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	Warranty: YES (	/NO(	)			
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SN08211R0002 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 27/01/2021 10:59 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (27/01/2021 10:59 (SGT))



# 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
- 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 Submission 27/01/2021 10:59 (SGT) Date of Accident 25/01/2021 11:55 (SGT) Exact Location of Accident Park Cres, Singapore Additional Location Information MULTI STOREY CARPARK Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMW3139P

#### INSURED/POLICYHOLDER

Is company? TOH BOON CHUAN (ZHUO WENCHUAN) Name Of Registered Owner SXXXX867D NRIC No jack.toh@gmail.com Email Address (Phone) +65-98002378 Mobile Phone No +65-98002378 Alternative Phone No

### VEHICLE PARTICULARS

Honda Manufacturer Model Vezel Variant ..... Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Private car Vehicle Category

### INSURANCE COMPANY

Name of Insurance Company NTUC Type of Coverage Comprehensive Fleet Policy Policy Number 5120580391 Cover Note Number

#### DRIVER

TOH BOON CHUAN (ZHUO WENCHUAN) Name of Driver NRIC No SXXXX867D

Date Of Driving Pass	21/07/2003
Driving experience	17 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98002378
Alt. Phone Number	+65-98002378
Email Address	jack,toh@gmail.com
Address	BLK 93B TELOK BLANGAH STREET 31 #19-183
Address complement	BER 93B TELOR BLANGAH STREET ST#19-103
Postcode	102093
Is the driver the policyholder?	
If No, Relationship of the Driver with the Insured	Yes
Does Driver Own Other Vehicles?	Ne
Vehicle Registration Number of Other Vehicle Owned by Driver	No
Verlicle Registration Number of Other Verlicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
West of the control o	No.
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	0
Has the driver been approached by unknown person(s)	53
soliciting/offering accident claims assistance?	No
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Telok Blangah Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18002729999
Alt. Police Station Phone No	(Fax) +65-63776526
Police Station Address	Blk 51 Telok Blangah Drive #01-116/ 118 Singapore 100051
Was notice of intended Prosecution given?	NOTE OF THE PROPERTY OF THE PR
	No
If yes, against whom?	f'
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO POLICE REPORT T/20210126/2041	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	
Was there any audio recorded?	
Tras tiele ally additioned to the transfer and the transfer and the transfer and tr	INO
DETAILS OF OTHE	ER VEHICLE PROPERTY 1
Vehicle Registration Number	GBG1751Z
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	2000 DE
Vehicle Colour	Gray
Vehicle Category	
Name of Driver	

Address	_
Address complement	_
Postcode	_
Însurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	

### SKETCH PLAN

# **IMPORTANT NOTICE**

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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 ree 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknow ledge, 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' law yers/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' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

Markenouse Burkly

(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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Sketch Plan

Date

Witnessed by Reporting Centre Personnel

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REMIC TO	plick Rupor	7/2021	0126/2011	
			7:011	
			1	
			/	
		/		

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre

Personnel

# ACCIDENT STATEMENT

ACCIDENT DATE: (25,01, 2021) (DD/MM/YYYY), TIME: (11:55) (HH:MM	1)-
LOCATION: Park Cres Multi Storey Carparte	8
1. DETAILS OF VEHICLE  a) VEHICLE NUMBER: SMW 3 139 P	
CIPOLICY NUMBER: 5120580391	
DIPOLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE &THEFT	
DIMAKE & MODEL: HONDA VEZEL.	
f)TYPE:(SALOON / COUPE (MPV )VAN / LORRY / MOTORCYCLE / OTHERS)	
DIVEHICLE CATEGORY: (PRIVATE) COMMERCIAL / MOTORCYCLE)  h)PURPOSE OF USING AT ACCIDENT TIME: PERSONAL	,
I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES MO)	
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)	
2. INSURED / POLICY HOLDER A) NAME: TOH BOON CHUAN (MALE) FEMALE)	
DINRIC/FIN/PASSPORT: S80038670 CONTACT: 98002378	_
C)ADDRESS: 938, TELOK BLANGAH ST 31, #19-183, 5102093	_
* CONTINUE TO S A IS DRIVED ALSO BOLICY HOLDED	
* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER  DRIVER  DRIVER	
(Including driver) GINAME: - R. ABUK (MALE / FEMALE)	
BINKIC/FIN/FASSFORI:CONTACT	
c]ADDRESS:	-
"d) DATE OF BIRTH: ( 22/01 / 1960)(DD/MM/YYYY)	•
EDUCCUPATION: (INDOOR DOUTDOOR)	
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES YNO)	,
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:	_
5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS	7
b)ROAD SURFACE: (DRY / WET / OTHERS	4
7 CIPEROPTED TO POLICE WEST NOT "	
IF YES, PLEASE STATE WHICH POLICE STATION: TELOX BLANGAM INPP	
He of passenger a) VEHICLE NUMBER: (1517 MODEL:	
Including driver) b) DRIVER'S NAME:	8
( ) RIC/HN/PASSPORT:CONTACT:	
9. THIRD PARTY VEHICLE  ON VEHICLE NUMBER: MODEL:	٠.
No of passanger, el DRIVER'S NAME:	E
Including driver) F) NRIC/FIN/PASSPORT: CONTACT:	
( )	
The state of the s	

email = jack toh@ gmail.com





1 of 3

Report No. T/20210126/2041

Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

## REPORT OF A TRAFFIC ACCIDENT

	ne Report M 021 13:32	lade:	Vide Report No.:	Station Diary No.: 14
Informa	nt's Particu	ulars	A C	
	Informant: ON CHUA	N	Address: APT BLK 93B TELOK BL SINGAPORE 102093	ANGAH STREET 31 #19-183
72.7	/ ID No.: O / S800386	67D	Contact No.: Home/Office:	Mobile: 98002378
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age:	Date of Birth: 22/01/1980	Type of Informant: Vehicle Owner	
Race: Chinese			Language:	Institution / School Name
Occupat Project I	tion: Manager		Driving Licence Informati Class: 3	on: Date of Expiry:

General Infor	mation of the Accide	nt * 3		
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/01/2021 11:55	Type of Location Car Park
Location:		1		
PARK CRES	CENT			
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collis Vehicle Side	sion: Swipe while Stationery			Anyone conveyed by ambulance:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
CONTRACTOR STATES	Type	Control of the second		The state of the s	Condition	ivo or i asserige
GBG1751Z		NISSAN	NV200 DX-2 1.6 Auto	Grey		0
SMW3139P	Car	HONDA	Vezel 1.5X CVT	White	Slightly Damaged	0

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





2 of 3

Report No. T/20210126/2041

Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

# CONTINUATION OF REPORT

Name	TOURDOON COMMAN			The state of the s
Name	TOH BOON CHUAN		ID No.	S8003867D
Related Vehicle	SMW3139P (Car)		Contact No.	98002378
Hospital/Clinic	NIL		Class of Driving Licence &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Data Diag	Expiry Date	
		Date Disc		
No. of Days gran	ted Medical Leave NIL	Degree of	Injury NIL	

# Brief Details.

On 25/01/2021 at about 1100hrs, I parked my vehicle bearing registration plate number (SMW3139P, White Honda Vezel) at Park Crescent Multi-Storey Carpark at Deck 4 (Unsure of Carpark lot no.) and I headed back home at about 1230hrs.

At about 1430hrs, I went to B/93B Telok Blangah Street 31 Multi-Storey Carpark to collect my vehicle and I found out that my vehicle right fender was damaged as well as the right bodykit lips were detached from my vehicle body. Subsequently, I viewed my In-Car footage and found out that a vehicle acted very suspicious during the timing of 1155hrs, he drove 3/4 of his vehicle body into the lot a couples of time and was having difficulties parking into the lot. Subsequently, the driver did not managed to parked his vehicle and he just drove off.

I wished to state that this is the first time such incident had happened to me.





3 of 3

Report No. T/20210126/2041

Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

CONTINUATION OF REPORT

# Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
Sgt 2 ALFRED TAN JUNWEI	
Signature Of Interpreter: Not applicable	Date/Time: 26/01/2021 13:32
Officer In Charge Of Case:	
TP / HRT / SI NOR AFFENDY BIN JAFFAR	Classification Of Case:
Contact No.: 65476368	
Authentication Stamp	

# Claim Handling Accident MT/1118957

olicy No.	5120580391	Vehicle No.	SMW3139P		GST Registr	ation No.
ertificate No.						
olicyholder Name	TOH BOON CHUAN (ZHUO WENCHUAN)				Policyholder	NRIC
roduct Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	
ontact No.(Mobile)	98002378	Contact No.(Office)			Contact No.	(Home)
mail Address		Special Remark			eCode	
CFK .	No Yes	TCA	No Yes		eCode Reas	on
ICD Protection	No	NCD Entitlement(%)	50		Private Hire	65
▼ Accident Details		nes sindement(10)	30		Titrace Tille	
leport Date	27/01/2021 15:55	Accident Report Within 24 hrs	Yes		Accident Ty	pe
ate of Accident	25/01/2021	Time of Accident hh:mm	11:55		Country of	
eporting Centre		Orange Force	0.000		ICM No.	
ccident Location	PARK CRESCENT CARPARK					
<b>▽</b> Total Excess Applicable	PARK CRESCENT CARPARK					
excess Type	Per Accident	Windscreen Excess		100.00		
Acess Type	Per Accident	Wildscreen Lacess		100.00		
DD Standard Excess	2,000.00	TP Standard Excess		1,500.00		
IED OD Excess	0.00	YIED TP Excess		0.00	Driver is Co	vered?
Additional Excess	0					
Total OD Excess Applicable	2000.00	Total TP Excess Applicable		1,500.00		
<b>▼</b> Benefits	2000.00			_ v		
<b>▽</b> GST Registered Informat	ion					
ST Registered	No		GST Registra	tion Date		
GST Registration No.	110		GST Status V		,	/es
Modification History						2.50
Policyholder Mailing Add	ress					
Address 1	BLK 93B #19-183	Address 2	TELOK BLANGAH STE	REET 31	Address 3	
		Carta and a contract				
Address 4	SINGAPORE 102093	Address Type	Singapore address		Post Code	
Address 4 Unit No.	SINGAPORE 102093 19-183	Address Type  Related Policy Number	Singapore address 5120580391		Post Code	
					Post Code	
Unit No.  OI Driver Info					Post Code	
Unit No.  OI Driver Info  Driver Name	19-183	Related Policy Number	5120580391		Post Code  Driver DOE	3
Unit No.  Solution of Driver Info  Driver Name  Unnamed driver Name	19-183 TOH BOON CHUAN (ZHUO WENCHUAN)	Related Policy Number  Driver Type	5120580391 Main Driver		7.5.100 000 20000000	
Unit No.  OI Driver Info  Driver Name  Unnamed driver Name  Register Date of Driver License	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003	Driver Type Driver NRIC Driver Age	5120580391 Main Driver S8003867D		Driver DOE Driving Ex	perience
Unit No.  OI Driver Info  Driver Name  Unnamed driver Name  Register Date of Driver License  Contact No.(Mobile)	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003 98002378	Driver Type Driver NRIC Driver Age Contact No.(Office)	5120580391 Main Driver S8003867D 41	PFFT 31	Driver DOE Driving Exp Contact No	perience
Unit No.  OI Driver Info  Driver Name  Unnamed driver Name  Register Date of Driver License  Contact No.(Mobile)  Address 1	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003  98002378  BLK 93B #19-183	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2	5120580391  Main Driver  \$8003867D  41  TELOK BLANGAH STR	REET 31	Driver DOE Driving Ex Contact No Address 3	perience
Unit No.  OI Driver Info Driver Name Unnamed driver Name Register Date of Driver License Contact No.(Mobile) Address 1 Address 4	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003  98002378  BLK 93B #19-183  SINGAPORE 102093	Driver Type Driver NRIC Driver Age Contact No.(Office)	5120580391 Main Driver S8003867D 41	REET 31	Driver DOE Driving Exp Contact No	perience
Unit No.  OI Driver Info  Driver Name  Unnamed driver Name  Register Date of Driver License  Contact No.(Mobile)  Address 1  Address 4  Unit No.	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003  98002378  BLK 93B #19-183  SINGAPORE 102093 19-183	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type	Main Driver S8003867D 41 TELOK BLANGAH STE	REET 31	Driver DOE Driving Exp Contact No Address 3 Post Code	oerience
Unit No.  OI Driver Info Driver Name Unnamed driver Name Register Date of Driver License Contact No.(Mobile) Address 1 Address 4	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003  98002378  BLK 93B #19-183  SINGAPORE 102093	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2	5120580391  Main Driver  \$8003867D  41  TELOK BLANGAH STR	REET 31	Driver DOE Driving Ex Contact No Address 3	oerience .(Home
Unit No.  OI Driver Info  Driver Name  Unnamed driver Name  Register Date of Driver License  Contact No. (Mobile)  Address 1  Address 4  Unit No.  Does he own a Singapore  Registered car?	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003  98002378  BLK 93B #19-183  SINGAPORE 102093 19-183	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type	Main Driver S8003867D 41 TELOK BLANGAH STE	REET 31	Driver DOE Driving Exp Contact No Address 3 Post Code	oerience .(Home
Unit No.  Oriver Name Unnamed driver Name Register Date of Driver License Contact No.(Mobile) Address 1 Address 4 Unit No. Does he own a Singapore Registered car?	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003  98002378  BLK 93B #19-183  SINGAPORE 102093 19-183	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type	Main Driver S8003867D 41 TELOK BLANGAH STE	REET 31	Driver DOE Driving Exp Contact No Address 3 Post Code	oerience
Unit No.  OI Driver Info Driver Name Unnamed driver Name Register Date of Driver License Contact No. (Mobile) Address 1 Address 4 Unit No. Does he own a Singapore Registered car? Declaration Breathalyser or Blood Test	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003  98002378  BLK 93B #19-183  SINGAPORE 102093 19-183	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type	Main Driver S8003867D 41 TELOK BLANGAH STE	REET 31	Driver DOE Driving Exp Contact No Address 3 Post Code	oerience
Unit No.  OI Driver Info Driver Name Unnamed driver Name Register Date of Driver License Contact No. (Mobile) Address 1 Address 4 Unit No. Does he own a Singapore Registered car? Declaration Breathalyser or Blood Test	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003 98002378 BLK 93B #19-183 SINGAPORE 102093 19-183 Yes No	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type Driver Vehicle No.	Main Driver S8003867D 41  TELOK BLANGAH STI Singapore address  SMW3139P	REET 31	Driver DOE Driving Exp Contact No Address 3 Post Code	oerience
Unit No.  OI Driver Info  Driver Name  Unnamed driver Name  Register Date of Driver License  Contact No.(Mobile)  Address 1  Address 4  Unit No.  Does he own a Singapore	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003 98002378 BLK 93B #19-183 SINGAPORE 102093 19-183 Yes No	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type Driver Vehicle No.	Main Driver S8003867D 41  TELOK BLANGAH STI Singapore address  SMW3139P	REET 31	Driver DOE Driving Exp Contact No Address 3 Post Code	oerience .(Home
Unit No.  OI Driver Info Driver Name Unnamed driver Name Register Date of Driver License Contact No.(Mobile) Address 1 Address 4 Unit No. Does he own a Singapore Registered car? Declaration Breathalyser or Blood Test Reading?	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003 98002378 BLK 93B #19-183 SINGAPORE 102093 19-183 Yes No	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type Driver Vehicle No.	Main Driver S8003867D 41  TELOK BLANGAH STI Singapore address  SMW3139P	REET 31	Driver DOE Driving Exp Contact No Address 3 Post Code	oerience .(Home
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Unit No.  OI Driver Info Driver Name Unnamed driver Name Register Date of Driver License Contact No.(Mobile) Address 1 Address 4 Unit No. Does he own a Singapore Registered car? Declaration Breathalyser or Blood Test Reading?	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003 98002378 BLK 93B #19-183 SINGAPORE 102093 19-183 Yes No	Priver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type Driver Vehicle No.	Main Driver S8003867D 41  TELOK BLANGAH STI Singapore address  SMW3139P		Driver DOE Driving Exp Contact No Address 3 Post Code Driver Insu	oerience
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Init No.  OI Driver Info  Oriver Name  Unnamed driver Name  Register Date of Driver License  Contact No. (Mobile)  Address 1  Address 4  Unit No.  Ooes he own a Singapore Registered car?  Reclaration  Breathalyser or Blood Test Reading?  Claim 001 New  Claim Type *  Contact No. (Mobile)  Email Address  Claim Description  Preferred  Workshop	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003 98002378 BLK 93B #19-183 SINGAPORE 102093 19-183 Yes No  0 mg	Related Policy Number  Driver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type  Driver Vehicle No.  Any injury?	Main Driver S8003867D 41  TELOK BLANGAH STE Singapore address  SMW3139P  Yes No	OD-MX 96608653	Driver DOE Driving Exp Contact No. Address 3 Post Code Driver Insu  Insured Name Contact No. (Home) OI Vehicle Number	TOH B
Unit No.  OI Driver Info Driver Name Unnamed driver Name Register Date of Driver License Contact No. (Mobile) Address 1 Address 4 Unit No. Does he own a Singapore Registered car? Declaration Breathalyser or Blood Test Reading?  Claim 001 New  Claim Type *  Contact No. (Mobile)	19-183  TOH BOON CHUAN (ZHUO WENCHUAN)  21/07/2003 98002378 BLK 93B #19-183 SINGAPORE 102093 19-183 Yes No  0 mg	Related Policy Number  Driver Type Driver NRIC Driver Age Contact No.(Office) Address 2 Address Type  Driver Vehicle No.  Any injury?	Main Driver S8003867D 41  TELOK BLANGAH STE Singapore address  SMW3139P  Yes No	OD-MX 96608653	Driver DOE Driving Exp Contact No. Address 3 Post Code Driver Insu  Insured Name Contact No. (Home) OI Vehicle Number	TOH B

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Policyholder Name Policyholder NRIC Certificate Commence Select Policy No. Insured Product Cover Type Vehicle No. Expiry Date Number Object Date TOH BOON CHUAN (ZHUO WENCHUAN) drivo CLASSIC 0 5120580391 S8003867D GPC SMW3139P SMW3139P 15/01/2021 14/01/2022

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