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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 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. Any false reporting may be referred to the Police for investigation.

- 8. 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.

是	ACCIDENT STATEMENT
Date Of Report	11/11/2019 15:37
Date Of Accident	09/11/2019 18:35
Exact Location Of Accident	PIE TOWARDS TPE (CHANGI)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMM6102C
Insured/Policyholder	
Name Of Registered Owner	SIMON TAY PENG HOE (ZHENG PINGHE)
NRIC No	S7233052H
Email Address	SIMONTAY72@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93385220
Alternative Phone No	OFFICE-93385220
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO.
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	7. N. C.
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO NO
Policy Number	5110826040
Cover Note Number	
Driver	
Name of Driver	SIMON TAY BENG HOE /ZUCANO BANG
NRIC No	SIMON TAY PENG HOE (ZHENG PINGHE) S7233052H
Date Of Birth	3.15720444.I.

Name of Driver	SIMON TAY PENG HOE (ZHENG PINGHE)			
NRIC No	S7233052H			
Date Of Birth				

Date Of Birth 12/09/1972 Occupation OUTDOOR Date Of Driving Pass 03/11/2009

Driving Experience 10 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93385220 Fax Number

Contact Number OFFICE-93385220

EMail Address SIMONTAY72@GMAIL.COM Address

BLK 91 BEDOK NORTH STREET 4 #12-1521

Postcode

460091

Was driver an employee of the Insured's Company NO

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?

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

NO

ambulance?

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

BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT.

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

UNKNOWN

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)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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:

Reporting Centre Personnel's Signature

Name:

NRICHIN No .:

SKETCH PLAN VEH A : Smm 6102C VEH B: MKnown CHANGY NORTH VENUE: PIE TWOS

THE (chargi) TPE A PACIR P. SMM 6102 C B DESCRIBE CIRCUMSTANCES OF THE ACCIDENT DECLARATION I/We declare the foregoing particulars are true in every respect. Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Time: (If driver is not the policyholder) Name: Date & Time: NRIC/FIN No.:

RESTRICTED

ANNEX E

NOTICE OF REPORTING

This is to confirm that <u>Simon Tay Peng Hoe (Zheng Pinghe)</u>, NRIC:

<u>S7233052H</u>, has reported to the Police a non-injury traffic accident which occurred at <u>along PIE towards TPE (Changi)</u>, on <u>09/11/2019</u> at <u>1800hrs</u> involving the following vehicles: SMM6102C and unknown vehicle.

- If accident was reported to the Police within 24 hrs of its occurrence, then he has complied with Sec 84(2) of the Road Traffic Act, Cap 276.
- 3. While driving along PIE towards TPE (Changi), I was turning into a double-lane filter lane and I was on the right lane. Another car was maneuvering the turn as well and both cars sideswiped each other. I think it was a blue-coloured Honda Vezel but I did not manage to take down his license plate or his particulars.

alm

No. 30 Bedok North Road Singapore 469676 Tel: 1800-7449999

Rank / Name of Issuing officer: W/Sgt (2) Amanda Chu

Date: 10/11/2019 Time: 1055hrs

S/D Ref: 05

Police Post/ Unit: Bedok North NPC

Original – To be issued to informant Duplicate- to be submitted to Traffic Police

ACCIDENT'STATEMENT

ACCI	DENT DATE: 09 11 2019	DD/MM/YYY), TIME!	8, 35 muni
LOCA	TION: PIE TOWARDS	T.P.E. aro	we]
T.	DETAILS OF VEHICLE G) VEHICLE NUMBER: SMM D) INSURANCE COMPANY: // C) POLICY NUMBER: 5 // d) POUCY TYPE: (COMPREHENS e) MAKE & MODEL: HONDA () TYPE: (SALOON) COUPE (MP) G) VEHICLE CATEGORY: (PRIVATI h) PURPOSE OF USING AT ACCID I) ARE YOU CLAIMING UNDER YOU IF NO, PLEASE STATE (THIRD PA INSURED / POLICY HOLDER A) NAME: SIMON TAY	GIOD C NOME 10826040 IVE/THIRD PARTY/THIRD VEYEL VIVAN/LORRY/MOTOR E/COMMERCIAL/MOTOR E/COMMERCIAL/MOTOR ENTINE: LEISURE DUP OWN INSURANCE (XI RTY CLAIM/REPORTING	PARTY FIRE &THEFT) RCYCLE, / OTHERS) DRCYCLE) ESTINO) ONLY)
the of passenger (Including driver)	DINRIC/FIN/PASSPORT: ST. C) ADDRESS: BLK 91 BE * CONTINUE TO 3.d IF DRIVER AL DRIVER d) NAME: SIMON TAY P.	SO POLICY HOLDER	(MALE (FEMALE)
• 5. 6. 7.	"d)DATE OF BIRTH: (12 / 09/ B)OCCUPATION: INDOOR / OU B)OCCUPATION: INDOOR / OU B)OMY OF DRIVING PASS WAS DRIVER AN EMPLOYEE O IF NO, RELATIONSHIP OF THE G)WEATHER CONDITION: (CLEAR B)ROAD SURFACE: (DRY / WET / WAS ANYBODY INJURED (YES / NO G)REPORTED TO POUCE (YES / NO IF YES, PLEASE STATE WHICH PO	IDOOR) D3 11 > 069 F THE INSURED'S COMP DRIVER WITH INSURED (/ RAINING / OTHERS OTHERS (0)	D:
() passanger (Including driver) () 9. 1	THIRD PARTY VEHICLE D) VEHICLE NUMBER: D) DRIVER'S NAME: C) NRIC/FIN/PASSPORT: HIRO PARTY VEHICLE D) VEHICLE NUMBER: E) DRIVER'S NAME:		, , , , , , , , , , , , , , , , , , ,
(Including distrar)	n NRICYFIN/PASSPORT:	CONTAC	OTU

email = Simontay 72 @ gmail. com VIDEO

Claim Handling Accident MT/10708

Accident #1/10/0825						
Policy fea.	5110826040	Vehicle No.	SMM61020		3 65	
Certificate No.			Sametralogic		GS	Registra
Policyholder Name	SIMON TAY PENG HOE (ZHENG PINGHE)					
Product Code	PAIVATE CAR INSURANCE	Cover Type	drive CLASSIC		Poli	cyholder
Contact No.(Mobile)	93385220	Contact No.(Office)	www.coxssic		F091	ding
Email Address		Special Remark			Con	tact No.(
.KFK	4 No Yes	TEA	- No Yes		eC6	
NCD Protection	No	NCD Entitlement(%)	0		éCo	de Reaso
Accident Details			U.		Priva	ate Hire
Report Date	14/11/2019 16:07	Accident Report Within 24 hrs	Vari			
Date of Accident	09/11/2019	Time of Accident finance	Yes		Aco	dent Typ
Reporting Centre		Orange Force	18:35		Cour	ntry of A
Accident Location	PIE TOWARDS THE (CHANGE)	and angle number			ECM	Nu
Total Excess Applicable						
Excess Type	Per Accident	Windscreen Excess		100.00		
OD Standard Excess				100,00		
YIED OD EXCESS	600,00	TP Standard Excess		0.00		
Additional Excess	0.00	YIED TP Excess		0.00	Patrico	r is Cove
Total OD Excess Applicable	a .			(999087)	HEIVE	F. M. WOVE
▼ Benefits	600,00	Total TP Excess Applicable		0.00		
				393000		
GST Registered Information	tion					
GST Registered GST Registration No.	:No		GST Rec	Istration Date		
Modification History				us Venfied		Yes
Policyholder Mailing Add	ress					
Address L	BLK 91 #12-1521	Address 2	BEDOK NORTH ST	DEFET 4.	William	22.5
Address 4		Address Type	Singapore address		Addre	
Unit No.	12-1521	Related Policy Number	\$110826040		Post C	ode
▽ OI Driver Info						
Priver Name	SIMON TAY PENG HOE (ZHENG PINGHE)	Driver Type	Main Driver			
Innamed driver Name		Driver NRIC	97233052H		500	200
Register Date of Driver License	03/11/2009	Onver Age	42		Driver	
Contact No.(Mobile)		Contact No.(Office)				g Expens
Address 1 Address 4	BLK 91 #12-1521	Address 2	BEDOK NORTH ST	HEFT 4		ct No. (Hr
		Address Type	Singapore address		Addres	
Init No.	12-1521				Post C	ode:
logistered car?	Yes = No	Driver Vehicle No.			90007	granta i i
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Freuthalyser or Blood Test leading?	0 mg	WW-1774-4-1-2-2-2				
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oim Type • Intact No.{Mobile} Intact No.{Mobile} Intact No.{Mobile} Intact No.{Mobile}	Repair Preferred Workshop, Name	e unknown . GIA	•	56381002	Name Conta No. (Harw OI Vehicl Numb	e) 5M er

Video List

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Attachment Accident No. MT/10X0625 Claim No. Last Doc. Received * Yes No Upload Date 11/11/2019 16:10 Path . Choose File No file chosen Category * Confider Clear Please Salect Choose File No file chosen * NO Clear Choose File No file chosen Please Select NO Clear Please Select Choose File No file chosen NO Clear. Please Select Choose File No file chosen , NO Please Select Clear Chaose File No file chasen NO Clear Please Select * NO Message Read Attachment List Attachment Uploaded By/Date Category Urgency: 100 NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 11 Nov 2019 16: 10 NRIC/ Driving License Normal NRIC/ DOV NAC_BURIT_MERAH_BG0676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BURIT MERAH)) on 11 Nov 2019 16:10 NRIC/ Driving License Normal NRIC/ Driv NAC_BUKIT_MERAH_BOOG75[NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Nov 2019 15:10 SAS Normal 0 NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Nov 2019 16:10 Photos Normal Phil NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 11 Nov 2019 16:10 Photos Normal NAC_BUKIT_MERAH_800676[NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)] oo 11 Nov 2019 16:10 Photos Normal Pho NAC_BUKIT_MERAN_800676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 11 Nov 2019 16:10 Photos Normal NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Nov 2019 10:10 Photos Normal Phi NAC_BURIT_MERAH_800676[NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 11 Nov 2019 16:10 Phetos Normal Pfn NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Nov 2019 16:10 Photos Normal Phi NAC_BUKIT_MERAH_BDG676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 11 Nov 2019 16:10 Photos Normal Phir NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 11 Nov 2019 16:10 Photos Normal PRIC

Folder Date

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File Name

Uploaded By/Date



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: 51	10826040
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Cover : drivo CLASSIC

Index mark and Registration Number of Vehicle

: To Be Advised

Chassis Number

2. Name of Policyholder

: RU11318606

3. Effective Date of Insurance

: TAY PENG HOE SIMON

4. Expiry Date of Insurance

: 05 Jul 2019

: 04 Jul 2020

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 business or profession.

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) : 5\$600 EXCESS (SECTION 2) : N/A WINDSCREEN EXCESS - 55100 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

: SIMON TAY PENG HOE (ZHENG PINGHE)

NAMED DRIVER (1) NAMED DRIVER (2)

: N/A : N/A

HIRE PURCHASE COMPANY

: GUAN MOTOR LEASING PTE, LTD.

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

: 5 & M ALLIANCE PTE LTD (00000614373)

Date of Issue

: 04 Jul 2019 11:32 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive