

NATIONAL Assessment Centre Services

(cont. 1 Jan 2019)

MMAY19085723

Date to: 27/06/2019 15:15	Job description	Date & Time Completed	Done by
Ref No: NPA/1908/1423/Y	SAS e-filing		
Veh No: GBS 7029	E-mail (within 4hrs, AIC 2hrs)		
D.O.A: 26/06/2019 10:20	i-Motor Claim Form		
OD <input checked="" type="radio"/> TP Reporting Only	i-Motor W/O (within 4hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: YP 5865H

INC () / Non-INC ()

Tel:

Owner / Driver: (

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: ()

Remarks:

(INC hotline: 6788 6616)

Date & Time Completed:

Done by

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

2) QC Check / Post Repair Inspection ()

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

Injury:

Date/Time

Actions

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

In Bill

Add Bill

1) AR: Accident Reporting (\$30):

2) DA: Damage Assessment (\$100): INC (\$80)

3) TP: Towing Fee \$40/\$45

4) FT: Follow-Through Survey \$120

5) FT: Follow-Through Survey (Resurvey) \$30

For claimant against INC Only (wef 10 Jan 2009)

6) TR: Itc-inspection \$75

7) N1: Idau DA + SMRT Survey \$160

8) NTUC Additional Services:

(21)

* N3: Courtesy Car / Tpt Allowance \$5

* N6: Repair Co-ordination \$10

* N7: Post Repair Inspection \$25

* N8: DV / Collect Excess Coordination \$5

TP (N11) : TP (N11 INC) against INC \$20

9) N12: Idau Mobile \$0

Invoice date:

Fee Charged

Invoice date:

Fee Charged

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Cal. 1:

Cal. 2/3:

1/1 P. 1

07-MAY-2019 16:39

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	27/06/2019 15:15
Date Of Accident	26/06/2019 10:20
Exact Location Of Accident	AYE HEADING TOWARDS MCE LAMP POST NUMBER :272
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ702G
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96425179
Alternative Phone No	OFFICE-96425179

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994313
Cover Note Number	

Driver

Name of Driver	AHMAD ZAHIR BIN MOHAMED ALI
NRIC No	S9118656Z
Date Of Birth	02/06/1991
Occupation	OUTDOOR
Date Of Driving Pass	22/06/2016
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96425179
Fax Number	
Contact Number	OTHERS-96425179
EMail Address	NOEMAIL

Address	BLK 329 JURONG EAST AVENUE 1 #04-1680
Postcode	600329
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	6
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : PANDIAN JAIKUMAR GENDER: : MALE
Passenger 2	NAME: : CHANDRA SEKAR A/L PUNUSAMY GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2689999 - FAX NO: 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190626/2136

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	YP5865H
Vehicle Make/Model/Colour	MITSUBISHI
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE

Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number XD1476Z
Vehicle Make/Model/Colour ISUZU
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)

1

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number GX1495P
Vehicle Make/Model/Colour KIA
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number YN6486Y
Vehicle Make/Model/Colour MITSUBISHI
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number XD5595L

Vehicle Make/Model/Colour	VOLVO
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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	AHMAD ZAHIR BIN MOHAMED ALI
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	GBJ702G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	PANDIAN JAIKUMAR
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	GBJ702G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 3

Name	CHAMDRA SEKAR A/L PUNUSAMY
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	GBJ702G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 27/06/19 10:00 HRS

Reporting Centre Personnel's Signature
Name: 51/06/2019
NRIC/FIN No.: 9084 111113

SKETCH PLAN

AYK TOWARDS MCE Lamp Post NUMBER 272

- A) GBJ702G
- B) VP 5865H
- C) XD 1476Z
- D) GX 1495P
- E) YN 6486Y
- F) XD 5595L

F
E
A
B
C
D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Placed Referral to Police Report -

7/20/90628/2136

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(if driver is not the policyholder)

Date & Time: 27/6/2019

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

27/06/2019

Rafael Lim



SINGAPORE POLICE FORCE



T/20190626/2136

1 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20190626/2136

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/06/2019 17:57		Vide Report No.:		Station Diary No.: 234	
Informant's Particulars					
Name of Informant: AHMAD ZAHIR BIN MOHAMED ALI			Address: APT BLK 329 JURONG EAST AVENUE 1 #04-1680 SINGAPORE 600329		
ID Type / ID No.: NRIC NO / S9118656Z			Contact No.: Home/Office: Mobile: 96425179		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 02/06/1991	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: MAINTENANCE			Driving Licence Information: Class: 2B,2A,3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/06/2019 10:20	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY AYE HEADING TOWARDS MCE				
Lamp Post Number: 272				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ702G A	Van	NISSAN	NV200 1.5 MT	White	Seriously Damaged	2
GX1495P D	Lorry	KIA			Slightly Damaged	0
XD1476Z E	Lorry	ISUZU			Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20190626/2136

2 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20190626/2136

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
XD5595L	Lorry	VOLVO			Slightly Damaged	0
YN6486Y	Lorry	MITSUBISHI			Slightly Damaged	0
YP5865H	Lorry	MITSUBISHI			Slightly Damaged	0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	PANDIAN JAIKUMAR		ID No. G7418180K
Related Vehicle	GBJ702G (Van)		Contact No. 96425920
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	26/06/2019	Date Discharge	NIL
No. of Days granted Medical Leave	02	Degree of Injury	NIL
Driver			
Name	AHMAD ZAHIR BIN MOHAMED ALI		ID No. S9118656Z
Related Vehicle	GBJ702G (Van)		Contact No. 96425179
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,2A,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	CHANDRA SEKAR A/L PUNUSAMY		ID No. G8032250Q
Related Vehicle	GBJ702G (Van)		Contact No. 97245619
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	26/06/2019	Date Discharge	NIL
No. of Days granted Medical Leave	02	Degree of Injury	NIL



**SINGAPORE
POLICE FORCE**



T/20190626/2136

3 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20190626/2136

CONTINUATION OF REPORT

Brief Details.

On 26/06/2019 at 1020hrs, I was driving, GBJ702G along AYE on the left most lane heading towards MCE. I suddenly observed the vehicle in front of me, YN6486Y jam braked and I was able to stop in time however, I felt an impact from my rear and it propelled my vehicle forward. My vehicle collided against the front vehicle scaffolding. My vehicle front body panel is badly damaged. I exited my vehicle and observed that there was a chain collision involving altogether 6 vehicles.

Traffic police and ambulance was at scene however, I do not have the report number. No one was conveyed by ambulance.

I have a front in-car camera and it had recorded the accident.



**SINGAPORE
POLICE FORCE**



T/20190626/2136

4 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20190626/2136

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 2 SITI KHAIRUNNISA BINTE RAMANAH

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

26/06/2019 17:57

Officer In Charge Of Case:

TP / GIT /
Staff Sgt SUFIYAN BIN KHAIRI
Contact No.: 65476390

Classification Of Case:

Authentication Stamp
NP168



Traffic Police
AMENDMENT

Traffic Police Department
Charge Office
10 Ubi Avenue 3
Singapore 408865

NP 168 No: T/20190629/2136

Accident Date / Time: 26/06/2019 @ 1020hrs

Vehicle(s) involved: XD5595L

YN6486Y

GBJ702G

YP5865H

XD1476Z

GX1495P

Name: Ahmad Zahir Bin Mohamed Ali

Address: Blk 329 Jurong East Ave 1

#04-1680 S(600329)

NRIC No: S9118656Z


Tel No: 96425179

Date: 26/06/2019

Reference to the previous report, I wish to add as follows:

I would like to state that my vehicle, GBJ702G was hit from the rear by YP5865H. My rear body panel was badly damaged due to the collision.

That is all.


Yours faithfully

JURONG WEST APC
Traffic Police
Tel: 6760 3333

7160333

ACCIDENT STATEMENT

ACCIDENT DATE: (26 / 06 / 2019) (DD/MM/YYYY), TIME: (10 : 20) (HH:MM)

LOCATION: AYK towards MRE Camp

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBT 702G
 b) INSURANCE COMPANY: ATG
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: NISSAN NV200
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Travelling 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: ABDULLAH BIN FANOR (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: ABDULLAH ZAHIR BIN MOHAMED ALI (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: SA186562 CONTACT: 96425179
 c) ADDRESS: 329 JURONG EAST AVENUE 4 #04-1680
SINGAPORE (600329)

* d) DATE OF BIRTH: (02 / 06 / 1991) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 22/06/2016

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

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: Jurong West P.P.C

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ 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)
 ()

* No of passenger
 (Including driver)
 ()

* No of passenger
 (Including driver)
 ()

Email = ATG

VIDEO yes with GLOBE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9118656Z



Name
AHMAD ZAHIR BIN MOHAMED
ALI

Race
MALAY

Date of birth
02-06-1991

Sex
M

Country of birth
SINGAPORE

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S9118656Z

Name
AHMAD ZAHIR BIN MOHAMED
ALI

Birth Date: 02 Jun 1991

Issue Date: 24 Nov 2010

For LKK/NAC Use Only



3893097



NRIC No. S9118656Z

For LKK/NAC Use Only

Date of issue
15-06-2008

Address
APT-BLK 329 JURONG EAST AVENUE 1
#04-1680
SINGAPORE 600329

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

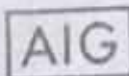
Class 2B	Motorcycles <= 200 CC	24 Nov 2010
Class 2A	Motorcycles between 201 CC and 400 CC	14 Dec 2010
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver, and motor tractor/trail vehicles <= 2500 kg	22 Jun 2010
Class 4	Heavy motor cars and motor tractors > 2500 kg	

S / No. 9000289345

NP 435A

Licence No: S9118656Z





HOTLINE TEL: 800 64 15 2000

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1988
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1989 (MALAYSIA)

M.Z. 400

Comprehensive Commercial Auto Plus
CERTIFICATE NO. 999094313

(The below values are subject to GST)
POLICY EXCESS S\$1,000.00 (I)
WINDSCREEN EXCESS S\$100.00

SUM INSURED Market Value
INSURING WITH COE/PARF Yes
GBJ702G

Goldbell Car Rental Pte Ltd

1) VEHICLE REGISTRATION NO.

2) NAME OF POLICYHOLDER

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE
FOR THE PURPOSES OF THE ACT

01 January 2019

4) DATE OF EXPIRY OF INSURANCE

31 March 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.
Additional Excess of \$3,000 applies to drivers between below 23 years of age and/or with driving experience of less than 12 months.
Additional excess of \$500 applies to all claims for accident outside Singapore.

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) LIMITATION AS TO USE*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
The Policy does not cover:
1) Use for driving tuition, driving test, racing, pace-making, reliability trial or speed-testing.
2) Use whilst drawing a trailer except the towing (other than for reward) of anyone disabled using a mechanically propelled vehicle.
3) Use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired; and
4) Use for any purpose in connection with Motor Trade.

LOSS OF USE Not Included

HIRE PURCHASE COMPANY Maybank

*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.

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).

Issued in Singapore 28 Feb 2019

AIG Asia Pacific Insurance Pte. Ltd.

030123-000

Acorn International Network Pte Ltd
48 Changi South St 1 Level 3
SINGAPORE 486130

AUTHORISED REPRESENTATIVE

SSPTKY

ORIGINAL