

NATIONAL Assessment Centre Services. [part 1 Jan 05] MAA49053610

Date In: 25/04/2015 15:04	Job description	Date & Time Completed	Done by
Ref No: NA/INC19007334	SAS e-filing		
Veh No: SFT 6712R	E-mail (4 jobs 3hrs, AIC 2hrs)		
D.O.A: 24/04/2015 16:25	I-Motor Claim Form	MT/NA/1716-00	25/04/2015
OID: (T) Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		15:27
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Whsp		

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

TP Particulars: Vch No: SML 8333U 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 repaler.

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

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

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

2) QC Check / Post Repair Inspection ()

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

Injury: _____

Payment: _____

NA/1903060

Driver/Owner:	1) AR: Accident Reporting (\$30)	
Contact No:	2) DA: Damage Assessment (\$100) INC (\$10)	
Damaged Portion:	3) TP: Towing Fee \$40/\$45	
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120	
Additional Comments:	5) FT: Follow-Through Survey (Resurvey) \$30	
Date:	6) TR: Re-inspection \$75	
	7) NI: Idau DA + SMRT Survey \$160	
	8) NTUC Additional Services:	
	9) NI: Idau Mobil	
	10) NI: Idau Mobil	

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	25/04/2019 15:04
Date Of Accident	24/04/2019 16:25
Exact Location Of Accident	ALONG SHERWOOD ROAD BEFORE MINDEN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT6712R
Insured/Policyholder	
Name Of Registered Owner	SRS AUTO HOLDINGS PTE. LTD.
Co Reg No	201709236H
Email Address	ROGERKTM525@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-94598848
Alternative Phone No	OFFICE-94598848

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5108471704
Cover Note Number	

Driver

Name of Driver	SEOW CHIEW SANG
NRIC No	S1484719G
Date Of Birth	09/09/1949
Occupation	OUTDOOR
Date Of Driving Pass	12/02/1972
Driving Experience	47 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94598848
Fax Number	
Contact Number	OTHERS-94598848
Email Address	ROGERKTM525@YAHOO.COM.SG

Address	BLK 650 ANG MO KIO STREET 61 #16-01
Postcode	560650
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?	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)	2
Passenger 1	NAME: : VICKY GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH (TYPE OF COLLISION IS HEAD TO SIDE)

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	SML8333U
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	91073414
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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**.
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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)

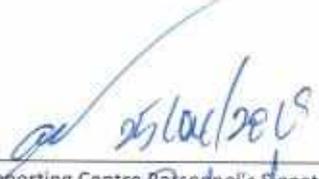
I understand, acknowledge, agree and consent that:

- (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.



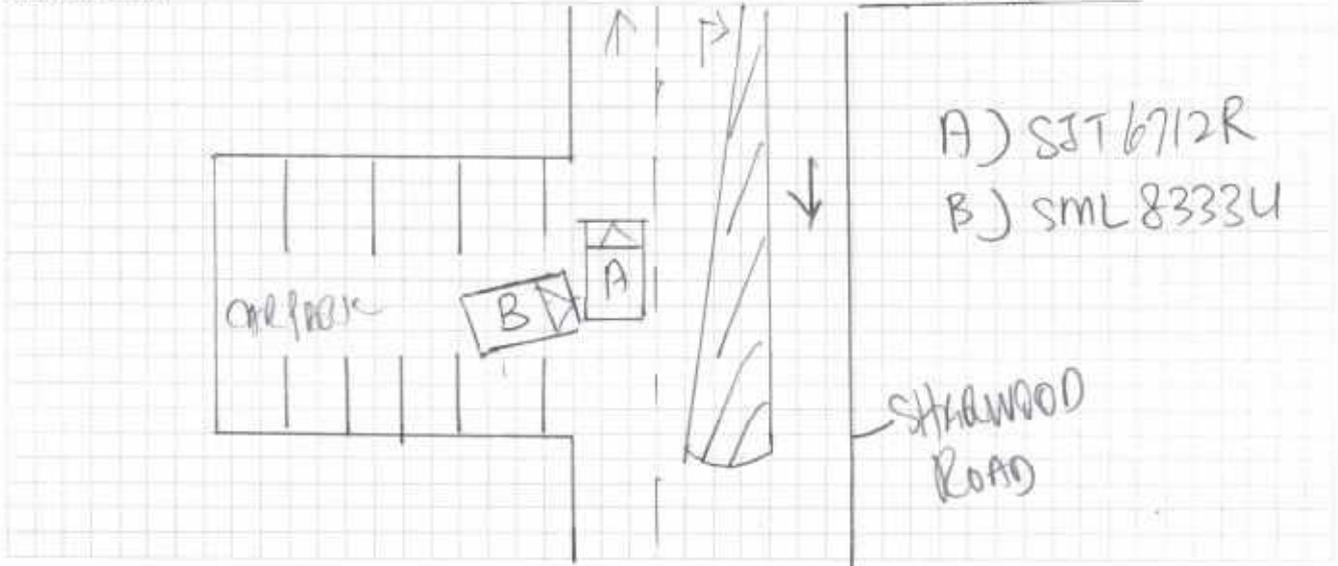
Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time: 1140am
25/04/19


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: 8081 100003

SKETCH PLAN

MINDEN ROAD



A) SJT 6712R
B) SML 8333U

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 24 OF APRIL 2019 AT ABOUT 1620 PM WHILE I WAS TRAVELLING ALONG SHERWOOD ROAD BEFORE MINDEN ROAD, A CAR DROVE OUT FROM CAR PARK ON THE LEFT CAR NUMBER SML 8333U. BACK ON TO THE ROAD LEFT OF MY CAR & MY RIM THAT ALL.

DECLARATION

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



Policyholder's Signature
Date & Time:

[Handwritten Signature]

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

24/04/19 1120

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

Claim Handling

Accident HT/1041716

Policy No.	5108471204	Vehicle No.	5176712R	GST Registration No.	NA
Certificate No.					
Policyholder Name	SRS AUTO HOLDINGS PTE. LTD.			Policyholder NRIC	201709236H
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party	Leading	0
Contact No. (Mobile)	94598848	Contact No. (Office)		Contact No. (Home)	
Email Address		Special Remark		eCode	No
KPI	+ No Yes	TCA	+ No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

Accident Details

Report Date	25/04/2019 15:21	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	24/04/2019	Time of Accident (h:mm)	16:25	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG SHERWOOD ROAD BEFORE HINDEN ROAD				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	0.00	Driver is Covered?	Covered
OD Standard Excess	0.00	TP Standard Excess	1,500.00		
YIELD OD Excess	500.00	YIELD TP Excess	0.00		
Additional Excess					
Total OD Excess Applicable	500.00	Total TP Excess Applicable	1,500.00		

Benefits

GST Registered Information

GST Registered	Yes	GST Registration Date	01/09/2017
GST Registration No.	201709236H	GST Status Verified	Yes
Modification History	25/04/2019 15:25:12 System changed GST Registration No. from NA to 201709236H 25/04/2019 15:25:12 System changed GST Registration Date from 01/01/2015 to 01/09/2017 25/04/2019 15:25:12 System changed GST Status verified from No to Yes		

Policyholder Mailing Address

Address 1	60 UBI CRESCENT	Address 2	#01-01	Address 3	SINGAPORE 408569
Address 4		Address Type	Singapore address	Post Code	408569
Unit No.		Related Policy Number	510847945		

QT Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	09/09/1949
Unnamed driver Name	SEOW CHEW SANG	Driver NRIC	S1484719G	Driving Experience	47
Register Date of Driver License	12/02/1972	Driver Age	69	Contact No. (Home)	
Contact No. (Mobile)	94598848	Contact No. (Office)		Address 1	V10 CHU KANG VISTA
Address 1	BLK 550 #16-01	Address 2	ANG MO KIO STREET 61	Address 3	
Address 4	SINGAPORE 560650	Address Type	Foreign address	Post Code	560650
Unit No.	16-01				
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.	S15712R	Driver Insurer Company	NTUC

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes + No
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Modification History

Claim 001 New

Claim Type *	OO-WK	Insured Name	SRS AUTO HOLDINGS PTE. LTD.	Insured NRIC	201709236H
Contact No. (Mobile)		Contact No. (Home)		Contact No. (Office)	94598848
Email Address		OT		TP	
Claim Description		Vehicle Number	5176712R	Vehicle Number	SM6333U
Preferred Workshop		5176712R / SM6333U ON 24 Apr 2019		Name of Preferred Workshop	
Estimated No. Finalisation	Yes	Insured Liability	Not at Fault	GIA report	Received
Date Registered	25/04/2019 15:26	Repair Option	Unrelated Workshop, Name unknown	Claim Date	25/04/2019 00:00
Report Taken By	ROSLI WAHAB			Date Received	

Print AX letter

Save Submit

Attachment

Accident No.	HT/1041716	Claim No.	001
Let Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	25/04/2019 15:27

Choose File	Category *	Confidential	Urgency *	Description *
No file chosen	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	
No file chosen	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	
No file chosen	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	
No file chosen	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	
No file chosen	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	
No file chosen	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_810676x NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH) on 25 Apr 2019 15:27	Photos	Normal	Photos 2019-4-25	
	NAC_BUKIT_MERAH_810676x NATIONAL ASSESSMENT CENTRE SERVICE 3 (BUKIT MERAH) on 25 Apr 2019 15:27	Photos	Normal	Photos 2019-4-25	



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Apr 2019 15:27	Photos	Normal	Photos 2019-4-25
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Apr 2019 15:27	Photos	Normal	Photos 2019-4-25
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NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Apr 2019 15:26	Photos	Normal	Photos 2019-4-25
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Apr 2019 15:26	Photos	Normal	Photos 2019-4-25
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Apr 2019 15:26	SAE	Normal	SAE 2019-4-25
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 25 Apr 2019 15:26	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-25

Video List

Uploaded By/Date	Folder/Date	File Name	Source	Action
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Display in new window Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 24/04/2019 (DD/MM/YYYY), TIME: 16:23 (HH:MM)

LOCATION: ALONG SHERWOOD RD BEFORE MINDEN RD

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJT6712R
b) INSURANCE COMPANY: INCOVE
c) POLICY NUMBER: 5108471704
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: TOYOTA ALTIS
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: GRAB
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: SRS AUTO HOLDINGS PTE LTD (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: SEOW CHIEW SANG (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S1282196 CONTACT: 94592848
c) ADDRESS: BLK 650, ANA MOKIOS TGL #01-16
5560650

*d) DATE OF BIRTH: 09/09/1949 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 12-02-1972

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

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

6. WAS ANYBODY INJURED (YES/NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SML8333U MODEL: TOYOTA
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: 91073414

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email =

VIDAO

WICKY (M)

* No of passenger
(including driver)
(2)

* No of passenger
(including driver)
()

* No of passenger
(including driver)
()

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1484719G



Name
SEOW CHIEW SANG
萧秋生
Race
CHINESE
Date of Birth **09-09-1949** Sex **M**
Country of Birth
NEGR: SEMBILAN

S1484719G



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S1484719G**
Name
SEOW CHIEW SANG
Birth Date **09 Sep 1949**
Issue Date **15 Dec 2003**




001051340F

Land Transport Authority



VOCATIONAL LICENCE

Licence No : S1484719G
Name : SEOW CHIEW SANG
Issue Date : 21/1/2008

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



0799420



S1484719G



Blood Group Date of Issue
O+ **28-02-1993**

APT BLK 650 ANG MO KIO STREET 61 #16-01
SINGAPORE 660650

NRIC No: S1484719G Date: 29/12/2014

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	12 Feb 1972
Class 2A Motorcycles between 201 cc and 400 cc	12 Feb 1972
Class 2 Motorcycles exceeding 400 cc	12 Feb 1972
Class 3 Motor Cars and Motor Tractors (the weight of which unladen does not exceed 2500 kilograms)	12 Feb 1972

NP 429A



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

Type	Description	Issue Date
02	TAXI VL	09/01/1998



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: 5108471704

Cover : Third Party

- | | |
|---|-------------------------------|
| 1. Index mark and Registration Number of Vehicle | : SJT6712R |
| Chassis Number | : MR053NEE106157734 |
| 2. Name of Policyholder | : SRS AUTO HOLDINGS PTE. LTD. |
| 3. Effective Date of Insurance | : 27 Mar 2019 |
| 4. Expiry Date of Insurance | : 25 Oct 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)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

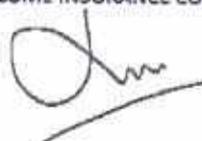
Agency : SININS AGENCY PTE. LTD. (00000615123)
 Date of Issue : 26 Mar 2019 11:04 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive