Date In 18/01/19	e Services (mentalment		CALL PHONE
10/0///	Job description Date &Time Completed	Done	by.
Reino NA/AIGIQUO 1200/13	SAS e-filing		
Veh No Smo 7933L	E-mail (within 8hrs, AIC 2hrs)		
DOA 17/01/19 2100	i-Motor Claim Form		
on Ava	i-Motor W/O (Within: OD 2hrs, TP 4hrs)	*****	EFAIT COL
OD (TP)' Peporting Only	i-Photo Uploaded		1700
TP Insurer	Assessment/Survey Report	anne on each	
1 F Insurer	Ass't Report by Fax / Hand to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (KINHUA W/MUP Tel: Fax:		
TP Particulars: Veh No:	FBH7357E INC()/Non-INC()		eta ke-ili
Owner / Driver: (Tel:)	
Policy No: () Per	riod: () Cover Type: ()	
Confirmed by : (Date: Time:)	
THE PROPERTY OF THE PARTY OF TH	Note-Est Status (WO): N: 0-20%; P: 21-79%. F: 80-100%	6]	
Year of Registration: () V	Warranty: YES ()/NO ()		
Excess: (\$) Loading: \$1,0	00 () / \$2,000 ()		
QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > \$3	()		
Date/Time Actions		19-1-1-1-1	
	9 Invoice Preparation Checklist	Anit (S)	
Date/Time Actions NAMOO65	1) AR : Accident Reporting (\$30);	CONTRACTOR OF	
Date/Time Actions WAROO65 Claimant's Particulars:-	1) AR : Accident Reporting (\$30); 2) DA : Damage Assessment (\$100); INC (\$80) 3) TF : Towing Fee \$40/\$45	CONTRACTOR OF	
Date/Time Actions WARQUES Claimant's Particulars:-	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) i*T : Follow-Through Survey (Resurvey) \$30	CONTRACTOR OF	
Date/Time Actions NA 190065 Claimant's Particulars:- Oriver/Owner:	1) AR : Accident Reporting (\$30); 2) DA : Damage Assessment (\$100); INC (\$80) 3) TF : Towing Fee \$40/\$45 4) FT : Follow-Through Survey \$120	CONTRACTOR OF	
Date/Time Actions NA 190065 Claimant's Particulars:- priver/Owner: ontact No:	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) i'T : 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	CONTRACTOR OF	
Date/Time Actions NA 190065 Claimant's Particulars:- Priver/Owner: Contact No: Camaged Portion:	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) i'T : Follow-Through Survey (Resurvey) \$30 For claiming against INC Only (wef 10 Jan 2005) 6) TR : Re-inspection \$75 7) N1 : Idae DA + SMRT Survey \$160 8) NTUC Additional Services:- OD* *N5: Courtesy Car / Tpt Allowance \$5	let Bill	
Date/Time Actions NAMOSS Claimant's Particulars:- Oriver/Owner: Contact No: Damaged Portion: OC Checked by (Engr-In-Charge):	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) iT : 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: OD: *N5: Courtesy Car / Tpt Allowance \$5 *N6: Repair Co-ordination \$10 *N7: Fost Repair Inspection \$25	lst Bill	
Date/Time Actions NA 190065 Claimant's Particulars:- Oriver/Owner: Contact No: Damaged Portion: OC Checked by (Engr-In-Charge):	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) iT : Follow-Through Survey (Resurvey) \$30 For claiming against INC Only (wef 10 Jan 2005) 6) TR : Re-inspection \$75 7) N1 : Idae DA + SMRT Survey \$160 8) NTUC Additional Services OD.* *N5: Courtesy Car / Tpt Allowance \$5 *N6: Repair Co-ordination \$10 *N7: Fost Repair Inspection \$25 *N8: DV / Collect Excess Coordination \$5	lst Bill	Amt () Add B
Date/Time Actions NAMOCOES Claimant's Particulars:- Priver/Owner: Contact No: amaged Portion: C. Checked by (Engr-In-Charge):	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) iT : Follow-Through Survey (Resurvey) \$30 For claiming against INC Only (wef 10 Jan 2005) 6) TR : Re-inspection \$75 7) N1 : Idae 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	lst Bill	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 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.
- 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	18/01/2019 17:31
Date Of Accident	17/01/2019 21:00
Exact Location Of Accident	PIE TWDS AIRPORT EXIT 15
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMD7933L
Insured/Policyholder	
Name Of Registered Owner	BIS MOTORING PTE LTD
Co Reg No	201735055D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-99999999
Vehicle Particulars	
Manufacturer	KIA
Model	CAREN
Exact Purpose for which vehicle was being used at time of accident	WORK
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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994322
Cover Note Number	
Driver	
Name of Driver	SEE TOH FOON SENG
NRIC No	S6902907H
Date Of Birth	10/01/1969
Occupation	OUTDOOR
Date Of Driving Pass	19/03/1990
Driving Experience	28 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83287661
Fax Number	
Contact Number	

NOEMAIL

Address BLK 708 WOODLANDS DRIVE 70

#09-25

Postcode 730708

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

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 TO REAR

Weather Conditions AFTER RAIN

Road Surface WET

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

YES

ambulance?

LO

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

2

Number of Passengers (Including Driver)

NAME:

UNKNOWN

Passenger 1

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BUKIT PANJANG NORTH NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 27 MARSILING DRIVE , POSTCODE: 730027 , COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 1800-3689999 - FAX NO: 63682383

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190118/2094

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

FRONT ONLY

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBH7251E

Vehicle Make/Model/Colour

Details Of Properties

MOTORCYCLE

Vehicle Category Name of Driver

NRIC/Passport Number

Page 2 of 20

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name ANDIQ RAYYAN AIZAT BIN AZMI

Approximate Age

Injuries Sustain SLIGHT

Injured person in which vehicle? FBH7251E

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

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.
- 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.
- 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.
- 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 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:
 - 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.:

Veh A-SMD 7933L

Veh B-FEH 7251E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated - date and time, I well H was travelling
along PIE toward Aliport, At I was about to ent of
PLE ext 15 toward upper Scranguen Road, the traffic was
slow, the front vehicle slowed down, I followed sunt
Suddenly veh B hit outo my car back right rear. 1
got off the car and realised veh B which was a
motorcyle stidded while thing to stop. As the pillion
e) the motorcycle was injured, I called traffic
public and ambiliques which arrived mindres later.

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.:

GIARRYC Skyrch Plant arm _ US





1 of 3

Report No. T/20190118/2094

Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027

Tel No: 1800-3689999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/01/2019 13:40			Vide Report No.: E/20190117/0167	Station Diary No.:	
Informa	nt's Partic	ulars		THE RESIDENCE OF THE PARTY OF THE PARTY.	
Name of Informant: SEE TOH FOON SENG			Address: APT BLK 708 WOODLANDS DRIVE 70 #09-25 SINGAPORE 730708		
ID Type / ID No.: NRIC NO / S6902907H			Contact No.: Home/Office: 83287661 Mobile:		
Nationality: SINGAPORE CITIZEN		ΈN	Email:		
Sex: Age: Date of Birth: Male 50 10/01/1969		Date of Birth: 10/01/1969	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Grab Driver			Driving Licence Information Class:	: Date of Expiry:	

Type of Accident:	nt: Conveyed By Ambulance Drive: Accident:		The state of the s	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND E Near Toa Payo	EXPRESSWAY	110	11/10/1/2013 21:00	
Weather: Drizzling	Ro We	ad Surface:		Road Speed Limit:
Traffic Flow: Two Way	I Karan	affic Control: t Controlled		Traffic Volume: Heavy
Type of Collision Between Movir	on: ng Vehicles - Head To Rear	65		Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBH7251E	Motorcycle					1
SMD7933L	Car				Slightly Damaged	1

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





12019011012094

Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027

Tel No: 1800-3689999

CONTINUATION OF REPORT

2 of 3

Report No. T/20190118/2094

Rider		- 92		- C.			
Name	ANDIQ RAYYAN AIZAT BIN AZMI			ID No		S9019618I	
Related Vehicle	FBH7251E (Motorcycle)			Contact No.		87180560	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL		
No. of Days gran	ted Medical Leave	NIL		Degree of Injury Slight			
Driver			at the same of the		201 A 100 A		
Name	SEE TOH FOON SE	NG	ALKAN AND AND AND AND AND AND AND AND AND A	ID No		S6902907H	
Related Vehicle	SMD7933L (Car)			Conta	ct No.	83287661	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date I			harge	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL		

Brief Details.

On the 17/01/2018 at about 2100hrs, I was travelling along PIE heading towards Changi Airport near the Toa Payoh Exit 15. I was on lane 4 and the traffic was slow moving when suddenly the car infront of me had slowed down to a stop in which I had also then slowed down. Suddenly a bike from behind had collided into my right rear in which I had then got out to make a check on the rider and his pillion in which they informed that the pillion was injured and I had called for Traffic Police and ambulance. Traffic police arrived and informed us to shift to the side of the road shoulder to prevent jamming of the road and ambulance had later conveyed the pillion to the hospital. I do have in-car camera but it is only facing the front. I was advised to lodge a traffic accident report by the Traffic Police after they had informed us that we could leave.





Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027 Tel No: 1800-3689999

3 of 3 Report No. T/20190118/2094

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: L / Sgt 2 CHOONG JIA LE, DION	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 18/01/2019 13:40
Officer In Charge Of Case: TP / GIT / Staff Sgt SHAIFUL NEEZAM BIN ABDUL	Classification Of Case:
SAMAD Contact No.: 65476180 Authentication Stamp	

ACCIDENT STATEMENT

	ACCIDENT DATE: (17 / 01 / 2019) (DD/MM/YYYY), TIME: 21 :00) (HH:MM
8.75	LOCATION: PIE toude AME ANIPOH EXAT IS
*	LOCATION: 1-1+ TWO FEET FILIPUIT LET 13
	1. DETAILS OF VEHICLE
	SIVEHICLE NUMBER: SMD 79331
	DINSURANCE COMPANY: ALG
	c)POLICY NUMBER: 99999 4322
	DIPOLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE &THEFT)
	e)MAKE & MODEL: YIA CAREA.
	F)TYPE: (SALOON / COUPE (MPV) /V AN / LORRY / MOTORCYCLE / OTHERS)
	g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL) MOTORCYCLE)
	h) PURPOSE OF USING AT ACCIDENT TIME: WORK
	I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YESONO)
	IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
	2. INSURED / POLICY HOLDER
	A)NAME: BLS MUTING Pte Lid (MALE / FEMALE)
	b)NRIC/FIN/PASSPORT: 2017 350550 CONTACT:
	c)ADDRESS:
(F) (4)	
or A	* CONTINUE TO 3.4 IF DRIVER ALSO POLICY HOLDER
Ano of bassa	193 DRIVER
Concluding di	WALF / FEMALE)
(02)	CONTACT: X324 700
	CIADDRESS: BIK 708 woelland drive 70 #09-25
11/1/2	
UNKNOWN (F)	"d) DATE OF BIRTH: [10 0 1 1969)(DD/MM/YYYY)
	SOCCUPATION: (INDOOR / OUTDOOR)
	f) YEARS OF DRIVING EXPRERIENCE: 19
	4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
	IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: PRIVATE HIRE
	5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS_ ATT ROM b) ROAD SURFACE: (DRY / WET) OTHERS_
	6. WAS ANYBODY INJURED (YES / NO)
	7. a) REPORTED TO POLICE (YES / NO)
	IF YES, PLEASE STATE WHICH POLICE STATION: MODITING Police Post
	8 THIRD BARTY VEHICLE
this of passengi	of VEHICLE NUMBER: FBH 7251E MODEL:
(Lad A: 1.	b) DRIVER'S NAME: ANDIO RAYYAN ALDAT BIN AZMI
And arm	
(02)	9. THIRD PARTY VEHICLE
V . A	
* No of passance	a) VEHICLE NUMBER:MODEL:
(Induding dri	O) DRIVER STYAME.
(f) NRIC/FIN/PASSPORT:CONTACT:
()	
77.23	

xinhnaworkshop@gmail:com



SINGAPORE

10-01-196

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S6902907H

SEE TOH FOON SENG

司徒欢成





10% S6902907H

- 2914098

APT BLK 708 WOODLANDS DRIVE 70 #09-25 SINGAPORE 730708 NRIC No: \$6902907H Date: 15/05/20

15/05/2018

07-11-1996





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)

M.Z.400

COMPREHENSIVE

CERTIFICATE NO. POLICY NO.

COMMERCIAL MOTOR

SMD79331 999994322

(The below excess is subject to GST) POLICY EXCESS

S\$1500.00 (Sect I & Sect II)

WINDSCREEN EXCESS

S\$100.00

SUM INSURED

Market Value

INSURING WITH COE/PARF

SMD7933L

BIS MOTORING PTE LTD

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

1) VEHICLE REGISTRATION NO.

26 December 2018

25 December 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.

Authorised driver must be between age 23 to 65 with at least 2 years driving experience.

Accident repair can be carried out at Munich Auto Care in the condition that all repairs have to be surveyed, appointed by AIG surveyors before proceeding with repair

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) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired

The Policy does not cover: 1) Use for fultion, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

HONG LEONG FINANCE

*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).

Issued in Singapore 19 Dec 2018

500656-000 Cowell Insurance (Agency) Pte. Ltd. & Burn Road #09-09 Trivex Singapore 369977

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL

RENTAL AGREEMENT

(This shall form part of the Rental Documents referred in the terms and conditions)

The	Rental Agreeme	ent is made on	(Day) <u>. 09</u> (M	onth) (Yes	ar)	
Bet	ween					
1.	BIS Motoring address at 20 as "the Owne	g Pte. Ltd. (UEN No Bendemeer Road #0 r") and	o. 201735055D) , a 3-13/14 BS Bendem	company incorpo eer Centre Singar	rated in Singapo pore 339914 (here	re, registered ein referred to
2,	See Tou	FOON SENG BILL 708 WOOD	lands Drive at	(NRIC No. /	UEN No. S690) <u>2907H</u>),
	the person ar whose particu	nd/or company signing lars are recorded in the	the Lease and Ow	n Documents (he	rein referred to a	s "the Hirer")
3.	GIS Motoring address at 60	g Pte. Ltd. (UEN No Jalan Lam Huat #05-1	o. 201803437N), a o 3 Carros Centre 737	company incorpor 869 (herein referre	rated in Singapo ed to as "GIS")	re, registered
(coll	ectively, known a	s "parties")				
Whe	ere as					
1.	BIS Motoring I	Pte. Ltd. is a leasing co	empany incorporated	in Singapore.		
2.	BIS Motoring I details stated i	Pte. Ltd. has engaged n Vehicle Details below	GIS Motoring Pte Ltd v (the "Vehicle).	d to manage the V	ehicle No. SMC	14935L
3.	wotoring Fte.	Pte Ltd is one of the a Ltd. GIS would act on lirer shall contact GIS o	behalf of BIS Motori	ng Pte Ltd to mar	nage all matters r	GIS") by BIS elating to the
4.	The Hirer shall Documents thr	acknowledge and fully oughout the term of the	y understand the Ter e lease period ("Leas	ms and Conditions e Period").	s which form part	of the Rental
5.	All parties acce	ept the terms and cond	itions set out below b	y signing this Ren	ital Agreement.	
It is a	greed between to	ne parties as below :				
A.	Vehicle Deta	ils ("Vehicle")				
Vehic	cle No.	£6	SMO	10221		
Vehic	cle Make / Model		wa carens			
Vehic	ele Colour	8	Red			
В.	Lease Period	1				HE CAN THE SE
Date	of Handover /d	19/18				SONING SO
(Com	mencement of th	e Lease Period)		19/18		0.00
Perio	d of the Lease	3	/	19/18 ear	year(s)	
Option	n to Renew				year(s)	
					,(-)	

1

Hirer's signature: _