

ONAL Assessment Centre Services

[wef 1 Jan'05] **MBHARY 005119**

Date In: 3/2/20-15:56	Job description	Date & Time Completed	Done by
Ref No: NA/12/2000128674	SAS e-filing		
Veh No: SD395	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: 1/2/20-00:00	i-Motor Claim Form		
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 / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: JSRMA	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% P: 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: 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

NA/12/2000128674	Invoice Preparation Checklist		Am't (\$) 1st Bill	Am't (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);			
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
	5) FT: Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
	7) N1: Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	OD*			
	*N5: 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: Idac Mobile 30			
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged		
Auditors' Comments:-	Invoice dated	Fee Charged		
Dat. 1:				
Dat. 2 / 3:				

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	03/02/2020 15:56
Date Of Accident	01/02/2020 00:00
Exact Location Of Accident	SLE TWDS BKE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD39B
Insured/Policyholder	
Name Of Registered Owner	RIWAY (SINGAPORE) PTE LTD
Co Reg No	2XXXXX529C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-899999999

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	CLA45 AMG 4MATIC AUTO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI19V14374/VPC/R03
Cover Note Number	

Driver

Name of Driver	FONG LI YONG
NRIC No	SXXXX087E
Date Of Birth	14/09/1987
Occupation	INDOOR
Date Of Driving Pass	12/03/2013
Driving Experience	6 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91018688
Fax Number	
Contact Number	OFFICE-91018688
Email Address	NOEMAIL

Address	BLK 818 JURONG WEST STREET 81 #09-252
Postcode	640818
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JSR1251 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	3
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.	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	NANYANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO: 67912972
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200201/2013.

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	JSR1251
Vehicle Make/Model/Colour	HYUNDAI STAREX
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ABDUL KHAIRUDDIN BIN ABD KARIM
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJZ6791E

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

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:

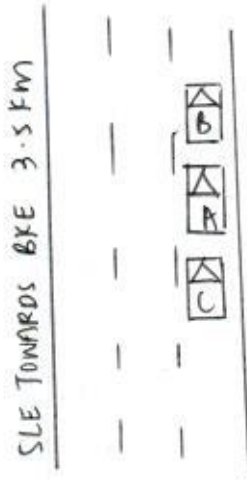
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 03.07.2020 @ 11:20am

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



A - SLD39B

B - SJZ6791E

C - JSR1251

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 31/01/2020, I was driving in my car (SLD39B) on SLE (BKE) heading home. I was on the most right lane driving at moderate speed. After driving for sometime, I noticed the car SJZ6791E in front of me had applied brakes briefly thus I slowed down. All of a sudden, SJZ6791E immediately applied the brake thus I too managed to stop in time by applying the brakes. However, a Malaysian car JSR1251 did not managed to stop in time and collided with my car. I felt the impact and the car subsequently collided with SJZ6791E.

I then alighted the car and checked upon both SJZ6791E and JSR1251. I assessed the damages and noticed that my back bumper was severely damaged, left passenger was dented and was unable to open and my bonnet was dented opened. While SJZ6791E had minor dents and scratches on the back bumper. JSR1251 had his front bumper come off. I would like to inform TP come down to scene to assess and assist us. I would like to inform that I feel soreness in my left arm however have yet to fully assess.

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: 05.01.2020 @ 11:20am

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

PERSONAL PARTICULARS

Date of accident : 01-03-2020 Time of accident : 00:00 hrs
Exact location of accident : SLE TOWARDS BKE 3.5 KM
Driver's Name : PONG LI YONG NRIC : S8729087E Handphone No : 91018688
Driver's DOB : 14-09-1987 License passed date (back of license) : 13 MAR 2013
Driver's Address : APT BLK 818 JURONG WEST STREET 81 # 09-252 SINGAPORE 640818
Vehicle's No : SLD39B Make & Model : MERCEDES BENZ CLA 4S AMG 4MATIC AUTO
Insurance Co : LIBERTY INSURANCE PTE LTD Policy No : SI19V14374/VPC/R03/E00
Email Address : lsnstnc@singnet.com.sg
Policy Holder name : RWAY (SINGAPORE) PTE LTD Policy Holder IC : 700810529C
Driver's relation with owner : EMPLOYEE Occupation : Indoor / Outdoor

(PLEASE TICK ACCORDNGLY)

What do u wish to claim?

O Own Insurance ☒ Other vehicle (3rd party) O Not claiming, just reporting only (record purpose)

Exact Purpose for which the vehicle was being used at time of accident?

☒ Private use O Work O Hire & Rent

Total no of passenger for reporting vehicle (including driver) : 01

Weather condition at time of accident?

☒ Clear O Raining O Others : _____

Was anybody injured in the accident? ☒ No O Yes

Was accident reported to police? O No ☒ Yes at which police station : Nanyang N.P.C

Name of Injured person : _____ Vehicle no : _____ Was injured conveyed to Hospital?
☒ No O Yes

Any camera in your car : Yes / No

Third Party driver's particular:

Driver's Name : ABDUL KHAIRUDDIN BIN ABD KAPIM NRIC : 910608-01-5845 HP No : 018-9884099
Vehicle no : JSR1751 vehicle make & model : Hyundai Starex

Witness's Particular

Witness's Name : _____ NRIC : _____ HP No : _____



**SINGAPORE
POLICE FORCE**



T/20200201/2013

1 of 3

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20200201/2013

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/02/2020 02:40	Vide Report No.: L/20200201/0002	Station Diary No.: 18
--	-------------------------------------	--------------------------

Informant's Particulars

Name of Informant: FONG LI YONG			Address: APT BLK 818 JURONG WEST STREET 81 #09-252 SINGAPORE 640818		
ID Type / ID No.: NRIC NO / S8729087E			Contact No.: Home/Office: Mobile: 91018688		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 32	Date of Birth: 14/09/1987	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Other finance and insurance clerks (eg credit clerk)			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 01/02/2020 00:00	Type of Location: Straight Road
Location: Along Road 1 SELETAR EXPRESSWAY BUKIT TIMAH EXPRESSWAY				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JSR1251	Car				Slightly Damaged	1
SJZ6791E	Car				Slightly Damaged	1
SLD39B	Car				Seriously Damaged	1



**SINGAPORE
POLICE FORCE**



T/20200201/2013

2 of 3

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20200201/2013

CONTINUATION OF REPORT

Brief Details.

On 31/01/2020, I was driving in my car(V1:SLD39B) on SLE(BKE) heading home. I was on the most right lane driving at moderate speed. After driving for sometime, I noticed the car(V2:SJZ6791E) in front of me had applied brakes briefly thus I slowed down. All of a sudden, V1 then immediately applied the brake thus I too managed to stop in time by applying the brakes. However, a Malaysian car(V3:JSR1251) did not managed to stop in time and collided with my car. I felt the impact and the car subsequently collided with V1.

I then alighted the car and checked upon both V1 and V3. I assessed the damages and noticed that my back bumper was severely damaged, left passenger was dented and was unable to open and my bonnet was dented opened. While V1 had minor dents and scratches on the back bumper, V3 had his front bumper came off. I would like to inform TP came down to scene to assess and assist us. I would like to inform that I feel soreness in my left arm however have yet to fully assess.



**SINGAPORE
POLICE FORCE**



T/20200201/2013

3 of 3

Report No. T/20200201/2013

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

J /

SC2 INDRA SHAMI BIN KAMSANI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

01/02/2020 02:40

Classification Of Case:

SIGNATURE

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of RIWAY (SINGAPORE) PTE. LTD. (200810529C)

Date: 22/11/2019

The Following Are The Brief Particulars of :

Registration No.	200810529C
Company Name.	RIWAY (SINGAPORE) PTE. LTD. (w.e.f.27/10/2011)
Former Name if any	RIWAY INTERNATIONAL (SINGAPORE) PTE. LTD.
Incorporation Date.	28/05/2008
Company Type	EXEMPT PRIVATE COMPANY LIMITED BY SHARES
Status	Live Company
Status Date	28/05/2008

Principal Activities

Activities (I)	RETAIL SALE OF HEALTH SUPPLEMENTS (47214)
Description	
Activities (II)	
Description	

Capital

Issued Share Capital (AMOUNT)	Number of Shares *	Currency	Share Type
300000	300000	SINGAPORE, DOLLARS	ORDINARY

* Number of Shares includes number of Treasury Shares

Paid-Up Capital (AMOUNT)	Number of Shares	Currency	Share Type
300000		SINGAPORE, DOLLARS	ORDINARY

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

Number Of Shares	Currency
------------------	----------

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of RIWAY (SINGAPORE) PTE. LTD. (200810529C)

Date: 22/11/2019

Registered Office Address	3 ANG MO KIO STREET 62 #01-43/44 LINK@AMK SINGAPORE (569139)
Date of Address	31/03/2016
Date of Last AGM	21/06/2019
Date of Last AR	21/06/2019
FYE As At Date of Last AR	30/04/2018

Audit Firms

NAME

CKS ASSOCIATES

Charges

Charge No.	Date Registered	Currency	Amount Secured	Chargee(s)
C201513180	19/11/2015		All Monies	UNITED OVERSEAS BANK LIMITED

Officers/Authorised Representative(s)

Name	ID	Nationality	Source of Address	Date of Appointment
Address		Position Held		
LIM BOON HONG (LIN WENFENG)	S7512973D	SINGAPORE CITIZEN	OSCARS	28/05/2008
31 PINEWOOD GROVE SINGAPORE (738263)		Director		
QUEK JIN KUANG	S1190757A	SINGAPORE CITIZEN	ACRA	28/05/2008
39 MOUNT SINAI RISE #15-01 FONTANA HEIGHTS SINGAPORE (276957)		Secretary		

Shareholder(s)

Name	ID	Nationality/Place of Incorporation/Origin	Source of Address	Address Changed
Address				
1 LIM BOON HONG (LIN WENFENG)	S7512973D	SINGAPORE CITIZEN	OSCARS	12/12/2012

Authentication No. : Z19843971Z

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of RIWAY (SINGAPORE) PTE. LTD. (200810529C)

Date: 22/11/2019

Shareholder(s)

Name	ID	Nationality/Place of incorporation/Origin	Source of Address	Address Changed
Address				
31 PINEWOOD GROVE SINGAPORE (738263)				
Ordinary(Number)	Currency			
300000	SINGAPORE, DOLLARS			

Abbreviation

UL - Local Entity not registered with ACRA

UF - Foreign Entity not registered with ACRA

AR - Annual Return

AGM - Annual General Meeting

FS - Financial Statements

FYE - Financial Year End

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

Note :

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.

- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sg.FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA191122101398

DATE : 22/11/2019

This is computer generated. Hence no signature required.



Authentication No. : Z19843971Z

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; Road Transport (Amendment) Act 2019; The Motor Vehicles (Third Party Risks) Rules, 1959

Name of Policyholder:

RIWAY (SINGAPORE) PTE. LTD.

Date of Issue:

27 Nov 2019

Registration No.:

SLD39B

Effective Date of Commencement:

19 Dec 2019 00:00

Chassis No.:

WDD1173522N081340

Certificate No.:

SI19V14374 /NPC /R03

Date of Expiry:

18 Dec 2020 23:59

Type of Certificate of Insurance:

MX3

Persons or Classes of Persons entitled to drive*:

LIM BOON HONG (LIN WENFENG)

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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use*:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials 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 Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 are not to be included under these headings.

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.



For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers

For Information Only:

Coverage(s):

Comprehensive, Unlimited Windscreen

Sum Insured:

MARKET VALUE AT THE TIME OF LOSS

Excess:

Section I - Restricted to Lim Boon Hong Only - Singapore S\$2000 / Outside Singapore S\$4000, Windscreen Excess S\$100

Name of Finance Company:

UNITED OVERSEAS BANK LIMITED

Name of Producer:

D&S AUTO AGENCY (A1661-1)