

# NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

NA418081408

Date In: 25/06/2018 12:05	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: N88110811481/1	E-mail (within 3hrs, AIC 2hrs)		
Veh No: 24 6006 S	i-Motor Claim Form		
DOA: 22/06/2018 12:30	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP: <del>XXXXXXXXXX</del>	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: VS 1378

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

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Cat. 1:

Cat. 2 / 3:

## Invoice Preparation Checklist

Am't (\$)

Am't (\$)

1st Bill

Add Bill

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

3) TF: Towing Fee \$40/\$45

4) FT: Follow-Through Survey \$120

5) FT: Follow-Through Survey (Resurvey) \$30

For claiming against INC Only (wef 10 Jan 2005)

6) TR: Re-inspection \$75

7) N1: Idac DA + SMRT Survey \$160

8) NTUC Additional Services:-

Q11:

\*N5: Courtesy Car / Tpt Allowance \$5

\*N6: Repair Co-ordination \$10

\*N7: Post Repair Inspection \$25

\*N8: DV / Collect Excess Coordination \$5

TE (N11): TP (Non INC) against INC \$20

9) N12: Idac Mobile \$0

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 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	25/06/2018 12:06
Date Of Accident	22/06/2018 12:30
Exact Location Of Accident	WOODLANDS CAUSEWAY TOWARDS JOHOR BAHRU
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU6006S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WILSON PANG KONG CHUN
NRIC No	S7778352J
Email Address	WPKC77@YAHOO.COM
Mobile Phone No	(LOCAL) +65-91552175
Alternative Phone No	OTHERS-91552175

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	TUCSON
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29059935 QMY
Cover Note Number	

### Driver

Name of Driver	WILSON PANG KONG CHUN
NRIC No	S7778352J
Date Of Birth	29/11/1977
Occupation	INDOOR
Date Of Driving Pass	27/02/2007
Driving Experience	11 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91552175
Fax Number	
Contact Number	OTHERS-91552175
EMail Address	WPKC77@YAHOO.COM



Address	99 MARSHALL ROAD #05-03
Postcode	424894
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	VS1378 (PRIVATE CAR)
Number of vehicles involved in the accident	3
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?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20180625/2016.

#### 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	VS1378
Vehicle Make/Model/Colour	HONDA HRV
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	STEVEN CHEOK
NRIC/Passport Number	
Contact Number	91148088
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

1

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJW5972Y

Vehicle Make/Model/Colour

BMW 730

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

SARA.M

NRIC/Passport Number

Contact Number

91080447

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

## 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:

25/06/2018  
9:45 AM

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

25/06/2018  
7:45 AM

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

25/06/2018  
Rashid M. M. M.



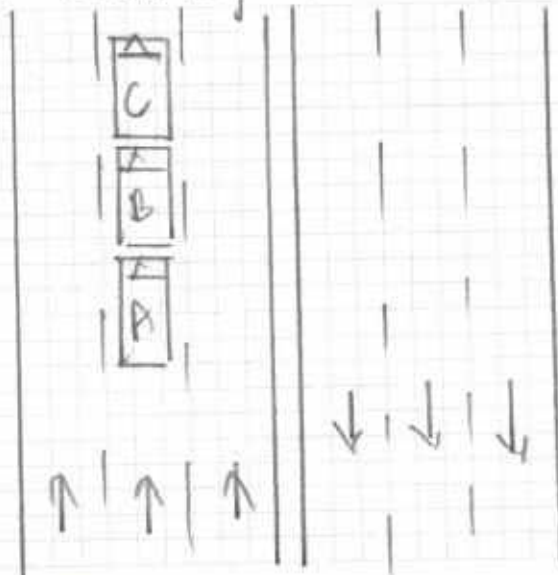
SKETCH PLAN

WOODLAND CAUSEWAY TOWARDS (JB)

A) SLH 60065

B) VS 1378

C) SJW 5972Y



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

THE ACCIDENT HAPPENED AT WOODLAND CAUSEWAY FIN GAAH.  
I ACCIDENTALLY HIT THE CAR (HONDA HRV ~~VS~~ 1378)  
IN FRONT OF ME, AND THE HONDA CAR BUNKER  
HIT ANOTHER CAR (SJW 5972Y) IN FRONT OF HIM.  
HONDA HRV VS 1378 WAS DAMAGED IN FRONT  
& BACK OF HIS CAR, WHEREAS, BMW SJW 5972Y  
WAS SCRATCHED AT BUMPER.  
MY CAR (SLH 60065) WAS DAMAGED AT THE  
FRONT.

POLICE REPORT 7/20180625/2016

DECLARATION

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

Policyholder's Signature  
Date & Time:

25/06/2018  
9:45 AM

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

25/06/2018  
9:45 AM

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

25/06/2018  
Rashid Norhaz



**SINGAPORE  
POLICE FORCE**



T/20180625/2016

1 of 4

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

Report No. T/20180625/2016

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/06/2018 10:27		Vide Report No.:		Station Diary No.: 21	
<b>Informant's Particulars</b>					
Name of Informant: WILSON PANG KONG CHUN			Address: 99 MARSHALL ROAD #05-03 SINGAPORE 424894		
ID Type / ID No.: NRIC NO / S7778352J			Contact No.: Home/Office:		Mobile: 91552175
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 40	Date of Birth: 29/11/1977	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: OTHERS			Driving Licence Information: Class: 2B,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 22/06/2018 12:30	Type of Location:
Location: Along Road 1 WOODLANDS CENTRE ROAD WOODLANDS CHECKPOINT TOWARDS JB				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJW5972Y	Car				Slightly Damaged	0
SLU6006S	Car				Slightly Damaged	0
VS1378	Car				Slightly Damaged	0

**Details of Person Involved**

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





**SINGAPORE  
POLICE FORCE**



T/20180625/2016

2 of 4

Report No. T/20180625/2016

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

**CONTINUATION OF REPORT**

Name	SARA.M	ID No.	NIL
Related Vehicle	NIL	Contact No.	91080447
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
Driver Name	WILSON PANG KONG CHUN	ID No.	S7778352J
Related Vehicle	NIL	Contact No.	91552175
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver Name	STEVEN CHEOK	ID No.	NIL
Related Vehicle	NIL	Contact No.	91148088
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 22.06.2018 at about about 1230 HRS, I was driving in the middle lane at the Causeway heading towards Woodlands Customs to JB. It was a heavy traffic and I was feeling sleepy. As such, I had hit the accelerator pedal instead of the break pedal. This has caused me to hit the front vehicle in front of me, VS1378. The impact has left my vehicle, SLU6006S, a dent and scratches on the front portion of my car and a dent on VS1378's rear portion of the car.

VS1378 was not able to brake on time thus hitting onto another vehicle at the front, SJW5972Y. I am unsure of the damages caused between the two vehicles.

I wish to state that nobody was injured during the incident. There was a delay in lodging a police report as I was entering JB and had only returned back to Singapore 24.06.2018





**SINGAPORE  
POLICE FORCE**



T/20180625/2016

3 of 4

Police Station Of Origin:

Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

Report No. T/20180625/2016

CONTINUATION OF REPORT



**SINGAPORE  
POLICE FORCE**



T/20180625/2016

4 of 4

Report No. T/20180625/2016

Police Station Of Origin:

Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

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:

D /

Sgt 2 NUR AIIN BINTE JAAIS

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 65476430

Signature Of Informant:

Date/Time:

25/06/2018 10:27

Classification Of Case:

Authentication Stamp

NP168

SIGNATURE



# ACCIDENT STATEMENT

ACCIDENT DATE: (22/06/2018) (DD/MM/YYYY), TIME: (12:30) (HH:MM)

LOCATION: WOODLANDS CAUSEWAY, SINGAPORE

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLN 6006 S  
 b) INSURANCE COMPANY: MSIG  
 c) POLICY NUMBER: A29059935 QMY  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: HYUNDAI TUCSON  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Home visit to Malaysia  
 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: Wilson PANG KONG CHUN (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S7778357 CONTACT: 9158 2785  
 c) ADDRESS: 99 MARSHALL ROAD #05-03  
 SINGAPORE 440094

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

No of passenger  
(including driver)

(1)

### DRIVER

- a) NAME: (AS ABOVE) (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: CONTACT:  
 c) ADDRESS:

\*d) DATE OF BIRTH: (25/11/1977) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 27/02/2007

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) *Outsourced*

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)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: *Quinnstown*

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: VS 1378 MODEL: Honda HRV  
 b) DRIVER'S NAME: STEVEN CHIOE  
 c) NRIC/FIN/PASSPORT: CONTACT: 965 9114 4088

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SJW 5972Y MODEL: BMW 730  
 e) DRIVER'S NAME: SARA M  
 f) NRIC/FIN/PASSPORT: CONTACT: 965 9108 0447

Email = wpkc77@yahoo.com

fax =

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7778352J



Name  
WILSON PANG KONG CHUN

Race  
CHINESE

Date of Birth: 29-11-1977 Sex: M

Country of Birth  
MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7778352J  
Name:

WILSON PANG KONG CHUN

Birth Date: 29 Nov 1977  
Issue Date: 27 Feb 2007



NRIC No: S7778352J



Nationality  
MALAYSIAN

Blood Group: A+ Date of Issue: 24-04-2002

99 MARSHALL ROAD #05-03  
SINGAPORE 424894

NRIC No: S7778352J

Date: 17/10/2012

No: 7191318

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

Class 2B Motorcycles <= 200 cc  
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg

PASS DATE  
27 Feb 2007  
27 Feb 2007



NP 429A



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
 (REPUBLIC OF SINGAPORE)  
 THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1  
 Individual Ownership

**MOTOR MAX PLUS**  
**Comprehensive**

Certificate No. A 29059935 QMY

Excess : SGD750  
 Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle  
 SLU60068
2. Name of Policyholder  
 Wilson Pang Kong Chun
3. Effective Date of the Commencement of Insurance for the purposes of the Act  
 11/12/2017
4. Date of Expiry of Insurance  
 10/12/2018
5. Persons or Classes of Persons entitled to drive\*  
 Wilson Pang Kong Chun  
 Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.  
 \* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

**PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.**

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination 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 Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.  
 Approved Insurers

for Chief Executive Officer