2		-0	11/200-21	21 1.70	TABLE TO SERVICE
ATIONAL Assessment Cent	tre Services, with	Jan 1001 . My	442A028	70	- 1
12:41 exect 90 00:11	Jeb description	Date	&Timo Complete	4	Done p'i.
101 No. AVANTIL 200064971	SAS e-Illing	i	Lancard - Lancard	-	
Veh No. SKAL HOLOX .	E-ennit (Ljula ster, /	(C tlus)			
20/20/2000 (6:4%	I-Motor Claim V	orin b		-	
- Backers	I-Motor W/O (with	hla: OD Zhu, TP 4bra)		
OD : TP . Reporting Duly	i-Photo Uploadec]			EN:
	Assessment/Survey			-	
IP Inturer:	Ass't Report by Pa	x/Hand to Own	WIND	مستنسكيت	44-mary 200-1-1-1
roluited Wittp / INC Artign Wittp / QW: (Yoli		Fixet	
P Bardjedjarst Veh Not 🗲	BE SOBE	A SELECTION OF THE PROPERTY OF	Non-MC()	•	7
Owner/Driver: ('Te			
Policy No: ()	Period: (ar Type: (-	1
Confirmed by r (Dater.	Timer	no tross	
Insured/Driver Liability: (%) [Note-Est Sintus (WO		P: 21-79%. P: 1	00010011	-
Year of Registration: ()		/NO()			
Brocss: (5) Loading:	1,000 ()/52,000 () 	SEPARATE TO THE SERVICE OF THE SERVI	20775	Section Section
THE PROPERTY OF THE PROPERTY O		Mintensuficial	Table Assessment of Assessment Com-	23/1/25 4	151 5 - 1
) Walk-In Curtemar 1 Customers	Information strictly Confid	fential & Strictly (10 rafer of rapo	lror.	
) Total Luss Case : to e-mail Ya	surer URGENTLY.		11.00		
	roine: YES() / NO	(); Towing	Co: (ebtarn-partitive
		();Towin	CO: (Mississy.
Drive-in ()/ Towed-in (); Inv	oice: YES() / NO	();Towin	Co: (阿拉斯	Allega py
Drive-in ()/ Towed-in (); Inv	older VES () / NO) / Courtesy Cer ()	();Towiu	Co: (','	以	ellianapy .
Orive-in ()/ Towed-in (); inv)/Courtesy Ctr ()	(); Towing	Co: (dispressor
Drive-in ()/ Towed-in (); inv)/Courtesy Ctr ()	(); Towing			Albana by .
Drive-in ()/ Towed-in (); Inv)/Courtesy Ctr ()	(); Towing			Allenapy ·
Drive-in ()/ Towed-in (); inv)/Courtesy Ctr ()	(); Towin			Allians by
Drive-in ()/ Towed-in (); Inv)/Courtesy Ctr ()	(); Towing			Allenapy ·
Drive-in ()/ Towed-in (); Inv)/Courtesy Ctr ()	(); Towing			Allenapy ·
Drive-in ()/ Towed-in (); Inv)/Courtesy Ctr ()	(); Towing			Allenapy ·
Drive-in ()/ Towed-In (); Inv)/Courtesy Ctr ()	(); Towing			Allenapy ·
Drive-in ()/ Towed-In (); Inv)/Courtesy Ctr ()	(); Towing			Allega py
Drive-in () / Towed-in (); Inv	oine: YES()/NO)/Courtesy CE() (') > \$3000] ()				Allenapy ·
Drive-in () / Towed-in (); Inv	oine: VES()/NO)/CourtesyCH() > \$3000] ()		Collection (Colors of Colors of Colo		Allega py
Drive-in () / Towed-in (); Inv	oine: YES()/NO)/CourtesyCH() > \$3000] ()) Alti Accidentiano	Tung (370);		Allega py
NH 2003300	oine: YES()/NO)/Courtesy CH() (') > \$3000] ()	O ARI Accidentiape O DA Demay Are The Towley Re	rung (330); smeut (3100); L Burvey		Allega py
NA 2003300 NA 2003300 NA 2003300 NA 2003300	oine: YES()/NO)/Courtesy CH() > \$3000] ()	() ARI Accident Rape () Da Damey Area () PT Fooling Foo () PT Fooling Foo () PT Fooling Foo () PT Fooling Foo	The control of the co	100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110)	Control Services
NA 2003300	oine: YES()/NO)/Courtesy CH() > \$3000] ()	O PT Pollow-Threey Perplement stains () The Re-lampulon	CL Spinosh (Mestres) Spinosh (S100) Spinosh	100 (110) 3 (110) 110 (110) 110 (110)	Control Services
NH 2003300	oine: YES()/NO)/Courtesy CH() > \$3000] ()	ART And don't upo DA Denny Area OFT Follow-Throng For policy Throng OTH Re-impaction () The Re-impaction ()	Particular (STO)) La Burvey (Reservey)	100 (110) 1010 (110) 1	Allega py
NH 2003300 My 2003300 Managed Portion:	oine: YES()/NO)/Courtesy CH() > \$3000] ()	O PT Follow-Threat O TRI Repelled By Threat O	Tet Allowenue	100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110) 100 (110)	Constant Services
Drive-in () / Towed-in (); Invalidation (); Invalidation () Apply for Transport Allowance () QC Check / Post Repuir Inspection () Upload Resurvey Photo (Repuir Cost Injury :) () () () () () () () () ()	oine: YES()/NO)/Courtesy CH() > \$3000] ()	ART Audidentiape O ART Audidentiape O ART Fowley Rec O IT Follow-Throug For ple lodge stains O TR FU Japanion The TUC Additional S O IT WE ADDITION	rung (330); burvey (Resurvey) INC Universe Tot Allowenus Barton Barton Translation	100 (110) 100 (1	CANADA CA
NA 2003300 White the control of the	oine: VES()/NO)/CourtesyCH() > \$3000] ()	ARI Academitape On Privale Date State Office State One Note State One One One One One One One O	A CONTROL OF THE CONT	100 (110) 100 (110)	CAN INDEPENDENT OF THE PARTY OF
Drive-in () / Towed-in (); Invalidation (); I	oine: VES()/NO)/CourtesyCH() > \$3000] ()	ART Ancident tope (ART Ancident tope (ART Ancident tope (ART Ancident tope (ART Privaley Fee (OFT Pollow-Through Per pellodity status (OTT Pollow-Through Per pellodity status (OTT Pollow-Through Per pellodity status (OTT Re-lampation (OTT Re-lampat	Particular (STO)) Burvey (Reservey) Burvey (Reservey) Crustian (STO) Burvey (Reservey) Crustian (STO) Cr	100 (310) 100 (310)	
NA 2003300 Note: No. 100 Checked by (Engr-In-Churge); C Checked by (Engr-In-Churge);	oine: VES()/NO)/CourtesyCH() > \$3000] ()	ART Ancident tope (ART Ancident tope (ART Ancident tope (ART Ancident tope (ART Privaley Fix (OFT Pollow-Through For plelinity stains (OTT Pollow-Through For plelinity Code (No. DVT Code (No. DVT Code) (No. DVT Code) (No. DVT Code)	Number of State of St	100 (110) 100 (110)	CAN INDEPENDENT OF THE PARTY OF

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 migrepresentation 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.

	ACCIDENT STATEMENT
Date Of Report	22/06/2020 12:44
Date Of Accident	20/06/2020 16:45
Exact Location Of Accident	ALONG CANTONMENT ROAD B/F LIM TECK KIM ROAD
Country/State of Loss	SINGAPORE
ALL MAN TO SERVICE AND DESCRIPTION OF THE PARTY OF THE PA	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKN266X
Insured/Policyholder	
Name Of Registered Owner	SEAH WEI FANG
NRIC No	SXXXX868D
Email Address	VIVI_1985@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-92778242
Alternative Phone No	OTHERS-92778242
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA200-R18
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MPC0002331_01
Cover Note Number	
Driver	
Name of Driver	SEAH WEI FANG
NRIC No	SXXXX868D
Date Of Birth	24/01/1985
Occupation	INDOOR
Date Of Driving Pass	16/01/2014
Driving Experience	6 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92778242
Fax Number	ANCON A KATURAY - 02.5 MARKARINESO A PRO
Contact Number	OTHERS-92778242

VIVI_1985@HOTMAIL.COM

BLK 106 SPOTTISWOODE PARK Address

#11-138

080106 Postcode

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

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

YES Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

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

Police Station Name

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: Police Station Address SINGAPORE

Was notice of intended Prosecution given?

If Yes, against whom?

Police Station Contact

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20200621/7011

Attachment(s)

Are accident photos available for attachment?

YES

NO

YES

NO

1

YES

Was there any video captured by Car Camera?

NO

NO

Was there any audio recorded?

NO

YAMAHA

DETAILS OF OTHER VEHICLE PROPERTY 1

TEL NO: 65470000 - FAX NO:

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Vehicle Registration Number FBE5013E

Details Of Properties

Vehicle Make/Model/Colour

MOTORCYCLE Vehicle Category

Name of Driver DINIE FIRDAUS BIN JAMIL

SXXXX758E NRIC/Passport Number

Contact Number 93824042

Address Postcode

Insurance Company Name

DETAILS OF INJURED PERSON 1

Name

DINIE FIRDAUS BIN JAMIL

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBE5013E

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address Postcode

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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: 22/06/2020

11-200M

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

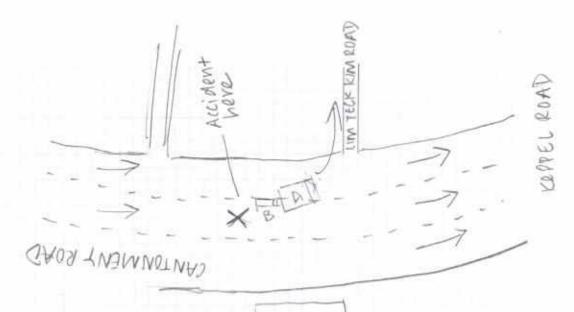
Date & Time:

Reporting Centre Personnel's Sig

Name:

NRIC/FIN No.:





A) SKN 266X B) FRE 5013E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

reppel Road near southpoint building and signated left to prepare to switch lanes to the left-most lane to make a left turn into Lim Teck kim Road, when I felt a collision with my car from the year. I stopped the car immediately and alighted, and saw a motorcycle and the rider lying on the ground. I checked that he was conscious and called All immediately to seek assistance. When the ambulance arrived, the parametrics assessed the rider's injuries to make sure that he was alright, and left the scene shortly after as the rider was able to walk and more around without any assistance. The police took our particulars and ensured that both the rider and myself was safe and able to walk, cross the road and more around on our own without any assistance, before leaving the scene as we both alknowledged that we were fine.

POLICE REPORT 1/2020621/2011

DECLARATION

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

Policyholder's Signature

Date & Time: 22/06/2020

11.45am

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

NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: (20 , 06 , 2020) (DD/MM	MYYYY), TIME: (16 : 45) (HEMM)
LOCATION: CANTONWENT KOAD	
DETAILS OF VEHICLE ON THE PROPERTY OF VEHICLE ON THE PRO	national lysurance
d)POLICY TYPE: (COMPREHENSIVE / THIR D)MAKE & MODEL: MEY (COMPS DEVIZ (I)TYPE: (SALOON / COUPE / MPV /V AN / D)VEHICLE CATEGORY: (PRIVATE / GOMPS)	D PARTY / THIRD PARTY FIRE &THEFT!
I) ARE YOU CLAIMING UNDER YOUR OWN	INSURANCE PRESIDE
IF NO. PLEASE STATE (THIRD PARTY CLAH 2. INSURED / POLICY HOLDER AJNAME: SOAN WO! FANG DINRIC/FIN/PASSPORT: \$8500868 D	(MALE / FEMALE)
CIADDRESS: BIK 106 Spottiswoode A	ark Road # 11-138 5 pore 080101
CONTINUE TO 3.d IF DRIVER ALSO POLICE Chickeding driver) DINAME: SECTION (1) DINRIC/FIN/PASSPORT: CIADDRESS:	(MALE / FEMALE)
4. WAS DRIVER AN EMPLOYEE OF THE INS IF NO, RELATIONSHIP OF THE DRIVER	SURED'S COMPANY? (YES)
5. g)WEATHER CONDITION: (CLEAR / RAINING b)ROAD SURFACE: (DRY / WET / OTHERS_	G / OTHERS
6. WAS ANYBODY INJURED (YES / NO) 7. 0) REPORTED TO POLICE (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATE	ION:
Who of passanger a) VEHICLE NUMBER: FBE SOIZE (Including driver) b) DRIVER'S NAME: Divis Firday Blo	MODEL: YAMAHA
(1) NRIC/FIN/PASSPORT: S9341758 E	CONTACT: 93814042
A HO OF PRESENTED OF VEHICLE NUMBER:	MODEL:
(Induding driver) of DRIVER'S NAME.	CONTACT
(_)	and the state of t

email = VIDEO





1 of 3

Report No. T/20200621/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

	nte/Time Report Made: /06/2020 16:34		Vide Report No.:	Station Diary No.	
Informan	t's Particu	ulars		CHARLES WINES	
Name of Informant: SEAH WEI FANG ID Type / ID No.: NRIC NO / S8500868D			Address: APT BLK 106 SPOTTISWOODE PARK ROAD #11-138 SINGAPORE 080106		
		68D	Contact No.: Home/Office: Mobile: 92778242		
Nationalit SINGAPO	y: ORE CITIZ	EN	Email: vivi_1985@hotmail.com		
Sex: Female			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Sales and marketing manager		g manager	Driving Licence Information: Class:	Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/06/2020 16:45	Type of Location Straight Road
Location: CANTONMEI Weather:	NT ROAD	Road Surface:		Road Speed Limit:
W. W. SANGER ST. ESSAN, C.	Clear Dry			60 Km/h
PERSONAL PROPERTY OF THE PROPE		Dry		90 Kilini
PERSONAL PROPERTY OF THE PROPE		Traffic Control: Not Controlled		Traffic Volume: Moderate

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
FBE5013E	Motorcycle	YAMAHA		Yellow	Slightly Damaged	1
SKN266X	Car	MERCEDES BENZ	CLA200 (R18)	Silver		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKN266X	INDIA INTERNATIONAL INSURANCE PTE LTD	D18MPC0002331_ 01	02/11/2019	01/11/2020





2 of 3

Report No. T/20200621/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Any Pedestrian Ir	volved: No					
No. of Pedestrian	No. of Pedestrians Injured: NIL			destrian	Cross	ing: NA
Rider						
Name	DINIE FIRDAUS BIN JAMIL			ID No.		S9341758E
Related Vehicle	FBE5013E (Motorcy	cle)		Conta	ct No.	93824042
Hospital/Clinic	NIL			Class Driving Licens Expiry	g e &	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ited Medical Leave NIL		Degree o	f Injury	Slight	t
Driver						
Name	SEAH WEI FANG			ID No		S8500868D
Related Vehicle	SKN266X (Car)			Conta	ct No.	92778242
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Dis	charge	NIL		
No of Dave gras	ted Medical Leave	NIL	Degree o	of Injury	NIL	

Brief Details.

I was travelling on the middle lane on Cantonment Road towards Keppel Road near Southpoint building and signaled left to prepare to switch lanes to the left-most lane to make a left-turn into Lim Teck Kin Road, when I felt a collision with my car from the rear. I stopped the car immediately and alighted, and saw a motorcycle and the rider lying on the ground. I checked that he was conscious and called 911 immediately to seek assistance. When the ambulance arrived, the paramedics assessed the rider's injuries to make sure that he was alright, and left the scene shortly after as the rider was able to walk and move around without any assistance. The police took our particulars and ensured that both myself and the rider was safe and able to walk, cross the road and move around on our own without assistance, before leaving the scene as we both acknowledged that we were fine.





3 of 3

Report No. T/20200621/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 21/06/2020 16:34
Officer In Charge Of Case: TP / TPHQ / MOHAMMED FEROZ BIN HUSSIEN Contact No.: 65476206	Classification Of Case:

Authentication Stamp

NP168



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 1987/03792k | GST Reg. No. M2-0070000-X 64 | Cecil Street | #04 | #05 | #06-02 | JOH Building | Singapore 0497) |

Office (65) 63476100 Email invarient incoming Fax (65) 62244174 Website www.in.com.ug

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)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D18MPC0002331 01

COVER: COMPREHENSIVE

1. Index Mark and Registration Number of Vehicle

SKN266X

Chassis No.

WDD1173432N084189

2. Name of Policyholder

SEAH WELFANG

Effective date of Insurance

02 Nov 2019

4. Expiry date of Insurance

01 Nov 2020

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder

The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.

(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*

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.
- 6) Use for racing, pace-making, reliability trial, speed-testing.
- 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 (Malaysia), are not to be included under these headings.

Insured and Named Drivers Excess Sect I: SGD600.00

Unnamed Drivers Excess Sect I:

SGD1 100 00

Windscreen Excess:

SGD100.00

Hire Purchase Company

Zenith Credit Pte Ltd

FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE. ADDITIONAL EXCESS OF \$2500 - ON SECTION I WILL BE APPLICABLE.

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).

Asient Broker

: A000031/Excel Insurance Agency

Date of Issue

: 18/10/2019 16:17:20 MX1-Private Car (Insured Driving)

For India International Insurance Pte Ltd

Authorised Signatory