

NATIONAL Assessment Centre Services. [wef 1 Jan'05]

Date In: 22/10/18	Job description	Date & Time Completed	Done by
Ref No: NA/CE 18019122/13	SAS e-filing		
Veh No: SKK3627J	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 06/07/18 1012	I-Motor Claim Form		
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: (TWINCAR)	Tel:	Fax:
TP Particulars:	Veh No: SCU3833Y	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%. P: 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 repaler.
() 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

NA1806736	Invoice Preparation Checklist	Am (S)	Am (S)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	In Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: 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: 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-in 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 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. 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	22/10/2018 14:19
Date Of Accident	06/07/2018 10:15
Exact Location Of Accident	WAITING AREA INFRT BLK 655 WOODLANDS RING RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK3627J
Insured/Policyholder	
Name Of Registered Owner	MR TAY HAN MING KENNY
NRIC No	S8023431G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91181447
Alternative Phone No	OTHERS-91181447

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
Exact Purpose for which vehicle was being used at time of accident	STATIONARY
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3074381700
Cover Note Number	

Driver

Name of Driver	LIM LAY HONG
NRIC No	S8506948I
Date Of Birth	27/02/1985
Occupation	INDOOR
Date Of Driving Pass	08/10/2010
Driving Experience	7 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-82335746
Fax Number	
Contact Number	
EEmail Address	LIFENG_85@HOTMAIL.COM

Address	BLK 80 BEDOK NORTH ROAD #05-284
Postcode	460080
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	
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	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REWFER TO THE POLICE REPORT: T/20181012/7000 & T/20181017/7014

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH WORKSHOP
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SCU3833Y
Vehicle Make/Model/Colour	
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.
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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:

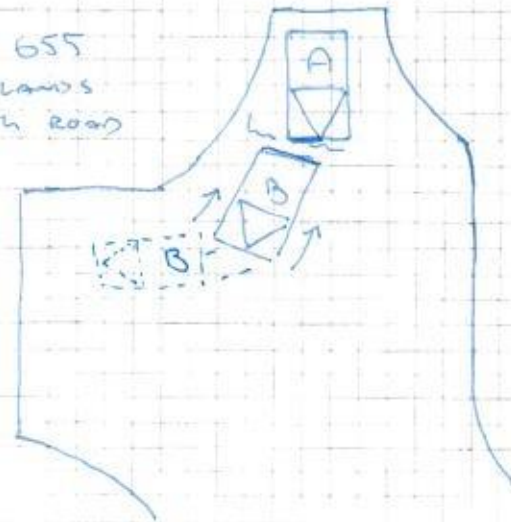

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

VEHICLE A - SKK3627J
VEHICLE B - SCU3833Y

BLK 655
WOODLANDS
RIVER ROAD

WATER
COURSE



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER POLICE REPORT.

REPORT NUMBER.

T / 20181012/7000

VEHICLE A - SKK3627J

T / 20181017 / 7014.

VEHICLE B - SCU 3833Y

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.:



SINGAPORE POLICE FORCE



T/20181012/7000

1 of 3

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20181012/7000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/10/2018 00:26	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: LIM LAY HONG			Address: APT BLK 80 BEDOK NORTH ROAD #05-284 SINGAPORE 460080		
ID Type / ID No.: NRIC NO / S85069481			Contact No.: Home/Office: Mobile: 82335746		
Nationality: SINGAPORE CITIZEN			Email: lifeng_85@hotmail.com		
Sex: Female	Age: 33	Date of Birth: 27/02/1985	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Information technology security specialist			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/07/2018 10:15	Type of Location:
Location: WOODLANDS RING ROAD				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKK3627J	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20181012/7000

2 of 3

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20181012/7000

CONTINUATION OF REPORT

Driver			
Name	LIM LAY HONG	ID No.	S8506948I
Related Vehicle	SKK3627J (Car)	Contact No.	82335746
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

A black Mazda reverse and hit my car when my car is stationary
The driver drove without stopping to check on the damages, currently my car is damaged due to the impact of the hit.
Kindly assist to refer back to the report which i submitted.

Submission Number: 20180706-0050
Public Violation Report No.: APV/18/08927

Please refer to the link for the video.

<https://www.dropbox.com/s/u0ta8tks0snd6cb/Hit and Run.mp4?dl=0>



**SINGAPORE
POLICE FORCE**



T/20181012/7000

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20181012/7000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
GOH GEOK LYE
Contact No.: 65476148

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
12/10/2018 00:26

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20181017/7014

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20181017/7014

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/10/2018 21:02	Vide Report No.: T/20181012/7000	Station Diary No.:
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Informant's Particulars			
Name of Informant: LIM LAY HONG		Address: APT BLK 80 BEDOK NORTH ROAD #05-284 SINGAPORE 460080	
ID Type / ID No.: NRIC NO / S8506948I		Contact No.: Home/Office: Mobile: 82335746	
Nationality: SINGAPORE CITIZEN		Email: lifeng_85@hotmail.com	
Sex: Female	Age: 33	Date of Birth: 27/02/1985	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Information technology security specialist		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/07/2018 10:15	Type of Location:
Location: WOODLANDS RING ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKK3627J	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20181017/7014

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20181017/7014

CONTINUATION OF REPORT

Driver			
Name	LIM LAY HONG	ID No.	S8506948I
Related Vehicle	SKK3627J (Car)	Contact No.	82335746
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

A black Mazda(SCU3833Y) reverse and hit my car when my car is stationary
The driver drove without stopping to check on the damages, currently my car is damaged due to the impact of the hit.
Kindly assist to refer back to the report which i submitted.
Submission Number: 20180706-0050
Public Violation Report No.: APV/18/08927
Please refer to the link for the video.
<https://www.dropbox.com/s/u0ta8tks0snd6cb/Hit and Run.mp4?dl=0>



**SINGAPORE
POLICE FORCE**



T/20181017/7014

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20181017/7014

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
GOH GEOK LYE
Contact No.: 65476148

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
17/10/2018 21:02

Classification Of Case:

Vehicle No.	SKK 3627 J	Model / Make	VW JETTA
Date of Accident	06/07/2018		
Time of Accident	10 15	HRS	
Location of Accident	WAITING AREA IN FRONT BLK 655 WOODLANDS RING RD		
Exact purpose use during accident	STATIONARY STOPPED		
Name of Owner	TAN HAN MINH, KENNEDY		
Telephone No.	H/P : 9118 1447	Home :	Office :
NRIC	S8023431A		
Address	BLK 616 WOODLANDS AVE 4 #06-569 S(730616)		
Claim type	OD	<u>THIRD PARTY</u>	REPORTING ONLY
Insurance Company	CHINA TAIPING		
Type of Coverage	<u>Comprehensive</u>	Third Party	Third Party / Fire / Theft
Policy No.	DMPCLSN30743T1700		
Name of Driver	As Above If No, UM LAY HONG		
NRIC	S8506949I	Any Passengers :	NIL
Date of birth	27/02/1985		
Occupation	Outdoor	/	<u>Indoor</u>
Driving License Pass Date	08 DEC 2010		
Gender	Male / <u>Female</u>		
Contact No.	H/P : 92335746	Home :	Office :
Address	BLK 80 BROADBENT NORTH RD #05-284 S(460080)		
Driver have any own vehicle	<u>No</u>	If yes, Reg No.	
Relationship	Employee,	If no, state	Spouse
Weather condition	<u>Clear</u>	Raining	Other
Road Surface	<u>Dry</u>	Wet	Other
Any Injuries	No,	If Yes, Who?	
Name And Contact No.			
Name And Contact No.			
Police Report	No,	If <u>Yes</u> , Where?	TP HQ DIVISION
Vehicle B No.	SCU 3833 Y	Any Passengers :	
Name of Driver		Contact No. :	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	FRONT PORTION		
Camera Recorder	<u>Yes</u> / No		
Email Address	lifeng_85@hotmail.com		
HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?			
			Yes / <u>No</u>
PARTICULAR WORKSHOP	TWINCAR AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	IAN		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8506948I



Name

LIM LAY HONG

林 丽 凤

Race

CHINESE

Date of birth

27-02-1985

Country/Place of birth

SINGAPORE

Sex

F



88888888

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S8506948I

Name:

LIM LAY HONG

Birth Date: 27 Feb 1985

Issue Date: 08 Dec 2010



5550304

NRIC No: S8506948I



Date of issue

15-01-2016

Address

APT BLK 80 BEDOK NORTH ROAD
#05-284
SINGAPORE 460080

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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) \leq 3000kg 08 Dec 2010
with \leq 7 passengers, exclusive of the driver, and
other motor vehicles without clutch pedals \leq 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 No. : DMPCSN3074381700 Engine No : CTH042000
Chassis No: WVVZZZ16ZDM061091

1. Index Mark and Registration
Number of Vehicle : SKK3627J

2. Name of Policy Holder : MR TAY HAN MING KENNY

3. Effective date of the Commencement of Insurance for
the purposes of the Regulations, Ordinance or Enactment : 20 SEPTEMBER 2017 NAMED DRIVERS EX SECT. I.....S\$500.00
IN ADDITION TO NAMED DRIVERS EX:
EX SECT. I - AGE <= 25.....S\$3,000.00
EX SECT. I - AGE >= 26.....S\$500.00
* AGE AS AT DATE OF ACCIDENT

4. Date of Expiry of Insurance : 02 JANUARY 2019 EX ON WINDSCREEN.....S\$100.00

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 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: *

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS / THEFT) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$1,000 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

HIRE PURCHASE CO. : TOKYO CENTURY LEASING (S) PTE LTD AS HP OWNER

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

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). Please see reverse
For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:

Vitesse Solutions

Authorised Officer



Authorised Signatory