

# 哈 汽 車 貿 易 服 務

## HUP MOTOR TRADING & SERVICE

Blk 9004 Tampines Street 93 #01-120 Singapore 528838 Tel: 6784 0039 Fax: 6784 0076 Email: hupmotor@gmail.com Reg. No. 378091/00W

Our Ref: TP 2910/06/18

Your Ref:

Date: 5th June 2018

MUSTAFA BIN HASSAN ALKHATIB  
BLK 396, #11-293  
TAMPINES AVE 7, S (520396)

### Estimate cost of repair to TOYOTA ESTIMA AERAS 2.4 (A) S/Wagon - SKM 4018 A

1 pc rear bumper		\$ 571.40
6 pcs rear bumper top clips	@ \$ 3.80	22.80
8 pcs rear bumper low clips	@ \$ 3.80	30.40
2 pcs rear bumper o/s & n/s side retainer (Long)	@ \$ 51.90	103.80
2 pcs rear bumper o/s & n/s side retainer (Short)	@ \$ 36.40	72.80
1 pc rear bumper sponge damper		65.70
2 set rear bumper reverse sensor	@ \$ 280.00	560.00
1 pc rear bumper o/s reflector		52.30
1 pc tail gate door		1,490.10
1 pc tail gate door inner lock		389.20
1 pc tail gate door lock stricker		35.30
1 pc tail gate door 'ESTIMA' emblem		44.20
1 pc tail gate door 'AERAS' emblem		51.50
1 pc tail gate door logo emblem		66.70
1 pc tail gate door windscreen glass moulding		91.10
1 pc tail gate door windscreen glass inner seal		68.00
1 pc tail gate door windscreen glass sealant		60.00
1 pc tail gate door weatherstrip		325.70
12 pcs tail gate door inner trim board clips	@ \$ 4.20	50.40
1 pc rear end panel		625.50
1 pc rear end panel top garnish	@ \$	260.50
6 pcs rear end panel top garnish clips	@ \$ 6.80	40.80
1 pc rear lower garnish		175.70
		\$ 5,253.90
	Less 25%	\$ 1,313.48
		\$ 3,940.42

To wiring check up & transfer affected wiring system. 60.00

To remove & refix rear windscreen glass & necessary parts. 150.00

To transfer tail gate door inner trim board, hinge, shock absorber, garnish, wiper motor, arm, third brake light, inner lock & necessary parts into new door. 150.00

To remove & refix carpet, floor mat, garnish, floor board cover, spare tyre, carrier & necessary parts. 120.00

Labour charge to remove & cut out damaged parts, to jack, straighten & knocking out rear floor board panel, rear end panel & necessary parts, to weld, renew & align above parts. 1,350.00

To putty & respray painting on all affected accident parts. 1,650.00

To respray Tuff-Kote on all affected accident parts. 90.00

HUP MOTOR TRADING & SERVICE

\$ 7,540.42

## 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	05/06/2018 16:33
Date Of Accident	04/06/2018 13:50
Exact Location Of Accident	SLIP RD OF SERANGOON NORTH AVE1/ANG MO KIO AVE 3
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM4018A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MUSTAFFA BIN HASSAM ALKHATIB
NRIC No	S1589394Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96195162
Alternative Phone No	OFFICE-96195162

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA-2.4 (A)
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5064269151-04
Cover Note Number	

### Driver

Name of Driver	MUSTAFFA BIN HASSAM ALKHATIB
NRIC No	S1589394Z
Date Of Birth	27/08/1963
Occupation	INDOOR
Date Of Driving Pass	17/08/1983
Driving Experience	34 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96195162
Fax Number	
Contact Number	OFFICE-96195162
Email Address	NOEMAIL

Address	BLK396 TAMPINES AVE 7 #11-293
Postcode	520396
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	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?	NO
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)	1

#### 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

AS PER SKETCH PLAN ATTACHED

#### 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	SKW8906H
Vehicle Make/Model/Colour	TOYOTA ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	96859641
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

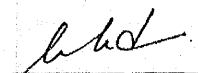
SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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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: 5/6/18

  
Driver's Signature

(If driver is not the policyholder)

Date & Time: 5/6/18

  
Reporting Centre Personnel's Signature

Name:

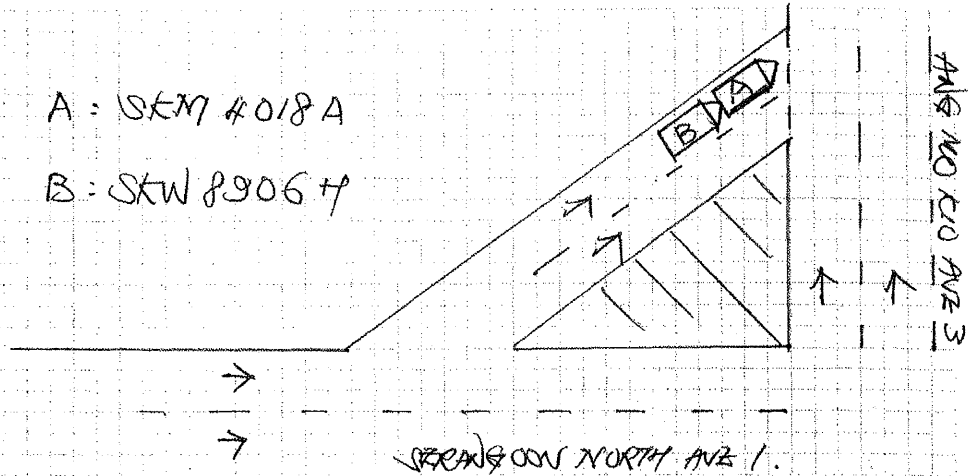
NRIC/FIN No.:

### Sketch Plan Pg. 2

### SKETCH PLAN

A: USM #018A

B: SKW 8906 +



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

ON THE 4<sup>th</sup> JUN 2018 AT 1350, MY CAR A WAS STATIONERY  
WHEN CAR B HIT ME FROM BEHIND.

INITIALLY CAR B DRIVER WANTS TO SETTLE AND OFFER FOR PRIVATE SETTLEMENT. AFTER THE QUOTE FROM THE WORKSHOP, WE DECIDED TO MAKE AN INSURANCE REPORT FOR MY CAR REPAIR COST.

### DECLARATION

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

Policyholder's Signature

Date & Time: 5/6/18

Driver's Signature

(If driver is not the policyholder)

Date & Time: 6/6/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

## 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:** 5064269151-04

**Cover :** drive PREMIUM

1. Index mark and Registration Number of Vehicle : **SKM4018A**  
 Chassis Number : ACR500168750
2. Name of Policyholder : MUSTAFFA BIN HASSAN
3. Effective Date of Insurance : 26 Feb 2018
4. Expiry Date of Insurance : 25 Feb 2019
5. Persons or Classes of Persons entitled to drive#  
 (a) The Policyholder.  
 (b) Any other person who is driving on the Policyholder's order or with his/her permission.  
 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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: MUSTAFFA BIN HASSAN ALKHATIB
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

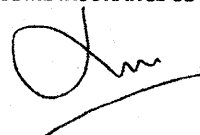
Agency : CAR TIMES INSURANCE AGENCY PTE. LTD. (00000571584)  
 Date of Issue : 20 Feb 2018 11:38 hrs  
 Reprint : 20 Feb 2018 11:40 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

## Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	SKM4018A		
Vehicle Type :	P11 - Passenger Station Wagon/Jeep/Land Rover		
Vehicle Attachment 1 :	With Sun Roof		
Vehicle Scheme :	Normal		
Vehicle Make :	TOYOTA		
Vehicle Model :	ESTIMA AERAS 2.4 A		
Chassis No. :	ACR500168750		
Propellant :	Petrol		
Engine No. :	2AZJ026875		
Engine Capacity :	2362 cc		
Maximum Power Output :	125.0 kW ( 167 bhp)		
Maximum Laden Weight :	2180 kg		
Unladen Weight :	1740 kg		
Year Of Manufacture :	2013		
Original Registration Date :	26 Feb 2014		
Lifespan Expiry Date :	-		
COE Category :	E - Open Category		
Quota Premium :	\$83,000.00		
COE Expiry Date :	25 Feb 2024		
Road Tax Expiry Date :	25 Feb 2019		
PARF Eligibility Expiry Date :	25 Feb 2024		
:			
Inspection Due Date :	25 Feb 2019		
Intended Transfer Date :	05 Jun 2018		
CO2 Emission :	207.00 (g/km)		
CEV/VES Rebate Utilised Amount :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

OK

Print

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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### ACCIDENT STATEMENT

Date Of Report	05/06/2018 11:24
Date Of Accident	04/06/2018 13:50
Exact Location Of Accident	SLIP RD OF SERANGOON NORTH AVE 1 INTO AMK AVE 3
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW8906H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN HOCK GUAN
NRIC No	S2154277F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96859641
Alternative Phone No	OTHERS-96859641

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 ELEGANCE (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M493797
Cover Note Number	

### Driver

Name of Driver	TAN HOCK GUAN
NRIC No	S2154277F
Date Of Birth	20/03/1955
Occupation	INDOOR
Date Of Driving Pass	27/12/1976
Driving Experience	41 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96859641
Fax Number	
Contact Number	OTHERS-96859641
Email Address	NOEMAIL



Address	BLK 19 HOUGANG AVE 3, #04-201
Postcode	530019
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	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?	NO
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)	1

#### 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

KINDLY REFER TO SKETCH PLAN ATTACHED.

#### 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	SKM4018A
Vehicle Make/Model/Colour	TOYOTA / ESTIMA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	96195162
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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**.
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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: 05/06/18 11.00hrs

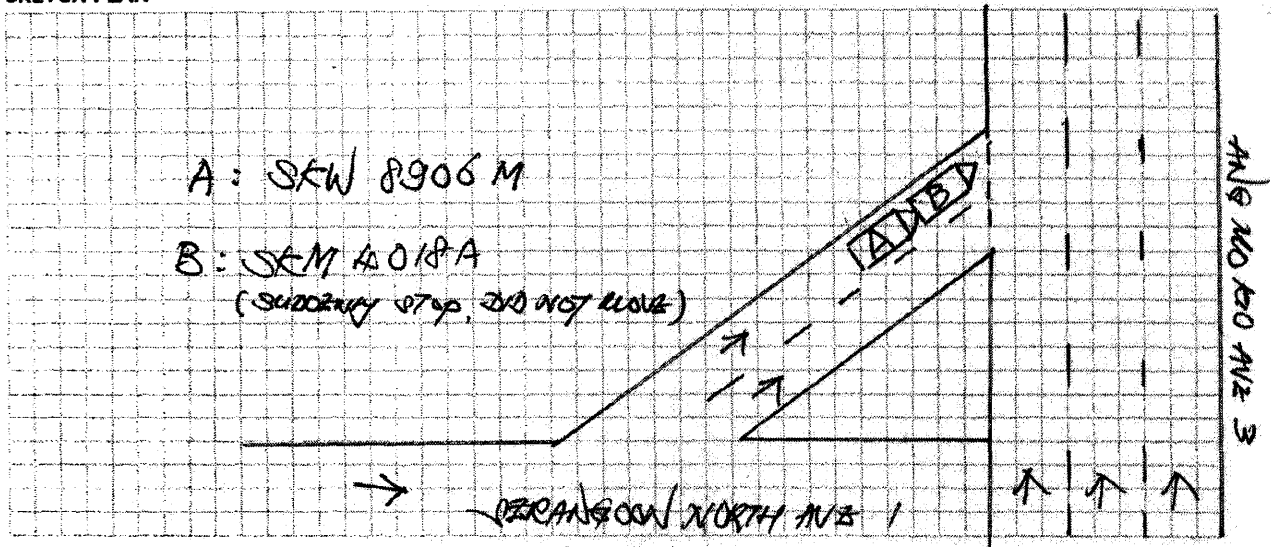
Driver's Signature

(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name: Sudy  
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

THE TRAFFIC WAS CLEAR ON AVE 100 KLO AVE 3, CAR B SUDDENLY STOP IN CAR, I WAS UNABLE TO STOP IN TIME, AS THE RESULT MY CAR FRONT PORTION HIT ONTO CAR B BEHIND

DECLARATION

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

Policyholder's Signature  
Date & Time: 05/06/18 11.00hrs

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

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

**INDIA INTERNATIONAL INSURANCE PTE LTD**

Co. Reg. No. 198703792K | GST. Reg. No. M2-0078806-X  
64 Cecil Street #04/ #05/ #06-02 IOB Building Singapore 049711  
Office (65) 63476100 Email insure@iii.com.sg  
Fax (65) 62244174 Website www.iii.com.sg

**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)

This certificate is not transferable to a new owner of the vehicle. If for any reason the Insurance is terminated during its currency, the Certificate must be returned to the Insurer, or if the Certificate has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the legislation relating to compulsory Insurance.  
The Certificate must be returned if the Insurance is suspended during its currency.

Agency Code: **61301SE**  
**Comprehensive**

Insured/ Named Drivers Excess : **\$600/- Sect I**  
Unnamed Drivers Excess: **\$1100/- Sect. I & additional \$2500/- Sect. I for age**  
**< 21 years or > 65 years &/or S'pore D.L. < 2 years**  
Windscreen Excess: **\$100/-**

**CERTIFICATE NO.****M493797**

1. Index Mark and Registration  
Number of Vehicle

**SKW 8906 H**

2. Name of Policy Holder

**Tan Hock Guan**

3. Effective date of the Commencement of  
Insurance for the purposes of the Act

**19<sup>th</sup> November 2017**

4. Date of Expiry of Insurance

**18<sup>th</sup> November 2018**

5. Person or Classes of Persons entitled to drive\*

(a) The Policyholder

The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

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\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

**The Policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or 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 headings.

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).

Date of Issue: **SJ/29.09.2017**

for India International Insurance Pte. Ltd.  
(APPROVED INSURERS)

**M.X. 1 (PRIVATE CAR)**  
**INDIVIDUAL OWNERSHIP**

*Authorized Signatory*

**IMPORTANT NOTICE**

Policyholders are hereby warned that under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap. 189), it shall be unlawful for any person to use or to cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

Policyholders are further warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

The Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agree to cover the new owner they will endorse the policy accordingly and will issue a new Certificate of Insurance in the new owner's name.

IN THE EVENT OF AN ACCIDENT NOTIFICATION SHOULD BE GIVEN IMMEDIATELY TO THE COMPANY. FAILURE TO DO SO WILL RESULT IN UNDERWRITERS DECLINING LIABILITY.

Agent/Broker Name: **M Plus**

Hire Purchase Company: **DBS Bank Limited**