

NATIONAL Assessment Centre Services.

[ver 1 Jan'05]

NA19065650

Date In: 21/05/2019 11:00	Job description	Date & Time Completed	Done by
Ref No: NBS/INC/19008104	SAS e-filing		
Veh No: SFS 6288B	E-mail (3 days 3hrs, AIC 2hrs)		
D.O.A: 18/05/2019 20:45	I-Motor Claim Form	21/05/2019 10:00	
OID: 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/Whse		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SHD 62884	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 repairer.

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

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

Repairer:

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

2) QC Check / Post Repair Inspection ()

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

Injury: _____

Date/Time	AC/TPAS

NA1903749

Driver/Owner:	1) All: Accident Reporting (\$30)	
Contact No:	2) DA: Damage Assessment (\$100) INC (\$80)	
Damaged Portion:	3) TP: Towing Fee \$40/\$45	
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey \$120	
	5) PT: Follow-Through Survey (Resurvey) \$30	
	For claiming against INC Only (ver 10 Jan 2005)	
	6) TR: Re-inspection \$75	
	7) NI: Idao DA + SMRT Survey \$160	
	8) NTUC Additional Services:-	
	Q11:	
	*NS: Courtesy Car / Tpt Allowance \$3	
	*N6: Repair Co-ordination \$10	
	*N7: Post Repair Inspection \$25	
	*N8: DV / Collect Excess Coordination \$3	
	TP (Nil) : TP (Non INC) against INC \$20	
	9) N11: Idao 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	21/05/2019 17:00
Date Of Accident	18/05/2019 20:45
Exact Location Of Accident	WOODLANDS CENTRE ROAD NEAR TRAIN CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFS6288B
Insured/Policyholder	
Name Of Registered Owner	CHAI LOO SANG
NRIC No	S2552490Z
Email Address	LAISHENG.CHA1@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98620880
Alternative Phone No	OTHERS-98620880

Vehicle Particulars

Manufacturer	TOYOTA
Model	HARREIR
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098276713-01
Cover Note Number	

Driver

Name of Driver	CHAI LOO SANG
NRIC No	S2552490Z
Date Of Birth	08/05/1953
Occupation	OUTDOOR
Date Of Driving Pass	10/11/1980
Driving Experience	38 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98620880
Fax Number	
Contact Number	OTHERS-98620880
Email Address	LAISHENG.CHA1@GMAIL.COM

Address	BLK 108C MCNAIR ROAD #29-222
Postcode	324108
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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: : PASSENGER 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 AND ATTACHMENT

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	SHD6988U
Vehicle Make/Model/Colour	HYUNDAI
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)

2

Passenger 1

NAME: ;

GENDER: ;

SKETCH PLAN

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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:

21/5/2019

11:30 Am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

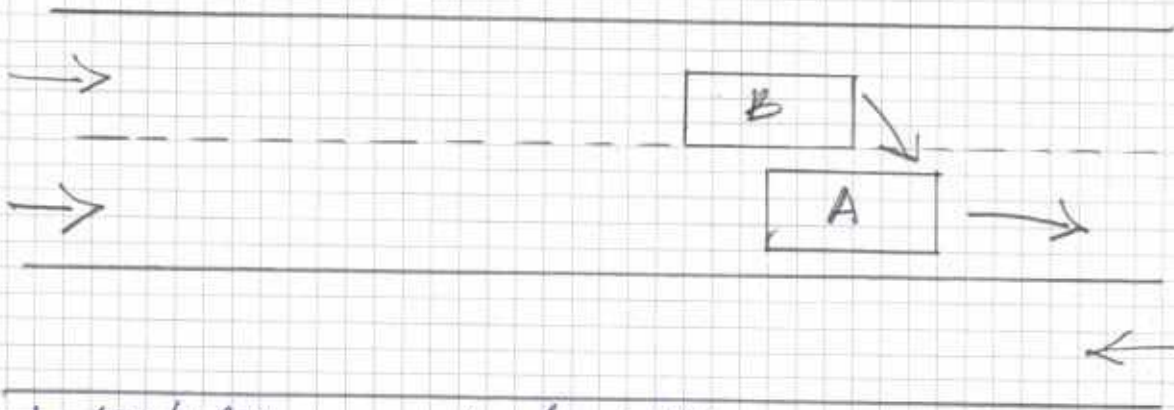
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

SKETCH PLAN

WOODWARDS COUNTRY ROAD NEAR TRAIN OFFICERPOINT



A: 5FS6288B

B: 4HD69886

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per Attached.

DECLARATION

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

Policyholder's Signature

Date & Time:

21/5/2019
11:30 AM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

21/05/2019

Rashid Hassan

REPORT OF ACCIDENT ON 18.5.2019, 20:45PM

Vehicles Involved:-

Owner: Chai Loo Sang / SFS6288B / Private Hired Car (Toyota Harrier)

Owner: Confort Delgro / SHD6988U / Taxi (Hyundai)

Date & Time: 18/05/2019 at 20:45pm

Location: Woodlands Centre Road, junction near Taxi Stand of Woodlands Train Checkpoint.

Photos Attached: Damages of Vehicle SFS6288B collided by SHD6988U with proof of scratches.

Description of Accident:-

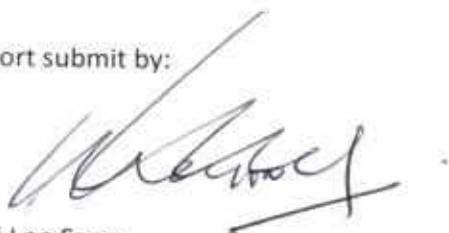
The Taxi SHD6988U was originally queued along the most (left side) inner lane to the Taxi Stand of Woodlands Train Checkpoint.

I was taking a passenger towards the drop-off point near the train checkpoint and was travelled straightly on the central lane parallel to the left inner lane.

A few meter before I turned in to the slip road towards the drop off point, the Taxi driver of SHD6988U suddenly exited from the inner lane and moved out from the queue and collided my vehicle SFS6288B. The Taxi driver just ignored the heavy flow of traffic and changed his lane without taken care of my vehicle that had already passed by his Taxi. The Taxi collided my vehicle (SFS6288B) with long scratches and damaged the car body and doors.

As the checkpoint was in very heavy traffic, we didn't exchange information and phone numbers.

Report submit by:



Chai Loo Sang
NRIC: S2552490Z
Mobile: 98620880

Address: Block 108C McNair Road #29-222 Singapore 324108.





streetdirectory.com

Woodlands Centre Road

Map Directions

Map

Building Directory

What's Nearby

Get Tips

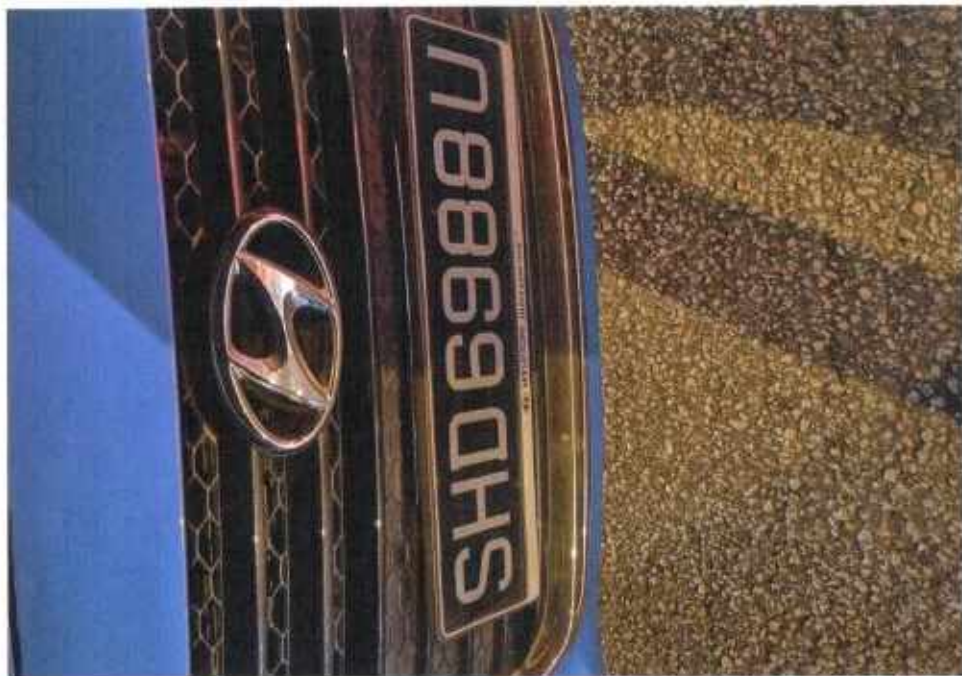
Getting Here

5 Things You Shouldnt Do
If Hes Cheating On You

Woodlands Centre Road



Accident on 18/05 2019, 20:45 pm
Vehicles involved: 57562886 & 54069884 (Taxi).
on 21/05/2019



Comfort belgro Taxi
SHD 6988U

SW 21/05/2019



Toyota Harrier 6288B.



Car 21/05/2019

Claim Handling

Accident MT/1045438

Policy No.	5098276713-01	Vehicle No.	SP562888	GST Registration No.	
Certificate No.					
Policyholder Name	CHAI LOO SANG			Policyholder NRIC	S25524612
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Comprehensive	Leading	0
Contact No.(Mobile)	98620980	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	No *
KFR	Yes	TCA	Yes	eCode Reason	
RCD Protection	No	NCD Entitlement(%)	0	Private Hire	No
Accident Details					
Report Date	22/05/2019 09:59	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	18/05/2019	Time of Accident (h:mm)	20:49	Country of Accident	Singapore
Reporting Centre		Damage Force		ICM No.	
Accident Location	WOODLANDS CENTRE ROAD NEAR TRAIN CHECKPOINT				
Total Excess Applicable					
Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	2,000.00	TP Standard Excess	2,000.00	Driver is Covered?	Covered
YIELD OD Excess	0.00	FORD TP Excess	0.00		
Additional Excess					
Total OD Excess Applicable	2,000.00	Total TP Excess Applicable	2,000.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History	22/05/2019 09:58:37 System changes GST Status Verified from No to Yes				
Policyholder Mailing Address					
Address 1	BLK 108C #29-222	Address 2	MCNAR ROAD	Address 3	TOWNER HEIGHTS
Address 4	SINGAPORE 324108	Address Type	Singapore address	Post Code	324108
Unit No.	29-222	Related Policy Number	5098276713-01		
01 Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	08/05/1953
Unnamed driver Name	CHAI LOO SANG	Driver NRIC	S25524902	Driving Experience	38
Register Date of Driver License	10/11/1990	Driver Age	66	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	TOWNER HEIGHTS
Address 1	BLK 108C #29-222	Address 2	MCNAR ROAD	Post Code	324108
Address 4	SINGAPORE 324108	Address Type	Singapore address		
Unit No.	29-222				
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	SP562888	Driver Insurer Company	NTUC
Declaration					
Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes - No		
Modification History					

Modification History

Claim 001 **NEW**

Claim Type *	OD-MX	Insured Name	CHAI LOO SANG	Insured NRIC	S25524902
Contact No.(Mobile)	98620980	Contact No.(Home)		Contact No.(Office)	+
Email Address	saichang_chai@gmail.com	Vehicle Number	SP562888	TP Vehicle Number	SH06988U
Claim Description	SP562888 / SH06988U On 18 May 2019				
Preferred Workshop		Insured Liability	Not at Fault		
Required Repair Option	Yes	Preferred Workshop, Name unknown		GIA report	Received
Date Registered		Claim Close Date	22/05/2019 09:59	Date Received	22/05/2019 00:00
Report Taken By					
Print AR letter					
Save Submit					

Attachment

Accident No.	MT/1045438	Claim No.	001
Last Doc. Received	Yes No	Upload Date	22/05/2019 10:00
Path *			
Choose File	No file chosen	Category *	Confidential
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		
Message Read			
Attachment List			
Attachment	Uploaded By/Date	Category	Urgency
NAC_BUKIT_MERAH_800678(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 10:00		Photos	Normal
NAC_BUKIT_MERAH_800678(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 10:00		Photos	Normal
Send Message			



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 10:00	Photos	Normal	Photos 2019-5-22
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 10:00	Photos	Normal	Photos 2019-5-22
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 10:00	Photos	Normal	Photos 2019-5-22
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 10:00	Photos	Normal	Photos 2019-5-22
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 10:00	Photos	Normal	Photos 2019-5-22
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 09:59	Photos	Normal	Photos 2019-5-22
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NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 09:59	Photos	Normal	Photos 2019-5-22
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 09:59	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-22
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 09:59	SAS	Normal	SAS 2019-5-22

Video List

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

ACCIDENT STATEMENT

ACCIDENT DATE: 18/5/2019 (DD/MM/YYYY), TIME: 20:45 (HH:MM)

LOCATION: Woodlands Centre Road near Train Checkpoint

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SFS 6288 B
 b) INSURANCE COMPANY: NTUC INCOME
 c) POLICY NUMBER: 5094276713-01
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: TOYOTA HARRIER
 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: CHAI LOO LANG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S85524902 CONTACT: 98620880
 c) ADDRESS: BLK 108C MCNAR ROAD
#29-221 SINGAPORE 304108

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* d) DATE OF BIRTH: 08/05/1953 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 10/11/1980

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

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: SHE 6988 U MODEL: HYUNDAI
 b) DRIVER'S NAME: NIL
 c) NRIC/FIN/PASSPORT: NIL CONTACT: NIL

9. THIRD PARTY VEHICLE

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

email = laisheng.chai@gmail.com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2552490Z



Name

CHAI LOO SANG

謝來生

Race

CHINESE

Date of birth

08-05-1953

Sex

M

Country of birth

MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence No. S2552490Z

CHAI LOO SANG

Birth Date: 08 May 1953

Issue Date: 01 Sep 2003



Land Transport Authority



VOCATIONAL LICENCE

Licence No: S2552490Z

Name: CHAI LOO SANG

Card Issue Date: 19/02/2018

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



3694448

NRIC No. S2552490Z



Date of issue

30-03-2005

Address

APT BLK 108C MCNAIR ROAD #29-222
SINGAPORE 324108

NRIC No: S2552490Z

Date: 29/09/2008

No: 5972748

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of
which (combined) does not exceed 3500 kilograms

10 Nov 1990

NP 438A



Licence No: S2552490Z

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
12	TAXI VL	19/02/2018



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 : 5098276713-01

Cover : Comprehensive

- | | |
|--|-----------------|
| 1. Index mark and Registration Number of Vehicle | : SFS62888 |
| Chassis Number | : ZSU600031051 |
| 2. Name of Policyholder | : CHAI LOO SANG |
| 3. Effective Date of Insurance | : 24 Apr 2019 |
| 4. Expiry Date of Insurance | : 23 Apr 2020 |
| 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. | |
| (b) Use for the carriage of passengers or goods 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 whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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\$2,000
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: MAYBANK SINGAPORE LIMITED
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 : GRABCAR PTE. LTD. (00000601726)
Date of Issue : 15 Apr 2019 15:01 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Authorised Officer



Chief Executive

Countersigned By: