





## 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	25/03/2019 17:24
Date Of Accident	24/03/2019 18:00
Exact Location Of Accident	INSIDE CARPARK BLK 438 HOUGANG AVENUE 8
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ856P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KURUMA RENTAL PTE. LTD.
Co Reg No	201704079C
Email Address	HANCARREPAIRS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96263049
Alternative Phone No	OFFICE-96263049

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101395658
Cover Note Number	

### Driver

Name of Driver	NG KIAN THIAM
NRIC No	S1150211C
Date Of Birth	02/05/1956
Occupation	OUTDOOR
Date Of Driving Pass	19/09/1977
Driving Experience	41 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96263049
Fax Number	
Contact Number	OTHERS-96263049
Email Address	HANCARREPAIRS@GMAIL.COM

Address	BLK 820 YISHUN STREET 81 #04-648
Postcode	760820
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	SIDE SWIPE
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	2
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	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8522999 - FAX NO: 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20190325/2119 (TYPE OF COLLISION IS T/P REVERSE AND HIT INSURED)

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GY5416L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ONG AH LIEN
NRIC/Passport Number	S1558913B
Contact Number	96549921
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name NG KIAN THIAM

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SJQ856P

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.
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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.

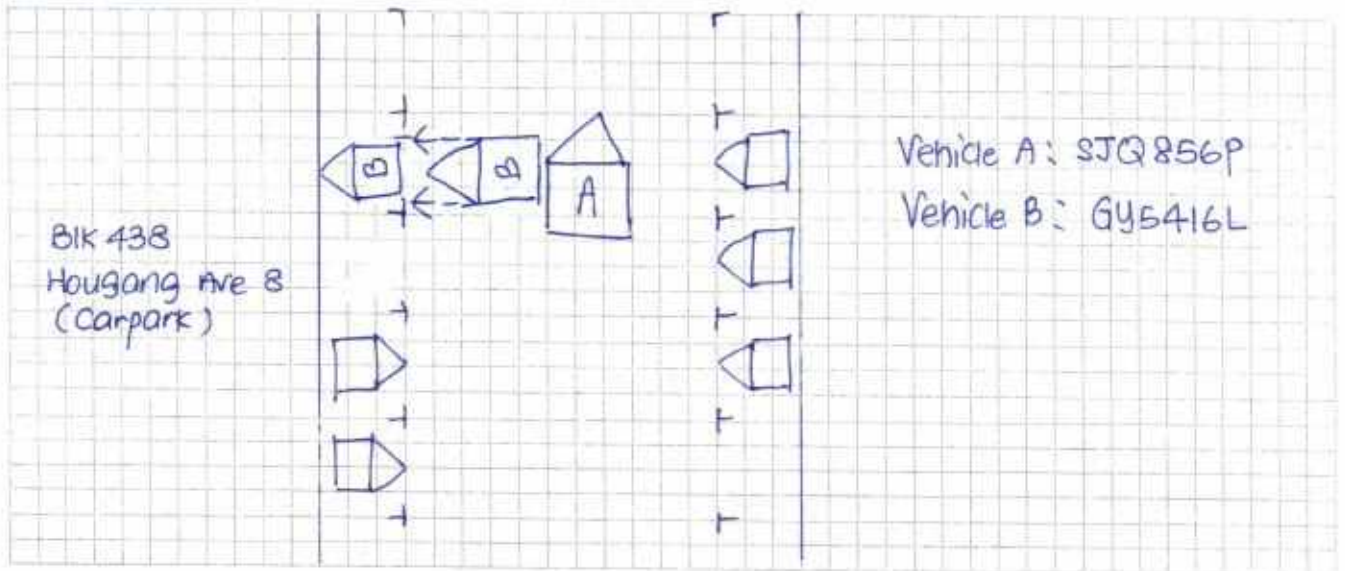
  
Policyholder's Signature  
Date & Time: \_\_\_\_\_



  
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

On 24/03/19 at about 1759hrs, I was driving bearing registration plate number (SJQ856P) inside carpark near to B1K 438 Hougang Avenue 8 when a vehicle bearing registration plate number (GY5416L) suddenly reversed & collided onto my vehicle A.

Police Report T/20190325/2119

## 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.:





**SINGAPORE  
POLICE FORCE**



T/20190325/2119

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

1 of 3

Report No. T/20190325/2119

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/03/2019 14:59		Vide Report No.:		Station Diary No.: 58	
<b>Informant's Particulars</b>					
Name of Informant: NG KIAN THIAM			Address: APT BLK 820 YISHUN STREET 81 #04-648 SINGAPORE 760820		
ID Type / ID No.: NRIC NO / S1150211C			Contact No.: Home/Office: Mobile: 96263049		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 62	Date of Birth: 02/05/1956	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/03/2019 18:00	Type of Location: Car Park
Location: Along Road 1 HOUGANG AVENUE 8  INSIDE CARPARK BLK 438 HOUGANG AVENUE 8				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side <i>Rear</i> <i>3u</i>				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GY5416L	Van					0
SJQ856P	Car				Seriously Damaged	1

**Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20190325/2119

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

2 of 3

Report No. T/20190325/2119

**CONTINUATION OF REPORT**

Driver			
Name	NG KIAN THIAM	ID No.	S1150211C
Related Vehicle	SJQ856P (Car)	Contact No.	96263049
Hospital/Clinic	JOY CLINIC AND SURGERY	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	25/03/2019	Date Discharge	25/03/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 24/03/2019 at about 1759hrs, I was driving my vehicle bearing registration plate number (SJQ856P) inside carpark near to Blk 438 Hougang Avenue 8 when a vehicle bearing registration plate number (GY5416L) suddenly reversed and collided onto the left side of my vehicle.

Both of us came out of our vehicles and exchanged particulars and also to check on each other. I made a check, the other driver was conscious and not suffering from any visible injuries. After exchanging particulars we both then left the place.

However on 25/03/2019, I felt pain in my neck and hip area as such I went to seek medical assistance at Joy Clinic and Surgery. I was awarded a total of 3 days medical leave with MC No. 188226. As such, I am lodging this report due to having 3 days MC.





**SINGAPORE  
POLICE FORCE**



T/20190325/2119

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

3 of 3

Report No. T/20190325/2119

**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 /

Staff Sgt CHIANG FENG YU, SHONN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

25/03/2019 14:59

Officer In Charge Of Case:

TP / AEIT /

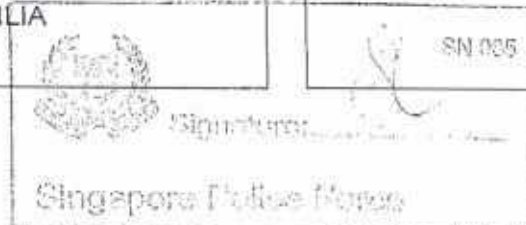
SSI 2 YEO GEAK ENG CECILIA

Contact No.: 65476404

Classification Of Case:

SN 005

Authentication Stamp  
NP168



## Claim Handling

Accident No: 017358

Policy No.	01017358	Vehicle No.	010656P	GST Registration No.	
Policyholder Name	KIRUMA RENTAL PTE. LTD.	Cover Type	Basic Classic	Policyholder NRIC	211704079C
Product Code	FLEET INSURANCE	Contact No. (Office)		Leading	0
Contact No. (Mobile)	96263049	Special Remarks		Contact No. (Home)	
Email Address		TCA	No Yes	eCode	No *
ETW	No Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private HRS	Yes

## Accident Details

Report Date	25/03/2019 17:40	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	24/03/2019	Time of Accident (H:MM)	18:00	Country of Accident	Singapore
Reporting Office		Orange Force		ICH No.	
Accident Location	INSIDE CARPARK BLK 438 HOYANG AVENUE B				

## Excess

Own Damage Excess	1,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,000.00	Outside Singapore TP Excess	1,500.00		

## Benefits

## GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Notification History	25/03/2019 17:42:59 System changed GST Status verified from No to Yes		

## Policyholder Mailing Address

Address 1	BLK 180D #01-49	Address 2	BUKIT MERAH LANE 3	Address 3	ALEXANDRA VILLAGE (NEOQTR)
Address 4	SINGAPORE 150718	Address Type	Singapore address	Post Code	150718
Unit No.	01-49	Related Policy Number	0101735875		

## OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	02/03/1956
Unnamed Driver Name	NO NAME TRUCK	Driver NRIC	S1150211C	Driving Experience	41
Register Date of Driver License	19/09/1977	Driver Age	62	Contact No. (Home)	
Contact No. (Mobile)	96263049	Contact No. (Office)		Address 1	SINGAPORE 150718
Address 1	BLK 420 #01-44B	Address 2	YISHUN STREET A	Post Code	750820
Address 4		Address Type	Foreign address		
Unit No.	01-44B	Driver Vehicle No.	010656P	Driver Driver Company	NTUC
Does he own a Singapore Registered Car?	Yes - No				

## Declaration

Breathalyzer or Blood Test Reading	0 mg	Any Injury?	Yes - No
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## Notification History

Claim 001 New

Claim Type *	OD-HR	Insured Name	KIRUMA RENTAL PTE. LTD.	Insured NRIC	211704079C
Contact No. (Mobile)		Contact No. (Home)		Contact No. (Office)	96263049
Email Address		Vehicle No.	010656P	Vehicle Number	010656P
Claim Description	SUQ656P / 015418L ON 24 Mar 2019				
Preferred Workshop		Insured Liability	Not at Fault	Name of Preferred Workshop	
Insured Liability	Not at Fault	Preferred Workshop, Name unknown	GIA report	Received	
Date Registered	25/03/2019 17:45	Claim Date	25/03/2019 17:45	Date Received	25/03/2019 00:00
Report Taken by	MOSE WANAB				

## Print Ack Letter

Save Submit

## Attachment

Accident No.	017358	Claim No.	001
Last Doc. Received	Yes No	Upload Date	25/03/2019 17:46
Choose File	No file chosen	Category *	Personal Select
Choose File	No file chosen	Confidential	NO
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Description *	
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Box			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CD)
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25	2
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25	



	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	Photos	Normal	Photos 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	SAS	Normal	SAS 2019-3-25
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Mar 2019 17:46	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-3-25

Video List

Uploaded By/Date	Folder/Date	File Name	Source	Action
<a href="#">Display in New Window</a> <a href="#">Scan and uploading</a>				

PERSONAL PARTICULARS

Date of Accident: 24 / 3 / 2019

Time of Accident: 17 : 59 (24Hrs)

Vehicle No: SJC 856 P

Vehicle Make/Model: Hyundai Avante

Exact Location of Accident: Inside Carpark Blk 438 Hengong Ave 8

Owner's Name/NRIC: Kuruma Rental Pte Ltd / 201704079C

Driver's Name/NRIC: Ng Kian Thiam I / No: S1150211C

Driver's Contact: 9626 3049

Insurance Co & Policy No: NTUC

Driver's Email Address: hancarnerepairs@gmail.com

Relationship between Owner & Driver: Spouse/Children/Friend/Parents/Others specify: Employer / Employee

What do you wish to claim (Please circle one only)

1) Own Insurance 2) Other Vehicle (The one you want to claim against) 3) Reporting (For Recording Purposes)

Exact Purpose for which the vehicle was being used at time of accident? (Please circle one only)

Private Use Work Purpose

Weather Condition & Road Conditions?

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet

Occupation

Indoor Outdoor

Any Injuries? (MC of 3 Days or more, police report is required)

Yes / No If Yes, which police station? 32 Yishun St - 81 Singapore 768456

The Other Party (Vehicle B) Details

Driver's Name/IC:  Ong Ah Kien I / No: S1558913 B Vehicle No: 6Y 54162

Insurance Company: \_\_\_\_\_

Driver's Contact: 9654 9921

(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)

Other Vehicle (Vehicle C): \_\_\_\_\_

Independent Witness (if Any): \_\_\_\_\_ Contact: \_\_\_\_\_

Preferred Workshop (if Any): \_\_\_\_\_ Contact: \_\_\_\_\_

\* If no proper document are produced, IDAC should not file the report.

\* Information will be discarded after one week.




**DRIVING LICENCE**

Licence Number: **S1150211C**  
 Name: **NG KIAN THIAM**



Birth Date: **02 May 1956**  
 Issue Date: **21 Jul 2003**

000669893A



**REPUBLIC OF SINGAPORE**  
 IDENTITY CARD NO. **S1150211C**



**NG KIAN THIAM**

Race: **CHINESE**  
 Date of Birth: **02-05-1956** Sex: **M**  
 Country of Birth: **SINGAPORE**

Land Transport Authority

**VOCATIONAL LICENCE**

Licence No : **S1150211C**  
 Name : **NG KIAN THIAM**

Issue Date : **8/6/2011**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

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

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	30 Nov 1977
Class 2A	Motorcycles between 201 cc and 400 cc	30 Nov 1977
Class 2	Motorcycles exceeding 400 cc	30 Nov 1977
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	19 Sep 1977

NP428A



2713336



NET NO. **S1150211C**



Blood Group: **B+** Date of issue: **02-10-1995**

APT BLK 820 YISHUN STREET 81  
 #04-648  
 SINGAPORE 760820

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	06/07/2001
02	TAXI VL	12/03/2001
04	BUS ATTENDANT	06/07/2001



## 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:** 5101395658

**Cover :** drive CLASSIC

- |   |                           |
|---|---------------------------|
| 1. Index mark and Registration Number of Vehicle  | : SIQ856P                 |
| Chassis Number  | : KMHU41BR9U728539        |
| 2. Name of Policyholder   | : KURUMA RENTAL PTE. LTD. |
| 3. Effective Date of Insurance  | : 15 Jun 2018             |
| 4. Expiry Date of Insurance   | : 14 Jun 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	: N/A
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 : JG MOTOR AGENCY (00000613374)

Date of issue : 12 Jun 2018 14:49 hrs:

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive