

NATIONAL Assessment Centre Services

[wef 1 Jan'05] MHA 119084984

Date In: 4/1/19-11/17	Job description	Date & Time Completed	Done by
Ref No: NA/C721901824/14	SAS e-filing		
Veh No: 6V64414	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 2/7/19-20/15	i-Motor Claim Form		
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	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: 5JN2343m

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: ()

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

NA 11905002

Invoice Preparation Checklist

Am't (\$)

Am't (\$)

Est Bill

Add Bill

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Ref. 1:

Ref. 2 / 3:

- 1) AR: Accident Reporting (\$30);
- 2) DA: Damage Assessment (\$100); INC (\$80)
- 3) TF: Towing Fee \$40/\$45
- 4) FT: Follow-Through Survey \$120
- 5) RT: Follow-Through Survey (Resurvey) \$30
- For claiming against INC Only (wef 10 Jan 2005)
- 6) TR: Re-inspection \$75
- 7) N1: Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- OD*
- *N5: Courtesy Car / Tpt Allowance \$5
- *N6: Repair Co-ordination \$10
- *N7: Post Repair Inspection \$25
- *N8: DV / Collect Excess Coordination \$5
- TP (N11): TP (Non INC) against INC \$20
- 9) N12: Idac Mobile 30

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	04/07/2019 11:17
Date Of Accident	02/07/2019 20:45
Exact Location Of Accident	377 JALAN BESAR PETAIN RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GV6441Y
Insured/Policyholder	
Name Of Registered Owner	M/S AQUAPET CENTRE
Co Reg No	33840500C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88113500
Alternative Phone No	OFFICE-88113500

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE DIESEL
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN3057461803
Cover Note Number	

Driver

Name of Driver	YEW AH POW
NRIC No	S7165868F
Date Of Birth	12/08/1971
Occupation	OUTDOOR
Date Of Driving Pass	02/01/1991
Driving Experience	28 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88113500
Fax Number	
Contact Number	OFFICE-88113500
Email Address	NOEMAIL

Address	BLK 271 TAMPINES STREET 21 #05-113
Postcode	520271
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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	3
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CENTRAL POLICE DIVISIONAL HQ (A DIVISION)
Police Station Address	ROAD: 391 NEW BRIDGE ROAD #03-112 POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2240000 - FAX NO: 62200877
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - A/20190703/7022 & A/20190703/7024

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	SJN2340M
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKU1836H
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	YEW AH POW
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	GV6441Y
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:

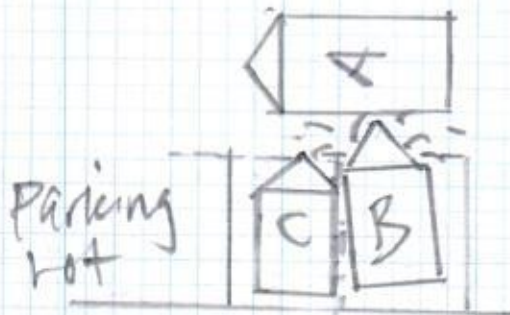
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

SKETCH PLAN



Vehicle A GV644H Y
 Vehicle B SJN2340M
 Vehicle C SKU1836H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Reporting Only
Claim OD
Claim TP
Claim OD / TP at other workshop

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:

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

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 ability.
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 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 03072019
 ☆ Date Of Accident 02072019 2:45
 ☆ Exact Location Of Accident 377 Jalan Besar Petland / Tyrwhitt Rd Conservation Area
 ☆ Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

☆ Vehicle Registration Number GV 6441 Y
Insured/Policyholder
 Name Of Registered Owner / Company m/s Aquapet Centre
 C No / Work Permit No / ROC No 33840500E
 Email Address ecv@elitecarventures.com
 Mobile Phone No (LOCAL) 88113500
 Alternative Phone No
 Others-

Vehicle Particulars

☆ Manufacturer Toyota
 ☆ Model Hace Diesel
 ☆ Exact Purpose for which vehicle was being used at time of accident Private Use / Commercial Use / Hirer Use
 ☆ Are you claiming under your own insurance policy for repair to your vehicle?
 If No, Please state action to be taken Yes / No / Third Party

Vehicle Category

Insurance Company

Name of Insurance Company China Taiping Insurance
 Type Of Coverage Third party
 Fleet Policy
 Policy Number
 Cover Note Number
 Yes / No DMCVSN3057461803

Driver

Name of Driver Yen Ah Pow
 NRIC No S7165868F
 Date Of Birth 12081971
 Occupation
 Date Of Driving Pass Indoor / Outdoor
 Driving Experience 02011991
 Gender male
 Mobile Number
 Fax Number
 Contact Number
 Email Address
 (Local) 88113500
 Others-

- ☆ Address
 ☆ Postcode
 ☆ Was driver an employee of the Insured's Company ☒ Yes / ☐ No
 ☆ If No, Relationship of the Driver with the Insured
 Vehicle Registration Number of Driver's Own Vehicle
 Insurance Company of Driver's Own Vehicle

Blk 271 Tampines Street 21 #05-113
 520271

Owner / Relative / Friend / Parent / Spouse / Children / Sibling / Hirer

General Information of the Accident

- ☆ Type Of Accident
 ☆ Weather Conditions
 ☆ Road Surface

Collision : Main Road & Small Road
 Raining / ☒ Clear / Other :
 Wet / ☒ Dry / Other :

Other Information

- ☆ Was any foreign vehicle involved in this accident?
 ☆ Foreign Vehicle Registration Number
 ☆ Was any body injured in the Accident?
 Was any other material or property damaged?
 Have been approached by unknown person(s)
 Soliciting/offering accident claims assistance.
 ☆ Number of Passengers (Including Driver)

Yes / ☒ No

☒ Yes / ☐ No

☒ Yes / ☐ No

Yes / ☒ No

Name: Yen Ah Pow

Details of Police Action

- ☆ Was the accident reported to the police?
 If Yes, Please state which Police Station
 Police Station Name
 Police Station Address
 Police Station Contact
 Was notice of intended Prosecution given?
 If Yes, against whom?
 Circumstances of Accident

☒ Yes / ☐ No

ROAD:

POSTCODE:

COUNTRY:

TEL NO:

FAX NO:

Yes / No

Attachment(s)

- Are accident photos available for attachment?
 Was there any video captured by Car Camera?
 Was there any audio recorded?

☒ Yes / ☐ No

Yes / ☒ No

Yes / ☒ No

DETAILS OF OTHER VEHICLE PROPERTY 1

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

SJN 2340M

/ SKU 1836H

Details of Witness

- Name
 Phone Number



**SINGAPORE
POLICE FORCE**



A/20190703/7022

1 of 2

POLICE REPORT (NP299)

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Report No. A/20190703/7022

Date/Time Report Made 03/07/2019 17:33	Vide Report No.	Station Diary No.
Name Of Informant YEN AH POW	Address APT BLK 271 TAMPINES STREET 21 #05-113 SINGAPORE 520271	
ID Type / ID No. NRIC NO / S7165868F	Contact No. Home/Office: Mobile: 88113500	
Nationality MALAYSIAN	Email Address metal-solutions@hotmail.com	
Occupation Structural steel worker (workshop)/fabricator	Sex Male	Age 47
Institution/School Name	Date of Birth 12/08/1971	Race Chinese
Date/Time Of Incident 02/07/2019 20:55 - 03/07/2019 08:00	Language English	
	Location Of Incident 377 JALAN BESAR PETAIN ROAD/TYRWHITT ROAD CONSERVATION AREA SINGAPORE 208999	

Brief details.

I was driving in the open Carpark looking for a lot. While driving suddenly I hear a loud bang and felt an impact on the left side of the vehicle. When I got off, I saw that vehicle SJN2340M had collided into my van GV6441Y. I went over to take the details of the driver. S8906283G De Silva Galappathige Gawin Prasanta.

Subjects Involved

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 03/07/2019 17:33
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



**SINGAPORE
POLICE FORCE**



A/20190703/7022

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20190703/7022

Victim			
Person Name	YEN AH POW		
ID Type	NRIC NO	ID No	S7165868F
Gender	Male	Age	47
Race	Chinese	Language	English
Occupation	Structural steel worker (workshop)/fabricator	Address Type	
Address	APT BLK 271 TAMPINES STREET 21 #05-113 SINGAPORE 520271	Mobile No	88113500
Is Informant A Victim?	Yes		
Person Name	YEN AH POW (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 03/07/2019 17:33
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



**SINGAPORE
POLICE FORCE**



A/20190703/7024

1 of 2

POLICE REPORT (NP299)

Report No. A/20190703/7024

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 03/07/2019 17:47	Vide Report No.	Station Diary No.
Name Of Informant YEN AH POW	Address APT BLK 271 TAMPINES STREET 21 #05-113 SINGAPORE 520271	
ID Type / ID No. NRIC NO / S7165868F	Contact No. Home/Office: Mobile: 88113500	
Nationality MALAYSIAN	Email Address metal-solutions@hotmail.com	
Occupation Structural steel worker (workshop)/fabricator	Sex Male	Age 47
Institution/School Name	Date of Birth 12/08/1971	Race Chinese
Date/Time Of Incident 02/07/2019 20:55 - 03/07/2019 00:00	Location Of Incident 377 JALAN BESAR PETAIN ROAD/TYRWHITT ROAD CONSERVATION AREA SINGAPORE 208999	

Brief details.

Add on to my report A/20190703/7022. There was also another stationary vehicle involved SKU1836H. Which was also hit by SJN2340M on the right side of the vehicle.

Subjects Involved	
Victim	
Person Name	YEN AH POW
Signature Of Officer Recording The Report: Not applicable	
Signature Of Interpreter: Not applicable	
Officer In-Charge Of Case:	
Authentication Stamp	
Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.	
Date/Time: 03/07/2019 17:47	
Classification Of Case:	



**SINGAPORE
POLICE FORCE**



A/20190703/7024

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20190703/7024

ID Type	NRIC NO	ID No	S7165868F
Gender	Male	Age	47
Race	Chinese	Language	English
Occupation	Structural steel worker (workshop)/fabricator	Address Type	
Address	APT BLK 271 TAMPINES STREET 21 #05-113 SINGAPORE 520271	Mobile No	88113500
Is Informant A Victim?	Yes		
Person Name	YEN AH POW (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 03/07/2019 17:47
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7165868F



Name

YEN AH POW

袁亞寶

Race

CHINESE

Date of birth

12-08-1971

Country/Place of birth

MALAYSIA

Sex
M

For LKK/NAC Use Only



9344898



NRIC No. S7165868F

For LKK/NAC Use Only



Nationality

MALAYSIAN


Date of issue

22-09-2014

Address


APT BLK 271 TAMPINES STREET 21
#05-113
SINGAPORE 520271

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S7165868F**
 Name: **YEN AH POW**
 Birth Date: **12 Aug 1971**
 Issue Date: **24 Apr 2008**

For LKK/NAC Use Only

001595730D



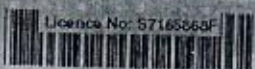
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	PASS DATE
Class 2B Motorcycles \leq 200 cc	04 Aug 2003
Class 2A Motorcycles between 201 cc and 400 cc	04 Aug 2003
Class 2 Motorcycles $>$ 400 cc	04 Aug 2003
Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	02 Jan 1991

For LKK/NAC Use Only

NP 428A

Licence No: S7165868F





中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co. Reg. No. 200208384E

MZ300/C
R SN
AN0365A
Cov. Type: F

MOTOR COMMERCIAL VEHICLE

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)

ORIGINAL

CERTIFICATE No.	DMCVSN3057461803	Engine No : 5L5243792 Chano: LH1621007101
1. Index Mark and Registration Number of Vehicle	GV6441Y	
2. Name of Policy Holder	M/S AQUAPET CENTRE	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	01 November 2018	
4. Date of Expiry of Insurance	31 October 2019	
5. Persons or Classes of Persons entitled to drive*		

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.

6. Limitations as to use:

- (1) Use in connection with the Policyholder's business.
 - (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 - (3) Use for social, domestic or pleasure purposes.
- The Policy does not cover.
- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
 - (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: HIGH POWER ENTERPRISE
Authorised Officer

Jenny Lim

動力企業
HIGH POWER ENTERPRISE
Blk 150 Bishan Street 11
#01-137 Singapore 570150
Tel: 6258 1968 Fax: 6258 7167
Email: gi@highpower.sg

Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com