

AIG ASIA PACIFIC INSURANCE
78 SHENTON WAY
#08-16
SINGAPORE 079120
ATTENTION: MOTOR CLAIMS

30TH DECEMBER 2020

"WITHOUT PREJUDICE"

ACCIDENT INVOLVING VEHICLES SMA7463S AND SJH4429K ON 22.08.2020

Dear Sirs

We refer to the above matter.

The accident was caused solely by the negligence on the part of your insured. As a result of the said accident, our client has suffered losses, which are set out hereunder as follows:

Repair Cost	: \$9581.46
Loss of Rental	: \$1200.00 (12 DAYS X \$100.00)
GIA Search	: \$2.00
Total cost	: \$10,783.40

A copy each of the following supporting documents is enclosed:

Repair Invoice & Rental Invoice	Certificate of Insurance
Accident report/IC	GIA Search
Letter of authority	Discharge voucher

Please forward us an acknowledgement of receipt of this letter within 14 days of your receipt, failing which our client will have no choice but to take action against you without any further notice to you or your client.

For any clarification, you can contact us at 97637000/ fax 67411626 or email to kavi@tts.com.sg
Thank you.

Your's sincerely,



Ms. Kavi
Motor Claims officer
Email: kavi@tts.com.sg



TTS EUROCARS pte ltd
A member of the TTS Motor Group

Company Reg. No: 200413930H
GST No: 200413930H

383 Sin Ming Drive, TTS Centre, Singapore 575717 Sales: +65 6842 2222 Admin: +65 6757 0122 Aftersales: +65 6757 2622 Fax: +65 6741 1626
Branch : 73 Mackenzie Road Unit No: 01-14/15 Mackenzie Car Mall Singapore 228729 Tel : +65 6462 1111

For corporate, fleet & leasing enquiries, please contact +65 6462 1111
24-Hour Emergency Assistance: +65 6475 2722

Website : www.tts.com.sg



TAX INVOICE

AIG ASIA PACIFIC INSURANCE PTE LTD

AIG BUILDING

78 SHENTON WAY

#07-16

SINGAPORE 079120

Vehicle No : SMA7463S

HYUNDAI 130 PDB 1.4 T-GDI DC

Mileage : 0

Document No: IN20-301186

Date : 29/12/2020

Staff ID : KAVIDHA

Account No : AIG

Job No : T20-101829

Page 1

Description	Quantity	U Price	Disc%	Amount
REAR LH FENDER	1	1,891.10		1,891.10
REAR LH DOOR	1	1,830.00		1,830.00
FRONT LH DOOR	1	1,734.00		1,734.00
REAR LH SPORTS RIM	1	2,106.50		2,106.50
FENDER TAPES	1	24.10		24.10
MOULDING ASSY REAR DOOR FRAME	1	82.50		82.50
FRT DOOR TOP MOULDING LH	1	95.60		95.60
TAPE FRT BLACK REAR LH	1	36.50		36.50
BLACK TAPE REAR DOOR FRT LH	1	36.50		36.50
BLACK TAPE REAR DOOR FRAME REAR LH	1	31.50		31.50
LESS 20% ON PARTS	1	-1,573.66		-1,573.66
SUNDRIES	1	20.00		20.00
WIRING CONNECTION AND CHECK	1	20.00		20.00
TUFF KOTE AND SPRAY ANTI RUST PROOFING	1	90.00		90.00
SEALANT FOR DOOR PANEL FENDER END PANEL TRANSFER FRT DOOR	1	90.00		90.00
COMPONENTS TRIMS SCUFF PLATES				
TRANSFER FRT DOOR COMPONENTS TRIMS SCUFF PLATES	1	80.00		80.00
TRANSFER REAR DOOR COMPONENTS TRIMS SCUFF PLATES	1	80.00		80.00
REMOVE AND REFIX REAR LH DOOR QUARTER GLASS CONDUCT WATER	1	30.00		30.00
LEAK TEST				
SEALANT FOR LH DOOR QUARTER GLASS	1	60.00		60.00
INNER SEAL FOR LH DOOR QUARTER GLASS	1	30.00		30.00
REMOVE AND REFIX REAR SEATS CARPETS REAR LH FENDER INNER	1	100.00		100.00
TRIMS SPARE TYRE COMPARTMENT BOARDS AND SCUFF SEAT BELTS				
TO FACILITATE REPAIR				
REMOVE AND REFIX PETROL TANK TO FACILITATE REPAIRS	1	60.00		60.00
REPLACE REAR LH SPORTS RIM CONDUCT WHBL BALANCING	1	20.00		20.00
CONDUCT 4 WHBL ALIGNMENT CHECK STEERING ANGLE AND GEOMETRY	1	80.00		80.00



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383 Sin Ming Drive, TTS Centre, Singapore 575717 • Sales: +65 6842 2222 • Admin: +65 6757 0122 • After Sales: +65 6757 2622 • Fax: +65 6741 1626

Branch: 73 Mackenzie Road Lot 14 & 15 Mackenzie Car Mall Singapore 228729 • Tel: +65 6462 1111 • Fax: +65 6252 4834

24 Hours Emergency Assistance: +65 6475 2722

Website: www.tts.com.sg

TAX INVOICE

AIG ASIA PACIFIC INSURANCE PTB LTD
AIG BUILDING
78 SHERBTON WAY
#07-16
SINGAPORE 079120

Document No: IN20-301186
Date : 29/12/2020

Vehicle No : SHA7463S

Staff ID : KAVIDHA
Account No : AIG
Job No : T20-101829
Page 2

Mileage : 0
HYUNDAI 130 PDB 1.4 T-GDI DC

Description	Quantity	U Price	Disc%	Amount
LABOUR CHARGE TO DISMANTLE & REPAIR FRT BUMPER FRT LH FENDER FRT LH DOOR REAR LH DOOR LH ROCKER PANEL LH REAR FENDER REAR BUMPER TO REPAIR AND ADJUST AFFECTED PORTION TO SPECIFIC DIMENSION	1	1,000.00		1,000.00
SPRAY PAINT FRT BUMPER FRT LH FENDER FRT LH DOOR REAR LH D PILLAR LH ROCKER PANEL REAR LH DOOR REAR LH FENDER REAR BUMPER REAR END PANEL AND ALL OTHER ACCIDENT AFFECTED PORTION TO SPECIFIC DIMENSION	1	900.00		900.00

Total 8,954.64

0.00

7.00% GST Pur 626.82

Nett Total 9,581.46

* Acknowledgement by Customer *

I confirm that the goods stated in this invoice have
been received by me in good working order and condition.
I further confirm that all services and/or repair jobs
stated in this invoice are completed and done to my
satisfaction.

TTS BUROCARS PTB LTD

Name/Signature of Customer: TTS BUROCARS

Authorised Signature

A member of the TTS Motor Group

Company Reg. No: 200413930H GST No: 20-0413930-H

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24 Hours Emergency Assistance: +65 6475 2722

Website: w



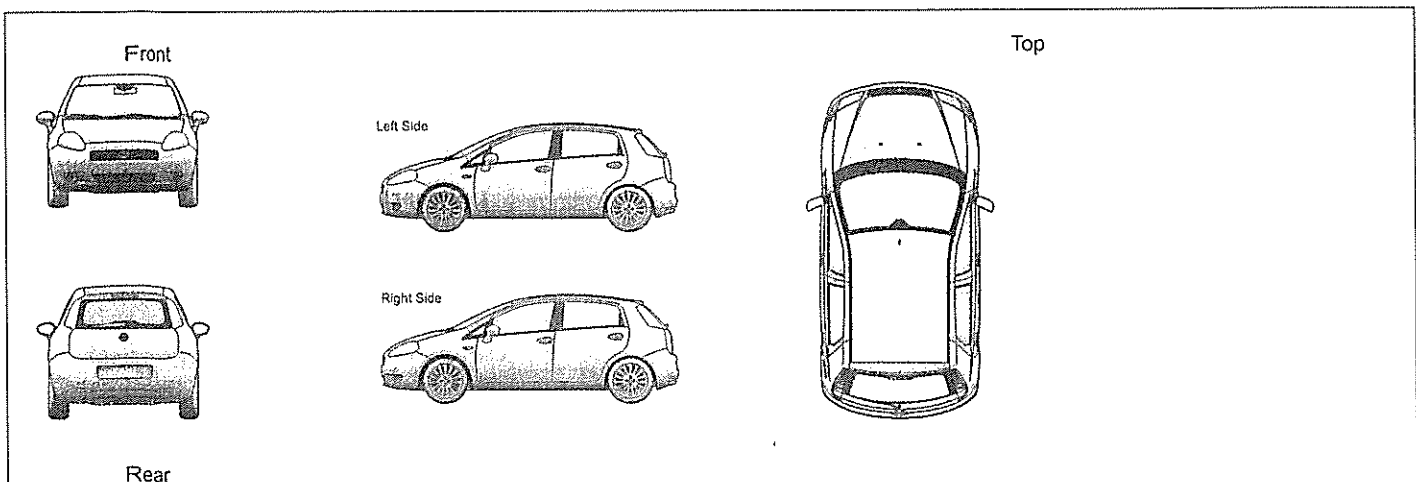
TTS EUROCARS pte ltd

A member of the TTS Motor Group

Leasing & Rental Agreement

TTS : 0381

HIRER'S PARTICULARS		VEHICLE DETAILS
Name: <u>Yong Siew Gee Anita</u>	NRIC No/ Passport No: <u>S1607508F</u>	Vehicle Registration No: <u>SJZ6125D</u>
Address: <u>Blk 123B Rivervale Drive #10-199 (S) 542123</u>	Telephone (Home): Mobile No: <u>90101939</u>	Make / Model: <u>Ford focus</u> Colour: <u>Blue</u>
The hirer is to bear excess of the first \$3,500.00 on the damage to TTS's car (customer to sign acknowledgement)		
Collision Damage Waiver : Yes <u>(No)</u>	Date Hired from: <u>5/10/20</u>	Rental Amount : \$
Excess waiver to :		CDW : \$
Estimated Date of Return :	No. of Days:	Refundable deposit : \$
Remarks: <u>Accident claim - SMA74635.</u>		Total : \$
		Amount Paid : \$



Collection of Vehicle			Return of Vehicle		
Out Date / Time <u>5/10/20</u>	Mileage Out <u>139223</u>	Fuel Level 	In Date / Time <u>16/10/20 1.10pm</u>	Mileage In <u>139814</u>	Fuel Level
Checkout by: <u>Kavi</u>			Check In by: <u>Kavi</u>		

All terms and conditions shall be governed by and construed in accordance to the laws of the Republic Singapore. In acknowledgement and agreement to the above terms and conditions of the rental Agreement contract:

[Signature]
Hirer Signature

[Signature]
TTS EUROCARS PTE LTD

Refund Deposit to Customer: \$

Date:

Customer's Signature: [Signature]

DISCHARGE VOUCHER

26TH NOVEMBER 2020

AIG INSURANCE

NAME : YONG SIEW GEE ANITA
NRIC NO : SS1607508F
CAR PLATE NO : SMA7463S
CLAIM TYPE : Third Party
POLICY NO : P10187475R01
INSURANCE EXCESS : -
REPAIR COST : \$9581.46
DATE OF ACCIDENT : 22.08.2020

I Hereby acknowledge having received from TTS EUROCARS PTE LTD, 383 Sin Ming Drive. TTS CENTRE Singapore 575717, my vehicle, which had been repaired to my satisfaction and acceptance.

I Admit that payment of \$ 9581.46 account for such repairs is in full discharge of reference claim number **SMA7463S** in respect of the Third Party claim to the said vehicle.

Dated this day of : 26TH NOVEMBER 2020



Signed by Policy holder/Insured





Signed by Workshop



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Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10187475R01 (Comprehensive / Named Driver Plan / Any Workshop)

1) Vehicle Registration Number	:	SMA7463S
Chassis Number	:	TMAH3513VJJ065190
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	19/06/2020 (00:00)
3) Date / Time of Expiry of Insurance	:	18/06/2021 (23:59)
4) Excess (i) Policy	:	S\$ 600.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Yong Siew Gee Anita
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
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 any 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 accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.		
Main Driver / Date of Birth	:	Ong Hock Lan(13/08/1967)
Named Driver(s) / Date of Birth	:	Yong Siew Gee Anita (04/07/1963) Ong Ah Suan (18/12/1963) Ong Bee Choo (31/12/1960)
7) Limitation as to use*		
Use only for social, domestic and pleasure purposes and for the business purposes of the drivers listed above. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or 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) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.		
8) Finance Company	:	NA

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) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on
04/06/2020

Auto & General Insurance (Singapore) Pte. Limited
Trading as Budget Direct Insurance



Simon Birch

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1804735G


Name
ONG HOCK LAM

Race
CHINESE

Date of Birth
13-08-1967

Sex
M

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

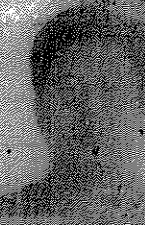
License Number S1804735G

Name
ONG HOCK LAM

Birth Date 13 Aug 1967

Issue Date 07 Aug 2003

000725456E



1503605


Barcode

NRIC No. S1804735

Blood Group B+ Date of Issue 14-12-1993

ART DEK 1233 RIVERVALE DRIVE #01-10

NRIC No. S1804735G Date: 21-11-1993 No: 2724201




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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 3,500 kgs

PASS DATE 06 Aug 1990

NP 428A

Licence No. S1804735G





TTS EUROCARS pte ltd

A member of the TTS Motor
Group

Company Reg. No: 200413930H

LETTER OF AUTHORISATION

ACCIDENT INVOLVING SMA7463S & SJH4429K ON 22/8/20
I, Yong Siew Gee Anita owner of Vehicle Registration No. SMA7463S

Hereby authorize TTS Eurocars Pte Ltd/ TTS Motor Group Pte Ltd to submit, correspond, negotiate and settle my claim for cost of repair and/or uninsured losses arising from the above accident. I further authorize TTS Eurocars Pte Ltd/ TTS Motor Group Pte Ltd to execute, sign, seal and deliver all documents whatsoever in relation to this matter and to accept and receive any payment due to me in respect of my above claim.

I hereby declare that all acts and documents done by virtue of this Letter of Authorisation on my behalf shall be good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by me in person.

I further confirm that the acceptance by TTS Eurocars Pte Ltd/ TTS Motor Group Pte Ltd of the settlement amount in respect of such claim shall constitute the full discharge of the claim in respect of such loss and damage.

Signed By:

Name

NRIC No:

In the presence of:

Name

NRIC No:

Kavidha

58171135F

**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

Third Party Insurer Enquiry

Our Ref No: GR-20-099196
Date of Request: 24/08/2020

Your Ref No: Online Purchase

TTS Eurocars Pte Ltd
383 Serangoon Drive
TTS Centre
Singapore 575717

Dear Sir/Madam,

Enquiry Date: 24/08/2020
Enquiry By: Natarajan Kavidha Rajan
TP Vehicle No.: SJH4429K
Accident Date: 22/08/2020

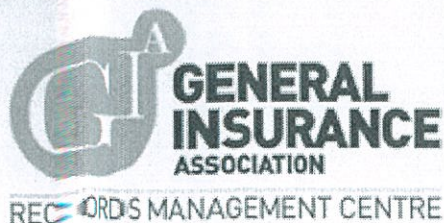
Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJH4429K	AIG Asia Pacific Insurance Pte. Ltd.	07/02/2020-06/02/2021	65-6419-3000

Thank You.

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.

This is a computer generated document and requires no signature.

**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 RefNo: GR-20-099196
Date of Request: 24/08/2020

Your Ref No: Online Purchase

TTS Eurocars Pte Ltd
383 Sin Ming Drive
TTS Centre
Singapore 575717

Dear Sir/Madam,

Enquiry Date: 24/08/2020
Enquiry By: Natarajan Kavidha Rajan
TP Vehicle No.: SJH4429K
Accident Date: 22/08/2020

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

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	24/08/2020 11:21
Date Of Accident	22/08/2020 11:35
Exact Location Of Accident	CAR PARK BLK 123B AT RIVERVALE DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA7463S
Insured/Policyholder	
Name Of Registered Owner	YONG SIEW GEE ANITA
NRIC No	SXXXX508F
Email Address	HOCKLAMO@SINGET.COM.SG
Mobile Phone No	(LOCAL) +65-90101939
Alternative Phone No	OFFICE-90101939
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	I30-1.4 GLS 5DR DCT TURBO (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL
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	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P10187475R01
Cover Note Number	

Driver

Name of Driver	ONG HOCK LAM
NRIC No	SXXXX735G
Date Of Birth	13/08/1967
Occupation	INDOOR
Date Of Driving Pass	06/08/1990
Driving Experience	30 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90101939
Fax Number	
Contact Number	
EMail Address	HOCKLAMO@SINGET.COM.SG

Address	BLK 123B RIVERVALE DRIVE #10-139
Postcode	542123
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	3
Passenger 1	NAME: : YONG SIEW GEE ANITA GENDER: : FEMALE
Passenger 2	NAME: : ONG JING EN GENDER: : MALE

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

REFER TO ACCIDENT SKETCH

Attachment(s)

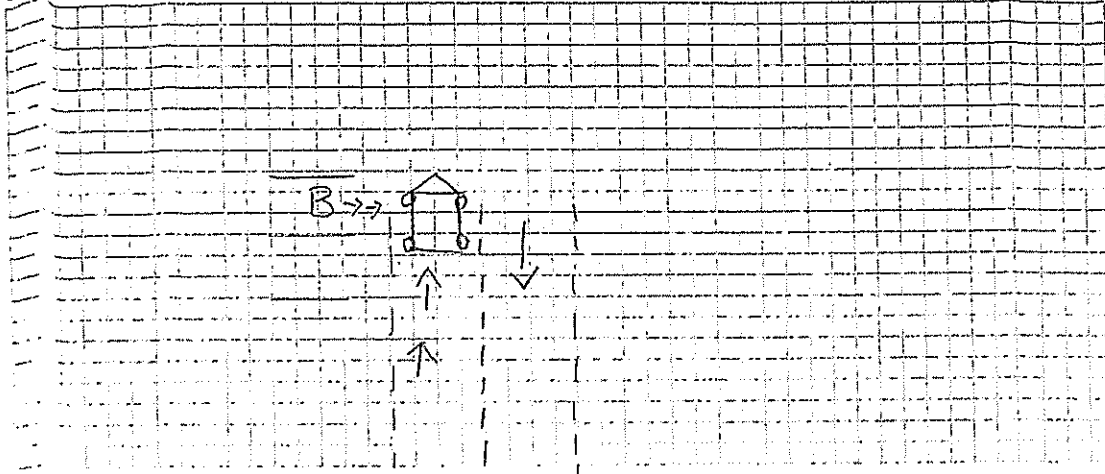
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJH4429K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CATHERINE YAQP AI NEE
NRIC/Passport Number	SXXXX966E
Contact Number	92984039
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Car Accident At Block 123A Loading Bay
(Rivervale Drive)

On Saturday, (22/08/2020) at about 11:36am

my vehicle SMA 74635 was travelling along the
service road of Block 123B towards Block 123A

at Rivervale Drive and another vehicle SJH14429K

drove out from the loading bay located at Block 123A

collided onto the left portion of my car.

Attached is the accident videos, front and rear.

The damage of my car are as follows:

The left side of the passenger door (inclusive of side

skirt) was badly damaged, scratched and dented by the collision.

And it extended further to the rear left door, quarter
panel, spot rim of tyres and the rear
bumper.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11:00am
24/08/2020

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: S8171135F.

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: 11:02 AM / 24/08/2020

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: S8171135F