

# NATIONAL Assessment Centre Services.

(wef 1 Jan 2018)

May 19051258

Date In: 20/04/2019 15:27	Job description	Date & Time Completed	Done by
Ref No: NPA/ACC/9007351/Y	SAS e-filing		
Veh No: FBK 5696C	E-mail (to John, AIC 2hrs)		
D.O.A: 17/04/2019 12:45	I-Motor Claim Form	MM/104799001	26/04/2019
QID (TP) Reporting Only	I-Motor W/O (Within OD 2hrs, TP 4hrs)		11:45
	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: 84 9289 Y	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%; F: 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 repairer.		
( ) 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: _____
Date of Incident: _____
Location: _____
Weather: _____
Time of Day: _____
Other: _____

Driver/Owner:	Contract No:	Damaged Portion:	QC Checked by (Engr-In-Charge):	228																																				
<table border="1"> <tr> <td>1) AR: Accident Reporting (\$30)</td> <td></td> </tr> <tr> <td>2) DA: Damage Assessment (\$100) INC (\$40)</td> <td></td> </tr> <tr> <td>3) TP: Towing Fee</td> <td>\$40/\$45</td> </tr> <tr> <td>4) PT: Follow-Through Survey</td> <td>\$120</td> </tr> <tr> <td>5) FT: Follow-Through Survey (Resurvey)</td> <td>\$30</td> </tr> <tr> <td colspan="2">Forfeiture against INC Only (wef 10 Jun 2009)</td> </tr> <tr> <td>6) TR: Re-inspection</td> <td>\$75</td> </tr> <tr> <td>7) NI: Issue DA + SMRT Survey</td> <td>\$160</td> </tr> <tr> <td>8) NTUC Additional Services:</td> <td></td> </tr> <tr> <td>ON:</td> <td></td> </tr> <tr> <td>9) NG: Courtesy Car / TP Allowance</td> <td>\$15</td> </tr> <tr> <td>10) NG: Repair Coordination</td> <td>\$10</td> </tr> <tr> <td>11) NG: Post Repair Inspection</td> <td>\$25</td> </tr> <tr> <td>12) NG: DV / Collect Excess Coordination</td> <td>\$5</td> </tr> <tr> <td>13) TP (NI): TP (NI) INC (wef 10 Jun 2009)</td> <td>\$30</td> </tr> <tr> <td>14) NI: Issue Mobile</td> <td>\$30</td> </tr> <tr> <td>Invoice dated</td> <td>Fee Charged</td> </tr> <tr> <td>Invoice dated</td> <td>Fee Charged</td> </tr> </table>					1) AR: Accident Reporting (\$30)		2) DA: Damage Assessment (\$100) INC (\$40)		3) TP: Towing Fee	\$40/\$45	4) PT: Follow-Through Survey	\$120	5) FT: Follow-Through Survey (Resurvey)	\$30	Forfeiture against INC Only (wef 10 Jun 2009)		6) TR: Re-inspection	\$75	7) NI: Issue DA + SMRT Survey	\$160	8) NTUC Additional Services:		ON:		9) NG: Courtesy Car / TP Allowance	\$15	10) NG: Repair Coordination	\$10	11) NG: Post Repair Inspection	\$25	12) NG: DV / Collect Excess Coordination	\$5	13) TP (NI): TP (NI) INC (wef 10 Jun 2009)	\$30	14) NI: Issue Mobile	\$30	Invoice dated	Fee Charged	Invoice dated	Fee Charged
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## 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	20/04/2019 15:27
Date Of Accident	17/04/2019 12:45
Exact Location Of Accident	ALONG DUNEARN ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK5696C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AMIR HAMZA BIN SAMAT
NRIC No	S6926271F
Email Address	ZAINI.RAHMAT1269@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83865937
Alternative Phone No	OTHERS-83865937

### Vehicle Particulars

Manufacturer	KAWASAKI
Model	VERSYS 1000 MANUAL
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY TO WORK
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	MOTORCYCLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107353314
Cover Note Number	

### Driver

Name of Driver	MOHD HUSAINI BIN RAHMAT
NRIC No	S1374034H
Date Of Birth	24/08/1959
Occupation	INDOOR
Date Of Driving Pass	01/12/1978
Driving Experience	40 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83865937
Fax Number	
Contact Number	OTHERS-83865937
Email Address	ZAINI.RAHMAT1269@GMAIL.COM

Address	BLK 488 SEGAR ROAD #04-558
Postcode	670488
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG
Police Station Address	ROAD: 1 SEGAR ROAD , POSTCODE: 677738 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190417/2210

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SCH9289Y
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	MOHD HUSAINI BIN RAHMAT
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	FBK5696C
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
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:

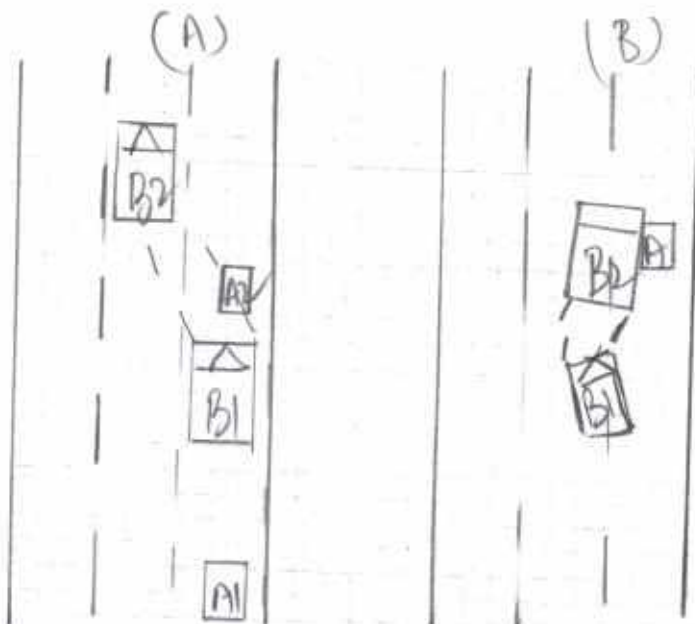
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

SKETCH PLAN

A) FBK5696C

B) SCH9289Y



DUNKARN ROAD TOWARDS  
CITY A/F CITIMETRY  
LINK

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*PS REFER TO POLICE REPORT  
7/20090417/2110 & 7/20150412/2098*

DECLARATION

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

Policyholder's Signature  
Date & Time:

2- 18/4/19 2:40pm  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

25/04/2019  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:





# SINGAPORE POLICE FORCE



T/20190417/2210

1 of 3

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

Report No. T/20190417/2210

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 17/04/2019 22:33	Vide Report No.:	Station Diary No.: 111
--	------------------	---------------------------

**Informant's Particulars**

Name of Informant: MOHD HUSAINI BIN RAHMAT			Address: APT BLK 488 SEGAR ROAD #04-558 SINGAPORE 670488		
ID Type / ID No.: NRIC NO / S1374034H			Contact No.: Home/Office: Mobile: 83865937		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 59	Date of Birth: 24/08/1959	Type of Informant: Rider		
Race: Malay			Language: English		Institution / School Name:
Occupation: MANAGER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 17/04/2019 12:45	Type of Location: Straight Road
Location:  DUNEARN ROAD  TOWARDS CITY, AFTER X-JUNCTION OF CHANCERY ROAD, BEFORE ESSO STATION				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK5696C	Motorcycle					0

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20190417/2210

2 of 3

Police Station Of Origin:

Bukit Panjang N.P.C

1 Segar Road #01-05 SINGAPORE 677738

Tel No: 1800-8929999

Report No. T/20190417/2210

**CONTINUATION OF REPORT**

Rider			
Name	MOHD HUSAINI BIN RAHMAT	ID No.	S1374034H
Related Vehicle	FBK5696C (Motorcycle)	Contact No.	83865937
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	17/04/2019	Date Discharge	17/04/2019
No. of Days granted Medical Leave	06	Degree of Injury	Slight

**Brief Details.**

On 17/04/2019 at around 1245hrs, I was riding my motorbike bearing FBK5696C along Dunearn Road towards city after Chancery Road X-Junction before Esso station on lane 1. There was a Silver Landrover with the word "DISCOVERY" at the back of the vehicle driving in front of me. The silver Landrover then filtered in to the left lane, therefore I sped up. However when I sped up, the Silver Landrover swerved back into lane 1 and hit onto me. I fell off from the bike onto the grasspatch by the right side of the road. I have abrasion on my right knee, right calf and left hand. I also felt pain on my back area. I was subsequently conveyed by the Ambulance.





**SINGAPORE  
POLICE FORCE**



T/20190417/2210

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

3 of 3

Report No. T/20190417/2210

**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:

J /

Sgt 3 CHOO HONG REN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt SUFIYAN BIN KHAIRI

Contact No.: 65476390

Authentication Stamp

NP168

Signature: \_\_\_\_\_

**Singapore Police Force**

Signature Of Informant:

Date/Time:

17/04/2019 22:33

Classification Of Case:



T/20190418/2098

1 of 3

Report No. T/20190418/2098

**Case Summary Form (CSF For NP168)**

Manual NP168 Form Serial No U/20190417/2210

Report Number T/20190418/2098

Vide Report Number

Date/Time of Report Made 18/04/2019 15:56

Place Report Lodged Traffic Police

Type of Informant Rider

Name of Informant MOHD HUSAINI BIN RAHMAT

ID Type / ID No. NRIC NO / S1374034H

Home/Office

Mobile 83865937

Email

Type of Accident Injury / Conveyed By Ambulance

Drink Drive No

Anyone conveyed by ambulance Yes

Date/Time of Accident 17/04/2019 12:45

**SINGAPORE  
POLICE FORCE**

Signature: \_\_\_\_\_

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK5696C	Motorcycle	KAWASAKI	VERSYS 1000 MANUAL	Black		0
SCH9289Y	Car	LAND ROVER	DISCOVERY 3.0D TSS	Silver		0





T/20190418/2098

2 of 3

Report No. T/20190418/2098

### Continuation of CSF For NP168

#### Brief Facts.

ON 17/04/2019 at around 1245hrs, I was riding my motorbike bearing FBK5696C along Dunearn Road towards City after Chancery road X-Junction before Esso Station on lane 1. There was a Silver Landrover then filtered in to the left lane, therefore I continue travelling. However when I was moving, the Silver Landrover swerved back into my lane 1 and hit onto me. I fell off from the bike onto the grasspatch by the right side of the road. I have abrasion on my right knee, right calf and left hand. I also felt pain on my back area. I was subsequently conveyed by Ambulance. That's all.



T/20190418/2098

3 of 3

Report No. T/20190418/2098

### Continuation of CSF For NP168

#### 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.

Case Sensitivity                      No

Officer-In-Charge of Case        TP / GIT /  
SUFIYAN BIN KHAIRI

Classification of Case            1) INJURY / CONVEYED BY AMBULANCE







NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 11:08	Photos	Normal	Photos 2019-4-26
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 11:08	Photos	Normal	Photos 2019-4-26
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NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 11:07	Photos	Normal	Photos 2019-4-26
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 11:07	SAS	Normal	SAS 2019-4-26
NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Apr 2019 11:07	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-26

Video List

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



# ACCIDENT STATEMENT

ACCIDENT DATE: (17 / 4 / 2019) (DD/MM/YYYY), TIME: (12 : 45) (HH:MM)

LOCATION: Duncan Road

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBK 5696 C  
 b) INSURANCE COMPANY: NTUC  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: Kawasaki  
 f) TYPE: (SALEEN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: on my way to work  
 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: EMIR HAMZAH BIN SAMAN (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S6976271F CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: MOHD HUSNAIL BIN KOTMAI (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 83865937  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: (28 / 08 / 1959) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 01/12/2012

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

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: Bukit Panjang

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SCH 9289 Y MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

\* No of passenger  
 (including driver)  
 (1)

\* No of passenger  
 (including driver)  
 ( )

\* No of passenger  
 (including driver)  
 ( )

email = Zaimi.RAHMAT1269@gmail.com  
 VIDEO

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1374034H



Name

MOHD HUSAINI BIN RAHMAT

Race

MALAY

Date of birth

24-08-1959

Country/Place of birth

SINGAPORE

Sex

M



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S1374034H

Name

MOHD HUSAINI BIN RAHMAT

Birth Date: 24 Aug 1959

Issue Date: 28 Jan 2003



6069120



NRIC No. S1374034H



Date of issue

21-11-2018

Address

APT BLK 488 SEGAR ROAD  
#04-558  
SINGAPORE 670488

YOU ARE LICENCED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Vehicle Class	Pass Date
Class 2B	Motorcycles not exceeding 300 cc	01 Dec 1977
Class 2A	Motorcycles between 201 cc and 300 cc	01 Dec 1978
Class 2	Motorcycles exceeding 300 cc	01 Dec 1975
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2,000 kilograms	10 Feb 1982

Fuel Up to the Power of 2!



NP 425A



## 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 : 5107353314

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle

: FBK5696C

Chassis Number

: JKALZT008BA001135

2. Name of Policyholder

: AMIR HAMZA BIN SAMAT

3. Effective Date of Insurance

: 01 Feb 2019

4. Expiry Date of Insurance

: 31 Jan 2020

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

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 business or profession.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) 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)	: \$51,000
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: AMIR HAMZA BIN SAMAT
NAMED DRIVER (2)	: MOHD HUSAINI BIN RAHMAT
HIRE PURCHASE COMPANY	: SPEEDWAY MOTOR PTE LTD
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 : TELESales-DIRECT MARKETING (00000601661)

Date of issue : 31 Jan 2019 17:39 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive