

# NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

MMAY18/22336

Date In: 20/09/2018 19:51	Job description	Date & Time Completed	Done by
Ref No: NBA/INC6017191/Y	SAS e-filing		
Veh No: FX 888H	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 20/09/2018 09:30	i-Motor Claim Form	MM/101234000	20/09/2018 20:05
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: 8BK 371Y

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

NBA06098

## Invoice Preparation Checklist

Amr (\$)

Amr (\$)

1st Bill

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: Idac 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: Idac 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 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	20/09/2018 19:51
Date Of Accident	20/09/2018 09:30
Exact Location Of Accident	FOUR SEASONS PARK CARPARK ENTRANCE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFX888H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SANTOSA HANDOJO@ KANG KIEM HAN
NRIC No	S2186013A
Email Address	LARRYSCONG@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-92345751
Alternative Phone No	OTHERS-92345751

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ALPHARD
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	REPORTING ONLY
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	5102706655
Cover Note Number	

### Driver

Name of Driver	ONG SIONG CHUAN ,LARRY
NRIC No	S0119596D
Date Of Birth	29/01/1953
Occupation	OUTDOOR
Date Of Driving Pass	29/08/1994
Driving Experience	24 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92345751
Fax Number	
Contact Number	OTHERS-92345751
Email Address	LARRYSCONG@YAHOO.COM.SG



Address	BLK 653 WOODLANDS RING ROAD #12-476
Postcode	730653
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD ON COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	1
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?	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	SBK337Y
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KHANG ANDREW JIHOON
NRIC/Passport Number	G5692324T
Contact Number	91550946
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

20/9/2019  
3:55 PM

Reporting Centre Personnel's Signature

Name:

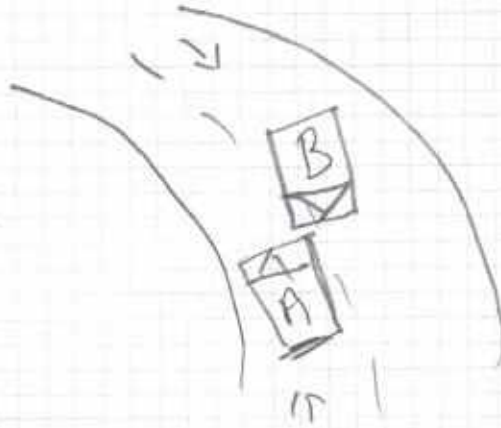
NRIC/FIN No.:

20/9/2019  
Rishi Kumar

SKETCH PLAN

FOUR SEASONS PARK CARPARK ENTRANCE

A) SFX 888H  
B) SBK 3771



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20th September 2018 at 9.30am I am driving down a short bend slope to carpark. I saw a car coming up from the carpark. I notice he holding a handphone and he is looking at the handphone. I stop my car immediately ~~and~~ horn at the ~~at~~ car, but unfortunately already hit onto my front right hand bumper.

DECLARATION

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

Policyholder's Signature  
Date & Time:

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

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



## Claim Handling

The premium on this policy has not been collected.

## Accident MT/1012340

Policy No.	5102706655	Vehicle No.	SFX888H	GST Registration No.	
Certificate No.					
Policyholder Name	SANTOSA HANCOJOE KANG KHEM HAN			Policyholder NRIC	S2188013A
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive PREMIUM	Loading	0
Contact No.(Mobile)	92345751	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No *
KfK	Yes	TCA	Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	30	Private Hire	No

## Accident Details

Report Date	20/09/2018 19:57	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head on collision
Date of Accident	20/09/2018	Time of Accident (hh:mm)	09:30	Country of Accident	Singapore
Reporting Centre		Orange Perse		ICM No.	
Accident Location	FOUR SEASONS PARK CARPARK ENTRANCE				

## 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:	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## Policyholder Mailing Address

Address 1	291B ORCHARD ROAD	Address 2	A14-08 Ngee Ann City	Address 3	SINGAPORE 238874
Address 4		Address Type	Singapore address	Post Code	238874
Unit No.	1B-08	Related Policy Number	5102706655		

## OL Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	ONG SIONG CHUAN, LARRY	Driver NRIC	S0119596D	Driver DOB	29/01/1953
Register Date of Driver License	20/08/1994	Driver Age	65	Driving Experience	24
Contact No.(Mobile)	92345751	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 653 #12-47B	Address 2	WOODLANDS KING ROAD	Address 3	SINGAPORE 730653
Address 4		Address Type	Foreign address	Post Code	730653
Unit No.	12-47B				
Does he own a Singapore Registered car?	Yes < No	Driver Vehicle No.	SFX888H	Driver Insurer Company	NTUC

## Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes < No
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## Modification History

## Claim 001

Claim Type *	QD-MX	Insured Name	SANTOSA HANCOJOE KANG XI	Insured NRIC	S2188013A
Contact No.(Mobile)		Contact No.(Home)	94681121	Contact No.(Office)	
Email Address		OL Vehicle Number	SFX888H	Vehicle Number	SBK377
Claim Description	SFX888H / SBK377Y CN 20 Sept 2018				
Preferred Workshop	Yes	Insured Liability	Not as Fault	GIA report	Received
Sealed for Finalisation		Preferred Workshop, Name unknown		Claim Close Date	20/09/2018 20:04
Date Registered				Date Received	20/09/2018
Report Taken By	BDSL2 WAHAB				

## Print All Letter

Save Submit

## Attachment

Attachment No.	MT/1012340	Claim No.	001
Last Doc. Received	Yes No	Upload Date	20/09/2018 20:05
Path *		Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Desc	
Choose File	No file chosen		
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Choose File	No file chosen		
Choose File	No file chosen		
Message Read			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
NAC_BUKIT_MERAH_B00676 NATIONAL ASSESSMENT CENTRE SERVICE		Photos	Normal	Photos 2018-9-20

S (BUKIT MERAH) on 20 Sep 2018 20:05

NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICE  
S (BUKIT MERAH)) on 20 Sep 2018 20:05

Photos

Normal

Photos 2018-9-20

NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICE  
S (BUKIT MERAH)) on 20 Sep 2018 20:05

Photos

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Photos 2018-9-20

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S (BUKIT MERAH)) on 20 Sep 2018 20:04

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NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICE  
S (BUKIT MERAH)) on 20 Sep 2018 20:04

NRIC/ Driving License

Normal

NRIC/ Driving License 2018-9-20

Video List

Uploaded By/Date

Folder Date

File Name

Source

Display in New Window

Scan and uploading

## ACCIDENT STATEMENT

ACCIDENT DATE: 20/09/2018 (DD/MM/YYYY), TIME: 0930 (HH:MM)

LOCATION: FOUR SEASONS PARK CARPARK ENTRANCE

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SFX 888H  
b) INSURANCE COMPANY: NTUC  
c) POLICY NUMBER: 5102706655  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: TOYOTA ALPHARD  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: PERSONAL DRIVER  
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: SANTOSA HANDJO (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

### DRIVER

- a) NAME: ONG SIUNG HUAN LARRY (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: 50119596D CONTACT: 92345751  
c) ADDRESS: BLK 653 WOODLANDS RING ROAD #12-476  
SINGAPORE 730653

\* d) DATE OF BIRTH: 29/01/1953 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 29 AUGUST 1994

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

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: NA

### 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SBK 377Y MODEL: MERCEDES  
b) DRIVER'S NAME: KHANG ANDREW JI HOON  
c) NRIC/FIN/PASSPORT: G5692324 T CONTACT: 91550946

### 9. THIRD PARTY VEHICLE

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

Email: larryscoung@yahoo.com.sg

VIDEO =



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0119596D



NAME  
ONG SIONG CHUAN, LARRY

RACE  
CHINESE

Date of Birth  
29-01-1953

Sex  
M

Country of Birth  
SINGAPORE

王松村

REPUBLIC OF SINGAPORE DRIVING LICENCE

NAME  
ONG SIONG CHUAN, LARRY

Birth Date  
29 Jan 1953

Issue Date  
11 Aug 2003

000731107A

0034829



NRIC No. S0119596D



Blood Group  
O+

Date of Issue  
01-08-1991

APT BLK 653 WOODLANDS RING ROAD #12-47B  
SINGAPORE 730653

NRIC No. S0119596D

Date: 24-08-2006 (R) No: 5339166

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

PASS DATE  
29 Aug 1994

Class 5 Motor Cars and Motor Tractors the weight of which (unladen does not exceed 3500 kilograms)

NP 429A

Licence No: S0119596D

## 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: 5102706655

Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle : To Be Advised  
Chassis Number : AGH300182260
2. Name of Policyholder : SANTOSA HANDOJO @ KANG KIEM HAN
3. Effective Date of Insurance : 27 Jul 2018
4. Expiry Date of Insurance : 26 Jul 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	: SANTOSA HANDOJO @ KANG KIEM HAN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: HONG LEONG FINANCE 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 : Nita Pte Ltd (00000572460)  
Date of Issue : 25 Jul 2018 17:14 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive