

NATIONAL Assessment Centre Services.

[ver 1 Jan 00]

NA 1907/22869

Date In: 16/09/2015 17:55	Job description	Date & Time Completed	Done by
Ref No: NA 1907/22869	SAS e-filing		
Veh No: ST 7992S	E-mail (Within 2hrs, AIC 2hrs)		
DOA: 14/09/2015 15:50	I-Motor Claim Form	NA 1907/22869-001	16/09/2015 18:30
OID: TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Pnx / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: STW 6229D	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: ()

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury:

Date/Time:	Location:

NA 1907/22869	1) AR: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$10)	
Contact No:	3) TP: Towing Fee \$10345	
Damaged Portion:	4) PT: Follow-Through Survey \$120	
	5) PT: Follow-Through Survey (Resurvey) \$30	
	For claiming against INC Only (ver 10 Jan 2005)	
	6) TR: Re-inspection \$70	
	7) NI: Also DA + SMRT Survey \$160	
	8) NIUC Additional Services:	
	ON:	
	*N5: Courtesy Car / Tpl Allowance \$5	
	*N6: Repairs Co-ordination \$10	
	*N7: Post Repair Inspection \$25	
	*N8: DV / Collect Excess Coordination \$5	
	TP (NI): TP (Non INC) against INC \$20	
	2) NI: Also Mobile \$0	
	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	16/09/2019 17:55
Date Of Accident	14/09/2019 15:50
Exact Location Of Accident	AYE FILTERING TO ALEXANDRA ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT7992S
Insured/Policyholder	
Name Of Registered Owner	PANG'S MOTOR RENTAL PTE. LTD.
Co Reg No	201608109H
Email Address	RICHARDWOO86@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90691091
Alternative Phone No	OFFICE-90691091

Vehicle Particulars

Manufacturer	NISSAN
Model	LATIO
Exact Purpose for which vehicle was being used at time of accident	GOING TO OFFICE

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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5104142597
Cover Note Number	

Driver

Name of Driver	RICHARD WOO JIA XIANG
NRIC No	S8608292F
Date Of Birth	14/03/1986
Occupation	INDOOR
Date Of Driving Pass	26/06/2008
Driving Experience	11 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90691091
Fax Number	
Contact Number	OTHERS-90691091
Email Address	RICHARDWOO86@GMAIL.COM

Address	BLK 671A JURONG WEST STREET 65 #16-98
Postcode	641671
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : LOW MEI PING (WIFE) GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI POLICE DIVISIONAL HQ (D DIVISION)
Police Station Address	ROAD: 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7740000 - FAX NO: 67741705
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT D/20190915/7009

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	SJW6229D
Vehicle Make/Model/Colour	TOYOTA COROLLA ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MAX THEIN
NRIC/Passport Number	S8006349J
Contact Number	90020404

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKV3397P
Vehicle Make/Model/Colour HONDA VEZEL
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver PATRICK HO
NRIC/Passport Number S1600950D
Contact Number 96951177
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name RICHARD WOO JIA XIANG
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SJT7992S
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name LOW MEI PING (WIFE)
Approximate Age
Injuries Sustain SERIOUS INJURY
Injured person in which vehicle? SJT7992S
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

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: 16/04/19

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

SKETCH PLAN

AYE FILTERING TO ALEXANDRA ROAD

C

B

A

A) SJT 7992 S

B) SJW 6229 D

C) SKV 3397 P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14/9/2019, 4:50pm, I was entering the exit towards Alexandra Road. The car (SJW 6229 D) suddenly jam braked in front of me. The brake light of the car cannot be seen.

Police Report 2/2019 0915/2009

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: 16/09/19

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



SINGAPORE POLICE FORCE



D/20190915/7009

1 of 3

POLICE REPORT (NP299)

Police Station Of Origin
Clementi Division HQ
20 Clementi Avenue 5 SINGAPORE 129858
Tel No:1800-7740000

Report No. D/20190915/7009

Date/Time Report Made 15/09/2019 14:15	Vide Report No.	Station Diary No.
Name Of Informant RICHARD WOO JIA XIANG	Address APT BLK 671A JURONG WEST STREET 65 #16-98 SINGAPORE 641671	
ID Type / ID No. NRIC NO / S8608292F	Contact No. Home/Office:	Mobile: 90691091
Nationality SINGAPORE CITIZEN	Email Address richardwoo86@hotmail.com	
Occupation Financial/Investment adviser	Sex Male	Age 33
Institution/School Name	Date of Birth 14/03/1986	Race Chinese
Date/Time Of Incident 14/09/2019 16:50 - 14/09/2019 18:30	Location Of Incident AYER RAJAH EXPRESSWAY	

Brief details.

On 14/9/2019. 450pm, i was entering the exit towards Alexandra road. The car (SJW6229D) suddenly jam braked infront of me. The brake light of the car cannot be seen that's why i could not differentiate whether the car was stopped or still moving. When i start to notice that the car was stopped, then i immediately jam braked my car and it was too late. My car banged into SJW6229D. Both my wife and myself have injuries, as both our airbags were activated. She was also conveyed to National University Hospital via ambulance shortly after. She had a cut underneath her chin and was bleeding profusely. I twisted my finger and my lips were injured due to the impact.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 15/09/2019 14:15
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20190915/7009

We managed to exit from the car after the accident after ensuring that both of us have no major injuries and can still move and not feeling giddy. I came out to gather some information from the incident. The car in front of me jam braked because of the car in front of him (SKV3397P) jam braked as well. They mentioned that there was another car which jam brake in front of SKV3397P and moved off after that. All the cars have no recording devices.

Both my wife and myself were wearing seatbelt before the incident happened.

The details as follows:

1st car - SKV3397P, Patrick Ho 96951177, S1600950D

2nd car - SJW6229D, Max Thein 90020404, S8006349J

3rd car - SJT7992S, Richard Woo 90691091, S8608292F

Subjects Involved			
Victim			
Person Name	RICHARD WOO JIA XIANG		
ID Type	NRIC NO	ID No	S8608292F
Gender	Male	Age	33
Race	Chinese	Language	English
Occupation	Financial/Investment adviser	Address Type	
Address	APT BLK 671A JURONG WEST STREET 65 #16-98 SINGAPORE 641671	Mobile No	90691091

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

15/09/2019 14:15

Classification Of Case:



**SINGAPORE
POLICE FORCE**



D/20190915/7009

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20190915/7009

Is Informant A Victim?	Yes		
Person Name	Low Mei Ping		
ID Type	NRIC NO	ID No	S8808507H
Gender	Female	Age	31
Race	Chinese	Language	English
Occupation	Exhibition/Conference/Event planner	Address	671A Blk 671A Jurong West St 65 #16-98 SINGAPORE 641671
Mobile No	82027004	Relation To Informant	wife
Person Name	RICHARD WOO JIA XIANG (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

15/09/2019 14:15

Classification Of Case:

Claim Handling

Accident HT/1062661

Policy No.	3124142097	Vehicle No.	SJT79925	GST Registration No.	
Certificate No.					
Policyholder Name	PANG'S MOTOR RENTAL PTE. LTD.	Driver Type	Third Party	Policyholder NRIC	201608109H
Product Code	FLEET INSURANCE	Contact No.(Office)		Leading	8
Contact No.(Mobile)	90691091	Special Remark		Contact No.(Home)	
Email Address		TCA	- No Yes	eCode	No *
KPK	- No Yes	NCD Entitlement(%)	0	eCode Retesp	
NCD Protection	No			Private Hing	Yes

Accident Details

Report Date	16/09/2019 18:11	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	24/09/2019	Time of Accident Incomm	16:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	AYE FILTERING TO ALEXANDRA ROAD				

Excess

Own Damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,300.00		

Benefit

GST Registered Information

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

Policyholder Mailing Address

Address 1	31 #01-14 WEST COAST HIGHWAY	Address 2	SINGAPORE 117864	Address 3	
Address 4		Address Type	Singapore address	Post Code	117864
Unit No.	01-14	Related Policy Number	310114420-01		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	14/03/1986
Unnamed driver Name	RICHARD WOO JIA XIANG	Driver NRIC	S980822ZF	Driving Experience	13
Register Date of Driver License	26/06/2008	Driver Age	33	Contact No.(Home)	
Contact No.(Mobile)	90691091	Contact No.(Office)		Address 3	SINGAPORE 641671
Address 1	BLK 671A # 16-08	Address 2	JURONG WEST STREET 63	Post Code	641671
Address 4		Address Type	Foreign address		
Unit No.	16-08				
Does he own a Singapore Registered car?	- Yes - No	Driver Vehicle No.	SJT79925	Driver Insurer Company	NTUC

Declaration					
Brachiaty or Blood Test Reading?	3 mg	Any injury?	Yes - No		

Modification History

Claim 001 [Show](#)

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop		Insured Liability	Fully at Fault	GLS report	Received	Claim Close Date	16/09/2019 18:39	Date Received	16/09/2019 00:00
Sanction No.		Preferred Repair Option	Preferred Workshop, Name unknown						
Finalisation	Yes								
Date Registered									
Report Taken By									

Print AA letter











[Save](#) [Submit](#)

Attachment

Accident No.	HT/1062661	Claim No.	001	Category *	Confidential	Urgency *	Description *
Lost Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	16/09/2019 18:39	Clear	Please Select	NO	Normal
				Clear	Please Select	NO	Normal
				Clear	Please Select	NO	Normal
				Clear	Please Select	NO	Normal
				Clear	Please Select	NO	Normal
				Clear	Please Select	NO	Normal
				Clear	Please Select	NO	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CU)
	NAC_BUKIT_MERAH_80067N(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 16 Sep 2019 18:30	Photos	Normal	Photos 2019-9-16	
	NAC_BUKIT_MERAH_80067N(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 16 Sep 2019 18:30	Photos	Normal	Photos 2019-9-16	
	NAC_BUKIT_MERAH_80067N(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 16 Sep 2019 18:30	Photos	Normal	Photos 2019-9-16	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	Photos	Normal	Photos 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	NRIC/ Driving License	Y	NRIC/ Driving License 2019-9-16
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 16 Sep 2019 18:29	SAS	Normal	SAS 2019-9-16

Video List

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

ACCIDENT STATEMENT

ACCIDENT DATE: (14/09/2019) (DD/MM/YYYY), TIME: (16:50) (HH:MM)

LOCATION: AYE Filtering to Alexandra Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SST 7992S
 b) INSURANCE COMPANY: NTAC
 c) POLICY NUMBER:
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: 510414257T
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Going to office
 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: Pam's motor (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: CONTACT:
 c) ADDRESS:

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Richard Woo Jia Xiang (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 88608292F CONTACT: 90691091
 c) ADDRESS: Blk 671A Joooy West St 65 #16-98
SPORE 641671

* d) DATE OF BIRTH: (14/03/1986) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 26/06/2008

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: car hire

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

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

6. WAS ANYBODY INJURED (YES / NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: Clementi Division HQ

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SJW 6229D MODEL: Toyota Athis
 b) DRIVER'S NAME: Max Thein
 c) NRIC/FIN/PASSPORT: 88006249J CONTACT: 90020404

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SKV 3297P MODEL: Honda Vezel
 e) DRIVER'S NAME: Patrick Ho
 f) NRIC/FIN/PASSPORT: S16 00950D CONTACT: 96951177

email = Richardwoo86@gmail.com
 VIDEO

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: 5104142597

Cover : Third Party

- | | |
|---|---------------------------------|
| 1. Index mark and Registration Number of Vehicle | : SJT79925 |
| Chassis Number | : JN1BAAC11Z0021421 |
| 2. Name of Policyholder | : PANG'S MOTOR RENTAL PTE. LTD. |
| 3. Effective Date of Insurance | : 03 Nov 2018 |
| 4. Expiry Date of Insurance | : 02 Nov 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 (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : SININS AGENCY PTE. LTD. (00000615123)

Date of Issue : 24 Sep 2018 16:45 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive