NATIONAL Assessment Centre S	ervices.	vel 1 Jani05) .	MMB49913	0909	
0 0	leb description		Date &Time Com	pleted	Done by
RETHOURA PAUSO MICH	SAS c-filling				
Veh No. 18X 711114	E-mail (b)dia 81	ur, AIC 2lus)		United to the same of the same	1 f
0.01 36 09 000	I-Motor Claim		M/1065/7	100	03/10/2
- Aletron 1	I-Motor W/O	(Within: OD 2hrs,	TP (brs)		13.31 .
OD (IP) Reporting Only	I-Photo Uploa	ded	· · · · · · · · · · · · · · · · · · ·		
/	Assessment/Sur				
TP Insurer:			Owner/Whan	_	
Proferred Wksp / INC Assign Wksp / QW: (		Contract of the Contract of th	Toli	Faxt	TI THE REAL PROPERTY AND ADDRESS.
TP Pardiculars: Veh Nor Con	1 13t8K	INC (	)/Non-INC(	١.	
Owner / Driver: (			Tel:		)
Policy No: ( ) Period	: (	)	Cover Type: (		).
Confirmed by : (		Dates,	Timer		)
	c-Est Status (W	O): N: 0-20	%; P: 21-79%.	P: 80-1009	4] .
The Late of the La	ronty: YES (	)/NO(	<u> </u>		
Excess: (\$ ) Londing: \$1,000 (	( )/\$2,000(	)		*****	المراجعة المحاسمة والمحاركة
Concollations is a fine with the contract of t	经的证明	能性的抽心地广	特別,與特殊政府	£23302	+ 18 ( ) · · · ·
( ) Walk-In Customer : Oustomer's Informa	ition strictly Con	Ildential & Str	ictly NO refer of re	poliar.	
( ) Total Less Case : to e-mall Insurer U	RGENTLY,				<u> </u>
Drive-in ( )/ Towed-in ( ); Invoice: Y	ES( )/N	O( ); To	wing Co: (	-	/
					SEMESTRE
1) Apply for Transport Allowance ( )/Cour	rtesy Car ( )	yeneliatee. X			
2) QC Check / Post Repair Inspection	( ·)		<u> </u>		7 1
3) Upload Resurvey Photo [Repair Cost > \$3000	)) ()		<u>                                     </u>	سلت	
Infurý:			1, 1,		
Data Saint S. Walton B. S. Googles and U.S. Walton S. C.		AUAU//49284164		EXPERIENCE.	Mary Interest of
SCIENCE STEERS IN TO SEE WHEN THE WAY WAS AN AND AN AND AN AN AND AN	MANAGEMENT OF THE PROPERTY OF	NAMES OF STREET	(FH) CHOMPANDO AND AND A	P.CF.ICA WARREN	CIMUMATRIA
		COLESCO VIVALENCE			
			i.		
·			WATER THE CONTROL OF	WANTED TO	SACROSSIA AND S
141901392		involterriel			Statility indicts
		1) Alt 1 Apaldent	Reporting (530);	ING (110)	
arconamicana panarana ana ana ana ana ana ana ana ana	ALL PROPERTY OF THE PARTY OF TH	2) DA   Demage /		340/343 \$120	
iver/Owner:		4) PT : Follow-Ti 5) PT : Follow-Ti	con ale Survey (Resurve	y) \$30	
ontact No:		For elalming at 6) TR : Re-laspee	alpating Only (Wells	\$73	
rniiged Portion:	1	7) NI : Idao DA	SMRT Survey	\$160	
		I) NTUC Addition			
Checked by (Engr-In-Churge):	3 .	NS: Courlesy	Cer/Tpt Allowence	510	THE RESERVE OF THE PERSON NAMED IN COLUMN 1
TO VEN SHIP WAS A SOUTH PROPERTY OF THE SHIP SHIP SHIP SHIP SHIP SHIP SHIP SHIP	inexamental s	*Not Repelt O	ir Inspection	\$23	
entities and minimistry of the party of the	是因为社会的	TP (NII) 1 TP	lect lixeers Coordination (Non INC) against 1845		
(_);	.,	9) N12: Idao Mo Involce doted	olle	Charged	ALVIO Y
5, 273;	-5	Involce dated		Charges	EMIN

### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

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.
- 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

	ACCIDENT STATEMENT
Date Of Report	03/10/2019 12:11
Date Of Accident	30/09/2019 09:00
Exact Location Of Accident	ALONG SIMS AVENUE TOWARDS MOUNTBATTEN ROAD
Country/State of Loss	SINGAPORE
於自由的主義和共和國國際	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBK2444H
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD JURAIMI BIN JUPRY
NRIC No	S9228252Z
Email Address	JUSTNICE92@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98319940
Alternative Phone No	OTHERS-98319940
Vehicle Particulars	
Manufacturer	HONDA
Model	CB400X-399CC
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5097736925-01
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD JURAIMI BIN JUPRY
NRIC No	S9228252Z
Date Of Birth	15/08/1992
Occupation	INDOOR
Date Of Driving Pass	08/12/2017
Driving Experience	1 YEAR AND 9 MONTHS
Sender	MALE
Mobile Number	(LOCAL) +65-98319940
ax Number	- 中、0000000-0000000 (10000000000000000000000
Contact Number	OTHERS-98319940
TRACTICAL AND A SECOND	State of the second sec

JUSTNICE92@GMAIL.COM

Address

BLK 228 BUKIT BATOK CENTRAL

Postcode

650228

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

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

2

YES

Was any body injured in the Accident?

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)

9

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Address

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO

Was notice of intended Prosecution given?

NO

If Yes, against whom?

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20191002/2022 AND T/20191002/2034

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

SGM1358K

Vehicle Make/Model/Colour

TOYOTA COROLLA ALTIS

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

TOH YUAN FENG, TIMOTHY

NRIC/Passport Number

S9007573Z

Contact Number

92250590

Address

Postcode

Insurance Company Name

No. Of Passenger (Including Driver)

#### **DETAILS OF INJURED PERSON 1**

Name

MUHAMMAD JURAIMI BIN JUPRY

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBK2444H

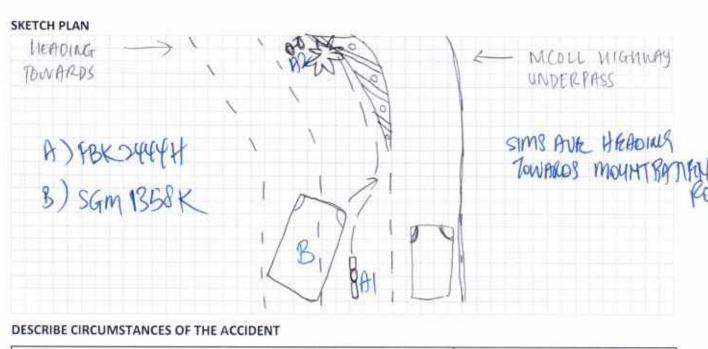
Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode



At 0858 on 30th September, I was viding from sims way heading
towards mountbatten road. I was violing viding in the 1st
lane at the middle. A red Toyota Artis plate number
(SAM 1358K) made an abrupt lane change from 2nd lane
to 1st in order to enter NICOII nighway right filter lane
which was I more lane away. I had to swewe to my
right to avoid the car and as a result with the Kerb after
the metal railing. Flipped in the air and landed on my
where Landed 1-2 in away from my bike. Suffere abrasions and back problems.
POLICE REPORT 1/20191002/2022 & 7/20191002/2034
1 1/2 1/20/2009

### DECLARATION

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

Policyholder's Signature Date & Time: 02/10/19

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

NRIC/FIN No.:

Personnel's Signature

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature

Date & Time: 01/10/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Beporting Centre Personnel's Sig

Name:

NRIC/FIN No.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20191002/2022

#### REPORT OF A TRAFFIC ACCIDENT

	ne Report N 019 09:56	Made:	Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars	CONTRACTOR OF THE PROPERTY OF	And the second second
	Informant: MAD JURA	AIMI BIN JUPRY	Address: 228 BUKIT BATOK CENTRA	L #01-25 SINGAPORE 650228
CONTRACTOR OF STREET	/ ID No.: D / S92282	52Z	Contact No.: Home/Office:	Mobile: 98319940
National SINGAP	ity: ORE CITIZ	'EN	Email:	
Sex: Male	Age: 27	Date of Birth: 15/08/1992	Type of Informant: Rider	
Race: Malay			Language: English	Institution / School Name:
Occupat OTHER:			Driving Licence Information: Class: 2B,2A	Date of Expiry:

General Infor	mation of the Acci	dent		
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 30/09/2019 09:00	Type of Location
Location: Along Road 1 SIMS WAY Weather:		Road Surface:		Road Speed Limit:
Clear		Dry		
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collis	sion:			Anyone conveyed by ambulance: No

Details of V	ehicle Involve	d		Land Series	Ball Hotel	Sanchary.
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBK2444H	Motorcycle	HONDA	400X M	Black		0
SGM1358K	Car					0

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK2444H	NTUC Income Insurance Co-Operative Limited	5097736925-01	27/05/2019	26/05/2020





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20191002/2022

## CONTINUATION OF REPORT

Details of Perso			and the same of the			
Any Pedestrian I						
No. of Pedestria	ns Injured: NIL		Use of Pe	adpetria	n Cross	sings NIA
Rider			10000110	odestila	ii Cioss	sing. NA
Name	MUHAMMAD JURA	AIMI BIN JU	JPRY	ID No	).	S9228252Z
Related Vehicle	FBK2444H (Motorcycle)			Conta	act No.	98319940
Hospital/Clinic	NIL	NIL		Class Drivin Licen Expin	g	Class: 2B,2A Date of Expiry: NIL
Date Treatment	NIL		Date Disc		1	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL Slight	

#### Brief Details.

On the above mentioned date time and location,

I was travelling along Sims way towards Mountbatten, on the right lane. A vehicle on my left on the middle lane suddenly came across my lane wanted to enter Nicoll highway underpass. I managed to avoid the driver but ahead of me, on my right there was a pile of dirt. I lost control there and mounted a curb and fell of the vehicle. The driver came back and rendered assistance. My friend came and took me to the





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20191002/2022

CONTINUATION OF REPORT

## Sketch Plan

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: // TP / MOHAMED ZULKIFLI BIN MUHAMMAD HAIRI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 02/10/2019 09:56
Officer In Charge Of Case: TP / AEIT /	Classification Of Case:
Staff Sgt WONG SIEU LUI Contact No.: 65476151	Mary successes
Authentication Stamp	A Control of the Cont



T/20191002/2034

1 of 3

Report No. T/20191002/2034

## Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No

T/20191002/2002

Report Number

T/20191002/2034

Vide Report Number

Date/Time of Report Made

02/10/2019 10:58

Place Report Lodged

Traffic Police

Type of Informant

Rider

Name of Informant

MUHAMMAD JURAIMI BIN JUPRY

ID Type / ID No.

NRIC NO / S9228252Z

Home/Office

Mobile

98319940

Email

Type of Accident

Injury / Others

Drink Drive

No

Anyone conveyed by

ambulance

No

Date/Time of Accident

30/09/2019 09:00

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK2444H	Motorcycle	HONDA	400X M	Black		0
SGM1358K	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



2 of 3

Report No. T/20191002/2034

## Continuation of CSF For NP168

Rider				A TOTAL	mel Con	ALIGN PROGRAMMENT	
Name	MUHAMMAD JURAIMI BIN JUPRY			ID No	).	S9228252Z	
Related Vehicle	FBK2444H (Motorcycle)			Conta	act No.	98319940	
Hospital/Clinic	TAN TOCK SENG HOSPITAL			Class Drivin Licen	g	Class: 2B,2A Date of Expiry: NIL	
Date Treatment	30/09/2019		Date Disc		-	/2019	
No. of Days gran	ted Medical Leave	03	Degree of		Slight	The state of the s	

### Brief Facts.

On the above mentioned date time and location,

I was travelling along Sims way towards Mountbatten, on the right lane. A vehicle on my left on the middle lane suddenly came across my lane wanted to enter Nicoll highway underpass. I managed to avoid the driver but ahead of me, on my right there was a pile of dirt. I lost control there and mounted a curb and fell off the vehicle. The driver came back and rendered assistance. My friend came and took me to the hospital. That's all.



T/20191002/2034

3 of 3

Report No. T/20191002/2034

## Continuation of CSF For NP168

## Sketch Plan

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.

Case Sensitivity

No

Officer-In-Charge of Case

TP / AEIT /

WONG SIEU LUI

Classification of Case

1) INJURY / OTHERS

Mathematical   Math	Claim Handling Accident MT/1083194								
Carried Street	Policy fac.	5097738424-94	Vehicle No.	FB124401		Labra vistorio	1/21		
Marcian Care   Marc				- Lange and Control		CELT Registration	Ho.		
Married   Marr	Policyholder Name	MUHANMAD JURAINI BIN JUREY				-ENGINEERING			
Contract	Product Code	HOYONCYCLE INSURANCE	Cover Type	Three Baston Francisco					
March   Marc		M919940		total early, fire & Their				6	
10.00   10.0							41	policies.	
March   Marc		(6 No.) (Yes.	TOA	or New Year				No. *	
Marche   March   Mar		N5	ACD Entitlement(%)					7025	
March   Marc						Trivate neg		199	
Marche   Marche   Marche   Marche   Marche   Marche   March   Marche   Ma			Arcident Report Within 24 hrs	Yes		Acrident Trees		- Francisco - Office	
The state   The		36/89/3014	Time of Account Brumm	09:00					Ne / Dress time
## MATERIAL PROPERTY OF ACCORDED 1987 1987 1987 1987 1987 1987 1987 1987								widthise	
Marchanest   Park Accorded			RDAD						
Property	Control of the Contro								
Mile	ENCESS Type	Per Accident	Witthsteen Excess						
Management   Man	00 Shandard Evorus	420							
Minima					0.00				
## Months   160   TROPH MONTHS   180   TROPH MONTHS		6.10	YIED TF Excess		0.00	Driver is Covered?		hat Covered	
## 100 10 10 10 10 10 10 10 10 10 10 10 10		SERVICE							
## STREAM OF THE PROPERTY OF T		0.16	Total TP Excest Applicable		10.56				
The proposed   10		dian							
15									
## 100   100									
March   Marc				GST Status Va	inted	Ves			
March   Marc									
March   Marc	<ul> <li>Policyholder Mailing Ade</li> </ul>	fress							
March   Marc	OPRES 1	MIN 228 MHL-25	Address 2	make make and a	12	Day years			
### CORD   Color   District   Dis	Difresa 4				£7				228
## STATES   MANAGEMENT DESCRIPTION   MANAGEME	ne fair.					AGE COME		estran	
March Barder Marker   March State   March				2000					
March   Marc		MUHAMMAD IURAIMO BIN JURRY	Driver Figure	Main Diriver					
Second   Column   C			Erroet WRIE			Down Street		TUGENOMET	
Second   S		04/13/2013	Driver Age						
Marchael		163339940	Contact Nu.coffices	150				200	
March   Marc		WLK 228 #01-28	Address 2	BUETT BATCH CHICKAL				Newson and the second	
Part			Address Type						
Table   Part								******	
Part	epistered car?	T02 + 760	Driver Vetacle for,	PERSALER		6.3.3.			
Marriage						prive manual Com	Daniy.	HTUC	
CD-900									
CD-MEX   STATEMENT   STATEME									
March   Marc	son Type +			lin lin	D-90K	Intured Lawrence	446	1 Brown	
## ACTIONS   1971   1972   197	MIRCH RELIGIONS			10		realing business	AD JURAINE BI	AND MAIL	592292527
				58	319946	No.		No.	
Second   S	will Address			pro				(Office)	
TRECHINGS   Part   Part				1.0			16:	Verkicle:	SGW1358K
APPARA Series  Territoria No. Series 1900 1900 1900 1900 1900 1900 1900 190	en Description			52	Children Communication			, Name III	
First AN letter  First No.   March 19   Format   March 19   Format		19.27/JFD02:202:FILE		10		out 1016		Preferred	
Segulation   Column	PROFEST TOTAL PARTY							PRECOR	20
SEASON SALES NATIONAL STREET NO. 10 STREET N		Option Professed Workshop, Name	introper . About Received	•		Cities			
ROBLE NAFACE  From AK Settine    Early   Submet				803	/10/2019 13:29	Clean		Date	6910/2019 886
	rort.Taken By			Wa	SLI WARGE	Light		Harderved.	
Seve Subset  Without No.   P17/105/104   Claim No.   D01  Occ. Reserved   Yes   Yes   Yes   Date   D17/10/2019 13/32  Parm *   Claim   Parm *   Parm *   Claim   Parm *   Parm	HANNA WAR			PAGE	A STATE OF THE STA				
Machinant  We was your No. Prividestine  Pam * Construent  Passes Select * 1 MO * Normal * No	PRICE AN ARTHUR								
The state of the s				Seve   Sylone					
Coc. Service									
Coor, Reserved Page 769  Page 9  Page 9  Page 9  Clear Please Select 9 NO 10 9 Normal 9  Clear Please Select 9 NO 1 Normal 9  Clear Please Select 9 NO 9 Normal 9  Normal		(ACCEPTAGE OF THE CONTROL OF THE CON							
Pam *  Calculator *  Calculato			Daim No.	001					
Coor Please Select V No V Recember Coordinates Please Select V No V Recember V No V No V Recember V No V N			Walters Date:	09/18	(2019 13:31				
Copy   Fleate Select   1   60   8   6   6   6   6   6   6   6   6   6	homes Ella - No Electronia	Parti =			Crisgory *	Confidential	program a		Decree
Total File No Re chosen  Clear Flexon Select 7 NO 7 Normal 7  Clear Flexon Select 7 N				Cear			and the state of t		Description *
Tooler File No Fie chosen  Clear Fleave Select * NO * Normal * Nor	A Decided to the Control of the Cont			2000	- 500				
Thorse File No Fie chosen  Cited Fleese Select T NO T Normal T Cited Fleese Select T NO T Normal T Cited Fleese Select T NO T Normal T Nor				production and the second	111111111111111111111111111111111111111		-		
Attachment Uploated By/Date Easy Please Select T MO T Normal T Send Attachment Uploated By/Date Easy Please Select T MO T Normal T Send Attachment Uploated By/Date Easyory Urgancy Description (60)  ACT Normal T						-	and the second		
Attachment List  Attachment Uploaded by/Date  Example 7  Mac_dust_ MEAH_BOOKER NATIONAL ASSESSMENT CENTER SERVICE  ALC DUST_MERAH_BOOKER NATIONAL ASSESSMENT CENTER SERVICE  ALC DUST_MERAH_BO				THE REAL PROPERTY.		-			
Attachment Lief  Attachment Uploaded By/Date  Exergory   Linguist   Linguist   Mag Sent    Act older MEAAH BOOGREE NATIONAL ASSESSMENT CENTRE SERVICE   Focos   Normal    NAC_BURIT_MERAH BOOGREE NATIONAL ASSESSMENT CENTRE SERVICE   Focos   Normal    NAC_BURIT_MERAH SOCREE NATIONAL ASSESSMENT CENTRE SERVICE   Pocos   Normal    NAC_BURIT_MERAH SOCREE NATIONAL ASSESSMENT CENTRE SERVICE    NAC_BURIT_MERAH SOCREE NATIONAL SERVICE    NAC_BURIT_MERAH SOCREE NATIONAL SERVICE    NAC_BURIT_MERAH SOCREE NATIONAL SERVICE    NAC_BURIT_MERAH SOCREE NATIONAL SERVICE    NAC_BURI	hoose File No Ne chosen					History 2	The Publication of the Publicati	and the second	
Attachment Uploaded By/Date Caregory C Ungency Description Mag Sent (CO) 1 (CO)	mage Read			17-689		40	Normal	1	THE PARTY OF THE P
NAC_BURIT_MERAH) on 03 Cit_2019 13:31  NAC_BURIT_MERAH 8000761 NATIONAL ASSESSMENT CHATRE SERVICE FOXES Normal Photos Photos 1500 1 NAC_BURIT_MERAH 8000761 NATIONAL ASSESSMENT CHATRE SERVICE FOXES NORMAL 8000761 NATIONAL ASSESSMENT CHATRE SERVICE FOXES	Attachment List								Send Mess
NAC_BURIT_MERAH) on 03 Cit_2019 13:31  NAC_BURIT_MERAH 8000761 NATIONAL ASSESSMENT CHATRE SERVICE FOXES Normal Photos Photos 1500 1 NAC_BURIT_MERAH 8000761 NATIONAL ASSESSMENT CHATRE SERVICE FOXES NORMAL 8000761 NATIONAL ASSESSMENT CHATRE SERVICE FOXES									
1 TOURT HEAVING A STEERSWERT CHATTER SERVICE PLOSS Normal Photos	Attachment	Uploaded By/Date	W. W. C. C. C. C.	0					
NAC, BURIT, PREAM, SCOOTS: NATIONAL ASSESSMENT CRITIC SERVICE				P Urge	roj.	Delate	patient		Mag Sent?
S (BURKET MERSHAT) on ID Del 2019 13-10.				24010					Mag Sent? (CO)
	NAC_RUSCI	_MERAH_BOGG/SE( NATIONAL ASSESSMENT CENTRE S (BURIT MERAH)) on 03 Oct 2019 13:31	SERVICE Philos	24010					Mag Sent? (CO)

	Optooded By/Date	Folder: Durbe		File Name		Ŷ	Seurce	Actio
Video List	S (BÜKIT MERAH)) o	n 03 Oct 2019 13:30	SAS		Norman	SAS	3079-20-3	
460	NAC_BUKET_MERAH_B00676/ NATIO	NAL ASSESSMENT CENTRE SERVICE				550		
	MAC_RURIT_MERAH_8086761 MATJO 5 (BUKIT MERAH)) 6	NAL ASSESSMENT CENTRE SERVICE	1990/ Driving License	(W)	Normal	MUC/ Drover	License 2010-10-2	
	RAC_BUN(T_MERAH_BOOK?(( NATIO S (RUK(T MERAH?) e	NAL ASSESSMENT CENTRE SERVICE n 03 Oct 2019 13:30	Phinton		Normal	Proto	s 2019-10-3	
1	NAC BURIT MERIOF BUU6/6( MATIC 5 (BURIT MERAH)) 0	NAL ASSESSMENT CENTRE SERVICE 0-03 Oct 701# 13:30	Photos:		Norman	Prote	12015-10-3	
18	NAC_BURIT_MERAH_SCO676( NATIO S (BURIT MERAH)) o	MAL ASSESSMENT CENTRE SERVICE 0 03 Oct 2019 13:30	Photosic		Normal	Photo	s 2019-10-3	
经验	NAC_BURIT_MERAH_BCOK76( NATIC 3 (BURIT HERAH)) E	MAL ASSESSMENT CENTRE SERVICE in 03 Oct 2016 13/30	Photos		Account	Protection	2018-20-3	
<b>V</b>	NAC_BURIT_MERAH_R00676( NATIO 5 (BURIT MERAH)) b	NAL ASSESSMENT CENTRE SERVICE IN 02 Oct 2019 13:30	Protos		Normal	Photo	2019-10-3	
2	NAC_BURIT_MERAH_800674( NATIO S (BURIT MERAH)) o	NAL ASSESSMENT CENTRE RETVICE 6-83 Oct 2019 13:38	Phuces		normæ	Photo	1013-10-3	
OF.	NAC_BURLT_MERAH_BUG676/ NATIO S (BURLT MERAH)) a	NAL ASSESSMENT CENTRE SERVICE 0.03 Tht 2019 13:30	Photos:		Normal	Photo	2019-10-3	
3/	NAC_BURIT_MERAH_BODG/N/ NATIO S (WARIT MERAN)) A	NAL ASSESSMENT CENTRE SERVICE II 03 Oct 2019 13:30	Photos		Asrm#	Drum	x 7019-10-3	
10/1	SAC_BURIT_MERAH_800678( NATIO S (BURIT MERAH)) (	NAL ASSESSMENT CENTRE SERVICE 0.03 Oct 2019 13:30	Photos		Normal:	Physic	2019-10-2	
3	NAC_BURTT_MERAH_800676( NATIO S (BURTT WERAH)) w	NAL ASSESSMENT CENTRE SERVICE H 62 Oct 2019 13:30	entras		Normal.	Photo	s 2019-10-3	
	NAC_BURIT_MERAH_BOOKTR( NATIO \$ (BURIT MERAH)) o	NAL ASSESSMENT CENTRE BENVICE ( 03 Oct 2019 13:31	Photos		NO FITTING	Phone	s 3019-10-3	
tre	NAC_BURTT_MERAH_BUDGTSL NATSU S (BURLT MERAN)) U	NAL ADSESSMENT CENTRE SERVICE N 03 Oct 2019 12:31	Photograph		Normal	Photo	2019-10-3	
	NAC_BUNIT_MERAH_800678( NATIO 8 (RUNIT MERAH)) o	NAL ASSESSMENT CENTRE BEAVICE HIST ON 2019 13:31	Photoe		Normal	Photo	± 2019-10-3	
	NAC_BURIT_MERAH_800676( NATIO 5 (BUNIT MERAH)) o		Photos		Normal	Phato	2019-10-3	
	NAC_BURTT_MERAH_BODE76( NATIO S (BURGT MERAH)) II	NAL ALSESGMENT CENTRE SERVICE N 03 Out 2019 13:31	Photos		Normal	Photo	12029-20-3	
	NAC_BURTT_MERSH_B00676/ NATIO S (BURST MERAH)) o	NAL ASSESSMENT CENTRE DERVICE N 03 Oct 2019 13:31	Photos		Normal	Phila	13019-10-3	

Display in New Window Scan and uploading

# ACCIDENT STATEMENT

	ACCIDENT DATE: 30, 09,	2019 1100 1111 0000	. 99	00
	LOCATION: SIMS RO H	EADING TOWARD	D( MINUMIKI	ATTEN R
C.	1. DETAILS OF VEHICLE  a) VEHICLE NUMBER:  b) INSURANCE COMPA  c) POLICY NUMBER: 50	FBK24444 NY: NTUC INCOM	u€	17.183
₩ 4.	dipolicy type: (comp e)MAKE & MODEL: H (i)Type:(saloon / cou givehicle category: h)PURPOSE OF USING A	PE / MPV / VAN / LORRY (PRIVATE / COMMERCI,	(17015) Y / MOTORCYCLI AL / MOTORCYC	E/OTHERS)
	I) ARE YOU CLAIMING UI IF NO. PLEASE STATE (TO 2. INSURED / POLICY HOLD A) NAME: MUNIAMINA D) NRIC/FIN/PASSPORT: C) ADDRESS: BUKIT R	STILL BOY BON	JUPRY (MALE	
*Ho of passen Concluding dis	* CONTINUE TO 3.d IF DR OF DRIVER O'NAME: DINRIC/FIN/PASSPORTI_ CIADDRESS:	May a	LDER (MALE /	FEMALE)
	6) DATE OF BIRTH: (15) 6) OCCUPATION: (MDOG FIDATE OF DRIVING P. 4. WAS DRIVER AN EMPLO IF NO, RELATIONSHIP OF THE PROPERTY OF	OR / OUTDOOR) ASS <u>OF NOV 2</u> OYEE OF THE INSURED OF THE DRIVER WITH (CLEAR / RAINING / OT	0// D'S COMPANY? (	YES /(ID)
85 58	b)ROAD SURFACE: (DRY)  6. WAS ANYBODY INJURED  7. D)REPORTED TO POLICE (  IF YES, PLEASE STATE WH	WET / OTHERS YES / NO!	· · · · · · · · · · · · · · · · · · ·	 (CE HQ.
At his of passenge (Including drive (, 1)	OL VEHICLE NUMBER	GM 1358K	MODEL TOYOTA TIMOTHY _CONTACT: 923	A ALTIS
A No of passing	d) VEHICLE NUMBER:		MODEL:	

emais = justnice 97@ gracil com.



## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS	AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS	AND COMPENSATION) RULES, 1960
E TOTAL CONTRACTOR OF THE PARTY	AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5097736925-01

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle

: FBK2444H

Chassis Number

: NC471005750

2. Name of Policyholder

: MUHAMMAD JURAIMI BIN JUPRY

3. Effective Date of Insurance

: 27 May 2019

4. Explry Date of Insurance

: 26 May 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

EXCESS (SECTION 1)

N/A

EXCESS (SECTION 2)

N/A

EXCESS (THEFT OUTSIDE SINGAPORE)

PLEASE REFER OVERLEAF

INSURE WITH COE

NAMED DRIVER (1)

MUHAMMAD JURAIMI BIN JUPRY

NAMED DRIVER (2)

MUHAMMAD HAMKA BIN SA'AD

HIRE PURCHASE COMPANY

: BAN HON BROTHERS (AGENCIES) PTE LTD

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

: LQ INSURANCE AGENCY PTE LTD (00000613125)

Date of Issue

: 18 May 2019 16:22 hrs

Reprint

: 18 May 2019 16:23 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

**Authorised Officer** 

Chief Executive