Date In: 79/0/4-19:44	Jcb description	Date & Time Completed	Dono	by by
Res No: NA INC 10019594 ty	SAS e-filing			
Veh No: JawaryH	E-mail (within Shrs, AIC 2hrs)	1		
D.O.A: 26/12/19-19:15	i-Motor Claim Form			
	i-Motor W/O (Within: OD 2h	M7 1068988 -001	24/12/19	1:14
OD / TP / Reporting Only	i-Photo Uploaded	15, 11 4015)		
1223	Assessment/Survey Report			
TP Insurer:	Ass't Report by Fax / Hand	to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (ax:	
TP Particulars: Veh No: Jm	150171 . INC(-
Owner / Driver: (32431	Tel:	,	
Policy No: () P	Period: (Cover Type: (
Confirmed by : (Date:	Time:)	
Insured/Driver Liability: (%)	[Note-Est. Status (WO): N: 0-2	0%; P: 21-79%. F: 80-1	00%]	
Year of Registration: ()	Warranty: YES ()/NO ()		
	,000 ()/\$2,000 ()			
General Remarks:-		9,000,000,000,000,000	45	
() Walk-In Customer: Customer's infe	ormation strictly Confidential & St	rictly NO refer of repairer	V.A.	-
	The state of the s	nouy NO Islet of tepairer.		
() Total Loss Case : to e-mail Insur				
Drive-In ()/ Towed-In (); Invoice	e: YES () / NO (); T	owing Co: ()
Remarks: (INC hotline: 6788 6616)	(2)	Date& Firms Completed	Done	by
	The state of the s	1	1.57	
1) Apply for Transport Allowance ()/	Courtesy Car ()			
	Courtesy Car ()			
2) QC Check / Post Repair Inspection	()			
QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > \$	()			
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number 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.
- 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 aforesaid.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	29/10/2019 14:44
Date Of Accident	26/10/2019 19:15
Exact Location Of Accident	SLE TWDS WOODLANDS
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJW954H
Insured/Policyholder	
Name Of Registered Owner	FOCUS RENTALS PTE LTD
Co Reg No	201836450G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98299734
Alternative Phone No	OFFICE-98299734
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	VIOS E AUTO
Exact Purpose for which vehicle was being used time of accident	d at WORKING
Are you claiming under your own insurance polic for repair to your vehicle?	cy NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5106629800
Cover Note Number	
Driver	
Name of Driver	JASON LIM KA SENG
NRIC No	S7005851J
Date Of Birth	27/02/1970
Occupation	OUTDOOR
Date Of Driving Pass	12/09/1988
Driving Experience	31 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90231191

OFFICE-90231191

NOEMAIL

BLK 217 BISHAN STREET 23 Address

#01-321

Postcode 570217

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 COLLISION - HEAD TO REAR

Weather Conditions RAINING Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

4

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Was any other material or property damaged?

NO

Number of Passengers (Including Driver)

Passenger 1

NAME: GENDER:

0.00

: MALE

Passenger 2

NAME:

.

GENDER:

: FEMALE

Passenger 3

NAME:

. -

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT.

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

SMJ5015T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Page 2 of 19

Contact Number Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 aforesald.
- 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:
 - 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

Heg. No:

Date & Time:

Driver's Signature

IT driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signatu

Name:

NRIC/FIN No .:

Vehicle Reg. No. (Cer Plate No.) Vehicle Reg. No. (Cer Plate No.) Vehicle Make/Model Itayota Vios Itayota Vios		
Vehicle Reg. No. (Cer Plate No.) Vehicle Reg. No. (Cer Plate No.) Vehicle Make/Model Itayota Vios Itayota Vios	Date of Accident	: 26 0H 2019 Accident Time: 715pm (24-HR-Format)
Vehicle Make/Model Toyota Vios	accident Place	
Owner or Company Name /IC No. Deriver's Hp Comparity Sept /IC No. Deriver's Hp Comparity Owner's Hp Comparity Owner's Hp Comparity Owner's Hp Comparity Owner's Hp Deriver's Hp Comparity Owner's Hp Comparity Owner's Hp Comparity Owner's Hp Deriver's Hp Comparity Owner's Hp Comparity Owner's Hp Comparity Owner's Hp Comparity Owner's Hp Deriver's Hp Comparity Owner's Hp Deriver's Hp Comparity Owner's Holder's Holder's Holder's Holder's Holder's Holder's Holder's Holder	Vehicle Reg. No. (Cer Plate No.)	9JW954 H
Owner or Company Name /IC No. : focus Rentals Pte Ltd Owner or Company Contact No. : 9829934 Owner's Hp Compan DRIVER'S Name / IC No. : Joson Lim Ka Leng @700585/J DRIVER'S Date Of Birth : 37-feb-1 740 DRIVER'S License Pass Date 12 dep / Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee\ Others: \ \frac{2}{2} \] DRIVER'S Address : 217 Bishan street 23 \ \frac{2}{2} \sqrt{6570212} DRIVER'S Contact No. / Alt No. : 1) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Vehicle Make/Model	: Toyota Vios
Owner or Company Contact No. :98299734 Owner's Hp Company DRIVER'S Name / IC No. :Joson Lim Ka Seng @700585/J DRIVER'S Date Of Birth : 7-66-1970 DRIVER'S License Pass Date 12 869 Relationship of Owner & Driver :Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Parents \ Sibling \ Sibling \ Employee\ Others: Parents \ Sibling \ Employee\ Others: Parents \ Sibling \	Insurance Company	NTUC Policy No.
DRIVER'S Name / IC No. DRIVER'S Date Of Birth Relationship of Owner & Driver DRIVER'S Address DRIVER'S Address DRIVER'S Contact No / Alt No. 1) 90231191 2) DRIVER'S Occupation Email Address Weather & Road Surface Reporting Type Reporting Type Reporting Type Reporting Driver): Was there any video Captured by car camera: YES (NO) Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose Other Party Driver's Particular (If any) Vehicle Reg. No: Weather Driver: Name Driver: C No. Driver: IC No.	Owner or Company Name /IC No	. : Focus Rentals Pte Ltd
DRIVER'S Name / IC No. DRIVER'S Date Of Birth Relationship of Owner & Driver Relationship of Owner & Driver DRIVER'S Address DRIVER'S Address DRIVER'S Contact No. Alt No. 1) 90731191 2) DRIVER'S Coccupation INDOOR \ OUTDOOR (e.g. working inside or outside office of the season of the se	Owner or Company Contact No.	: 98299734 Owner's HpCompany Tel
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Per DRIVER'S Address : 217 Bishan of reef 23 #01-3>1 s' (\$70.215) DRIVER'S Contact No. / Alt No. :1) 40231191 2) DRIVER'S Contact No. / Alt No. :1) 40231191 2) DRIVER'S Occupation : INDOOR \ OOTDOOR (e.g. working inside or outside office of the standard of	DRIVER'S Name / IC No.	7 11 14 1
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Per DRIVER'S Address : DIT Bishan street 23 #01-3>1 s (ST0)15 DRIVER'S Contact No./ Alt No. :1) 90231191 2) DRIVER'S Occupation : INDOOR \ OOTDOOR (e.g. working inside or outside office street) and the street of the s	DRIVER'S Date Of Birth	: 27 - Feb - 1970 DRIVER'S License Pass Date 12 Sep 1988
DRIVER'S Address : 214 Bishan street 23 #01-321 s (5702) DRIVER'S Contact No / Alt No. :1) 90231191 2) DRIVER'S Occupation :INDOOR \ Octdoor (e.g. working inside or outside office to the street of the street o	Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Perta
DRIVER'S Occupation : INDOOR \ OFTDOOR (e.g. working inside or outside office	DRIVER'S Address	: 217 Bishan street 23 #01-3>1 5 (570217).
Email Address : Admin @ My Car . 19 Weather & Road Surface : CLEAR & DRY \RAINING & WET \AFTER RAIN & WE Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance Number of Passengers (Including Driver): 4 2 gur Was there any video Captured by car camera: YES (NO) Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose Other Party Driver's Particular (if any) Vehicle Reg. No: 8MJ 5015 T Vehicle Reg. No: Vehicle Make Wodel: Vehicle Make Wodel: Name Driver: Name Driver: 1C No. Driver: 1C No. Driver:	DRIVER'S Contact No / Alt No.	:1) 90231191 2)
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Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance Number of Passengers (Including Driver): 4 2 girl Was there any video Captured by car camera: YES (NO) Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose Other Party Driver's Particular (if any) Vehicle Reg. No: SMJ 5015 T Vehicle Reg. No: Vehicle Make\Model: Vehicle Make\Model: Name Driver: Name Driver: 1C No. Driver:	Email Address	: Admin@Mycar.sg
Number of Passengers (Including Driver): 4 2 girl Was there any video Captured by car camera: YES (NO) Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose Other Party Driver's Particular (if any) Vehicle Reg. No: SMJ 5015 T Vehicle Reg. No: Vehicle Make Wodel: Vehicle Make Wodel: Name Driver: Name Driver: 1C No. Driver: 1C No. Driver:	Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
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Vehicle Reg. No:	Was there any video Captured by c Exact purpose for which vehicle we	ar camera: YES (NO) as being used at the time of accident: Private use \ Work purpose
Vehicle Make\Model: Vehicle Make\Model: Name Driver: Name Driver: C No. Driver: IC No. Driver:	Other	Party Driver's Particular (if any)
Vehicle Make\Model: Vehicle Make\Model: Name Driver: Name Driver: C No. Driver: IC No. Driver:	Vehicle Reg. No: 8MJ 5015 T	Vehicle Reg. No:
C No. Driver: IC No. Driver:	Vehicle Make\Model:	
C No. Driver: IC No. Driver:	Name Driver:	
	C No. Driver:	
	Driver's Contact & Add:	



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSA' MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSA' ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MACOUNTY VEHICLE OF VEHICLES, 1959 (MACOUNTY VEHICLES) (b) Any other person who is driving on the Policyhol Provided that the person driving is permitted in a the Motor Vehicle or has been so permitted and enactment or regulation in that behalf from driving (a) Use for social domestic and pleasure purposes at This Policy does, not cover (a) Use for racing, pace-making, reliability trial or specific or the carriage of goods (other than sample)	Caver: Third: SJW954H: MR053HY9305: FOCUS RENTAL: 05 Mar 2019: 04 Mar 2020 Ider's order or with haccordance with the is not disqualified by ing the Motor Vehicle and in connection with	Party 56734 5 PTE. LTD. is/her permission. icensing or other laws or regulations to d order of a Court of Law or by reason of a	
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 drivell (a) The Policyholder. (b) Any other person who is driving on the Policyholder Provided that the person driving is permitted in a the Motor Vehicle or has been so permitted and enactment or regulation in that behalf from driving. 6. Limitations as to Usell (a) Use for social domestic and pleasure purposes at This Policy does, not cover (a) Use for racing, pace-making, reliability trial or specific process.	: SJW954H : MR053HY9305: : FOCUS RENTAL: : 05 Mar 2019 : 04 Mar 2020 Ider's order or with haccordance with the is not disqualified by ing the Motor Vehicle and in connection with	is/her permission. icensing or other laws or regulations to d order of a Court of Law or by reason of a	
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(a) The Policyholder. (b) Any other person who is driving on the Policyhol Provided that the person driving is permitted in a the Motor Vehicle or has been so permitted and enactment or regulation in that behalf from driving its for social domestic and pleasure purposes at This Policy does, not cover (a) Use for racing, pace-making, reliability trial or specific process.	lder's order or with h accordance with the is not disqualified by ing the Motor Vehicle nd in connection with	icensing or other laws or regulations to d order of a Court of Law or by reason of a t.	
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(a) Use for social domestic and pleasure purposes at This Policy does not cover (a) Use for racing, pace-making, reliability trial or specific pace.		the Policyholder's or Hirer's business.	
This Policy does not cover (a) Use for racing, pace-making, reliability trial or spe		the Policyholder's or Hirer's business.	
(a) Use for racing, pace-making, reliability trial or spe			
(b) Use for the carriage of goods (other than sample:			
(c) Use for any purpose in connection with the Moto		any trade or business.	
* Limitations rendered inoperative by Section 8 of Act (Chapter 189) and Section 95 of the Road Tra headings.	the Motor Vehicle (T		Í
EXCESS (SECTION 1)	: N/A		
EXCESS (SECTION 2)	: \$\$1,500		
ADDITIONAL EXCESS	: N/A		
UNNAMED DRIVER EXCESS	: N/A		
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO	1	
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		
U/We hereby Certify that the Policy to which this Certificate Vehicles (Third Party Risks and Compensation) Act (Chap Agency : TIMES INS BROKERS (MOTOR BUSING Date of Issue : 26 Dec 2018 12:42 hrs	iter 189) and Part IV (of the Road Transport Act, 1987 (Malaysia)
Countersigned By:			
Authorised Officer		Chief Executive	

eBaoTech							(GeneralC	laim		
Hello, NAC_PAYA_UBI_80	0601				A STATE OF THE PARTY OF THE PAR		· Change La	inguage	· Change P	assword	Log Out
My Desktop	Poli	cy Query									
Notice of Loss	Policy N	lo.				Date of A	socident	26/1	0/2019 19:15		
	Vehicle	No.(For Motor)	SJW954	н		Certificat	e Number				
					Se	arch					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry
	0	5106629800		FOCUS RENTALS PTE. LTD.	201836450G	GFT	Third Party	SJW954H	SJW954H	05/03/2019	
					Con	tinue					

Policy No.	5106629800	Policyholder Name	FOCUS	RENTALS PTE. LTD.	Policyholder NRIC	201836450	G
Certificate		wante			NRIC		
lo. Iddress	26 SIN MING LANE #05-114 P	MIDVIEW CITY S	INGAPOR	F 573971			
roduct	FLEET INSURANCE	Plan		23/33/1	Group	N	
lame		Effective	2000		Policy Flag		
ssue Date xcess ype	26/12/2018	Date All Claims Excess	26/12/2	018 00:00	Expiry Date	25/12/2019	23:59
hird Party excess	1500	Own damage Excess	0		Windscreen Excess	0	
dditional xcess outside	0	OS Premium	28154.3	5			
Singapore OD Excess	0	Outside Singapore TP Excess	1500			You	ing/Inexperience Driver Excess
gent	TIMES INS BROKERS (MOTOR	B Agent Tel.	6252888	88	GST Flag	Y	
nsurance lag open olicy Info ertificate	No						
Policyh ddress 1	older Mailing Address	***					24.5000000000000000000000000000000000000
ddress 4	26 SIN MING LANE	Addre	ss z ss Type	#05-114 MIDVIEW Singapore address		Address 3 Post Code	SINGAPORE 573971
Init No.	03-02	Relate	d Policy	5106629800	,	Post Code	573971
Insure	d Object: SJW954H	Numb	er				
Endors							
	27/12/2018 00:00	Basic Informat Endorsement	ion	000001286971728	Endorseme Effective	ent Take	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SJS9308K 27-12-2018 \$1,269.81 2. SJU6842T 27-12-201 \$1,269.81 3. SJU6916P 27-12-201 \$1,269.81 In view of this amendment, an additional premium of \$3,809.42 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque if avour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.
	07/01/2019 00:00	Basic Informat Endorsement	ion	000001286982404	Endorseme Effective	nt Take	opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SGF608H 07-01-2019 \$1,231.44 2. SKR6614P 07-01-201 \$1,231.44 In view of this amendment, an additional premium of \$2,462.88 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from

	not been collected.								
he premium on this policy has coldent MT/1068988	. Transcent Control Control								
sicy No.	5106629800		0.1166904	(12/45/00)					
ertificate No.	2100954800		Vehicle No.	S7W954H		GST Registration N	No.		
Dicyholder Name	FOCUS RENTALS PTE.	ATD.				\$000120Y0100020			
oduct Code	PLEET INSURANCE	110.	Cover Type	Total Communication of the Com		Policyholder NRIC		2018364500	3
ontact No. (Mobile)	98299734		Cornect No. (Office)	Third Party 0		Loading Contact No.(Home	200	0	
			Special Remark			eCode	0	0	
FK	® No ○Yes		TCA	® No ○ Yes		eCode Reason		1-0-40	
ICD Protection	No		NCD Entitlement(%)	0		Private Hire		Yes	
Accident Details						7,144,171,17			
eport Date	29/10/2019 21:11		Accident Report Within 24 hrs.	Yes		Accident Type		Collision - He	art to Bear
ate of Accident	26/10/2019		Time of Academ hhomm	19:15		Country of Academ	nt .	Singapore	and the region of
eporting Centre			Oranga Force			TCM No.	(EN	STI GOSTIC	
ccident Location	SLE TWDS WOODLAN	ios:	20			200000			
♥ Excess									
wn damage Excess		0.00	Additional Excess	0		Windscreen Excess		0.00	
nnamed Driver Excess			Outside Singapore OD Excess	0.00					
		Outside Singapore TP Excess	1,500.00						
2 Benefits				4,200.00					
GST Registered Inform	ation								
T Registered	No			GST Registration Date					
IT Registration No.				GST Status Verified		Yes			
dification History									
	4500								
Policyholder Mailing Ad									
tdress 5	26 SW MING LANE		Address 2	#05-114 MIDVIEW CITY		Address 3		SINGAPORE	573971
toress 4	22420		Address Type	Singapore address		Post Code		573971	
nit Na	03-02		Related Policy Number	5105629800					
OI Driver Info									
iver Name	Unnamed Driver		Driver Type	Unnamed Driver					
named driver Name	JASON LIM KA SENG		Driver NRIC	57005851)		Driver DOB		27/02/1970	
gister Date of Driver License			Driver Age	49		Driving Experience		31	
ntact No.(Mobile)	90231191		Centact No. (Office)	0	Contact No.(Home)			۵	
dress 1	8LK 217		Address 2	BISHAN STREET 23			Address 3 SINGAPO		
idress 4				Address Type Singapore address					
			Address Type	Singapore address		Post Code		570217	
	01-321		Address Type	Singapore address		Post Code		570217	
oes he own a Singapore	01-32§ ○ Yes ® No		Address Type Driver Vehicle No.	Singapore address		Post Code Driver Insurer Com	прапу	570217	
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ideo List	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 29 Oct 2019 21:14 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 29 Oct 2019 21:14		Photos		Normal	Photos	2019-10-29		
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7	NAC_PAYA_UBI_B00601 (NATIONAL ASSESSMENT CENTRE SER CES) on 29 Oxt 2019 21:14 NAC_PAYA_UBI_B00601 (NATIONAL ASSESSMENT CENTRE SER CES) on 29 Oxt 2019 21:14		Photos		Normal	Photo	x 2019-10-29		
N			Photos		Normal	Photo	× 2019-10-29		
	NAC_PAYA_UB1_800601(NAT CES) on 25	IONAL ASSESSMENT CENTRE SERVI F Oct 2019 21:14	Photos		Normal	Photo	a 2019-10-29		
4	NAC_PAYA_UB1_800601(NAT CES) on 25	TONAL ASSESSMENT CENTRE SERV) 9 Oct 2019 21:14	Photos		Normal	Photo	x 2019-10-29		
4	NAC_PAYA_UBI_800601(NAT CES) on 25	IONAL ASSESSMENT CENTRE SERVI 9 Oct 2019 21:14	Photos		Normal	Photo	s 2019-10-29		
	NAC_PAYA_UBI_BOOGOT[NAT CES) on 2	TIONAL ASSESSMENT CENTRE SERVI 9 Oct 2019 21:14	Photos		Normal	Photo	s 2019-10-29		
140		TIONAL ASSESSMENT CENTRE SERVI 9 Oct 2019 21:14	Photos		Normal	Prioto	6 2019-10-29		
N.	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRÉ SERVI CES) on 29 Oct 2019 21:14		Photos		Normal	Photo	s 2019-10-29		
13	MAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 29 Oct 2019 21:15		SAS		Normal	SAS	2019-10-59		
Thy ar-	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 29 Gct 1019 21:18		NRIC/ Driving License	Y	Normal	NRIC/ Drivin	g License 2019-10-29		
	Uploaded By/Date		Category		Urgency	1,12	escription	Msg Sent? (CD)	