

MMAY 1902 8176

11/03/2019
Rizk

PEDESTRIAN

Information strictly Confidential & Strictly NO refer of repairer.

) / Courtesy Car ()

Injury:

124505000

NA1901607

9) N121 1040 Mobile	
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	01/03/2019 11:34
Date Of Accident	18/02/2019 23:40
Exact Location Of Accident	PASIR RIS DRIVE 10 TURN RIGHT TO PASIR RIS DRIVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJE7135D
Insured/Policyholder	
Name Of Registered Owner	KAN GAR WAI
NRIC No	S1758094I
Email Address	RYAN_KOH@LIVE.COM
Mobile Phone No	(LOCAL) +65-96909113
Alternative Phone No	OTHERS-91386048

Vehicle Particulars

Manufacturer	SUZUKI
Model	SWIFT
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095551906-01
Cover Note Number	

Driver

Name of Driver	KOH HAO YANG, RYAN
NRIC No	S9534805Z
Date Of Birth	28/09/1995
Occupation	OUTDOOR
Date Of Driving Pass	19/12/2015
Driving Experience	3 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96909113
Fax Number	
Contact Number	OTHERS-91386048
Email Address	RYAN_KOH@LIVE.COM

Address	BLK 114 DEPOT ROAD #22-1037
Postcode	100114
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PEDESTRIAN
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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190219/2087

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	
Vehicle Make/Model/Colour	
Details Of Properties	PEDESTRIAN
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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:

01/03/2019

10:05

Reporting Centre Personnel's Signature

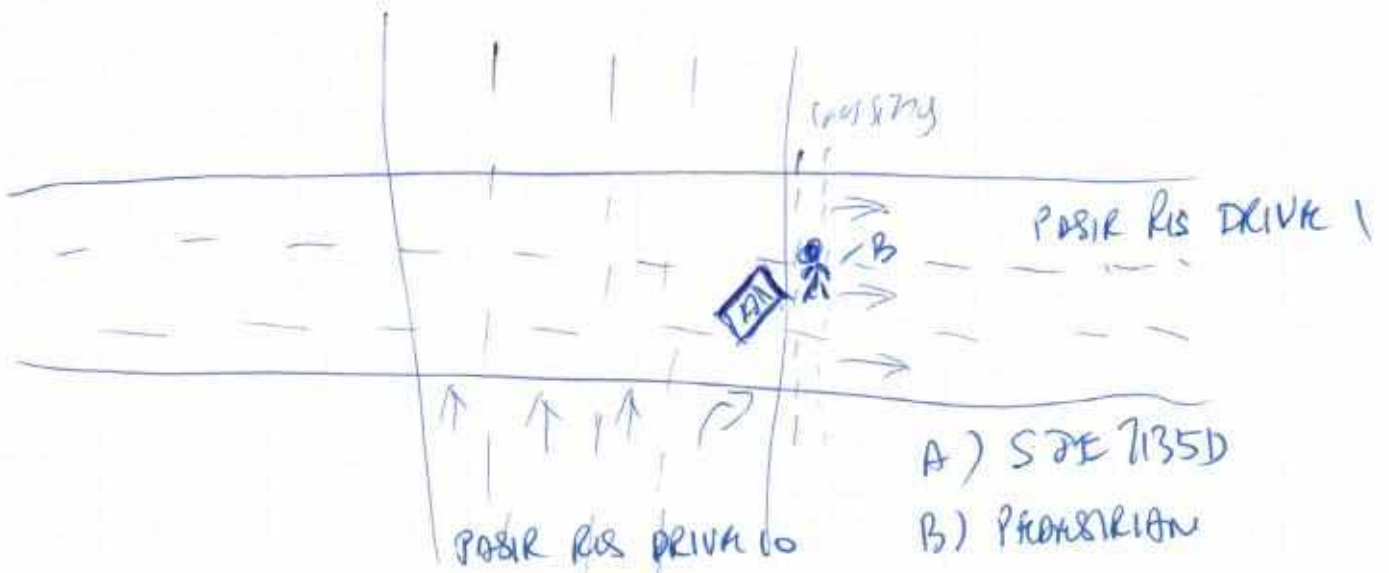
Name:

NRIC/FIN No.:

01/03/2019

Rosl Anton

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
1/2019 02/19/2017

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: 1/3/19

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



SINGAPORE POLICE FORCE



T/20190219/2087

1 of 4

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

Report No. T/20190219/2087

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/02/2019 14:20	Vide Report No.:	Station Diary No.: 28
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Informant's Particulars

Name of Informant: KOH HAO YANG, RYAN			Address: APT BLK 114 DEPOT ROAD #22-1037 SINGAPORE 100114		
ID Type / ID No.: NRIC NO / S9534805Z			Contact No.: Home/Office: Mobile: 91386048		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 23	Date of Birth: 28/09/1995	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3		
			Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 18/02/2019 23:40	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 PASIR RIS DRIVE 10 PASIR RIS DRIVE 1 Along Pasir Ris Drive 10 turning right towards Pasir Ris Drive 1 at the cross junction				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Pedestrian				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJE7135D	Car	SUZUKI	SWIFT	White	No Damage	0

Details of Person Involved

Any Pedestrian Involved: Yes					
No. of Pedestrians Injured: 1	Use of Pedestrian Crossing: Used				



SINGAPORE POLICE FORCE



T/20190219/2087

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Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682

Report No. T/20190219/2087

Tel No: 1800-3779999

CONTINUATION OF REPORT

Driver			
Name	KOH HAO YANG, RYAN	ID No.	S9534805Z
Related Vehicle	SJE7135D (Car)	Contact No.	91386048
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Pedestrian			
Name	MADHUSUDHANAN MUDALAIYAR NANDA KUMAR	ID No.	G5974987R
Related Vehicle	NIL	Contact No.	94483379
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	18/02/2019	Date Discharge	19/02/2019
No. of Days granted Medical Leave	14	Degree of Injury	Serious

Brief Details.

On 18/02/2019 at about 2341hrs, I stopped at the cross junction of Pasir Ris Drive 10 and Pasir Ris Drive 1. I was on the right most lane along Pasir Ris Drive 10 and wanting to turn right to Pasir Ris Drive 1. When the traffic light turn green, I then drove my car slightly forward and check that there was no pedestrian crossing at the opposite side before making the right turn. While making the right turn, one pedestrian suddenly appeared at the pedestrian crossing from the opposite direction.

When I saw the pedestrian crossing the road, I tried to brake however it was too late and I knocked onto the pedestrian from his right side which then caused him to fall to the ground. After the collision, I stopped at the side of the road along Pasir Ris Drive 1 and went out of my car to render assistance. I then checked if the pedestrian was alright and the pedestrian then told me that his left shoulder and left leg were in great pain. He then told me that he wanted to head home first and I then helped him into my car and drove him to his house at Blk 768 Pasir Ris St 71.

Along the way to his house, the pedestrian told me that he wanted to head to the nearest hospital however said that he wanted his wife and father-in-law to come along. I then picked up his wife and father-in-law and proceeded to Changi General Hospital.

I wish to state that the point where the pedestrian came out from was dimly lit therefore I could not see him crossing the road. The pedestrian crossing was green and I had check to see if there was any pedestrian crossing before I made the right turn. I also wish to state that I stayed with the pedestrian throughout his whole medical treatment at Changi General Hospital. The pedestrian suffered laceration on the left eyebrow, fractured left elbow and left middle toe, and he was granted two weeks of MC. I wish to add that I started my shift on 18/02/2019 at about 2000hrs and I was returning home when I met with the accident.



**SINGAPORE
POLICE FORCE**



T/20190219/2087

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Report No. T/20190219/2087

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Bukit Merah West N.P.C

500 Bukit Merah View #01-01 SINGAPORE
159682

Tel No: 1800-3779999

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20190219/2087

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

4 of 4

Report No T/20190219/2087

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:

D /

Sgt 3 JEREMY TAN KAY JIN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt MOHAMAD ZULFAZDLI BIN
ABDULLAH

Contact No.: 65476204

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

19/02/2019 14:20

Classification Of Case:

Claim Handling

Accident RT/1034173

Policy No.	300501905-01	Vehicle No.	SRT1150	GST Registration No.	
Certificate No.					
Policyholder Name	KAN GAR WAJ				
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Policyholder NAIC	51758040
Contact No.(Mobile)	81300048	Contact No.(Office)		Working	0
Email Address		Special Remark		Contact No.(Home)	
KFK	No Yes	TGA	No Yes	eCode	No
NCD Protection	No	NCD Entitlement(N)	20	eCode Reason	
				Private Use	No

Accident Details

Report Date	01/03/2019 12:21	Accident Report Within 24 hrs	Yes	Accident Type	Collision with Pedestrian
Date of Accident	01/03/2019	Time of Accident hh:mm	23:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	RESIN BUS DRIVE ON TURN RIGHT TO PASIR RES DRIVE 1				

Excess

Own Damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Uninsured Driver Excess	3,500.00	Outside Singapore (ED) Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

Benefits

GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Notification History					

Policyholder Mailing Address

Address 1	BLK 114 #22-037	Address 2	DEPOT ROAD	Address 3	DEPOT HEIGHTS
Address 4	SINGAPORE 100114	Address Type	Singapore address	Post Code	100114
Unit No.	22-037	Related Policy Number	300501905-01		

OI Driver Info

Driver Name	Uninsured Driver	Driver Type	Uninsured Driver	Driver DOB	19/06/1993
Uninsured driver Name	ROH HAO XIAN, RV6N	Driver NAIC	50544057	Driving Experience	3
Register Date of Driver License	19/12/2015	Driver Age	23	Contact No.(Home)	
Contact No.(Mobile)	81300048	Contact No.(Office)		Address 1	DEPOT ROAD
Address 1	BLK 114 #22-037	Address 2	DEPOT ROAD	Address 3	DEPOT HEIGHTS
Address 4	SINGAPORE 100114	Address Type	Foreign address	Post Code	100114
Unit No.	22-037				
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	SJDT1150	Driver Insurer Company	GTU

Declaration					
Witness/Police or Road Test Reading?	0 m.p.h.	Any Injury?	Yes - No		

Modification History

Claim 001: New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop		Insured Liability	Not at Fault	Insured	Received
Repair No. / Particulars	YES	Preferred Repair Centre	Preferred Workshop: Name unknown	Insured	Received

Date Registered:

Report Taken By

Print AX letter

Insured Name	KAN GAR WAJ	Insured NAIC	51758040
Contact No. (Home)	87744726	Contact No. (Office)	
OI Vehicle Number	SRT1150	TP Vehicle Number	PEDESTRIAN
SRT1150 / PEDESTRIAN ON 18 Feb 2019			
Name of Preferred Workshop			
Claim Date	01/03/2019 12:21	Date Received	01/03/2019 00:00
RQSL1 WAKOB			

Save Submit

Attachment

Accident No.	RT/1034173	Claim No.	001
Lost Doc. Received	Yes No	Upload Date	01/03/2019 12:25

Choose File	No file chosen	Category *	Confidential	Urgency *	Description *
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	File Size (KB)
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE 8 (BUKIT MERAH) on 01 Mar 2019 12:25	Photo	Normal	Photos 2019-3-1	
	NAC_BUKIT_MERAH_8006762 NATIONAL ASSESSMENT CENTRE SERVICE 9 (BUKIT MERAH) on 01 Mar 2019 12:25	Photo	Normal	Photos 2019-3-1	
	NAC_BUKIT_MERAH_8006763 NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH) on 01 Mar 2019 12:25	Photo	Normal	Photos 2019-3-1	

	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE 6 (BUKIT MERAH)) on 01 Mar 2019 12:25	Photos	Normal	Photos 2019-3-1
	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE 6 (BUKIT MERAH)) on 01 Mar 2019 12:25	Photos	Normal	Photos 2019-3-1
	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 01 Mar 2019 12:25	Photos	Normal	Photos 2019-3-1
	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE 6 (BUKIT MERAH)) on 01 Mar 2019 12:25	SAS	Normal	SAS 2019-3-1
	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 01 Mar 2019 12:25	NAC Driving License	Normal	NAC Driving License 2019-3-1

Video List

Uploaded By/Date	Photo Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: (18/2/19) (DD/MM/YYYY), TIME: (23:41) (HH:MM)

LOCATION: Pasir Ris Dr 10 turning into Pasir Ris Dr 1

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJE 71350
 b) INSURANCE COMPANY: WUC Insurance
 c) POLICY NUMBER: 5095551906-01
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: MAZDA Swift
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Private use
 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: Kan bar lai (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S17580941 CONTACT: 91609113
 c) ADDRESS: 114 Depot Road
#22-1071 91609113

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Kan bar lai (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S95348052 CONTACT: 9138049
 c) ADDRESS: 114 Depot Road
#22-1071 91609113

*d) DATE OF BIRTH: (28/01/1985) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 19/12/15

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

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: B+ Kuan West UPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: Papastacion MODEL: _____
 b) DRIVER'S NAME: _____
 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)
 ()

* No of passenger
 (including driver)
 ()

Email = kan_bar_lai@yahoo.com
 VIDEO

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9534805Z



Name

KOH HAO YANG, RYAN

许浩扬

Race

CHINESE

Date of birth

28-09-1995

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S9534805Z

Name

KOH HAO YANG, RYAN

Birth Date: 28 Sep 1995

Issue Date: 19 Dec 2015



SG
50



4649143

NRIC No. S9534805Z



Date of issue

04-11-2010

Address

APT. BLK 114 DEPOT ROAD
#22-1037
SINGAPORE 100114

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

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$

EFFECTIVE DATE

19 Dec 2015

NF 429A



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5095551906-01

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SJE7135D**
Chassis Number : JSAEZC31S00201920
2. Name of Policyholder : KAN GAR WAI
3. Effective Date of Insurance : 06 Nov 2018
4. Expiry Date of Insurance : 05 Nov 2019
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: KAN GAR WAI
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : COWELL INSURANCE (AGENCY) PTE LTD (00000610380)

Date of Issue : 29 Oct 2018 16:55 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive