

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. SLF8293U and vehicle no. GBE2971J on 05/02/2020 at 19:55 HRS PM/AM at/along Slip Road of Gambas Avenue towards Woodlands Avenue 12

We refer to the above matter.

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

Vehicle Repair cost / Excess	\$ 10486.00
Vehicle Rental Fee for <u>12</u> days @ \$ <u>150.00</u> per day	\$ 1800.00
Loss of use for <u>—</u> days @ \$ <u>—</u> per day	\$ —
Police search fee/police report fee/LTA search fees	\$ 7.45
Others <u>3rd Party Report</u>	\$ 29.00
Total :	\$ 12322.45

Yours faithfully,

ABBY



ABBY

HP : 9856 4815

E-mail: dynamicautowork@gmail.com

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Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201436361C

Authorisation To Act

I, SKK Works Pte. Ltd. ("the third party claimant") of
2 Yishun Industrial Street 1 #07-22 North Point Bizhub S(768159)
(address), owner of SLF B293U (vehicle no.) hereby
authorise Dynamic Autowork 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. SLF B293U that was damaged pursuant to the accident which
occurred on 05/02/2020 (date) at/along Slip Road of Gambas Avenue
towards Woodlands Avenue 12 (location) involving
vehicle no/s GBE 2971J
("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 06 day of 02 (month) 20 20 (year)



[Signature]

Signed by "the third party claimant"



[Signature]



Signed by "the workshop"

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. S2FB293U and G8E2971J on 05/02/2020
at/along Slip Road of Gambas Avenue towards Woodlands Avenue 12

1. I/We, the Owner of motor vehicle no. S2FB293U hereby instruct and authorise Dynamic Autowork Pte. Ltd. ("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 \$_____ being refundable deposit of the repair to my/our said vehicle.
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 06 day of 02 2020

Signature of vehicle owner _____

Name - SKK Works Pte Ltd

IC/UEN No : 201328018C
(Company stamp, if applicable)

Address : 2 Yishun Industrial Street 1
#07-22 North Point Bizhub 5 (760159)

Tel : 6334 3031

Witnessed by : _____

Ammy

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 # : 00001099

Date : 08.04.20

Vehicle No : SLF8293U

Bill To:

AXA INSURANCE SINGAPORE PTE LTD

8 SHENTON WAY
#27-01 AXA TOWER
SINGAPORE 068811

	DESCRIPTION	AMOUNT
	Carry out lump sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 9,800.00
Sub Total		\$ 9,800.00
Add GST 7%		\$ 686.00
Total Amount		\$ 10,486.00

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

Tel : 6341 6789 Fax: 6341 6778

ROC No.: 201627936K

TAX INVOICE

To: SKK WORKS PTE. LTD.
2 YISHUN INDUSTRIAL STREET 1
#07-22 NORTH POINT BIZHUB
SINGAPORE 768159

Invoice No. : DR2002-0189
Date : 18.02.20
Vehicle No. : **SLV7860E**
Vehicle Model: : HYUNDAI ELANTRA

DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 05/02/2020 - 17/02/2020 YOUR REF: SLF 8293U	12	150.00	\$ 1,800.00
TOTAL:			\$ 1,800.00

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: DR2002-0189

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS		Hirer's Own Vehicle No: SLF8293U	
Name (as in I/C): SKK Works Pte. Ltd.	Loan Vehicle No: SLV 7860 E		
NRIC/Passport No: 201328018C Date of Birth:	Make & Model: Hyundai Elantra		
Address: 2 Yishun Industrial Street 1 Age:			
#07-22 North Point Bizhub S(768159)			
Name & Address of Employer:			
Occupation:	Driving Exp:		
Driving License No:	Passed Date:		
D/L Type: Local/Int'l/Others:			
Tel: (H/P)	(O)		
DRIVER'S PARTICULARS		SUB-TOTAL	
Name (as in I/C): Sundaram Sukthivel Kumar.	Petrol Level & Surchage		
NRIC/Passport No: 95614982T Date of Birth: 12/09/1969	OUT		
Address: 2 Yishun Industrial Street Age: 51	IN		
1 #07-22 North Point Bizhub S(768159)			
Occupation:	Driving Exp:		
Driving License No:	Passed Date:		
D/L Type: Local/Int'l/Others:			
Tel: (H/P)	(O)		

EXCESS : Section (1) \$2,500.00

Section (2) \$2,500.00

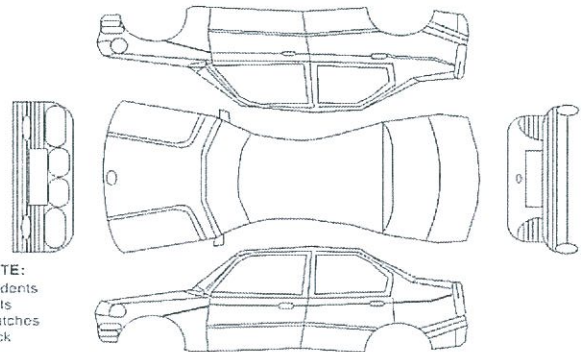


[Signature]

Hirer's Signature:

Additional Hirer's Signature:

INDICATE:
A - Accidents
D - Dents
S - Scratches
X - Crack



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.

IMPORTANT

- 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.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of petrol surcharge is payable by the hirer should he fail to return the vehicle at line appropriate petrol level.
- 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.
- 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 addition to appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- All customers' data will kept strictly confidential and is solely used for the purpose of completing the sales transaction and other relating matters.
- I understand and agreed to personal data collection statement stated on the Term and Conditions page.

Date / Time OUT	Mileage	Check By	Remark	Hirer's/Driver Signature
05/02/20 9:15pm	129060			<i>[Signature]</i>
Date / Time IN	Mileage	Check By	Remark	Hirer's/Driver Signature
17/02/20 10:40am	130247			<i>[Signature]</i>



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 06 Feb 2020 / 10:58:20

Receipt Date/Time : 06 Feb 2020 / 10:58:20

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200206-000866

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - GBE2971J				
As at 05 Feb 2020/19:55:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - GBE2971J Enquiry Fee 20200206105728092259	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				
	xxxxxxxxxxxx1359	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.



RECORDS MANAGEMENT CENTRE

**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-20-023155

Date of Request: 10/02/2020

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: SLF8293U
Date of Accident: 05/02/2020
Place of Accident: GAMBAS AVE
Involving Vehicle No: GBE2971J

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 ☒ Cash ☐ Cheque



RECORDS MANAGEMENT CENTRE

**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-20-023157

Date of Request: 10/02/2020

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: 05/02/2020

Vehicle No: SLF8293U

Place of Accident: SLIP RD OF GAMBAS AVE TOWARDS WOODLANDS AVE 12

Involving Vehicle No: GBE2971J

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\$)
GBE2971J	SLIP RD OF GAMBAS AVE TOWARDS WOODLANDS AVE 12	14.00	1	13.08
GST Amount				0.92
Total Amount Due (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 ☒ 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 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	06/02/2020 16:54
Date Of Accident	05/02/2020 19:55
Exact Location Of Accident	SLIP RD OF GAMBAS AVE TOWARDS WOODLANDS AVE 12
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF8293U
Insured/Policyholder	
Name Of Registered Owner	SKK WORKS PTE LTD
Co Reg No	2XXXXX018C
Email Address	SAKTHIKUMARSKK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-84445343
Alternative Phone No	OFFICE-63343831

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA AXIO
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES

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

If No, Please state action to be taken THIRD PARTY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MOMVP000003959-00-000
Cover Note Number	

Driver

Name of Driver	SAKTHIVEL KUMAR SUNDARAM
Passport No/FIN	GXXXX982T
Date Of Birth	12/09/1969
Occupation	OUTDOOR
Date Of Driving Pass	17/01/2018
Driving Experience	2 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84445343
Fax Number	
Contact Number	OFFICE-63343831
EEmail Address	SAKTHIKUMARSKK@GMAIL.COM

Address	2 YISHUN INDUSTRIAL STREET 1 #07-22 NORTHPOINT BIZHUB
Postcode	768159
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND ATTACHMENT

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	GBE2971J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. The insured must correctly fill in the sketch plan and must sign it.
2. The sketch plan is considered by the Policyholder as part of the Adjusted Claim.
The insured must fill in the sketch plan truthfully and accurately as possible and must sign it and attach it to the claim.
The insured must sign it and attach it to the claim.
3. The insured must sign it and attach it to the claim.
4. Any false reporting may be refused in the future for insurance claims.
5. The insured must sign it and attach it to the claim.
6. By the signing of the sketch plan, the insured consents to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
7. Consent under the Personal Data Protection Act (PDPA)
I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
8. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
9. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
10. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
11. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
12. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
13. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
14. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
15. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
16. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
17. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
18. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
19. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.
20. I hereby consent to the transfer of the Personal Information to the insurer for the purpose of the insurance claim.

Signature of the insured
Date

Signature of the insurer
Date

Signature of the insurer
Date

Accident Sketch Plan

SWITCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DECLARATION

$$\frac{1}{\sqrt{2\pi}} \int_{-\infty}^{\infty} e^{-\frac{1}{2}x^2} dx = 1$$

$\frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{4}$

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Zust. gut

ATTACHMENT

On 05.02.2020 at about 19:55 hours along Slip Road of Gambas Avenue towards Woodlands Avenue 12. I was stationary along the above mentioned slip road and waiting for the oncoming traffic to clear.

When the traffic was clear and I was about to move forward, suddenly I heard a loud bang from behind. When I alighted I realised vehicle (B) had collided onto rear portion of my vehicle (A).

Vehicle (A): SLF 8293U

Vehicle (B): GBE 2971J

[Handwritten signature]

*05/02/2020
Rashid Hussain*



S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
SKK WORKS PTE. LTD.



Name
SUNDARAM SAKTHIVEL KUMAR

S-Pass No.
0 36225890

Sector
CONSTRUCTION



K0668935



SLF82934

driver

VISIT PASS

Immigration Regulations

07-08-2018

Name

SUNDARAM SAKTHIVEL KUMAR

FIN

G5614982T

Date of Birth

12-09-1969

Sex

M

Nationality

INDIAN



Download SGWorkPass
App to check status



MULTIPLE JOURNEY VISA ISSUED

**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: G5614982T

Name: SAKTHIVEL KUMAR SUNDARAM

Birth Date: 12 Sep 1969

Issue Date: 17 Jan 2018

Valid Till: 18/02/2023

002764622K



SLF82934

driver

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

	EFFECTIVE DATE
Class 3C Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver	17 Jan 2018

NP 428A

Licence No: G5614982T

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) Road Transport (Amendment) Act, 2019 (Malaysia)

Policy Details

Certificate Number	: MOMVP000003959-00-000	Cover	: Private Car (Comprehensive)
Policyholder Name	: SKK Works Pte Ltd	Chassis Number	: NRE1610008929
NCD Entitlement	: 30% No Claim Discount	Engine Number	: 2NR8493105
Hire Purchase	: N/A	Registration Number	: SLF8293U
Period of Insurance	: From 03/06/2019 (00:00) To 02/06/2020 (23:59) (Both Dates Inclusive)		

Persons or Classes of Persons entitled to Drive

- a) The Policyholder
 - b) Any person who is driving on the Policyholder's order or with their permission
- Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor or so has been Vehicle 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

Limitations as to Use

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

This Policy does not cover:

- a) Use for Hire and Reward
- b) Use for racing, pace making, reliability trial or speed testing
- c) Use for carriage of goods (other than samples) in connection with any trade of business
- d) Use for any purpose in connection with 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(Malaysia), are not to be included under these headings

Excess (Section 1)	: SGD 700.00	Workshop	: Authorised Workshop
Excess (Section 2)	: N/A	Off Peak Car	: No
Windscreen Excess	: SGD 100.00	NCD Protection	: No
Additional Excess	: Please refer overleaf		

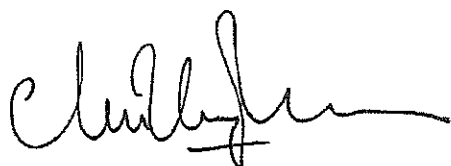
Driver Details

Main Driver	: Any persons who is driving on the policyholder's order or with their permission
Named Driver 1	: N/A
Named Driver 2	: N/A
Named Driver 3	: N/A
Name of Intermediary	: Capstone Insurance Agency Pte Ltd
Date of Issue	: 19/09/2019

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Signed for and on behalf of

Great American Insurance Company



Authorised Signatory

jchen