

Met/12050654/01/AN

	RESERVES			
	TPPD	PRESERVE	low	
	TPPI	PRESERVE		
	UNINSURED LOSS	PRESERVE		
	SUBRO	PRESERVE		
	LPPN			
	INVESTIGATION FEE			
	SURVEY FEES		511	
	LEGAL FEES			
	OTHERS			
	FRAUD CHECK			
	UPLOAD TO MERIMEN			
	GRANT RIGHTS			

\*\*\*\*\*  
 \*\*\* TX REPORT \*\*\*  
 \*\*\*\*\*

TRANSMISSION OK

TX/RX NO 1192  
 RECIPIENT ADDRESS 64931928  
 DESTINATION ID  
 ST. TIME 05/07 09:34  
 TIME USE 01'06  
 PAGES SENT 2  
 RESULT OK



## CARZ AUTO SERVICES PTE LTD

UEN/ GST 201409457D

61 WOODLANDS IND PARK E9 (E9 PREMIUM) #04-04 Singapore 757047

Email: alex@carzauto.com.sg

Tel: 65 6493 1924

Fax: 65 6493 1928

2 June 2019

Our Ref: SLJ 1357 U  
 Your Ref: SHB 4483 H

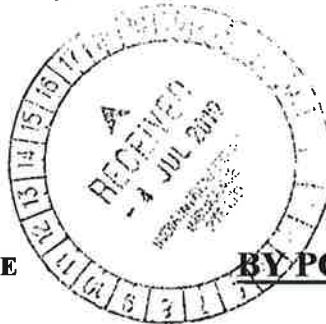
### INDIA INTERNATIONAL INSURANCE SINGAPORE

#### Motor Claims Department

64 Cecil Street #04, #05,

IOB Building

Singapore 049711



BY POST

Dear Sir/Mdm

**ACCIDENT INVOLVING**  
**ON 24 MAY 2019**

SLJ 1357 U / SHB 4483 H ALONG YISHUN AVE 9

Please refer to the above mentioned accident.

We are writing in on the behalf of **MR MUHAMMAD HAKIM BIN ABDUL HALIM** the registered owner of motor vehicle number **SLJ 1357 U** which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle number **SHB 4483 H**

As a result of which, our client have suffered loss and and expenses.

We are instructed by our client to claim for :

- |   |                          |
|---|--------------------------|
| 1. Cost of Repair (Agree with Surveyor) | \$ 9,630.00 (With 7%GST) |
| 2. Loss of Use (9 days) (\$150 per day) | \$ 1,350.00              |
| 3. LTA Search                           | \$ 7.45                  |

#### TOTAL AMOUNT

\$ 10,987.45

We enclosed hereby the following documents for your consideration :

- (A) Final Repair Bill
- (B) GIA Report Lodged by Our Client
- (C) Owner/ Driver Nric/ Driving Licence



# CARZ AUTO SERVICES PTE LTD

UEN/ GST 201409457D

61 WOODLANDS IND PARK E9 (E9 PREMIUM) #04-04 Singapore 757047

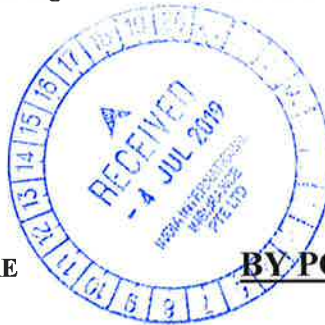
Email: alex@carzauto.com.sg

Tel: 65 6493 1924

Fax: 65 6493 1928

2 June 2019

Our Ref: SLJ 1357 U  
Your Ref: SHB 4483 H



**BY POST**

**INDIA INTERNATIONAL INSURANCE SINGAPORE**

**Motor Claims Department**

64 Cecil Street #04, #05,

IOB Building

Singapore 049711

Dear Sir/Mdm

**ACCIDENT INVOLVING  
ON 24 MAY 2019**

**SLJ 1357 U / SHB 4483 H ALONG YISHUN AVE 9**

Please refer to the above mentioned accident.

We are writing in on the behalf of **MR MUHAMMAD HAKIM BIN ABDUL HALIM** the registered owner of motor vehicle number **SLJ 1357 U** which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle number **SHB 4483 H**

As a result of which, our client have suffered loss and and expenses.

We are instructed by our client to claim for :

- |    |   |                          |
|----|---|--------------------------|
| 1. | Cost of Repair ( <b>Agree with Surveyor</b> ) | \$ 9,630.00 (With 7%GST) |
| 2. | Loss of Use (9 days) (\$150 per day)          | \$ 1,350.00              |
| 3. | LTA Search                                    | \$ 7.45                  |

**TOTAL AMOUNT**

**\$10,987.45**

We enclosed hereby the following documents for your consideration :

- (A) Final Repair Bill
- (B) GIA Report Lodged by Our Client
- (C) Owner/ Driver Nric/ Driving Licence
- (D) Certificate of Insurance
- (E) LTA Search Invoice

Kindly acknowledge receipt of the above said documents and your favorable reply is greatly appreciated.

Yours Faithfully,

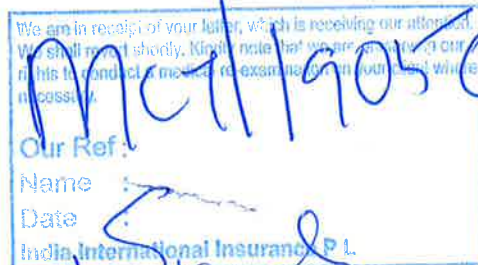


Ms Jeslyn Chua

Account Assistant

Mobile: 65 8322 7418

Email: jeslyn@carzauto.com.sg





# CARZ AUTO SERVICES PTE LTD

UEN/ GST 201409457D

61 WOODLANDS IND PARK E9 (E9 PREMIUM) #04-04 Singapore 757047

Email: alex@carzauto.com.sg Tel: 65 6493 1924 Fax: 65 6493 1928

## FINAL REPAIR BILL

**INDIA INTERNATIONAL INSURANCE SINGAPORE**

**Motor Claims Department**

64 Cecil Street #04, #05,

IOB Building

Singapore 049711

Date : 2/7/2019

Vehicle Number : SLJ 1357 U

Make/Model : AUDI Q5

Date of Accident : 24/5/2019

---

### REPAIR COST

\$ 9,000.00

7% GST \$ 630.00

**GRAND TOTAL** \$ 9,630.00

ISSUED BY



Ms Jeslyn Chua

Account Assistant

Mobile: 65 8322 7418

Email: jeslyn@carzauto.com.sg

## 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	28/05/2019 12:32
Date Of Accident	24/05/2019 07:50
Exact Location Of Accident	YISHUN AVE 9
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ1357U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MUHAMMAD HAKIM BIN ABDUL HALIM
NRIC No	S8518753H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91449841
Alternative Phone No	OTHERS-91449841
<b>Vehicle Particulars</b>	
Manufacturer	AUDI
Model	Q5 3.2 FSI QU S LINE (PANORAMIC ROOF)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA380128/1
Cover Note Number	

### Driver

Name of Driver	SALLEH BIN ALI
NRIC No	S7043340J
Date Of Birth	15/11/1970
Occupation	INDOOR
Date Of Driving Pass	11/07/1995
Driving Experience	23 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81265172
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	228 YISHUN STREET 21 #02-486 SPORE 760228
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	RELATIVE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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)	2
Passenger 1	NAME: : NUR FARAH NADIA BINTE SALLEH GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO SKETCH PLAN/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	SHB4483H
Vehicle Make/Model/Colour	HYUNDAI I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
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 INJURED PERSON 1**

Name MUHAMMAD HAKIM BIN ABDUL HALIM

Approximate Age

Injuries Sustain

Injured person in which vehicle? SLJ1357U

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

**DETAILS OF INJURED PERSON 2**

Name NUR FARAH NADIA BINTE SALLEH

Approximate Age

Injuries Sustain

Injured person in which vehicle? SLJ1357U

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

### SCF TECH PLAN

[illegible]

Environ Biol Fish (2015) 98:1031–1040

2007-08-15  
 2007-08-15  
 2007-08-15

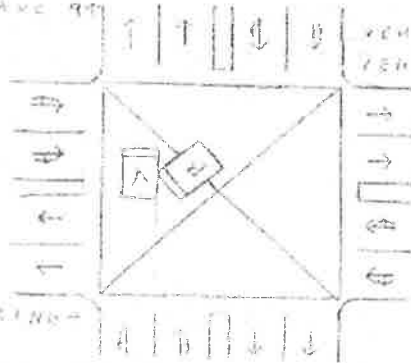
1.  $\frac{1}{2} \log \frac{1}{2}$   
 2.  $\frac{1}{2} \log \frac{1}{2}$   
 3.  $\frac{1}{2} \log \frac{1}{2}$



### Sketch Plan #2

### 5. KLEIN PLAN

6312004 Ave 97



1994	A	54.2	1357	d
1995	B	50.8	9932	h

$$e \in \bigcup_{R \in \mathcal{R}} H \cap N \quad R \cap N \neq \emptyset$$

#### GENERAL CIRCUMSTANCES OF THE ACCIDENT

Do Your Police Report

## DECLARATION

1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 26

1. *Journal of the American Medical Association*, 1997; 277: 1001-1005.  
 2. *Journal of the American Medical Association*, 1997; 277: 1006-1010.

I affirm as best I am able:  
Sue R. Lane

### Accounting for the environment

[illegible]



# SINGAPORE POLICE FORCE



T/20190525/2165

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

1 of 3

Report No. T/20190525/2165

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/05/2019 21:46		Vide Report No.:		Station Diary No.: 296	
<b>Informant's Particulars</b>					
Name of Informant: SALLEH BIN ALI			Address: APT BLK 228 YISHUN STREET 21 #02-486 SINGAPORE 760228		
ID Type / ID No.: NRIC NO / S7043340J			Contact No.: Home/Office: Mobile: 81265172		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 48	Date of Birth: 15/11/1970	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: DELIVERY COURIER			Driving Licence Information: Class: 2A,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 24/05/2019 07:50	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 YISHUN RING ROAD YISHUN AVENUE 9 Junction of Yishun Ring Road and Yishun Avenue 9				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB4483H	Car				Slightly Damaged	0
SLJ1357U	Car				Slightly Damaged	1

**Details of Person Involved**

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



Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	SALLEH BIN ALI	ID No.	S7043340J
Related Vehicle	SLJ1357U (Car)	Contact No.	81265172
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2A,3 Date of Expiry: NIL
Date Treatment	24/05/2019	Date Discharge	24/05/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight
<b>Driver</b>			
Name	NUR FARAH NADIA BINTE SALLEH	ID No.	T0010853C
Related Vehicle	SLJ1357U (Car)	Contact No.	81316893
Hospital/Clinic	NORTHEAST (BUKIT BATOK) 24 HR FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	24/05/2019	Date Discharge	24/05/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 24/05/2019 at about 0750hrs, I was driving my vehicle, SLJ1357U along Yishun Avenue 9 towards the junction of Yishun Ring Road. As I was approaching the junction, I noticed the traffic light was in my fa and as such, I proceed to drive straight. I was driving on the left lane at that point of time.

When I reach the middle of the junction, suddenly a taxi (SHB4483H) from the opposite road ( Yishun Avenue 9) turned right to into my path. I wasn't able to swerve away and the taxi collided onto the right side of my vehicle. I stepped out of the vehicle to assess the damage caused by the accident. I suddenly felt numb on the right side of my body, as such, I immediately called for the SCDF. My daughter was also in the car at the point of time. She only complained of being in a state of shock. She was in a hurry for her exam and left the location shortly after.

The ambulance arrived shortly after as well as the police. I was subsequently conveyed to the Khoo Teck Puat Hospital to received medical attention. I was given 5 days medical leave. My daughter complained of numbness as well after her exam and we proceed to Northeast Medical Group where she was given 3 days medical leave.

My vehicle was towed to the Traffic Police Headquarters. That is all.



**SINGAPORE  
POLICE FORCE**



T/20190525/2165

3 of 3

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

Report No. T/20190525/2165

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

L /

Staff Sgt MUHAMMAD NOOR HAIRI BIN  
ABDUL SALAM

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD RIZWAN BIN KAMALUDIN

Contact No.: 65476185

Signature Of Informant:

Date/Time:

25/05/2019 21:46

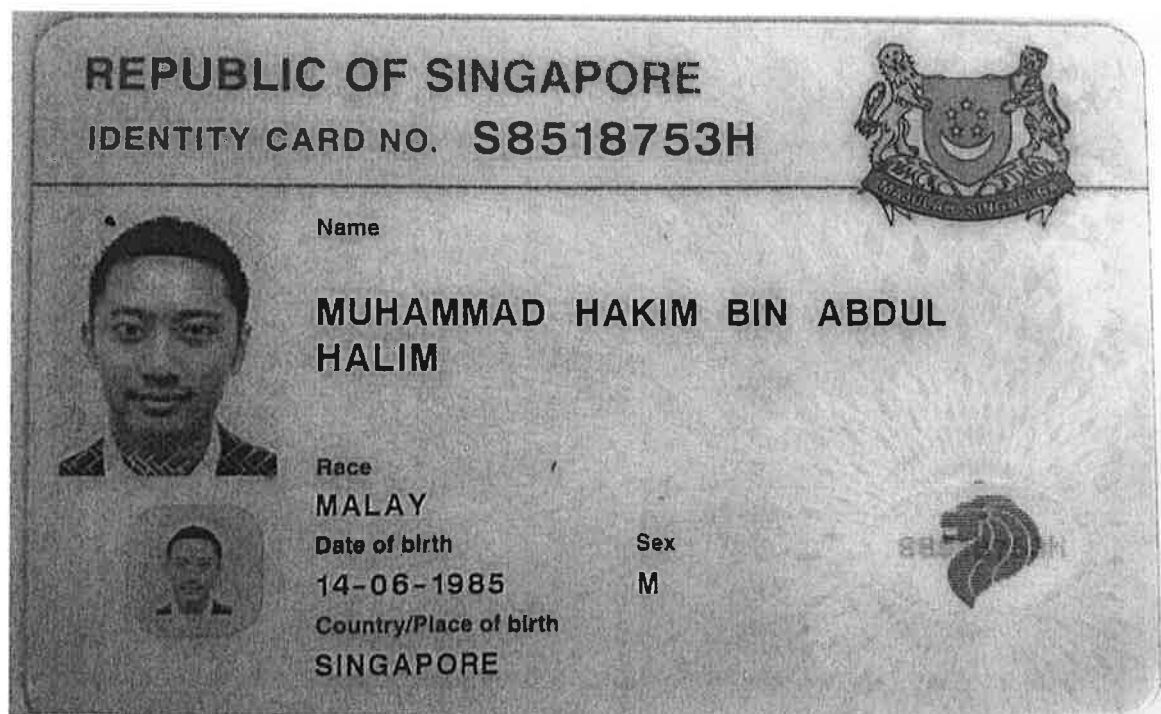
Classification Of Case:

Authentication Stamp

NP168



Owner:



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7043340J



NAT'L

SALLEH BIN ALI

Race  
MALAY

Date of Birth  
15-11-1970

Sex  
M

Country of Birth  
SINGAPORE



02

NRIC No. S7043340J



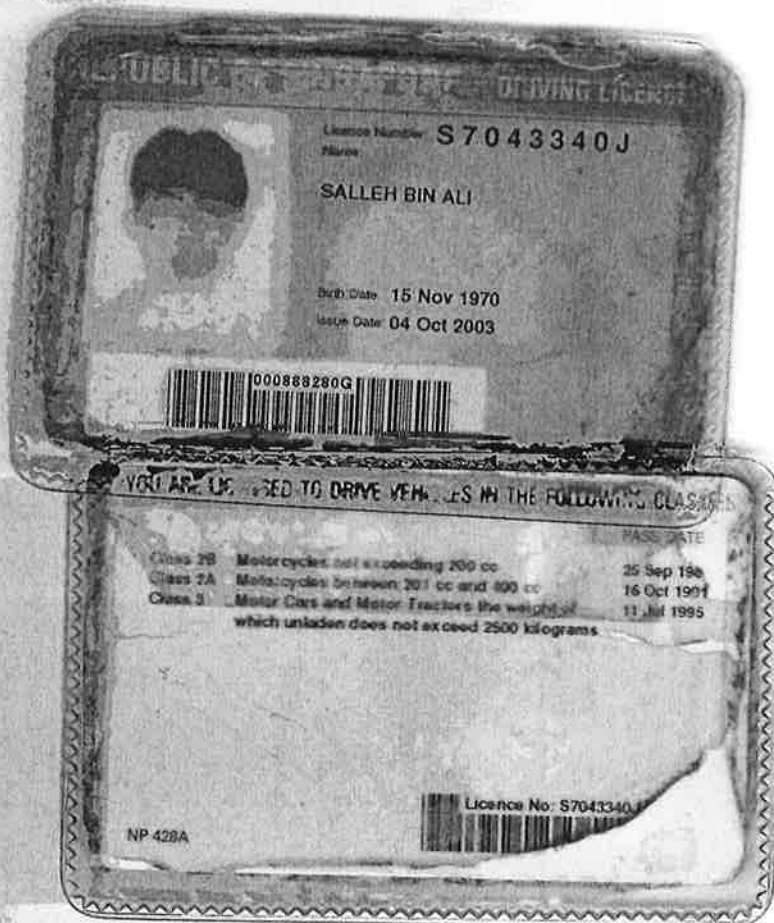
Place of Birth  
Q+

Date of Issue  
22-12-1991

APT BLK 228 YISHUN STREET 21 #02-486  
SINGAPORE 760228

S7043340J 13/07/2013

Driver



Driver



redefining / insurance

AXA Insurance Pte Ltd  
☎ 1800 880 4888 (Within Singapore)  
(65) 6880 4888 (International)  
📠 (65) 6880 4740  
✉ customer.care@axa.com.sg  
🌐 www.axa.com.sg

## Certificate of Insurance

account number  
14278

-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 details

Policyholder name	MUHAMMAD HAKIM BIN ABDUL HALIM	Certificate number	GA380128 / 1
Cover	Comprehensive	Chassis number	WAUZZ8R3AA013421
Plan name	Peace	Engine number	CAL042896
NCD applicable	40%		
Vehicle registration number	SLJ1357U		
Period of Insurance	from 30/07/2018 to 08/09/2019 (both dates inclusive)		
Finance loan company	Nil		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder  
(b) Any person who is driving on the Policyholder's order or with 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.

### Limitation as to use\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

\* 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.

**EXCESS**      Windscreen Excess

Not Applicable

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

### Additional clauses & endorsements to your policy

Nil

I/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).

AXA Insurance Pte Ltd

Authorised signature

### Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.



[> Back to OneMotoring](#)

Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 28 May 2019 / 11:08:20

Receipt Date/Time : 28 May 2019 / 11:08:20

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-190528-000955

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SHB4483H				
As at 24 May 2019/07:50:00				
Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SHB4483H Enquiry Fee 20190528110713618043	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				0.04
<b>Total Amount Payable</b>				7.45
Paid By				
	xxxxxxxxxxxx8843	Credit Card: Visa/MasterCard		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

[Print Receipt](#)[OK](#)[Save as PDF](#)



# CARZ AUTO SERVICES PTE LTD

ROC: 201409457D

## LETTER OF AUTHORITY AND INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SLJ1357U AND SHB4483H  
AT/ALONG YISHUN AVE 9  
ON 24 DAY MAY MONTH 2019 YEAR

- a) I/We, the owner of vehicle no. SLJ1357U hereby instruct and authorize you to commence repair to the said vehicles.
- b) You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
- c) You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.
- d) Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account.
- e) In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shall render full co-operation.
- f) In the event that my/our claim against the third party and/or his insurers is Not successful or cannot be proceeded with, I/we authorized you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respects, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/we shall also be personally liable to bear all legal cost incurred by you in claiming back for the repair cost by your Solicitors.
- g) If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any loses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
- h) I/we have read and understand the above statement and agreed.

Dated this 27 day May month 2019 year

Signature : [Signature]  
Name : Muhammad Hakim Bin Abdul Halim  
NRIC/ROC No. : S 8518753-H  
Address : Apt Blk 950 Jurong West Street  
91 #04-639 Singapore 840950

Company Stamp