

## **Z-ONE AUTOMOTIVE PTE LTD**

1 Kaki Bukit Ave 6, Blk D #01-85/87, Autobay@Kaki Bukit Singapore417883

Tel: 62502115/66342112 Fax: 66342122

Email: service@z-one.com.sg; enquiry@z-one.com.sg

AUTOMOTIVE O PERFORMANCE Company Registration No. 201118055N

Our Ref

: SGY8654X

Your Ref

: S9M018X1MC/RA

05th April 2019

BY EMAIL & POST WITHOUT PREJUDICE

AXA Insurance Pte Ltd 8 Shenton Way #24-01 Singapore 068811

Attention: Shailendra - Motor Claims Dept.

Dear Shailendra,

CLAIMANT: LOH BENG KEONG

ACCIDENT INVOLVING SGY8654X & SFZ1994S AT IMM LEVEL 1 CARPARK ON 28/12/2018 AT 1025HRS

We refer to the above matter.

As the quantum was agreed between your surveyor and our Ms Yvonne, we are submitting our claims as follows:

1.	Cost of Repair (7% GST)	\$ 256.80
2.		\$ 100.00
2	LTA & GIA search fee	\$ 51 45

\$ 408.25

Total:

==========

A copy each of the following supporting documents is enclosed:

- (1) GIA Report
- (2) Final Repair Bill
- (3) LTA search
- (4) GIA Receipt
- (5) Letter of Authority
- (6) Certificate of Insurance
- (7) Vehicle Registration Card

Yours faithfully

Z-one Automotive Pte Ltd

Reg. No.

Ecls

MVA118166704-04 I VAC - Bust Batok ENTRY DATE & TIME: 26/12/2018 13:05 SUBMITTED BY: LYNDA NG AH HANG

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding of material facts may allow in 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 S 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 be

	ACCIDENT STATEMENT	
Date Of Report	28/12/2018 13:05	
Date Of Accident	28/12/2018 10:25	
Exact Location Of Accident	IMM LEVEL 1 C/PARK	
Country/State of Loss	SINGAPORE	

Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	NAME OF TAXABLE PARTY.
Vehicle Registration Number	SGY8654X	
Insured/Policyholder		
Name Of Registered Owner	LOH BENG KEONG	
NRIC No	S7718673E	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-96610104	
Alternative Phone No	OFFICE-96610104	
Vehicle Particulars		
Manufacturer	DAIHATSU	

Manufacturer	DAIHATSU
Model	MATERIA
Exact Purnose for which vehicle was being used	

time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO

EMail Address

If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	S29033775SMF

NOEMAIL

	JENOUSI I SOME
Marian Review Brown Co.	
Cover Note Number	
The state of the s	

Driver	
Name of Driver	LOH BENG KEONG
NRIC No	S7718673E
Date Of Birth	29/06/1977
Occupation	INDOOR
Date Of Driving Pass	25/06/2003
Driving Experience	15 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96610104
Fax Number	
Contact Number	OFFICE-96610104

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 Clain 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

Was any body injured in the Acodent?

Was any arrared conveyed to hospital by

Was any other material or property damaged?

I have been approached by unknown person(a) soluting offering accident claims assistance.

Number of Passengers (including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes Please state which Police Station

Was notice of intended Prosecution given?

If Yes against whom?

#### Circumstances of Accident

PLS REFER ATTACHED ACCIDENT REPORT FROM THE DRIVER

#### Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera? NO.

YES

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make Vode/Colour

Details Of Properties Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TOYOTA MOS

PRIVATE CAR

#### Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

- \$ Please report correctly the datast of the account to speed up the cizers process
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver
- 1. Information provided must be as truthful and accurate as possible. Any wiful moreumentation or withhooling of material
- 4. The laburated acceptance of this Form by insurance companies is not an admission of believ has bey on the part of the most ence
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insures of the Grafilleonia Management Centre established by the General Insurance. Accordance of singular of CIAs for unchiving and that copies of this report will for a fee be made evaluable upon appropriation by
- 2. By the language of this report so the insurers, you harroly consent to the archiving of this report at the centre and baloopies of
- R. Consent wider the Personal Data Protection Act (POPA)
  - Tursdentstand, acknowledge, agreer and consent than
  - (a) My mourer my addishop and the General insurance Association of Sensatore (1684.1) may/are permitted to collect, use by these my with the middle the special distance Association of the spaces. GAA I may/are permitted to collect use conclusion and the special distance and the special dist Monetary Authority of languages and any ellowest government agency/actionally (such as the policy), for the authorities
    - are come frame organized desiring with my claims including the sattlement of the cours wild any decembers (frame) globing to the claims.
    - in investigating the accident and/or my claims,
    - (iii) carrying out end/or dealing with my instructions or responding to any exquiries by mill.
    - (iv) administrary my mains including the making of correspondence, statements, involves, reports or notices in me, which could have account of certain personal date about me to bring about delivery of the same as well as on the
    - (a) company with epolicative law is activity to the processing, hundring entities awaking with my castral collectively the
  - (b) of manyons, who have maked semilers owned in the scribent and the incurers' lawyers/law form, may/are permitted to callegt, use, dictime and, or process my Personal information for one or more of the above Purposes; and
- my Personal information may/can be discussed by sety of the insurers and/or sit A to their third party service provides or agent simulating their desymptone formula which may be sted outside of Singapore, for one or encir of the above Purposes
- (d) the Personal inflammation will add be collected and used to comple claims history for the purpose of fraud detection must grant and exhapt more in present and of future claims.
- (e) the abstraction of collected andor (d) above they be shared / docleted
  - to all registers another any other twen parties that applic in dealesting, investigating, controlling or managing based, registers to like enforcement and government agreeses as reasonable required for the purposes stated, or
  - (iii) for camphing with requestments order any regulations, laws or court orders.

1422

Park orders Signature
Does & Time: 12.7/11(3 1 1 1/4)Ph. (It must a not the policyholdes)

DAC BUIGT BATOK (VAC)

Rejording Control Personnel's Signature NECTRING

SKETCH PLAN				
Carport	543,445	Carpork		
	SEVERNX			
DESCRIBE CIRCUI	MSTANCES OF THE ACC	nrae .		

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**DECLARATION**UWe declare the faregoing particulars are true in every respect.

Folkshoker's Signature
Date & Time 35 (54 (4) 1-47 (34)

Diver's Signature
(If driver is not the policyholder)

Date & Time

IDAC BURIT RATOR IVAC

Reporting Centre Personnel's Signature Name NBC/TIN No.



Police Station Of Origin Hong Kah North NPP 370 Bukit Batok Street 31 #01-201 SINGAPORE 650370 Tel No. 1800-5679999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 28/12/2018 22:07

Vide Report No.

Station Diary No. 86

1 of 3 Report No. 1/20181228/2167

Informa	nt's Partic	ulars		
	Informant NG KEON		Address APT BLK 805C KEAT HONG 683805	CLOSE #14-78 SINGAPORE
ID Type NRIC NO	/ ID No D / S77186	73E	Contact No Home/Office	Mobile 96610104
National SINGAP	ty ORE CITIZ	EN	Email	
Sex Male	Age 41	Date of Birth 29/06/1977	Type of Informant Driver	
Race Chinese			Language Institution / School Na English	
Occupation. SWIMMING COACH		н	Driving Licence Information Class 3	Date of Expiry

Type of Accident	Non-Injury	Drink Drive No	Date/Time of Accident 28/12/2018 10:29	Type of Location Car Park
	ST STREET 21		1	
Weather Clear		Road Surface Dry		Road Speed Limit
Traffic Flow One Way		Traffic Control Not Controlled		Traffic Volume Moderate
Type of Collis Moving Vehic	ion le Against - Parked V	chicle		Anyone conveyed by ambulance:

Details of V	ehicle Invo	lved		NAME OF TAXABLE PARTY.	Michigan Land	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge:
SFZ1994S	Car				Condition	0
SGY8654X	Car				Slightly	0
0500000000					Damaged	



Police Station Of Origin. Hong Kah North NPP 370 Bukit Batok Street 31 #01-201 SINGAPORE 650370 Tel No. 1800-5679999



2 of 3

Report No. 1/20181228/2167

CONTINUATION OF REPORT

#### Brief Details.

On the 28/12/2018 at about 1026hrs, I was at the ground floor carpark of IMM building. I had made a left turn and my vehicle was stationary at the side of the carpark as there was another vehicle, SFZ1994S, V1, in front of me that was reversing

V1 was reversing backwards from the drop of point, making a S shaped reverse. However, I realised that V1 was approaching to close to my vehicle. I then press my vehicle horn to warn V1 about this, however it was too late as the right rear bumper of V1 had bumped into the front of my vehicle.

I went down to make a check to realise that my number plate has been damaged due to the impact. I ask V1 if he was aware that his vehicle had knocked into my vehicle, however he denied as there was no damage. I informed that him that I have an in car camera, however he insists that he did not knock into my vehicle, and ask for V1's driver particulars, however he refused to provide with me. I then informed him that I will be claiming insurance for this matter, he then challenge me to do so and did not provide his particulars. I wanted to took a picture of the damages of the accident however the driver of V1 then started shifting V1. I was standing behind V1's boot and started knocking on his boot, however he did not stopped. I then move away and starting knocking on his window, however he carry on reversing. He then alighted from his vehicle and did not wish to provide his particulars. I then shifted my vehicle to prevent me from obstructing the traffic. I am lodging his report as requested by insurance company. I wish to state that I have an in car camera in my car that recording this incident.



Police Station Of Origin Hong Kah North NPP 370 Bukit Batok Street 31 #01-201 SINGAPORE 650370 Tel No. 1800-5679999



Report No. T/20181228/2167

CONTINUATION OF REPORT

#### Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT. Please attach a copy of your vehicle's insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: Staff Sgt LEE JUN XIANG

Signature Of Interpreter Not applicable

Officer In Charge Of Case. TP/GIA/ Staff Sgt WONG SIEU LUI Contact No 65476151

Authentication Stamp

Signature Of Informant

美相么

Date/Time 28/12/2018 22 07

Classification Of Case

sugapore Police Faces



# Z-ONE AUTOMOTIVE PTE LTD

1 Kaki Bukit Ave 6, Blk D #01-85/87, Autobay@Kaki Bukit Singapore417883

Tel: 62502115/66342112 Fax: 66342122

Email: service@z-one.com.sg; enquiry@z-one.com.sg

AUTOMOTIVE O PERFORMANCE Company Registration No. 201118055N

Loh Beng Keong Blk805C Keat Hong Close #14-78 Singapore 683805

Contact: 96610104

#### TAX INVOICE

Date: 05/04/2019

Date in : 18/03/2019

Vehicle Num. : SGY8654X

Make/Model: DAIHATSU MATERIA 1.5 MANUAL ABS AIRBAG 2WD-2007

Chassis/Eng#: JDAM402S001004490/1817495

Accident Date: 28/12/2018

Claim No : C101890

Reference:

Policy No.: S 29033775 SMF (09/10/2019)

PART BY PART REPAIR
AS PER SURVEYOR REPORT
DATED 28/03/2019
BY LKK Auto Consultants Pte Ltd

Amount \$

240.00

E. & O.E.

Sub \$ :

240.00

Add GST (7%)\$:

16.80

Total Amount \$ :

256.80

TO ONO THE SOUTH ON THE SOUTH O

Z-ONE AUTOMOTIVE PTE LTD



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

03 Jan 2019 / 12:54:18

Receipt Date/Time:

03 Jan 2019 / 12:53:45

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190103-002053

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount	Amount After GST
Result of Insurance Enquiry - SFZ1994S As at 28 Dec 2018/10:25:00 Insurance Co: AXA INSURANCE PTE LTD  1 Insurance Enquiry - SFZ1994S		031 (3\$)	(S\$)	(S\$)
Enquiry Fee 20190103125232105558		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	xxxxxxxxxxx6479	Credit Card /MasterC		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

#### THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



#### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

#### TAX INVOICE

Our Ref No:

GR-19-017194

Date of Request:

30/01/2019

Your Ref No:

AJ.TK.Z (SGY8654X)

CROSSBORDERS LLC 133 New Bridge Road #23-03/04/05 Chinatown Point Singapore 059413

Dear Sir/Madam,

Date of Accident:

28/12/2018

Vehicle No:

SGY8654X

Place of Accident:

IMM LEVEL 1 C/PARK

Involving Vehicle No: SFZ1994S

With reference to your application for the accident report, we have attached the following accident

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)	
SFZ1994S	IMM LEVEL 1 C/PARK			13.0	
GST Amount	0.92				
Total Amount Due (GST Inclusive)				14.00	

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

[X] GIRO [] Cash [] Cheque





#### RECORDS MANAGEMENT CENTRE

### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

## TAX INVOICE

Our Ref No:

GR-19-000293

Date of Request:

02/01/2019

Your Ref No:

AJ.TK.Z (SGY8654X)

CROSSBORDERS LLC 133 New Bridge Road #23-03/04/05 Chinatown Point Singapore 059413

Dear Sir/Madam.

#### Your Search Criteria:

Date of Accident:

28/12/2018

Place of Accident:

IMM LEVEL 1 CARPARK

Client Vehicle No:

SGY8654X

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	AMOUNT (53)
GST Amount	14.02
Total Amount Due (GST Inclusive)	0.98
rotal ratioant Data (COT microsive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



#### RECORDS MANAGEMENT CENTRE

#### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

#### SEARCH RESULTS

Our Ref No:

GR-19-000293

Date of Request:

02/01/2019

Your Ref No:

AJ.TK.Z (SGY8654X)

CROSSBORDERS LLC 133 New Bridge Road #23-03/04/05 Chinatown Point Singapore 059413

Dear Sir/Madam

#### Your Search Criteria:

Date of Accident:

28/12/2018

Place of Accident:

IMM LEVEL 1 CARPARK

Client Vehicle No:

SGY8654X

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria: REQ. VEHICLE ACCIDENT LOCATION ACCIDENT DATE SFZ1994S No match found.

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



#### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

#### TAX INVOICE

Our Ref No:

GR-19-017140

Date of Request:

30/01/2019

Your Ref No:

AJ.TK.Z (SGY8654X)

CROSSBORDERS LLC 133 New Bridge Road #23-03/04/05 Chinatown Point Singapore 059413

Dear Sir/Madam,

#### Your Search Criteria:

Date of Accident:

28/12/2018

Place of Accident:

IMM LEVEL 1 CARPARK

Client Vehicle No:

SGY8654X

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

[X] GIRO [] Cash [] Cheque



#### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

#### SEARCH RESULTS

Our Ref No:

GR-19-017140

Date of Request:

30/01/2019

Your Ref No:

AJ.TK.Z (SGY8654X)

CROSSBORDERS LLC 133 New Bridge Road #23-03/04/05 Chinatown Point Singapore 059413

Dear Sir/Madam.

#### Your Search Criteria:

Date of Accident:

28/12/2018

Place of Accident:

IMM LEVEL 1 CARPARK

Client Vehicle No:

SGY8654X

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

ACCIDENT LOCATION	ACCIDENT DATE
IMM LEVEL 1 CARPARK	28/12/2018 13:30

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

## LETTER OF AUTHORITY

RE: ACCIDENT INVOLVING VEHICLE NOS	SGY 865 4X			
		&	SFI 1994 8	ALONG
Imm Level 1 Carpark	1			
ON 28 12 2018 at 1025 hrs				

- 1. I/ We, hereby appoint Z-ONE AUTOMOTIVE PTE LTD to be my agent and I/We authorize my said agent to give you all instructions pertaining to the conduct of my claim including instructions to commence legal proceedings in court in my name against the third party driver/or his employers, if applicable.
- 2. \*\* My said agent also has my authority to decide on my behalf whether to accept any offer of settlement from the third party and/or his insurers.
- 3. I understand and accept that until I revoke my said agent's authority in writing to you, I am bound by all instructions given by my said agent to you
- 4. \*\* Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/We undertake to pay you and my/our Solicitor the cost of repair settled and related expenses and disbursement incurred.
- 5. My vehicle is repaired on my own will without any inducement, threat or promise.

Signature

(Company's stamp if applicable)

Name: Hoh Beng Keong

NRIC No: 37718673 E Address BIK 805C Keat Hong Close

#14-78 Singapore 683805



MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## 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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1 Individual Ownership

ULTIMATE CAR PROTECTOR-PREMIER

Comprehensive

0 400 4 44

Certificate No. S 29033775 SMF

Index Mark and Registration Number of Vehicle

Excess: SGD500

SGY8654X

 Name of Policyholder Loh Beng Keong

 Effective Date of the Commencement of Insurance for the purposes of the Act 10/10/2018

 Date of Expiry of Insurance 09/10/2019

5. Persons or Classes of Persons entitled to drive\*

Loh Beng Keong

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or 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 only for social domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover use for hire or reward 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.

 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a (Third-Party Risks and Compensation) Act (Cap. 189).

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer

## > Back to OneMotoring

Liquite mansier ree	Enquire	Transfer Fee
---------------------	---------	--------------

Vehicle Details	
Vehicle No.:	SGY8654X
Vehicle Type :	P10 - Passenger Motor Car
Vehicle Attachment 1:	No Attachment
Vehicle Scheme:	Normal
Vehicle Make:	DAIHATSU
Vehicle Model:	MATERIA 1.5 MANUAL ABS AIRBAG 2WD
Chassis No.:	JDAM402S001004490
Propellant:	Petrol
Engine No.:	1817495
Engine Capacity:	1495 cc
Maximum Power Output :	76.0 kW (101 bhp)
Maximum Laden Weight :	1600 kg
Unladen Weight:	1035 kg
Year Of Manufacture :	2007
Original Registration Date:	10 Oct 2007
Lifespan Expiry Date :	10 001 2007
COE Category:	A - Car (1600cc & below)
PQP Paid:	\$42.564.00
COE Expiry Date:	09 Oct 2027
Road Tax Expiry Date :	
Inspection Due Date :	09 Apr 2019
Intended Transfer Date :	09 Oct 2019
CO2 Emission :	19 Mar 2019
CO Emission :	
HC Emission :	*
NOx Emission :	
PM Emission :	
renewed after 09 Apr 2019, late	Apr 2019. You may renew the road tax from 10 Jan 2019 with all pre-requisite(s) fulfilled. If the road tax is renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.
Road tax, including Over Paymen Amount Payable (From 10 Ap	it (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred

	Amount Before GST	GST Amount	Amount After GST
	(5\$)	(5\$)	(5\$)
Transfer Fee :	25.00		25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	410.00	2	410.00
Total Amount Payable : Amount Payable (From 10 Apr 201)	7 to 09 Apr 2020)		435.00
	Amount Before GST	GST Amount	Amount After GST
22-07-07-08-08-08-08-08-08-08-08-08-08-08-08-08-	(5\$)	(5\$)	(5\$)
Transfer Fee :	25.00		25.00
Sub Total:			25.00
Nett Road Tax Amount (After Offsetting Over Payment):	853.00	,	853.00
Total Amount Payable:			878.00
You may print this page for refe	rence.		

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