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Policy No: (	) Per	iod: (	)	Cover	Time:		
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Year of Registration:	1	1 4114	)/NO(	-			
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Claimant's Particular	gg acomo y diagon		1) AR : Acci	dent Reportin ege Assessm	ant (\$100); INC	(\$80)	
- KEN PROPERTY ABOUT STANDA	Mark Company	MANAGE VALUE	3) TF : Tow	ing Fee	100	\$40/\$45	
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QC Checked by (Eng	gr-In-Charge):	00	*N5: Cot	rtesy Car / T	of Allowance	\$5 \$10	
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Auditors! Comment			*N8: DV	/ Collect Exc	cas Coordination	\$5 \$20	
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Dat. 2/3;			Involve da	red	Fee Chan	264	

#### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

Contact Number EMail Address

- 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.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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	02/08/2018 11:49
Date Of Accident	01/08/2018 15:30
Exact Location Of Accident	PIE TOWARDS CHANGI AIRPORT (LAMP POST 691)
Country/State of Loss	SINGAPORE
CHECK COLUMN SECTION (NOT RESIDE	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL3314T
Insured/Policyholder	
Name Of Registered Owner	3C RENTAL SOLUTIONS
Co Reg No	53358610X
Email Address	JUNIACHOO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92217332
Alternative Phone No	OFFICE-84442810
Vehicle Particulars	
Manufacturer	HONDA
Model	FIT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099122456
Cover Note Number	
Driver	
Name of Driver	JUNIA CHOO
NRIC No	S8434573C
Date Of Birth	28/10/1984
Occupation	OUTDOOR
Date Of Driving Pass	28/10/2010
Driving Experience	7 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92217332
Fax Number	

OTHERS-84442810

JUNIACHOO@GMAIL.COM

Address

BLK 17 TECK WHYE LANE

#04-165

Postcode

680017

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

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

550

Number of vehicles involved in the accident

NO 8 NO

Was any body injured in the Accident?

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

PLEASE REFER TO SKETCH PLAN

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

SLM9865B

Vehicle Make/Model/Colour.

MAZDA 3

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

CHOO SEH LEONG

NRIC/Passport Number Contact Number S1342709G 96517237

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 2** 

Vehicle Registration Number

SKL3712R

Vehicle Make/Model/Colour

VOLVO

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number

**SLA5888A** 

Vehicle Make/Model/Colour

BMW

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 4**

Vehicle Registration Number

SLD1339D

Vehicle Make/Model/Colour

TOYOTA CAMRY

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 5**

Vehicle Registration Number

SJY2152G

Vehicle Make/Model/Colour

MAZDA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

# No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 6**

Vehicle Registration Number

SLZ236H

Vehicle Make/Model/Colour

KIA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 7**

Vehicle Registration Number

SGX7788E

Vehicle Make/Model/Colour

VOLKSWAGEN

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

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.
- 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: 02/05/2018 11-00 am

Reporting Centre Personnel's Sign

Name:

NRIC/FIN NO

$\rightarrow$	PIFE TOWARDS CHANGET ATRPO	RT CLOMPOST 691)
$\rightarrow$		
$\rightarrow$		
$\rightarrow$	AHBACHDH	EFFEGHI
- B)S	JL3314T D) SLA 5882A LM 9865B — E) SLD 1339D— CL3712R F) SJY 2152 G TANCES OF THE ACCIDENT	Gr) SLZ 236H H) SGX 7788 E
On 1 August 2	018 @ 5 30pm, I was driving along PIE	towneds Change Airport) samppost
	i saw the front whicle SLM 98658 jan	
	ance following bohind, i add managed to	
the sudden Jan	broak, Unfortunally I did not managed to m	make a complete stop which is
why i garring	bump on the back of SLM9865B. There	are photos to proof that the
back vehich	le shows no stans of dents or damages only	Visible-slight stratches.
The Strange tou	y we (all involved parties) realized, the morne	as we stopped at the side
	out particulars, one of the driver involved (for	The second secon
	nd. Joneton he find it stronge is well.	
a should lan	e though and out into the lane and did	
deliberately 1:	many on me trakes or engineer accidents	the second second
Vehichely there	five we suspect that I might be a case of	motor insurance found.
DECLARATION  I/We declate the force  (Reg. No. 1)	loing particulars are true in every respect.	a oslos/2000
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time: 02/05/2015	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Accident MT/1005752					
Policy No.:	5099122456	Vehicle No.	531.3334T	GST Registration No.	
Certificate No.	11 - 12 - 12 - 13 - 13 - 13 - 13 - 13 -	THE PARTY	3313324)	GST Registration No.	
Policyholder Name	3C RENTAL SOLUTIONS			Policyheider NRIC	
Product Code	FLEET INSURANCE	Cover Type	drivo CLASSIC		
Contact No.(Mobile)	93229912	Contact No.(Office)	Sittle EDISSIE	Loading	
Email Address	73427714			Contact No.(Home)	
	4	Special Remark		eCode	54
KFK	⊕ No ∵Ym	TCA	© No Yes	eCode Reason	
MCD Protection  Accident Details	140	NCD Entitlement(%)	۵	Wivate Hire	Yes:
Report Date	02/08/2018 16:57	Accident Report Within 24 hrs.	Yes	Accident Type	Chain
Date of Accident	01/08/2018	Time of Accident hhimm	19:30	Country of Accident	Singa
Reporting Centre		Drange Force		3CM No.	
Accident Location	PIE TOWARDS CHANGI AIRPORT (LAMP	POST 691)			
→ Benefits					
19 Excess					
Own damage Excess	2,080.08	Additional Excess	0	Windscreen Excess	100.0
Unnamed Driver Excess		Outside Singapore UD Excess	2,000.00		
Third Party Excess	1,580.00	Outside Singapore TP Excess	1,500.00		
♥ GST Registered Informs	ition				
GST Registered	No		GST Registration Date		
GST Registration No.			GST Status Verified	Na	
Modification History					
→ Policyholder Hailing Ad	drass				
Address 1	BLK 716 #02-37	Address 2	CLEMENTI WEST STARET 2	Address 3	
Address 4	SINGAPORE 120716	Address Type	Singapore address	Post Code	
Unit No.	12-627	Related Policy Number	5099122456		
♥ OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	JUNIA CHOO	Oriver NREC	S8434S73C	Driver DOS	
Register Date of Driver License	28/10/2010	Driver Age	33	Driving Experience	
Contact No.(Mobile)	84442610	Contact No.(Office)		Contact No.(Home)	
Address I	BLK 17 #04-169	Address 2	TECK WHYE LAME	Address 3	
Address 4		Address Type	Foreign address	Post Cude	
Unit No.	04-165				
Does he own a Singapore Registered car?	─ Yes S No	Driver Vehicle No.	\$31,3314	Oriver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes @ No		
Modification History					
Claim 001 New					
Claim Type +	ор-мх •	Insured Name	3C RENTAL SOLUTIONS	Intured NRIC	
Contact No. (Mobile)		Contact No.(Home)	MIL	Contact No.(Office)	
Email Address		OI Vehicle Number	531,3314T	TP Vehicle Number	
Claimant Type Claimant Type *	Phiase Silect *	Type of Benefit *	Please Select		
Claimant Name *	22	Claimant NRIC =			
Claim Description	S3L3314T / SLM9865B ON 1 Aug 2018	SCHWINSE!		Name of Preferred Workshop	
Preferred Workshop Contact		Transport Landing &	Fully at Fault		
No.	Q.,	Insured Liability *	(AND		
Require Finalisation	Yes •	Preferered Repair Option	Preferred Workshop, Name unknown		
Date Registered	02/08/2018 17:17	Claim Close Date		Date Received	
Report Taken By	ROSLI WAHAB				
Print AK letter					
Attachment			Save Submit		
9					
Accident No.		Claim No.			

Tart Flor Barrier	MT/1809X52	Visiting of Physics		001				
Last Doc. Received	● Yes € No	Upload Date		02/08/2018 17:21				
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		Browse	Clear	Please Select		80	-	Normal
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Attachment	Uploaded By/Date	Category	9	Urgency			Descript	ion
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:21	Photos		Normal		P	notes 20	18-8-2
	NAC_BUKIT_MERAH_B00676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 92 Aug 2018 17:21	Phonos		Normal		8	hutus 20:	18-8-2
	NAC_BURIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE S ERVICES (BURIT MERAH)) on 02 Aug 2018 17:21	Photos		Normal		p	hotos 20	18-8-2
	NAC_BUKIT_MERAH_BOUGFG( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) un 02 Aug 2018 17:21	Photos		Normal		p	hotus 20	18-8-2
-	NAC_BUKIT_MERAH_B00676[ NATIONAL ASSESSMENT CENTRE IS ERVICES (BUKIT MERAH)) on 02 Aug 2018 17/21	Photos		Normal			hotes 20	16-8-2
-	NAC_BUXIT_MERAH_B00676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUXIT MERAH)) on U2 Aug 2018 17:21	Phutos		Normal		P	notos 20	18-8-2
<b>S</b>	NAC_BUKIT_MERAH_R00676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:21	Photos		Normal		¥	hotos 20	18-8-2
	NAC_BUKIT_MERAH_B00676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) 00 02 Aug 2018 17:21	Photos		Normal		į	hotos 20	10-0-2
1	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE'S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:21	Photos		Normal		,	hotos 20	18-6-2
	NAC_BUKIT_MERAH_BOOR76( NATIONAL ASSESSMENT CENTRE 5 ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:21	Photos		Normal		p	Photos 2018-8-2	
<b>S</b>	NAC_BUKIT_MERAH_800076( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:21	Photos		Normal		ŧ	hatas 20	18-6-2
-	NAC_BUKIT_MERAH_800076( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2016 17:21	Photos		Normal		9	hotos 20	19-6-2
	NAC_BUKIT_MERAH_800076( NATIONAL ASSESSMENT CENTRE 5 ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:20	Photos		Normal		,	hotas 20	18-8-2
	NAC_BURIT_MERAH_BOOG76( NATIONAL ASSESSMENT CENTRE S ERVECES (BURIT MERAH)) on 02 Aug 2018 17:20	Photos.		Normai		Photos 2018-8-2		
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:20	Photos		Normal		,	hotas 20	18-8-2
墨水	NAC_BUKIT_MERAH_800676[ NATIONAL ASSESSMENT CENTRE 5 ERVICES (BUKIT MERAH)] on 02 Aug 2018 17:20	Photos		Normal		ř	hotos 20	18-8-2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:20	Photos		Normal		ļ	hotos 20	18-6-2
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	NAC_BUXIT_MERAH_BO0676( NATIONAL ASSESSMENT CENTRE'S ERVICES (BUXIT MERAH)) on 02 Aug 2018 17:18	Photos		Normal			hotas 20	18-8-2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:18	Photos		Normal		9	hotos 20	18-8-7
SHE	NAC_BUKIT_MERAH_B30676(_NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 02 Aug 2018 17:18	Photos		Normal		3	hotos 20	18-8-2
10	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 82 Aug 2018 17/18	Photos		Normal		3	hotos 20	18-8-2
	NAC_BURIT_MERAH_880676(( NATIONAL ASSESSMENT CENTRE 5	Photos		Normal		9	tratos 20	18-6-2

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# ACCIDENT STATEMENT

ACCID	ENT DATE: ( 01 / 08 / 2018 ) (DD/MM/YYYY), TIME: ( 13 : 30 ) (HH:MM)
LOCAT	ION: . THE Changi Airport (Lanapost 691)
1.	DETAILS OF VEHICLE
	diversible womber.
7.1	b)INSURANCE COMPANY: INCOME c)POLICY NUMBER: 5097355966
	d)POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
	ALMAKE & MODEL: Honda / FIT
	FITYPE-ISALOON / COUPE / MPV /VAN / LORRY / MOTORCYCLE, / OTHERS)
	gIVEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
	h) PURPOSE OF USING AT ACCIDENT TIME: TE COMA !
	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: 30 Rental Solutions (MALE / FEMALE) TERETA
	A)NAME: MALE / FEMALE)  D)NRIC/FIN/PASSPORT: CONTACT: 1231132 TERFOR
	c)ADDRESS:93229912_
B 8 8	CJADAKOS.
e 90	CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER
\$ No of passange	DRIVER Junia Chao (MALE / FEMALE)
(Including driver)	difference.
(13	CIADDRESS: BIK 17 Teck whyp Lane #04-165 S(680017)
-17	CJADDRESS
10	*d)DATE OF BIRTH: ( 28 / 10 / 1984) (DD/MM/YYYY)
*:1	e)OCCUPATION: (INDOOR / OUTDOOR)
10	MAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
4.	IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Private Hire
5	g) WEATHER CONDITION: (CLEAR / RAINING / OTHERS
	b)ROAD SURFACE: (DRY) / WET / OTHERS
6.	WAS ANYBODY INJURED (YES / NO)
7.	a) REPORTED TO POLICE (YES / NO)
9	IF YES, PLEASE STATE WHICH POLICE STATION:
Atto of forecaster.	THIRD PARTY VEHICLE SLM 98658 MODEL: Mazda 3
Claduding driver	DI DRIVER'S NAME:
CINCIDAING ALLAND	c) NRIC/FIN/PASSPORT: S13427090
9.	THIRD PARTY VEHICLE
thin of pursanger	CI VETTIGLE PROPERTY
(Including driver	e) DRIVER'S NAME:
1 8	
10	. Vehicle Number: SLA 5888 A Model: BMVV
{!	. Vehicle Number: SLD 1339 D / Modul: Toyota Canny
. (2	- Vehicle Number @mail = SJY 2152 & Model ! Madea
(3	· Vetche NumberDEO = SLZZZZGH Model : KIA
14	· Vehicle Mincher . SGX7788 E model : Wikshingen

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8434573C





Name

JUNIA CHOO

未 俊 飿 Race CHINESE

0

Date of sinth 28-10-1984 CountryThere of birth SINGAPORE





5906102



#RIC No. S8434573C

Date of secur

05-04-2018

APT BLK 17 TECK WHYE LANE #04-165 SINGAPORE 680017 YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

FFECTIVE DATE

Class 3 Motor Cars=< 3000kg with <<7 possengers, exclusive 12 Aug 2010 of the driver; and other motor vehicles << 2500kg

NP 428A





## 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: 5099122456

Cover : drivo CLASSIC

Index mark and Registration Number of Vehicle.

: SJL3314T

Chassis Number

GE61083657

2. Name of Policyholder

: 3C RENTAL SOLUTIONS

3. Effective Date of Insurance

: 19 Apr 2018

4. Expiry Date of Insurance

: 18 Apr 2019

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 or Hirer's business.

# This Policy does not cover

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

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

(c) 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) : 552 000 EXCESS (SECTION 2) : 5\$1.500 WINDSCREEN EXCESS : \$\$100 ADDITIONAL EXCESS : N/A UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE YES NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO PRIMARY DRIVER : N/A NAMED DRIVER (1) : N/A

NAMED DRIVER (2) ± N/A HIRE PURCHASE COMPANY

: UM MOTOR HUB 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

: LIM POH KUAN JOCASTRA (00000513966)

Date of Issue

= 19 Mar 2018 16:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED.

Countersigned By:

Authorised Officer

Chief Executive