

NATIONAL Assessment Centre Services

(see 1. Part 1)

MINA419090364

Date In: 10/07/2019 19:11	Job description	Date & Time Completed	Done by
Ref No: NAI/10052853/19	SAS e-illing		
Veh No: SLZ 733P	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 10/07/2019 19:42	I-Motor Claim Form	mt/1052853-001	10/07/2019 19:42
OD: TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ask't Report by Fax / Hand to Owner/Wkap		

Preferred Wkap / INC Assign Wkap / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

SUN 2533E

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%; F: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Lending: \$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:

NAI90518

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Assessor's Comments:

Cal. J:

Cal. 2/3:

P. 1/1

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 2019) | | |
| 6) TR: It's Inspection | \$75 | |
| 7) N1: Idno DA + SMRT Survey | \$160 | |
| 8) NTWC Additional Services: | | |
| U1P | | |
| * N3: Courtesy Car / Tpt Allowance | \$5 | |
| * N6: Repair Co-ordination | \$10 | |
| * N7: Post Repair Inspection | \$25 | |
| * N8: DV / Collect Excess Coordination | \$5 | |
| TE (N11): TP (Non-INC) against INC | \$20 | |
| 9) N12: Idno Mobile | \$0 | |

Invoice dated

Fax Charged

Fax Charged

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 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 10/07/2019 19:11
 Date Of Accident 10/07/2019 14:45
 Exact Location Of Accident ALONG HOOT KIAM ROAD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ733P
Insured/Policyholder
 Name Of Registered Owner SUNRITA PRIVATE LIMITED
 Co Reg No 196800361G
 Email Address SEANYEOCS@GMAIL.COM
 Mobile Phone No (LOCAL) +65-92390258
 Alternative Phone No OFFICE-92390258

Vehicle Particulars

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

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
 Contact Number OTHERS-92390258
 Email Address SEANYEOCS@GMAIL.COM

Address	BLK 290D BUKIT BATOK EAST AVENUE 3 #16-364
Postcode	651290
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	COLLISION - HEAD TO REAR
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?	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?	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
NRIC/Passport Number	S8070929C
Contact Number	98207458
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	YEO CHUEN SERN (YANG JUNSHENG)
------	--------------------------------

Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SLZ733P
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:

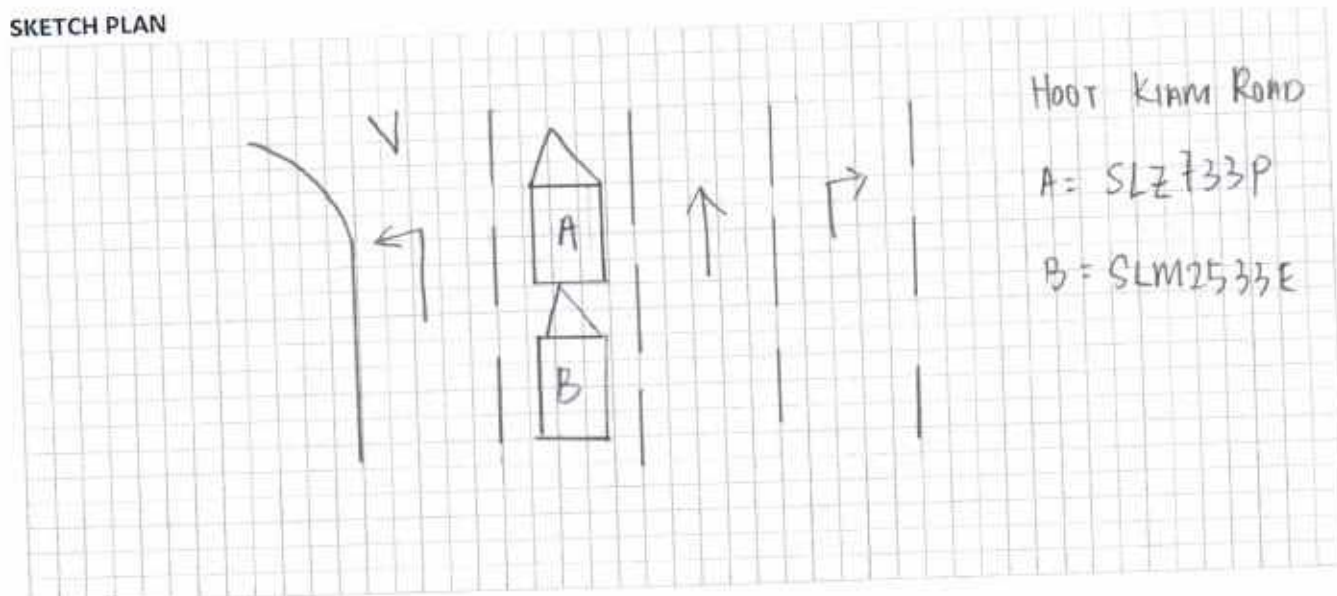
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 10/7/2019 at around 247pm, I was driving vehicle A (SLZ 733P) on Hoot Kiam Road, waiting in the line. Suddenly, the vehicle B (SLM 2533E) behind hit the rear portion of my vehicle while my vehicle was stationary.

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.:

Claim Handling

Accident MT/1052853

Policy No.	5110541426	Vehicle No.	SLZ733P	GST Registration No.	NA
Certificate No.					
Policyholder Name	SUNKITA PRIVATE LIMITED	Cover Type	drive CLASSIC	Policyholder NRIC	196800381G
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	92300258	Special Remark		Contact No.(Home)	
Email Address		TCA	No Yes	eCode	No
ePK	No	NCD Endowment(%)	0	eCode Reason	
NCD Induction	No			Private Hire	Yes

Accident Details

Report Date	10/07/2019 19:35	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	10/07/2019	Time of Accident (Hh:mm)	14:45	Country of Accident	Singapore
Reporting Centre		Change Force		ICM No.	
Accident Location	ALONG HOOT KIAM ROAD				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	2,500.00	TP Standard Excess	1,800.00	Driver is Covered?	Covered
VED OD Excess	900.00	VED TP Excess	0.00		
Additional Excess	0	Total TP Excess Applicable	1,800.00		
Total OD Excess Applicable	2,500.00				

Benefits

GST Registered Information

GST Registered	Yes	GST Registration Date	01/04/1994
GST Registration No.	M200051442	GST Status Verified	Yes
Modification History	10/07/2019 19:40:25 System changed GST Registration No. from NA to M200051442 10/07/2019 19:40:25 System changed GST Registration Date from 01/01/2019 to 01/04/1994 10/07/2019 19:40:25 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	24 LENG KEE ROAD	Address 2	#02-03 LENG KEE AUTOPORT	Address 3	SINGAPORE 150006
Address 4		Address Type	Singapore address	Post Code	150006
Unit No.		Related Policy Number	5110548564		

O2 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	(7/01/1978)
Unnamed driver Name	YEO CHUEN SERN (YANG JUNSH)	Driver NRIC	S7802577H	Driving Experience	18
Register Date of Driver License	13/06/2008	Driver Age	41	Contact No.(Home)	
Contact No.(Mobile)	92390258	Contact No.(Office)		Address 1	SPRING VIEW
Address 1	BLK 290D #10-164	Address 2	SUNIT BATOK EAST AVENUE 3	Post Code	601290
Address 4	SINGAPORE 651290	Address Type	Foreign address		
Unit No.	15-164	Driver Vehicle No.	SLZ733P	Driver Insurer Company	NTUC
Does he own a Singapore Registered Car?	Yes & No				

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes & No
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Modification History

Claim 001

Claim Type *	CD-MX	Insured Name	SUNKITA PRIVATE LIMITED	Insured NRIC	196800381G
Contact No.(Mobile)	95604433	Contact No. (Home)		Contact No. (Office)	93574815
Email Address		VE		TP	
Claim Description	SLZ733P / 6LM25338 ON 10 Jul 2019			Vehicle Number	6LM25338
Preferred Workshop		Insured Liability	Not at Fault	Name of Preferred Workshop	
Submit No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered		Claim Close Date	10/07/2019 19:41	Date Received	10/07/2019 00:00
Report Taken By	ROSLI WANAB				
Print AX letter					

Save Submit

Attachment

Accident No.	MT/1052853	Claim No.	001
Last Doc. Received	Yes No	Upload Date	10/07/2019 19:42
Path *			
Choose File	No file chosen	Clear	Category *
Choose File	No file chosen	Clear	Confidential
Choose File	No file chosen	Clear	Urgency *
Choose File	No file chosen	Clear	Description *
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Message Read		Clear	

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
		SAS	Normal	SAS 2019-7-10	
		Photos	Normal	Photos 2019-7-10	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	Photos	Normal	Photos 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-10
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Jul 2019 19:42	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-10

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
<div>Display in new Window</div> <div>Scan and uploading</div>				

ACCIDENT STATEMENT

ACCIDENT DATE: (10/07/2019) (DD/MM/YYYY), TIME: (14:47) (HH:MM)

LOCATION: HOOT KIAM ROAD

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SL2753P
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5110341426
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: TOYOTA VELLAR
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: ERAB
 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: SUNKITA PRIVATE LIMITED (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: CONTACT:
 c) ADDRESS:

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: YEO CHUEN SEW (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S7802577H CONTACT: 92390258
 c) ADDRESS: 2908 BUKIT BATOK EAST AVE 3 #16-364
 S7651290

*d) DATE OF BIRTH: (17/01/1978) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 13/09/2000

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLM2533E MODEL: Volkswagen Touran
 b) DRIVER'S NAME: TAY SUE-KIM
 c) NRIC/FIN/PASSPORT: S8070929C CONTACT: 98207458

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: MODEL:
 b) DRIVER'S NAME:
 c) NRIC/FIN/PASSPORT: CONTACT:

No of passenger
 (including driver)
 (1)

No of passenger
 (including driver)
 (1)

No of passenger
 (including driver)
 ()

Email = seanyacc@gmail.com

VIDEO 1iani@ow.sg

Xiaowan.li@ow.sg

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7802577H



Name

YEO CHUEN SERN
(YANG JUNSHENG)

杨峻昇

Race

CHINESE

For LKK/NAC Use Only

Date of birth

17-01-1978

Sex

M

Country of birth

SINGAPORE



4124599

MPIC No. S7802577H



For LKK/NAC Use Only

Date of issue

02-04-2008

Address

APT BLK 290D BUKIT BATOK EAST AVENUE 3
#16-364
SINGAPORE 651290

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7802577H

YEO CHUEN SERN
(YANG JUNSHENG)

For LKK/NAC Use Only

Birth Date: 17 Jan 1978
Issue Date: 28 Jun 2017

002697991A



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

EFFECTIVE DATE

Class 3

Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg

13 Sep 2000

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)

Certificate Number: 5110341426

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle

: SLZ733P

Chassis Number

: AGH300028399

2. Name of Policyholder

: SUNRITA PRIVATE LIMITED

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.

6. Limitations as to Use#

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

This Policy does not cover

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

(b) Use 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.

EXCESS (SECTION 1) : S\$2,000

EXCESS (SECTION 2) : S\$1,500

WINDSCREEN EXCESS : S\$100

ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO

INSURE WITH COE : YES

NCD PROTECTION : NO

TRANSPORT ALLOWANCE : NO

EXCESS WAIVER : NO

PRIMARY DRIVER : N/A

NAMED DRIVER (1) : N/A

NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : N/A

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

TECK WEI CREDIT PTE LTD
Co. Reg. No. 200512300K
210 Turf Club Road
The Grandstand, Lot A8
Singapore 287995
Tel: 6465 0020 Fax: 6465 0017
Email: info@teckwei.com.sg

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : TECK WEI CREDIT PTE. LTD. (00000572499)

Date of Issue : 11 Jun 2019 17:15 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive