DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875 Tel: 6341 6789 Fax: 6341 6778 Co. Reg. No. : 201436361C

Letter of Demand

Re: Accident involving my vehicle no. SFM 8189 / and vehicle no. GBD 3048 / on ot/01/20 at 23:40 HRS PM/AM at/along Entrance Of BIK 467 Admiralty Drive MSCP

We refer to the above matter.

Attached pleas find copies of the following for your kind perusal:

Vehicle Repair cost / Excess	\$	10058-00
Vehicle Rental Fee for days @ \$ days @ Loss of use for days @	\$	900-00
\$per day Police search fee/police report fee/LTA search fees Others - 3rd party GIA Report	\$ \$ \$	7-45 29-00
Total:	\$	10994.45

Yours faithfully,

ABBY HP: 9856 4815

E-mail: dynamicautowork@gmail.com

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875 Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No.: 201436361C

Authorisation To Act

I, Ten tok Leong ("the third party claimant") of
I, Ten tot Leong ("the third party claimant") of BIK 468D Admiralty Drive, \$108-275, SC754468) (address), owner of SFM81877 (vehicle no.) hereby authorise Jynamic Antowork Pte-Ltd.
(address), owner of SFM&1897 (vehicle no.) hereby
authorise Ignamic Antowork Pte-Ltd.
("the workshop") to act for me with respect to my claim for repair
costs and/or rental and/or loss of use ("claim") for my vehicle
no. 5 FM 81897 that was damaged pursuant to the accident which
occurred on 04/01/20 (date) at/along Entrance of BIR 467
Admiralty Drive MSCP (location) involving vehicle no/s GBD3048Z
("the accident").
(the accident).
I further hereby authorise the workshop to settle my above mentioned claim in a manner that they deem it fit and the workshop is further authorised to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.
I further authorise the workshop to execute and/or sign any documents/discharge vouchers/agreements regarding my/our claim/case for my/our convenience.
I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident concerned.
Dated this 6 day of 01 (month) 20 20 (year)
AUTO MONDO

Signed by "the workshop"

Signed by "the third party claimant"

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778 Co. Reg. No.: 201436361C

	Letter of Authorisation & Indemnity
Accident	involving motor vehicles no. SFM 81897 and GBJ 3048Z on Ot/01/20
at/along_	Entrance of BIK 467 Admiralty Drive MSCP
1.	I/We, the Owner of motor vehicle no. STMB/B97 hereby instruct and authorise ("the workshop") to appoint an independent surveyor
	on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$
2.	You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3.	You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4.	My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5.	Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6.	I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7.	I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8.	In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9.	In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10.	I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.
	Dated this
Signature	e of vehicle owner
	50 Marie 1 Mar
IC/UEN	Ten Fox Leong Witnessed by: No: 51833260) Alalmy
(Compan	y stamp, if applicable) θ
Address	BIK 468D Admiralty Dave,
-80k	225, S(754460)

Tel: 9/09 2257

Dynamic Autowork Pte.Ltd.

8 Kaki Bukit Ave 4, #08-09, Premier@Kaki Bukit

Singapore 415875 Tel: 6341 6789 Fax: 6341 6778

ROC / GST REG NO.: 201436361C

Email:dynamicautowork@gmail.com

TAX INVOICE

Invoice #: 00001200

Date: 16.09.21

Vehicle No: SFM8189Y

Bill To:

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY #07-12 AIG BUILDING SINGAPORE 079120

DESCRIPTION	AMOUNT
Carry out lump sum repair on accident vehicle corresponding to	\$ 9,400.00
supply of spare parts, labour and spray painting charges	
Sub Total	\$ 9,400.00
Add GST 7%	\$ 658.00
Total Amount	\$ 10,058.00

PAYMENT BY CHEQUE SHOULD BE CROSSED AND MADE PAYABLE TO 'DYNAMIC AUTOWORK PTE.LTD."

PLEASE INDICATE THE INVOICE NO. ON THE REVERSE SIDE.

Issued By:

ABBY

Authorised Signature

Rapid Rental Pte.Ltd.

8 Kaki Bukit Ave 4, #08-09 Premier@Kaki Bukit Singapore 415875

BLK 468D ADMIRALTY DRIVE

Tel: 6341 6789 Fax: 6341 6778

ROC No.: 201627936K

To: TEN KOK LEONG

#08-225

TAX INVOICE

Invoice No.

: DR2002-0198

Date

: 29.02.20

Vehicle No.

: SMD3457X

Vehile Model: : MERCEDES

BENZ CLA180

SINGAPORE 754468

DESCRIPTION	NO. OF DAYS	RATE	Al	MOUNT
RENTAL FROM 24/02/2020 - 29/02/2020 YOUR REF: SFM 8189Y	5	180.00	\$	900.00
TOTAL: \$ 9				900.00

Payment by cheque should be crossed and made payable to 'Rapid Rental Pte.Ltd.'

This is computer generated document.

No signature is required.

RAPID RENTAL PTE. LTD.

8 KAKI BUKIT AVENUE 4 #08-09 PREMIER @ KAKI BUKIT SINGAPORE 415875

ROC:201627936K

VRA NO: DR2002-0198

VEHICLE RI	ENTAL AGREEI	MENT	VKA NU	J: <u>914 002</u>	0.10
HIRER'S PARTICULARS		the state of the s	SFM 8189	Y	-
Name (as in I/C): Ten KOK Leong	Loan Vehicle			-	
NRIC/Passport No: <u>\$18332600</u> Date of Birth: <u>08 01 1967</u>	NAME OF ADDRESS OF THE OWNER, WHEN PERSONS AND PARTY OF THE OWNER, WHEN PERSONS AND P		les CLA 180		
Address: BLK 468D Admiraty Drive Age: 53	-	CHARGE	THE RESERVE OF THE PARTY OF THE	\$	cts
#08-225 s(754468)	Daily	5 day @\$	Per day	900	-
Name & Address of Employer:	Weekly	day @:	\$ Per week		
	Monthly	day @:	Per month		
Occupation: Driving Exp:	Others				
Driving License No:Passed Date:	CDWS/PAI				
D/L Type: Local/Int'l/Others:	Delivery/Collec	tion Svc			
Tel: (H/P)(O)					
DRIVER'S PARTICULARS			SUB-TOTAL	900	-
Name (as in I/C):	Petrol Level	OUT	E 1/4 1/2 3/4 F		
NRIC/Passport No: Date of Birth:	- &	001			
Address:Age:	Surcharge	IN	E 1/4 1/2 3/4 F		
S()	- Jui charge	1114			
Occupation: Driving Exp:			TOTAL	900	-
Driving License No:Passed Date:		0 1			_L
D/L Type: Local/Int'l/Others:	_		1		
Tel: (H/P)(O)	_	The state of			
EXCESS: Section (1) \$2,500.00		1		TT A	
section (2) \$2,500.00					4
	INDICATE: A - Accidents				

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge voucher. All information I have been given RAPID RENTAL PTE. LTD. in connection with this agreement is true.

S - Scratches X - Crack

IMPORTANT

Hirer's Signature:

1. The Hirer and the authorized driver must be over 25 years of age and under 65 years of ages and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be borne by the Hirer/the Authorized Driver.

Additional Hirer's Signature:

- 2. All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on lop of petrol surcharge is payable by the hirer should he fail to return the vehicle at line appropriate petrol level.
- 3. No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (for instance: in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited.
- 5. Vehicle strictly for Singapore use only and may not driven out of Singapore without prior written consent of RAPID RENTAL PTE. LTD. The hirer is liable for a penalty fee of \$200 in additional to appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- 6. The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- 7. The hirer and/or driver shall be responsible for all claims, damages,

- losses, increased insurance premiums, non-waiver excess and cost expenses (including legal costs on full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to pay immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damages to the car will be repair at RAPID RENTAL PTE. LTD. authorized workshop.
- 8. Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 \$400.
- 9. The Hirer agrees that a punctured tyre, empty petrol tank, lost of vehicle's key or locked keys inside of vehicle by itself, does not constitute a breakdown and that in event the owner's 24-Hours Emergency Services is called upon to respond to such occurrence, the Hirer shall bear cost of such responses at \$150 per trip.
- 10. In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
- 11. The hirer and/or driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
- 12. All customers' data will kept strictly confidential and is solely used for the purpose of completing the sales transaction and other relating matters.
- 13. I understand and agreed to personal data collection statement stated on the Term and Conditions page.

Date / Time OUT	Mileage	Check By	Remark	
24/02/20 11:25 am	30637			Hirers/Driver Signature
Date / Time IN	Mileage	Check By	Remark	
29/07/20 /1:20 cm	31064			Hirer's/Driver Signature

> Back to OneMotoring

Land Transport

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

06 Jan 2020 / 11:16:26

Receipt Date/Time: 06 Jan 2020 / 11:16:26

Tax Invoice/Receipt

Receipt No.: ITNET-00000-200106-001043

Previous Receipt No.:

S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Resu	t of Insurance Enquiry - GBD3048Z				
	04 Jan 2020/23:40:00				
5	ance Co: AIG ASIA PACIFIC INSURAN	ICE PTE, LTD.			
	Insurance Enquiry - GBD3048Z Enquiry Fee 20200106111555119125		7.00	0.49	7.49
		Sub-Total	7.00	0.49	7.49
		Total Before Rounding	7.00	0.49	7.49
		Rounding Difference			0.04
		Total Amount Payable			7.45
		Paid By			
		xxxxxxxxxxxxx1359	Credit Card: Visa/MasterCard		7.45
		Total			7.45
		Cash Change			0.00
		Tendered Amount			7.45
		Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-20-028688

Date of Request:

18/02/2020

Your Ref No:

WALK IN EDWIN

DYNAMIC AUTOWORK PTE. LTD

8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT

SINGAPORE 415875

Dear Sir/Madam,

Your Vehicle No:

SFM8189Y

Date of Accident:

04/01/2020

Place of Accident:

467 ADMIRALTU DR

Involving Vehicle No: GBD3048Z

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-20-028689

Date of Request:

18/02/2020

Your Ref No:

WALK IN EDWIN

DYNAMIC AUTOWORK PTE. LTD

8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT

SINGAPORE 415875

Dear Sir/Madam,

Date of Accident:

04/01/2020

Vehicle No:

SFM8189Y

Place of Accident:

ENTRANCE OF BLK 467 ADMIRALTY DRIVE MSCP

Involving Vehicle No: GBD3048Z

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
GBD3048Z	ENTRANCE OF BLK 467 ADMIRALTY DRIVE MSCP	14.00	1	13.08
GST Amount			-	0.92
Total Amount Du	e (GST Inclusive)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque

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 <u>truthful and accurate</u> 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.

VALUE IN	 	ENT
ACCIDE		
Continue de montes de la constante de la const	Control or other lands	THE RESERVE OF THE PERSON NAMED IN

 Date Of Report
 06/01/2020 17:17

 Date Of Accident
 04/01/2020 23:40

Exact Location Of Accident ENTRANCE OF BLK 467 ADMIRALTY DRIVE MSCP

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFM8189Y

Insured/Policyholder

Name Of Registered Owner TEN KOK LEONG
NRIC No SXXXX260D

Email Address JASONTEN@JNC-ME.COM.SG

Mobile Phone No (LOCAL) +65-91092257
Alternative Phone No OTHERS-91092257

Vehicle Particulars

Manufacturer BMW

Model X3 SDRIVE 20I HID NAV

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 THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5109920519

Cover Note Number DRIVO PREMIUM

Driver

 Name of Driver
 TEN KOK LEONG

 NRIC No
 SXXXX260D

 Date Of Birth
 08/01/1967

 Occupation
 INDOOR

 Date Of Driving Pass
 29/10/1987

Driving Experience 32 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91092257

Fax Number

Contact Number OTHERS-91092257

EMail Address JASONTEN@JNC-ME.COM.SG

Address BLK 468D #08-225 ADMIRALTY DRIVE

Postcode 754468

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 COLLISION - HEAD TO REAR

2

NO

1

NO

NO

YES

NO

NO

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED;

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Vehicle Registration Number Vehicle Make/Model/Colour DETAILS OF OTHER VEHICLE PROPERTY 1

GBD3048Z

COMMERCIAL VEHICLE

TOYOTA HIACE VAN TURBO 5 DR MANUAL

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)

Page 2 of 12

Accident Sketch Plan

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.
- 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.
- 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:

IDAC KAKI BUKIT (VAC)

Reporting Centra Fersonners Stravor 4
Name: Singapore 415933
NRIC/F8/N6/7416697 Fax: 67492305

Email: vackb@singnet.com.sg

Accident Sketch Plan

SKETCH PLAN	
A: SFN181897 B: G833048Z Entrance of BLKA6 Admirally Drive MSC DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	7
Refer to affectively	

DECLARATION	
IDAC KAKI BU 23 Koki Buk Policy holder's Signature Date & Time: Date	dt <u>Ave 4</u> 415933 ^{urg}

Accident Sketch Plan

On 04.01.20 at about 23:40 hours at Entrance of BLK467 Admiralty Drive MSCP. I was stationary and queueing at the entrance of the above mentioned MSCP.

Suddenly the front vehicle (B) rolled back and collided onto front portion of my vehicle (A).

Vehicle (A): SFM 8189Y

Vehicle (B): GBD 3048Z

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$1833260D





TEN KOK LEONG

良 国

Race CHINESE

Date of birth 08-01-1967 M

. 91833280D

4250924

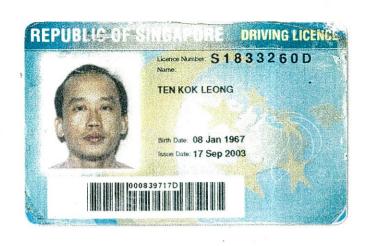
Country of birth SINGAPORE

SFM 8189 Y

Owner & Driver.

18-07-2008

#08-225 SINGAPORE 754468



SFM 8189Y Owner & Driver

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

PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

29 Oct 1987

NP 428A

Licence No: S1833260D



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: 5109920519

1. Index mark and Registration Number of Vehicle

SEM8189Y

Chassis Number

WBAWY920500W22546

Cover : drivo PREMIUM

2. Name of Policyholder

TEN KOK LEONG

3. Effective Date of Insurance

: 30 May 2019

4. Expiry Date of Insurance

30 1110 1 2022

4. Expiry Date of missionee

. 29 May 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 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)
 : \$\$600

 EXCESS (SECTION 2)
 : N/A

 WINDSCREEN EXCESS
 : \$\$100

 ADDITIONAL EXCESS
 : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : YES
INSURE WITH COE : YES
NCD PROTECTION : YES (FREE)
TRANSPORT ALLOWANCE : NO

EXCESS WAIVER : NO

PRIMARY DRIVER : TEN KOK LEONG

 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

: 28 May 2019 18:04 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive