

HD PERFECT AUTOWORK PTE LTD

Co. & GST Reg. No.: 202136904Z 8 Kaki Bukit Avenue 4 Premier @ Kaki Bukit #08-09, Singapore 415875

Tel: +65 6341 6789 | Fax: +65 6341 6778 Email: hdperfectautowork@gmail.com

Date:

01.02.2025

ATTN:

Motor Claims Department

INS:

AIG ASIA PACIFIC INSURANCE PTE LTD

Dear Sir/Madam,

Accident Involving:

SNE2299A & GBL1113P

Date of Accident:

19.11.2024 @ 09.50 HR

Location:

SLE - CTE

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:

\$ 15,696.00

Loss of Rental:

(\$200.00 X 8 Days):

1,600.00 (7Repair Days+1Sunday)

LTA Search

\$ 27.25

Grand Total:

\$ 17,323.25

The above-mentioned settlement is in respect for our client of damage pertaining to his/her motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his/her personal injuries.

Thank You,

Joanne \ 82979787



HD Perfect Autowork Pte. Ltd.
Co. Reg No: 202136904Z
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com

Authorisation To Act

mehamad Nur Amirul Bin
I, <u>Mohamed Islandar</u> ("the third party claimant") of
121A Edgedale Plains #11-231 821121.
(address), owner of SNZ 2299A · (vehicle no.)
hereby authorise HD Perfect Antowork Pte Utd ("the workshop")
to act for me with respect to my claim for repair costs and / or rental and / or
loss of use ("claim") for my vehicle no. SNE 2299 A. that was
damaged pursuant to the accident which occurred on 19.11.2024. (date) at/along SLE -> CTE.
(location) involving vehicle no/sGBL_III3P("the accident").
I further hereby authorise the workshop to settle my above mentioned claim in a manner that
they deem it fit and the workshop is further authorised to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.
or my claim with payment theque/s being made in lavour of the workshop.
I further authorise the workshop to execute and/or sign any documents/discharge vouchers/agreements regarding my/our claim/case for my/our convenience.
I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident concerned.
Dated this day of (month) 20 24. (year)
Marin .
Signed by "the third party claimant" Signed by "the workshop"



HD Perfect Autowork Pte. Ltd. Co. Reg No: 202136904Z 8 Kaki Bukit Avenue 4 #08-09 Premier @ Kaki Bukit Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com

Letter of Authorisation & Indemnity

Accident	involving	; motor v	ehicles r	no. SNE	229	AP	and _	GBL	1113F	on _	19.	11.	2024
at/along	C			CTE	•					***************************************			***************************************
1.	behalf to	o inspect	my/our indepe	of motor work motor vehic ndent surve being re	cle and to o	comme ng the	nce reparent	e worksno airs immed e of my/ou	p) to appo diately to th ur claim aga	e said moto inst the th	or vehicle in	rveyor accor	
2.	You are made ar	further and instru	authorise ctions ar	ed to appoin e given by n ecessary, to	t solicitors ne/us with	on my, respec	our belt to the	nalf and to conduct of	instruct th f my/our cla	e solicitors aim against	the third p	arty dr	iver and/or
3.	You hav	e my/ou	r full au	thorisation/ insurers on	approval/c	onsent	hereby	to instruc					
4.	My/Our	solicitor	s shall al	so accept th u after dedu	is as my/o	ur irrev	ocable a	authority t		ompensatio	on monies f	rom m	y/our third
5.	Upon re profession	solving onal cos	my/our ts and o		are also he ts incurred	ereby a d in th	authoris ereby a	ed to agre	ee with my me/us and				int of their ent of the
6.	I/We un hereby o	dertake consent	and agr and auth	ee to fully on norise you to n from the n	co-operate o instruct r	with y my/our	ou and solicito	my/our so	olicitors to				
7.	I/we also	o hereby	/ instruc	t and autho	rise you to	o dedu	ct direc	tly from th					
8.	In the e	event that ons on the	at I/we ne accide	am/are req ent matter, t	uired to a to sign cour	ttend rt docu	at my/c iments a	our solicito and to atte	or's office t	or purpose	es of giving	g my/d	
9.	In the ex my/our of settlementers than less than bill and so costs and I/we sha	vent that claim pro ent is not the amount survey fe d disburs all keep y	my/our ocedure t honour ount clai ees and a sements you infor	red or satisfi med by you any other ex thereby inc rmed of any	st the third urt proceed ed by the for whatev penses rea urred on many correspond	d party dings, third p ver rea asonabl	and/or if any, a party and sons, I/v ly incurred behalf of	his insure nd/or can d/or the the the agree a ed and to r to pay you	not be prod ird party a nd underta also indem ou the diffe	eeded with nd/or his in ke to pay th nify you in rence in an	n and/or if a nsurers mal he full amo respect of nount, as th	any Jud ke an count of my/ou he case	dgement or offer to pay your repair r solicitor's may be.
	pay or re	eceive an	y monie	Dated this	s claim.	day	of	112	20_ 24			\.	
Signatur	e of vehicl	e owner	K	5/	<	\					17		
V	noho	maid	N.	ir Am	irul	Bir)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1		
				84C					vvitn	essed by :	Channel 1		
	ıy stamp,												
Address	121 F	7 E	daed	Sale F	lains	#1	1-2	31					
	S	. 8	211	Sale F									
Tel:		82	994	262									



My execution of this Discharge Voucher is only for my claim for property damage and not rejudicial to any other claims"

AUTHORIZATION TO ACT (AIG Asia Pacific - Express Third Party Claim)

mohamad Nur Amirul
mohamad Nur Amirul Bin Mohamed Islandar ("the third party claimant")
of 121A Edgedale Plains #11-231 821121, (address),
of 121A Edgedale Plains #11-231 82112 1, (address), owner of SNZ 2289A. (vehicle no.) hereby authorize
HD Pertect Andowork Pte Ctd.
("the workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
vehicle no. 8NZ 2299A. that was damaged pursuant to the
accident which occurred on $19.11.24$ (date) along SIE \rightarrow CTE
(location)
involving vehicle no/sGBL 1113 P ·
("the accident").
I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.
I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.
Dated this day of (month) 20 (year)
Signed by "the third party claimant" Signed by "he workshop" (with chop)

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z 8 Kaki Bukit Avenue 4 #08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com

GST Reg. No.:

202136904Z



Date	Invoice Number	Vehicle Number
01.02.2025	HDP202502-01010	SNE2299A

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY #07-12 AIG BUILDING SINGAPORE 079120

Description	Ar	mount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding	\$	14,400.00
to supply of spare parts, labour and spray painting charges		
Total	\$	14,400.00
Add: 9% GST	\$	1,296.00
Total	\$	15,696.00

Please indicate the invoice number on the reverse side.

HD PERFECT AUTOWORK PTE LTD

AUTO Generated - Signature Not Required

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 19 Nov 2024 / 11:12:37

Receipt Date/Time: 19 Nov 2024 / 11:12:37

Tax Invoice/Receipt

Receipt No.: ITNET-00000-241119-001266

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBL1113P As at 19 Nov 2024/09:50:00 Insurance Co: AIG ASIA PACIFIC INSURAN	ICE PTE. LTD.			
1 Insurance Enquiry - GBL1113P Enquiry Fee 20241119111209069995		25,00	2,25	27.25
	Sub-Total	25,00	2.25	27.25
	Total Before Rounding	25.00	2,25	27.25
	Rounding Difference			0.00
	Total Amount Payable			27.25
	Paid By			
	DICNV20241119111209256604	SGQ	R(PayNow)	27.25
	Total			27.25
	Cash Change			0.00
	Tendered Amount			27,25
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

23 RENTAL PTE LTD

106D Punggol Field #09-506

Singapore 824106

Company Registration Number: 202347820H



Tax Invoice #:

E2401232

Date:

06.12.2024

Bill To:

HDPerfect Autowork Pte Ltd

C/O:

MOHAMAD NUR AMRUL BIN MOHAMED ISKANDAR

121A EDGEDALE PLAINS #11-231

SINGAPORE

821121

Description

Amount

Vehicle Rental for Period

19.11.2024 TO 05.12.2024

16 DAYS X

\$200.00

+

3,200.00

Replacement Car No.:

SMJ6797M

Your Vehicle No.:

SNE2299A

Your Order #: 235252

Total Invoice Amount:

\$ 3,200.00

GST:

Balance Due:

\$ 3,200.00



23 RENTAL PTE LTD

95 Aljunied Crescent Macpherson View #06-513 Singapore 380095 Tel: 91733305 / 91732332 Email: 23rentalpteltd@gmail.com

SNE2299A

UEN: 202347820H

VEHICLE REMTAL AGREENENT

(OH) Vehicle No: SMJ6797M Replace Veh No: Mileage out: Make & Model: Mercedes Benz CISO Auto) Manual OUT: Date 19/11/2024 Time: 11:15 am HIRE PERIOD OWN DAMAGE CLAIM Excess S\$ \$5,000.00 THIRD PARTY CLAIM Excess S\$ CHARGES Daily 16 @\$ 3200 00 per day 200 Weekly @\$ per week Monthly @\$ per month Others @\$ **Delivery Service** GST SUB- TOTAL \$ PETROL LEVEL F 1/2 E 1/4 1/2 **EXTENSION** Misc **TOTAL CHARGES** 3200

HIRER'S PARTICULAR Motomad Nur Amirul Name: (as in 1/c) Bin Mohamed Iskandar Email: _ 395191840 NRIC/PASSPORT No: _ 29.5.1995 Address (Res): 121 A Edgedale Plans #11-281 ____ D/L Type: Local/ International Driving Licence No: ____ Issue Date: ____ Tel: (0) ____ Company Name: ___ Company UEN: _ Company Address: __ ADDITIONAL DRIVER'S PARTICULARS Name: (as in 1/c) mohamed Iskandar Bin Albas 57219367 31.5.1972 Date of Birth: As Address (Res): Driving Licence No: ______ D/L Type: Local /-International Issue Date: ___ _____ HP __ Tel: (O) ___ VEHICLE CHECK LIST SCRATCHES BACK DENTS Rented out by: INDICATE: A - ACCIDENTS Hirer's Signature RIGHT FRONT TOP LEFT Addition Driver's Signature

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amount payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given 23 Rental Pte Ltd in connection with this agreement is true.

* IMPORTANT

- 1. ONLY PERSON ABOVE 22 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- 2. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- 3. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN ABOVE.
- 4. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY AND BE RESPONSIBLE FOR THE INSURANCE EXCESS. IF THERE IS BODILY INJURIES, POLICE REPORT MUST BE MADE,
- 5. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY, AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF CARS FOR RENT (2016) PTE LTD

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CARDS FOR RENT (2016) PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	Car I
05/12/24	7-350m	240885			X.
11.	Pint	1000			HIRER'S SIGNATURE

*SA1W24BJ0004 / AUTOBACS CAR CARE (SINGAPORE) PTE. LTD ENTRY DATE & TIME: 19/11/2024 17:59 (SGT) SUBMITTED BY: DIANA BINTE HUSSAIN VERSION: 1 (19/11/2024 17:59 (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 Actual 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.

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 First Submission

Reported by Date of Accident

act Location of Accident Additional Location Information

Country/State of Loss

19/11/2024 17:59 (SGT)

Actual Driver

19/11/2024 09:50 (SGT)

Singapore

SLE Towards CTE (Before Woodlands Avenue 9 Exit)

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNE2299A

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No Email Address Mobile Phone No

Alternative Phone No

No

Mohamad Nur Amirul Bin Mohamed Iskandar

SXXXX184C

isatu6911@gmail.com (Phone) +65-82994262

VEHICLE PARTICULARS

Manufacturer

Model Variant

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? Vehicle Category Transmission

CC

Vehicle Fuel

First Regisration Date

Chassis no

Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number , _ . .

Mercedes

GLB200

Private use

No - Claiming third party

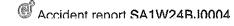
Private car Auto 1332

_

_

Etiqa Insurance Pte Ltd MA036284

DRIVER



Name of Driver '
'NRIC No
Date Of Birth
Occupation
Driving Pass Date

Driving License Pass Class Driving License Validity Driving experience

Gender

Mobile Number Alt. Phone Number Email Address

Address

Address complement

Postcode

Is the driver the policyholder?
If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

Translator's name Translator's ID

Translator's phone number

Translator's email

iginal language used in the statement

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Please refer to accident statement

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Yes No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

GBL1113P

Mohamed Iskandar Bin Abas

(Phone) +65-98392798

isatu6911@gmail.com

Collision - Head to Rear

121A Edgedale Plains #11-231

SXXXX367I

31/05/1972

01/11/2021

3 YEARS

Indoor

3

Valid

Male

821121

No

No

Child

After rain

Wet

No

2

Yes

No

No

No

No

Yes

_

@ Accident report SA1W24B.I0004

Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident No. Of Passenger (Including Driver)

Commercial vehicle

INJURED PERSONS DETAILS

INJURED 1

Name of injured person

Gender Phone No

Address

Idress Complement st Code

Approximate Age Years Old

Injuries Sustained

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Mohamed Iskandar Bin Abas

Male

(Phone) +65-98392798

121A Edgedale Plains #11-231

821121

Body Pain

SNE2299A

Yes

No



SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be congleted by the Policyholder and or the Actual Driver.
- Information provided must be as <u>Individual and according as possible</u>. Any willul misrepresentation or withholding of material facts may elsow insurance companies to <u>repudiate policy liability</u>.
- 4. The issue and acceptance of link 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurence Association of Singapore (GIA) for archiving and that copies of this report will for a too be made available upon application by interested puriers.
- By the ladgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to eogles 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 at insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurer's"), the Insurer's largerstaw firms, the Monetary Authority of Singapore and any retireant government agencylauthority (such as the police), for the purpose(s) of

(i) processing. Pandfing and/or dealing with my disints including the settlement of the claims and any occassary investigations relating to the claims:

(ii) investigating the accident aixfor 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, involves, 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, maylare permitted to collectuae, disclose and/or process my Personal Information for one or more of the above Purposes, and

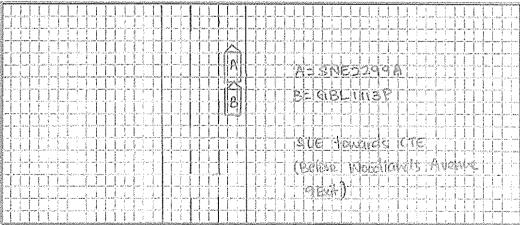
(c) my Personal Information may/can be disclosed by any of the fasurers and/or GIA to their filtrit-party service providers or agents (including their lawyors/law farms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policytolice's Signature / Date & Time

Driver's Signature (3 driver is nell the believ/solder) (Date

Vétnessed by Reporting Centil (Name as in NRICAD card)

Sketch Plan



1

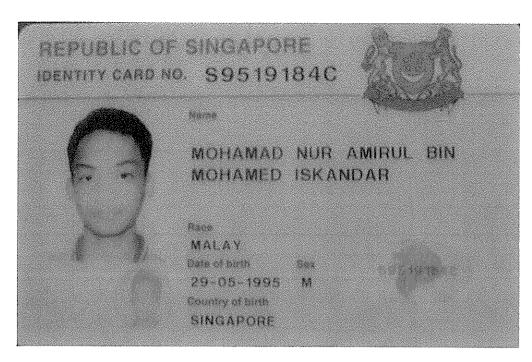
Describe Circumstance of the Accident
On the stated date and time I was travelling on lane
I and when the front vehicle stowed down and stopped
hence I also followed suit cuddenly, I beard a loud lang and
felt great impact from behind. When I alighted, I then realised
vehicle GELHISP hit onto the rear portion of my
VENICLE SNESSADV.

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

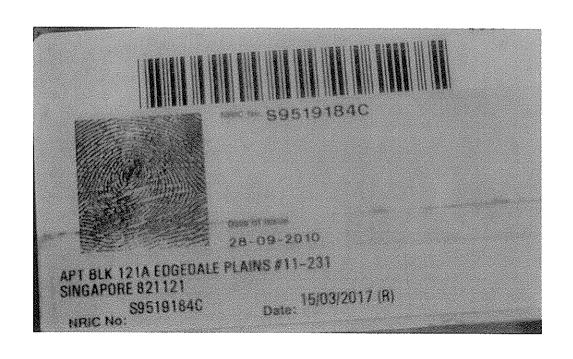
Policyholder's Signature / Date & Time

Driver's Signature (4 driver is not the phicyholder) I Dale & Time

Witnessed by Reporting Centre Personnel (Name as in NRCDIO card)



SNZ SSQQA Owner



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$72193671

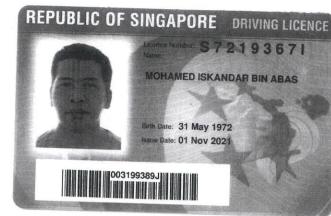


MOHAMED ISKANDAR BIN ABAS

محمد اسكندار بن ابس MALAY

Date of birth 31-05-1972 M Country of birth

SINGAPORE



SNE2299A Driver



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Clt
□Iass 3

Ambulances / Medical transport vehicles / Motor cars01 Nov 2021
≤ 3000kg with ≤ 7 passengers, exclusive of the
driver / Motor tractors or vehicles ≤ 2500kg
Heavy motor cars and motor tractors > 2500kg
30 Dec 2022

72193671

S / No.9000438250

NP 428A

Licence No:S7219367

MXI 70000263

2.

Cov. Type: Comprehensive



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 No. MA036284

Index Mark and Registration

Date of Expiry of Insurance

SNF2299A

Number of Vehicle

MOHAMAD NUR AMIRUL BIN MOHAMED ISKANDAR

Name of Policyholder 3

12/12/2023

Excess: Named Drivers

500

Effective Date of Commencement of Insurance for the purposes of the Act

Excess: Unnamed Drivers Excess: Windscreen

1,000 100

11/12/2024

Persons or Classes of Persons entitled to drive

Engine No

: 28291480310078

Chassis No

: W1N2476872W034103

Hire Purchase : Genie Financial Services Pte Ltd

(A) THE POLICYHOLDER.
THE POLICYHOLDER MAY ALSO DRIVE A MOTOR CAR NOT BELONGING TO HIM
OR HIRED (UNDER A HIRE PURCHASE AGREEMENT OR OTHERWISE) TO HIM OR
HIS EMPLOYER OR HIS PARTNER.
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR
WITH HIS PERMISSION.

MOHAMAD NUR AMIRUL BIN MOHAMED ISKANDAR

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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.
THE POLICY DOES NOT COVER:
(i) USE FOR HIRE OR REWARD.
(ii) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(iii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(iv) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Limitations rendered inoperative by Section 8 of the Motor Vehicles (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 bindings.

Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).

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).

For and on behalf of Etiqa Insurance Pte. Ltd.

Approved Insurer

Authorised Signature

ETQFEU 02/12/2023 11:52:53