

**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. SLU966S and vehicle no. SGQ5708P on 26/06/20 at 16:35 HRS PM/AM at/along Tampines Control 5 (Beside Tampines Mall Car park Entrance)

We refer to the above matter.

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

Vehicle Repair cost / <del>Excess</del>	\$ 4708.00
Vehicle Rental Fee for <u>-</u> days @ \$ <u>-</u> per day	\$ -
Loss of use for <u>7</u> days @ \$ <u>100.00</u> per day	\$ 700.00
<del>Police search fee / police report fee</del> / LTA search fees	\$ 7.45
Others <u>3rd Party Report</u>	\$ 29.00
Total :	\$ 5444.45

Yours faithfully,

*ABBY*



ABBY

HP : 9856 4815

E-mail: [dynamicautowork@gmail.com](mailto:dynamicautowork@gmail.com)

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

Tel: 6341 6789 Fax: 6341 6778

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**Authorisation To Act**

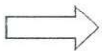
I, Tan Khean Hong Peter ("the third party claimant") of  
Blk 506 Jelapang Road, #09-28, S(670506)  
(address), owner of SLU96665 (vehicle no.) hereby  
authorise Dynamic Autowork Pte. Ltd.  
("the workshop") to act for me with respect to my claim for repair  
costs and/or rental and/or loss of use ("claim") for my vehicle  
no. SLU96665 that was damaged pursuant to the accident which  
occurred on 26/06/20 (date) at/along Tampines Central 5  
(Beside Tampines Mall car Park Entrance) (location) involving  
vehicle no/s SLQ5708P  
("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 26 day of 06 (month) 20 20 (year)



Signed by "the third party claimant"



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. SLU9666S and SCG5708P on 26/06/20  
at/along Tampines Central 5 (Beside Tampines Mall Car Park Entrance)

1. I/We, the Owner of motor vehicle no. SLU9666S 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 26 day of 06 2020

Signature of vehicle owner [Signature]

Name - Tan Khean Hong Peter

IC/UEN No : S2015302D  
(Company stamp, if applicable)

Address : BK 506 Jelapang Road  
#09-28, SC 678506

Tel : 9009 1816

Witnessed by :

[Signature]  
Abby



"My execution of this Discharge  
Voucher is only for my claim  
for property damage and not  
prejudicial to any other claims"

**AUTHORIZATION TO ACT**  
**(AIG Asia Pacific - Express Third Party Claim)**


I, Tan Khenn Hong Peter ("the third party claimant")  
of BLK 506 Delapang Road, #09-28, S(670506) (address),  
owner of SLU 9666S (vehicle no.) hereby authorize  
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. SLU 9666S that was damaged pursuant to the  
accident which occurred on 26/06/20 (date) along Tampines  
Central 5 (Beside Tampines Mall Car Park Entrance) (location)  
involving vehicle no/s S&Q 5708 P  
("the accident").

I further authorize the workshop to settle my above mentioned  
claim in a manner that they deem fit and the workshop is further  
authorized to receive payment further to settlement of my claim  
with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach  
on my behalf is on a without prejudice and without admission of  
liability basis insofar as the driver/owner/insurers of the other  
vehicle/s is concerned.

Dated this 26 day of 06 (month) 20 20 (year)

  
Signed by "the third party claimant"

  
  
Signed by "the workshop"  
(with chop)



# 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 # : 00001159  
Date : 18.09.20  
Vehicle No : SLU9666S

### 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 supply of spare parts, labour and spray painting charges	\$ 4,400.00
Sub Total		\$ 4,400.00
Add GST 7%		\$ 308.00
Total Amount		\$ 4,708.00

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



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

Print Date/Time : 26 Jun 2020 / 18:00:17

Receipt Date/Time : 26 Jun 2020 / 18:00:17

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-200626-003572

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SKQ5708P				
As at 26 Jun 2020/16:35:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SKQ5708P			
	Enquiry Fee	7.00	0.49	7.49
	20200626175854357513			
	<b>Sub-Total</b>	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	<b>Rounding Difference</b>			0.04
	<b>Total Amount Payable</b>			7.45
Paid By				
	526471XXXXXX1359	eNETS Credit Card		7.45
	<b>Total</b>			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-20-076686

Date of Request: 30/06/2020

Your Ref No: PURCHASE BY EMAIL

DYNAMIC AUTOWORK PTE. LTD  
8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT  
SINGAPORE 415875

Dear Sir/Madam,

Your Vehicle No: SLU9666S

Date of Accident: 26/06/2020

Place of Accident: TAMPINES CENTRAL 5

Involving Vehicle No: SKQ5708P

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.

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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-20-076688

Date of Request: 30/06/2020

Your Ref No: PURCHASE BY EMAIL

DYNAMIC AUTOWORK PTE. LTD  
8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT  
SINGAPORE 415875

Dear Sir/Madam,

Date of Accident: 26/06/2020

Vehicle No: SLU9666S

Place of Accident: TAMPINES CTRL 5(BESIDE TAMPINES MALL C/P ENTRANCE)

Involving Vehicle No: SKQ5708P

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\$)
SKQ5708P	TAMPINES CTRL 5(BESIDE TAMPINES MALL C/P ENTRANCE)	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.

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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	29/06/2020 09:37
Date Of Accident	26/06/2020 16:35
Exact Location Of Accident	TAMPINES CTRL 5(BESIDE TAMPINES MALL C/P ENTRANCE)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU9666S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN KHEAN HONG PETER
NRIC No	SXXXX302D
Email Address	PETERTAN1816@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90091816
Alternative Phone No	OTHERS-90091816

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA AXIO
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MR0000249
Cover Note Number	

### Driver

Name of Driver	TAN KHEAN HONG PETER
NRIC No	SXXXX302D
Date Of Birth	18/09/1950
Occupation	INDOOR
Date Of Driving Pass	27/02/1978
Driving Experience	42 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	+65-90091816
Fax Number	
Contact Number	OTHERS-90091816
EMail Address	PETERTAN1816@GMAIL.COM

Address	BLK 506 JELAPANG ROAD #09-28
Postcode	670506
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	2
Was any body injured in the Accident?	YES
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?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKQ5708P
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)	

#### DETAILS OF INJURED PERSON 1

Name	TAN KHEAN HONG PETER
Approximate Age	
Injuries Sustain	BODY PAIN
Injured person in which vehicle?	SLU9666S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## 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.
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.

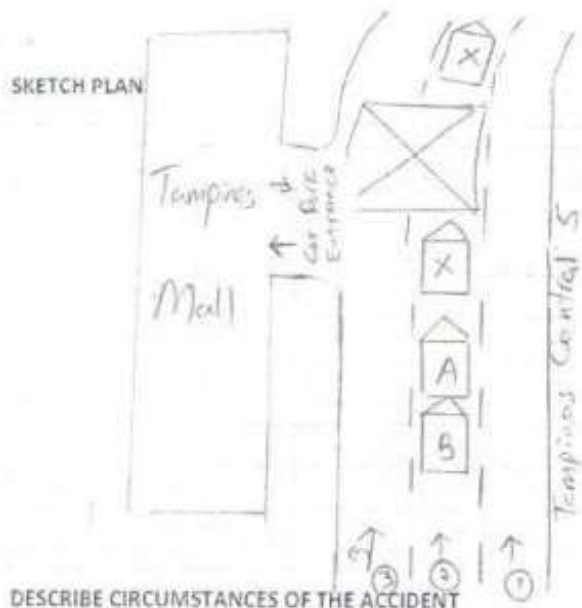
  
Policyholder's Signature  
Date & Time:

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

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



# Accident Sketch Plan



A = SLU 9666S

B = SKQ 5708P

Tampines Central S

(Beside Tampines Mall  
Car Park Entrance)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached

## 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:

Reporting Centre Personnel's Signature  
Name: 29/06/2020  
NRIC/Fin No.:

ATTACHMENT

On 26.06.20 at about 16:35 hours at along Tampines Central 5 (Beside Tampines Mall Car Park Entrance) . While I was travelling straight on the lane 2 and my front vehicle slow down and stop hence I follow suit.

Suddenly I heard a loud bang from behind and when I alighted I realized it was vehicle (B) who hit my rear portion of my vehicle (A) causing damages to my vehicle.

Vehicle (A) : SLU9666S

Vehicle (B) : SKQ5708P

*[Handwritten signature]*  
*27/06/2020*  
*[Handwritten signature]*

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2015302D



TAN KHEAN HONG PETER

陳建丰

CHINESE

18-09-1950

M

MALAYSIA

SLU9666S

owner & driver

5983385



NRIC No S2015302D



Date of issue  
20-07-2018

Address


APT BLK 506 JELAPANG ROAD  
#09-28  
SINGAPORE 670506

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S2015302D  
Name: TAN KHEAN HONG PETER

Birth Date: 18 Sep 1950  
Issue Date: 28 Jan 2003

000155245K



SLU9666S

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	27 Feb 1978

NP 428A

Licence No: S2015302D



Land Transport Authority

**VOCATIONAL LICENCE**  
Licence No : S2015302D  
Name : TAN KHEAN HONG PETER



Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

SHU 96665

Owner & driver

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	22/06/2018



# Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the  
Tokio Marine Group



**TOKIO MARINE**  
INSURANCE GROUP

## Certificate of Insurance

FORM MX1 H

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)

Policy No.: MR000249 (Private Car)

1. Index Mark and Registration Number of Vehicle SLU9666S Chassis No.: NKE1657143052
2. Name of Policyholder TAN KHEAN HONG PETER
3. Effective date of the Commencement of Insurance for the purposes of the Act 11/01/2020 (11:04:36)
4. Date of Expiry of Insurance 10/01/2021
5. Persons or Class of Persons entitled to drive\*  
Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.  
Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.  
The Policy does not cover:-  
1) Use for racing, pace-making, reliability trial or speed-testing.  
2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

\* 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.

### 6. Limitations as to use\*

\* 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.

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).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd, within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION		Account No: 2898DDA	
Insurance Plan:	Comprehensive		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 2,500.00	(Original Excess : SGD 2,500.00)
	Additional Excess for Unnamed Driver(s)	SGD 500.00	
	Additional Excess for Young or Inexperience Driver(s)	SGD 1,500.00	
	WindScreen Excess	SGD 100.00	
	Excess-Third Party (Sect II)	SGD 2,500.00	
Financial Interest:	SHUN HENG CREDIT PTE LTD		
Additional Terms:	1. Unnamed Driver Excess is not applicable		
	2. Vehicle is licensed for private hire by LTA and can be used for private hire limousine services.		
	3. Only named drivers with private hire licences can use car for private hire.		
	4. YID excess applied on Section 1 & Section 2 separately.		
	5. Notwithstanding anything to the contrary in the policy, MC19 Waiver of Excess is NOT applicable.		
	6. Private Hire Usage Vehicle Endorsement is applicable.		
	7. Approved workshop plan only		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature