NATIONAL Assessment Centre Services [ver 1 Jan09] MNA19097506

Date In: 25/07/2019 16:40	Job description	Date & Time Completed	Done by
Ref No: NBA/FMC/1910/31434	SAS e-filing		
Veh No: SJM 6135T	E-mail (within 8hrs, AIC 2hrs)		
D.O.A : 24/07/2019 15:10	i-Motor Claim Form	MT/1059028001	25/07/2019 17:16
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 /MNC Assign Wksp / QW: (Tel: Fax:)

TP Particulars: Veh No: SFY9663A 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: ($) 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: 67886616)	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

NB/905561

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt($) In Bill	Amt ($) Add.Bill
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) FT : Follow-Through Survey (Resurvey)	$30		
For claiming against INC Only (wef 10 Jan 2009)			
6) TR : Re-inspection	$75		
7) N1 : Idno DA + SMRT Survey	$160		
8) NTUC Additional Services:-			
DIP			
* 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 (Non INC) against INC	$20		
9) N12: Idno Mobile	30		
Invoice dated	Fee Charged		
Invoice dated	Fee Charged		

P. 1/1

07-MAY-2018 18:39

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 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	25/07/2019 16:40
Date Of Accident	24/07/2019 15:10
Exact Location Of Accident	NEWTON CIRCUS ROUNDABOUT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJM6135T
Insured/Policyholder	
Name Of Registered Owner	TODDS PARTNERS PTE. LTD.
Co Reg No	201533177E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93824426
Alternative Phone No	OFFICE-93824426
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VIOS
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100477884-01
Cover Note Number	
Driver	
Name of Driver	NORHAN FAREEZ BIN NORHANGINI
NRIC No	S9204520Z
Date Of Birth	12/02/1992
Occupation	OUTDOOR
Date Of Driving Pass	17/09/2014
Driving Experience	4 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93824426
Fax Number	
Contact Number	OTHERS-93824426
EMail Address	NOEMAIL

Address	BLK 223 PENDING ROAD #02-109
Postcode	670223
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	SIDE SWIPE
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?	NO
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFY9663A
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SOK ENG SYLVIA
NRIC/Passport Number	S0350001B
Contact Number	96402178
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :

GENDER: :

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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**.
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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

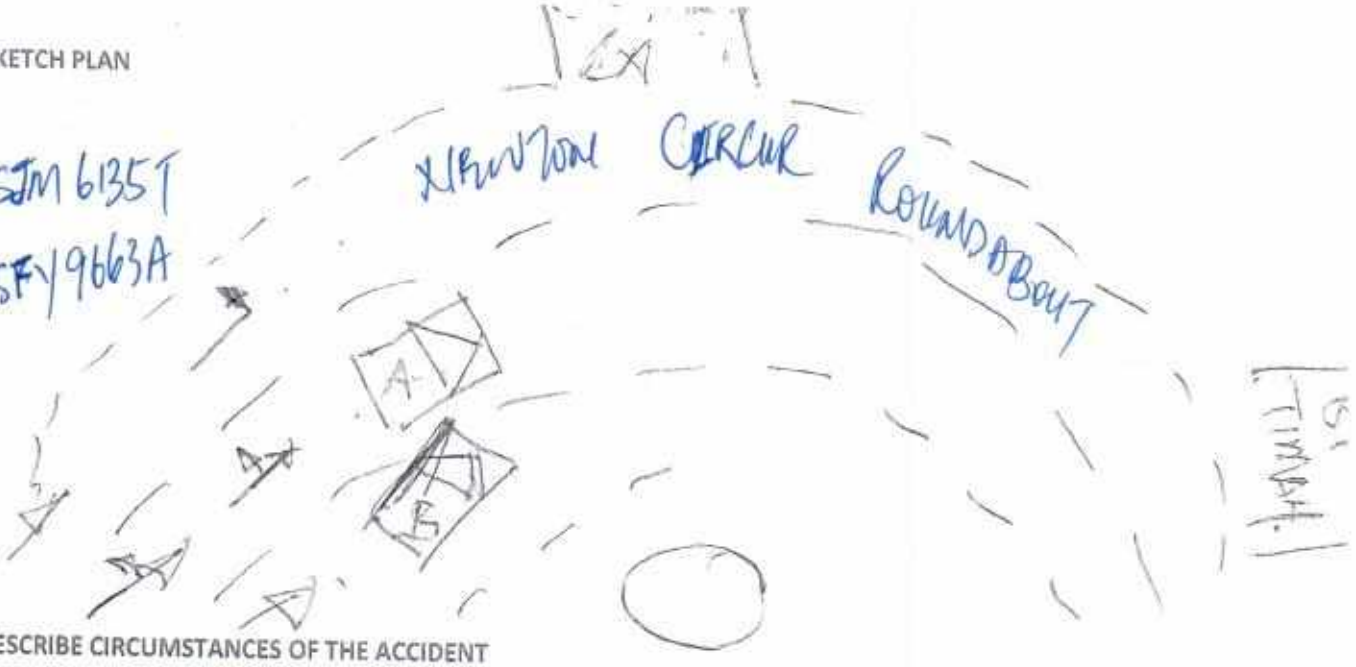
   (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:	Driver's Signature (if driver is not the policyholder) Date & Time:	25/07/2019 Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN

A) SJM 6135T

B) SFY 9663A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was in the third lane in NEWTON CIRCLE, it was a straight going & turning lane. On my left an exclusive left turn lane and on my right an exclusive straight going lane.

As I was in my lane (PHOTOS) and looking in all mirrors to check I realise a blue car right beside me at my right rear. Afraid of being collided into I moved slightly to my left but still in my lane.

However the blue car still came and bang onto my right hand side. I had a shock and stopped immediately. When I came down I realised an elderly woman was the driver and I asked calmly what you doing "why drive like that?" She replied she was going to Scotts Rd. that point of time I pointed to the arrow and told her she was on going straight lane how can she turn.

PAGE 1

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.:

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

She then accuse me of driving to fast. I replied 'barely' when if I was fast "I am in my lane and did not change lane" I also told her how could I be fast in a circle traffic.
She then ask for private settlement I told her will go to workshop and check for pricing
Later in the evening I called her and told her the cost she then got her work shop to call me I told them the cost and they insisted I repaired at their place, I told them I am not the owner and owner wants to do it at their workshop. & the workshop guy told me to claim insurance then.

Page 2

DECLARATION

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

25/01/2018

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/1055038

Policy No.	5100477884-01	Vehicle No.	SJM6135T	GST Registration No.	
* Certificate No.					
Policyholder Name	TODDS PARTNERS PTE. LTD.			Policyholder NRIC	201533177E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	93824426	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	25/07/2019 17:11	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	24/07/2019	Time of Accident hh:mm	15:20	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	NEWTON CIRCUS ROUNDABOUT				

Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	25/07/2019 17:14:28 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	BLK 1002 #01-75	Address 2	BUKIT MERAH LANE 1	Address 3	ALEXANDRA VILLAGE INDUSTRI
Address 4	SINGAPORE 159719	Address Type	Singapore address	Post Code	159719
Unit No.	01-75	Related Policy Number	5109206103		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	NORHAN FAREEZ BIN NORHANG	Driver NRIC	S9204520J	Driver DOB	12/02/1992
Register Date of Driver License	07/09/2004	Driver Age	27	Driving Experience	14
Contact No.(Mobile)	93824426	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 223 #02-109	Address 2	PENDING ROAD	Address 3	SINGAPORE 670223
Address 4		Address Type	Foreign address	Post Code	670223
Unit No.	02-109				
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SJM6135T	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	TODDS PARTNERS PTE. LTD.	Insured NRIC	201533177E
Contact No.(Mobile)	97707633	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SJM6135T	TP Vehicle Number	SFY9663A
Claim Description	SJM6135T / SFY9663A ON 24 Jul 2019			Name of Preferred Workshop	

Preferred Workshop | Insured Liability: Not at Fault | Preferred Repair Option: Preferred Workshop, Name unknown | GIA report: Received

Banker No. Finalisation: Yes

Date Registered	25/07/2019 17:15	Claim Close Date		Date Received	25/07/2019 00:00
Report Taken By	ROSLI WAHAB				

✓ Print AK letter

Save | Submit

Attachment

Accident No.	MT/1055038	Claim No.	001
Last Doc. Received	Yes No	Upload Date	25/07/2019 17:16

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Reset

Send Message

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description	Msg Sent? (CD)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos		Normal	Photos 2019-7-25	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos		Normal	Photos 2019-7-25	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos		Normal	Photos 2019-7-25	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:16	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:15	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:15	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:15	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:15	Photos	Normal	Photos 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:15	SAS	Normal	SAS 2019-7-25
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 25 Jul 2019 17:15	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-25

Video List

Uploaded By/Date	Folder Date	File Name		Source	Action

Display in New Window | Scan and uploading

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report [illegible] the details of the accident to speed up the claims process.
2. This [illegible] must be completed by the Policyholder and/or the Authorised Driver.
3. [illegible] as detailed and accurate as possible. Any wilful misrepresentation or witholding of material facts [illegible]
4. [illegible] is not an admission of policy liability on the part of the insurance companies.
5. Accidents should be [illegible] to the Police for investigation.
6. The report will be [illegible] by the insurers of the insurers at the [illegible] Records Management Centre established by the General Insurance Association of [illegible] and true copies of this report will for a fee be made available upon application by interested parties.
[illegible] 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 [illegible]

ACCIDENT STATEMENT

Date Of Report: 25 07 19

Date Of Accident / Time: 24 07 19 1510hrs

Exact Location Of Accident: NEWTON ROUNDABOUT

Country/State of Loss: SINGAPORE.

DETAILS OF OWN VEHICLE

Vehicle Registration Number: SJM 6135 T

Insured/Policyholder:

Name Of Registered Owner / Company: TODDS PARTNERS P/L

NRIC No / [illegible]:

Email Address:

Mobile Phone No: 9770 7613

Alternative Phone No:

Vehicle Particulars: TOYOTA VIOS

Manufacturer:

Model:

Exact Purpose for which vehicle was being used at time of accident: WORK (HIRED)

Are you claiming under your own insurance policy for damage to your vehicle? NO

If No, Please state action to be taken: CLAIM THIRD

Vehicle Category:

Insurance Company: NTUC

Name of Insurance Company:

Type Of Coverage: DRIVO CLASSIC

Fleet Policy:

Policy Number: MR 053 HY930509 7003

[illegible]

Driver:

Name of Driver: NORHAN FAREEZ BIN NORHANGINI

NRIC No: S920 4520 Z

Date Of Birth: 12 02 92

Occupation:

Date Of Driving Pass: 07 SEPT 2004

Driving Experience:

Gender: MALE

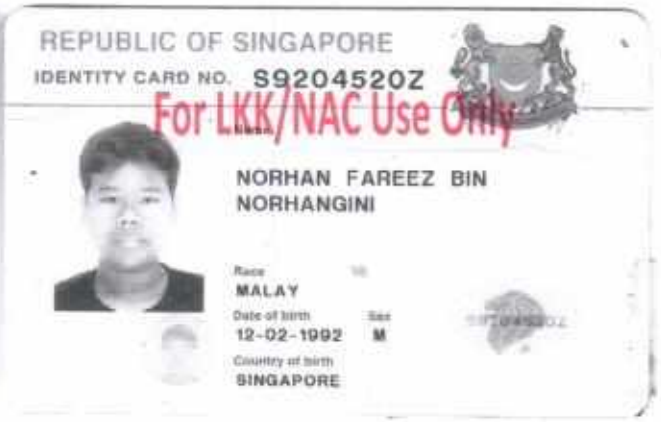
Mobile Number: 9382 4426

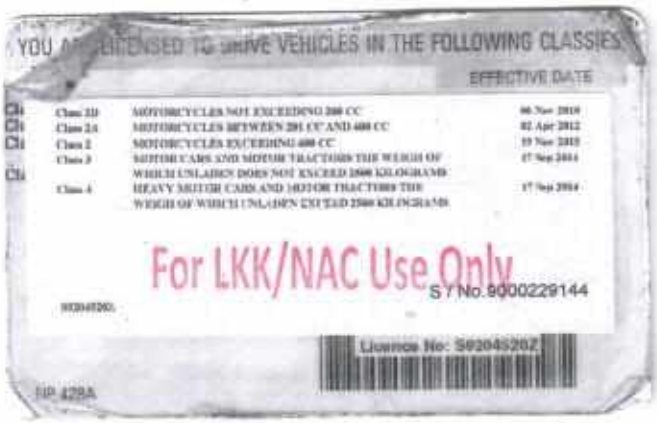
Fax Number:

Contact Number:

E-mail Address:


REPUBLIC OF SINGAPORE DRIVING LICENCE
S9204520Z
NORHAN FAREEZ BIN
NORHANGINI
For LKK/NAC Use Only
Birth Date 12 Feb 1992
Issue Date 17 Sep 2014
0023461431H


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9204520Z
For LKK/NAC Use Only
NORHAN FAREEZ BIN
NORHANGINI
Race
MALAY
Date of birth
12-02-1992
Sex
M
Country of birth
SINGAPORE


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES
EFFECTIVE DATE
Class 2B MOTORCYCLES NOT EXCEEDING 200 CC
Class 2A MOTORCYCLES BETWEEN 201 CC AND 400 CC
Class 2 MOTORCYCLES EXCEEDING 400 CC
Class 3 MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2500 KILOGRAMS
Class 4 HEAVY MOTOR CARS AND MOTOR TRACTORS THE WEIGH OF WHICH UNLADEN EXCEED 2500 KILOGRAMS
For LKK/NAC Use Only
S/No.9000229144
License No: S9204520Z
HP 429A


4020597
NRIC No. S9204520Z
For LKK/NAC Use Only
Date of issue
24-03-2007
APT BLK 223 PENDING ROAD #02-109
SINGAPORE 670223
NRIC No: S9204520Z
Date: 14-02-2013
7318294

income
made different

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)

Certificate Number: 5100477884-01 **Cover** : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SJM6135T**
   Chassis Number : MR053HY9305097003
2. Name of Policyholder : TODDS PARTNERS PTE. LTD.
3. Effective Date of Insurance : 12 Jan 2019
4. Expiry Date of Insurance : 11 Jan 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

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 : SININS AGENCY PTE. LTD. (00000615123)
Date of Issue : 11 Jan 2019 09:43 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive