L. TICAL Charles and	LIPP ADPUILIES. (a)	1 134 00	1144720046			
Val TIONALS Assessment Cer			Dute & Timo Co	mpleted .	Done p'.	
Date In: 7040/7070 15-7	Deb desemption	,	Date to thirt of			
RETHORABY TM LOUDINGOD	SAS c-Illing		-		•	-
Veh No. SG MON I	E-mult (bjale ther,		-		-	
0.01/9/10/2000 00/3	1-Motor Claim Y		<u>k</u>			
(DI) (Reporting Only	I-Motor W/O (W	libles OD Blirs,	TP (bii)			1.
31) (2) (11)	I-Photo Uploade	d :-			۲	
	AssessmenVSurve	y Report				
TP Insurer:	Aso'l Report by P	*x/Finnd to	Owner/Wisiz			03 WE'L'
returned Wkep / INC Apply n Wkep / QW:	THE RESERVE OF THE PARTY OF THE		Yoli	Fax		
P Phiniculars Veh Nor	S12:2462	, MC(	. )/Non-INC	( ).		-
Owner / Driver: (			Tel:			_
Policy No: ( )	Period: (	)	Cover Type: (		<u> </u>	-
Confirmed by ; (		Dates,	Time		11/1	
Insured/Driver Llability: ( %	6) [Note-Est Status (WO	): N: 0-20	0%; P: 21-79%	. P: 80-10	77)	
Year of Registration: (	Werrenty: YES (	)01/(	>	,		
Bacess: (\$ ' ) Londing:	\$1,000( )/52,000(	) (************************************	CONTRACTOR OF THE PROPERTY OF	PURITY TO	The Continues	1 rafener
	阿尼英语表现的	此的进出的	者积极规则对对方	学拉作为2777	4 181 . V	•
) Walle-In Customar i Customore	Information atticity Confid	es latinot	neuy NO refer o	rapolior.	<del></del>	
				.,		
) Total Loss Case : to e-mail Yn	surer Uncently,			7		)
) Total Loss Case ; to e-mail Yn	voice: VES ( ) / NO		owing Cor (	era Consume	animitati	)
) Total Loss Case   to e-mail Yn	surer Uncently,		owing Co: (		Mary Silver	,
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( ) ; In	VOICE VES ( ) / NO		owing Co! (		A CANADA	)
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( ) ; Inv    Drive-in ( ) / Towed-in ( ) ; Inv   Drive-in ( ) / Towed-in ( ) ; Inv   Drive-in ( ) / Towed-in ( ) ; Inv   Drive-in ( ) / Towed-in ( ) ; Inv	surer Uncently,		owing Co. (		NAME OF THE PARTY	)
) Total Loss Case   to e-mail Yn Drive-in ( ) / Toved-in ( ) ; Inv    Drive-in ( ) / Toved-in ( ) ; Inv   Drive-in ( ) / Toved-in ( ) ; In	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)		owing Co. (			)
) Total Loss Case   to e-mail Yn Drive-in ( ) / Toved-in ( ) ; Inv    Drive-in ( ) / Toved-in ( ) ; Inv   Drive-in ( ) / Toved-in ( ) ; Inv   Drive-in ( ) / Toved-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) / Tovel-in ( )     Drive-in ( ) / Tovel-in ( )   Tovel-in ( )     Drive-in ( ) /	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)				WATER TO SEE	<u>}                                    </u>
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( ) ; Inv    Drive-in ( ) / Towed-in ( ) ; Inv   Drive-in ( ) / Towed-in ( ) ; Inv   Drive-in ( ) / Towed-in ( )   Towed-in ( )     Or Cheok / Post Requir Inspection	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)				TO A DOLLAR TO THE PARTY OF THE	060
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( )   Inv    Drive-in ( ) / Towed-in ( )   Inv   Drive-in	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)				AND THE STATE OF T	) 
) Total Loss Case   to e-mail Yn Drive-in ( ) / Toved-in ( )   Inv    Drive-in ( ) / Toved-in ( )   Inv   Drive-in	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)					)
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( )   Inv    Drive-in ( ) / Towed-in ( )   Inv   Drive-in	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)				TANAL STATE OF THE	063
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( )   Inv    Drive-in ( ) / Towed-in ( )   Inv   Drive-in	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)					) 
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( ) ; Inv  Apply for Transport Allowance ( ) QC Check / Post Requir Inspection ) Upload Resurvey Photo [Repair Cost	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)					) 
) Total Loss Case   to e-mail Yn Drive-in ( ) / Toved-in ( )   Inv Drive-in ( )	yoiosi VES ( ) / NO ) / Courtasy CEr ( ) ( ·)					
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( )   Inv Drive-in ( ) / Towed-in ( )   Inv Drive-in ( ) / Towed-in ( )   Inv Apply for Transport Allowance ( ) QC Cheok / Post Requir Inspection ) Upload Resurvey Photo [Repuir Cost Injury :	Surer ORGENTLY,   Voice: VES ( ) / NO     NO   NO   NO   NO   NO   NO					) Tank
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( )   Inv Drive-in ( ) / Towed-in ( )   Inv Drive-in ( ) / Towed-in ( )   Inv Apply for Transport Allowance ( ) QC Cheok / Post Requir Inspection ) Upload Resurvey Photo [Repuir Cost Injury :	SUPER ORGENTLY, VOICES VES ( ) / NO ) / Courtesy Cer ( ) ( , ) > \$3000) ( )	TI(())	a luperdne (S100	MINO COLUMN	0)	10000000000000000000000000000000000000
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( )   Inv Drive-in ( )	Surer ORGENTLY,	Alti Aselle  Alti Aselle  DAl Demek	in lupording (SDO)	ਅਸਰਦ ਅਮਰਦ ਅਮਰਦ ਅਮਰਦ ਅਮਰਦ ਅਮਰਦ	0) 110	) Taux Adillo
) Total Loss Case   to e-mail Yn Drive-in ( ) / Towed-in ( )   Inv Drive-in ( )	Surer ORGENTLY,	Alti Aselle  Alti Aselle  DAl Demek	in lupording (SDO)	ਅਸਰਦ ਅਮਰਦ ਅਮਰਦ ਅਮਰਦ ਅਮਰਦ ਅਮਰਦ	0) 110	) Company of the comp
) Total Loss Case ; to e-mail Yn Drive-in ( ) / Towed-in ( ); Inv	Surer ORGENTLY,	ANTONION TO THE PROPERTY OF TH	at lupording (350)  Through Survey (16:  Through Su	INO COL	0) 110	) Adulto
) Total Loss Case ; to e-mail Yn Drive-in ( ) / Toved-in ( ); Inv  // Apply for Transport Allowance ( ) QC Check / Post Requir Inspection ) Upload Resurvey Photo [Repuir Cost  ///////////////////  /// AD005605  iver/Owner: mtact No:	Surer ORGENTLY,	Alti Asalda DAlti Asalda DE Tri Toulous Pornialminz O Til Religion	Through Survey (IG. Status of Survey (IG. St	INO COL	0)	
) Total Loss Case ; to e-mail Yn Drive-In ( ) / Toved-In ( ); Inv    Drive-In ( ) / Toved-In ( ); Inv   Drive-In ( ) / To	Surer ORGENTLY,	Alti Andida DA Damay Per Poving OFF Policy Paralalming OFF Policy OFF Policy OFF Policy Paralalming OFF Policy OFF Policy O	Through Survey (Ites and Sarvices to MRT Survey Works) Sarvices to Mrt Sarvice	TIONS THE	0) 7 43 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
) Total Loss Case ; to e-mail Yn Drive-in ( ) / Toved-in ( ) ; Inv    Drive-in ( ) / Toved-in ( ) ; Inv   Drive-in ( ) / Toved-in ( ) ; In	Surer ORGENTLY,	Alti Andida DAI Domoli OFF Pollow Fornial military () VII Vollow Fornial military () VII Vollow () VI	Through Survey (Ites and Sarvices to the Survey (Ites and Sarvices	TIONS THE	0) 743 ' 1126 330 ' 375 3166 ' 331 '	) October St. Adultus
) Total Loss Case ; to e-mail Yn Drive-in ( ) / Toved-in ( ) ; Inv    Drive-in ( ) / Toved-in ( ) ; Inv   Drive-in ( ) / Toved-in ( ) ; In	Surer ORGENTLY,	Oli International Control of the Part Police of The Religion o	Through Survey (Itelians Survices to Concrolles to the Concrolles	ING CALL	713 · 1126 330 · 273 1160 · 273 310 · 320 320 · 320 · 320	
) Total Loss Case   to e-mail Yn Drive-in ( ) / Toved-in ( )   Inv Drive-in ( )	Surer ORGENTLY,	Oli International Control of the Part Police of The Religion o	Through Survey (Itelians Survices to Concrolles to the Concrolles	ING CALL	0) 743	
) Total Lass Case   to e-mail Yn Drive-in ( ) / Toved-in ( )   Inv Drive-in ( )   Inv Drive-in ( ) / Toved-in ( )   Inv Drive-in ( )   Inv Drive-in ( ) / Toved-in ( )   Inv Drive-in ( )   Inv Drive-in ( ) / Toved-in ( )   Inv Drive-in ( )   I	SUPER ORGENTLY, VOSCOBI VES ( ) / NO ( ) / Courtesy Cer ( ) ( ) ) > \$3000) ( )	Oli International Control of the Part Police of The Religion o	Through Survey (Ites  Italian Inic Daly (Vanished)  To The Constitution  To The Constitution  The Cons	ING CALL	31 310 310 310 310 310 310 310 3	)

## 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 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

<ul> <li>By the lodgement of this report to the insurers, you hereby conse foresaid.</li> </ul>	ent to the archiving of this report at the centre and to copies of the report being made available
et philosophical access of the	ACCIDENT STATEMENT
Date Of Report	20/10/2020 15:20
Date Of Accident	19/10/2020 00:30
Exact Location Of Accident	SENG POH ROAD (ENTRANCE TO TIONG BAHRU)
Country/State of Loss	SINGAPORE
D. D	ETAILS OF OWN VEHICLE
/ehicle Registration Number	SGT2168Z
nsured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	2XXXXX651D
Email Address	ROYTEOJW@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97239173
Alternative Phone No	OFFICE-97239173
Vehicle Particulars	
Manufacturer	тоуота
Model	CAMRY-2.5 (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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	20-ML000244-R00
Cover Note Number	
Driver	
Name of Driver	TEO JUNWEI, ROY (ZHANG JUNWEI, ROY)
NRIC No	SXXXX225H
Date Of Birth	28/08/1982

 NRIC No
 SXXXX225H

 Date Of Birth
 28/08/1982

 Occupation
 INDOOR

 Date Of Driving Pass
 14/06/2001

Driving Experience 19 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97239173

Fax Number

Contact Number HOME-07230173

Address

145 SERANGOON AVENUE 3

#17-06

Postcode

556122

...

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

red

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - HIRER

6 X55/W 156/S 155/W66

\_

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)

2

involved in the accident

NO

Was any body injured in the Accident?

NAME OF

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

SLZ346Z

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR

Vehicle Category Name of Driver

**HU YIXIN** 

NRIC/Passport Number

SXXXX938B

Contact Number

92396052

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# 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 Author sed 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.
- 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.
- 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.
- 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:
  - (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.

AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

19/10/20

1315 Mrs

tepoixing Centre Personnel's Signatule

down ir me m

Now YOUR SKETCH PLAN EMIRU FORD A)SG[21682 B)SIZ 346Z SENG POH ROAD SUZ 346 DESCRIBE CIRCUMSTANCES OF THE ACCIDENT HEADED TOWARDS LOVER DELTA WAS ORIVING DOWN TION 6 BAHRU ROAD TRAVELLING STRAIGHT 2NO LANE PROM THE LEFT AND WAS IN THE ROAD 00:25 HRS DOWN. AT TO KEEP TOWARDS. THE LEFT MOST LANE THE FILTERED INTO LEFT TIONG BAHRU ROAD WHEN I CONTINUE S ROAD TO ONCOMING CARO FROM THE Claim own policy Claim third party ☐ Claim OD / TP at other workshop ☐ For record purpose DECLARATION If We declare the foregoing particulars are true in every rest Reporting Centre Personne Driver's Signature (If driver is not the policyholder) NRIC/FIN No.: Date & 7 me; 19/10/20 1315

	ACCIDENT STATEMENT FOR INPUT				
DATE OF ACCIDENT	19/10/20 TIME OF ACCIDENT 0030				
COUNTRY/STATE OF LOSS	I SINGAPORE .				
	□MALAYSIA (□JOHOR □PAHANG □KELANTAN □ OTHERS) □THAILAND				
ACCIDENT LOCATION.	SENG POH ROAD CENTRANCE TO TIONG	BAHRU)			
VEHICLE NUMBER	SGT 21687				
() 是是大量的 (A) 基础的	INFORMATION OF INSURED				
NAME OF REGISTERED OWNER	ROY FED JUNNET	*,			
COMPANY ROC / NRIC OF OWNER	S8225225H				
EMAIL	roy tegin @gmail com TETEPHONE 97349173				
VEHICLE MODEL /MAKE	/ TOYOTA CAMBY 2.5L.				
ARE YOU CLAIMING?	TOWN POLICY THIRD PARTY DRECORD PURPOSE ONLY ( THIRD PARTY AT OTHER WORKSHOP, PLS STATE WORKSHOP NAME:	IF CLAIM			
INSURANCE COMPANY					
TYPE OF COVERAGE	□COMPREHENSIVE □THIRD PARTY FIRE & THEFT □THIRD PA	ARTY			
POLICY NUMBER .		et boulde alamos			
<b>计算控制 经营业的 电影 医</b>	INFORMATION OF DRIVER	25			
NAME OF DRIVER	ROY TEO JUNWEI				
NRIC OF DRIVER	582252254 .				
DATE OF BIRTH .	28 AUGUST 1982	577000			
OCCUPATION ,	D'INDOOR DOUTDOOR ( GUNTRY MANAGER	)			
DATE OF DRIVING PASS	14 JUN 2001 GENDER DEMALE DEMA	LE			
MOBILE NUMBER	97349173 OFFICE NUMBER NA	1			
ADDRESS	145 SERANGOON AVE 3 #17-06 SSS6122				
EMAIL ADDRESS	roytegici @ smail com				
RELATIONSHIP OF DRIVER WITH INSURED	N.A.				
DO YOU OWN OTHER VEHICLE?	□YES ☑NO VEH NO.? INSU. CO?	50055000 S8000			
Assessment of the second	INFORMATION OF ACCIDENT				
WEATHER CONDITIONS .	CLEAR DRAINING DOTHERS:				
ROAD SURFACE	□WET ☑DRY □OTHERS:	AL CONTROL OF THE PARTY OF THE			
ANY INJURY	OTHER INFORMATION  MNO DYES INJURED CONVEYED BY	C NO			
	A':1BULANCE	LINO			
ANY FOREIGN VEHICLE INVOLVED?	ØNO □YES (FOREIGN VEHICLE NUMBER: )	1			
ACCIDENT CAPTURED BY VIDEO  ACCIDENT REPORT AT WHICH POLICE	ONO DYES (pleated provide link/video if YES) ON THIRD P.	ARTY VIDE			
STATION? * ATTACH POLICE REPORT*	PROSECUTION GIVEN?				
I have been approached by unknown person(s) soficiting/offering accident claims assistance.	ØNO □YES NO. OF VEHICLES INVOLVED Z.				
NO. OF PASSENGERS IN CAR (INCLUDING DRIVER)	D NAME / GENDER OF PASSENGERS: N.A.				
NAME / GENDER OF PASSENGERS:	NA NAME / GENDER OF PASSENGERS: NA				
Promise to the street and a second	DETAILS OF THIRD PARTY (1)	10 to			
VEHICLE NUMBER	SLZ 346 Z	CONTRACTOR SALE			
NAME OF DRIVER	HU YIXIN				
NRIC OF DRIVER .	· 596 709 38 B				
ADDRESS OF DRIVER					
CONTACT NUMBER	92396052				
OTHER INFO					
10.00 (1	DETAILS OF THIRD PARTY (2)				
VEHICLE NUMBER					
NAME OF DRWER	2	COH-CO TA			
NRIC OF DRIVER					
ADDRESS OF DRIVER •		19 1			



In Jalapson

# 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: tmls@tokiomarine.com.sg W www.tokiomarine.com

A member of the Tokio Marine Group



# 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)

Policy No.: 20-ML000244-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

SGT2168Z

Chassis No.: MR2B63HK904004452

2. Name of Policyholder

GOLDBELL CAR RENTAL PTE LTD

3. Effective date of the Commencement of Insurance for the purposes of the Act

14/09/2020

4. Date of Expiry of Insurance

31/03/2021

5. Persons or Class of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with the Policyholder's 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, 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.

#### Limitations as to use\*

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.
- 3) Use for the carriage of passengers for hire or reward by any person whom the vehicle is hired.
- 4) Use for hire of reward except for rental services by the Policyholder only.
- \* 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: 3092DD2

Insurance Plan:

Comprehensive Approved Workshop Plan Prevailing Market Value

Limit for total loss or theft: Policy Excess:

Excess - All Claims

Windscreen Excess

Financial Interest: HONG LEONG FINANCE LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Yeo Chor Joo Irene - Mot

Printed 14/09/2020