

**NATIONAL Assessment Centre Services** (Unit 1 2000) **NA18060094**

Date In: **08/05/2018** 16:44  
 Ref No: **NBA/INC18008436/Y**  
 Veli No: **EX 3624**  
 D.O.A: **07/05/2018** 19:00  
 CO / TPO Reasoning Only

TP Insured:

Job Description: SAS e-Milling  
 E-mail (with file, AIC only)  
 1-Motor Claim Form  
 1-Motor VVO (within 100 miles, 1st only)  
 1-Photo Uploaded  
 Assessment/Survey Report  
 Ass't Report by Box/Hand to Owner/VVW

Date & Time Completed: **08/05/2018** 17:36  
 Done by: **MA10993524-001**

Preferred Wksp / INC Assign Wksp / OWI:

TP Particulars: Yeli No: **PROTESTIAN** INC ( ) / Non-INC ( )  
 Owner / Driver ( )  
 Policy No: ( ) Period: ( ) Cover Type: ( )  
 Confirmed by: ( ) Date: ( )  
 Insured/Driver Liability: ( ) % (Note: B/L Sum (WO): NI 0-20%, P1 21-79%, P1 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 repeller.  
 ( ) Total Loss Case: 1 to e-mail Insurer URGENTLY.  
 Drive-In ( ) / Towed-In ( ) Invoice: YES ( ) / NO ( ) Towing Co: ( )

Remarks: INC 1801110: 6788 60167  
 1) Apply for Transition Allowance ( ) / Courtesy Car ( )  
 2) QC Check / Post Repair Inspection ( )  
 3) Upload Recovery Photo (Repair Cost > \$3000) ( )

Injury: ( )  
 Date/TIME: ( )  
 Action: ( )

**NA1802929**

Vehicle Particulars: ( )  
 Driver/Owner: ( )  
 Policy No: ( )  
 Assigned Portion: ( )

Checked by (Bug-In-Charge): ( )

Comments: ( )

Invoice Particulars Check:

1) AR Accidental Reporting (300)	
2) DA Direct Assessment (300)	INC (45)
3) TP Towing Fee	140/112
4) FT Follow Through Survey	110
5) FT Follow Through Survey (Reserve)	110
Total Invoice: INC Only (w/ 10% 300)	
6) TR Mileage	110
7) NI (40 DA + SMRT Survey	110
8) NTUC Additional Fee (99)	
9) ( )	
10) NI Courtesy Car / Tpl Allowance	110
11) NI Repair Condition Fee	110
12) NI Post Repair Inspection	110
13) NI / Collateral / Coordination	110
14) NI (11) TP (NA INC) Total INC	110
15) NI (11) Mileage	110

Invoice total: ( )  
 Invoice paid: ( )  
 P11 Charge: ( )  
 P12 Charge: ( )

## 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 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	08/05/2018 16:44
Date Of Accident	07/05/2018 19:00
Exact Location Of Accident	TELOK BLANGAH WAY TOWARDS TELOK BLANGAH CRESCENT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FX362H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TEH CHOK SIONG
NRIC No	S0759924B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96307683
Alternative Phone No	OFFICE-96307683

### Vehicle Particulars

Manufacturer	HONDA
Model	CG125-125CC (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	MOTORCYCLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5020105832-10
Cover Note Number	

### Driver

Name of Driver	TEH CHOK SIONG
NRIC No	S0759924B
Date Of Birth	17/07/1930
Occupation	INDOOR
Date Of Driving Pass	20/02/1975
Driving Experience	43 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96307683
Fax Number	
Contact Number	OFFICE-96307683
Email Address	NOEMAIL



Address	BLK 14A TELOK BLANGAH CRESCENT #07-306
Postcode	091014
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLIDED INTO PEDESTRIAN
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	1
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ROCHOR N.P.C. 11 KAMPONG KAPOR ROAD, SINGAPORE 208678
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180508/2065

#### 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	
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	NA/UNKNOWN
Name of Driver	UNKNOWN PEDESTRIAN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name UNLKNOWN PEDESTRIAN

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

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.

鄭楚城

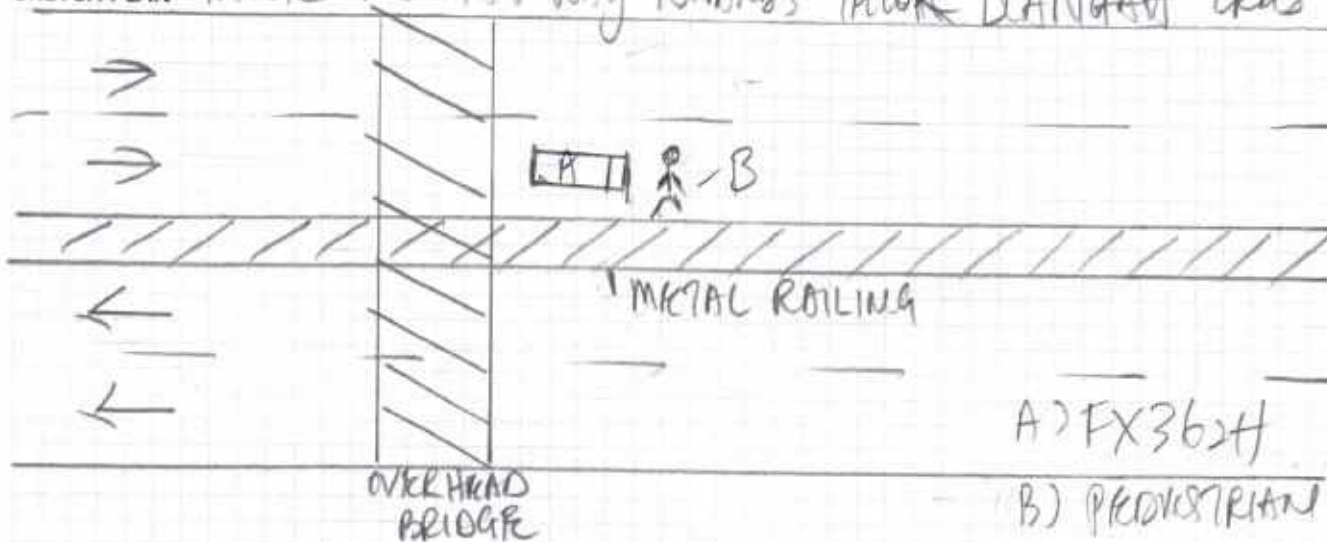
Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: GOPELI WATHAS  
NRIC/FIN No. 2810412018

SKETCH PLAN

TRUCK BLANGGAH way TOWARDS TRUCK BLANGGAH CRAS



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PS REFER TO POLICE REPORT  
1/2080508/2065

DECLARATION

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

郑楚城  
Policyholder's Signature  
Date & Time:

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

08/05/2018  
Reporting Centre Personnel's Signature  
Name: 郑楚城  
NRIC/FIN No.:





# SINGAPORE POLICE FORCE



T/20180508/2065

Police Station Of Origin:  
Rochor N.P.C  
11 Kampong Kapur Road SINGAPORE  
208678  
Tel No: 1800-2949999

1 of 3

Report No. T/20180508/2065

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 08/05/2018 14:00		Vide Report No.:	Station Diary No.: 114
<b>Informant's Particulars</b>			
Name of Informant: TEH CHOK SIONG		Address: APT BLK 14A TELOK BLANGAH CRESCENT #07-306 SINGAPORE 091014	
ID Type / ID No.: NRIC NO / S0759924B		Contact No.: Home/Office: Mobile: 96307683	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 87	Date of Birth: 17/07/1930	Type of Informant: Rider
Race: Chinese		Language: Chinese	Institution / School Name:
Occupation: Unemployed		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 07/05/2018 19:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 TELOK BLANGAH WAY TELOK BLANGAH CRESCENT TELOK BLANGAH WAY travelling towards TELOK BLANGAH CRESCENT				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Moving Vehicle Against - Pedestrian				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FX362H	Motorcycle	HONDA	CG125	Blue	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FX362H	NTUC Income Insurance Co-Operative Limited	5020105832-10	12/08/2017	11/08/2018



**SINGAPORE  
POLICE FORCE**



T/20180508/2065

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Police Station Of Origin:  
Rochor N.P.C  
11 Kampong Kapur Road SINGAPORE  
208678  
Tel No: 1800-2949999

Report No. T/20180508/2065

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	TEH CHOK SIONG	ID No.	S0759924B
Related Vehicle	FX362H (Motorcycle)	Contact No.	96307683
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Pedestrian</b>			
Name	Unknown Pedestrian	ID No.	NIL
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 07/05/2018 at 1900hrs, I (FX362H) am travelling along lane 1 of TELOK BLANGAH WAY towards TELOK BLANGAH CRESCENT when a female subject suddenly run across the road. As I am unable to stop my vehicle on time, the front of my vehicle collided with the female subject. Ambulance then came and conveyed the female subject. The female subject complain of leg pain and there are slight abrasions on her legs.

I wish to inform that there is a quite a distance from the nearest traffic light. I then received a call from traffic police to make a report as such I came to post. I wish to inform that I do not have any in-vehicle camera.





**SINGAPORE  
POLICE FORCE**



T/20180508/2065

Police Station Of Origin:  
Rochor N.P.C  
11 Kampong Kapur Road SINGAPORE  
208678  
Tel No: 1800-2949999

3 of 3

Report No. T/20180508/2065

**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:

A /

Sgt 2 KOK JIAN HUI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MUHAMMAD KHAIRIL BIN KAMAL

Contact No.: 65476131

Signature Of Informant:

Date/Time:

08/05/2018 14:00

Classification Of Case:

Authentication Stamp

NP168

## Claim Handling

Accident MT/0993524

Policy No.	5020105832-10	Vehicle No.	FX362H	GST Registration No.	
Policyholder Name	TEH CHOK SIONG			Policyholder NRIC	S0759924B
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Leading	0
Contact No.(Mobile)	96307683	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	<span>Nil</span>
KPK	= NO YES	TCA	= NO YES	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	No

## ▼ Accident Details

Report Date	06/05/2018 17:32	Accident Report Within 24 hrs	Yes	Accident Type	GERDNG INTO Pedestrian
Date of Accident	07/05/2018	Time of Accident hh:mm	19:00	Country of Accident	Singapore
Reporting Centre		Grange Force		ICM No.	
Accident Location	TELOK BLANGAH WAY TOWARDS TELOK BLANGAH CRESCENT				

## ▼ Benefits

## ▼ Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

## ▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## ▼ Policyholder Mailing Address

Address 1	BLK 14A #07-306	Address 2	TELOK BLANGAH CRESCENT	Address 3	SINGAPORE 091014
Address 4		Address Type	Singapore address	Post Code	091014
Unit No.		Related Policy Number	5020105832-10		

## ▼ OI Driver Info

Driver Name	TEH CHOK SIONG	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S0759924B	Driver DOB	17/07/1930
Regular Date of Driver License	30/02/1975	Driver Age	67	Driving Experience	43
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 14A #07-306	Address 2	TELOK BLANGAH CRESCENT	Address 3	SINGAPORE 091014
Address 4		Address Type	Singapore address	Post Code	091014
Unit No.					
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	FX362H	Driver Insurer Company	NTUC

## Declaration

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

Claim 001

New

Claim Type *	OD-MX	Insured Name	TEH CHOK SIONG	Insured NRIC	S0759924B
Contact No.(Mobile)	96307683	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address		OT Vehicle Number	FX362H	TP Vehicle Number	PEDESTRIAN
Claim Description	FX362H / PEDESTRIAN ON 7 May 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GJA report	Received
Date Registered	06/05/2018 17:35	Claim Close Date		Date Received	06/05/2018 00:00
Report Taken By	RIZLI WANAB				

Print Ack letter

Save Submit

## Attachment

Accident No.	MT/0993524	Claim No.	001		
Last Doc. Received	Yes No	Upload Date	06/05/2018 17:36		
Path *					
Choose File	No file chosen	Category *	Confidential		
Choose File	No file chosen	Urgency *	Description *		
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Message Read		Clear Please Select	NO	Normal	

Send Message Upload

## ▼ Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:36	Photos	Normal	Photos 2018-5-8		Edit
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:36	Photos	Normal	Photos 2018-5-8		Edit
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:36	Photos	Normal	Photos 2018-5-8		Edit


	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:35	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:35	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:35	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:35	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:35	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:35	SAS	Normal	SAS 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:35	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-8	<a href="#">Edit</a>

Video List

Uploaded By/Data	Folder Data	File Name	Source	Action
		<a href="#">Display in New Window</a> <a href="#">Scan and uploading</a>		



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0759924B



NAME  
TEH CHOK SIONG

RACE  
CHINESE

Date of Birth  
17-07-1930

Sex  
M

Country of Birth  
CHINA

S0759924B

REPUBLIC OF SINGAPORE - DRIVING LICENCE

NAME  
TEH CHOK SIONG

Date of Birth  
17 Jul 1930

Issue Date  
04 Jun 2003

S0759924B



0753185



NRIC No. S0759924B



Group Category  
D+

Date of Issue  
16-02-1993

APT BLK SIA TELOK BLANGAH CRESCENT #07-308  
SINGAPORE 091014  
NRIC No. S0759924B Date 28-04-1999 No. 2875400

PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

PAGE 002

Class	Category	Expiry Date
1	Motor Vehicle (Category 200)	20 Feb 1975
2	Motor Vehicle (Category 200) and 300 cc	20 Feb 1975
3	Motor Vehicle (Category 300 cc)	20 Feb 1975
4	Motor Vehicle (Category 300 cc) and 400 cc	14 Jul 1992

Class 4 M-100 (Maximum weight of 2000 kilograms)

Expiry Date: 28-04-1999



## 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** : 5020105832-10

**Cover** : Third Party

1. Index mark and Registration Number of Vehicle

: FX362H

Chassis Number

: 9C2JC30503R500317

2. Name of Policyholder

: TEH CHOK SIONG

3. Effective Date of Insurance

: 12 Aug 2017

4. Expiry Date of Insurance

: 11 Aug 2018

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

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

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
NAMED DRIVER (1)	: TEH CHOK SIONG
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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

Agency : COMMERCIAL AGENCY PTE LTD (00000614425)

Date of Issue : 17 Jul 2017 14:39 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive