

NATIONAL Assessment Centre Services [ver: 1 Jan/05] **MNA418120647**

Date In: 17/09/2008 17:10	Job description	Date & Time Completed	Done by
Ref No: N18A1NCL807692614	SAS e-filing		
Veh No: SKT 8070J	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 16/09/2008 13:15	i-Motor Claim Form	M.T/10/1/007-001	17/09/2008
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		18/10
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

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

TP Particulars: Veh No: **ABB3261J** INC () / Non-INC ()

Owner / Driver: () Tel: ()

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

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % [Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

Claimant's Particulars:-	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			Est. Bill	Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);			
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)			
Damaged Portion:	3) TF: Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120			
Auditors' Comments:-	5) FT: Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
Cat. 1:	6) TR: Re-inspection \$75			
Cat. 2/3:	7) N1: Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	OD:			
	*N3: Courtesy Car / Tpl Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
	TP (N11): TP (N-in INC) against INC \$20			
	9) N12: Idac 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	17/09/2018 17:10
Date Of Accident	16/09/2018 13:15
Exact Location Of Accident	BLK 221A BOON LAY PLACE MARKET/HAWKER CTR CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT8070J
Insured/Policyholder	
Name Of Registered Owner	ONG JEE HWEE
NRIC No	S0123545A
Email Address	ALICIAONGLH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97969310
Alternative Phone No	OTHERS-97475393
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C250 CGI
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5072377877-03
Cover Note Number	
Driver	
Name of Driver	ONG LAY HOON ALICIA
NRIC No	S8813406J
Date Of Birth	20/04/1988
Occupation	INDOOR
Date Of Driving Pass	21/09/2007
Driving Experience	10 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97475393
Fax Number	
Contact Number	OTHERS-97969310
EEmail Address	ALICIAONGLH@GMAIL.COM

Address 28B JALAN LEMPENG
#09-23

Postcode 128809

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own Vehicle -
-
-

Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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) 1

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name JURONG WEST NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-2689999 - FAX NO: 62672438

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT J/20180916/2091

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 GBB3261J

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

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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**.
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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)

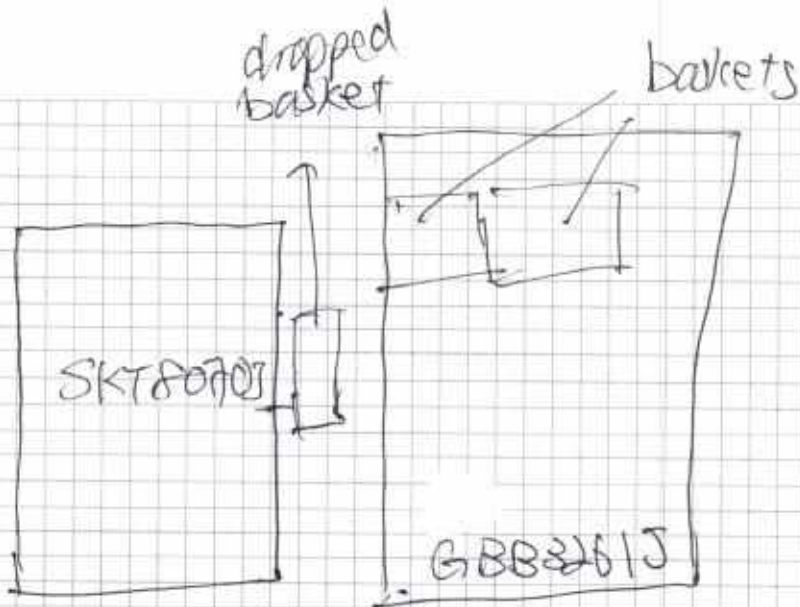
Date & Time: 17/9/2018
12:55pm



17/9/2018

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

SKETCH PLAN



BIK 221A BOON LAY PLACE / MARKET / HAWKAR CR

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/9/2018, about 1210 hrs, I was at the carpark of Boon Lay Market. I was in the car (stationary) when I heard a noise from the side of the car door. I turned and saw the lorry (stationary) with a man standing holding a basket. He had apparently dropped the basket and hit my car.

I went down to take a look at my car and found scratches on the glass window and car door (driver's side). An empty basket was also next to the car.

The man then informed me to take down his vehicle number to make an insurance claim against his company.

POLICE REPORT 8/2018 916/2091

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

[Signature]

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

17/9/2018
12:55pm

[Signature] 17/09/2018

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

[Signature]
Rashid Wathani



**SINGAPORE
POLICE FORCE**



J/20180916/2091

1 of 2

POLICE REPORT (NP299)

Report No. J/20180916/2091

Police Station Of Origin
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Date/Time Report Made 16/09/2018 16:46		Vide Report No.		Station Diary No. 87	
Name Of Informant ONG LAY HOON ALICIA		Address 28B JALAN LEMPENG #09-23 SINGAPORE 128809			
ID Type / ID No. NRIC NO / S8813406J		Contact No. Home/Office		Mobile 97475393	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation MANAGER		Sex Female	Age 30	Date of Birth 20/04/1988	Race Chinese
Institution/School Name		Language			
Date/Time Of Incident 16/09/2018 13:15		Location Of Incident 221A BOON LAY PLACE MKT/HAWKER (221A/B BOON LAY PL)* SINGAPORE 641221 CARPARK			

Brief details.

On 16/9/2018 at about 1310hrs, I was at the carpark of Boon Lay Market while sitting inside the car, bearing plate no. SKT8070J, to wait for my parents. At about 1315hrs, I noticed a sound coming from the side of my door, thus I decided to come out from the car and make a check. When I went down to the car, I discovered there were scratches on the door and glass window of the driver seat and there was an empty black basket lying nearby.

Signature Of Officer Recording The Report: J / Sgt 1 NURAGILAH BINTE ABDUL HAMID <i>Sgt Nur Agilah Binte Abdul Hamid</i>	Signature Of Informant: <i>Alicia Ong</i>
Signature Of Interpreter: Not applicable	Date/Time: 16/09/2018 16:46
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / ASP WENG WEIMING Contact No.: 67910000	Classification Of Case:

Authentication Stamp

AS



**SINGAPORE
POLICE FORCE**



J/20180916/2091

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20180916/2091

I then noticed there was a lorry, bearing plate no. GBB3261J, was unloading of the baskets, and he also informed me to take down his vehicle number to make an insurance claims from his company. I am lodging this report is for insurance claims.

Signature Of Officer Recording The Report: J / Sgt 1 NURAQILAH BINTE ABDUL HAMID <i>SC/Sgt Nur An An As</i>
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / ASP WENG WEIMING Contact No.: 67910000

Signature Of Informant: <i>Murphy</i>
Date/Time: 16/09/2018 16:46
Classification Of Case:

Authentication Stamp

As

Claim Handling

Accident MY/1011807

Policy No.	5072277877-02	Vehicle No.	SKT80702	GST Registration No.	
Certificate No.					
Policyholder Name	ONG JEE HWEE			Policyholder NRIC	S0123545A
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive PREMIUM	Loading	0
Contact No.(Mobile)	97969310	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	NU *
KPI	- No Yes	TCA	- No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	30	Private Hire	No

Accident Details

Report Date	17/09/2018 17:55	Accident Report Within 24 hrs	Yes	Accident Type	Damaged whilst parked
Date of Accident	16/09/2018	Time of Accident hh:mm	13:15	Country of Accident	Singapore
Reporting Centre		Orange Force		IDM No.	
Accident Location	BLK 221A BOON LAY PLACE MARKET/HWKKER CTB CARPARK				

Excess

Own damage Excess	500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	500.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 93B #05-793	Address 2	JURONG WEST ST, #1	Address 3	SINGAPORE 640938
Address 4		Address Type	Singapore address	Post Code	640938
Unit No.		Related Policy Number	5072277877-02		

GI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	20/04/1988
Unnamed driver Name	ONG LAY HOON ALICIA	Driver NRIC	S8813408J	Driving Experience	10
Register Date of Driver License	21/09/2007	Driver Age	30	Contact No.(Home)	
Contact No.(Mobile)	97475353	Contact No.(Office)		Address 3	SINGAPORE 128809
Address 1	280 JALAN LEMPAENG	Address 2	#09-23 THE TRULINSQ	Post Code	128809
Address 4		Address Type	Foreign address		
Unit No.	09-23				
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	SKT80702	Driver Insurer Company	NFLC

Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes - No		

Modification History

Claim 001 **Rec**

Claim Type *	GD-MX	Insured Name	ONG JEE HWEE	Insured NRIC	S01235	
Contact No.(Mobile)	97969310	Contact No. (Home)	97911890	Contact No. (Office)		
Email Address	ALICIAONGLH@GMAIL.COM	OT Vehicle Number	SKT80702	TP Vehicle Number	S88134	
Claim Description	SKT80702 / G8832617 ON 15 Sept 2018				Name of Preferred Workshop	
Preferred Workshop Finalisation	Yes	Insured Liability	Not at Fault	GIA report	Received	
Date Registered	17/09/2018 18:09	Claim Close Date		Date Received	17/09/2018	
Report Taken By	ROSLI WAHAB					

Save Submit

Attachment

Accident No.	MY1011807	Claim No.	001
Last Doc. Received	Yes No	Upload Date	17/09/2018 18:10
Path *		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_300676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 17 Sep 2018 18:10		Photos	Normal	Photos 2018-9-17



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:10	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:10	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:10	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:10	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:09	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:09	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:09	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:09	Photos	Normal	Photos 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:09	SAS	Normal	SAS 2018-9-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Sep 2018 18:09	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-9-17

Video List

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

ACCIDENT STATEMENT

ACCIDENT DATE: 16/09/2018 (DD/MM/YYYY), TIME: 13:15 (HH:MM)

LOCATION: 221A Boon Lay Place Market/Hawker Carpark
Singapore 641201

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKT 8070J
b) INSURANCE COMPANY: NTUC Income
c) POLICY NUMBER: 5072 377 877-03
d) POLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: MERCEDES Benz / C250 CGI
f) TYPE: SALEON COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
g) VEHICLE CATEGORY: PRIVATE COMMERCIAL / MOTORCYCLE
h) PURPOSE OF USING AT ACCIDENT TIME: car was parked
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: Ong Jee Hwee (MALE / FEMALE)
B) NRIC/FIN/PASSPORT: 5022545A CONTACT: 97969310
C) ADDRESS: Blk 221A Jurong West St 91
#05-293 Singapore 640938

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Ong Lay Hoon Alicia (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 58813406J CONTACT: 97775393
c) ADDRESS: 28B Jalan Lempeng #02-23
Singapore 64809

* d) DATE OF BIRTH: 20/07/1988 (DD/MM/YYYY)

e) OCCUPATION: INDOOR / OUTDOOR

f) DATE OF DRIVING PASS: 21 sept 2007

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Daughter

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

b) ROAD SURFACE: DRY / WET / OTHERS

6. WAS ANYBODY INJURED (YES/NO) NO

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

IF YES, PLEASE STATE WHICH POLICE STATION: Jurong West N/C

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: GBB 2261J 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: _____

No. of passengers
(including driver)
(1)

No. of passengers
(including driver)

No. of passengers
(including driver)

EMAIL = aliciaonglh@gmail.com

VIDEO =

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8813406J



Name

ONG LAY HOON ALICIA

王丽雲

Race

CHINESE

Date of Birth Sex

20-04-1988 F

Country of Birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

LICENCE NUMBER: S8813406J

Name: ONG LAY HOON ALICIA

Birth Date: 20 Apr 1988

Issue Date: 21 Sep 2007

001530831C

3291719



NRIC No. S8813406J



Blood Group: Date of issue: 23-04-2003

28B JALAN LEMPENG #09-23
SINGAPORE 128809

NRIC No: S8813406J

Date: 18/03/2018

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

PASS DATE

Class 3A Motor cars without clutch pedals (Auto) <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles without clutch pedals <= 2500kg 21 Sep 2007

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: 5072377877-03 Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle : **SKT8070J**
Chassis Number : WDD2050452F103365
2. Name of Policyholder : ONG JEE HWEE
3. Effective Date of Insurance : 24 Jun 2018
4. Expiry Date of Insurance : 23 Jun 2019
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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: ONG JEE HWEE
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: DBS BANK LTD
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 : VV INSURANCE AGENCY PTE. LTD. (00000614878)
Date of Issue : 04 Jun 2018 21:00 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive