

# NATIONAL Assessment Centre Services. [ver 1 Jan 03] MMA 119033450.

Date In: 12/3/19 17:33	Job description	Date & Time Completed	Done by
Ref No: MA1A16190045021H4.	SAS e-filing		
Veh No: G06 9265 H	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 11/3/19 15:00.	I-Motor Claim Form		
OD: <input checked="" type="radio"/> Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel: (	Fax: (
TP Particulars:	Veh No: XD 1711 U.	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%; P: 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 repater.
( ) 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

MMA1901846

Claimant's Particulars:	Invoice Preparation Checklist	Am't (\$)	PAID (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	30.00	
Contact No:	2) DA: Damage Assessment (\$100); INC (\$50)		
Damaged Portion:	3) TP: Towing Fee \$40/\$45		
	4) PT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (ver 10 Jan 2003)		
	6) TR: Re-inspection \$75		
	7) N1: Idao 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		
	TP (N11): TP (N11) against INC \$20		
	9) N12: Idao Mobile \$0		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
Auditors' Comments:	Invoice dated	Fee Charged	
Ref 1:			
Ref 2/3:			



## 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	12/03/2019 17:33
Date Of Accident	11/03/2019 15:00
Exact Location Of Accident	WEST COAST HWY TWDS JLN BUROH
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBG9265H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PACIFIC SORBY PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67780069
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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
<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800133216
Cover Note Number	-
<b>Driver</b>	
Name of Driver	SIA GAI XIAN
NRIC No	G6837029P
Date Of Birth	30/06/1992
Occupation	OUTDOOR
Date Of Driving Pass	30/11/2017
Driving Experience	1 YEAR AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90684974
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	20 JLN RAJA UDANG #02-01
Postcode	329192
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	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
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	TELOK BLANGAH NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 51 TELOK BLANGAH DRIVE , <b>POSTCODE:</b> 100051 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2729999 - <b>FAX NO:</b> 63772526
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	XD1711U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMC7186G  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name SIA GAI XIAN  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? GBG9265H  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
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.
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.

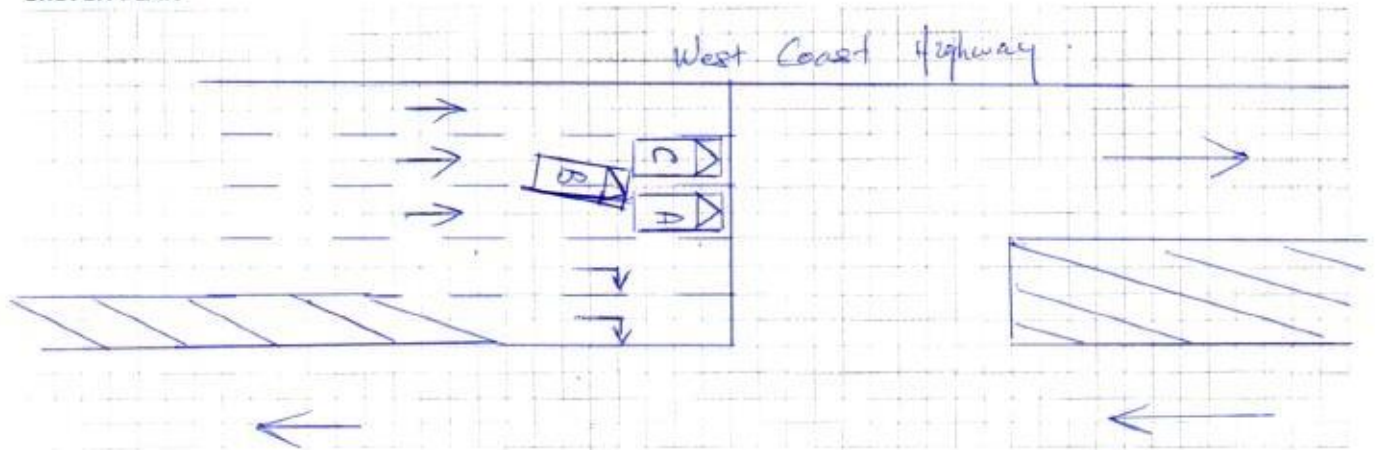


Policyholder's Signature  
Date & Time:

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

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

# SKETCH PLAN



(A) GBB 9265H (C) SMC 7186G  
(B) XD 1711U

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to Police Report

No: T/20190312/2068

## 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.:



Vehicle No.	GBG 9265H		Model / Make	Toyota Dyna
Date of Accident	11/03/19			
Time of Accident	1500 HRS			
Location of Accident	West Coast Highway towards Jalan Buroh near Pagar Panjang Gate 3.			
Exact purpose use during accident	Commercial Use			
Name of Owner	Pacific Sub Sory Pte Ltd.			
Telephone No.	H/P :	Home :	Office : 6778 0069	
NRIC	2014366200			
Address	191, Pandan Loop (S) 128380			
Claim type	OD	THIRD PARTY REPORTING ONLY		
Insurance Company	AIG.			
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft			
Policy No.	1800133216			
Name of Driver	As Above If No, SIA GAI XIAN.			
NRIC	G6837029P		Any Passengers : N.A.	
Date of birth	30/06/1992			
Occupation	Outdoor / Indoor			
Driving License Pass Date	30/11/2017			
Gender	Male / Female			
Contact No.	H/P :	Home :	Office :	
Address	20, Jalan Raja Udang #02-01 (S) 329192			
Driver have any own vehicle	No, If yes, Reg No.			
Relationship	Employee, If no, state			
Weather condition	Clear Raining Other			
Road Surface	Dry Wet Other			
Any Injuries	No, If Yes, Who?			
Name And Contact No.	SIA GAI XIAN (H/P: 90684974)			
Name And Contact No.				
Police Report	No, If Yes, Where? Telok Blangah NPP			
Vehicle B No.	XD 1711 U		Any Passengers : N.A.	
Name of Driver	Contact No. :			
Vehicle C No.	SMC 7186G		Any Passengers : N.A.	
Vehicle D No.	Any Passengers :			
Vehicle E no.	Any Passengers :			
Vehicle F No.	Any Passengers :			
Vehicle G No.	Any Passengers :			
Witness Name	N.A		Witness Contact : N.A.	
Accident Portion	Rear left Portion.			
Camera Recorder	Yes / No			
Email Address				
PARTICULAR WORKSHOP	Twincar			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON	Huixen			
FAX NO	6741 0510			
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg			





**SINGAPORE  
POLICE FORCE**



T/20190312/2068

1 of 4

Report No. T/20190312/2068

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/03/2019 12:53	Vide Report No.: D/20190311/0073	Station Diary No.: 11
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**Informant's Particulars**

Name of Informant: SIA GAI XIAN			Address: 20 JALAN RAJA UDANG #02-01 SINGAPORE 329192	
ID Type / ID No.: FIN NO / G6837029P			Contact No.: Home/Office:	Mobile: 90684974
Nationality: MALAYSIAN			Email:	
Sex: Male	Age: 26	Date of Birth: 30/06/1992	Type of Informant: Driver	
Race: Chinese			Language: Chinese	Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: 2B,3 Date of Expiry: 04/05/2022	

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 11/03/2019 15:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 WEST COAST HIGHWAY JALAN BUROH Near Pasir Panjang Gate 3 Lamp Post Number: 51/1				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit: 70 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG9265H	Lorry	TOYOTA		White	Slightly Damaged	0
SMC7186G	Car	NISSAN		Grey	Slightly Damaged	0
XD1711U	Lorry	MITSUBISHI		White	Slightly Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20190312/2068

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Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

Report No. T/20190312/2068

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	SIA GAI XIAN	ID No.	G6837029P
Related Vehicle	GBG9265H (Lorry)	Contact No.	90684974
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: 04/05/2022
Date Treatment	11/03/2019	Date Discharge	11/03/2019
No. of Days granted Medical Leave	03	Degree of Injury	Serious
<b>Driver</b>			
Name	ZHU JINYU	ID No.	S8309913E
Related Vehicle	SMC7186G (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	LOW BOON SUM	ID No.	S2506640E
Related Vehicle	XD1711U (Lorry)	Contact No.	84801266
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 11/03/2019 at about 1500hrs, I was driving my lorry on the second lane of a four lane road along West Coast Highway towards Jalan Buroh. It was raining heavily and I was heading back to my company at Pandan Loop. I then stopped my lorry at the traffic light junction near lamp post 51/1. Suddenly, I felt a huge impact from the rear and I then hit my head onto something. I then realized that the big lorry, XD1711U, from behind had collided with me and one other Nissan car, SMC7186G, on my left. I then sat in the car as the rain was very heavy.

At about 1505hrs, the driver of the Nissan car then came out of his vehicle to check if I was ok and then decided to call for ambulance as I was bleeding from my nose. Shortly after, the paramedics came



**SINGAPORE  
POLICE FORCE**



T/20190312/2068

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

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Report No: T/20190312/2068

**CONTINUATION OF REPORT**

and conveyed me to NUH due to my injuries.

I wish to state that I suffered headache, dizziness and a bruised nose due to the accident and I will be heading for X ray on my nose. I also wish to state that I had stopped at the traffic light junction for a few seconds before the lorry came and collided with me from behind. There are some cracks at the back of my lorry. I wish to add that I did not spoke with the driver of the big lorry.





**SINGAPORE  
POLICE FORCE**



T/20190312/2068

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Report No. T/20190312/2068

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

**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 Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

12/03/2019 12:53

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD SHAHRIL BIN ABDULLAH

Contact No.: 65476083

Classification Of Case:

Authentication Stamp  
NP168



Signature:

SN 045

Singapore Police Force

# REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **G6837029P**  
Name:

**SIA GAI XIAN**

Birth Date: **30 Jun 1992**  
Issue Date: **05 May 2017**  
Valid Till: **04/05/2022**



## WORK PERMIT Employment of Foreign Manpower Act (Chapter 91A) Republic of Singapore

Employer:  
**PACIFIC SORBY PTE. LTD.**

Sector: **MANUFACTURING**



Name:  
**SIA GAI XIAN**  
Occupation:  
**LORRY / TRUCK DRIVER**

Work Permit No.: **4 03664782**  
Date of Application: **11-12-2017**  
Date of Issue: **29-12-2017**  
Date of Expiry: **28-12-2019**



**L8534130**

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

EFFECTIVE DATE

Class 2B Motorcycles  $\leq 250$  CC  
Class J Motor cars  $\leq 3500$  kg with  $\leq 7$  passengers, exclusive of the driver; and motor tractors/vehicles  $\leq 2500$  kg

95 May 2017  
30 Nov 2017

S / No. 9000276062

G6837029P

NP 428A



### VISIT PASS

Immigration Regulations

Name:  
**SIA GAI XIAN**



Date of Birth: **30-06-1992** Sex: **M** Nationality: **MALAYSIAN**  
FIN: **G6837029P** Date of Issue: **29-12-2017** Date of Expiry: **28-12-2019**

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.







# CERTIFICATE OF INSURANCE

## COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : PACIFIC SORBY PTE LTD  
Period of Insurance : 29 Nov 2018 To 28 Nov 2019  
Engine No. : 1KD2761020  
Chassis No. : JTFAT35Y70K209405

Vehicle No. : GBG9265H  
Policy No. : 1800133216  
Endorsement No. :  
Issued Date : 08 Nov 2018

### ABOUT THE COVER

Make/Model : TOYOTA DYNA 150 1.7 ton [Lorry]  
Engine Capacity/Tonnage : 1.7 Tonnage Sum Insured : Market Value First Year of Registration : 2017  
Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes  
Person or Classes of Persons Entitled to Drive\*

a) Any person who is driving on the Policyholder's order or with their permission.  
b) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use\*

1) Use in connection with the Policyholder's business.  
2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.  
3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle. c) use for any purpose in connection with Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

### EXCESS

Section 1  
Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).  
For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Hitachi Capital Asia Pacific Pte. Ltd.

/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0197005000

CHANG FOOK WAI JEFFREY  
371 ALEXANDRA ROAD #08-23 AIA ALEXANDRA  
SINGAPORE 159963 SP-SEKHOO-CTS  
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

FOOK WAI JEFFREY CHANG

Transaction ref 20180102174708942665

The owner and vehicle particulars for Vehicle No. GBG9265H as at 02 Jan 2018 are as follows:

1.	Name	: PACIFIC SORBY PTE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 201436620D
4.	Place Of Passport Issue	: -
5.	Vehicle No.	: GBG9265H
6.	Previous Vehicle No.	: -
7.	Effective Date of Ownership	: 02 Jan 2018
8.	Original Registration Date	: 29 Nov 2017
9.	First Registration Date	: 29 Nov 2017
10.	Vehicle Type	: B31 - Goods (Open) Lorry (Metal Body)/Pickup
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	: -
14.	Attachment 3	: -
15.	Vehicle Make	: TOYOTA
16.	Vehicle Model	: DYNA 150 5MT
17.	Year of Manufacture	: 2017
18.	Primary Colour	: Silver
19.	Secondary Colour	: -
20.	Passenger Capacity	: 2
21.	Chassis/Trailer Chassis No.	: JTFAT35Y70K209405 / -
22.	Propellant	: Diesel
23.	Engine No./Motor No.	: 1KD2761020 / -
24.	Engine Capacity(cc)/Power Rating(kW)	: 2982 / -
26.	Unladen Weight(kg)	: 1720
27.	Maximum Laden Weight(kg)	: 3500
28.	Open Market Value	: \$27,084.00
29.	PARF Eligibility	: No
30.	PARF Eligibility Expiry Date	: -
31.	Minimum PARF Benefit	: \$0.00
32.	No. of Transfers	: 1
33.	IU Label No.	: 1042996695
34.	COE No.	: 2017112905001353D
35.	COE Expiry Date	: 28 Nov 2027
36.	COE Category	: C - Goods Vehicle & Bus
37.	Quota Premium/Prevailing Quota Premium	: \$39,741.00 / \$39,741.00
38.	Actual Quota Premium/PQP Paid	: \$39,741.00
39.	Actual ARF Paid	: \$1,355.00
40.	CO2 Emission(g/km)	: 255.00
41.	CO Emission(g/km)	: -
42.	HC Emission(g/km)	: -
43.	NOx Emission(g/km)	: -
44.	PM Emission(mg/km)	: -
45.	Actual CEVS/VES Rebate Utilised	: -
46.	CEVS/VES Surcharge Paid	: -
47.	Actual Green Vehicle Rebate Utilised	: -
48.	Vehicle Lifespan Expiry Date	: 28 Nov 2037
49.	Road Tax Amount	: -
50.	Road Tax Start Date	: -