ASS. REC. BY: SALVA	REF (S Sm0 2000) ASSIGNMENT		
From (Person); GM a 110	of Smo	Di	ate/Time: B. Jan. 2000 1.49p M
Estimate Cost:		1 to:	
OD (FP) WS / TP RES / OD RES To Inspect Vehicle No:		Insured:	Sk s 7157E
at Workshop m/s Mova Auton of BIK 1003 Buich humb		Tel:	Sks 7157E 627 13892
Policy No:		Claim No: CMTD 20	000 49 / SYH
Sum Insured:		Excess:	
Make of Veh:		D.	O.A. 31.12.2019
(Client's Record) CA / REV / REP. / REV 24 H Date/Time 4.1.200 2.13p. h			H.O.D. Endorsement:
	(V) Estimate	Annit Veh	icle IN AOUT
15/1 - 10:43am re	mised hia	pveli advis	Q

Date/Time, File Pass to?

Daterume, File Return to?

Report Format:

Lump Sum / LBJ: CL

1)

: Preli. Report

: Final Report

SSURECURY STEVE SMO	ASSIGNMEN	Τ		
rom Date 14 01)		SKZ 2670K / M.Cycle / Bus / Van /	Yr Regn: S Lorry / Taxi / Prime M	
TP WS / TP RES / OD RES / EVA / INV / MV	-	c/Trailer or		
o Inspect Vehicle No: SKZ 2670 K	Make:	Vissan Teang	C.C	1997
Workshop m/s Mova Automotiv		White		/Std/NI/NA
BIK 1008 Bulkit merch lone 3#01-	04 Sp.Reading	67845	T/Radio: Insured	/Std/NI/NA
sured:	Eng/No:			
olicy No.	C/No:	MNTBBAL	3320005524	
aims No.	Gen. Cond:	Good / Fair / Poor / Bur	and the same of th	
ım Insured: Excess:	Steering: In	order / Jammed / Leake	d/Burnt or	
(Client's Record)	Brake: In	order / Jammed / Leake	d / Burnt or	
ake of Veh: After Ipm	Modi: Nil	/ SRim / STD A/Rim		
	Tyre Size:	F: 215/55	RI /	
(Policy Condition)		R:		
emark: The veh had commenced its N/S		EXNOVA / GY / FS / LIZ	A MMIG / OHTSU / PIR	/SUMI/
repair at the time of inspection.	TOYOIY	OKO or		
al. or Market Value:	Front	_	Rear	e;
AC Accident Rport: Consistent? : Yes or No	R/Bal.	S mm	R/Bal.	nnm
IA / PR Seen: Consistent? : Yes or No	L/Bal.	Smm	L/Bal.	mm
st, Repairs: days Res.; Yes or No	D.O.A.	31/12/19	D.O.I. 14/1 , OM March	120
um Sum: % 3 Val.: Yes or No	'Survey held	lat Mov4	, wa man	
A / REV / REP. / 24 HRS WY	Des. of Dar	mages:Frt/Rear/O/	S / N/S / U/C / Roo	ftop or
Person Contacted:	Control of the Contro	7 Chassis frame / Bo	ody Structure affected	due to collision
Date / Time Action / Instruction				

Days Of Repair:

Add Fee:

Resurvey No. of Trip:

Site Insp (\$

Interview (\$

Tech. Invs (8

Westend (%

Survey Fee:

Transportation:

S+RS_SI

Photos

Others

Nivitha (LKK Auto)

From:

Teo, Grace <grace.teo@sompo.com.sg>

Sent:

Wednesday, 8 January 2020 1:49 PM

To:

nitha@mova.com.sg; Hwang, Shiang Yi; 'admin-d@lkkauto.com';

'assignments@lkkauto.com'

Cc:

Ye, Yong Kang Melvin; Henry, Irene James

Subject:

CMTD2000049/SYH - SKS7157E & SKZ2670K DOA 31/12/2019 AT JUNCTION OF

GRANGE RD & NAPIER ROAD

Attachments:

RPT.PDF; EST.pdf

Without Prejudice

Our Reference: CMTD2000049/SYH

Your Reference: SKZ2670K

Hi Nitha,

We acknowledged receipt of your claim documents.

Please be informed that Ms. Hwang Shiang Yi is the handler of this case who can be contacted at 63295 205/ shiangvi.hwang@sompo.com.sg.

Please be informed, we have appointed LKK AUTO to survey the above vehicle.

Aside to LKK AUTO,

Please make arrangement to conduct the survey for **SKZ2670K** on a without Prejudice and any admission of liability basis and submit with your report upon completion of survey to my colleague, **Ms. Shiang Yi**.

Please note our office will be closed on 24th January 2020 (Friday). Business will resume on 28th January 2020 (Tuesday).

Wishing you a happy and prosperous Lunar New Year, filled with wealth, good health and success always!

Best Regards

Grace Teo

Claims Division

D: 6329 5170 | T: 6461 6555 | F: 6221 3147

For motor claims survey request, please email to motorsurvey@sompo.com.sg



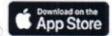
A Century of Trust

Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623 Website: www.sompo.com.sg | Facebook: www.facebook.com/SompoSG

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From: Nitha <nitha@mova.com.sg>

Sent: Wednesday, January 8, 2020 9:45 AM

To: Claims - Motor Survey < Motor Survey @sompo.com.sg>

Cc: jacelyn@mova.com.sg

Subject: TP CLAIMS - SKZ2670K AGAINST SKS7157E DOA 31/12/2019 AT JUNCTION OF

GRANGE RD & NAPIER ROAD

Dear All,

Kindly advise officer in charge and assign surveyor for the above mention case,

Thank you

Best Regards,
Nitha
Claims Officer
Mova Automotive Pte Ltd

Tel: 6272 3892 Fax: 6270 8314









51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Your Ref: CMTD2000049/SYH

Date: 15/01/2020

Our Ref: CS/SMO20000517/Etf3

The Motor Claims Department SOMPO INSURANCE SINGAPORE P

Dear Sirs/Mdm

PRELIMINARY ADVICE OF VEHICLE NO. SKZ 2670K

Please be informed that we had conducted the inspection of the above-mentioned vehicle on 14/01/2020 at the premises of M/s Mova Automotive and have the following to report: -

Workshop Estimate Amount	: S\$	6,543.80
Revised Estimate Amount	: S\$	4,313.50
"Check" Items Amount	: S\$	719.10
Market Value	: S\$	
LTA Reimbursement Value	: S\$	
Nett Value	: S\$	

Description of Damage:

The vehicle sustained damages at the rear portion and parts.

Repair days: 5

Comments/ Present Status:

Damages Consistent.

Yours faithfully Steve Chen Automotive Assessor



Denise Tay (LKKAuto)

From:

Denise Tay (LKKAuto)

Sent:

Wednesday, 15 January 2020 10:43 AM

Admin-D (LKKAuto); 'Teo, Grace'; SUR; 'Hwang, Shiang Yi'; assignments

To: Cc:

'Ye, Yong Kang Melvin'; 'Henry, Irene James'

Subject:

RE: CMTD2000049/SYH - SKS7157E & SKZ2670K DOA 31/12/2019 AT JUNCTION

OF GRANGE RD & NAPIER ROAD

Attachments:

PRELI ADVISED OF SKZ 2670K.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SKZ 2670K

Number of days (estimated): 5 days

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: denisetay@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>

Sent: Wednesday, 8 January 2020 2:14 PM

To: 'Teo, Grace' <grace.teo@sompo.com.sg>; SUR <sur@lkkauto.com>; 'Hwang, Shiang Yi'

<shiangyi.hwang@sompo.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Ye, Yong Kang Melvin' <melvin.ye@sompo.com.sg>; 'Henry, Irene James'

<irene.henry@sompo.com.sg>

Subject: RE: CMTD2000049/SYH - SKS7157E & SKZ2670K DOA 31/12/2019 AT JUNCTION OF

GRANGE RD & NAPIER ROAD

Dear Sir/Madam.

Thank you for your assignment.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Teo, Grace <grace.teo@sompo.com.sg>

Sent: Wednesday, 8 January, 2020 1:49 PM

To: nitha@mova.com.sg; Hwang, Shiang Yi <shiangyi.hwang@sompo.com.sg>; 'admin-d@lkkauto.com'

<admin-d@lkkauto.com>; 'assignments@lkkauto.com' <assignments@lkkauto.com>

Cc: Ye, Yong Kang Melvin <melvin.ye@sompo.com.sg>; Henry, Irene James

<irene.henry@sompo.com.sg>

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.

By the lodgement of this report to the insurers, you aforesaid,	u 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	31/12/2019 15:29
Date Of Accident	31/12/2019 14:00
Exact Location Of Accident	JUNCTION OF GRANGE RD & NAPIER ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKZ2670K
Insured/Policyholder	
Name Of Registered Owner	NG KHENG HUA
NRIC No	SXXXX612C
Email Address	NG_KHENGHUA@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97517519

OTHERS-NOPHONE

Alternative Phone No. Vehicle Particulars

NISSAN Manufacturer

Model TEANA 2.0 XL CVT

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?

If No, Please state action to be taken

THIRD PARTY

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

5103824385

Cover Note Number

Driver

Name of Driver NG KHENG HUA NRIC No SXXXX612C Date Of Birth 13/08/1963 Occupation INDOOR Date Of Driving Pass 16/12/1983

36 YEARS AND 0 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-97517519

Fax Number

OTHERS-NOPHONE Contact Number

EMail Address NG_KHENGHUA@YAHOO.COM.SG

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars Owner ID Type:	
Owner ID:	Singapore NRIC
Vehicle Details	612C
Vehicle No.:	
Vehicle to be Exported:	SKZ2670K
Intended Deregistration Date:	No
Vehicle Make:	14 Jan 2020
Vehicle Model:	NISSAN
Primary Colour:	TEANA 2.0 XL CVT
Manufacturing Year:	White
Engine No.:	2015
Chassis No.:	MR20042195R
Maximum Power Output:	MNTBBAL33Z0005524
Open Market Value:	100.0 kW (134 bhp)
Original Registration Date:	\$24,198.00
First Registration Date:	15 Jan 2016
Transfer Count:	15 Jan 2016
Actual ARF Paid:	2
Intended PARF Rebate Details	\$25,878.00
PARF Eligibility:	160-170
PARF Eligibility Expiry Date:	Yes
PARF Rebate Amount:	14 Jan 2026
ntended COE Rebate Details	\$19,408.00
COE Expiry Date:	14 (2007
COE Category:	14 Jan 2026
COE Period(Years):	B - Car above 1600cc or 97kW (130bhp) 10
QP Paid:	
OE Rebate Amount:	\$54,920.00
otal Rebate Amount: nformation contained herein is correct as at 14 J	\$32,952.00 \$52,360.00

OK



Estimate

07/01/2020

SOMPO INSURANCE SINGAPORE PTE LTD **50 RAFFLES PLACE** #05-01/06 SINGAPORE LAND TOWER SINGAPORE 048623.

Page # :- 1

Veh# :- SKZ2670K

Veh Model :- NISSAN TEANA 2.0XL CVT

Estimate# :- CK420204

Claim # :- TP/CK137269

ACC. Date :- 31/12/19

Terms :- C.O.D Days

Workshop Dept: Block 1008, Bukit Merah Lane 3,

Tel: (65) 6476 3333 Fax: (65) 6271 5891

www.mova.com.sg

Main Office: Mova Building No. 22, Jalan Kilang, Singapore 159419

#01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892

Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

1. 2. 3.			У	U.Frice	Amo	ounts S\$
2.	NET ITEMS:					
3.	BOOTLID / [//	1	PC	798.00		798.00
	BOOTLID LÓGO / NC	1	31303330	59.00		59.00
4.	BOOTLID EMBLEM - TEANA /	1	PC	89.00		89.00
5.	BOOTLID EMBLEM - 2.0 XL / //(1	PC	86.00		86.00
6.	BOOTLID EMBLEM PLATE - XTRONIC CVT / NK	1	PC	59.00		59.00
7.	BOOTLID LOCK / BT ?	1	PC	155.00		155.00
8.	REAR BUMPER / M	1	PC	142.00		142.00
9.	REAR PARKING SENSOR CTR LH	1	PC	849.00		849.00
10.	REAR PARKING SENSOR CTR RH	1	PC	220.00		220.00
11.	REAR BUMPER CLIPS / 1/10	1	PC	220.00		220.00
12.	REAR BUMPER SIDE RETAINER LH / CR	10	PC	4.00		40.00
13.	REAR BUMPER SIDE RETAINER RH /	1	PC	53.00		53.00
14.	REAR BUMPER SPONGE	1	PC	53.00		53.00
15.	REAR BUMPER REINFORCEMENT	1	PC	245.00		245.00
16.	ELECTRICAL ANTENNA	1	PC	534.00		534.00
17.	END PANEL TOP GARNISH	1	PC PC	264.00		264.00
18.	END PANEL !	1	PC	148.00 464.00		148.00 464.00
19.	TAILLAMP LH X	1	PC	402.00		402.00
20.	TAILLAMP RH X	1	PC	402.00		402.00
21.	BOOTLID HINGE LH + RH - REPAIR X	2	PC	302.00		702.00
22.	SPARE TYRE PANEL - REPAIR V	1	PC			
	NET TOTAL S\$					E 202 00
	10% DISCOUNT S\$					5,282.00 -528.20
				*****		4,753.80
	LABOUR :			****		
	TO INSPECT REAR LIGHTING MECHANISM				30	80.00
	TO CUT OFF END PANEL. TO REPLACE DAMAGED ITEM					
	REALIGN CONNECTION					600.00
	TO REMOVE & REFIT REAR COMPARTMENT ATTACHMENT				30	150.00
	TO APPLY BODY JOINT SEALANT				30	80.00
	TO RUST PROOF ON REPAIRED AREAS				30	80.00
	TO SPRAY PAINT ON REPAIRED AREAS			-	200	
	Consideration and the Consideration of the Constant Const			1	100	800.00



Estimate

07/01/2020

SOMPO INSURANCE SINGAPORE PTE LTD **50 RAFFLES PLACE** #05-01/06 SINGAPORE LAND TOWER SINGAPORE 048623.

Page #

137269

Veh#

:- SKZ2670K

Veh Model :- NISSAN TEANA 2.0XL CVT

Estimate# :- CK420204

Claim #

ACC. Date :- 31/12/19

Jacelyn

Terms

:- C.O.D Days

Remarks :-

No. 22, Jalan Kilang, Singapore 159419 Tel: (65) 6476 3333 Fax: (65) 6271 5891 www.mova.com.sq

Workshop Dept:

Main Office: Mova Building

Block 1008, Bukit Merah Lane 3, #01-04/06/08/94 Singapore 159722

Tel: (65) 6272 3892

Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

Attention :- XA018

No.

Description

Qty

U.Price Amounts S\$

E. & O.E

NON-TAX AMOUNT S

AMOUNT S\$

6,543.80

GST @ 7 %

458.07

AMOUNT DUE S\$

7,001.87

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD

LKK Auto Consultants hence notify the Repairer of the following: . To resurvey before/after spray painting . To display damaged part(s) during resurvey

. Parts prices are subject to confirmation

. Third party survey is on a "Without Prejudice" basis

. No illegal modification(s) is allowed

. Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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

	ACCIDENT STATEMENT	
Date Of Report	31/12/2019 15:29	
Date Of Accident	31/12/2019 14:00	
Exact Location Of Accident	JUNCTION OF GRANGE RD & NAPIER ROAD	
Country/State of Loss	SINGAPORE	

DETAILS OF OWN VEHICLE	
SKZ2670K	
NG KHENG HUA	
SXXXX612C	
NG_KHENGHUA@YAHOO,COM.SG	
(LOCAL) +65-97517519	
OTHERS-NOPHONE	
	NG KHENG HUA SXXXX612C NG_KHENGHUA@YAHOO.COM.SG (LOCAL) +65-97517519

ven	ıcle	Par	ticu	lars

NISSAN Manufacturer

TEANA 2.0 XL CVT Model

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?

If No, Please state action to be taken

THIRD PARTY PRIVATE CAR

Vehicle Category

Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

Policy Number 5103824385

Cover Note Number

Driver

Name of Driver NG KHENG HUA NRIC No SXXXX612C Date Of Birth 13/08/1963 **INDOOR** Occupation 16/12/1983 Date Of Driving Pass

Driving Experience 36 YEARS AND 0 MONTHS

Gender MALE

(LOCAL) +65-97517519 Mobile Number

Fax Number

Contact Number OTHERS-NOPHONE

EMail Address NG_KHENGHUA@YAHOO.COM.SG Address

BLK 30 HOLLAND CLOSE

#11-197

Postcode

270030

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

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

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)

2

Passenger 1

NAME:

: NG NGAI PENG

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

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

SUBMITTED VIDEO FOOTAGE TO INSURANCE DIRECTLY

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKS7157E

Vehicle Make/Model/Colour Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

TAN LIAN LIAN

NRIC/Passport Number

Contact Number

96831980

Address

Postcode

Insurance Company Name

SOMPO INSURANCE SINGAPORE PTE. LTD.

Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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.
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- 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:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Control ersonnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan Pg. 2

	y u int		~	I MADIA M	Da
KETCH,PLAN A	Touthe Light	0	۲٬. ۶	Tanglin R	-
KETCH PLAN	TITILITY AT	XI (TI	Him		Heli
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		7-1-1-1			+
		B			-
					T
	1 1 0				
	Gra	-ge Ro	ad		
DESCRIBE CIRCUMSTANCES					
LICENSE PLATE: 5 KZ	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM	ACCIDENT	DATE & TIME: 31	Dec 2019 about	2
CONTACT NUMBER: 9751	7519	E-MAIL ADD	DRESS: NA-EL	enghua Oyaliss.	4
LOCATION: Junction		. 0 + ^	lacie D.	.0	-
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