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TP Particulars: Veh No:	7502 INC	()/Non-INC().	1: 1/4	
Owner / Driver: (T'cl;)	
Policy No: () Period	:()	Cover Type: ()	
Constrmed by : (Dates	Time)	
Insured/Driver Liability: (%) [Not	c-Est Status (WO): N: 0-	20%; P: 21-79%. F: 80	-100%]	
Year of Registration: () War	tanty; YES()/NO()		
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Apply for Transport Allowance () / Court	teny Cor (Date at this Composit	11 (39) 2 (20)	
2) QC Check / Post Repair Inspection	()		 	
-3) Upload Resurvey Photo [Repair Cost > \$300)	01 ()			
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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 withoiding 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.
- 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	06/08/2019 14:06
Date Of Accident	27/07/2019 08:50
Exact Location Of Accident	ALONG PIE TOWARDS BEFORE EXIT TO DUNEARN ROAD
Country/State of Loss	SINGAPORE SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBG1620T
Insured/Policyholder	, , , , , , , , , , , , , , , , , , , ,
Name Of Registered Owner	ROSLI BIN JAMIL
NRIC No	S9447213Z
Email Address	ROSLI_J@OUTLOOK.COM
Mobile Phone No	(LOCAL) +65-93278074
Alternative Phone No	OTHERS-93278074
Vehicle Particulars	511LN5-53276074
Manufacturer	YAMAHA
Model	FZ16-153CC (M)
Exact Purpose for which vehicle was being used at time of accident	TRAVELLING TO WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
Vehicle Category	MOTORCYCLE
Insurance Company	TONO I SEE
Name of Insurance Company	NTUC INCOME INSURANCE OF THE
ype Of Coverage	NTUC INCOME INSURANCE CO-OPERATIVE LTD THIRD PARTY
Teet Policy	NO
Policy Number	5095226971-01
Cover Note Number	55552531 [-0]
Priver	
ame of Driver	POSIL PINE
MANAGEM PARAMETERS	ROSLI BIN JAMIL

ROSLI BIN JAMIL NRIC No S9447213Z Date Of Birth 21/12/1994 Occupation INDOOR Date Of Driving Pass 10/01/2017 Driving Experience 2 YEARS AND 6 MONTHS Gender MALE

Mobile Number

(LOCAL) +65-93278074 Fax Number

Contact Number OTHERS-93278074

EMail Address ROSLI_J@OUTLOOK.COM Address

BLK 570A WOODLANDS AVENUE 1

#12-878

Postcode

731570

Was driver an employee of the Insured's Company

If No. Relationship of the Driver with the Insured

OWNER

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?

YES

Foreign Vehicle Registration Number

JJE7502 (COMMERCIAL VEHICLE)

Number of vehicles (including own vehicle) involved in the accident

YES

Was any body injured in the Accident? Was any injured conveyed to hospital by

ambulance?

YES

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)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Address

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190727/7014

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

COMMERCIAL VEHICLE

Vehicle Registration Number Vehicle Make/Model/Colour

JJE7502

Details Of Properties

Vehicle Category

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

Approximate Age

ROSLI BIN JAMIL

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBG1620T

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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
- 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
- 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:

- 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)
 - (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
- 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

Driver's Signature (If driver is not the policyholder)

Date & Time:

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/07/2019 at about 08 50 hr, I was fravelling on PIE
Howards That to go to work. I was on lane 2 of the exometry
and made a lane Change to some 1 as a tritle to averter
Tentor Slower Vehicles in front of me. As I was travelling on
lane I and approaching Exit 260, a Majoria view wall states
number) JE 7502 from lane 2 made a sudden tane Change
mo my lane. I horned at the driver to all him at a new
however he forled to revert back to his lane and protected
with the lane Change, The rear part of the Majousia Vahiere
hit the first part, on the left Side of my motorcycle conting
causing me to fell on my left. As a result, I suffered alucsous
Daliet 140000 12000 1000
Police Ruson 1/20180721/7014

DECLARATION

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

Policyholder's Signature

Date & Time: 05 03 2019

1210hg

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

NRIC/FIN No.:





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20190727/7014

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/07/2019 23:46		Made:	Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars			
	Name of Informant: ROSLI BIN JAMIL		Address: 570A WOODLANDS AVENUE 1 #12-878 SINGAPORE 731570		
ID Type NRIC N	ID Type / ID No.: NRIC NO / S9447213Z		Contact No.: Home/Office: Mobile: 93278074		
National SINGAF	ity: ORE CITIZ	EN	Email: rosli_j@outlook.com		
Sex: Male			Type of Informant: Rider		
Race: Malay			Language: English	Institution / School Name:	
Occupat	Occupation: Customer service clerk		Driving Licence Information: Class: 2B	Date of Expiry:	

Type of Accident:	Injury Conveyed By Ambula	nce Drink Drive: No	Date/Time of Accident: 27/07/2019 08:5	Type of Location near exit 26a
Location; PAN ISLAND Weather: Clear	100	Road Surface:		Road Speed Limit: 90 Km/h
Traffic Flow: Traffic		Traffic Control: Not Controlled		Traffic Volume:
	ion:			Anyone conveyed by

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG1620T	Motorcycle	YAMAHA	FZ16	Black	Slightly Damaged	0
JJE7502	Van					0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
FBG1620T	NTUC Income Insurance Co-Operative Limited				



Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

2 of 3 Report No. T/20190727/7014

CONTINUATION OF REPORT

Details of Perso	KIND OF THE PROPERTY OF THE PARTY OF THE PAR			1000		
Any Pedestrian I	nvolved: No					
No. of Pedestriar	ns Injured: NIL		Use of F	edestriar	Cross	sing: NA
Rider		- 15 D				
Name	ROSLI BIN JAMIL		ID No		S9447213Z	
Related Vehicle	FBG1620T (Motorcycle)			Conta	ct No.	93278074
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL			Class Drivin Licen Expir	g	Class: 2B Date of Expiry: NIL
Date Treatment	27/07/2019	Date Di	scharge	27/07	/2019	
No. of Days granted Medical Leave 05			of Injury	Slight		

Brief Details.

On 27/07/2019 at about 0850hrs, i was travelling on PIE towards Tuas. I was on lane 2 of the expressway. In front of me, there was a Malaysia vehicle bearing plate number JJE7502.

Before reaching Exit 26a, i have made a lane change to lane 1 as i wish to overtake the few vehicles in front including the mentioned Malaysia vehicle.

While as i was travelling in lane 1 and aproaching Exit 26a chevron marking, the Malaysia van abruptly change lane from lane 2 into my lane.

Upon noticing the sudden lane change, i horned at the driver to alert him of my presence however, the driver failed to revert back to his original position and still proceeded to change lane.

The rear part of the Malaysia vehicle hit the front part, on the left side of my motorcycle causing me to fall on my left and was dragged a few distance.

After gaining momentum of myself after the fall with the help from other motorists and the Malaysia vehicle driver, the driver apologised to me and informed that he intended to filter and exit. He was on GPS and was confused of the directions.

A while later, LTA marshal, Orange Force rider from NTUC, Ambulance and Traffic Police arrived at scene.

I was attended by paramedics and conveyed to NUH.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20190727/7014

CONTINUATION OF REPORT

Sketch Plan					
Informant is	not	able	to provide	sketch	pla

Authentication Stamp

NP168

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: 27/07/2019 23:46
Officer In Charge Of Case: TP / TPHQ / MARIAH BINTE ZAKARIA Contact No.: 65476433	Classification Of Case:

Accident MT/1056694					
Peticy No. Certificate No.	gdex13ex17-07	Wellische Wid.	10591091	GST Kegebrahan No.	
Policyholplet Name	ROSLI BIN JAMIL				
Promett Code	MOTORCYCLE INSURANCE	5575270		PolicyTender NRUC	594472132
Contact No.(Modele)	P32TB074	Cover Tape	Third Party	Londing	9
finell Admess	Lawrence.	Center No.70ff(x)		Contact Neclinome	
riv.	- No Yes.	Speciel Remark		-e Clade	No. *
NCD Protection		PER:	The floor	eCade Ressure	ANTONIO
W Accident Details	fee.	NCO Dissenses(%)	41	Private serie	.14c -
Input Date					100
PAID of Accollects	Devolution terms	ACCIDENT Report, William 24 febr	Year	nondert fare	Not Smile
	27/07/2014	Time of Accident en. mm	500 (0.0)	Country of Accident	
Reporting Centre		Grange Fince		159 80.	Singapore
ACCIDENT Location	ALONG PIE TOWARDS IMPORT ENT TO DUNEA	EN ROAD		357,346	
T Excess					
lw/ samage Excest	0.00	Additional Excess			
ivrumed Driver Excess		District Singapore QO Excess		Windscript Sedan	
THE PARTY EXCESS	9.00	Conside Singacore TP Excess			
Senetta					
 GST Registered Information 	dion				
ET Registered	The C				
ST Registration No.	(800)		GST Registration Date		
ODECHUM HIStory			GST Status Verified	Yes	
Pulicyholder Hulling Add	Press.				
toress 1	BCK 5704 #53-678	Address 2	Country to Secret Avenue V	2000-0100	
idress 4	STREAMORE 731070	Antrona Type	WOODLANDS AVENUE 1	Address 3	CHARPIGNS COURT
it No.	12-078	Related Felicy Number	Singapine eddress	Frot Code	73(170)
OI Driver Info		1999	\$898326974-01		
tver Name	NOSLI BIN SAMIL	Driver Type	12010-2000		
memest anyer Name	- 40 F3.1.55040;	Delings fARDE	Main Driver		
gwier Oats ut Driver Litterag	19/01/2017	Union Age	S94472132	Driver DOIS	23/12/1994
mad Ne (Mobile)	9322801#		24	Driving Experience	3
ores t	MLR 5704 #12-878	Contact No. (Office)		Contact No.(Horse)	
talvens is	TIMERPORE 731378	Address 3	WOODLANDS BYENIE 3	Address 3	CHAMPONS COURT
II. No.	12-679	Address Type	Empapore address	Part Costs	731576
es he san a Singapore					1200,000
distant (CN)	Yes + No.	Server Virtical No.	FBGcsizot	Emver Misurer Company	NTDE
clarythun					1170
nethally our or \$6000 Test.					
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Claim 901 heat			1,000	Contact No. (Harmet GE Vehicle: YSG16207	Curtact No. (Office)
Claim 991 hear			92279034	Curriett No. Internet GE Vehille: PSG1820T	Cartact No IOMCEP TP Wen-six (IST750) Number
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8/6/2019

Claim Handling(accident reporting Claim Task)

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Display in New Window | Scan and collecting |

File Name

Finder Date

National University Hospital (Singapore) Pte Ltd

5 Lower Kent Ridge Road, Singapore 119074

TEL: (65) 6779 5555 Business Registration No.198500843R



	0	RIGINAL		
IL		TUGITAL		NUH19205
granted : HOSPITALIZATION I F.	ΔVE			NRIC: S944721
fit for duty for a period of inclusive	5	day(s) from	27-Jul-2019	to
id for absence from court attend	dance.			
ded for Examination/Treatment	from	27-Jul-2019 09:52	to 27-Jul-:	2019 12:32
				1
		A&E		
issued by		Location		Signature
	granted: HOSPITALIZATION LE fit for duty for a period of inclusive id for absence from court attended for Examination/Treatment	granted : HOSPITALIZATION LEAVE fit for duty for a period of 5 inclusive id for absence from court attendance. ded for Examination/Treatment from	granted : HOSPITALIZATION LEAVE fit for duty for a period of 5 day(s) from inclusive id for absence from court attendance. ded for Examination/Treatment from 27-Jul-2019 09:52 LEE MING ZHOU (19284H) A&E	Granted: HOSPITALIZATION LEAVE fit for duty for a period of 5 day(s) from 27-Jul-2019 inclusive id for absence from court attendance. ded for Examination/Treatment from 27-Jul-2019 09:52 to 27-Jul-2019 LEE MING ZHOU (19284H) A&E



NATIONAL HEALTHCARE GROUP POLYCLINICS Woodlands Polyclinic

National Healthcare Group

10 Woodlands Street 31

Location

Signature

POLYC	LINICS	10 Woodlands Stree	t 31	
MEDICAL (CERTIFICATE	Singapore 73857	9	\$
Indiana na Company		ORIGINAL		
Name: R	OSLI BIN JAMIL	2.000,000,000		WDL19078855
Type of Med	lical Leave granted		NRIC:	S9447213Z
The above n	lical Leave granted : OUTP	ATIENT SICK LEAVE		
The certificat	te is not valid for absent		019 to 06/08/	2019 inclusive.
		to treatment from 02:57 PM to		
Remarks :				
or enquiries, ple	ase call 63553000			
02/08/2019	Dr. RENGANATHAN	HARSAN		
Date	(60905F)	Woodlands	7	
- 010	1.6			/ / /

Issued By

ACCIDENT STATEMENT

Á	CCIDENT DATE:(2	100 to to	(DD/MM/YYY)	TIME . 08.	. 50,	(UU-LALA
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	CATIONT	IDMORAL	TUGS , NEG	iv EXH	36A	
	1. DETAILS OF V	/EHICLE				
	a) VEHICLE 1	NUMBER:_ FB	G GOOT		19	64
	b)INSURANC	ECOMPANY: N	TUC Income	INCHARM.		
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3.5						-AMERICAN IV
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	2. INSURED / PO	E STATE (THIRD PAR	CLAIM / REP.	DRTING ON	.Y)	
	A)NAME:	10 STI	afet			
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	c)ADDRESS:	ioer Oiti.		CONTACT:		
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V.	* CONTINUE TO	3.d IF DRIVER ALS	O POLICE LINE			
* No of parsonge	DRIVER	O'G II DUIVER YES	O POUCY HOLD	ER	45	**
Clinduding driver) a)NAME:	374		9200000		
() alriver	b) NRIC/FIN/PA	SSPORT		(MA	LE / FEMA	LE)
(_).	C)ADDRESS:			CONTACT:		
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	"d) DATE OF BIR	TH: (//_](DD/MM	YYYYYI		
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4.	WAS DRIVER	AN EMPLOYER OF	THE INSURED'S	COMPANY	7 (YES!	NO
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email = rosh_jea.
VIDEO

IDENTITY CARD NO. \$9447213Z





arne

ROSLI BIN JAMIL

For LKK/NAC Use Only

MALAY
Date of birth
21-12-1994
Country of birth
SINGAPORE

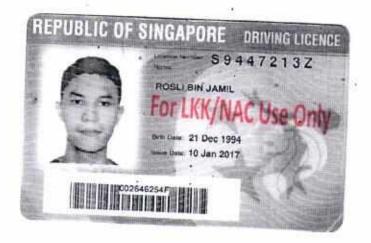




APT BLK 570A WOODLANDS AVENUE 1 #12-878 SINGAPORE 731570

NRIC No: S9447213Z

Date: 16/01/2017



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

Class 2B Motorcycles =< 200 cc

EFFECTIVE DATE

For LKK/NAC Use Only

NP 428A





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)

MOTOR VEHICLES (THIRD PARTY RISKS) ROCES, 1939	Cover : Third Party
- 15-ate Number : 5095220371	- FBG16201
Certificate Number of Vehicle	**F123C071C2026148

- Index mark and Registration Number of Vehicle ME121C071C2026148 : ROSLI BIN JAMIL
- Chassis Number 2. Name of Policyholder 12 Oct 2018
- 3. Effective Date of Insurance : 04 Oct 2019 A. Expire Date of Insurance
- 5. Persons or Classes of Persons entitled to drived

Provided that the genion driving is permitted in accordance with the licensing or other laws or regulations to drive Wellow Webside or has been so permitted and is not disqualified by order of a Court of Law or by reason of any (a) Named Driver(s) Only. 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 business or profession. 6. Limitations as to Use#

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing pace making reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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) EXCESS (SECTION 2) INSURE WITH COE NAMED DRIVER (1) NAMED DRIVER (2) HIRE PURCHASE COMPANY SUM INSURED	: N/A : N/A : N/A : ROSLI BIN JAMIL : N/A : N/A : N/A : N/A : N/A

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)

: LIU TING (00000602292) : 12 Oct 2018 17:10 hrs Date of Issue

Countersigned By: **Authorised Officer** For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive