

NATIONAL Assessment Centre Services: [wef 1 Jan 05] MHA119027887

Date In: 28/1/19 15:41	Job description	Date & Time Completed	Done by
Ref No: HA/1M319003779/W4	SAS e-filing		
Veh No: X878052	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 27/1/19 - 17:40	i-Motor Claim Form		
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars: Veh No: 1M40748 INC ( ) / Non-INC ( )

Owner / Driver: ( ) Tel: ( )

Policy No: ( ) Period: ( ) Cover Type: ( )

Confirmed by: ( ) Date: ( ) Time: ( )

Insured/Driver Liability: ( ) % [Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: (\$ ) Loading: \$1,000 ( ) / \$2,000 ( )

General Remarks:-

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks: (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: \_\_\_\_\_

Date/Time	Actions

Claimant's Particulars:-	Invoice Preparation Checklist	
	Am't (\$) for Bill	Am't (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);	
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)	
Damaged Portion:	3) TF: Towing Fee \$40/\$45	
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120	
Auditors' Comments:-	5) FT: Follow-Through Survey (Resurvey) \$30	
Date 1:	For claiming against INC Only (wef 10 Jan 2005)	
Date 2/3:	6) TR: Re-inspection \$75	
	7) N1: Idac DA + SMRT Survey \$160	
	8) NTUC Additional Services:-	
	ON*	
	*N5: Courtesy Car / Tpt Allowance \$3	
	*N6: Repair Co-ordination \$10	
	*N7: Post Repair Inspection \$25	
	*N8: DV / Collect Excess Coordination \$3	
	TP (N11): TP (Non INC) against INC \$20	
	9) N12: Idac 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	28/02/2019 15:41
Date Of Accident	27/02/2019 13:40
Exact Location Of Accident	BKE (PIE) AFTER MANDAI RD EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XB7805D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ANG TONG SENG CONSTRUCTION PTE LTD
Co Reg No	201800362N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91052022
Alternative Phone No	OFFICE-91052022

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FV517JD2RDEB
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	18-MJ000899-R00
Cover Note Number	

### Driver

Name of Driver	CHEN XIAODONG
Passport No/FIN	G8254152M
Date Of Birth	18/01/1979
Occupation	OUTDOOR
Date Of Driving Pass	14/01/2013
Driving Experience	6 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90150501
Fax Number	
Contact Number	OFFICE-90150501
EMail Address	NOEMAIL

Address	29 TUAS SOUTH STREET 1
Postcode	638036
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	1M4U7418 (COMMERCIAL VEHICLE)
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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	HOUANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 60 HOUANG AVE 9 , <b>POSTCODE:</b> 538775 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4890999 - <b>FAX NO:</b> 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190228/2039.

#### 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	1M4U7418
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUHAMAD FIRDAUS BIN MISNAN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage  
No. Of Passenger (Including Driver)

1

## SKETCH PLAN

### IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

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

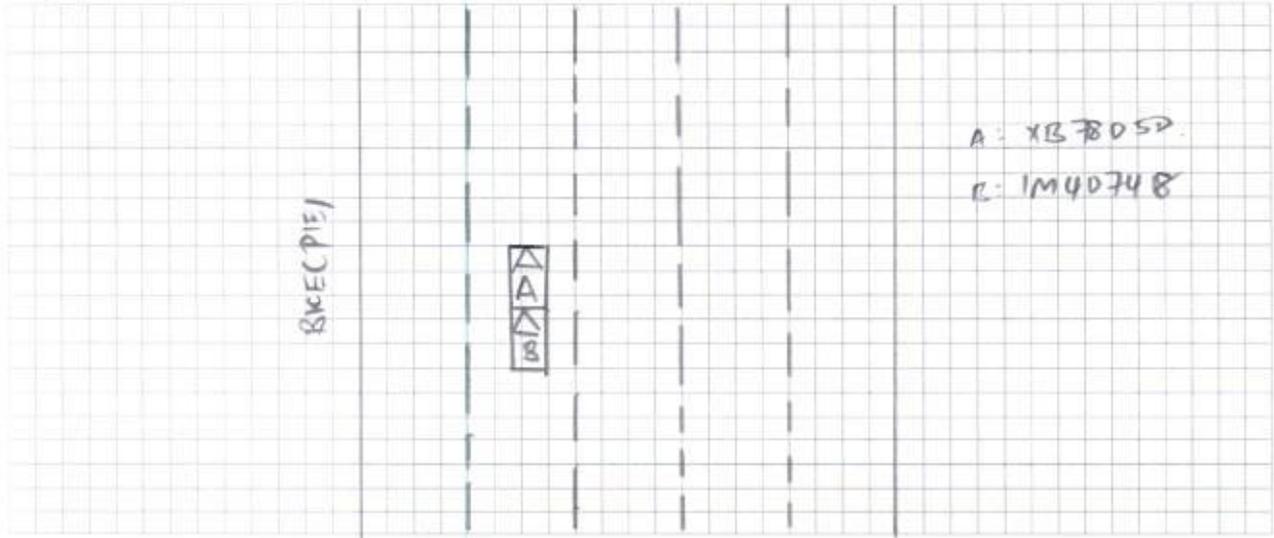


Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

DECLARATION

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



Policyholder's Signature  
Date & Time:

陈小林

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

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

# ACCIDENT STATEMENT

ACCIDENT DATE: ( 22 / 2 / 19 ) (DD/MM/YYYY), TIME: ( 13 : 40 ) (HH:MM)

LOCATION: PKERTIB after Mandar Rd exit.

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: XB780SD  
b) INSURANCE COMPANY: MR  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: \_\_\_\_\_  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: working  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: Ang Tong Sing Con (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 9105202  
c) ADDRESS: \_\_\_\_\_

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

## DRIVER

- a) NAME: chen xiaobang (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: G8254152M CONTACT: 90150501  
c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: ( 18 / 1 / 1979 ) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 14/11/2013

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) \_\_\_\_\_  
b) ROAD SURFACE: (DRY / WET / OTHERS) \_\_\_\_\_

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: 1M40 348 MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: Muhamad Firdaus Bin Mishan  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

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

\*No of passenger  
(including driver)  
( 1 )

\*No of passenger  
(including driver)  
( 1 )

\*No of passenger  
(including driver)  
(    )

email =

fax =

video =



**SINGAPORE  
POLICE FORCE**



T/20190228/2039

1 of 3

Report No. T/20190228/2039

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/02/2019 12:03	Vide Report No.: L/20190227/0079	Station Diary No.: 40
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**Informant's Particulars**

Name of Informant: CHEN XIAODONG		Address: APT BLK 326 UBI AVENUE 1 #12-695 KAMPUNG UBI ESTATE SINGAPORE 400326	
ID Type / ID No.: FIN NO / G8254152M		Contact No.:	Mobile: 90150501
Nationality: CHINESE		Email:	
Sex: Male	Age: 40	Date of Birth: 18/01/1979	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class:	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 27/02/2019 13:40	Type of Location: Straight Road
Location: Along Road 1 BUKIT TIMAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
1M4U7418	Truck				Slightly Damaged	0
XB7805D	Truck				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20190228/2039

Police Station Of Origin.  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

2 of 3  
Report No. T/20190228/2039

**CONTINUATION OF REPORT**

**Brief Details.**

On 27/02/2019 at about 1340hrs, I was driving along BKE. At that point of time, the traffic was congested. As I was driving, one vehicle which was in front of me brake abruptly which causes me to brake as well.

After I managed to brake, I felt an impact on the rear of my vehicle. After checking, the truck which had hit onto me was a Malaysia truck, 1M4U7418.

There was no one injured at that point of time. Due to the accident, the rear of my vehicle was damaged and dented. As for the other truck, the front of me truck was dented.

Police attended to the case and I was advised to lodge a police report.



**SINGAPORE  
POLICE FORCE**



T/20190228/2039

Police Station Of Origin:  
Hougang N.P.C.  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No. 1800-4890999

3 of 3

Report No. T/20190228/2039

**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:  
F /  
Sgt 3 PHUA JIA JUN, MARK

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
28/02/2019 12:03

Officer In Charge Of Case:  
TP / AEIT /  
SSI 2 SITIMARSITA BINTE BOHARI  
Contact No.: 65476218

Classification Of Case:

SN 085

Authentication Stamp  
NP168

Signature

Singapore Police Force

**S PASS**Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employed

ANG TONG BENG BROTHERS ENTERPRISES PTE LTD

Sector: CONSTRUCTION

Name: CHEN XIAODONG  
Occupation: LORRY DRIVERS Pass No.  
D 7214497-

Date of Application

08-08-2017

Date of Issue

29-08-2017

Date of Expiry

29-08-2019



L8267497

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: G8254152M

Name: CHEN XIAODONG

Birth Date: 18 Jan 1979

Issue Date: 16 Apr 2015

Valid Till: 27 Apr 2020

002416945E

SG 50

**VISIT PASS**

Immigration Regulations

Name

CHEN XIAODONG



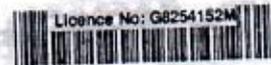
Date of Birth	Sex	Nationality
18-01-1979	M	CHINESE
FIN	Date of Issue	Date of Expiry
G8254152M	29-08-2017	29-08-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED  
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)**

EFFECTIVE DATE

- Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 28 Apr 2010
- Class 4 \*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg 14 Jan 2013  
\*Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg



Licence No: G8254152M

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)**

Policy No.: 18-MJ000899-R00 (Comm Vehicle Carry Own Goods)

- |                                                                                |                               |                           |
|--------------------------------------------------------------------------------|-------------------------------|---------------------------|
| 1. Index Mark and Registration Number of Vehicle                               | XB7805D                       | Chassis No.: FV517JA00233 |
| 2. Name of Policyholder                                                        | ANG TONG SENG TRADING PTE LTD |                           |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 04/07/2018                    |                           |
| 4. Date of Expiry of Insurance                                                 | 03/07/2019                    |                           |

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

Any person who is driving on the policyholder's order or with their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

**6. Limitations as to use\***

- 1) Use in connection with the policyholder's business.
  - 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.
  - 3) Use for social domestic and pleasure purposes.
- The policy does not cover:-
- 1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
  - 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

\* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

**IMPORTANT NOTICE**

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

**ADDITIONAL INFORMATION**

Account: 0465DDB

<b>Insurance Plan:</b>	Third Party, Fire & Theft
<b>Limit for total loss or theft:</b>	Prevailing Market Value
<b>Financial Interest:</b>	ORIX LEASING SINGAPORE LIMITED

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

# Tokio Marine Insurance Singapore Ltd.

(Company Reg. No: 192300014M) (GST Reg No: M2-000023-4)  
20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046  
T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com



**TOKIO MARINE**  
INSURANCE GROUP  
ORIGINAL

A member of the  
Tokio Marine Group

## POLICY SCHEDULE

<b>INSURED / ADDRESS</b> ANG TONG SENG CONSTRUCTION PTE LTD  29 TUAS SOUTH STREET 1 SINGAPORE 638036	<b>POLICY NO</b> : 18-MJ000899-R00 <b>POLICY TYPE</b> : COMMERCIAL VEHICLE (FLEET) <b>POLICY PERIOD</b> : 08/08/2018 TO 07/08/2019 <b>DATE OF ISSUE</b> : 17/08/2018 <b>ACCEPT DATE</b> : 04/07/2018  <b>PREMIUM DUE</b> : SGD 4,815.00 (inclusive of GST)  <b>ACCOUNT</b> : 0465DDB
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<b>BUSINESS/PROFESSION OF INSURED</b>	: OTHERS OUTDOOR
<b>REGISTRATION NUMBER</b>	: AS PER SCHEDULE ATTACHED
<b>MAKE</b>	: AS PER SCHEDULE ATTACHED
<b>TYPE OF BODY</b>	: AS PER SCHEDULE ATTACHED
<b>TONNAGE/SEATING CAPACITY</b>	: AS PER SCHEDULE ATTACHED
<b>YEAR OF MANUFACTURE</b>	: AS PER SCHEDULE ATTACHED
<b>YEAR OF REGISTRATION</b>	: AS PER SCHEDULE ATTACHED
<b>SUM INSURED</b>	: AS PER SCHEDULE ATTACHED
<b>TYPE OF COVER</b>	: AS PER SCHEDULE ATTACHED

### ANNUAL PREMIUM

<b>PREMIUM TOTAL BEFORE GST</b>	: SGD 4,500.00
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### EXCESS

<b>OWN DAMAGE AND ALL CLAIMS</b>	: AS PER SCHEDULE ATTACHED
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### DRIVER'S PARTICULARS

<b>NAMED DRIVER</b>	: AS PER SCHEDULE ATTACHED
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### OTHER PARTICULARS

<b>INSURED BUSINESS REGISTRATION NO.</b>	: 201800362N
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The above policy is subject to the following Clauses, Warranties, Endorsement, Exclusions as printed herein and/or attached hereto :-

MC04	FLEET RATED RISKS - CANCELLATION OF NO CLAIM DISCOUNT
MC32	THIRD PARTY FIRE AND THEFT
MC72	LEGAL LIABILITY OF PASSENGERS FOR ACTS OF NEGLIGENCE
MC08	HIRE PURCHASE
MC77	Non Cancellation Notice

The Insurance Company undertakes to obtain the Bank or Finance Company consent prior to their cancellation of the policy if instruction has been received for the cancellation of the policy and also advise immediately of any other material changes which are proposed to be