NATIONAL Assessment Centre	Services. puer 1 James	MHA119179439	-	
Date In: 30/19/16:43	Jcb description	Date & Time Completed	Done b	À.
Res No: Halwardol3183 mm	SAS e-filing			
Veh No: Fay 32344	E-mail (within Shrs, AIC 2h	rs)		+
D.O.A: 79/9/19-17:10	i-Motor Claim Form	M11064 641-001	394/19/18	iT]
OD : TP)! Reporting Only	i-Motor W/O (Within: Of	2hrs, TP 4hrs)		
OD 7 17). Reporting Only	i-Photo Uploaded			
TP Insurer:	Assessment/Survey Repo	ort j		
IF insurer.	Ass't Report by Fax / Ha	nd to Owner/Wksp		-
Preferred Wksp / INC Assign Wksp / QW: (		Tel:	Fax:	)
TP Particulars: Veh No: VP 8650	h IN	C( )/Non-INC( ).		
Owner / Driver: (		Tel:	)	-
Policy No: ( ) Period	đ: (	) Cover Type: (		
Confirmed by : (	Date:	Time:	)	
Insured/Driver Liability: ( %) [No		0-20%; P: 21-79%. F: 80	-100%]	
Year of Registration: ( ) Wa	rranty: YES ( )/NO	( )		
Excess: (\$ ) Loading: \$1,000	( )/\$2,000( )			
General Remarks:-			STORY STORY	<i>, 1</i> ,
( ) Walk-In Customer : Customer's information		& Strictly NO refer of repaire	r	
( ) Total Loss Case : to e-mail Insurer l				
Drive-In ( )/ Towed-In ( ); Invoice: Y	/ES( )/NO( )	; Towing Co: (		)
Remarks;- (INC holline: 6788 6616)		Date&Time Comple of	Doneb	y .
	rtesy Car ( )		- 10	
2) QC Check / Post Repair Inspection	( )			NOTE: 100
3) Upload Resurvey Photo [Repair Cost > \$300	01 ( )			
Injury:				
		a or is also	NODAL TO	Charles.
Date/Time / Actions	and the transfer of the transfer		PROPERTY OF STATES	
·	SF (P)			A TOTAL CONTRACTOR
		· · · · · · · · · · · · · · · · · · ·		
			WD HE SERVICE OF THE	
•			41	
441907473 ·:	Invoice	Preparation Checklist	Anit (S)	Ami (1) Add Bill
laimant's Particulars :-		cident Reporting (\$30);	(\$80)	
	3) TF : Tov	ving Fee	\$40/\$45	
river/Owner:	4) FT : Fol	low-Through Survey low-Through Survey (Resurvey)	\$120	
ontact No:	For clair	ning against INC Only (wef 10 Jan 20	005)	
amäged Portion:	6) TR : Re-	inspection c DA + SMRT Survey	\$75	
*	8) NTUC	Additional Services:-		
C Checked by (Engr-In-Charge):	OD*	urlesy Car / Tpt Allowance	\$5	
Concerns of (bugi-in-charge)	• N6; Re	pair Co-ordination	510	
uditors: Comments :-	•N7: F0	st Repair Inspection //Collect Excess Coordination	\$25 \$5	
<u>. 1:</u>	TP(NI)	): TP (Non INC) against INC	\$20	
	9) N12: Id		30  ea	动物为
( 2/3:	Invoice da		STATE OF THE PARTY	

Figure 1.70

### SINGAPORE ACCIDENT STATEMENT

#### 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 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.
- 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.	
SHOULD BE A STATE OF THE SECOND STATE OF THE S	ACCIDENT STATEMENT
Date Of Report	30/09/2019 16:43
Date Of Accident	27/09/2019 17:10
Exact Location Of Accident	PIE (CHANGI) BEFORE THOMSON FLYOVER
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBH3234G
Insured/Policyholder	
Name Of Registered Owner	DURAISAMY KANNAN
NRIC No	S7761438I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82053364
Alternative Phone No	OFFICE-82053364
Vehicle Particulars	
Manufacturer	YAMAHA
Model	FZ16ST
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY

Type Of Coverage THIRD PARTY

NO Fleet Policy

5098754605-01 Policy Number

Cover Note Number

Driver

DURAISAMY KANNAN Name of Driver

NRIC No S7761438I 05/05/1977 Date Of Birth INDOOR Occupation 18/09/2009 **Date Of Driving Pass** 

10 YEARS AND 0 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-82053364 Mobile Number

Fax Number

OFFICE-82053364 Contact Number

NOEMAIL **EMail Address** 

Address BLK 296 TAMPINES STREET 22

#07-524

Postcode 520296

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

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? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by YES

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name GEYLANG NEIGHBOURHOOD POLICE CENTRE

2

NO

1

YES

Police Station Address ROAD: 132 PAYA LEBAR ROAD, POSTCODE: 409014, COUNTRY:

SINGAPORE

NO

Police Station Contact TEL NO: 1800-8486999 - FAX NO: 68486799

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20190928/2043.

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 SKP8650G

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver YONG SIN KEE GABRIEL

NRIC/Passport Number

Contact Number 97790120

Address Postcode

Insurance Company Name

Page 2 of 19

# **DETAILS OF INJURED PERSON 1**

Name

DURAISAMY KANNAN

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

FBH3234G

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

### 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 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:

- 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)

NRIC/FIN No .: Date & Time:

onnel's Signature Reporting Centre Pers Name:

-1		1	1
Tries	1	i	
ds C	-	1 2	1
3	i	l E	B
P	1	1	
		1	

Vehicle A: FBH 32349 Vehicle B: SKP86509

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

	_
	_
Refer to police report	
 TRACE TO POLICE LEPORT	
	_
Report No: T/20190928/2043	
	_
	_
	_
	_
	-
	_

### DECLARATION

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

gar

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Policyholder's Signature

Date & Time:

ehicle No.	FBH 32349 Model/Make FZ 1657
Pate of Accident	27/09/2019
ime of Accident	(710 HRS
ocation of Accident	Along PIE todo Changi before Thomson Flyover
xact purpose use during acc	
Name of Owner	Duraisamy Kanan
elephone No.	H/P:82053364 Home: Office:
NRIC	S77614381
Address	BLK 296 Trumpines Stroet 22 #07-524 5 520296
Claim type	OD THIRD PARTY REPORTING ONLY
nsurance Company	NTUC
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft
Policy No.	5098754605-01
Name of Driver	As Above If No,
VRIC OF DITUE	Any Passengers :
Date of birth	TFP1 20 20
Occupation	Outdoor / Indoor
Driving License Pass Date	18/0912009
Gender	(Male / Female
Contact No.	H/P: 82053364 Home: Office:
Address	
Driver have any own vehicle	No, If yes, Reg No.
Relationship	Employee, If no, state Owner
Weather condition	Clear Raining Other
Road Surface	Dry Wet Other
Any Injuries	No, £Yes, Who?
Name And Contact No.	Duraisang Cannan 82053369
Name And Contact No.	34,043.44
Police Report	No, KYES, Where? Gaylang N.P.C
Vehicle B No.	SEP 8650G Any Passengers : -
Name of Driver	Young Sin Kee Gabriel Contact No.: 9779 0120
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	Any Passengers :
Vehicle G No.	Any Passengers :
Witness Name	Witness Contact :
Accident Portion	Hit on the right fall on the left
Camera Recorder	Yes / No
Email Address	Kannanduraisamy 5 @ 9 mail. Com
	And Di M. Idd
PARTICULAR WORKSHOP	Moto 51 Pte Ltd
CONTACT NO.	6842 0051 / 6744 0510
	6842 0051 / 6744 0510  Zi Ting  6741 0510





1 of 3

Report No. T/20190928/2043

Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014 Tel No: 1800-8486999

REPORT	OF A	TRAFFIC	ACCIDENT
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Date/Time Report Made: 28/09/2019 10:57		Vide Report No.:	Station Diary No.: 60	
Informa	nt's Partic	ulars		
	Informant: AMY KANI		Address: APT BLK 296 TAMPIN 520296	NES STREET 22 #07-524 SINGAPORE
LINCOPPLETONE FOREST	/ ID No.: O / S77614	381	Contact No.: Home/Office: Mobile: 82053364	
National INDIAN	ity:		Email:	
Sex: Male	Age: 42	Date of Birth: 05/05/1977	Type of Informant: Rider	
Race: Indian			Language:	Institution / School Name:
Occupa			Driving Licence Inform Class:	nation: Date of Expiry:

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/09/2019 17:10	Type of Location Straight Road
	EXPRESSWAY	<i>*************************************</i>		
ALONG PIE	TOWARDS CHANGI, BE	FORE THOMSON	FLYOVER	
Weather:	TOWARDS CHANGI, BE	Road Surface:		Road Speed Limit:
Weather:	TOWARDS CHANGI, BE		F	VERNESEN SEM SEMSOM PARTICONOMI EL TELEFONS SEMSOM PARTICONOMI
Weather: Clear	TOWARDS CHANGI, BE	Road Surface:	F	Road Speed Limit:
Weather:	TOWARDS CHANGI, BE	Road Surface: Dry	F	VERNESEN SEM SEMSON PARIOGNOM

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model '	Color	Condition	No of Passenger
FBH3234G	Motorcycle	YAMAHA	FZ16ST	White	Slightly Damaged	0
SKP8650G	Car	VOLKSWAGO N	TIGUAN SPORT 2.0 TSI AT 5N22M9	White	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





T/20190928/2043

2 of 3

Report No. T/20190928/2043

Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014 Tel No: 1800-8486999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBH3234G	NTUC Income Insurance Co-Operative Limited	5098754605-01	11/05/2019	10/05/2020

### Brief Details.

On 27/09/2019 at about 1710hrs, I was travelling on the second lane, along PIE towards Changi, before Thomson flyover. While I was travelling straight, there was one car which was travelling on the first lane. Suddenly, the car began to change lane to the left, without giving any signal. The car then hit the right side of my motorcycle, and I fell to the ground. The driver stopped the car. One random vehicle stopped by and checked on my condition as he informed that he is a medical officer. However, I did not manage to get any information of the person who assisted me. Soon, ambulance and traffic police came to the location and I was sent to Tan Tock Seng Hospital to seek treatment. I was given 5 days of MC to recover from my injury (abrasion and 4-5cm laceration on the right leg). My motorcycle right mirror and rear right side was damaged, and some scratches on the right side of my motorcycle.





3 of 3

Report No. T/20190928/2043

Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014 Tel No: 1800-8486999

CONTINUATION OF REPORT

Sketch Pla	n
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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: G / Sgt 2 NUR JANNAH BINTE MOHAMED HUSNI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/09/2019 10:57
Officer In Charge Of Case: TP / GIT / Sgt 3 RASHIDAH BINTE AZMAN	Classification Of Case:
Contact No.: 65476216  Authentication Stamp	



# Certificate of Insurance

1. Index mark and Registration Number of Vehicle Chassis Number Ch	surance
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)  Certificate Number : 5098754605-01 Cordificate Number : 5098754605-01 Cordificate Number : 5098754605-01 Cordinates Number : 5098754605-01 Malaysia Met Chassis Number : 5098754605-01 Met Chassis Number	IAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)  Certificate Number : 5098754605-01 Cor  1. Index mark and Registration Number of Vehicle	1960
Certificate Number : 5098754605-01  Index mark and Registration Number of Vehicle Chassis Number  Name of Policyholder  Reflective Date of Insurance Registration Number of Vehicle Reflective Date of Insurance Respiry Date of	
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) Named Driver(s) Only. Provided that the person driving is permitted in accordance withe Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor 6. Limitations as to Use# (a) Use for social domestic and pleasure purposes and in connection of the Control of the Cont	
Chassis Number : ME  Name of Policyholder : DU  Effective Date of Insurance : 11  Expiry Date of Insurance : 10  Named Driver(s) Only.  Provided that the person driving is permitted in accordance withe Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor of Limitations as to Use#  (a) Use for social domestic and pleasure purposes and in connection of the policy does not cover  (a) Use for hire or reward.  (b) Use for hire or reward.  (c) Use for the carriage of goods (other than samples) in connection of the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Velic (Chapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Police of Issue : 15 Apr 2019 08:14 hrs.	ver : Third Party
2. Name of Policyholder : DU 3. Effective Date of Insurance : 11 4. Expiry Date of Insurance : 10 5. Persons or Classes of Persons entitled to drive#  (a) Named Driver(s) Only.  Provided that the person driving is permitted in accordance withe Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor 6. Limitations as to Use#  (a) Use for social domestic and pleasure purposes and in connection of the provided that the person driving the Motor 7. Discover (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 (d) Use for any purpose in connection with the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Velent (Chapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN 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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy Chapter 189 and	H3234G
3. Effective Date of Insurance : 11 4. Expiry Date of Insurance : 10 5. Persons or Classes of Persons entitled to drive#  (a) Named Driver(s) Only.  Provided that the person driving is permitted in accordance withe Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor 6. Limitations as to Use#  (a) Use for social domestic and pleasure purposes and in connection of 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 (d) Use for any purpose in connection with the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Velenchapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN NAMED DRIVER (2) : N/A  SUM INSURED : N/A  I/We hereby Certify that the Policy to which this Certificate relates is is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy Chapter 189 and	145S09BC2024799
4. Expiry Date of Insurance : 10 5. Persons or Classes of Persons entitled to drive#  (a) Named Driver(s) Only.  Provided that the person driving is permitted in accordance withe Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor 6. Limitations as to Use#  (a) Use for social domestic and pleasure purposes and in connection of 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 dust the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Velent (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 189) and Policy 100 of Section 95 of the Road Transport Act, 1987 (Chapter 1980) (	RAISAMY KANNAN
S. Persons or Classes of Persons entitled to drive#  (a) Named Driver(s) Only.  Provided that the person driving is permitted in accordance with Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor 6. Limitations as to Use#  (a) Use for social domestic and pleasure purposes and in connection 7. 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 connectic dubuse for any purpose in connection with the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Veles (Chapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy 15 Apr 2019 08:14 hrs.	May 2019
(a) Named Driver(s) Only.  Provided that the person driving is permitted in accordance with Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor 6. Limitations as to Use#  (a) Use for social domestic and pleasure purposes and in connection 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 connectic during the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Veles (Chapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and P.  Agency : DIRECT BUSINESS DEPT (00000600280)  Date of Issue : 15 Apr 2019 08:14 hrs.	May 2020
Provided that the person driving is permitted in accordance with Motor Vehicle or has been so permitted and is not disqual enactment or regulation in that behalf from driving the Motor 6. Limitations as to Use#  (a) Use for social domestic and pleasure purposes and in connection 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 connectic (d) Use for any purpose in connection with the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Vel (Chapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Police of Issue : DIRECT BUSINESS DEPT (00000600280)  Date of Issue : 15 Apr 2019 08:14 hrs	
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(b) Use for racing, pace-making, reliability trial or speed-testing. (c) Use for the carriage of goods (other than samples) in connection (d) Use for any purpose in connection with the Motor Trade.  # Limitations rendered inoperative by Section 8 of the Motor Veles (Chapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy (Chapter 189) and Pol	18
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(Chapter 189) and Section 95 of the Road Transport Act, 1987 (headings.  EXCESS (SECTION 1) : N/A  EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is.  Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy Compensation)  Agency : DIRECT BUSINESS DEPT (00000600280)  Date of Issue : 15 Apr 2019 08:14 hrs	
EXCESS (SECTION 2) : N/A  INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Party Risks and Compensation)  Agency : DIRECT BUSINESS DEPT (00000600280)  Date of Issue : 15 Apr 2019 08:14 hrs	
INSURE WITH COE : N/A  NAMED DRIVER (1) : DURAISAMY KANNAN  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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy to the policy of the polic	
NAMED DRIVER (1) : DURAISAMY KANNAN  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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy (Chapter 1	
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 is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy Compensation (Chapter 189) and Policy	
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SUM INSURED : N/A  I/We hereby Certify that the Policy to which this Certificate relates is is: Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Policy  Agency : DIRECT BUSINESS DEPT (00000600280)  Date of Issue : 15 Apr 2019 08:14 hrs	
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Agency : DIRECT BUSINESS DEPT (00000600280)  Date of Issue : 15 Apr 2019 08:14 hrs	
Zonaf	sued in accordance with the provisions of the Motor art IV of the Road Transport Act, 1987 (Malaysia)
Approximate the process of the contract of the	OF NTUC INCOME INSURANCE CO-OPERATIVE LIMITED
Countersigned By:	1/5-0
Authorised Officer	Chief Executive

<b>eBao</b> Tech										Gener	alClaim
Hello, NAC_PAYA_UBI_800	0601						· Chang	ge Languag	e • Char	ige Password	• Log Out
My Desktop	Policy Query										
Notice of Loss	Policy N	No.				Date	of Accident		27/09/2019	17:10	
	Vehicle	No.(For Motor)	F8H32	34G		Certif	ficate Number				
					1	Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence	Expiry Date
	0	5098754605- 01		DURAISAMY KANNAN	57761438[	GMC	Third Party	FBH3234G	and the state of the	11/05/2019	10/05/2020
						Continue	1				

Policy No.	5098754605-01	Policyholder Name	DURAIS	AMY KANNAN	Policyholde NRIC	S7761438I	
Certificate No.		STORY.			NRIC		
Address	BLK 296 #07-524 TAMPINES	STREET 22 SING	APORE 52	20296			
Product Name	MOTORCYCLE INSURANCE	Plan			Group Policy Flag	N.	
Policy issue Date	15/04/2019	Effective Date	11/05/20	019 00:00	Expiry Date	10/05/2020	23:59
Excess Type	Per Accident	All Claims Excess					
Third Party Excess	0	Own damage Excess	0		Windscreen Excess		
Additional Excess		OS Premium	0				
Outside Singapore OD Excess		Outside Singapore TP Excess				Youn	g/Inexperience Driver Excess
Agent	DIRECT BUSINESS DEPT	Agent Tel.	NIL		GST Flag	Y	
Co- Insurance Flag	No				5042 CSC <del>T</del> S		
Open Policy Info							
Certificate Info							
→ Policyho	older Mailing Address						
Address 1	BLK 296 #07-524	Addres	s 2	TAMPINES STR	EET 22	Address 3	SINGAPORE 520296
Address 4		Addres	s Type	Singapore addr	ess	Post Code	520296
Jnit No.	07-524	Related Numbe		5098754605-0			
Insured	Object: FBH3234G						
	ments						

Claim Handling							
Accident MT/1064691							
olicy No.	5098754605-01	Vehicle No.	FBH3234G	<b>GST Registration No.</b>			
Certificate No.							
Policyholder Name	DURAISAMY KANNAN			Policyholder NR1C	577614381		
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading	0		
Contact No.(Mobile)	82053364	Contact No.(Office)	0	Contact No.(Home)	0		
mail Address		Special Remark		eCode	ne V		
rx	® No ⊜ Yes	TCA	® No ○ Yes	eCode Reason	A-1-1-1-1		
CD Protection	No	NCD Entitlement(%)	20	Private Hire	No		
Accident Details		A STATE OF THE PARTY OF THE PAR		3.3344.3345	1000		
eport Date	30/09/2019 16:52	Accident Report Within 24 hrs	Yes	10000			
ate of Accident	27/09/2019			Accident Type	Collision - Change / Cross lane		
	27/09/2019	Time of Accident hhomm	17:10	Country of Acadent	Singapore		
eporting Centre		Orange Force		ICM No.			
ccident Location	PEE (CHANGE) BEFORE THOMSON FLYOVER						
Total Excess Applicable	•						
icess Type	Per Accident	Windscreen Excess					
D Standard Excess	0.00	TP Standard Excess	0.00				
ED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Not Covered		
Oditional Excess							
dal OD Excess Applicable	0.00	Total TP Excess Applicable	0.00				
P Benefits							
GST Registered Informa	ation						
T Registered	No		GST Registration Date				
FT Registration No.			GST Status Verified	Yes			
dification History							
Policyholder Mailing Ad	dress						
Edress 1	BLK 296 ±07-524	Address 2	TAMPINES STREET 22	Address 3	SINGAPORE 520296		
Idress 4		Address Type	Singapore address	Post Code	520296		
nt No.	07-524	Related Policy Number	5098754605-01				
OI Driver Info							
iver Name	DURAISAMY KANNAN	Driver Type	Main Driver				
named driver Name		Driver NRIC	57761438[	Driver DOB	05/05/1977		
gister Date of Driver License.	18/09/2009		42				
		Driver Age		Driving Experience	10		
intact No. (Mobile)	82053364	Contact No.(Office)	0	Contact No. (Home)	0		
dress 1	BLK 296	Address 2	TAMPINES STREET 22	Address 3	SINGAPORE 520296		
Idress 4		Address Type	Singapore address	Post Code	520296		
nit No.	07-524						
oes he own a Singapore egistered car?	○ Yes ® No	Driver Vehicle No.		<b>Driver Insurer Company</b>			
The state of the s							
daration							
reathalyser or Blood Test eading?	0 mg	Any injury?	® Yes ○ No				
acting the same of							
odification History							
Claim 001 New							
Callin Got a Burne							
im Type +	ор-их	Insured Name	DURAISAMY KANNAN	Insured NRIC	577614381		
ntact No.(Mobile)	82053364	Contact No.(Home)	66566494	Contact No.(Office)	The state of the		
ail Address	kannanteam@yahoo.com	Of Vehicle Number	FBH3234G	TP Vehicle Number	SKP8650G		
iment Type Claimant Type *		Type of Benefit *	Please Select V	A VALUE AND SAME			
imant Name *	>>	Claimant NR3C *					
imant Address	124						
im Description	FBH3234G / SKP8650G ON 27 Sept 2019			Name of Preferred Workshop			
rferred Workshop Contact							
Service and Service Co.		Insured Liability *	Not at Fault		Taken and the second		
quire Finalisation	Yes	Preferered Repair Option	Preferred Workshop, Name unknown	GIA report	Received		
te Registered	30/09/2019 16:53	Claim Close Date		Date Received	30/09/2019 00:00		
port Taken By	Jackson						
Print AK letter							
			Save Submit				
Attachment			SWEEN-CONTROL OF				
cident No.	MT/1064691	Claim No.	001				
st Doc. Received	● Yes ○ No	Upload Date	30/09/2019 16:54				
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À	NAC_PAYA_UBI_800601( NA CES) on 3	TIONAL ASSESSMENT CENTRE SERVI 0 Sep 2019 16:54	Photos		Normal	Ph	otos 2019-9-30	
9	NAC_PAYA_UB1_800601( NA CES) on 3	TIONAL ASSESSMENT CENTRE SERVI 0 Sep 2019 16:54	SAS		Normal	8	AS 2019-9-30	
20	NAC_PAYA_UB1_800601[ NA CES) on 3	TIONAL ASSESSMENT CENTRE SERVI 0 Sep 2019 16:54	NRIC/ Driving License	Y	Normal	NRIC/ Driv	ving License 2019-9-30	
ue.	Opto	aded By/Date	Category	?	Urgency		Description	Msg Sent? (CO)