NATIONAL Assessment Contre Services - 🚧	1 January MN444904086	4
Dute In: 1007 200 19 U Jets description	Date & Time Completed	Done by
Rei Nu: 1 PA JUCCEO ) 255/7 SAS e-Ming		
Veh No. S/ Z 733 P E-mail (wildow Mars.	A1C 2lus;	
D.O.A. JOLO DOUT 19 4 1-Motor Claim F	orm . M 10528536	0 10/07/2019
i-Motor W/O (w	ithin: OD 2hra TP 4hrs)	19142
OD TP Peporting Only i-Plioto Uploade	sd l	
Assessment/Surve	y Report	
TP Insurer: Ask't Report by F	ax / Hand to Owner/Wkap	
Preferred Wksp / INC Assign Wksp / QW: ( -	Tel:	Fax:
P Particulars: Veh No: SM 2533E	INC( )/Non-INC( ).	
Owner / Driver: (	T'el:	)
Policy No: ( ) Period: (	) Cover Type: (	<u> </u>
Conjunice by . (	Date: Time:	1
Insured/Driver Liability: ( %) [Note-Est Status (WO	): N: 0-20%; P: 21-79%. F: 80	100%]
Teal of feegination (	)/NO( )	
Exerss: (\$ ) Londing: \$1,000 ( ) / \$2,000 (	)	<del>, , , , , , , , , , , , , , , , , , , </del>
Jeneral Remarks:	1758 1257 TO 188 1 1 5 4 1 2 1	1. 1.1
( ) Walk-In Costomer's Information strictly Conflict	dential & Strictly NO rafer of repairs	
( ) Total Loss Case : to e-mail Insurer URGENTLY.		
Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO	( ); Towing Co: (	
Remarks: (INC horling: 6788 6616)	Date&Time Completed	Done by
Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		1
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		
Injury:	AND THE PROPERTY OF THE PROPER	58,5°F,280°,
Date/Pline Actions		Construction of the second
1000	and some recent secretary	Anic(s) Anic(s)
NB1905118 "	Invaice Preparation Chreklist	MAN VARIETY
Juinant's Particulars :-	1) AR: Accident Reporting (\$30); 2) DA: Dumnge Assossment (\$100); IN	C (\$80)
Oriver/Owner:	3) TF : Towing Fee	\$407\$45
	4) FT : Fallow-Through Survey 5) FT : Fallow-Through Survey (Resurvey)	530
Contact No:	For claiming against INC Only (well to Jan 6) TR: Ite-inspection	375
Damiged Portion:	7) N1 : Iday DA + SMRT Survey	3160
3	6) NTUC Additional Servines:	
QC. Checked by (Engr-In-Charge):	* NS: Courseay Cor / Tpt Allowance	\$5
	*No. Repair Co-ardination  *No. Fort Repair Inspection	510
Additors Comments:	*Na: DV / Callett Excess Cooldination	\$5
Zal.J.;	TP (NII) : TP (N-14 INC) against INC  5) NII: Ideo Mobils	30
Int. 2./.3:	Invoice dated For Ch	orged Santage
1 \1 ,q	Fire Ch	07-MAY-2018 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 witholding of material facts may allow insurance companies to
- 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. 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

foresaid.	CCIDENT STATEMENT	
	0/07/2019 19:11	
Date Of Report	10/07/2019 14:45	
Date Of Accident	ALONG HOOT KIAM ROAD	
Exact Location Of Accident	SINGAPORE	- 6
Country/State of Loss	TAILS OF OWN VEHICLE	
READ SHEET OF SHEET AND ADDRESS OF THE PARTY	SLZ733P	
Vehicle Registration Number		
Insured/Policyholder	SUNRITA PRIVATE LIMITED	
Name Of Registered Owner	196800361G	
Co Reg No	SEANYEOCS@GMAIL.COM	
Email Address	(LOCAL) +65-92390258	
Mobile Phone No	OFFICE-92390258	
Alternative Phone No	OFFICE-92554855	
Vehicle Particulars	TOVOTA	
Manufacturer	TOYOTA	
Model	VELLFIRE	
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	TO OPERATIVE LTD	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	5110341426	
Cover Note Number		
Driver		
Name of Driver	YEO CHUEN SERN (YANG JUNSHENG)	
NRIC No	S7802577H	
Date Of Birth	17/01/1978	
Occupation	OUTDOOR	
Date Of Driving Pass	13/09/2000	
Driving Experience	18 YEARS AND 9 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-92390258	
Fax Number		
ILEGATOR CONTRACTOR	OTHERS-92390258	
	SEANYEOCS@GMAIL.COM	Page 1
Contact Number EMail Address	SEANYEOCS@GMAIL.COM	Pe

BLK 290D BUKIT BATOK EAST AVENUE 3

#16-364

651290 Postcode

Was driver an employee of the Insured's Company 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

OTHER - HIRER

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

Address

DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2 YES

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

YES NO

Number of Passengers (Including Driver)

1

**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 PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLM2533E

Vehicle Make/Model/Colour

WOLKSWAGEN TOURAN

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

TAY SUE-KIM S8070929C

NRIC/Passport Number Contact Number

98207458

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

YEO CHUEN SERN (YANG JUNSHENG)

Page 2 of 17

Approximate Age Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address Postcode SLIGHT INJURY

SLZ733P

YES

NO

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
  - 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:
  - 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.

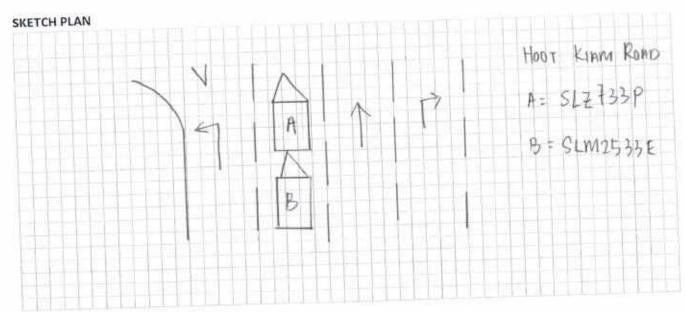
Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder)

Date & Time:

Beporting Centre Personnel's Sign

Name:

NRIC/FIN No.:



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

CRIBE CIRCUMSTANCES OF THE ACCIDENT	- (CI2711D)
on 10/7/2019 at around 247pm, I was driving yelvice	UA CSLETSSTION
in I was the line Culturaly the VC	MICH B CSCH 23730
behind hit the year portion of my vehicle while my	vehicle was stationary -
Devind his the tear borriers of and resident	
(A PIA	

DECLARATION

I/We declare the foregoing Liars a e 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 of Manager Name:
NRIC/FIN No.:

Ident MT/1852853						11	
	3110341426	Veticle No.	SLX733P		GGT Repetration No.	NA.	
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t Valoriani		NCD Entriument(%)	*		Private Hire	Yes	
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Accident Datalla	- Walter White	Recident Report Within 24 hrs	(400)		Accident Type	Collision - Head to B	nar.
ert Date	10/07/2019 19:55	Time of Accident fromes.	14:45		Country of Account	Singapore	
se of Accident	10/07/2019	Orange Force	4255		SCH NO.		
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of Driver Info							
river Name:	Unramed Driver	Driver Type	Unique Driver		SERVICE I	(7/01/1978	
normal driver Name	TEO CHUEN SERVE LYANG JUNEA	Driver SHIE	57802577H		Briver DOS	19	
egister Date of Drover License	13/00/2000	Entre: Age	41		Curtact No. (Hymn)	19.	
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Address 4	SINGAPORE 651390	Apdress Type	Foreign address		PDIC COOR	1111114	
ont No.	15-164				No. of the Control of	WWW.IP	
Does he swn a Singapore legistared car?	Yes - No	Driver Vehicle No.	5LZ733F		Driver Insurer Company	NTOC	
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→ Video List						122,022	
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Arm	NAC_BUNST_MERAH_BOOG76( N S (BUNST MERA)	ATIONAL ASSESSMENT CENTRE SERVICE H)) no 10 Jul 2019 19:42	NRSC/ Driving License	Normal	MAIC/ Driving	g Lemise 2019-7-10	
福	NAC_BUKIT_MERAH_BSDN/NI N S [MUKIT MERA)	ATTOMAL ASSESSMENT CENTRE SERVICE 4) on 10 Jul 2019 19:42	Photos	Reporterial	Photo	± ¥019-7-15	
	NAC_BUNIT_MERAH_BD0676( No S (BUNIT MERAN	RTIONAL ASSESSMENT CENTRE SERVICE (7) on 16 Jul 2019 19:42	Phatus	Accreal	Photo	s 2019-7-10	
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1/040

# ACCIDENT'STATEMENT

1.	DETAILS OF VEHICLE		
1000	a) VEHICLE NUMBER: SLZ 753 P		S4
	b)INSURANCE COMPANY: NTUC		
12	C)POLICY NUMBER: 5110341426		
187	d)POLICY TYPE: (COMPREHENSIVE / THIRD PARTY	/ THÍRD PARTY FIRE 8	THEFT
	OMAKE & MODEL: TOYOTA VELLARE,		
4	F)TYPE: (SALOON / COUPE / MPY /VAN / LORRY /	MOTORCYCLE / OTH	HERS)
	gIVEHICLE CATEGORY: (PRIVATE / COMMERCIAL	/ MOTORCYCLEI '	
	h)PURPOSE OF USING AT ACCIDENT TIME:	ERRAB -	
	I) ARE YOU CLAIMING UNDER YOUR OWN INSURA		
5	IF NO. PLEASE STATE (THIRD PARTY CLAIM / REPO	RTING ONLY	
2.,	INSURED / POLICY HOLDER		67
	AINAME: SUNKITA PRIVATE LIMITE!	(MALE / FEM	ALE)
	b]NRIC/FIN/PASSPORT:	CONTACT:	1/277 <b>4</b> Total (1907)
	c)ADDRESS:		
60	Manual Control of the		
27	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLD	ED ,	+
to of passonger	DRIVER		
- Jer	The Change of the Control of the Con		
wall do to a	DINAME: GO CHUEN SERN	INA ALE LEENAL	151
including driver)	-11 ··· ·· · · · · · · · · · · · · · · ·	MALE / FEMA	(F)
including driver)	b) NRIC/FIN/PASSPORT: S78035774	MALE / FEMA	(E)
(L)	binric/fin/passport: S7803577H		(TE)
(丁)	DINRIC/FIN/PASSPORT: S7802577H  CIADDRESS: 2900 BUILD BATOK 7ALT AL	3 #16-164	
(工)	b) NRIC/FIN/PASSPORT: S7802577H c) ADDRESS: 1900 (SUICH BATOK 7ALT ALE  *d) DATE OF BIRTH: (17 / 01 / 1978) (DD/MM	3 #16-164	· 
(T)	b) NRIC/FIN/PASSPORT: S7803577H  c) ADDRESS: 200 (SUCH BHOK 2ALT AU  *d) DATE OF BIRTH: (17/01/1978) (DD/MM  e) OCCUPATION: (INDOOR / OUTDOOR)	MAAA) :	;
(T)	b) NRIC/FIN/PASSPORT: S7602577H  c) ADDRESS: 2900 (SUICH BATOK 7ANT AU  *d) DATE OF BIRTH: (17/01/1978) (DD/MM  e) OCCUPATION: (INDOOR / OUTDOOR)  #DOTE OF DRIVING PASC 13/09/20	WYYY) :	
( <u></u> )	b) NRIC/FIN/PASSPORT: STEODSTTH  C) ADDRESS: 200 (SUICH BATOK 2AT ALL  *d) DATE OF BIRTH: (17/01/1978) (DD/MM  e) OCCUPATION: (INDOOR / OUTDOOR)  HDATE OF DRIVING PASC 13/09/20  WAS DRIVER AN EMPLOYEE OF THE INSURED'S	MYYY) :	· · · · · · · · · · · · · · · · · · ·
( <u></u> )	b) NRIC/FIN/PASSPORT: STEODSTAND OF THE DRIVER WITH INTERPRETATIONS INDOOR / OUTDOOR)  TO THE OF BRITING PASS 13/09/20  WAS DRIVER AN EMPLOYEE OF THE INSURED'S  IF NO, RELATIONSHIP OF THE DRIVER WITH IN	MYYY)  S COMPANY? (YES:	· · · · · · · · · · · · · · · · · · ·
<ul><li>(⊥)</li><li>4.</li><li>5.</li></ul>	b) NRIC/FIN/PASSPORT: STEODSTAND COLOR COL	MYYY)  S COMPANY? (YES:	· · · · · · · · · · · · · · · · · · ·
(⊥) 4. 5.	b) NRIC/FIN/PASSPORT: STEODSTAND OF THE DRIVER WITH INDICATOR OF THE DRIVE	MYYY)  S COMPANY? (YES:	· · · · · · · · · · · · · · · · · · ·
<ul><li>4.</li><li>5.</li><li>6.</li></ul>	b)NRIC/FIN/PASSPORT: STEODSTTH  c) ADDRESS: STOP (SHICH BATOK 2AT ALL  d) DATE OF BIRTH: (17 / 01 / 1978) (DD/MM  e) OCCUPATION: (INDOOR / OUTDOOR)  thomas of driving PASS 13 / 09 / 20  WAS DRIVER AN EMPLOYEE OF THE INSURED'S  IF NO, RELATIONSHIP OF THE DRIVER WITH IN  D) WEATHER CONDITION: (CLEAR / RAINING / OTH  D) ROAD SURFACE: (DRY / WET / OTHERS  WAS ANYBODY INJURED (YES / NO)	MYYY)  S COMPANY? (YES:	· · · · · · · · · · · · · · · · · · ·
<ul><li>4.</li><li>5.</li><li>6.</li></ul>	b) NRIC/FIN/PASSPORT: STEOD THE COLOR OF THE INSURED'S WAS ANYBODY INJURED (YES / NO)	MYYY)  S COMPANY? (YES:	· · · · · · · · · · · · · · · · · · ·
<ul> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>6.</li> </ul>	b) NRIC/FIN/PASSPORT: STEODSTAND CONTROL OF BIRTH: (17/01/1971) (DD/MM)  b) OCCUPATION: (INDOOR / OUTDOOR)  thome of driving PASC 13/09/20  WAS DRIVER AN EMPLOYEE OF THE INSURED'S  IF NO, RELATIONSHIP OF THE DRIVER WITH IT  b) WEATHER CONDITION: (CLEAR / RAINING / OTH  b) ROAD SURFACE: (DRY / WET / OTHERS  WAS ANYBODY INJURED (YES / NO)  O) REPORTED TO POLICE (YES / NO)  IF YES, PLEASE STATE WHICH POLICE STATION:	MYYY)  S COMPANY? (YES:	· · · · · · · · · · · · · · · · · · ·
<ul> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>6.</li> </ul>	b) NRIC/FIN/PASSPORT: STEEDSTATH  c) ADDRESS: GO GUICH BATOL AND AU  d) DATE OF BIRTH: (17/01/1971) (DD/MM  e) OCCUPATION: (INDOOR / OUTDOOR)  thome of driving PASC 13/09/20  WAS DRIVER AN EMPLOYEE OF THE INSURED'S  IF NO, RELATIONSHIP OF THE DRIVER WITH IT  D) WEATHER CONDITION: (CLEAR / RAINING / OTH  D) ROAD SURFACE: (DRY / WET / OTHERS  WAS ANYBODY INJURED (YES / NO)  D) REPORTED TO POLICE (YES / NO)  IF YES, PLEASE STATE WHICH POLICE STATION:  CHIRD PARTY VEHICLE	MYYY)  S COMPANY? (YES: VSURED:  ERS.	(GO)
4. 5. 6. 7. 6. pasconger	b) NRIC/FIN/PASSPORT: STEEDSTAND AND AND AND AND AND AND AND AND AND	MYYY)  S COMPANY? (YES:	(GO)
4. 5. 6. 7. 6. 8. I	b) NRIC/FIN/PASSPORT: STEODSTAND  c) ADDRESS: 900 (SUICH BATOL TAIT ALL  d) DATE OF BIRTH: (17 / 01 / 1978) (DD/MM  e) OCCUPATION: (INDOOR / OUTDOOR)  thome of driving PASS 13 / 09 / 10  WAS DRIVER AN EMPLOYEE OF THE INSURED'S  IF NO, RELATIONSHIP OF THE DRIVER WITH IN  D) WEATHER CONDITION: (CLEAR / RAINING / OTH  D) ROAD SURFACE: (DRY / WET / OTHERS  WAS ANYBODY INJURED (YES / NO)  D) REPORTED TO POLICE (YES / NO)  IF YES, PLEASE STATE WHICH POLICE STATION:  THIRD PARTY VEHICLE  D) VEHICLE NUMBER: SLM 25332 NO  D) DRIVER'S NAME: TAY SUE - 12M	CONTACT: 929 05  WYYYY)  COMPANY? (YES: VSURED:  ERS  CODEL: Volksw99	N Tou
of passonger cluding driver)	b) NRIC/FIN/PASSPORT: STEEDSTATH  c) ADDRESS: GO (SUICIT BATOL 2 ALT ALE  d) DATE OF BIRTH: (17 / 01 / 1978) (DD/MM  e) OCCUPATION: (INDOOR / OUTDOOR)  thome of driving PASC 13 / 09 / 20  WAS DRIVER AN EMPLOYEE OF THE INSURED'S  IF NO, RELATIONSHIP OF THE DRIVER WITH IT  D) WEATHER CONDITION: (CLEAR / RAINING / OTH  D) ROAD SURFACE: (DRY / WET / OTHERS  WAS ANYBODY INJURED (YES / NO)  D) REPORTED TO POLICE (YES / NO)  IF YES, PLEASE STATE WHICH POLICE STATION:  HIRD PARTY VEHICLE  D) VEHICLE NUMBER: SLM 25332 NO  C) NRIC/FIN/PASSPORT: SRO 70929C	MYYY)  S COMPANY? (YES: VSURED:  ERS.	N Tou
of passonger cluding driver)	b) NRIC/FIN/PASSPORT: STOOSTHED AND AND AND AND AND AND AND AND AND AN	CONTACT: 929 05  WYYYY)  COMPANY? (YES: NSURED: ERS  CONTACT: 9820 76	N Tou
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email = seanyeous@gmail.com VIDBO light@ow.sig XIGOWAN.11@ DW.94

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7802577H





Name

YEO CHUEN SERN (YANG JUNSHENG)

峻昇

For LKK/NAC Use Only

CHINESE

Date of birth

17-01-1978

Country of birth

SINGAPORE

4129599



S7802577H

For LKK/NAC Use Only

think of loous

02-04-2008

APT BLK 2900 BUKIT BATOK EAST AVENUE 3 SINGAPORE 651290



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

EFFECTIVE DATE

Class 3

Motor cars with unladen weight =< 3000kg with =< 7 13 Sep 2000 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

For LKK/NAC Use Only

Licence No:S7802577H

NP 428A



### Certificate of Insurance

\$2,387.67

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) Cover : drivo CLASSIC

Certificate Number: 5110341426

SLZ733P

1. Index mark and Registration Number of Vehicle

: AGH300028399

Chassis Number

: SUNRITA PRIVATE LIMITED

Name of Policyholder

3. Effective Date of Insurance

: 12 Jun 2019

4. Expiry Date of Insurance

: 11 Jun 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.

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. Limitations as to Use#

### This Policy does not cover

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

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

(c) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

: \$\$2,000 EXCESS (SECTION 1) : \$\$1,500 EXCESS (SECTION 2) \$\$100 WINDSCREEN EXCESS : N/A ADDITIONAL EXCESS : PLEASE REFER OVERLEAF VECK WEI CREDIT PTE LTD UNNAMED DRIVER EXCESS Ca. Reg. No. 200512300K - NO REPAIR AT OWNER'S PREFERRED WORKSHOP 218 Turl Club Road YES INSURE WITH COE The Grandstand, Lot A5 : NO NCD PROTECTION Singapore 287995 = NO TRANSPORT ALLOWANCE Tel- 6465 0020 Fax: 6465 0017 : NO cmail: info@teckwei.com.sq EXCESS WAIVER - N/A PRIMARY DRIVER : N/A NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS HIRE PURCHASE COMPANY SUM INSURED

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)

: TECK WEI CREDIT PTE, LTD. (00000572499)

Date of Issue

: 11 Jun 2019 17:15 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

**Authorised Officer** 

Chief Executive

Countersigned By: