	Jeb description	Date & Time	Completed	Don	e by
Date In: 24 M 8- 15:53		Date to Time	Completed	1000	ic ox
Ref No: HA E 2218 0228 18 24	SAS e-filing				
Veh No: Mc U754 6E	E-mail (within 8hrs, AIC				
D.O.A : h/1-/18-07:10	i-Motor Claim Form	n e			
OD (TP) Reporting Only	i-Motor W/O (Within	OD 2hrs, TP 4hrs)			
	i-Photo Uploaded	İ			
TP Insurer:	Assessment/Survey Re	port			
Tr Misurel,	Ass't Report by Fax /	Hand to Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (Tol:	Fax:		-
TP Particulars: Veh No: JA	n bros ic.	NC()/Non-INC	2()	10	
Owner / Driver: (Tel:)	
Policy No: ()	Period: () Cover Type:)	
Confirmed by : (Date	Tim	e:)	1/300-00
Insured/Driver Liability: (%)	[Note-Est. Status (WO): 1	V: 0-20%; P: 21-79%	6. F: 80-100	%]	
Year of Registration: ()	Warranty: YES ()/NO	O()			200
Excess: (\$) Loading: \$1	,000()/\$2,000()				
General Remarks:-			G#12550194		
A SANDA TO THE PROPERTY OF THE	*457 com or management as assetted	Combination of the Company of the Co		or etc.	
() Walk-In Customer : Customer's in		a Strictly NO refer of	f repairer.		
() Total Loss Case : to e-mail Insu	irer URGENTLY.			tij	
Drive-In ()/ Towed-In (); Invoi	ce: YES () / NO (); Towing Co: (P.	(8))
					(III)
Remarks:- (INC hotline: 6788 6616)		Date&Time Co	mple od	Done	by -
1) Apply for Transport Allowance ()/			-		
/ ZPO to Langion Anowance ()/	Courtesy Car ()				
	Courtesy Car ()				
2) QC Check / Post Repair Inspection	()				
QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > 5]	()				
2) QC Check / Post Repair Inspection	()				
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury:	()		Faller of Prince (Prince (Prin		A 10, 100.
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5 Injury:	()			ecivii	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury:	()			PSO4X) as	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury:	()			8 SCHK) AF	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury:	()	The state of the s		PSCHI) at	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury:	()				
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury:	()			PACHE RE	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5 Injury: Date/Time Actions	()			P.CALVAR	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions	()	Preparation Check	list	Anic (S)	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5 Injury: Date/Time Actions	() \$3000] ()	Preparation Check	list	Ant (S)	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions	() \$3000] () Invoice 1) AR: A	coident Reporting (\$30);	<u> </u>	77. Far. 19. 7. 7.1.1	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions Actions Alagogae Aimant's Particulars:-	() \$3000] () Invoice 1) AR: A 2) DA: D 3) TF: Te	coident Reporting (\$30); amage Assessment (\$100); wing Fee	Inc (\$80) \$40/\$45	77. Far. 19. 7. 7.1.1	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions Actions Alagogae aimant's Particulars:-	Invoice 1) AR: A 2) DA: D 3) TF: Te 4) FT: Fo 4) FT: Fo 5) TF: Fo 5) TF: Fo 5) TF: Fo 5) TF: Fo 6) FT: Fo 6) FT: Fo 6) FT: Fo 7) TF: Fo 7	coident Reporting (\$30); amege Assessment (\$100); wing Fee How-Through Survey	INC (\$80) \$40/\$45 \$120	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions Actions Algory Particulars:	Invoice	coident Reporting (\$30); armage Assessment (\$100); wing Fee How-Through Survey How-Through Survey (Resu	INC (\$80) \$40/\$45 \$120 (vey) \$30	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 3 Injury: Date/Time Actions Actions aimant's Particulars:- iver/Owner:	Invoice	coident Reporting (\$30); amage Assessment (\$100); wing Fee flow-Through Survey flow-Through Survey (Resu- ming against INC Only (we	INC (\$80) \$40/\$45 \$120 (vey) \$30	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 3 Injury: Date/Time Actions Actions aimant's Particulars:- iver/Owner:	Invoice	coident Reporting (\$30); armage Assessment (\$100); wing Fee How-Through Survey How-Through Survey (Resu	INC (\$80) \$40/\$45 \$120 (vey) \$30 [10 Jan 2005)	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 3 Injury: Date/Time Actions Actions aimant's Particulars:- iver/Owner: Intact No:	Invoice	coldent Reporting (\$30); amage Assessment (\$100); wing Fee illow-Through Survey Illow-Through Survey (Resu- ming against INC Only (we inspection	INC (\$80) \$40/\$45 \$120 rvey) \$30 [10 Jan 2005) \$75	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions aimant's Particulars: iver/Owner: intact No: imaged Portion:	() \$3000] () \$10 AR: A 2) DA: D 3) TF: Te 4) FT: Fo 5) FT: Fo Forelat 6) TR: Re 7) N1: Id 8) NTUC OD*	coident Reporting (\$30); amage Assessment (\$100); wing Fee How-Through Survey How-Through Survey (Resu- ming assinst INC Only (we- inspection as DA + SMRT Survey Additional Services.	INC (\$80) \$40/\$45 \$120 rvey) \$30 (10 Jan 2005) \$75	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions aimant's Particulars: iver/Owner: intact No: imaged Portion:	Invoice 1) AR: A 2) DA: D 3) TF: To 4) FT: Fo 5) FT: Fo Foreland 6) TR: Re 7) NI: Id 8) NTUC OD* *NS: C *NS: C C	coident Reporting (\$30); amage Assessment (\$100); wing Fee How-Through Survey How-Through Survey (Resu- ming assinst INC Only (we- inspection as DA + SMRT Survey Additional Services	INC (\$80) \$40/\$45 \$120 rvey) \$30 (10 Jan 2005) \$75	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions Actions aimant's Particulars: iver/Owner: intact No: maged Portion: Checked by (Engr-In-Charge):	Invoice 1) AR: A 2) DA: D 3) TF: To 4) FT: Fo 5) FT: Fo For clair 6) TR: Re 7) N1: Id 5) NTUC OD* *N5: C *N6: Ro *N6:	coident Reporting (\$30); amage Assessment (\$100); wing Fee How-Through Survey How-Through Survey (Resu- ming against INC Only (we- inspection ac DA + SMRT Survey Additional Services ourtesy Car/Tpt Allowance epair Co-ordination	INC (\$80) \$40/\$45 \$120 rvey) \$30 (10 Jan 2005) \$75	77. Far. 19. 7. 11	Amil ()
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions Actions Actions Image Particulars: Checked by (Engr-In-Charge): ditors' Comments:	() \$3000] () \$10 AR: A 2) DA: D 3) TF: Te 4) FT: Fe 5) FT: Fo Forclai 6) TR: Re 7) N1: Id 8) NTUC OD* *N5: C *N6: Re *N7: Fe *N8: D	coident Reporting (\$30); amage Assessment (\$100); wing Fee How-Through Survey How-Through Survey (Resu- ming against INC Only (we- inspection as DA + SMRT Survey Additional Services ourtesy Car/Tpt Allowance tpair Co-ordination ast Repair Inspection V/Collect Excess Coordinate	INC (\$80) \$40/\$45 \$120 rvey) \$30 [10 Jan 2005) \$75 \$160 \$55 \$10 \$55	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions Actions Limant's Particulars: iver/Owner: ntact No: maged Portion: Checked by (Engr-In-Charge): ditors' Comments:	() \$3000] () Invoice 1) AR: A 2) DA: D 3) TF: Te 4) FT: Fo 5) FT: Fo For clair 6) TR: Re 7) N1: Id 8) NTUC OD: 'N5: C 'N6: Re 'N7: Fo 'N8: D TP (N1	coident Reporting (\$30); amage Assessment (\$100); wing Fee illow-Through Survey Illow-Through Survey (Resu- ming against INC Only (we- inspection as DA + SMRT Survey Additional Services:- ourtesy Car / Tpt Allowance ipair Co-ordination ast Repair Inspection V / Collect Excess Coordination 1): TP (Non INC) against INC)	INC (\$80) \$40/\$45 \$120 rvey) \$30 [10 Jan 2005) \$75 \$160 \$55 \$10 \$525 ion \$55 IC \$20	77. Far. 19. 7. 11	
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > 5] Injury: Date/Time Actions	() \$3000] () \$10 AR: A 2) DA: D 3) TF: Te 4) FT: Fe 5) FT: Fo Forclai 6) TR: Re 7) N1: Id 8) NTUC OD* *N5: C *N6: Re *N7: Fe *N8: D	coident Reporting (\$30); amage Assessment (\$100); wing Fee How-Through Survey How-Through Survey (Resu- ming against INC Only (we- inspection as DA + SMRT Survey Additional Services:- ourtesy Car/Tpt Allowance tpair Co-ordination ast Repair Inspection V/Collect Excess Coordinat 1): TP (Nan INC) against IN ac Mobile	INC (\$80) \$40/\$45 \$120 rvey) \$30 [10 Jan 2005) \$75 \$160 \$55 \$10 \$55	A BIII	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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	20/12/2018 15:53
Date Of Accident	19/12/2018 03:10
Exact Location Of Accident	WOODLANDS CUSTOM
Country/State of Loss	SINGAPORE
A SECURITION OF THE SECURITION	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKU7546E
Insured/Policyholder	
Name Of Registered Owner	TAN CHUAN HOCK
NRIC No	S8015812B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92302438
Alternative Phone No	OFFICE-92302438
Vehicle Particulars	
Manufacturer	AUDI
Model	A4 2.0 TFSI QU S-TRONIC
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-001249
Cover Note Number	
Driver	
Name of Driver	TAN CHUAN HOCK
NRIC No	S8015812B
Date Of Birth	30/05/1980
Occupation	INDOOR
Date Of Driving Pass	30/06/2006
Driving Experience	12 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92302438
Fax Number	

OFFICE-92302438

NOEMAIL

BLK 180C RIVERVALE CRESCENT Address

#17-377 543180

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

Postcode

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident? YES

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 5

Number of Passengers (Including Driver)

Passenger 1

NAME: : TING WEI XIANG, SHAUN

GENDER: : MALE

Passenger 2

NAME: : YEO KAI JIE

GENDER: : MALE

Passenger 3

NAME: : DAVE CHUA JUN KIAT

GENDER: : MALE

Passenger 4

NAME: : OUYANG, XINGYUE

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

REFER TO STATEMENT.

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

SJM6808K

Vehicle Make/Model/Colour

SUBARU

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

ABDUL SHYAM S/O ABDUL AZIZ

NRIC/Passport Number

S7004415C

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

TAN CHUAN HOCK

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SKU7546E

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 2

Name

TING WEI XIANG, SHAUN

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SKU7546E

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 3

Name

YEO KAI JIE

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SKU7546E

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 4

Name

DAVE CHUA JUN KIAT

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SKU7546E

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

DETAILS OF INJURED PERSON 5

Name

OUYANG, XINGYUE

Page 3 of 15

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

BODY

SKU7546E

YES

NO

SKETCH PLAN

MPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Pollcyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wiful misrapresentation or withholding of material
 facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this form by insurance companies is not an admission of policy liability on the dark of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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 aforessio.
- 8. Consent under the Personal Data Protection Act (PDPA)

t 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 Monstery Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - 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 low 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
- (a) 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 lawyany/nw firms), which may be sked 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 daims.
- (a) the information so-collected under (d) above may be shared / disclosed:
 - to all insurers end/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.

Policyhoteer's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Vehicle A: SKU7546E Vehicle 3:50MG808K

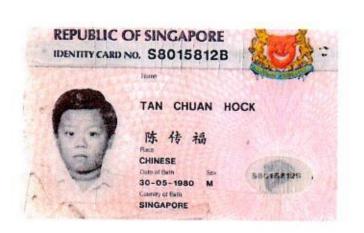
CETCH PLAN	
	HAHHHHHI
4 1 (A)	
dition building at	
	
- A	Adidatitkiitiitii
	┩
	++-++-+++++++++++++++++++++++++++++++
┝┯┾┼┩┯┊┈┈╽┈╶┆╟┼┈╢╢┈┾┾┼┾┼┼┼	
SCRIBE CIRCUMSTANCES OF THE ACCIDENT	
0 16 /218 22 18	Lindle I Code
On 19/12/18, 03.18cm at	Wouldand Customs
Singapore Vehicle A Stationary	
singapore, denice is significant	
The state of the s	
After that vehicle A feel	an impack from the
back of the car. Vehicle A we	
he rear side was damage by	vehicle B.
A STATE OF THE STA	Control of the contro
THE STANDARD	The second secon
	The same of the sa
	The state of the s
FCIAPATION	
DECLARATION We declarg the foregoing particulars are true in every respect.	

Date & Time:

(if driver is not the policyholder) Date & Time:

Name: NRIC/FIN No.:

Date of Accident	: 19/12/18 Accident Time: 03.08 am (24-HR-Format)		
Accident Place	: Woodland Customs Singapore		
Vehicle Reg. No. (Car Plate No.)	:SKU7546E		
Vehicle Make/Model	: AUDI A4 2.0 TESI QU S-TROIVIC		
Insurance Company	: EQ Policy No		
Owner or Company Name /IC No.	TAN CHUAN HOCK		
Owner or Company Contact No.	: 92302438 Owner's Hp Company Tel		
DRIVER'S Name / IC No.	TAN CHUAN HOCK		
DRIVER'S Date Of Birth	: 30 - 05 - 1980 DRIVER'S License Pass Date 30 Jun 200		
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Owner		
DRIVER'S Address	: APT BLK 180C RIVERVALE CRESCENT # 17-377,		
DRIVER'S Contact No./ Alt No.	:1) 92302438 2)		
DRIVER'S Occupation	(INDOOR) OUTDOOR (e.g. working inside or outside office)		
Email Address	: Weiguan 0312@gmail.com		
Weather & Road Surface	:CLEAR & DRY RAINING & WET \ AFTER RAIN & WET		
Reporting Type	: Reporting Only Claim Other Party Claim Own Insurance		
Number of Passengers (Including D	river): 05		
Was there any video Captured by co Exact purpose for which vehicle wa	ar camera: YES \NO as being used at the time of accident Private use \ Work purpose		
Other	Party Driver's Particular (if any)		
Vehicle Reg. No: SJM6808	Vehicle Reg. No:		
Vehicle Make\Model:_SUBARU	Vehicle Make\Model:		
Name Driver: ABDUL SHYAM S	Name Driver:		
IC No. Driver: \$700 4415C	IC No. Driver:		
Driver's Contact & Add:	Driver's Contact & Add:		



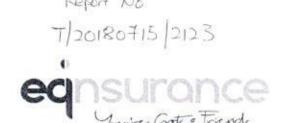






EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg.no; 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION(REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

PRIVATE CAR

Comprehensive Classic

Certificate No.: DMPPHQ18-001249

Classic Plan - EQ Authorised Workshop Only

Form: MX2 Excess:

1. Index Mark and Registration Number of Vehicles

Insured&Named Driver Unnamed Driver S\$600.00(Section 1 - Own Damage) S\$1,100.00(Section 1 - Own Damage)

YEIDR

Additional S\$3,000.00

WindScreen

S\$100.00

2. Name of Policyholder

Tan Chuan Hock

SKU7546E

3. Effective Date of the Commencement of Insurance for the purpose of the Act 07/03/2018

4. Date of Expiry of Insurance

06/03/2019

5. Person 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 regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

(a) use for hire or reward

(b) use for racing,pace-making,reliability trials 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 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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase: Teck Wei Credit Pte Ltd

A000319/DASSURANCE Date of Issue: 25/02/2018 01:39

Authorised Signatory EQ Insurance Company Limited

Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

