NATIONAL Assessment Centre Services. [illegible] NAA2000152Y

Date In: 04/01/2020 17:36	Job description	Date & Time Completed	Done by
Ref No: NA/INC/2000152Y	SAS e-filling		
Veh No: SMP 1705E	E-mail(Ajala 8hrs, AIC 2hrs)		
D.O.A 03/01/2020 07:55	I-Motor Claim Form	MTU078022-001 06/01/2020	
OD / TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		12:42
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel: Fax:)

TP Particulars: Veh No: SJA 6403H INC ( ) / Non-INC ( )

Owner / Driver: (Tel:)

Policy No: ( ) Period: ( ) Cover Type: ( )

Confirmed by : (*Date:* *Time:*)

Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: ($) Loading : $1,000 ( ) / $2,000 ( )

General Remarks

( ) Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

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

Injury :

Date/Time	Action

NA2000136

Customer Acknowledgement

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Additional Comments:

Tel_1:

2 / 3:

1) AR : Accident Reporting ($30)			
2) DA : Damage Assessment ($100)	INC ($40)	$40/$45	
3) TP : Towing Fee		$120	
4) FT : Follow-Through Survey		$30	
5) FT : Follow-Through Survey (Resurvey)		$75	
For claiming against INC Only (wef 10 Jan 2020)			
6) TR : Re-Inspection		$160	
7) NI : Idas DA + SMRT Survey			
8) NTUC Additional Services:			
OD*		$5	
*N5: Courtesy Car / Tpt Allowance		$10	
*N6: Repair Coordination		$25	
*N7: Post Repair Inspection		$5	
*N8: DV / Collect Excess Coordination		$20	
TP (N11) : TP (Non-INC) against INC		30	
9) N12: Idas Mobile			
Invoice dated	Fee Charged		
Invoice dated	Fee Charged		

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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.

ACCIDENT STATEMENT	
Date Of Report	04/01/2020 17:36
Date Of Accident	03/01/2020 07:50
Exact Location Of Accident	ALONG TANAH MERAH COAST ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMP7709E
Insured/Policyholder	
Name Of Registered Owner	DARREN YAU CHUN HON
NRIC No	SXXXX763C
Email Address	DCH-YAU@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82983838
Alternative Phone No	OFFICE-82983838
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC-1.5 (A)
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5114573102
Cover Note Number	
Driver	
Name of Driver	DARREN YAU CHUN HON
NRIC No	SXXXX763C
Date Of Birth	18/07/1994
Occupation	INDOOR
Date Of Driving Pass	16/06/2017
Driving Experience	2 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82983838
Fax Number	
Contact Number	OFFICE-82983838
EMail Address	DCH-YAU@GMAIL.COM

Address	BLK 1B CANTONMENT ROAD #48-23
Postcode	085201
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 - HEAD TO REAR
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
Was any body injured in the Accident?	NO
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)	1

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

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJA6403H
Vehicle Make/Model/Colour	MITSUBISHI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PEH YI SHENG
NRIC/Passport Number	SXXXX158C
Contact Number	90116924
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Claim Handling

Exit

Accident MT/1078633

Policy No.	1134573102	Vehicle No.	SMP7709E	GST Registration No.	
Certificate No.					
Policyholder Name	DARREN YAU CHUN HON			Policyholder NRIC	S9470763C
Product Code	PRIVATE CAR INSURANCE	Cover Type	Drive CLASSIC	Loading	0
Contact No.(Mobile)	82983838	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
NTK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

Accident Details

Report Date	06/01/2020 12:39	Accident Report Within 24 Hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	03/01/2020	Time of Accident hh:mm	07:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No	
Accident Location	ALONG TANAH MERAH COAST ROAD				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YBD OD Excess	0.00	YBD TP Excess	0.00	Driver is Covered?	Covered
Additional Excess	0				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00		

Benefits

Coverage	Sum Insured
Accessory	2000

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 18 #48-23	Address 2	CANTONMENT ROAD	Address 3	THE PINNACLE@DUXTON
Address 4	SINGAPORE 085201	Address Type	Singapore address	Post Code	085201
Unit No.		Related Policy Number	1134573102		

CI Driver Info

Driver Name	DARREN YAU CHUN HON	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S9470763C	Driver DOB	18/07/1994
Register Date of Driver License	18/08/2017	Driver Age	25	Driving Experience	2
Contact No.(Mobile)	82983838	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 18 #48-23	Address 2	CANTONMENT ROAD	Address 3	THE PINNACLE@DUXTON
Address 4	SINGAPORE 085201	Address Type	Singapore address	Post Code	085201
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SMP7709E	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	DARREN YAU CHUN HON	Insured NRIC	S9470763C
Contact No.(Mobile)		Contact No. (Home)		Contact No. (Office)	
Email Address		CI Vehicle Number	SMP7709E	TP Vehicle Number	SJA643H
Claim Description	SMP7709E / SJA643H ON 3 Jan 2020			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault		
Report to Finalise	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	06/01/2020 12:41	Claim Close Date		Date Received	06/01/2020 00:00
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/1078622	Claim No.	001
Last Doc. Received	Yes No	Upload Date	06/01/2020 13:42

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Read Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_BUKIT_MERAH_S00676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Jan 2020 12:42	Photos	Normal	Photos 2020-1-6		Edit
	NAC_BUKIT_MERAH_S00676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Jan 2020 12:41	Photos	Normal	Photos 2020-1-6		Edit
	NAC_BUKIT_MERAH_S00676(NATIONAL ASSESSMENT CENTRE SERVICE	Photos	Normal	Photos 2020-1-6		Edit

	S (BUKIT MERAH)) on 06 Jan 2020 12:42				
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 06 Jan 2020 12:42	Photos	Normal	Photos 2020-1-6	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 06 Jan 2020 12:41	Photos	Normal	Photos 2020-1-6	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 06 Jan 2020 12:41	Photos	Normal	Photos 2020-1-6	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 06 Jan 2020 12:41	Photos	Normal	Photos 2020-1-6	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 06 Jan 2020 12:41	NRIC/ Driving License Y	Normal	NRIC/ Driving License 2020-1-6	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 06 Jan 2020 12:41	SAS	Normal	SAS 2020-1-6	Edit

Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

SKETCH PLAN

IMPORTANT NOTICE

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

   I understand, acknowledge, agree and consent that:

   (a) My insurer, my workshop and the General Insurance Association of Singapore ("**GIA**") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**Personal Information**") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

   (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

   (ii) investigating the accident and/or my claims;

   (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

   (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

   (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "**Purposes**")

   (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

   (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

   (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.

   (e) the information so collected under (d) above may be shared / disclosed:

   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

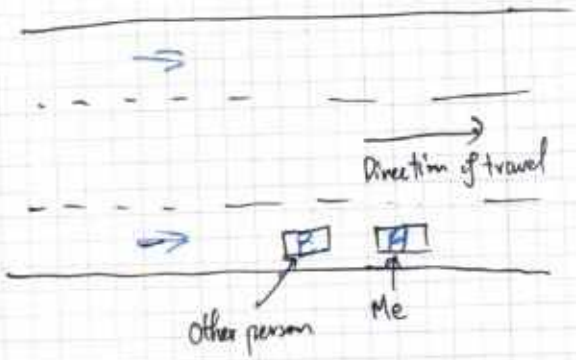
Policyholder's Signature
Date & Time: 4/01/2020

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

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

SKETCH PLAN

ALONG Towards Marlow Coast Road



A) SMP 7709E
B) SJA6403H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the morning of 3 Jan 2020, I was going to work along Tanah Merah Coast Rd. I was travelling at ~ 60 km/h, near the speed limit of the road. A car in front of me braked suddenly, and I followed suit and brake, stopping at a safe distance away from the front vehicle. The vehicle behind me did not brake in time, and collided into my rear. Weather was clear and road was dry.

DECLARATION

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

Policyholder's Signature
Date & Time: 3/1/2020 1632

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

06/01/2020
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: (03 / 01 / 2020) (DD/MM/YYYY), TIME: (07 : 50) (HH:MM)

LOCATION: Tanah Merah Coast Rd

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: SMP 7709 E
   b) INSURANCE COMPANY: NTUC Income
   c) POLICY NUMBER: 5114573102
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: HONDA CIVIC 1.5T
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: Transport
   i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
   IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
2. INSURED / POLICY HOLDER
   A) NAME: Darren Yau Chun Hon (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S9490763C CONTACT: 8298 3838
   c) ADDRESS: 18 Cantonment Rd #46-03 S085201

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

* No of passenger (including driver) (1)

3. DRIVER
   a) NAME: 09 ABOVE (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: CONTACT:
   c) ADDRESS:
   *d) DATE OF BIRTH: (18 / 07 / 1994) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS 16 Jun 2017
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Owner
5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
   b) ROAD SURFACE: (DRY / WET / OTHERS)
6. WAS ANYBODY INJURED (YES / NO)
7. a) REPORTED TO POLICE (YES / NO)
   IF YES, PLEASE STATE WHICH POLICE STATION:
8. THIRD PARTY VEHICLE

* No of passenger (including driver) (1)

   a) VEHICLE NUMBER: SJA6403H MODEL: Mitsubishi
   b) DRIVER'S NAME: Peh Yi Sheng
   c) NRIC/FIN/PASSPORT: S9403158C CONTACT: 9011 6924
9. THIRD PARTY VEHICLE

* No of passenger (including driver) ( )

   d) VEHICLE NUMBER: MODEL:
   e) DRIVER'S NAME:
   f) NRIC/FIN/PASSPORT: CONTACT:

email = deh-yau@gmail.com

VIDEO

Claim Handling

Exit

Accident MT/1078622

Policy No.	0114573102	Vehicle No.	SMF770SE	GST Registration No.	
Certificate No.					
Policyholder Name	DARREN YAU CHUN HON			Policyholder NRIC	S9470763C
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	82983838	Contact No (Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

Accident Details

Report Date	06/01/2020 12:39	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	03/01/2020	Time of Accident hh:mm	07:50	Country of Accident	Singapore
Reporting Centre		Orange Force		IDN No.	
Accident Location	ALONG TANAH MERAH COAST ROAD				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YBD OD Excess	0.00	YBD TP Excess	0.00	Driver is Covered?	Covered
Additional Excess	0				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00		

Benefits

Coverage	Sum Insured
Accessory	2000

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 1D #48-23	Address 2	CANTONMENT ROAD	Address 3	THE PINNACLE@DUXTON
Address 4	SINGAPORE 085201	Address Type	Singapore address	Post Code	085201
Unit No.		Related Policy Number	0114573102		

OI Driver Info

Driver Name	DARREN YAU CHUN HON	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S9470763C	Driver DOB	18/07/1994
Register Date of Driver License	18/08/2017	Driver Age	25	Driving Experience	2
Contact No.(Mobile)	82983838	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 1D #48-23	Address 2	CANTONMENT ROAD	Address 3	THE PINNACLE@DUXTON
Address 4	SINGAPORE 085201	Address Type	Singapore address	Post Code	085201
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SMF770SE	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No

Modification History

Claim 001 New

Claim Type *	OD-RK	Insured Name	DARREN YAU CHUN HON	Insured NRIC	S9470763C
Contact No.(Mobile)		Contact No. (Home)		Contact No. (Office)	
Email Address		OI Vehicle Number	SMF770SE	TP Vehicle Number	RJA640TH
Claim Description	SMF770SE / SJA640TH ON 3 Jan 2020			Name of Preferred Workshop	
Preferred Workshop Request No. Preauthorisation	Insured Liability: Not at Fault; Disallowed Repair Option: Preferred Workshop, Name unknown; GIA report: Received				
Date Registered	06/01/2020 12:41	Claim Close Date		Date Received	06/01/2020 00:00
Report Taken By	RDSL2 WANAB				

Print AR letter

Save Submit

Attachment

Accident No.	MT/1078622	Claim No.	001
Last Doc. Received	Yes No	Upload Date	06/01/2020 12:42

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Head — Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_BUKIT_MERAH_S0067G(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Jan 2020 12:42	Photos	Normal	Photos 2020-1-6		Edit
	NAC_BUKIT_MERAH_S0067G(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 06 Jan 2020 12:42	Photos	Normal	Photos 2020-1-6		Edit
	NAC_BUKIT_MERAH_S0067G(NATIONAL ASSESSMENT CENTRE SERVICE	Photos	Normal	Photos 2020-1-6		Edit

	S (BUKIT MERAH)) on 06 Jan 2020 12:42					
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 06 Jan 2020 12:42	Photos		Normal	Photos 2020-1-6	Edit
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▼ **Video List**

Uploaded By/Date	Poster State	File Name		Source	Action

Display in New Window | Scan and uploading

income
made different

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5114573102 **Cover** : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SMP7709E**
   Chassis Number : MRHFC1660GT000438
2. Name of Policyholder : DARREN YAU CHUN HON
3. Effective Date of Insurance : 10 Dec 2019
4. Expiry Date of Insurance : 09 Dec 2020
5. Persons or Classes of Persons entitled to drive#
   (a) The Policyholder.
   (b) Any other person who is driving on the Policyholder's order or with his/her permission.
   Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
   (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's 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 headings.

EXCESS (SECTION 1)	: S$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: DARREN YAU CHUN HON
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: DBS BANK 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 : B.A.S. INSURANCE AGENCY (00000573236)
Date of Issue : 10 Dec 2019 14:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer **Chief Executive**