

NATIONAL Assessment Centre Services.

(Ref: JAR/00)

MAH20009886

Date In: 20/01/2020 16:15	Job description	Date & Time Completed	Done by
Ref No: NBS/INC 20001194/4	SAS e-filing		
Veh No: SL7 1324H	E-mail (Within 2hrs, AIC 2hrs)		
DOA: 18/01/2020 18:10	I-Motor Claim Form		
OD: ☒ Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: GBJ 3319S	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%. P: 80-100%]	
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	
() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repolar.		
() Total Loss Case: to e-mail Insurer URGENTLY.		
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()		

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

Injury: ()	
Damage: ()	
Other: ()	

NA2000765	Invoice / Receipt
Driver/Owner:	1) AR: Accident Reporting (\$30)
Contact No:	2) DA: Damage Assessment (\$100) INC (\$10)
Damaged Portion:	3) TP: Towing Fee \$40/\$45
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey \$110
	5) PT: Follow-Through Survey (Resurvey) \$30
	6) TR: Re-inspection \$70
	7) NI: 1000 DA + SMRT Survey \$160
	8) NTUC Additional Services:
	ON:
	• NI: Courtesy Car / Tpl Allowance \$3
	• NI: Repair Co-ordination \$10
	• NI: Post Repair Inspection \$21
	• NI: DV / Collect Excess Coordination \$3
	• NI: TP (Non-INC) against INC \$20
	• NI: 1000 Mobile \$6
	Invoice dated
	Invoice dated
	Fee Charged
	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 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. 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	20/01/2020 16:15
Date Of Accident	18/01/2020 18:10
Exact Location Of Accident	BARTLEY ROAD BEFORE JUNCTION OF SERANGOON AVENUE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT1334H
Insured/Policyholder	
Name Of Registered Owner	WARNI & FAIZ
Co Reg No	5XXX679M
Email Address	WISHKU@YAHOO.COM
Mobile Phone No	(LOCAL) +65-92994352
Alternative Phone No	OFFICE-92994352

Vehicle Particulars

Manufacturer	TOYOTA
Model	CHR
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?	YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
------------------	--------------------

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095185680-02
Cover Note Number	

Driver

Name of Driver	JAMALUDIN BIN KASSIM
NRIC No	SXXX043H
Date Of Birth	13/10/1959
Occupation	INDOOR
Date Of Driving Pass	01/02/2002
Driving Experience	17 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92994352
Fax Number	
Contact Number	OTHERS-92994352
Email Address	WISHKU@YAHOO.COM

Address	BLK 234 JURONG WEST STREET 21 #09-304
Postcode	600234
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	2
Passenger 1	NAME: : WARNI BINTE AMAN 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

PLEASE REFER TO SKETCH PLAN

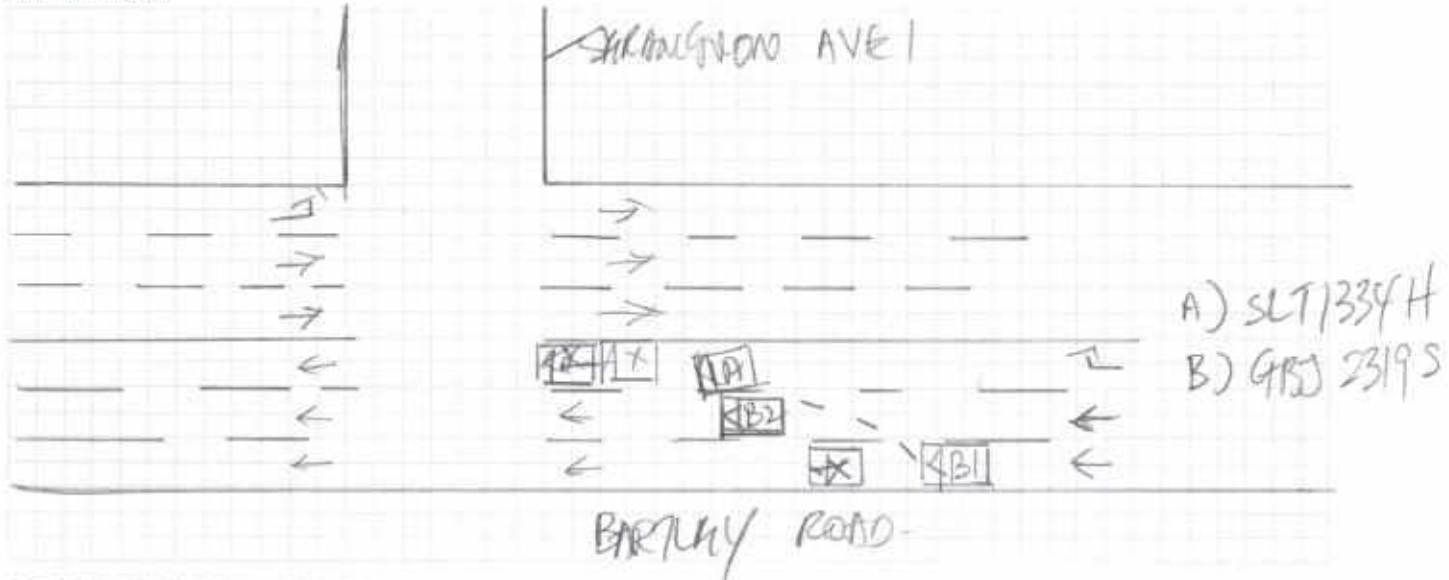
Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBJ2319S
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LAW KIEN CHONG (LIU JIANHONG)
NRIC/Passport Number	SXXXX280D
Contact Number	98275481
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 18/01/2020 AT ABOUT 18:10H I WAS AT BARLEY ROAD JUNCTION ON SKRAGGTON AVE 1, I WAS AT THE EXTREME RIGHT LANE & WAITING TO GO TO THE (PARK LANE TO GO STRAIGHT), I INCH OUT A LITTLE BIT WITH SIGNAL LIGHT ON, SUDDENLY A VAN GBJ 2319S FROM FIRST LANE SWITCH LANE & BACK INTO MY FRONT RIGHT. ON MY CAR SLT1334H. THAT ALL. VIDEO WAS GIVEN TO IAC PERSONNEL.

DECLARATION

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

WARNI & FAIZ

REG 53371679M

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: 18/01/20 (DD/MM/YYYY), TIME: 18:10 (HH:MM)

LOCATION: Bartley Rd before junction Serangoon Ave 1

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SL7 1334 H
 b) INSURANCE COMPANY: NIC
 c) POLICY NUMBER: 5095185680-02
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: TOYOTA CHR
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: WARNI FAIZ (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 53371679M CONTACT: _____
 c) ADDRESS: BLK 234 #09-304, JURONG EAST STREET 21, SINGAPORE 600234

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: JAMALUDIN B. KASSIM (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S 2704043 H CONTACT: 92994352
 c) ADDRESS: BLK 234 #09-304, JURONG EAST STREET 21, SINGAPORE 600234

* d) DATE OF BIRTH: (13/10/1959) (DD/MM/YYYY)

- e) OCCUPATION: INDOOR / OUTDOOR
 f) DATE OF DRIVING PASS: 01/02/2002

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HUSBAND

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

- a) VEHICLE NUMBER: G B3 2319 S MODEL: NISSAN
 b) DRIVER'S NAME: LAW KIAN CHONG (LIU JIANZHONG)
 c) NRIC/FIN/PASSPORT: S 7137280 D CONTACT: 98275481

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

No. of passengers
 (including driver)
(2)

No. of passengers
 (including driver)
()

No. of passengers
 (including driver)
()

Email: wishku@yahoo.com

VIDEO

Claim Handling

Accident MT/1080991

Policy No.	5095185680-02	Vehicle No.	SLT1334H	GST Registrati
Certificate No.				
Policyholder Name	WARNI & FAIZ			Policyholder Ni
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	92994352	Contact No.(Office)		Contact No.(Hi
Email Address		Special Remark		eCode
KFK	☐ No ☒ Yes	TCA	☐ No ☒ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	40	Private Hire

Accident Details

Report Date	20/01/2020 16:24	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	18/01/2020	Time of Accident hh:mm	18:10	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	BARTLEY ROAD BEFORE JUNCTION OF SERANGOON AVENUE 1			

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess	600.00	TP Standard Excess	0.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Cover
Additional Excess	0			
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00	

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	20/01/2020 16:25:17 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	BLK 234 #09-304	Address 2	JURONG EAST STREET 21	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	09-304	Related Policy Number	5095185680-02	

OI Driver Info

Driver Name	JAMALUDIN BIN KASSIM	Driver Type	Named Driver	
Unnamed driver Name		Driver NRIC	52704043H	Driver DOB
Register Date of Driver License	01/02/2002	Driver Age	60	Driving Exper
Contact No.(Mobile)	92994352	Contact No.(Office)		Contact No.(Hi
Address 1		Address 2		Address 3
Address 4		Address Type	Foreign address	Post Code
Unit No.				
Does he own a Singapore Registered car?	☒ Yes ☐ No	Driver Vehicle No.	SLT1334H	Driver Insurer

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

Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	WA
Contact No.(Mobile)	92392470	Contact No. (Home)	
Email Address		OI Vehicle Number	SLT
Claim Description	SLT1334H / G8J2319S ON 18 Jan 2020		
Preferred Workshop	Insured Liability	Not at Fault	
Repair No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered	20/01/2020 16:30	GIA report	Received
Report Taken By	ROSLI WAHAB		

Print AK letter

Save Submit

Attachment

Accident No. MT/1D80991 Claim No. 001
 Last Doc. Received * Yes ☐ No ☐ Upload Date 20/01/2020 16:32

Path *		Category *		Confidential
Choose File	No file chosen	Clear	Please Select ▼	NO
Choose File	No file chosen	Clear	Please Select ▼	NO
Choose File	No file chosen	Clear	Please Select ▼	NO
Choose File	No file chosen	Clear	Please Select ▼	NO
Choose File	No file chosen	Clear	Please Select ▼	NO
Choose File	No file chosen	Clear	Please Select ▼	NO
Choose File	No file chosen	Clear	Please Select ▼	NO
Message Read				

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:32	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:32	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:31	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:31	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:31	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:31	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:31	Photos	Normal	Ph
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:31	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:30	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:30	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:30	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:30	Photos	Normal	Ph
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:30	NRIC/ Driving License	Y	Normal
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Jan 2020 16:30	SAS	Normal	S

Video List

[Display in New Window](#)[Scan and uploading](#)

ASSIGNMENT (IDAC)

COE 2027

By CSO- Nature of Accident:**1) Vehicle hit Vehicle:**

- a) Motorcar ()
b) M/cycle ()
c) Bicycle ()

2) Vehicle hit ??

- a) Pedestrian ()
b) Animal ()

3) Vehicle hit Road Side Objects:

- a) Govn. Property ()
(Eg: signboard, barrier, tree etc)

- b) Road Work Object ()
c) Private Property ()

4) Vehicle drop into drain**5) Damage due to Act of God:**

- a) Fallen Object ()
c) Other, _____

- b) Flood ()

6) Parked & Found Damaged:

- a) Vandalism ()

- b) Hit by Moving Object ()

7) Theft Case

- a) Stolen ()

- b) Damage found ()
when recovered.

8) Fire

- a) Whilst driving ()

- b) Parked ()

9) Accident date more than 24hrs

()

Remarks for Internal information**Remarks to appear in Works Order & Assessment report**

1) Potential Total Loss ()

2) SRS Light on ()

3) ABS Light on ()

By Assessor- 1) Vehicle InformationVeh No: SLT 1334 H.

Yr Regn:

18 OCT 2017Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV
/ Truck / Trailer or

Make & Model:

TOYOTA CHR Hybrid

c.c.

1797

Colour:

GRANITETransmission Type: Auto / Manual

Eng/No:

27R8027374

Sp. Reading:

C/No:

2X102010108Gen. Cond: Good / Fair / Poor / Burnt orSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: Nil / S/Rim / STD A/Rim or

Tyre Size: F:

215/60 R17

R:

215/60 R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Continental

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

Parallel Import: Yes / No

Towed-In:

Yes NoRepair Type: LS / I.B.I

Towing Required:

Yes No

No of Repair Days:

5

Vehicle in Idac:

Yes No

D.O.I.

21/01/2020

Time:

1200**By Assessor- 2) Comments**

1) Damages not due to recent accident.

2) Damages do not seem hit onto:

- a. Vehicle () b. Motorcycle () c. Bicycle () d. Pedestrian ()
e. Animal () f. Govn Object () g. Road Work Object ()
h. Private Property () i. Drain () j. Road Kerb/Grass Verge ()

3) Vehicle does not seem damaged as a result of:

- a. Fallen Object () b. Flood () c. Vandalism () d. Fire ()
e. Moving Object () f. Stolen () g. Stolen & Recovered ()

Time Started

Time completed.

1) CSO

2) ASS

3) Extra Operation Completed Time:

Original copy

Claim Handling

▼ Accident MT/1080991

Policy No.	5095185680-02	Vehicle No.	SLT1334H	GST Registration No.	
Certificate No.				Policyholder NRIC	53371679M
Policyholder Name	WARNI & FAIZ	Cover Type	drive CLASSIC	Loading	0
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	92994352	Special Remark		eCode	No ▼
Email Address		TCA	No Yes	eCode Reason	
KFK	No Yes	NCD Entitlement(%)	40	Private Hire	Yes
NCD Protection	No				

▼ Accident Details

Report Date	20/01/2020 16:24	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	18/01/2020	Time of Accident hh:mm	18:10	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTRE	Orange Force	No	ICM No.	
Accident Location	BARTLEY ROAD BEFORE JUNCTION OF SERANGOON AVENUE 1				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00	Driver Is Covered?	Covered
YIED OD Excess	0.00	YIED TP Excess	0.00		
Additional Excess	0.00	Total TP Excess Applicable	0.00		
Total OD Excess Applicable	600.00				

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	20/01/2020 16:25:17 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 234 #09-304	Address 2	JURONG EAST STREET 21	Address 3	SINGAPORE 600234
Address 4		Address Type	Singapore address	Post Code	600234
Unit No.	09-304	Related Policy Number	5095185680-02		

▼ OI Driver Info

Driver Name	JAMALUDIN BIN KASSIM	Driver Type	Named Driver	Driver DOB	13/10/1959
Unnamed driver Name		Driver NRIC	S2704043H	Driving Experience	17
Register Date of Driver License	01/02/2002	Driver Age	60	Contact No.(Home)	
Contact No.(Mobile)	92994352	Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SLT1334H	Driver Insurer Company	NTUC

▼ Declaration

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

▼ Investigation

Claim 001 OD-MD

▼ Claim Case Officer Ng Hak Joo

Claim Type	OD-MD	Insured Name	WARNI & FAIZ	Insured NRIC	53371679M
Contact No.(Mobile)	92392470	Contact No. (Home)		Contact No. (Office)	
Email Address		OI Vehicle Number	SLT1334H	TP Vehicle Number	GBJ23195
Claim Description	SLT1334H / GBJ23195 ON 18 Jan 2020				Name of Preferred Workshop
Preferred Workshop		Insured Liability			
Contact		Not at Fault			
Initialisation	Yes	Preferred Repair Option			
Date Registered		Preferred Workshop Name	unknown		
Report Taken By	ROSLI WAHAB	Claim Close Date		Date Received	22/01/2020
		Workshop Repairer		Total Loss But Repaired	
				OD Excess Collected by Workshop	

Print AK letter

Modification History 22/01/2020 14:57 s035020 Modify Claim Type(OD-MX-->OD-MD)

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

Certificate Number: 5095185680-02

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SLT1334H**
Chassis Number : **ZYX102010108**
2. Name of Policyholder : **WARNI & FAIZ**
3. Effective Date of Insurance : **19 Oct 2019**
4. Expiry Date of Insurance : **18 Oct 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	: N/A
NAMED DRIVER (1)	: JAMALUDIN BIN KASSIM
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: GOLDBELL FINANCIAL SERVICES PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : CITY INSURANCE AGENCY PTE. LTD. (00000573566)
Date of Issue : 17 Oct 2019 18:38 hrs
Reprint : 17 Oct 2019 18:39 hrs.

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Hello, NAC_BUKIT_MERAH_800676

Change Language

Change Password

Log Out

My Desktop

Notice of Loss

Policy Query

Policy No. Date of Accident
Vehicle No. (For Motor) Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5095185680-02		WARNI & FAIZ	53371679M	GPC	drive CLASSIC	SLT1334H	SLT1334H	19/10/2019	18/10/2020

Continue

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : 27 MAY 20009336 Vehicle Registration No: SLT 1334 H
Name (as shown in NRIC) : JAMALUDIN B. KASSIM NRIC/FIN/Passport No : S2704043H
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 234, H09-204, JURONG EASI, S1.21 Singapore (600234)
Contact (Tel) : 92994352 Mobile No.: 92994352
Email Address : wishky@yahoo.com
Date of Accident : 18/01/20 Time of Accident: 18.10 pm
Place of Accident : Burley Rd, Junction Serangoon AVE 1
Insurance Company: NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

From THIRD PARTY TO OWN DAMAGE CLAIMS

WARNI & FAIZ
REG 53371679M

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Rosa Linton
NRIC/FIN No.:
Date: 22/01/2020

From: Ng Hak Joo <hakjoo.ng@income.com.sg>
Sent: Monday, 3 February, 2020 11:24 AM
To: city auto
Cc: LKK Bukit Merah; LKK Paya Ubi; Teng Ken Leong
Subject: SLT1334H UNDER OD CLAIM: MT/1080991 for POLICY NUMBER: 5095185680-02

Importance: High

Dear Cityauto

Please liaise with Mr Jamaludin Kassim at 92994352 on the repair ASAP, excess \$600/-.

Fyi, we have informed him that he must inform LTA if he is not using the car for private hire and they will remove the decal, he ok.

Our Ref: MT/CA/OD/051/1080991-001/NHJ

03 Feb 2020

CITY AUTO PTE LTD

BLK 8 #01-58TO66

SIN MING INDUSTRIAL EST SECTOR C

SINGAPORE 575643

Dear Sir

CLAIM NUMBER: MT/1080991-001

REPAIR OF VEHICLE NUMBER: SLT1334H

We are pleased to inform you that you are successful in your tender to repair the vehicle. The details are as follows:

Award Date: 03 Feb 2020

Make: TOYOTA

Model: C-HR

Estimated Repair Days: 3

Location: NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)

Address: BLK 1007 #1 BUKIT MERAH LANE 3 ALEXANDRA VILLAGE INDUSTRIAL ESTATE SINGAPORE 159721

Benefits Applicable: N/A

Excess Applicable: 600.00

Please note that supplementary items will not be allowed.

If you have any queries, please contact Ng Hak Joo at 64307890 or email us at motor@income.com.sg.

Yours sincerely

Jenny Pe

Deputy Vice President

Motor Insurance

Thank You

Ng Hak Joo

Executive

Operations, Motor and Personal Lines (PL)

T +65 64307890

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