



**WITHOUT PREJUDICE**

Our Ref: SJP 3590R

Your Ref: SMK 3751J – Ref# SOM02T6C

8<sup>th</sup> December 2020

**ATTN:** LKK Auto Consultants Pte Ltd  
**INSURER:** AXA Insurance Pte Ltd

Dear Hsiao Tong,

**Accident Involving:** SJP 3590R and SMK 3751J  
**Date of Accident:** 2 September 2020  
**Location of Accident:** PIE (Tuas) After Clementi Road

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair as agreed	\$ 13,600.00
Add Loss of Rental	\$ 1,960.00 14 Days - INV-AL-0007310 *ACTUAL: 15 DAYS* 2 Days PRS (2/3 Sep) + 1 Day Resurvey (4 Sep) + 10 Repair Days Agreed (5/7/8/9/10/11/12/14/15/16 Sep) + 2 Sunday (6/13 Sep)
Total	\$ 15,560.00
Add LTA Search Fee	\$ 7.45
<b>GRAND TOTAL</b>	<b>\$ 15,567.45</b>

Kindly pay the Grand Total Amount of **\$15,567.45** to:

**Team AutoPro Pte Ltd**  
160 Sin Ming Drive #02-12  
Sin Ming AutoCity  
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

Thank you.



Regards  
Adel (Ms)

# PROFORMA INVOICE

**ATTENTION:**

Yong Siew Chin

PI Number	P2012-1179
PI Date	8-Dec-2020
Vehicle No.	SJP 3590R
Accident Date	2-Sep-2020

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SJP 3590R	COR Lump Sum		\$ 13,600.00

**Notes:**

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$	13,600.00
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Authorized Signature





## AL Car Leasing Pte Ltd

UEN: 201959595R  
Tel: 6762 5335  
210 TURF CLUB ROAD  
LOT 801 THE GRANDSTAND  
SINGAPORE 287995  
billing@alautocar.sg

Bill To:

### TEAM AUTOPRO PTE LTD C/O YONG SIEW CHIN

Tel: 98179639  
146 SERANGOON NORTH AVENUE 1  
#12-405  
SINGAPORE 550146

## INVOICE

INV-AL-0007310

Sales/ After Sales Tel: 67625335

Towing Service Tel: 67431987

Net Amount

**\$1,960.00**

Item	Amount
Rental Fee for SKU 2297 G - HONDA MOBILIO SV 1.5 CVT 14 Day(s) (2 Sep 2020 - 16 Sep 2020) Rate: \$140.00	\$1,960.00
Invoice Net Amount	<b>\$1,960.00</b>

For PayNow Corporate:  
PayNow ID (SGD) : 201959595R  
or scan QR code below





# AL CAR LEASING Pte. Ltd.

210 Turf Club Road, Lot - B01, The Gradstand, Singapore 287995  
Tel: 6762 5335 Fax: 6362 5335 Support H/P: 8877 5335

## LEASING CONTRACT / HANDOVER FORM

SJP3590R

Serial No:

<b>VEHICLE DETAILS</b>		<b>RENTAL DATE &amp; TIME TAKEN CAR</b>	
Vehicle No: SKU 229761		2/9/2020 1:20PM	
Make / Model: Honda Mobilio		<b>DATE &amp; TIME RETURN CAR</b>	
		16/9/2020 3:50PM	
<b>HIRER / DRIVER PARTICULARS</b>		Hiring Period Date: 2/9/2020 to 16/9/2020	
Name: YONG SIEW CHIN			
Address: 146 Serangoon North Ave 1 #12405			
Singapore (550146)			
Mobile: 98179639 Home:			
PP/NTIC No: S21617450 Nationality: S'Pore			
License No:			
Country of Issue: S'Pore			
Class: (3) 3A / 4 Date of Birth: 01/09/1955			
Pass Date: 14 SEP 2005 Expiry Date:			
<b>ADDITIONAL DRIVER PARTICULARS</b>		<b>PETROL LEVEL</b> 3BAR	
Name: LEE PECK YANG			
Address: same as above			
Singapore (11)			
Mobile: 98179639 Home:			
PP / Nric No: S15648240 Nationality: S'Pore			
License No:			
Country of Issue: 3/03/1962			
Class: (3) 3A / 4 Date of Birth: DD / MM / YY			
Pass Date: DD / MM / YY Expiry Date:			
Notes: 16/06/1981			
		<b>CHARGES</b>	
		Hourly @S\$	Qty
		Daily @S\$	Amount
		Weekly @S\$	
		Mthly @S\$	
		Delivery Service	
		Deposit: Cash / Cheque / Credit Card / Nets	
		Cheque No.:	
		<b>SUB-TOTAL:</b>	S\$ 1960
		<b>TOTAL:</b>	S\$ 1960
		<b>EXCESS:</b> \$2,000 if there is any damages to vehicle,	
		<b>3rd party claims Excess:</b> \$2,000	
		<b>Total Lost 10% of car market value + Excess Payable</b>	

THE HIRER DECLARES THAT THE ABOVE PARTICULARS GIVEN BY HIM/HER ARE TRUE AND CORRECT IN EVERY ASPECT AND HE/SHE HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS PRINTED OVERLEAF.

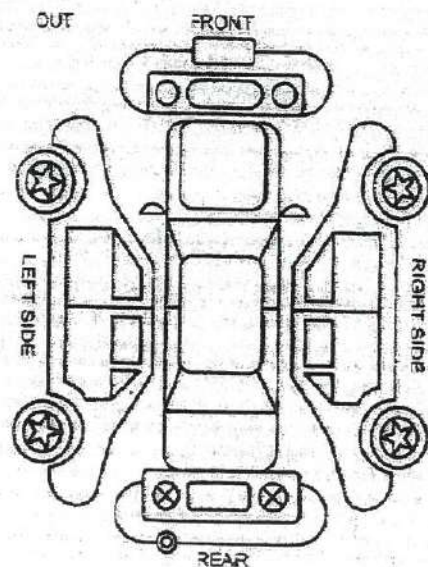
THE HIRER AGREES TO TAKE OVER THE VEHICLE ON THE TERMS AND CONDITIONS PRINTED OVERLEAF.

### NOTE:

UPON SIGNING THIS CONTRACT, THIS CONTRACT SHALL DEEM TO HAVE BEEN MADE BETWEEN AL AUTOCAR PTE LTD AND THE HIRER WHEREBY AL AUTOCAR PTE LTD WILL LET AND THE HIRER WILL TAKE OVER THE VEHICLE UPON THE TERMS AND CONDITIONS PRINTED OVERLEAF.

### IMPORTANT:

1. THE VEHICLE IS SOLELY FOR LOCAL USE ( SINGAPORE ) ONLY.
2. ADDITIONAL CHARGES TO BE CHARGE IF USED IN MALAYSIA.
3. DRIVER/S MUST BE BELOW 65 YEARS OR ABOVE 22 YEARS OF AGE WITH MINIMUM DRIVING EXPERIENCE OF 2 YEARS.
4. IF DRIVER/S IS 21 YEARS OLD & MORE THAN 1 YEAR DRIVING EXPERIENCE EXCESS WILL BE DOUBLED.



CHECKED BY : HIRER'S SIGNATURE

AUTHORISED SIGNATURE & NAME

TAKE CAR

RETURN CAR

HIRER'S SIGNATURE

DATE

2/9/2020





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

Print Date/Time : 02 Sep 2020 / 13:31:10

Receipt Date/Time : 02 Sep 2020 / 13:31:10

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-200902-001828

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SMK3751J				
As at 02 Sep 2020/12:05:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SMK3751J Enquiry Fee 20200902133016846247	7.00	0.49	7.49
<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				
426569XXXXXX8855		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.



To : **Team AutoPro Pte Ltd**  
CRN : **201811621K**  
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

**Letter of Authorization & Undertaking**

In Respect of Accident Involving my/our Vehicle No.: SJP 3590 R  
and SMK 3751 J (B) and GBB 4361 Y (C)  
and ..... and .....  
@ PIE (TUAS) CLEMENTI ROAD

dated 02/09/2020

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,

X Yong

Claimant Signature & Co's Stamp (if applicable)

Date: 02/09/2020

## 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	02/09/2020 17:42
Date Of Accident	02/09/2020 12:05
Exact Location Of Accident	PIE (TUAS) AFTER CLEMENTI ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP3590R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YONG SIEW CHIN
NRIC No	SXXXX795D
Email Address	LEEPECKYANG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98179639
Alternative Phone No	OTHERS-98179639

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (A)
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100333797-07
Cover Note Number	

### Driver

Name of Driver	LEE PECK YANG
NRIC No	SXXXX824D
Date Of Birth	31/03/1962
Occupation	INDOOR
Date Of Driving Pass	16/06/1981
Driving Experience	39 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98179639
Fax Number	
Contact Number	OTHERS-98179639
E-Mail Address	LEEPECKYANG@GMAIL.COM

Address	BLK 146 SERANGOON NORTH AVENUE 1 #12-405
Postcode	550146
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	CHAIN COLLISION
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	4
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 PLAN

#### 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	SMK3751J
Vehicle Make/Model/Colour	LEXUS
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBB4361Y
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Vehicle Make/Model/Colour	VOLKWAGEN
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)	

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKS3374X
Vehicle Make/Model/Colour	VOLVO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### 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.

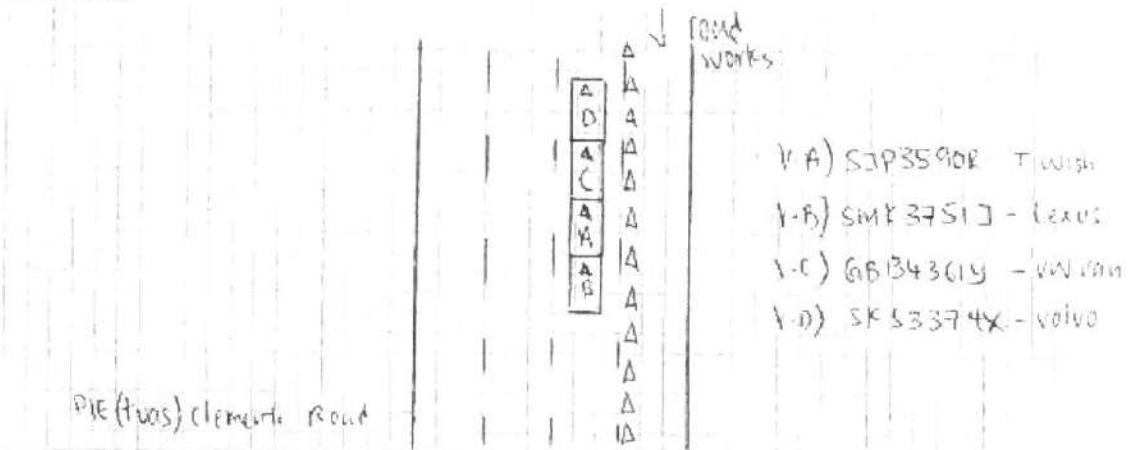
Policyholder's Signature  
Date & Time:

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

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

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle "A" SJP3590R was travelling

On the stated venue I was travelling straight in my lane, slowed down

my vehicle and eventually came to a complete stop as the vehicle

in front of me was stationary a few moments later, I felt a

huge impact on my vehicle rear. The impact caused my vehicle to

propelled forward and collided against GBB43619. Shortly I got

out and realised I was involved in a 4 car chain collision

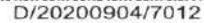
### DECLARATION

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:  
NRIC/FIN No.:



**POLICE REPORT (NP299)**

Report No. D/20200904/7012

Police Station Of Origin  
Clementi Division HQ  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No:1800-7740000

Date/Time Report Made 04/09/2020 13:57	Vide Report No.		Station Diary No.	
Name Of Informant KEE CHIA HOW, DESMOND	Address 451A BUKIT BATOK WEST AVENUE 6 #21-707 SINGAPORE 651451			
ID Type / ID No. NRIC NO / S8517907A	Contact No. Home/Office:                      Mobile: 98179639			
Nationality SINGAPORE CITIZEN	Email Address desmondkee13@gmail.com			
Occupation Workshop general worker	Sex Male	Age 35	Date of Birth 04/06/1985	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 02/09/2020 11:55 - 02/09/2020 12:30	Location Of Incident Blk 134 Yishun St 11			

### Brief details.

On behalf of Mr Lee Peck Yang

ic:S1564824D

On the stated date and time.I vehicle "A" SJP3590R was traveling on the stated venue. I was traveling straight in my lane,slowed down my vehicle and eventually came to a complete stop as the vehicle in front of me stationary a few moments later.I felt a huge impact on my vehicle rear. The impact cause my vehicle to propelled forward and collided against GBB4361Y.shortly I got out and realized I was involved in a 4 car chain collision

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter:	Date/Time:
Not applicable	04/09/2020 13:57
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp





**SINGAPORE  
POLICE FORCE**



D/20200904/7012

2 of 2

**POLICE REPORT (NP299)**

**CONTINUATION OF REPORT**

Report No. D/20200904/7012

After the accident I visited norwood medical clinic and was given 5 days MC (MC:0000013310)

Subjects Involved			
Victim			
Person Name	KEE CHIA HOW, DESMOND		
ID Type	NRIC NO	ID No	S8517907A
Gender	Male	Age	35
Race	Chinese	Language	English
Occupation	Workshop general worker	Address	451A BUKIT BATOK WEST AVENUE 6 #21-707 SINGAPORE 651451
Mobile No	98179639	Is Informant A Victim?	Yes
Person Name	KEE CHIA HOW, DESMOND (Informant)		

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: 04/09/2020 13:57
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

**Name of Policyholder** : Yong Siew Chin  
**Period of Insurance** : 20 Mar 2020 To 19 Mar 2021  
**Engine No.** : 1ZZ3153019  
**Chassis No.** : ZNE100419838

**Vehicle No.** : SJP3590R  
**Policy No.** : 2100333797-07  
**Endorsement No.** :  
**Issued Date** : 26 Feb 2020

### ABOUT THE COVER

**Make/Model** : TOYOTA WISH 1.8  
**Engine Capacity/Tonnage** : 1,798.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2009  
**Insuring with COE/PARF** : Yes

**Person or Classes of Persons Entitled to Drive\*** :

- a) The Policyholder  
b) Any other person who is driving on the Policyholder's order or with his/her permission.  
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

**Age Condition** : 40 years old and above

**Limitation as to use\*** :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

### EXCESS

**Section 1**  
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

**Section 2**  
Property Damage - \$0

**Windscreen** : \$100

**Named Driver and Excess** (where applicable)

Yong Siew Chin - \$600 (Own Damage), \$600 (Flood Cover)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.  
For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website [www.aig.sg](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank Ltd

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

3276000000

LEE LIAN SENG KEITH

371 ALEXANDRA ROAD #11-10 AIA ALEXANDRA  
SINGAPORE 159963 SP-KEITHLEE-LEESONLEE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

LIAN SENG KEITH LEE

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2161795D



Name

YONG SIEW CHIN



杨秀珍

Race

CHINESE

Date of Birth

01-09-1955

Sex

F

Country of Birth

PERAK



1569191



NRIC No. S2161795D



Blood Group

O+

Date of issue

06-01-1994

APT BLK 224 ANG MO KIO AVENUE 1 #06-531  
SINGAPORE 560224

NRIC No: S2161795D

Date: 14-08-2000 No: 3757305

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number **S2161795D**  
Name  
**YONG SIEW CHIN**

Birth Date: **01 Sep 1956**  
Issue Date: **14 Sep 2005**

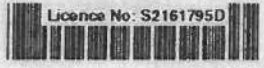


 601368751F

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

	PASS DATE
<b>Class 3</b> Motor cars $\leq$ 3000 kg with $\leq$ 7 passengers, exclusive of the driver; and motor tractors / vehicles $\leq$ 2500 kg	<b>14 Sep 2005</b>

NP 428A

 Licence No: S2161795D



5215116



NRIC No. S1564824D



Date of issue  
06-09-2013

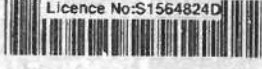
Address  
APT BLK 146 SERANGOON NORTH AVENUE 1  
#12-405  
SINGAPORE 550146

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


		EFFECTIVE DATE
Class 2	Motorcycles > 400 cc	11 Jan 1980
Class 3	Motor cars with unladen weight ≤ 3000kg with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight ≤ 2500kg	16 Jun 1981

NP 428A

Licence No: S1564824D



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1564824D



Name  
LEE PECK YANG

李 柏 香

Race  
CHINESE

Date of birth  
31-03-1962

Country/Place of birth  
SINGAPORE

Sex  
M

S1564824D

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1564824D

Name  
LEE PECK YANG

Birth Date: 31 Mar 1962

Issue Date: 10 Apr 2019



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