

NATIONAL Assessment Centre Services

(Ref: Jan 05)

NA18040611

Date In: 23/07/2008 11:36	Job description	Date & Time Completed	Done by
Ref No: NA180406113305/4	SAS e-filing		
Veh No: SIN 1030L	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 23/07/2008 11:30	i-Motor Claim Form	m7/1004052001	23/07/2008 12/03
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: SK 2983L

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

NA18040611

Invoice Preparation Checklist

Ant (\$)

1st Bill

Ant (\$)

Add Bill

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Cat. 1:

Cat. 2 / 3:

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: Idao DA + SMRT Survey \$160

8) NTUC Additional Services:-

OD*

*N5: Courtesy Car / Tpt Allowance \$5

*N6: Repair Co-ordination \$10

*N7: Post Repair Inspection \$25

*N8: DV / Collect Excess Coordination \$5

TP (N11): TP (N-on INC) against INC \$20

9) N12: Idao Mobile 30

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	23/07/2018 11:36
Date Of Accident	22/07/2018 11:30
Exact Location Of Accident	ALONG TELOK BLANGAH HEIGHTS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFN1030L
Insured/Policyholder	
Name Of Registered Owner	MOHAMED HASSAN B HAJI PAUZAN
NRIC No	S0953350H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96601995
Alternative Phone No	OTHERS-96601995

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	VISITING WEDDING CEREMONY
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5067922360-03
Cover Note Number	

Driver

Name of Driver	MOHAMED HASSAN B HAJI PAUZAN
NRIC No	S0953350H
Date Of Birth	26/09/1949
Occupation	INDOOR
Date Of Driving Pass	11/04/1974
Driving Experience	44 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96601995
Fax Number	
Contact Number	OTHERS-96601995
EEmail Address	NOEMAIL

Address	BLK 57 TELOK BLANGAH HEIGHTS #05-133
Postcode	100057
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 - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	4
Passenger 1	NAME: : WIFE GENDER: : FEMALE
Passenger 2	NAME: : BROTHER IN LAW GENDER: : MALE
Passenger 3	NAME: : SISTER IN LAW 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 SKETCH PLAN (TYPE OF COLLISION IS HEAD TO SIDE)

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	SJR2983L
Vehicle Make/Model/Colour	MITSUBISHI LANCER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YEO CHEE TONG
NRIC/Passport Number	S6914165Z
Contact Number	98765152

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.
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:

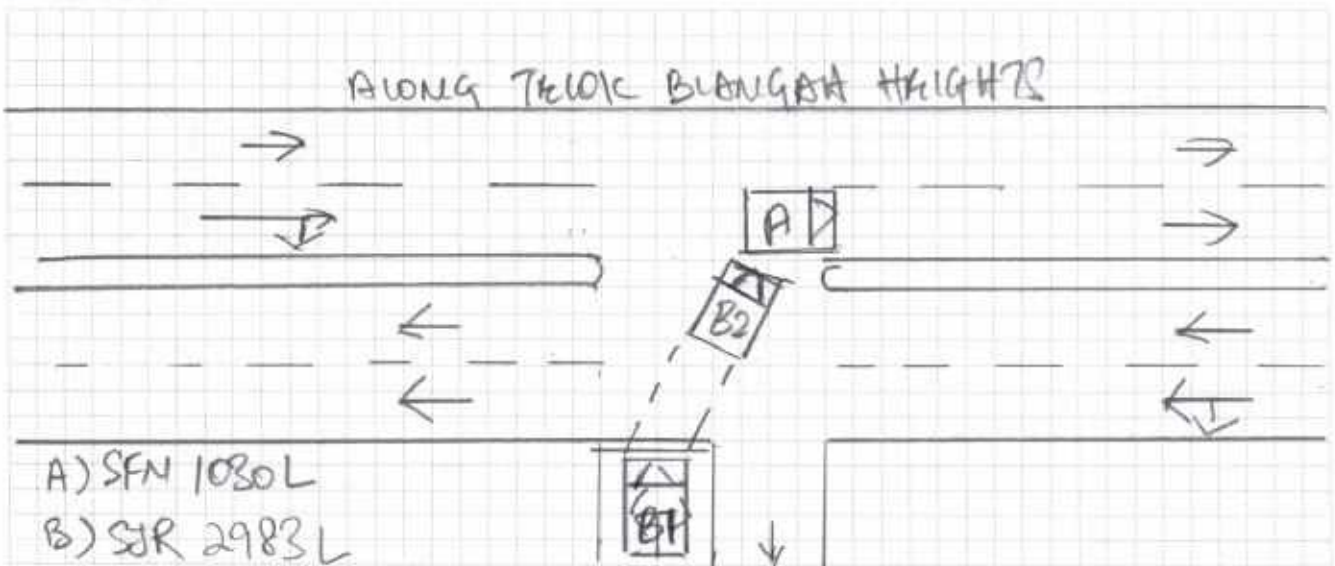
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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.

 23/7/2018
Policyholder's Signature
Date & Time: 1045am

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

 23/07/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 22/07/2018 AT 11:30HRS I WAS TRAVELLING ALONG TRUCK BLANGKAT HEIGHTS WITH 3 OTHER PASSENGERS. WHEN SUDDENLY FROM THE RIGHT CARPARK EXTN CAME OUT A CAR SJR 2983L BANG ON TO THE RIGHT PORTION OF MY CAR & MY CAR BUMPER CAME OFF. WE STOP OUR CAR & EXCHANGED PARTICULARS THAT ALL.

DECLARATION

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

23/07/2018
 Policyholder's Signature
 Date & Time:

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

23/07/2018
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

Claim Handling

Accident MY/1804052

Policy No.	506792390-03	Vehicle No.	SPN1030L	GST Registration No.	
Policyholder Name	MOHAMED HASSAN B HAJI PAUZAN	Cover Type	Third Party, Fire & Theft	Policyholder NRIC	50953350H
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	96601995	Special Remark		Contact No.(Home)	
Email Address		TCA	Yes	eCode	No
KFR	Yes	NCD Endowment(%)	50	eCode Reason	
NCD Protection	Yes			Private Hire	No

Accident Details

Report Date	23/07/2018 11:57	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	22/07/2018	Time of Accident hh:mm	11:10	Country of Accident	Singapore
Reporting Centre		Orange Panel		ICM No.	
Accident Location	ALONG TELUK BLANSAH HEIGHTS				

Benefits

Excess

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

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 57 #05-133	Address 2	TELOK BLANSAH HEIGHTS	Address 3	SINGAPORE 100057
Address 4		Address Type	Singapore address	Post Code	100057
Unit No.		Related Policy Number	506792390-03		

01 Driver Info

Driver Name	MOHAMED HASSAN B HAJI PAUZAN	Driver Type	Main Driver	Driver DOB	26/09/1949
Unnamed driver Name		Driver NRIC	50953350H	Driving Experience	18
Register Date of Driver License	02/01/2000	Driver Age	68	Contact No.(Home)	
Contact No.(Mobile)	96601995	Contact No.(Office)		Address 3	SINGAPORE 100057
Address 1	BLK 57 #05-133	Address 2	TELOK BLANSAH HEIGHTS	Post Code	100057
Address 4		Address Type	Singapore address		
Unit No.				Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	Yes	Driver Vehicle No.	SPN1030L		

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes
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Modification History

Claim 001 New

Claim Type *	OD-MR	Insured Name	MOHAMED HASSAN B HAJI PAU	Insured NRIC	50953350H
Contact No.(Mobile)	96601995	Contact No.(Home)	62739593	Contact No.(Office)	
Email Address		OT Vehicle Number	SPN1030L	TP Vehicle Number	SPN1030L
Claim Description	SPN1030L / 506792390-03 ON 22 Jul 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	23/07/2018 12:00	Claim Close Date		Date Received	23/07/2018 00:00
Report Taken By	RUSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MY/1804052	Claim No.	001
Last Doc. Received	* Yes No	Upload Date	23/07/2018 12:03
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Description *	
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			

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 23 Jul 2018 12:03	Photos	Normal	Photos 2018-7-23		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:03	Photos	Normal	Photos 2018-7-23		Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:03	Photos	Normal	Photos 2018-7-23		Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:01	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:03	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:02	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:02	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:02	Photos	Normal	Photos 2018-7-23	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:01	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:01	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:01	Photos	Normal	Photos 2018-7-23	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:01	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:00	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:00	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:00	Photos	Normal	Photos 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:00	SAS	Normal	SAS 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-7-23	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 23 Jul 2018 12:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-7-23	Edit

Video List

uploaded By/Date	Folder Date	File Name	?	Source	Action
<div>Display in New Window</div> <div>Scan and uploading</div>					

ACCIDENT STATEMENT

ACCIDENT DATE: 22/07/2018 (DD/MM/YYYY), TIME: 11:30 (HH:MM)

LOCATION: Along Telok Blangah Height
of Exit Car Park Between Bk60 & 70A

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SFN 1030L
b) INSURANCE COMPANY: NFIC Income
c) POLICY NUMBER: 5067922360-03
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Toyota Altis
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Visiting wedding Ceremony
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: Mohamed Hassan b. Hj Puzan (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S0953350H CONTACT: 96601995
c) ADDRESS: Apt Bk 60 57 Telok Blangah Height
#05-133 Spore Road

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Mohamed Hassan b. Hj Puzan (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S0953350H CONTACT: 96601995
c) ADDRESS: Apt Bk 57 Telok Blangah Height
#05-133 Spore Road

*d) DATE OF BIRTH: 26/09/1989 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR) Retiree

f) DATE OF DRIVING PASS: 11/01/14

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Owner

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

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: NA

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SJR 2983L MODEL: Toyota Mitsubishi
b) DRIVER'S NAME: Yeo Chee Tong
c) NRIC/FIN/PASSPORT: S69141652 CONTACT: 98765152

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SJR 2983L MODEL: Mitsubishi Mitsubishi
e) DRIVER'S NAME: Yeo Chee Tong
f) NRIC/FIN/PASSPORT: 98 CONTACT: 98765152

Email =

VIDEO =

WIFE
BROTHER IN LAW
SISTER IN LAW

*No of passenger
(Including driver)
(4)

*No of passenger
(Including driver)
()

*No of passenger
(Including driver)
()

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0953350H



MOHAMED HASSAN BIN HAJI
PAUZAN

Race

JAVANESE

Date of Birth

26-09-1949

Sex

M

Country of Birth

SINGAPORE



Insukho



2983557



NRIC No. S0953350H

Blood Group

A+

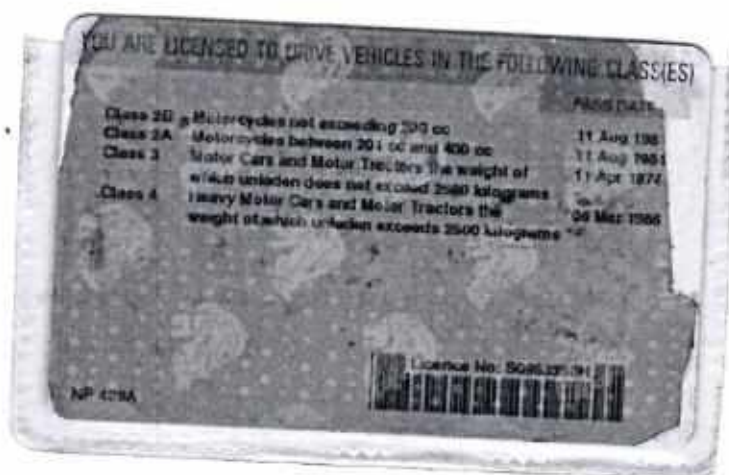
Date of issue

03-10-1997

Address

APT BLK 57 TELOK BLANGAH HEIGHTS
#05-133
SINGAPORE 100057

Insukho



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: 5067922360-03

Cover : Third Party, Fire & Theft

- | | |
|---|--------------------------------|
| 1. Index mark and Registration Number of Vehicle | : 5FN1030L |
| Chassis Number | : MR053ZEC107067749 |
| 2. Name of Policyholder | : MOHAMED HASSAN B HAJI PAUZAN |
| 3. Effective Date of Insurance | : 12 Oct 2017 |
| 4. Expiry Date of Insurance | : 11 Oct 2018 |
| 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)	: N/A
EXCESS (SECTION 2)	: N/A
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
PRIMARY DRIVER	: MOHAMED HASSAN B HAJI PAUZAN
NAMED DRIVER (1)	: MUHAMMAD SYAFIEE BIN MOHAMED HASSAN
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 : INCOME-BRANCH SERVICES (00000082633)
Date of Issue : 10 Oct 2017 16:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive