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Insured/Driver Liability: (%) (Note-Bst. Status (WO): N: 0.20%; P: 21-79%, P: 80-100%) Year of Registration: () Warranty: YES () / NO () Excess: (\$) Looding: \$1,000 () / \$2,000 () Seneral April (S): () Looding: \$1,000 () / \$2,000 () Seneral April (S): () Looding: \$1,000 () / \$2,000 () Seneral April (S): () Looding: \$1,000 () / \$2,000 () Order (S): () Walk-In Clustomars: 1 Customers information strictly Confidential & Strictly NO rater of repairer.) Your-In () / Towed-In () Invoice: YES () / NO () Towing Co: () Drive-In () / Towed-In () Invoice: YES () / NO () Towing Co: () Apply for Transport Allowance () / Courtesy Cay () OC Check / Povi Reput Inspontion ()) Upload Reservey Photo (Repair Cost > \$3000) () Injury: Injury: Injury: () JAN Assistant Reserving (1909) Drive-In	Policy No: (,)	Period: (. ')	Cover Type: ()	
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 ability.
- 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.

- This report will be forwarded by the insurers of 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	08/12/2017 19:01
Date Of Accident	07/12/2017 11:10
Exact Location Of Accident	CROSS JUNCTION FROM BEDOK SOUTH AVE 1 TOWARDS ECP
Country/State of Loss	SINGAPORE
District Control of the Control of t	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLS572Z
Insured/Policyholder	
Name Of Registered Owner	QUALITY LEASING PRIVATE LIMITED
Co Reg No	201312796G
Email Address	LIMYUBENG@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-90891189
Alternative Phone No	OFFICE-90891189
Vehicle Particulars	
Manufacturer	тоуота
Model	ISIS
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5082552257-01
Cover Note Number	
Driver	
Name of Driver	LIM YU BENG (LIN YOUMING)
NRIC No	S7310461J
Date Of Birth	22/03/1973

22/03/1973 Date Of Birth OUTDOOR Occupation 01/10/2009 Date Of Driving Pass

8 YEARS AND 2 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-90891189 Mobile Number

Fax Number

OTHERS-90891189 Contact Number

LIMYUBENG@YAHOO.COM.SG EMail Address

Address

BLK 618 YISHUN RING ROAD

#06-3232

Postcode

760618

OTHER - LEASING

Was driver an employee of the Insured's Company NO If No, Relationship of the Driver with the Insured

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

Was any body injured in the Accident?

YES

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

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE

TEL NO: 1800-8522999 - FAX NO: 68522239 Police Station Contact

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASECREFER TO POLICE REPORT T/20171208/2051

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJY379H

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

ESTHER SIAM ERN HONG

NRIC/Passport Number

S8783846C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

4

Details of Witness

Name

Phone Number

Page 2 of 21

Email Address

DETAILS OF INJURED PERSON 1

Name

LIM YU BENG (LIN YOUMING)

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

SLS572Z

Were seat belts worn?

YES

Was injured conveyed to hospital by ambulance? NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

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

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name: A Portage

Policyholder's Signature Date & Time:

I/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 & Time:

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





T/20171208/2051

1 of 3

Report No. T/20171208/2051

Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/12/2017 12:10		/lade:	Vide Report No.:	Station Diary No.: 72	
Informa	nt's Partic	ulars			
Name of Informant: LIM YU BENG			Address: APT BLK 618 YISHUN RING ROAD #06-3232 SINGAPOR 760618		
	/ ID No.: O / S73104	61J	Contact No.: Home/Office: Mobile: 90891189		
National SINGAP	lity: PORE CITIZ	ΈN	Email:		
Sex: Male	Age:	Date of Birth: 22/03/1973	Type of Informant: Driver		
Race: Chinese	<u> </u>		Language: English	Institution / School Name:	
Occupation: GRABCAR DRIVER		₹	Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Infor	mation of the Accide	ent		Very majorities to a legal of
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 07/12/2017 11:10	Type of Location: X-Junction
A SOUTHWARK CONTRACTOR	TH AVENUE 1			
Weather: Road		Road Surface: Dry	F	Road Speed Limit:
Traffic Flow: Traffic		Traffic Control: Not Controlled	1.75	Fraffic Volume: Light
Type of Collis Between Mov	sion; ring Vehicles - Head ¹	o Side	a	Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJY379H	Car	HONDA	CIVIC	Red		0
SLS572Z	Car	ТОУОТА	ISIS	Blue	Slightly	1

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



2 of 3

Report No. T/20171208/2051

Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999

CONTINUATION OF REPORT

Driver						Market Control
Name	ESTHER SIAM ERN	HONG		ID No.		S8783846C
Related Vehicle	SJY379H (Car)			Conta	ct No.	NIL
Hospital/Clinic	NIL			Class Driving Licent Expiry	g	Class; NIL Date of Expiry; NIL
Date Treatment	NIL Date Disc					
No. of Days gran	ted Medical Leave	NIL	Degree o	gree of Injury NIL		
Driver						The second second
Name	LIM YU BENG			ID No	11	S7310461J
Related Vehicle	SLS572Z (Car)		Contact No.		90891189	
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class Drivin Licent Expiry	g	Class: 2B,2A,3 Date of Expiry: NIL	
Date Treatment	07/12/2017 Date Di		Date Disc	charge	NIL	
	ted Medical Leave	05	Degree o	of Injury	Sligh	t

Brief Details.

On 07/12/2017 at about 1110hrs along the cross junction of Bedok South Ave 1 towards ECP, I was driving my vehicle (bearing plate number: SLS572Z) on the 2nd lane from the right of a 4 lane road. The lane on my right was only intended for vehicles turning right and my lane is only for vehicles going straight. At that point of time, I was at the traffic light and it was red and all vehicles were stationary. There were some vehicles ahead of me but there was no vehicles on the lane to my right.

All of a sudden, a vehicle bearing plate numb er: SJY379H appeared out of nowhere and collided with the side of my vehicle. Thereafter after I high beam her vehicle was then she stopped a distance away. We then exchanged particulars and left. I am a Grabcar driver and the vehicle I was driving is a rental car. At that point of time, I did not sustain any injuries. However, later I had a neck pain and went for medical treatment at Mount Alvernia Hospital and was given 5 days MC from 07/12/2017 - 11/12/2017.





Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999 3 of 3 Report No. T/20171208/2051

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: F / Sgt 2 MUHAMMAD RIDWAN BIN SA'MION	Signature Of Informant
Signature Of Interpreter: Not applicable	Date/Time: 08/12/2017 12:10
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING	Classification Of Case:
Authentication Stamp NP168 Singapore Police Fo	orce

QUALITY LEASING PTE LTD

15 Commonwealth Lane Lot 57 | Commonwealth Car Mall | Singapore 149554 Tel: 6473 8668 Fax: 6473 3005 | Co Reg. No. 201312796G

Vehicle Lease Agreement

THIS AGREEMENT is made on the	15th	day of Se	Q 2017 between	n Quality Leasing
DTE I TD Chargins for called the C	huner' which	expression sha	where the context so	admits include the
owner's successors in title)	of the on	e part ANI	Lim Yu Beng	of
owner's successors in title) (BIK 618 Yishun Ring Road #0	6-3232	(Hereinafter ca	alled 'the Hirer') of the ot	her part.
WITNESSETH as follows:-	760618			

- The Owner agrees to let and the Hirer agrees to lease the motor vehicle described in the Schedule hereto (hereinafter called 'the Vehicle' which expression shall also include any accessories replacements renewals or additions thereto) in accordance with the terms and conditions herein contained.
- The lease of the Vehicle shall commence on the date and at the time specified in the Schedule and shall continue for the entire period ending on the date and time therein stated ("the Lease Period").
- 3. The Hirer acknowledges that the Vehicle is the property of the Owner and the Hirer shall not claim or assert any right to ownership or title to the Vehicle. The Hirer acknowledges that he is in possession of the Vehicle solely as a Hirer and holds the Vehicle as a Bailee for the Owner.
- 4. The Hirer shall upon execution of this Agreement pay the RENTAL CHARGE of SGDS_IESC and a DEPOSIT of SGDS_SOO specified in the Schedule hereto as security for the due performance and observance of the Hirer's obligations under this Agreement. Without prejudice to any other rights which the Owner may have against the Hirer, the Owner shall be at liberty to appropriate and retain such sum of money from the deposit that may be due from the Hirer to the Owner under the terms of this Agreement. Provided always that if the Hirer shall duly perform and observe all the covenants, conditions, stipulations and agreements during the entire Lease Period, the Owner shall at the expiration of the Lease Period refund the deposit without interest to the Hirer.
- The Hirer covenants with the Owner as follows:
- (a) To pay the monthly rental charges and payments specified in the Schedule on the FIRST day of every month during the Lease Period.
- (b) To keep the Vehicle in the Hirer's possession and custody and provide for its safe and proper keeping and permit any person who may be authorized by the Owner to have access thereto for purpose of inspecting the Vehicle;
- (c) To authorize and permit only holders of a valid driving license of not less than Two (1) years and who are not less than 21 years of age and not more than 65 years to drive the Vehicle.
- (d) Not to re-lett or re-hire the Vehicle to third parties or allow the Vehicle to be use for public hire such as UBER and GRABCAR or to let unauthorized persons or learners use the Vehicle or permit the Vehicle to be used for smuggling or trafficking of narcotics and contrabands or for any other illegal purposes or criminal activity or for the purpose of testing or racing or any other form of contest and to indemnify the Owner for all losses including the value of the Vehicle in the event the Vehicle is forfeited, confiscated, impounded or damaged or destroyed;
- (e) Not to smoke or let any person smoke in the vehicle, failing which to a penalty of \$500.00 will be imposed;
- (f) To observe the road traffic laws and regulations and comply with all police and traffic summonses and pay all fines and penalties in connection therewith;

- (t) The vehicle is not covered by a motor insurance policy covering personal insurance for the Hirer, his passenger or authorized driver and the Owner shall not be responsible for any liability claims, injuries or otherwise in connection with any accident death or the losses arising from the use of the vehicle. The Owner may at the request of the Hirer and upon payment of the requisite charges arrange for separate personal accident coverage for bodily injury or death;
- (u) In the event of an accident, the Hirer shall be liable for the first \$\$3000 (3rd Party Coverage Vehicle) or \$\$4000 (Comprehensive Coverage Vehicle) of each and every accident involving any damage to our Vehicle during the lease period. And \$\$5000 of each and every accident involving any damage to our Vehicle during the lease period when vehicle is out of the territory of Singapore for all insurance coverage type. An excess of \$\$\$8000 will be imposed in the event of a Total Loss. An excess of \$\$\$3000 per driver will be imposed for non inform additional driver.
- (v) Not to acknowledge or compound any claim either partially or fully in respect of any accident involving the Vehicle and forward all correspondence in connection with any such accident to the Owner or its insurers. In the event of an Accident, the Hirer undertakes to send the Vehicle to the Owner for inspection. A replacement car (to be determined by the Owner) will be provided for the duration;
- (w) To pay as and when required by the Owner any increase in the Road Tax as may by levied or imposed by Government on the Vehicle over and above the amount levied at the date of commencement of this Agreement.
- 6. If the Rental Charges remains unpaid by the Hirer at the expiration of seven (7) days after becoming payable (whether formally demanded or not) then the Hirer shall pay interest on the outstanding Rental Charge at the rate of 10% (TEN Per Cent) per month on any such unpaid Rental Charge commencing retrospectively from the date the Rental Charges becomes payable until the Rental Charge is fully paid.
- 7. If the Hirer defaults in the payment of Rental Charges for three (3) daysor if the Hirer breaches any of the covenants, conditions, stipulations or the agreement herein and fails to remedy the breach within three (3) days of receiving notification by the Owner to do so or if the Hirer enters into liquidation or is adjudged a bankrupt then the Ownermay upon such acts of repudiation terminate the Agreement whereupon it shall be lawful for the Owner at any time thereafter to repossess the Vehicle but without prejudice to the Owner's rights to recover all outstanding Rental Charges or sums payable by the Hirer under the terms of this Agreement.
- 8. In the event any action is taken by the Owner to repossess the Vehicle or to recover the Rental Charges or any sums payable by the Hirer under this agreement, the Hirer shall pay all costs incurred by the Owner including all legal costs incurred on an indemnity basis.
- All notices or legal process instituted against the Hirer shall be deemed to be sufficient service if left addressed to the Hirer at the Hirer's address stated in this Agreement.
- 10. Should the Hirer seek to terminate this Agreement before the expiry of the Three (3) months period for whatever reason, the Hirer will have to pay liquidated damages equivalent to Che (1) months Rental Charges to the Owner as a genuine pre-estimate of the loss and damage suffered by the Owner for such early termination.
- 11. Should the Hirer seek to terminate this Agreement during the last One () months, the Hirer will have to pay liquidated damages equivalent to One () months Rental Charges as well as the Rental Charges for the remaining Lease Period as a genuine pre-estimate of the loss and damage suffered by the Owner for such termination.
- 12. The Owner reserves the rights to amend the terms and conditions of rental without notice to the Hirer but the Owner has no responsibility to update any information in this contract.

laim Handling				
ccident MT/0972925			9-3-33	GST Registration No.
	5082552257-01	Vehicle No.	51.55722	Policyholder NAIC
olicyholder Name	QUALITY LEASING PRIVATE LIMITED			Loading
roduct Code	FLEET INSURANCE	Cover Type	Tried Party	Contact No.(Home)
antact No. (Mobile)	90891189	Contact No. (Office)		eCode
mail Address		Special Remark		eCode Reason
FK	© No Yes	TCA	No Yes	ecode Herson
CD Protection	No	NCD Entitlement(%)	0	
Accident Details				
leport Date	08/12/2017 19:19	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	07/12/2017	Time of Accident Inhomo-	11:10	Country of Accident
eporting Centre		Orange Porce		ICM No.:
Accident Location	CROSS JUNCTION FROM BEDOK SOUTH AVE I	TOWARDS ECF		
♥ Benefits				
□ Excess				
Own damage Excess	0.00	Additional Excess	0.00	Windscreen Excess
Innamed Driver Escess		Outside Singapore OD Excess	0.00	
Third Party Excess	1,500,00	Outside Singapore TP Excess	1,500.00	
GST Registered Informa	stion			
ST Registered	No.		GST Registration Date	
ST Registration No.			GST Status Venfled	Yes
Modification History				
⇒ Policyholder Mailing Ad	dress			
Address 1	317 DUTRAM ROAD	Address 2	#02-39 CONCORDE SHOPPING	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	Lat-57	Related Policy Number	5096451899	
OI Driver Info				
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	LIM YU BENG (LIN YOUMING)	Driver NRIC	573104613	Driver DOB
Register Date of Driver License	01/10/2009	Driver Age	44	Driving Experience
Contact No. (Mobile)	90891189	Contact No.(Office)		Contact No.(Home)
Address I	BLK 518 #06-3232	Address Z	YISHUN RING KOAD	Address 3
Address 4		Address Type	Foreign address	Post Code
Unit No.	96-3232			
Does he own a Singapore Registered car?	Yes @ No	Driver Vehicle No.	SUSS772	Driver Insurer Company
Declaration				
Breathalyser or Blood Test	Ø mg	Any injury?	Yes @ No	
Reading?				
Modification History				
Claim 001 OD-MX Ne	w.			
Cleim Type *	OD-MX •	Insured Name	QUALITY LEASING PRIVATE LIM	Insured NRIC
Contact No. (Mebile)		Contact No.(Home)	NIL	Contact No.(Office)
Email Address		CII Vehicle Number	51.55722	TP Vanicle Number
Claim Description	SLS572Z / SJY379H DN 7 Dec 2017	N. MATERIAL STATE	10	Name of Preferred Workshop
Preferred Workshop Contact	KATELON STATUTE OF THE STATE OF	Insured Liability *	Not at Fault	
No.	with		Preferred Workshop, Name unknown	GIA report
Require Finalisation	Yes	Preferend Repair Option	Frederica Managora, managoramini	Date Received
Date Registered	06/12/2017 19:28	Claim Close Date		Total Loss but Repaired
Report Taken By	ROSLI WAHAB	Workshop Repairer		THE LOS OF THE PARTY OF THE PAR
Print AK letter				
			Save Submit	
Attachment			appointed Section Control of the Con	
Attachment	MT/0972425	Claim No.	001 68/12/2017 19/30	

	Uploaded By/Cote	Folder Date		nie Name			?		50
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1		NATIONAL ASSESSMENT CENTRE SERVICES (BUI H)) on OR Dec 2017 19:26	ŧ.	Photos		Normal			Ph
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		(BUR H)) on 08 Dec 2017 19:27		Photos No		Normal			PH
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. ACCIDENT STATEMENT

ACCIDENT DATE: (07/12/20/TIDD/MM/YYYY), TIME: (11:10) (HH:MM)
LOCATION: CROSS FUNCTION BROOK SOUND POLICE TOWNEDS FUEL.

1.	DETAILS OF VEHICLE SUS 5722	v # #
	DIVERIOLE NUMBER: 403 3/14	
58	DINSURANCE COMPANY: 1/40	-01
	DIPOLICY TYPE: (COMPREHENSIVE / THIRD PART	Y / THIRD PARTY FIRE & THEFT)
	elmake & MODEL: - 104 LOYATA- LA	17
	()TYPE:(SALOON / COUPE LMPY /VAN / LORRY	/ MOTORCYCLE / OTHERS
	g) VEHICLE CATEGORY: (PRIVATE / COMMERCIA	WILL CELAB
	TO PURPOSE OF USING AT ACCIDENT TIME! DR	ANCE IVES/NO
	I) ARE YOU CLAIMING UNDER YOUR OWN INSUR IF INO, PLEASE STATE (THIRD PARTY CLAIM / REP	CREING ONLY)
	purity : 1 전 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
4),	A) NAME: QUALITY WASING	[MALE / FEMALE)
7/:	b) NRIC/FIN/PASSPORT:	_CONTACT!
	c)ADDRESS:	
90 07 d	· CONTINUE TO 3,d IF DRIVER ALSO POLICY HO	DER
was die .		
Alto of bustoning	CINAME: UM (M: DIONO)	MALEL EFFENTELLA
(Including driver)	b)NRIC/FIN/PASSPORT:	CONTACT: 900 110
(2)	c) ADDRESS!	
*)	57. 08.1975	111100001
40	· d) DATE OF BIRTH: (22 05/1975) IDD/A	
47	11 PORTE DEDRIVING LUCICE	[200]
4.	WAS DRIVER AN EMPLOYEE OF THE INSURE	ED'S COMPANY? (YES NO
	TE NO RELATIONSHIP OF THE DRIVER WITH	H INSUREDI
5,	DIWEATHER CONDITIONLICLEAR / RAINING /	SIHERS
i v	D)ROAD SURFACE (DRY / WET / OTHERS WAS ANYBODY INJURED (YES / NO)	
7	DIREPORTED TO POLICE (YES / NO)	YISHUN Soury.
12 8.5	IF YES, PLEASE STATE WHICH POLICE STATION	1110000 0000
8.	THIRD PARTY VEHICLE	MODEL:
4 Ho of passonger	O) VEHICLE NUMBER! STY 377 H	Pal Hours
(Induding driver)	D) DKIVERS NAME: ILOIVERAMINATION	C CONTACT:
())	THIRD PARTY VEHICLE	FRANKLING STORY OF BUILDING TO A STORY OF THE STORY OF TH
	AL VELICLE NUMBER	MODEL:
# 110 of becomese	a) DRIVER'S NAMEL	CONTACTION
(Including drive	T) I) NRIC/FN/PASSPORTI	CONTACT
(_)	4	St. Inc. Inc.

email = limyubens Qyahoo.com.85

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7310461J



LIM YU BENG (LIN YOUMING)

林佑明

CHINESE

22-03-1973

Country/Place of birth SINGAPORE



5269814





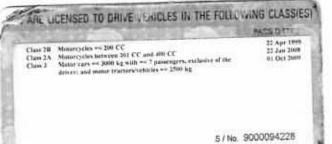
18-02-2014

APT BLK 618 YISHUN RING ROAD #06-3232

SINGAPORE 780818

NRIC No: \$7310461J

Date: 23/08/2017



NP 428A



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: 5082552257-01	Cover : Third Party
Index mark and Registration Number of Vehicle Chassis Number	: SLS572Z : ZNM100051836 : QUALITY LEASING PRIVATE LIMITED
2. Name of Policyholder	1777 C.
3. Effective Date of Insurance	: 06 Sep 2017 : 05 Sep 2018
4. Expiry Date of Insurance	; 05 Sep 2016
 Persons or Classes of Persons entitled to drive# The Policyholder. 	COLD TO THE STATE OF THE STATE
the Motor Vehicle or has been so permitted a enactment or regulation in that behalf from d	in accordance with the licensing or other laws or regulations to drive and is not disqualified by order of a Court of Law or by reason of any
 Limitations as to Use# (a) Use for social domestic and pleasure purpose 	s and in connection with the Policyholder's or Hirer's business.
This Policy does not cover	
 (a) Use for racing, pace-making, reliability trial or (b) Use for the carriage of goods (other than same) (c) Use for any purpose in connection with the Miller of the following forms and section section 8 Act (Chapter 189) and Section 95 of the Road headings. 	ples) in connection with any trade or business.
EXCESS/SECTION 1)	: N/A
EXCESS (SECTION 2)	: 551,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	± N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A
I/We hereby Certify that the Policy to which this Cert Vehicles (Third Party Risks and Compensation) Act (C Agency : COWELL INSURANCE (AGENCY Date of Issue : 19 Jul 2017 17:38 hrs	ificate relates is issued in accordance with the provisions of the Motor hapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) PTE LTD (00000610380) For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED
Vehicles (Third Party Risks and Compensation) Act (C Agency : COWELL INSURANCE (AGENCY	hapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) PTE LTD (00000610380)

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