

Our Ref: PTE/ SMN7093H / 20201210 / DS -CL

04/02/2021



ComfortDelGro Engineering

M/s AIG Asia Pacific Insurance Pte Ltd  
78 Shenton Way #08-16  
Singapore 079120

Without Prejudice

ComfortDelGro Engineering Pte Ltd

Attn: Motor Department

Dear Sirs

**ACCIDENT INVOLVING SMN7093H & SMJ2183K ON 10.12.2020**

We are the authorised repair workshop for the owner of vehicle, SMN7093H which was involved in the captioned accident with your insured's vehicle. The vehicle owner has requested and authorized us to assist him/her in presenting his claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driver, we are submitting these claims for your consideration on behalf of the owner/driver/claimant.

1. Repair Cost / Excess			4,398.32
2. Car Rental	4 X	117.70	470.80
3. Loss of Use	1 X	80.00	80.00
4. Surveyor Fee			-
5. LTA Fee			-
6. TP/GIA Fee			2.00
7. Medical			-
8. Others - Towing Fee			-

(E&OE) 4,951.12

We enclose the following documents to support the claims: -

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Repair/Excess Bill   | <input checked="" type="checkbox"/> Insurance Certificate |
| <input type="checkbox"/> Surveyor Report                 | <input checked="" type="checkbox"/> Power of Attorney     |
| <input type="checkbox"/> Coloured Photographs            | <input checked="" type="checkbox"/> Car Rental Bill       |
| <input checked="" type="checkbox"/> GIA/Police Report(s) | <input type="checkbox"/> Medical Bill                     |
| <input checked="" type="checkbox"/> GIA/TP Search        | <input type="checkbox"/> Witness Statement                |
| <input type="checkbox"/> Others: _____                   |   |

Kindly look into the matter and let us hear from you on the settlement of our client's claim as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/driver/claimant.

Yours faithfully

Cecilia Lee

CDGE Claims Department

DID: 6383 7824 FAX: 6281 5767 Email: cecilialee@sparkcarcare.com

**Corporate Office**

205 Braddell Road Singapore 579701

Mainline +65 6383 6280

Facsimile +65 6280 9755

Company Registration No: 192506048W

**Car Care Centres**

**Braddell**

205 Braddell Road

Singapore 579701

Tel 6383 8110

**Loyang**

59 Loyang Drive

Singapore 508969

Tel 6214 8300

**Pandan**

45 Pandan Road

Singapore 609286

Tel 6338 8778

**Senoko**

24 Senoko Loop

Singapore 758156

Tel 6757 8760

**Sin Ming**

383 Sin Ming Drive

Singapore 575717

Tel 6553 0400

**Sungei Kadut**

7 Sungei Kadut Way

Singapore 728791

Tel 6369 7369

**Ubi**

320 Ubi Road 3

Singapore 408649

Tel 6848 5721

www.SPARKcarcare.com

A member of

**COMFORTDELGRO**

**ComfortDelGro Engineering Pte Ltd**

Corporate Office  
205 Braddell Road  
Singapore 579701  
Mainline + 65 6383 6280  
Facsimile + 65 6280 9755  
www.cdge.com.sg

Car Care Centres  
205 Braddell Road Singapore 579701  
59 Loyang Drive Singapore 508969  
45 Pandan Road Singapore 609286  
383 Sin Ming Drive Singapore 575717  
7 Sungei Kadut Way Singapore 728791  
320 Ubi Road 3 Singapore 408649  
www.SPARKcarcare.com

Tel: 6383 8110  
Tel: 6214 8300  
Tel: 6338 8778  
Tel: 6553 0400  
Tel: 6369 7369  
Tel: 6848 5721



ComfortDelGro Engineering

COMPANY REG. NO: 199506048W

**TAX INVOICE**

GST REG. NO. M2-8921817-3

8010004

VEHICLE NO  
SMN7093H

INVOICE NO./DATE  
91543111 26.01.2021

AIG ASIA PACIFIC INSURANCE PTE LTD

MAKE  
HONDA

JOB NO.  
305446651

SHENTON WAY.AIG BUILDING #07-16 #78  
SG 079120

MODEL  
FIT 1.3GF CVT

ODOMETER READING

CONTACT NO:64193000

PO NUMBER:DOA 10.12.20

DATE/TIME IN  
06.01.2021 15:27

DATE/TIME OUT  
22.01.202100:00

S/NO	DESCRIPTION	QTY	UNIT PRICE (S\$)	DISCOUNT	NET PRICE (S\$)
01	REAR TAILGATE	1 PC	680.46	NA	680.46
02	REAR BUMPER	1 PC	568.24	NA	568.24
03	REAR END PANEL TOP GARNISH	1 PC	63.23	NA	63.23
04	REAR BUMPER CLIPS	15 EAC	1.25	NA	18.75
05	REAR NUMBER PLATE CASING	1 PC	45.00	NA	45.00
06	REAR TAILGATE LOCK	1 PC	105.40	NA	105.40
07	FIT WORDING	1 PC	28.00	NA	28.00
08	REAR TAILLAMP RH	1 PC	290.40	NA	290.40

- 1) WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
- 2) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- 3) INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- 4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

PAGE: 1 OF 2

Cheque should be crossed and made payable to "ComfortDelGro Engineering Pte Ltd"

ComfortDelGro Engineering Pte Ltd

Head Office:  
205 Braddell Road  
Blk C Ext 1 Level 2  
Singapore 579701

Attn: Finance Department

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010004	91543111		

**ComfortDelGro Engineering Pte Ltd**

**Corporate Office**  
205 Braddell Road  
Singapore 579701  
Mainline + 65 6383 6280  
Facsimile + 65 6280 9755  
www.cedge.com.sg

**Car Care Centres**  
205 Braddell Road Singapore 579701  
59 Loyang Drive Singapore 508969  
45 Pandan Road Singapore 609286  
383 Sin Ming Drive Singapore 575717  
7 Sungei Kadut Way Singapore 728791  
320 Ubi Road 3 Singapore 408649  
www.SPARKcarcare.com

Tel: 6383 8110  
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ComfortDelGro Engineering

COMPANY REG. NO: 199506048W

**TAX INVOICE**

GST REG. NO. M2-8921817-3

INVOICE NO. /DATE  
91543111 26.01.2021

S/NO	DESCRIPTION	QTY	UNIT PRICE (S\$)	DISCOUNT	NET PRICE (S\$)
09	REAR TAILLAMP LH	1 PC	253.90	NA	253.90
10	REAR END PANEL	1 PC	332.80	NA	332.80
11	REVERSE SENSOR	1 EAC	170.00	NA	170.00
12	REAR WINDSCREEN RUBBER	1 EAC	99.40	NA	99.40
13	INNER SEAL	1 EAC	25.00	NA	25.00
14	LABOUR CHARGES	1 EAC	1,430.00	NA	1,430.00

Total Amount		4,110.58
Add GST	7.00 %	287.74
Net Amount Payable		4,398.32

Issued by : DEVMCS12 26.01.2021 14:22:24  
Repair Type : CUS0/52/5T  
Payment term : /Z030

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PAGE: 2 OF 2

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**ComfortDelGro Engineering Pte Ltd**

Head Office:  
205 Braddell Road  
Blk C Ext 1 Level 2  
Singapore 579701

Attn: Finance Department

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**CUSTOMER'S COPY**

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.

**GST REG No. : M2-0044678-0****TAX INVOICE****Invoice No. : R0250352TD**

Account No. : CR9S004253  
Hirer's Name : Mr Surin Adam Max Junior c/o CDGE Ubi  
Name 2 :  
Address : 320 Ubi Road 3

**RA Ref No. : CR-21-145765**  
Invoice Date : 22-January-2021

Country : Singapore Postal : 408649  
Attention : Ms Tini

Driver Name : Mr Surin Adam Max Junior c/o CDGE Ubi  
Name 2 :

Vehicle No. : SLH4189D  
VA No. : 111 4210  
Model Type : Mazda 6 2.0A  
Start Date : 18-Jan-2021 9:35  
End Date : 22-Jan-2021 17:30  
Duration : 4 day(s)  
Mileage In : 10831  
Mileage Out : 10633  
Repl Mileage : 0  
Km travelled : 198

Payment : InternetBanking

**Description**

Car Rental

**Amount (SGD)**

\$440.00

**Sub Total** : \$440.00

**Add GST 7.00%** : \$30.80

**Total Invoice Amount** : \$470.80

**Remarks**

CDGE Customer Vehicle No:SMN7093H

**IMPORTANT**

- Please quote the Invoice number when making payment.
- Payment should be made payable to ComfortDelGro Rent-A-Car Pte Ltd.  
Bank Name : Citibank N.A.  
Bank Account No. : 0818385005  
Bank / Branch Code : 7214/001  
Swift BIC : CITISGSGXXX  
Swift Code : CITISGSG
- Payment advice to : accounts@cdgrentacar.com.sg
- Sales Person : Operations

Scan & Pay  
via PayNow



UEN : 198105775H

RA REF NO : CR-21-145765

MODEL NAME : Mazda 6 2.0A

VA No : 111 4210

VEHICLE/GROUP : SLH4189D / B

Acct No. : CR9S004253

HIRER'S NAME : Mr Surin Adam Max Junior c/o CDGE Ubi

Address : 320 Ubi Road 3

Country : Singapore Postal : 408649

DRIVER NAME : Mr Surin Adam Max Junior c/o CDGE Ubi

Address : 320 Ubi Road 3

Country : Singapore Postal : 408649

License Expiry : LIFE SG

ADDITIONAL DRIVER:

Lic Issue Country :

Name 2 (SAP) :

Contact : Ms Tini

Tel/Fax : /

Tel No (Res/Off) : /

Handphone : 820102226

Petrol Card :

Nationality : Singaporean

REMARKS (GENERAL/DELIVERY)

CDGE Customer Vehicle No:SMN7093H

DELIVERY ADDRESS :

320 Ubi Road 3 408649

### COLLISION DAMAGE WAIVER(CDR)

Days : \$0.00 Monthly :

Accepts

Decline

Excess : \$1,605.00

### PERSONAL ACCIDENT INSURANCE (PAI) :

Days : \$0.00 Monthly :

Accepts

Decline

### RENTAL CHARGES :

Rental Type : Transient / Normal  
\$ 117.70 nett per day  
\$ 117.70 nett per day (7 days & above)

RentalCharges	\$470.80
Voucher	\$0.00
Discount	\$0.00
Total CDR	\$0.00
Total PAI	\$0.00
Total Msia Use	\$0.00
Delivery/Collection Charges	\$0.00
Petrol Charges	\$0.00
Subtotal	\$440.00
GST 7%	\$30.80
Est Total Rental	\$470.80
Misc charges	

Time/Date End(Agreed/Act) : 22-Jan-2021 9:30 /

Time/Date Start(Agreed/Act) : 18-Jan-2021 9:30 /

Est. Rental duration : 4 days

Malaysia use : No

No. of days (Malaysia) : 0

Malaysia use surcharge :

Receipt No	Payment Type	Payment Method	Total Amt	Receipt Date
------------	--------------	----------------	-----------	--------------

Sales Person : Operations

Payment method :

The hirer acknowledged that the rental agreement shall not be deemed to constitute use for hire or reward.

The Hirer is solely responsible for breach of traffic laws, ERP charges and any parking fines or surcharges during period of hire.

The Hirer is to bear Excess of the first \$1,605.00

I/We agreed to the terms and conditions above, overleaf and declare that all information given is true and correct in all respect.

My/Our driving license (s) is/are current and not disqualified from driving. You may charge all amount due on this rental to my/our credit card.

Prepared by : Dominic Pung Chi Hui

14-Jan-2021

### HIRER'S SIGNATURE & COMPANY STAMP

Printed Date: 14-Jan-2021 16:41



## INSURER ENQUIRY

## Find insurer

Vehicle reg. no.

SMJ2183K

Date of Accident

10/12/2020



Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... **AIG**Period of Insurance ..... **26/02/2019 - 25/02/2021**Requested By ..... **Tinie (ComfortDelGro Enginee...**Requested Date ..... **10/12/2020 16:33**

## Payment details

Request Amount: **S\$1.87**GST Amount: **S\$0.13**Total Amount Due (GST Inclusive): **S\$2**

## General Insurance Association

Records Management Centre

GST Registration No: **M400017735**



## 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 Submission	11/12/2020 09:51 (SGT)
Date of Accident	10/12/2020 08:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TPE TOWARDS SLE LAMP POST 68A LANE 1
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN7093H
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JUMIRAN BIN SUKIYAR
NRIC No	SXXXX076I
Email Address	chrono.ad86@gmail.com
Mobile Phone No	(Phone) +65-96557526
Alternative Phone No	+65-82010226

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
Varlant	-
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 - Claiming third party
Vehicle Category	Private car

#### INSURANCE COMPANY

Name of Insurance Company	MSIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	A300334698QMY
Cover Note Number	-

#### DRIVER

Name of Driver	SURIN ADAM MAX JUNIOR
NRIC No	SXXXX166D
Date Of Birth	19/09/1986
Occupation	Indoor

Date Of Driving Pass .....	02/12/2014
Driving experience .....	6 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-82010226
Alt. Phone Number .....	-
Email Address .....	chrno.ad86@gmail.com
Address .....	BLK 230 PASIR RIS ST 21 #07-46
Address complement .....	-
Postcode .....	510230
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Other
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### 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 the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	NURULHAZIYAH BINTE JUMIRAH
Gender .....	Female

#### PASSENGER 2

Name .....	SURIN EDEN QAISER ADAM JUNIOR
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO SKETCH PLAN

#### ATTACHMENT(S)

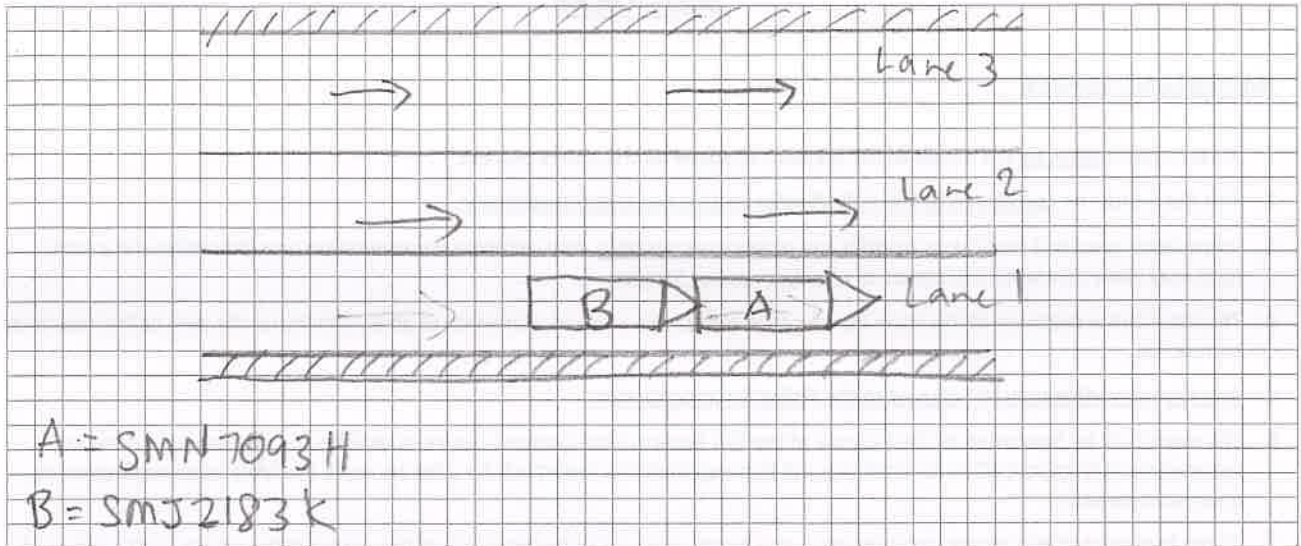
Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMJ2183K
Vehicle Manufacturer .....	Mitsubishi
Vehicle Model .....	-
Vehicle Variant .....	-



# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 10/12/2020 at about 0830hrs, I was driving my vehicle, A along TPE towards SLE at Lp68A on lane 1 - when a vehicle, in front of me had suddenly applied brakes causing my vehicle to apply brakes as well. I manage to stop my vehicle on time to avoid collision however about 1 second later, I felt a bump on my rear of my vehicle. I had my wife and my 1 year old son seated at the rear passenger seat, as such I made a choice. I then got out of the car to assess the damage. Vehicle B had collided with mine and my rear car boot door was dented. After which the Traffic police arrived and took over the scene.

## 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:

COMFORT DELGRO ENGINEERING PTE LTD  
320 UBI ROAD 3  
SINGAPORE 408649

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

## 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.:

COMFORTDELGRO ENGINEERING PTE LTD  
320 UBI ROAD 3  
SINGAPORE 408649



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
Shenton Way, #21-01, SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
Co.Reg No. 200412212G GST Reg. No. 20-0412212G  
A Member of **MS&AD** INSURANCE GROUP

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**MOTORMAX PLUS  
Comprehensive**

**Certificate No.** A 300334698 QMY

**Excess :** SGD500

**Windscreen Excess :** SGD100

1. **Index Mark and Registration Number of Vehicle**  
SMN7093H
2. **Name of Policyholder**  
Jumiran bin Suklyar
3. **Effective Date of the Commencement of Insurance for the purposes of the Act**  
26/08/2020
4. **Date of Expiry of Insurance**  
25/08/2021
5. **Persons or Classes of Persons entitled to drive\***  
Jumiran bin Suklyar

Any other person provided he 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 laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. **Limitations as to Use \***

Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing 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 Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP. REFER TO MSIG.COM.SG FOR LIST OF AUTHORISED WORKSHOPS.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or If the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any amendment, Act or Acts passed in substitution thereof.

**MSIG Insurance (Singapore) Pte. Ltd.**

Approved Insurers

Craig Ellis  
Chief Executive Officer



# COMFORTDELGRO ENGINEERING PTE LTD

A member of COMFORTDELGRO

## POWER OF ATTORNEY

ACCIDENT INVOLVING (Owner's Vehicle No.) SMN 7093H and (Third Party's Vehicle No.) SMJ 2183K on 10.2.2020 along TPE Towards SLE Camp Post  
68A Lane 1

Policy Nos: \_\_\_\_\_

BY THIS POWER OF ATTORNEY, \*I/We, JUMIRAN BIN SUKIYAR \*NRIC/Passport  
No. SXXXX076I (Address)\* 230 Pasir Ris St 71 #07-46 Singapore 510730  
/ \_\_\_\_\_ a company

incorporate in Singapore and having its registered office at (Address)\* \_\_\_\_\_

\_\_\_\_\_ owner of Vehicle Registered No. \_\_\_\_\_

\_\_\_\_\_ hereby irrevocably appoint ComfortDelGro Engineering Pte Ltd (CDGE), a  
company incorporated in Singapore and having its registered office at \_\_\_\_\_

its agents or any person authorized by CDGE to be \*my/our Attorney and in \*my/our name(s) and on \*my/our behalf  
to do all or any of the following:

1. To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which \*I/we may have against the other \*party/parties to the Accident and under the insurance \*policy/policies taken up by such \*party/parties or alternatively under Insurance Policy No. \_\_\_\_\_ taken up by \*me/us in respect of the cost of repairs, loss of use and at all other costs and expenses, etc. suffered by \*me/us arising from the Accident (loss and damage).
2. For the purpose of such claim(s) as aforesaid, to appoint solicitors on \*my/our behalf as \* my/our Attorney **shall in his absolute discretion, deem fit.**
3. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of cheque in-favor of ComfortDelGro Engineering Pte Ltd , CDGE and to give a valid receipt and discharge therefor.
4. For any of the purposes aforesaid, **to execute, sign, seal and deliver all documents whatsoever in relation thereto.**
5. Generally **do all such acts as it shall deem necessary for the purpose of settling such claim(s) and**
6. **To agree to any settlement at the absolute discretion of CDGE.**

\*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on \*my/our behalf by the Attorney, its agents or any person authorized by CDGE in that behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by \*me/us in \*my/our own proper person(s) and \*I/We hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

\*I/We hereby further declare that **the powers and authority hereby conferred shall remain irrevocable.**

\*I/We further confirm that the acceptance by CDGE of the settlement amount in respect of such constitute the full discharge of my/our claim(s) in respect of such loss and damage.

\*IN WITNESS WHEREOF. \*I/We have hereunto to set \*my/our hand and seal this day \_\_\_\_\_ of the month of \_\_\_\_\_, Year Two Thousand - \_\_\_\_\_ (20\_\_\_\_)

Signed, Sealed & Delivered By

Customers Name: Jumiran Bin Sukiyar  
NRIC No.: S1125076I  
Co's rubber Stamp

**delete as appropriate. Insurance**