



ComfortDelGro Engineering

Our Ref: PTE/SLF6224H/20180625/DS-CL

13/08/2018

EQ Insurance Company Limited  
5 Maxwell Road #17-00 Tower Block  
MND Complex  
Singapore 069110  
Attn: Motor Claims Department

Without Prejudice

Dear Sirs

**ACCIDENT ON 25/06/2018 INVOLVING SLF6224H & GBG1678C ALONG MERCHANT ROAD**

We are the authorised repair workshop for the owner of vehicle, SLF6224H, which was involved in the captioned accident with your insured's vehicle. The vehicle owner has requested and authorized us to assist him/her in presenting his claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured, GBG1678C, we are submitting these claims for your consideration on behalf of the owner/driver/claimant.

1. Cost of Repairs	7,602.99
2. 15.0 days Loss of Rental @ \$79.5	1,192.50
	-----
(E&OE)	8,795.49

We enclose the following documents to support the claims: -

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Repair/Excess Bill              | <input checked="" type="checkbox"/> Insurance Certificate |
| <input type="checkbox"/> Surveyor Report                            | <input checked="" type="checkbox"/> Power of Attorney     |
| <input type="checkbox"/> Coloured Photographs                       | <input type="checkbox"/> Car Rental Bill                  |
| <input checked="" type="checkbox"/> GIA/Police Report(s)            | <input type="checkbox"/> Medical Bill                     |
| <input type="checkbox"/> GIA/TP Search                              | <input type="checkbox"/> Witness Statement                |
| <input checked="" type="checkbox"/> Others: <u>Rental Agreement</u> |   |

Kindly look into the matter and let us hear from you on the settlement of our client's claim as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/driver/claimant.

Yours faithfully

Cecilia Lee

CDGE Claims Department

DID: 6214 8354 FAX: 6214 1843 Email: cecilialee@sparkcarcare.com

ComfortDelGro Engineering Pte Ltd

Corporate Office

205 Braddell Road Singapore 579701

Mainline +65 6383 6280

Facsimile +65 6280 9755

Company Registration No: 199506048W

Car Care Centres

Braddell

205 Braddell Road

Singapore 579701

Tel 6383 8110

Loyang

59 Loyang Drive

Singapore 508969

Tel 6214 8300

Pandan

45 Pandan Road

Singapore 609286

Tel 6338 8778

Sin Ming

383 Sin Ming Drive

Singapore 575717

Tel 6553 0400

Sungei Kadut

7 Sungei Kadut Way

Singapore 728791

Tel 6369 7369

Ubi

320 Ubi Road 3

Singapore 408649

Tel 6746 0666

Yishun

501 Yishun Industrial Park A 3

Singapore 768732

Tel 6757 7898

www.SPARKcarcare.com

A member of

**COMFORTDELGRO**



**ComfortDelGro Engineering Pte Ltd**

**Corporate Office**  
205 Braddell Road  
Singapore 579701  
Mainline + 65 6383 6280  
Facsimile + 65 6280 9755  
www.cdge.com.sg

**Car Care Centres**  
205 Braddell Road Singapore 579701  
59 Loyang Drive Singapore 508969  
45 Pandan Road Singapore 609286  
383 Sin Ming Drive Singapore 575717  
7 Sungei Kadut Way Singapore 728791  
320 Ubi Road 3 Singapore 408649  
501 Yishun Industrial Park A Singapore 768732  
www.SPARKcarcare.com

Tel: 6383 8110  
Tel: 6214 8300  
Tel: 6338 8778  
Tel: 6553 0400  
Tel: 6369 7369  
Tel: 6848 5721  
Tel: 6757 7898



ComfortDelGro Engineering  
COMPANY REG. NO: 199506048W  
GST REG. NO. M2-8921817

**TAX INVOICE**

8010325

EO INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00

SINGAPORE SG 069110

CONTACT NO: 62239433

VEHICLE NO  
SLF6224HMAKE  
HONDAMODEL  
VEZEL HYBRIDDATE OF REG  
01.09.2016CHASSIS CODE  
RU31208462INVOICE NO./DATE  
91387762 03.08.2018JOB NO.  
305180055

ODOMETER READING

Description : TP - AIG - EO

S/No	Part No. Description	Oty	Unit Price			Net
01	20-501 LABOUR CHARGES	1 EAC	2,970.00	SGD		2,970.00
02	29904 INNER SEAL	1 PC	30.00	SGD		30.00
03	29906 SEALANT	1 EAC	40.00	SGD		40.00
04	1979 REAR BUMPER	1 PC	610.16	SGD		610.16
05	1979 REAR BUMPER CORNER LH	1 PC	156.00	SGD		156.00
06	1979 REAR BUMPER RETAINER LH	1 PC	108.00	SGD		108.00
07	1979 REAR BUMPER CLIPS	8 PC	3.12	SGD		24.96
08	1979 TAILLAMP LH	1 PC	379.68	SGD		379.68

- 1) WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED OWNERS' RISK.
- 2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- 3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR PERIOD OF DEFAULT.
- 4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCY WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

Cheque should be crossed and made payable to "ComfortDelGro Engineering Pte Ltd"

**ComfortDelGro Engineering Pte Ltd**

A member of COMFORTDELGRO

Head Office:  
205 Braddell Road  
Blk C Ext 1 Level 2  
Singapore 579701

Attn: Finance Department

Kindly note that no receipt shall be issued unless requested.

**CUSTOMER'S COPY**

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ N
8010325	91387762	7,602.99	



# ComfortDelGro Engineering Pte Ltd

Corporate Office  
205 Braddell Road  
Singapore 579701  
Mainline + 65 6383 6280  
Facsimile + 65 6280 9755  
www.cdge.com.sg

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205 Braddell Road Singapore 579701  
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383 Sin Ming Drive Singapore 575717  
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Tel: 6848 5721  
Tel: 6757 7898



ComfortDelGro Engineering  
COMPANY REG. NO: 199506048W  
GST REG. NO. M2-8021817

## TAX INVOICE

8010325  
EO INSURANCE COMPANY LIMITED  
5 MAXWELL ROAD TOWER BLOCK #17-00  
SINGAPORE SG 069110

VEHICLE NO  
SLF6224H  
MAKE  
HONDA  
MODEL  
VEZEL HYBRID  
DATE OF REG  
01.09.2016  
CHASSIS CODE  
RU31208462  
INVOICE NO./DATE  
91387762 03.08.2018  
JOB NO.  
305180055  
ODOMETER READING

S/No	Part No. Description	Oty	Unit Price	Net
09	1979 TAILGATE	1 PC	880.72 SGD	880.72
10	1979 TAILGATE EMBLEM - VEZEL	1 PC	31.60 SGD	31.60
11	1979 TAILGATE EMBLEM - HYBRID	1 PC	60.40 SGD	60.40
12	1979 TAILGATE LAMP LH	1 PC	339.52 SGD	339.52
13	1979 REAR WINDSCREEN MOULDING	1 PC	120.48 SGD	120.48
14	1979 TAILLAMP PANEL LH	1 PC	108.00 SGD	108.00
15	1979 REAR END PANEL INNER GARNISH	1 PC	78.88 SGD	78.88
16	1979 LH REAR FENDER	1 PC	720.56 SGD	720.56
17	1979 LH REAR WHEEL ARCH PROTECTOR	1 PC	154.08 SGD	154.08
18	1979 REAR END PANEL	1 PC	292.56 SGD	292.56

- 1) WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS WHOSE VEHICLES ARE DRIVEN AND KEPT AT THE COMPANY'S RISK.
- 2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- 3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE DATE) PERIOD OF DEFAULT.
- 4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 10 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

Issued by : SIEWHWA 03.08.2018 11:41:33  
Repair type : CESO/52/5T  
Payment Type/Term: /

Items total 7,105.60  
Add GST @ 7,000 % 497.39  
Invoice amount 7,602.99

### ComfortDelGro Engineering Pte Ltd

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Head Office  
205 Braddell Road  
Blk C Ext 1 Level 2  
Singapore 579701

Attn: Finance Department

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.

**SCHEDULE 1****1. Hirer's Details**

MANSOR BIN NAWAN

S0024090G

(Hirer's Name)

(\*NRIC/ Passport No.)

(Nationality)

475 SEMBAWANG DRIVE #09-319 SINGAPORE 750475

(Address)

(Mailing address, if different from above)

mbn7753@gmail.com

(Email address)

91275003

07/07/53

(Telephone No.)

(Mobile No.)

(Date of Birth dd/mm/yy)

(Driver's Licence No.)

(Expiration Date) (Class(es) of Driver's Licence)

*\*Please delete where applicable.***2. Vehicle Description**

Make & Model		Colour	Registration No.
HONDA	VEZEL HYBRID	BROWN	SLF6224H

**3. Commencement Date and Minimum Rental Period**

The **Minimum Rental Period** is for 26 Weeks and commences on 29/01/18 the (being the date of collection of the Vehicle from LCR by the Hirer).

For the avoidance of doubt, the Minimum Rental Period is exclusive of any period where the Vehicle is being repaired due to an accident and the Hirer is not offered a Replacement Vehicle by LCR during such period. For example, if a Hirer has completed 2 weeks of the Minimum Rental Period, and the Vehicle is sent for repair for 2 weeks due to an accident, then only 2 weeks of the Minimum Rental Period has been fulfilled. As a result, the Hirer must still fulfill an additional 2 weeks to complete the Minimum Rental Period.

**SCHEDULE 1A****1. Rental Plan**6 Month Rates**2. Deposit**200**3. Rental Fee & Charges**

- (a) The Rental Fee per week is S\$ 556.5.
- (b) Weekly Payment Fee: All weekly rental payments are due the following Wednesday at 17:00hrs and if the Wednesday falls on a Public Holiday, then the due date will be the next working day at 17:00hrs.
- (c) Late Payment Fee: All outstanding payments after the above mentioned day will be subject to a late payment fee of S\$60.
- (d) Cleaning Fee: S\$300. Not limited to Cigarette odour.
- (e) Vehicle Damage Fee: In cases where the Vehicle has been involved in an accident requiring repairs to the Vehicle, the Hirer will be responsible for the actual cost of repair to the Vehicle up to a maximum of S\$2,200 per accident.

**4. Insurance Excess**

In the event of an accident resulting in a claim made against or reported to LCR's insurers for damage to third party property (including other vehicles), the Hirer will be liable for any insurance excess\* ("**Insurance Excess**") payable as a result.

The Insurance Excess is payable in addition to any other amounts that may be applicable under this Agreement.

\* **S\$2,140** or such other amount as notified to the Hirer by LCR from time to time

## 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 11:14
Date Of Accident	25/06/2018 09:55
Exact Location Of Accident	MERCHANT ROAD (BETWEEN LAMPPOST 12 AND 14
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF6224H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	INSURANCE@LIONCITYRENTALS.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-88888888

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL HYBRID 1.5X 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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SLF6224H
Cover Note Number	

### Driver

Name of Driver	MANSOR BIN NAWAN
NRIC No	S0024090G
Date Of Birth	07/07/1953
Occupation	INDOOR
Date Of Driving Pass	14/05/1984
Driving Experience	34 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	+65-91275003
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 478 SEMBAWANG DRIVE #09-319
Postcode	750475
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	LIGHT DRIZZLING
Road Surface	WET

#### 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)	2
Passenger 1	NAME: : MS GENDER: : FEMALE

#### 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.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBG1678C
Vehicle Make/Model/Colour	NISSAN / CABSTAR
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ARUNACHALAM ANANTHAN
NRIC/Passport Number	G2825090H
Contact Number	82300041
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.
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

A = SLF 6224H

B = GBC 1678G



MERCHANT ROAD  
(Between lamp post No 12 and 14)

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While driven ext CTB to merchant Rd.  
I stopped my vehicle due to traffic light turn  
red and all vehicle ahead of me was stopped.  
Suddenly I heard a loud bang and I realised  
that a lorry has hit my rear. My rear left  
light all damage.

## 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:

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

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of MANSOR BIN NAWAN

License Number: S0024090G

Name: MANSOR BIN NAWAN

Birth Date: 07 Jul 1953

Issue Date: 07 Apr 2003

Barcode: 000356961H

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0024090G



Name

MANSOR BIN NAWAN

منصور بن نوان

Race

BOYANESE

Date of birth

07-07-1953

Country/Place of birth

SINGAPORE

Sex

M

S0024090G

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

Class 2B Motorcycles not exceeding 200 cc  
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

14 May 1984  
07 Nov 2001

NP 428A



Licence No: S0024090G

5764654



NRIC No. S0024090G



Date of issue

07-07-2017

Address

APT BLK 475 SEMBAWANG DRIVE  
#09-319  
SINGAPORE 750475



HOTLINE TEL: (65) 6419-3000  
FAX: (65) 6415-3723

## 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)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR  
CERTIFICATE NO. SLF6224H

(The below excess is subject to GST)

ALL CLAIMS EXCESS S\$2000.00  
WINDSCREEN EXCESS S\$100.00

1) VEHICLE REGISTRATION NO.

SUM INSURED Market Value

2) NAME OF INSURED

INSURING WITH COE/PARF Yes

3) EFFECTIVE DATE OF THE COMMENCEMENT OF  
INSURANCE FOR THE PURPOSES OF THE ACT

SLF6224H

LCRF Pte Ltd

25 February 2018

4) DATE OF EXPIRY OF INSURANCE

24 February 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

Any person who is driving on the Insured's order or with their permission.

If You or Your Authorised Driver is below the age of 21 years old and/or has less than 1 year driving experience, the excess is S\$3,500(All Claims).

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) LIMITATION AS TO USE\*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

Refer to Policy Terms and Conditions

\*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).

Issued in Singapore 13 Feb 2018

AIG Asia Pacific Insurance Pte. Ltd.

030080-000  
Aon Singapore Pte Ltd  
2 Shenton Way  
#26-01 SGX Centre 1  
SINGAPORE 068804

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPAHN



# COMFORTDELGRO ENGINEERING PTE LTD

A member of COMFORTDELGRO

## POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) 9LF6224H and (Third Party's Vehicle No.)  
GBC1678C on 25/06/18 along Merchant Road (Between Lamp post 12 and 11)

Policy Nos: \_\_\_\_\_

BY THIS POWER OF ATTORNEY, \*I/We, \_\_\_\_\_ \*NRIC/Passport

No. \_\_\_\_\_ (Address)\* \_\_\_\_\_

\_\_\_\_\_, / LCRF Pte Ltd a company

incorporate in Singapore and having its registered office at (Address)\* \_\_\_\_\_

\_\_\_\_\_ owner of Vehicle Registered No. 9LF6224H

\_\_\_\_\_ hereby irrevocably appoint ComfortDelGro Engineering Pte Ltd (CDGE), a  
company incorporated in Singapore and having its registered office at 205 Braddell Road

its agents or any person authorized by CDGE to be \*my/our Attorney and in \*my/our name(s) and on \*my/our behalf  
to do all or any of the following:

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which \*I/we may have against the other \*party/parties to the Accident and under the insurance \*policy/policies taken up by such \*party/parties or alternatively under Insurance Policy No. \_\_\_\_\_ taken up by \*me/us in respect of the cost of repairs, loss of use and at all other costs and expenses, etc. suffered by \*me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on \*my/our behalf as \* my/our Attorney **shall in his absolute discretion, deem fit.**
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in favor of ComfortDelGro Engineering Pte Ltd , CDGE and to give a valid receipt and discharge therefor.
4. For any of the purposes aforesaid, **to execute, sign, seal and deliver all documents whatsoever in relation thereto.**
5. Generally **do all such acts as it shall deem necessary for the purpose of settling such claim(s) and**
6. **To agree to any settlement at the absolute discretion of CDGE.**

\*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on \*my/our behalf by the Attorney, its agents or any person authorized by CDGE in that behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by \*me/us in \*my/our own proper person(s) and \*I/We hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

\*I/We hereby further declare that **the powers and authority hereby conferred shall remain irrevocable.**

\*I/We further confirm that the acceptance by CDGE of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

\*IN WITNESS WHEREOF. \*I/We have hereunto to set \*my/our hand and seal this day \_\_\_\_\_ of the month of \_\_\_\_\_, Year Two Thousand - \_\_\_\_\_ (20\_\_\_\_)

Signed, Sealed & Delivered By



Customers Name:

NRIC No.:

Co's rubber Stamp

delete as appropriate. Insurance