

NATIONAL Assessment Centre Services [REP: JAN05]

MNA 418108916

Date In: 23/08/2018 13:29	Job description	Date & Time Completed	Done by
Ref No: NBA/JMC/18015285/Y	SAS e-filing		
Veh No: SUR 170E	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 21/08/2018 13:20	i-Motor Claim Form	MN1008347-001	23/08/2018 13:00
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner / Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: GBF 2316Y INC () / Non-INC ()

Owner / Driver: () Tel: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Title: ()

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:	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:	Invoice Preparation Checklist	Amnt (\$) In Bill	Amnt (\$) Add Bill
NA1805347	1) AR: Accident Reporting (\$30)		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idno DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON!		
	*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 (Non INC) against INC \$20		
	9) N12: Idno 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 willful 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 judgement 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	23/08/2018 12:20
Date Of Accident	21/08/2018 13:20
Exact Location Of Accident	ALONG BOON LAY WAY (COMMONWEALTH AVE WEST)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR170E
Insured/Policyholder	
Name Of Registered Owner	LEMON HONG FAR EAST
Co Reg No	53367460C
Email Address	1985HQL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98341626
Alternative Phone No	OFFICE-98341626

Vehicle Particulars

Manufacturer	TOYOTA
Model	PREMIO-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093386670
Cover Note Number	

Driver

Name of Driver	ANG CHUANG LII ,LEON
NRIC No	S8502668B
Date Of Birth	14/02/1985
Occupation	OUTDOOR
Date Of Driving Pass	20/02/2009
Driving Experience	9 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98341626
Fax Number	
Contact Number	OTHERS-98341626
E-Mail Address	1985HQL@GMAIL.COM

Address	BLK 286B TOH GUAN ROAD #03-28
Postcode	602286
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	SIDE SWIPE
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)	3
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE
Passenger 2	NAME: : PASSENGER 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

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	GBF2376Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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.
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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.



Policyholder's Signature

Date & Time:

23/08/18, 10:00 AM

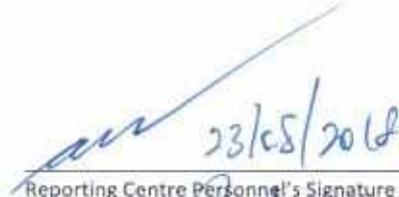


Driver's Signature

(If driver is not the policyholder)

Date & Time:

23/08/18, 10:00 AM



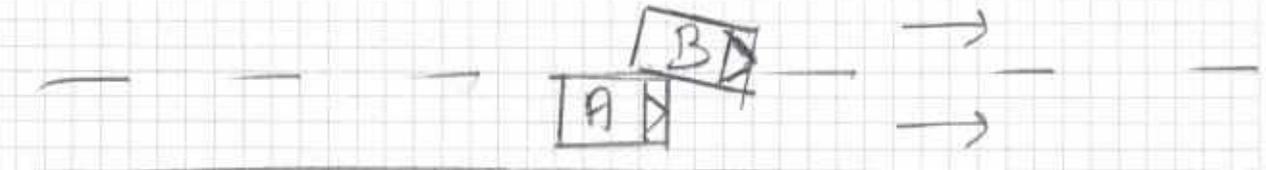
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

Along Boon Lay Way
(Commonwealth Ave West)



A) SLR170E

B) GBF2376Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 21-AUGUST-2018, at around 1.20pm, I was driving along Boon Lay Way (Commonwealth Ave West), when a vehicle (DHL VAN - GBF2376Y) suddenly cuts into my lane from the left hand side ^(no signal) and causes damage to my vehicle SLR170E (Attached Pics) are the damages. At that moment, there were passengers in my vehicle (Attached Pics) of my RYPE booking for my private hire car.

I stopped the vehicle to exchange details and particulars but the van driver came out of his van and approached me in a fierce and intimidating manner and he highlighted to claim settle by insurance. He walked back to his vehicle and drove away. I came down to take a picture of my damaged vehicle and then send my passengers to their location.

* Note: I will also include dashcam footage as main evidence for the reckless behavior of the driver of GBF2376Y. as he was endangering my passengers, me as well as his own life.

DECLARATION

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


 Policyholder's Signature
 Date & Time:
 23/08/18, 10:00 AM


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:
 23/08/18, 10:00 AM

 23/08/2018
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:
 Rosdi Wathors

Claim Handling

Accident **MT/1008347**

Policy No.	5093386670	Vehicle No.	BLR170E	GST Registration No.	
Certificate No.				Policyholder NRIC	53367460C
Policyholder Name	LEMON HONG FAR EAST	Cover Type	Private CLASSIC	Loading	0
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	98341626	Special Remark		eCode	No *
Email Address		TCA	Yes	eCode Reason	
MPN	Yes	NCD Entitlement(%)	0	Private Hire	Yes
NCD Protection	No				

Accident Details

Report Date	23/08/2018 12:43	Accident Report Within 24 Hrs	Yes	Accident Type	Side Swipe
Date of Accident	21/08/2018	Time of Accident hh:mm	13:20	Country of Accident	Singapore
Reporting Centre		Orange Force		TCN No.	
Accident Location	ALONG BOON LAY WAY (COMMONWEALTH AVE WEST)				

Benefits

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 286B #03-28	Address 2	TOH GUAN ROAD	Address 3	SINGAPORE 602286
Address 4		Address Type	Singapore address	Post Code	602286
Unit No.	03-28	Related Policy Number	5093386670		

01 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	14/02/1995
Unnamed driver Name	ANG CHUAN G LI, LEON	Driver NRIC	S8502668B	Driving Experience	9
Register Date of Driver License	25/02/2009	Driver Age	33	Contact No.(Home)	
Contact No.(Mobile)	98341626	Contact No.(Office)		Contact No.	
Address 1	BLK 286B #03-28	Address 2	TOH GUAN ROAD	Address 3	SINGAPORE 602286
Address 4		Address Type	foreign address	Post Code	602286
Unit No.	03-28			TP	
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	BLR170E	Driver Insurer Company	NTLC

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes = No
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Modification History

Claim 001 **New**

Claim Type *	DD-HK	Insured Name	LEMON HONG FAR EAST	Injured NRIC	53367460C	
Contact No.(Mobile)	98341626	Contact No. (Home)		Contact No. (Office)		
Email Address		01 Vehicle Number	BLR170E	TP	08F22	
Claim Description	BLR170E / 08F22761 ON 21 Aug 2018				Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault	CIA report	Received	
Benefit No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	Claim Class Date	23/08/2018 12:59	
Date Registered				Date Received	23/08/2018	
Report Taken By	ROSLI WAHAB					
<input checked="" type="checkbox"/> Print AK letter						

Save Submit

Attachment

Accident No.	MT/1008347	Claim No.	001
Last Doc. Received	Yes No	Upload Date	23/08/2018 13:00
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
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
NAC_BUKIT_MERAH_8006(N) NATIONAL ASSESSMENT CENTRE SERVICE: S (BUKIT MERAH) on 23 Aug 2018 13:00		Photos	Normal	Photos 2018-8-23



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	Photos	Normal	Photos 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-23
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Aug 2018 13:00	SAS	Normal	SAS 2018-8-23

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Display in New Window Scan and uploading

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Business) of LEMON HONG FAR EAST (53367460C)

Date: 27/07/2017

The Following Are The Brief Particulars of :

Name of Business	: LEMON HONG FAR EAST
Former Name(s) if any	:
Date of Change of Name	:
Registration No.	: 53367460C
Registration Date	: 27/07/2017
Commencement Date	: 27/07/2017
Status of Business	: Live
Status Date	: 27/07/2017
Renewal Date	:
Expiry Date	: 27/07/2018
Renewal via GIRO	: NO
Constitution of Business	: Sole-Proprietor
Principal Place of Business	: 286B TOH GUAN ROAD #03-28 SINGAPORE (602286)
Date of Change of Address	:

Principal Activities

Activities (I)	: PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (49219)
Description	:
Activities (II)	:
Description	:

Particulars of Authorised Representative(s)

Name	ID	Nationality	Address	Address Source	Date of Appointment
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Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry Position
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INFORMATION RESOURCES

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Business Profile (Business) of LEMON HONG FAR EAST (53367460C)

Date: 27/07/2017

Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry Position
LEON ANG	S8502668B	SINGAPORE CITIZEN	286B TOH GUAN ROAD #03-28 SINGAPORE (602286)	ACRA	27/07/2017 Owner

Withdrawn Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry Position	Date of Withdrawal
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Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

PLEASE NOTE THE INFORMATION HEREIN CONTAINED IS EXTRACTED FROM FORMS/TRANSACTIONS FILED WITH THE AUTHORITY

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA170727035128 (Free Business Profile by ACRA)

DATE : 27/07/2017

This is computer generated. Hence no signature required.

ACCIDENT STATEMENT

ACCIDENT DATE: (21 / 08 / 2018) (DD/MM/YYYY), TIME: (13 : 20) (HH:MM)

LOCATION: Along Boon Lay Way (Commonwealth Ave West)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLR170E
b) INSURANCE COMPANY: NTUC INCOME
c) POLICY NUMBER: 5093386670
d) POLICY TYPE: (COMPREHENSIVE) / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: TOYOTA/PREMIOSA
f) TYPE: (SALOON) / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / (COMMERCIAL) / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Private Hiring Service (Ryde)
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM) / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: LEMON HONG FAR EAST (MALE) FEMALE)
b) NRIC/FIN/PASSPORT: S8502668B CONTACT: 98341626
c) ADDRESS: BLK 286B TOH GUAN ROAD, #03-28, S(602286)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: ANG CHUAN LEE, LEON (MALE) FEMALE)
b) NRIC/FIN/PASSPORT: S8502668B CONTACT: 98341626
c) ADDRESS: BLK 286B TOH GUAN ROAD, #03-28, S(602286)

*d) DATE OF BIRTH: (14 / 02 / 1985) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / (OUTDOOR))

f) DATE OF DRIVING PASS: 20 FEB 2009

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

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: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBF2376Y MODEL: -
b) DRIVER'S NAME: -
c) NRIC/FIN/PASSPORT: - CONTACT: -

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = 1985hg1@gmail.com

fax = -

Passenger (2 F)

No of passenger
(including driver)
(3)

No of passenger
(including driver)

No of passenger
(including driver)

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8502668B



Name
ANG CHUANG LII, LEON

洪 权利

Race
CHINESE



Date of birth
14-02-1985

Sex
M

Country/Place of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8502668B

Name
ANG CHUANG LII, LEON

Birth Date: 14 Feb 1985
Issue Date: 04 Mar 2015

002401751G

SG

Land Transport Authority

VOCATIONAL LICENCE

Licence No : S8502668B
Name : ANG CHUANG LII, LEON

Card Issue Date : 08/11/2017

Please visit www.lta.gov.sg to check the status of this vocational licence

5448256



NRIC No. S8502668B



Date of issue
17-03-2015

Address
APT BLK 286B TOH GUAN ROAD
#03-28
SINGAPORE 602286

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 20 Feb 2009



NP 428A

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	08/11/2017



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: 5093386670

Cover : drive CLASSIC

- | | |
|--|-----------------------|
| 1. Index mark and Registration Number of Vehicle | : SLR170E |
| Chassis Number | : NZT2603035100 |
| 2. Name of Policyholder | : LEMON HONG FAR EAST |
| 3. Effective Date of Insurance | : 14 Aug 2017 |
| 4. Expiry Date of Insurance | : 13 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 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)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$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	: 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 : AUTOSHIELD PTE. LTD. (00000573469)
Date of Issue : 11 Aug 2017 17:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive