAN CAR REPAIR
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443 ♥ Video List S (BUKIT MERAH)) on 68 Aug 2019 18:11

	Uploaded By/Date Folder Date	File	Name	P Source	Ac
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVIC S (BUKIT MERAH)) on 08 Aug 2019 18:09	E SAS	Normal	SAS 2019-8-8	
	NAC_BUKIT_MERAH_BODG76(NATIONAL ASSESSMENT CENTRE SERVIC S (BUKIT MERAH)) on 08 Aug 2019 18:09	E NRIC/ Driving Ucense	Normal	NRIC/ Driving License 2019-8-8	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVIC S (BUKIT MERAH)) on OB Aug 2019 18:09	NRIC/ Driving License	Normal	NRJC/ Driving License 2019-8-8	
	NAC_BUKIT_MERAH_BODG/76(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on OB Aug 2019 18:10	E Photos	Normal	Photos 2019-8-8	
	NAC_BURIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 08 Aug 2019 18:10	E Photos	Normal	Photos 2019-8-8	
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	NAC_BUKIT_MERAH_800076(NATIONAL ASSESSMENT CENTRE SERVE S (BUKIT MERAH)) on 08 Aug 2019 18:10	E Photos	Normal	Phongs 2019-8-8	
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	NAC_BURIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVIO S (BÜKIT MERAH)) on 08 Aug 2019-18:11	CE Photos	Normal	Photos 2019-8-6	
	NAC_BUKIT_MERAH_800676; NATIONAL ASSESSMENT CENTRE SERVI S (BUKIT MERAH)) on 08 Aug 2019 18: 11	CI Photos	Normal	Photos 2019-8-8	
	NAC_BURIT_MERAH_800676[NATIONAL ASSESSMENT CENTRE SERVI S (BURIT MERAH)) on 08 Aug 2019 18:11	CE Photos	Normal	Photos 2019-6-6	
	NAC_BURIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVI S (BURIT MERAH)) on UB Avg 2019 18:11	CE Photos	Normal	Photos 2019-6-8	
- 10000000	NAC_BURIT_MERAH_BODG76(NATIONAL ASSESSMENT CENTRE SERVI S (BURIT MERAH)) on 08 Aug 2019 18:11	CE Photos	Normal	Photos 2019-8-8	

Display in New Window Scan and uploading

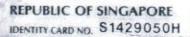
Driver PERSONAL PARTICULARS Time of Accident: 13 12 (24Hrs) Date of Accident: 08/08/2019 Vehicle Make/Model: Honda Stream (1-8) vehicle No: SF65001M Exact Location of Accident: 1. Along Caimhill Road, Slip road of Bideford Road Owner's Name/NRIC: STH Car Service (53322435K) Driver's Name/NRIC: Sim Tiam Huat (51429050H) Driver's Contact: 93854333 Insurance Co & Policy No: NTUC Income Driver's Email Address: hancarrepairs @gmail.com Relationship between Owner & Driver. Spouse/Children/Friend/Parents/Others specify: Employee | What do you wish to claim (Please circle one only) 1) Own Insurance () Other Vehicle (The one you want to claim against) 3) Reporting (For Recording Purposes) Exact Purpose for which the vehicle was being used at time of accident? (Please circle one only) Private Use / Work Purpose Weather Condition & Road Conditions? Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet Occupation Indoor / Outdoor Any Injuries? (MC of 3 Days or more, police report is required) 0 passenger If Yes, which police station? Yes No The Other Party (Vehicle B) Details SOO0364CC Vehicle No: SLC518R Driver's Name/IC: Tan Aon Seng. Driver's Contact: Insurance Company: ___ (If more than 2 vehicles involved, please indicate the other party vehicle numbers below) Other Vehicle (Vehicle C): Independent Witness (If Any):

Contact:

Preferred Workshop (If Any):

^{*} If no proper document are produced, IDAC should not file the report.

^{*} Information will be discarded after one week.







SIM TIAM HUAT

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CHINESE
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County of Beth
SINGAPORE











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: 5088637722-02 Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : SFG5221M

Chassis Number : RN61065266

2. Name of Policyholder : STH CAR SERVICE 3. Effective Date of Insurance : 30 Jul 2019

4. Expiry Date of Insurance : 29 Jul 2020

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

EXCESS (SECTION 1)

(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.

: \$\$2,000 EXCESS (SECTION 2) : 5\$1,500 WINDSCREEN EXCESS : \$\$100 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 : HONG LEONG FINANCE LIMITED 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)

: ASSURE PTE. LTD. (00000572842) Agency Date of Issue : 24 Jul 2019 10:34 hrs

Reprint ; 24 Jul 2019 10:34 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive