

NATIONAL Assessment Centre Services. [ver 1 Jan'03] MNA 119-50750

| | | | |
|----------------------------|--|-----------------------|---------|
| Date In: 18/11/19 15:31 | Job description | Date & Time Completed | Done by |
| Ref No: WA/TMZ 19006942/14 | SAS e-filing | | |
| Veh No: SGN 8976A | E-mail (within 5hrs, AIC 2hrs) | | |
| D.O.A: 17/11/19 15:30 | I-Motor Claim Form | | |
| OD: TP Reporting Only | I-Motor W/O (Within: OD 2hrs, TP 4hrs) | | |
| | I-Photo Uploaded | | |
| | Assessment/Survey Report | | |
| TP Insurer: | Ass't Report by Fax / Hand to Owner/Wksn | | |

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

TP Particulars: Veh No: SJX 7803J 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 repair.

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

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

Remarks: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

| Date/Time | Actions |
|-----------|---------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| Client/Particulars | Invoice/Particulars | Amount (\$) | Amount (\$) |
|---------------------------------|--|-------------|-------------|
| Driver/Owner: | 1) AIC: Accident Reporting (\$30) | 30.00 | |
| Contact No: | 2) DA: Damage Assessment (\$100) INC (\$80) | | |
| Damaged Portion: | 3) TP: Towing Fee \$40/\$45 | | |
| QC Checked by (Engr-In-Charge): | 4) IT: Follow-Through Survey \$120 | | |
| Auditors' Comments: | 5) IT: Follow-Through Survey (Resurvey) \$30 | | |
| Ref 1: | 6) TR: Re-inspection \$75 | | |
| Ref 2/3: | 7) NI: Idan 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 / Collist Excess Coordination \$3 | | |
| | TP (NI1): TP (Inc-INC) against INC \$20 | | |
| | 9) NI2: Idan Mobile \$0 | | |
| | 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 | 18/04/2019 15:31 |
| Date Of Accident | 17/04/2019 15:30 |
| Exact Location Of Accident | ALONG ECP TWDS CHANGI |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------|
| Vehicle Registration Number | SGN8976A |
| Insured/Policyholder | |
| Name Of Registered Owner | TRUE DRIVE |
| Co Reg No | - |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-91099266 |

Vehicle Particulars

| | |
|--|--------------|
| Manufacturer | TOYOTA |
| Model | WISH |
| 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 | PRIVATE HIRE |

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-MJ000977-R00 |
| Cover Note Number | - |

Driver

| | |
|----------------------|---|
| Name of Driver | CHARLES LEE BOON KENG(CHARLES LI WENQING) |
| NRIC No | S7233504Z |
| Date Of Birth | 11/09/1972 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 16/03/1993 |
| Driving Experience | 26 YEARS AND 1 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-91099266 |
| Fax Number | |
| Contact Number | |
| Email Address | NOEMAIL |

| | |
|---|--------------------------------------|
| Address | BLK 141 SERANGOON NORTH AVE 2 #10-02 |
| Postcode | 550141 |
| 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 | CHAIN COLLISION |
| 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 | 6 |
| 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) | 2 |
| Passenger 1 | NAME: : MARIANA GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | SERANGOON NORTH NEIGHBOURHOOD POLICE POST |
| Police Station Address | ROAD: BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , POSTCODE: 550108 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-2849999 - FAX NO: 63431742 |
| 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 | SJX7803J |
| 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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SMJ311X

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 OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SHB5553H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

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 4

Vehicle Registration Number

SJV6411Z

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 OTHER VEHICLE PROPERTY 5

Vehicle Registration Number

SLP8144P

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 | CHARLES LEE BOON KENG(CHARLES LI WENQING) |
| Approximate Age | |
| Injuries Sustain | BODY |
| Injured person in which vehicle? | SGN8976A |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

DETAILS OF INJURED PERSON 2

| | |
|---|----------|
| Name | MARIANA |
| Approximate Age | |
| Injuries Sustain | BODY |
| Injured person in which vehicle? | SGN8976A |
| 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.:

| | | | | | |
|--|--|--|--|---|------------|
| | | | | F | A-SGN8976A |
| | | | | A | B-SJX7803J |
| | | | | B | C-SMJ311X |
| | | | | C | D-SHB5531H |
| | | | | D | E-SJV6411Z |
| | | | | E | F-SLP8144P |

Refer to the police report T/20190417/2203

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

Date of Accident : 17/4/19 Accident Time: 15:30 (24-HR-Format)
Accident Place : Along ECP towards Changi Airport
Vehicle No. (Car Plate No.) : SGW 89TLA Make/Model: Toyota Wish 1.8
Insurance Company : TM Policy No: MTJ000977
Owner or Company Name / IC No. : True Drive / 53341353B
Owner or Company Contact No. : _____ Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : Charles Lee Boon Keng / S7233504Z
DRIVER'S Date Of Birth : 11/9/1972 DRIVER'S License Pass Date 16/3/1993
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others:
DRIVER'S Address : B11K141 Serangoon North Ave 2 #10-02
DRIVER'S Contact No. / Alt No. : 1) _____ 2) 5550141
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : _____
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 2 person
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any Injury (If YES, Pls state): yes

Other Party Driver's Particular (if any)

| | |
|--|--|
| Vehicle No: <u>SJK 7803J (Wish)</u> | Vehicle No: <u>SMJ 311X</u> |
| Vehicle Make/Model: _____ | Vehicle Make/Model: _____ |
| Name Driver: _____ | Name Driver: _____ |
| IC No. Driver/Contact: _____ | IC No. Driver/Contact: _____ |
| * NEW - Passenger's name & gender: <u>Mariana (F)</u> | Vehicle D <u>SHB 5553H</u> Vehicle E <u>SVU 6411Z</u> Vehicle F <u>SLP 8144P</u> |



SINGAPORE POLICE FORCE



T/20190417/2203

1 of 5

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

Report No. T/20190417/2203

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|---|------------|------------------------------|---|--------------------------|----------------------------|
| Date/Time Report Made: 17/04/2019 21:33 | | Vide Report No.: | | Station Diary No.: 24 | |
| Informant's Particulars | | | | | |
| Name of Informant: CHARLES LEE BOON KENG | | | Address: APT BLK 141 SERANGOON NORTH AVENUE 2 #10-02 SINGAPORE 550141 | | |
| ID Type / ID No.: NRIC NO / S7233504Z | | | Contact No.: Home/Office: Mobile: 91099266 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 46 | Date of Birth: 11/09/1972 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | | Institution / School Name: |
| Occupation: PRIVATE HIRE | | | Driving Licence Information: Class: 3 Date of Expiry: | | |

| | | | | |
|--|----------------------------------|------------------------------------|--|-------------------------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Non-Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 17/04/2019 15:30 | Type of Location: Expressway |
| Location: Along Road 1 EAST COAST PARKWAY | | | | |
| Along ECP under Marine Parade Flyover towards Changi Airport | | | | |
| Weather: Sunny | | Road Surface: Dry | | Road Speed Limit: 90 Km/h |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | | Traffic Volume: Moderate |
| Type of Collision: Chain Collision | | | | Anyone conveyed by ambulance: No |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------|------|-------|-------|-------------------|-----------------|
| Vehicle No | Type | Make | Model | Color | Condition | No of Passenger |
| SGN8976A | Car | | | | Seriously Damaged | 1 |
| SHB5553H | Car | | | | Slightly Damaged | 0 |
| SJV6411Z | Car | | | | Seriously Damaged | 0 |
| SJX7803J | Car | | | | Seriously Damaged | 0 |
| SLP8144P | Car | | | | Slightly Damaged | 0 |



**SINGAPORE
POLICE FORCE**



T/20190417/2203

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20190417/2203

CONTINUATION OF REPORT

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------|------|-------|-------|-------------------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| SMJ311X | Car | | | | Seriously Damaged | 0 |

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

| Driver | | | |
|-----------------------------------|-----------------------|--|---------------------------------|
| Name | CHARLES LEE BOON KENG | ID No. | S7233504Z |
| Related Vehicle | SGN8976A (Car) | Contact No. | 91099266 |
| 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 | 05 | Degree of Injury | Slight |

| Driver | | | |
|-----------------------------------|----------------|--|-----------------------------------|
| Name | Swee Hin Kwang | ID No. | S1418503H |
| Related Vehicle | SHB5553H (Car) | Contact No. | 90900998 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

| Driver | | | |
|-----------------------------------|-------------------------|--|-----------------------------------|
| Name | Nuzrul Hakiem Bin Abbas | ID No. | S7401451H |
| Related Vehicle | SJV6411Z (Car) | Contact No. | 96756393 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |



**SINGAPORE
POLICE FORCE**



T/20190417/2203

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20190417/2203

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|-----------------------|--|-----------------------------------|
| Driver | | | |
| Name | Guo Jintao | ID No. | S8873814D |
| Related Vehicle | SJX7803J (Car) | Contact No. | 81198254 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | Koh Sien Ming Michael | ID No. | S6926088H |
| Related Vehicle | SLP8144P (Car) | Contact No. | 96251296 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | Andrew Ann Huan Chen | ID No. | S9109958F |
| Related Vehicle | SMJ311X (Car) | Contact No. | 97323880 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On the 17/04/2019 at about 1530hours along ECP under Marine Parade Flyover towards Changi Airport, I was driving my vehicle bearing car plate number SGN 8976A on the first lane, extreme right. There was a car in front of me bearing car plate number SLP8144P suddenly slow down, came to a stop and to avoid any collision, I applied my e-brake and came to a full stop. There was a distance between me and the first car and I didn't knock until the first car.

After which I felt an impact and there was a car behind me bearing car plate number SJX7809J hit against the rear of my car. The first impact resulted my car to shift forward and bump into the car in front of me. Subsequently I felt that another impact as there was another car also involved in this chain collision.

I then get down the vehicle and there were a total of 6 vehicles involved in this chain collision.



**SINGAPORE
POLICE FORCE**



T/20190417/2203

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20190417/2203

CONTINUATION OF REPORT

The following vehicles are in sequence for the chain collision:

- 1)SLP8144P
- 2)SGN8976A
- 3)SJX7803J
- 4)SMJ311X
- 5)SHB5553H
- 6)SJV6411Z

Traffic Police came down, took photos and all of our particulars. Ambulance came down to made a check on one of the driver and no one was conveyed to hospital. No one was injured during this accident. I wish to state that I was carrying a passenger during the point of time as I am private hire driver. I also wish to state that I am driving 90km/hour. I do have an in-car camera but only able to capture the front view of my car. The driver in front of me also verified with me that I didn't knock until his car.

That's all.



**SINGAPORE
POLICE FORCE**



T/20190417/2203

Police Station Of Origin:
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108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20190417/2203

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 2 ALVIN OH WEI JIE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

17/04/2019 21:33

Officer In Charge Of Case:

TP / GIT /

Staff Sgt SUFIYAN BIN KHARI

Contact No.: 65476390

Classification Of Case:

SN 151

Authentication Stamp

NP168



Signature:

Singapore Police Force

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7233504Z

Name:

CHARLES LEE BOON KENG
(CHARLES LI WENGING)

Birth Date: 11 Sep 1972

Issue Date: 15 Jan 2009



001997761F

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7233504Z



Name:

CHARLES LEE BOON KENG
(CHARLES LI WENGING)

李 汶 慶

Race:

CHINESE

Date of birth:

11-09-1972

Sex:

M

Country of birth:

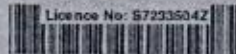
SINGAPORE

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

PASS DATE

Class 3 Motor Cars - < 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 16 Mar 1993

NP 428A



Licence No: S7233504Z



NRIC No: S7233504Z



Date of issue:

15-01-2009

APT BLK 141 SERANGOON NORTH AVENUE 2 #10-02

SINGAPORE 550141

NRIC No:

S7233504Z

Date: 01/10/2018

Land Transport Authority

PDVL/TDVL
33 888 8888
256064

VOCATIONAL LICENCE
Licence No : 87233504Z
Name : CHARLES LEE BOON KENG

Please visit www.lta.gov.sg to check the status of this vocational licence

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 |
|------|---------------------|------------|
| 13 | PRIVATE HIRE CAR VL | 10/07/2018 |



Tokio Marine Insurance Singapore Ltd.

(Company Reg. No: 19230001416) (GST Reg No: M2-0000023-4)
20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046
T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0995 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

FORM MCH

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-MJ000977-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle SGN8976A Chassis No.: ZNE100325270
2. Name of Policyholder TRUE DRIVE
3. Effective date of the Commencement of Insurance for the purposes of the Act 20/07/2018
4. Date of Expiry of Insurance 19/07/2019

5. Persons or Class of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission.
The hirer.
Any other person who is driving on the hirer's order or with his/ 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*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.
Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

* 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: 2417DDA

Insurance Plan: Third Party, Fire & Theft
Limit for total loss or theft: Prevailing Market Value
Policy Excess: Excess-Third Party (See II) SGD 2,500

Tokio Marine Insurance Singapore Ltd.

Authorized Signature

User Name: Yeo Chee Joo Irene - Mot

Printed: 19/07/2018