The state of the s	tre Services.   wet 1 Jan	Date & Time	Completed	Done	21
Date In: 17/19-13:39	Jeb description	Date & Time	Completed	Done	
Rei No: HA INC 19021979 124	SAS e-filing		<u> </u>		
Veh No: GBB4948E	E-mail (within Shrs, AIC	2hrs)			
D.O.A : WIN 19- 04:17	i-Motor Claim Form	m 15755	AK-23~ 1.	strolig	12:48
	i-Motor W/O (Within:	OD 2hrs, 7'P 4hrs)			
OD TP Reporting Only	i-Photo Uploaded				
	Assessment/Survey Re	port			
TP Insurer:	Ass't Report by Fax /	Hand to Owner/Wks	2	-	
Preferred Wksp / INC Assign Wksp / QW: (		Tol:	Fax		)
TP Particulars: Veh No: Veh	w RIZC .	INC( )/Non-IN	C( ).		
Owner / Driver: (		Tel:		)	
Policy No: ( )	Period: (	) Cover Type:	(	)	
Confirmed by : (	Date		ne:	)	
Insured/Driver Liability: ( %	) [Note-Est. Status (WO):	N: 0-20%; P: 21-79	%. P: 80-100	%]	
Year of Registration: ( )	11 011011171 1 ( )	0( )			
Excess: (\$ ) Loading: \$		w (0491) brown 77 7 17	President State State		
General Remarks:-					
( ) Walk-In Customer: Customer's	nformation strictly Confidenti	al & Strictly NO refer	of repairer.		
( ) Total Loss Case : to e-mail Ins	surer URGENTLY.				
Drive-In ( )/ Towed-In ( ); Invo	oice: YES ( ) / NO (	); Towing Co: (	1		)
				Transactor to the	02.20
D	VANCE OF THE PARTY	Date&Time	Completed :	Done	by .
		Date&Time	Completed	Done	by
Apply for Transport Allowance ( )		Date&Time	Completed	Done	by
Apply for Transport Allowance (     QC Check / Post Repair Inspection	/ Courtesy Car ( )	Date&Time	Completed	Done	by
Apply for Transport Allowance ( )	/ Courtesy Car ( )	Date&Time	omple:ad	Done	by
Apply for Transport Allowance (     QC Check / Post Repair Inspection	/ Courtesy Car ( )	Date&Time	Somple: ad	Done	by
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury :	/ Courtesy Car ( )	Date&Time	Completed		by
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury :	/ Courtesy Car ( )	Date&Time			by
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1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury:  Date/Time Actions	/ Courtesy Car ( )	ce Preparation Chr	ckdist	Ant (5)	Aint (3)
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1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury:  Date/Time Actions    Actions   Actions	1 Inyo  Inyo	ce Preparation Che Accident Reporting (\$30 Damege Assessment (\$10 Towing Fee Follow-Through Survey	ckdist ); 0); INC (\$80) \$40/\$	Amt (5) (5) Bill	Aint (3)
1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury:  Date/Time Actions    National Sections	J. ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	ce Preparation Che Accident Reporting (33) Damage Assessment (51) Towing Fee Follow-Through Survey Follow-Through Survey (Peleiming against INC Only	Cklist.  (i); (i); (i); (i); (i); (i); (i); (i)	Ant (5) (5: Bill) 45 20 30	Aint (3)
1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury:  Date/Time   Actions    National State   Actions	Invo  Invo  1) AR: 2) DA: 3) TF: 4) FT: 5) FT: Fore 6) TR:	ce Preparation Che Accident Reporting (33) Damage Assessment (51) Towing Fee Follow-Through Survey Follow-Through Survey (Peleiming against INC Only Re-inspection	Cklist.  (i); (i); (i); (i); (i); (i); (i); (i)	Amt (5) (5) Bill 45 20 30	Aint (3)
1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury:  Date/Time   Actions    National State   Actions	( )   ( )	ce Preparation Che Accident Reporting (336 Damage Assessment (516 Towing Fee Follow-Through Survey (Plaiming against INC Only Re-inspection Idao DA + SMRT Survey JC Additional Services:	Cklist: 0); INC (580)	Amt (5) (5) Bill 45 20 30	Aint (3)
1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury :  Date/Time Actions  Plaimant's Particulars :: river/Owner: ontact No: amaged Portion:	Invo  ( )  ( )  \$3000] ( )  Invo  1) AR:  2) DA:  3) TF:  4) FT:  5) FT:  Fore  6) TR:  7) N1:  8) NTU	ce Preparation Che Accident Reporting (336 Damage Assessment (516 Towing Fee Follow-Through Survey Follow-Through Survey (Felerming against INC Only Re-inspection Idae DA + SMRT Survey IC Additional Services:-	Ckdist  (i); INC (\$80)  \$40/\$  (wef 10 Jan 2005)  \$1	Amt (5) (5) Bill 45 20 30	Aint (3)
1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury :  Date/Time Actions  Plaimant's Particulars :: river/Owner: ontact No: amaged Portion:	Courtesy Car (	ce Preparation Chr Accident Reporting (\$30 Damage Assessment (\$10 Towing Fee Follow-Through Survey Follow-Through Survey (Palaiming against INC Only Re-inspection Idao DA + SMRT Survey JC Additional Services: Courtesy Car / Tpt Allower Repair Co-ordination	Cklist.  (i); (i); (i); (i); (i); (i); (i); (i)	Ant (5) (5) Bill 45 20 30 75	Aint (3)
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury :  Date/Time Actions  Lumant's Particulars ::  river/Owner:  ontact No:  amaged Portion:  C Checked by (Engr-In-Charge):	Courtesy Car (	ce Preparation Chr Accident Reporting (\$36 Damage Assessment (\$16 Towing Fee Follow-Through Survey Follow-Through Survey (Plaiming against INC Only Re-inspection Idao DA + SMRT Survey JC Additional Services:  Courtesy Car / Tpt Allowe Repair Co-ordination Post Repair Inspection DV / Collect Excess Coor	Cklist  (i); (i); (i); (i); (i); (i); (i); (i)	Amt (5) (5) Bill  45 20 30  75 60  85 10 25 55	Amt (3)
1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury :  Date/Time Actions  Lamant's Particulars :-  priver/Owner:  ontact No:  amaged Portion:  C Checked by (Engr-In-Charge):	( )   ( )	Ce Preparation Che Accident Reporting (53) Damage Assessment (51) Towing Fee Follow-Through Survey Follow-Through Survey (Peleiming against INC Only Re-inspection Idao DA + SMRT Survey JC Additional Services: Courtesy Car / Tpt Allowa Repair Co-ordination Fost Repair Inspection DV / Collect Excess Coor N11): TP (N-in INC) again	Cklist  (i); (i); (i); (i); (i); (i); (i); (i)	Ant (5) (5) Bill 45 20 30 75 60	Ant (3)
1) Apply for Transport Allowance ( ) 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury :  Date/Time Actions	( )   ( )	ce Preparation Che Accident Reporting (53) Damege Assessment (51) Towing Fee Follow-Through Survey (Pelaiming against INC Only Re-inspection Idao DA + SMRT Survey JC Additional Services:  Courtesy Car / Tpt Allower Repair Co-ordination Post Repair Inspection DV / Collect Excess Coor N11): TP (Non INC) again: Idao Mobile	Cklist  (i); (i); (i); (i); (i); (i); (i); (i)	Ant (5) (5) Bill 45 20 30 55 10 25 55 20	Amt (5)

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

olo(codig.	
West of the control o	ACCIDENT STATEMENT
Date Of Report	13/12/2019 13:39
Date Of Accident	12/12/2019 09:15
Exact Location Of Accident	DEFU LANE 10
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBB4948E
Insured/Policyholder	
Name Of Registered Owner	ESPIRIT BUILDING & ENGINEERING PTE LTD
Co Reg No	200415274N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63855618
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	DYNA 150 MANUAL 3SEATER
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5111382118
Cover Note Number	
Driver	
Name of Driver	TOH TENG HUAT

NRIC No. S1208377G Date Of Birth 30/05/1956 OUTDOOR Occupation 06/01/1978 Date Of Driving Pass 41 YEARS AND 11 MONTHS **Driving Experience** MALE Gender Mobile Number (LOCAL) +65-96947973 Fax Number OFFICE-96947973 Contact Number

NOEMAIL

**EMail Address** 

BLK 691 HOUGANG STREET 61 Address

#04-282

530691 Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

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 YES

Was any other material or property damaged?

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

NO

Number of Passengers (Including Driver)

1

**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

NO

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20191212/7021.

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 YM6515C

Vehicle Make/Model/Colour

**Details Of Properties** 

COMMERCIAL VEHICLE Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 21

# Name TOH TENG HUAT Approximate Age Injuries Sustain BODY Injured person in which vehicle? GBB4948E Were seat belts worn? YES Was this injured conveyed to hospital by ambulance? Address Postcode

### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This form must be completed by the Policyholder and/or the Authorised Driver.
- 3 information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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 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.

\* OHI SOUTONG PERSON

Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyhoider)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

SKETCH PLAN Venicle A: GBB4946E vehicle B YMESISC DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ecter to joince report .

DECLARATION

/We deplace the long going particulars are true in every respect.

Policyholder stelline

Seq No. 2564152749

Date & Time:

Driver's Signature

(II driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

White Statebellinsteam As

Date of Accident	12 12 1019 Accident Time: 09 15 HPS (24-HR-Format)
Accident Place	Detu lane 10
Vehicle Reg. No. (Car Plate No.)	G884948E
Vehicle Make/Model	: Toyota Dyna
Insurance Company	NTUL Policy No.
Owner or Company Name /IC No.	Espirit Building & Engineering de Ud
Owner or Company Contact No.	Owner's Hp 63855618 Company Tel
DRIVER'S Name / IC No.	: Toh Teng Huat
DRIVER'S Date Of Birth	: 30 05 1956 DRIVER'S License Pass Date 06 01 1978
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Employee
DRIVER'S Address	: BIK 691 Hougang street 61 # 04-182
DRIVER'S Contact No./ Alt No.	:1) 96947973 2)
DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address	: Admin @ mycar.sg
Weather & Road Surface	: CLEAR & DRY \RAINING & WET \AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including D	river): 0
Was there any video Captured by or Exact purpose for which vehicle wa	ar camera: YES (NO) s being used at the time of accident: Private use \ Work purpose
Other I	Party Driver's Particular (if auv)
Vehicle Reg. No: YM 6313C	Vehicle Reg. No:
Vehicle Make Wodel:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver:	IC No. Driver;
Driver's Contact & Add:	Driver's Contact & Add:

injuries





Date of Expiry:

1 of 3 Report No: T/20191212/7021

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

Occupation:

Lorry driver

REPORT	OF A TRAFFI	CACCIDENT				
	me Report N 019 17:29	Made:	Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars		1 200		
	f Informant: NG HUAT		Address: APT BLK 691 HOUGA 530691	ANG STREET 61 #04-282 SINGAPORE		
ID Type / ID No.: NRIC NO / S1208377G			Contact No.: Home/Office: Mobile: 96947973			
National SINGAP	ity: ORE CITIZ	EN	Email: admin@mycar.sg			
Sex: Male	Age: 63	Date of Birth: 30/05/1956	Type of Informant: Driver			
Race: Chinese	0		Language: English	Institution / School Name:		

Driving Licence Information: Class: 3

General Infor	mation of the Acci	dent		
Type of Accident:	Injury Others	Drink Drive: No.	Date/Time of Accident: 12/12/2019 09:15	Type of Location: Straight Road
Location: DEFU LANE Weather:	10	Road Surface:		Road Speed Limit:
Clear		Dry		50 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collis REAR TO HE	ion: AD			Anyone conveyed by ambulance: No

Details of Vehicle Involved							
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger	
GBB4948E	Lorry	TOYOTA	DYNA	Blue	Seriously Damaged		
YM6515C	Lorry					0	

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





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20191212/7021

### CONTINUATION OF REPORT

Driver		100			196 See 6	** (是) (10 ) (10
Name	TOH TENG HUAT			ID No		S1208377G
Related Vehicle	GBB4948E (Lorry)			Contact No. 96947973		96947973
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		9	Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	12/12	2/2019	
No. of Days gran	ted Medical Leave	03	Degree of		Slight	

### Brief Details.

ON THE STATED TIME AND DATE,

I WAS TRAVELLING ON MY VEHICLE BEARING CARPLATE NUMBER GBB4948E ON DEFU LANE 10, WHILE GOING STRAIGHT, VEHICLE B BEARING CARPLATE NUMBER YM6515C REVERSED OUT FROM THE SIDE OF THE ROAD AND COLLIDED ONTO THE FRONT PORTION OF MY VEHICLE. MY VEHICLE FRONT PORTION WAS BADLY DAMAGED AND MY WINDSCREEN SHATTERED. I FELT MUCH PAIN AND CONSULTED A DOCTOR WHICH I WAS THEN AWARDED





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20191212/7021

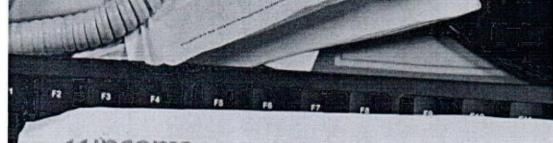
# CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan

Authentication Stamp

NP168

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/12/2019 17:29
Officer In Charge Of Case: TP / TPHQ / WONG SIEU LUI Contact No.: 65476151	Classification Of Case:



# ( income

### Certificate of Insurance

Cover | Comprehensive

ESPIRIT BUILDING & ENGINEERING PTE LTD.

PHATESVSOK200525

GBB4948E

30 Aug 2019

29 Aug 2020

MOTOR VEHICLES (THIRD PARTY RUSES AND COMPENSATION) ACT (CHAPTER 289). MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960. ROAD TRANSPORT ACT, 1997 (MALAYSIA)

MOTOR VEHICLES (THERO PARTY ROSKS) BULES, 1959 (MALAYSIA)

## Certificate Number - 5111 582118-000002

- 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. Fernant or Classes of Persons entitled to drive!
- (a) The Policyholder
  - (b) Any other person who is driving on the Policyhalder's order or with his/her permission Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any coachinest or regulation in that behalf from driving the Motor Vehicle.
- 6. Limitations as to Used
  - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.
  - (b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

### This Policy does not cover

- (a) Use for hire or reward,
- (b). Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Trans 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) EXCESS (SECTION 2)

WINDSCREEN EXCESS

INSURE WITH COE

HIRE PURCHASE COMPANY

SUM INSURED

\$\$600 14/4

55100

YES:

ETHOZ GROUP LTD.

MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

Whe hereby Certify that the Policy to which this Certificate relates in listed in accordance with the provisions of the Motor Vehicles (Third Party Risks and Composition) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency

NET LINK COMMERCIAL PTE, LTD. (00000615136)

Date of Issue

23 Jul 2019 17:09 hvs.

FOR NEUE INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Chief Executive



Accident MT/1075545								
Policy No.	5111362118	Vehicle No.	G864948E		CCT Discussion			
Certificate No.	\$111382116-000002		S.C. STUE		GST Registratio	n No.	200415274N	
Nicyhalder Name	ESPIRIT BUILDING & ENGINEERING PTE. LT	D.			appeared to the control of the			
Voduct Code	PLEET MASTER INSURANCE	Cover Type	20.00		Policyholder NR	ic.	200415274N	
Contact No. (Mobile)	NIL	Contect No.(Office)	Comprehensive		Loading		0	
Email Address		73 30			Contact No. (Har	me)	********	
ork .	® No ○Yes	Special Remark	2 020		eCode		20	
NCD Protection	No	TCA	® No □ Yes		eCode Reason			
Accident Details	60	NCD Entitlement(%)	0		Private Hire		No	
Report Date	13/12/2019 10:00	Accident Report Within 24 h/s	Yes		Accident Type		Collision - Read to	Rear
late of Accident	12/12/2019	Time of Accident Nhomm	09:15		Country of Acad	lent	Singapore	
eporting Conere		Orange Force			ICM No.			
codent Location	125 DEFU LANE 10							
Total Excess Applicable	•							
cess Type	Per Accident	Windscreen Excess		100.00				
				100.00				
O Standard Excess	600.00	TP Standard Excess						
ED OD Excess		VIED TP Excess			Driver is Covered	12	Not Applicable	
ditional Excess					Driver is Covered	27	Not Applicable	
etal OD Excess Applicable	600.00	Total TP Excess Applicable		92227				
* Benefits		THE THE CANCES WITH FEBRURE		0.00				
GST Registered Inform	ation							
T Registeres	Yes		The second	and the second				
T Registration No.	200415274N		GST Regist GST Status	ration Date	01/09/2	010		
edification History	13/12/2019 10:01:34 System	r changed GST Registration Date f	north Or Aby (Street to		Yes			
	13/12/2019 10:01:34 System	changed GST Status ventied from	n No to Yes	-1,000,00010				
Policyholder Mailing Ad	idress							
idress 1	8 KAKI BUKIT AVENUE 4	Address 2	#01-09 PREMIER	S PAPER COM				
ddress 4					Address 3		SINGAPORE 4158	75
nit No.		Address Type	Singapore address		Post Code		415875	
		Related Policy Number	5111382421					
OI Driver Info								
nver Name		Onver Type						
named driver Name		Driver NRIC			Driver DDB			
		British Hills						
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