

Date In: 26/12/17 14:29	Job description	Date & Time Completed	Done by:
Ref No: NA/ AIG 17024357/h4	SAS e-filing		
Veh No: GGG 6304 Z	E-mail (within 3hrs. A/C Date)		
D.O.W: 24/12/17 14:50	i-Motor Claim Form		
OD <input checked="" type="radio"/> Reporting Only	i-Motor W/O (within 60 days TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ( )	Tel: ( )	Fax: ( )
TP Particulars:	Veh No: GGG 9245 R	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%, F: 80-100%)		
Year of Registration: ( )	Warranty: YES ( ) / NO ( )	
Excess: (\$ )	Loading: \$1,000 ( ) / \$2,000 ( )	

General Remarks:-
( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.
( ) Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: ( )
-------------

Date/Time	Actions

MA1707974

## Invoice Preparation Checklist

Ant (\$)	Amr (\$)
1st Bill	AMR Bill

## Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Tel: 1

Tel: 2 / 3

1) AR: Accident Reporting (\$30)	30.00
2) DA: Damage Assessment (\$100) INC (\$80)	
3) TP: Towing Fee \$40 \$45	
4) FT: Follow-Through Survey \$120	
5) FT: Follow-Through Survey-Resurvey \$30	
For claiming against TP Only (wef 15 Jan 2018)	
6) TR: Re-inspection \$75	
7) N1: 1 day DA + SMRI Survey \$160	
8) NTUC Additional Services:	
OD:	
*N5: Courtesy Car / Tpt Allowance	\$5
*N6: Repair Coordination	\$10
*N7: Post Repair Inspection	\$25
*N8: DM: Collect Excess Coordination	\$5
TP (\$110) TP (w/ INC against D.C)	\$110
9) N12: Gas Mobile	\$10

Invoice dated:

Fee charged:

Invoice dated:

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 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.
6. 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 aforesaid.

### ACCIDENT STATEMENT

Date Of Report	26/12/2017 14:29
Date Of Accident	24/12/2017 14:50
Exact Location Of Accident	LORNIE RD TWDS ADAM BEFORE PIE EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG6304Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	FRIO ACR PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91968160
<b>Vehicle Particulars</b>	
Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	PTE USE
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700054487
Cover Note Number	-

### Driver

Name of Driver	TAI PUN KEONG
NRIC No	F8237829N
Date Of Birth	15/04/1976
Occupation	OUTDOOR
Date Of Driving Pass	01/01/2006
Driving Experience	11 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91968160
Fax Number	
Contact Number	
Email Address	NOEMAIL



Address	BLK 1 DEFU LANE 10 #02-543
Postcode	539182
Was driver an employee of the Insured's Company	YES
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
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
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)	4
Passenger 1	NAME: : CHAN KIM WAH GENDER: : MALE
Passenger 2	NAME: : MOHD HAZMEL BIN ABD HALIM GENDER: : MALE
Passenger 3	NAME: : MUHAMMD KAMARUL AIMAN BIN DERAMAN GENDER: : MALE

#### 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 ATTACHED STATEMENT.

#### 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	GBG9245R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name TAI PUN KEONG  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? GBG6304Z  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

#### DETAILS OF INJURED PERSON 2

Name CHAN KIM WAH  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? GBG6304Z  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

#### DETAILS OF INJURED PERSON 3

Name MOHD HAZMEL BIN ABD HALIM  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? GBG6304Z  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

#### DETAILS OF INJURED PERSON 4

Name MUHAMMD KAMARUL AIMAN BIN DERAMAN  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? GBG6304Z  
Were seat belts worn? YES  
Was this 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.
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. 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.

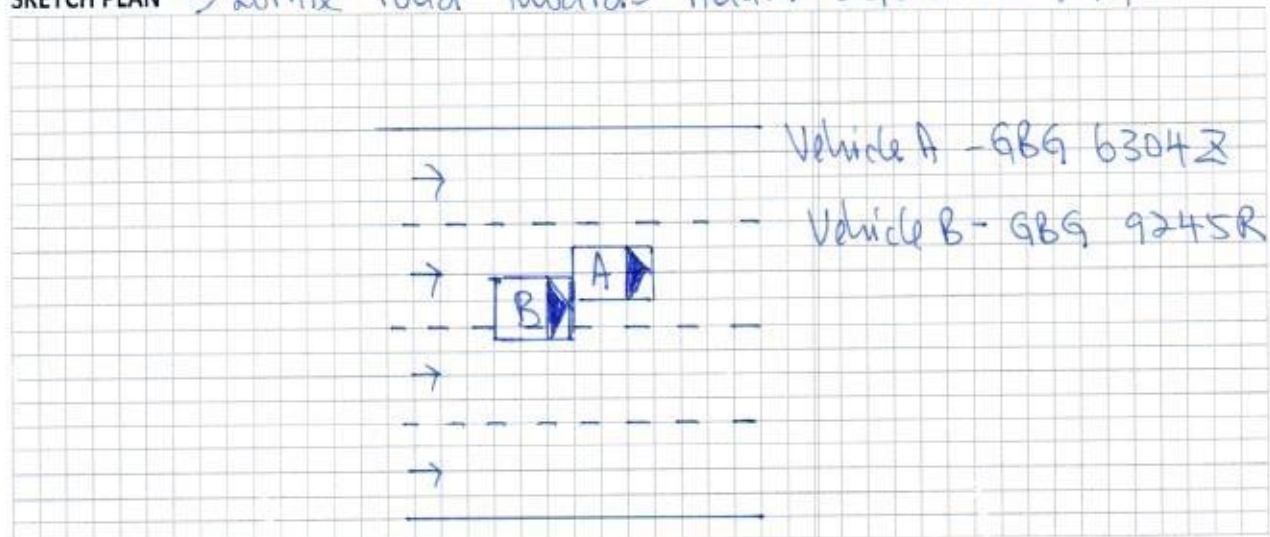


Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN → Lornie road towards Adam before PIE Exit



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, at the stated venue, I vehicle 'A' GBG 6304Z was travelling straight on my lane. Suddenly I felt an impact on my rear portion. Vehicle 'B' GBG 9245R collided onto my rear portion of my vehicle.

Passengers inside the lorry at the time of accident

- were
- 1) Chan Kim Wah - A40217981
  - 2) Mohd Hazmel Bin ABD HALIM - G8551402X
  - 3) Muhammad Kamarul Aiman Bin Deraman  
G8551636T

DECLARATION

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:

*Jan*

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

*[Signature]*



# ACCIDENT STATEMENT

ACCIDENT DATE: (24/12/2017) (DD/MM/YYYY), TIME: (14:50) (HH:MM)

LOCATION: Lornie rd towards Adam before Pk Frit

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBG 6304Z  
 b) INSURANCE COMPANY: AIG  
 c) POLICY NUMBER: 1700054487  
 d) POLICY TYPE: (COMPREHENSIVE) / THIRD PARTY / THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: Nissan New Cabstar  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY) / MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL) / MOTORCYCLE  
 h) PURPOSE OF USING AT ACCIDENT TIME: Pte Use  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM) REPORTING ONLY

## 2. INSURED / POLICY HOLDER

- A) NAME: Frio Acr Pte Ltd (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: Blk 1 Dely Lane 10 #02-543  
8C 539182

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Tai Pun Keong (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: A31054538 CONTACT: 91968160  
 c) ADDRESS: Johor

\*d) DATE OF BIRTH: (15/04/1976) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: more than 10 years

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

5. a) WEATHER CONDITION: (CLEAR) / RAINING / OTHERS \_\_\_\_\_

b) ROAD SURFACE: (DRY) / WET / OTHERS \_\_\_\_\_

6. WAS ANYBODY INJURED (YES) / NO 4 person

7. a) REPORTED TO POLICE (YES / NO)  
 IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBG 9245R MODEL: Toyota  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Email = REPORTING@  
 TOPQUE5.com  
 Fax = 6452 4584

 **WORK PERMIT**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
**KKH & TAM DESIGN PTE. LTD.**



Name  
**TAI PUN KEONG**

Work Permit No.  
**S 33329381**

Sector  
**CONSTRUCTION**

 **K0063867**

**VISIT PASS**  
Immigration Regulations 06-12-2017

Name  
**TAI PUN KEONG**



FIN  
**F8237829N**

Date of Birth  
**15-04-1976**

Sex  
**M**

Nationality  
**MALAYSIAN**

Download SGWorkPass App to check status



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.





31054538

3 1 0 5 4 5 3 8



**Maria / Maria  
TAI PUN KEONG**

Wangaragala / Nationally  
MALAYSIA

THIRD LABEL / Date of birth  
15 APR 1976

Janena / Sex  
L-M

Tarish Dhaluwarean / Cost of Issue  
07 OCT 2013

Pejabat Pengeluaran / Issuing Office  
**UTC MELAKA**



Mo. Pengesetan / Identity Mo.  
760415045465

Tempat lahir / Place of Birth  
**MELAKA**

Things / Maligne  
470 cm

Tarikh Takarruf / Date of Enquiry  
07 APR 2019

[illegible]



MALAYSIA

TRAFIK KERETA MOTOR ANTARABANGSA  
INTERNATIONAL MOTOR TRAFFIC

**SURAT KEBENARAN MEMBAWA KERETA  
ANTARABANGSA  
INTERNATIONAL DRIVING PERMIT**

Perjanjian Trafik Jalan Raya 19hb September, tahun 1949

~~Commission on Road Traffic of 1944 September 1949~~  
ROAD TRANSPORT DEPARTMENT

FEDERAL TERRITORY

KUALA LUMPUR

MALAYSIA

Tarikh.....25 OCT 2017 - 25 OCT 2018  
(Date)



Tandatangan atau Cap  
Pihak Berkas Pendaftaran  
(Signature or Seal of the  
Registration Authority)

MOHD ZAKIRIN, 2100030010  
KELOMPOK 2, JALAN PASAR TUA 75  
JALAN PERKUTAN, 75000 KUALA  
DAMPAK BANDAR SRI PETALING, SELATAN  
WILAYAH PERSEKUTUAN MALAYSIA

26 OCT 2017

Ther. Paul Keen

MA 6A-9A-7A

15-0117-19

3. 25. 1922

DESA ctenig perodan 93558 mgl



Signature of client/parent: \_\_\_\_\_

### EXCLUSIONS (polya)

2

π

111

2

ACKNOWLEDGMENTS



Uppgifter angående föraren.

Tillnamn 1  
Förnamn 2  
Födelseort 3  
Födelsedag 4  
Hoopetal 5

Kortkortet gäller för nedan angivna slag av motorfordon:

Motorcykel med eller utan sidvagn, invalidmotorfordon och motorfordon på tre hjul, vars tjänstevikt ej överstiger 400 kg (900 lbs).	
Motorfordon, som är avsett för befordran av personer och som har utöver plats för föraren, har högst åtta sittplatser eller som är avsett för befordran av gods och har en tillåten maximalvikt icke överstigande 3 500 kg (7 700 lbs). Till dylikt motorfordon får kopplas ett till tillägsfordon.	C
Motorfordon, som är avsett för befordran av gods och vars tillåtna maximalvikt överstiger 3 500 kg (7 700 lbs). Till dylikt motorfordon får kopplas ett till tillägsfordon.	D
Motorfordon, som är avsett för befordran av personer och som har mer än åtta sittplatser, utöver plats för föraren. Till dylikt motorfordon får kopplas ett till tillägsfordon.	E

Med ett fordon's tillåtna maximalvikt, förstås summan av fordonets vikt, då det är färdigt att lagas i bruk, och dess maximallast. Med "maximallast" förstås den sådana last, som tillåts av vederbörande myndighet i det land, där fordonet är registrerat. I alla sådana fall är tillåtna maximalvikt icke överstiger 750 kg (1 650 lbs).

Inläggning av rätt att göra bruk av internationellt kort.

Inläggningar (artikel VIII)

Innehavaren är berördad rätten att göra bruk av fordon inom (land) \_\_\_\_\_ på grund av \_\_\_\_\_

Personlig  
brev  
tegel eller  
stämpel

Plats: \_\_\_\_\_  
Dag: \_\_\_\_\_

Underskrift: \_\_\_\_\_

Om utrymmet här ovan redan är utnyttjat, använd annat utrymme ovanför för inläggning.

Indications relatives au conducteur :

Nom 1  
Prénoms 2  
Lieu de naissance 3  
Date de naissance 4  
Domicile 5

Catégorie de véhicules pour laquelle le permis est valable :

Motorcycles avec ou sans sidecar, voitures d'infirme et automobiles à trois roues dont le poids à vide n'excède pas 400 kg (900 livres).	
Automobiles affectées au transport des personnes et comportant, outre le siège du conducteur, huit places assises au maximum ou affectées au transport des marchandises et ayant un poids maximum autorisé qui n'excède pas 3 500 kg (7 700 livres). Aux automobiles de cette catégorie peut être attaché une remorque légère.	D
Automobiles affectées au transport des marchandises et dont le poids maximum autorisé excède 3 500 kg (7 700 livres). Aux automobiles de cette catégorie peut être attaché une remorque légère.	E

Le terme "poids maximum autorisé" d'un véhicule désigne le poids du véhicule en ordre de marche "maximum" désigne le poids du chargement déclaré admissible par l'autorité compétente du pays d'importation du véhicule. Les remorques légères sont celles dont le poids maximum autorisé ne dépasse pas 750 kg (1 650 livres).

EXCLUSION

Le titulaire est déchu du droit de conduire sur le territoire de (pays) \_\_\_\_\_ en raison de: \_\_\_\_\_

Exclusions: (pays I-VIII)

Scellé ou cachet de l'autorité

Lieu: \_\_\_\_\_  
Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

Inscrire l'exclusion dans tout autre espace prévu à cet effet, si l'espace réservé ci-dessus est déjà utilisé.



## NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : Frio Acr Pte Ltd  
 Period of Insurance : 20 Sep 2017 To 19 Sep 2018  
 Engine No. : ZD30024714N  
 Chassis No. : JN1SC2F24Z0859892

Vehicle No. : GBG6304Z  
 Policy No. : 1700054487  
 Endorsement No. :  
 Issued Date : 12 Oct 2017

## ABOUT THE COVER

Make/Model : NISSAN NEW CABSTAR  
 Engine Capacity/Tonnage : 1.6 Tonnage  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2017  
 Insuring with COE/PAF : Yes

## Person or Classes of Persons Entitled to Drive\* :

- a) Any person who is driving on the Policyholder's order or with their permission.  
 b) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

## Limitation as to use\* :

- Use in connection with the Policyholder's business.  
 Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.  
 3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle. c) use for any purpose in connection with Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

## EXCESS

Section 1  
 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2  
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

## APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Tan Chong Motor Sales Add: 913 Bt Timah Road Singapore 589623 64694091 64694092 64694093  
 2. TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 628099 62622212  
 3. Tan Chong Motor Sales Add: 17 Lor 8 Toa Payoh Singapore 319254 63570753 63570754  
 4. Autolution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666  
 5. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

## IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: TAN CHONG CREDIT PTE LTD

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500610528

TAN CHONG CREDIT PTE LTD - TKH  
 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 589622 ANSP-MOTOR  
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*Mobile*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

SSC258