



iShare Auto Pte. Ltd.  
Co. Reg No: 201939376R  
8 Kaki Bukit Avenue 4  
#08-09 Premier @ Kaki Bukit  
Singapore 415875  
Tel: 6341 6789 Fax: 6341 6778  
Email: ishareauto@gmail.com

## LETTER OF DEMAND

02 MAR 2021

Accident involving my vehicle number SJX 5462Y and vehicle number  
SLW 7378B on 25/12/2020 at 21:30 HOURS at/along  
Bedok North Road towards KPE

We refer to the above matter.

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

|   |            |
|---|------------|
| Vehicle Repair Cost <del>/Excess</del>                | \$ 3400.00 |
| Rental for <u>-</u> days x \$ <u>-</u> /day           | \$ -       |
| Loss of Use for <u>6</u> days x \$ <u>100.00</u> /day | \$ 600.00  |
| LTA Search Fee <del>/3rd Party GIA Report</del>       | \$ 7.45    |
| Others  | \$ -       |

Total: \$ 4007.45

Yours faithfully,

Michelle



Michelle

HP: 9856 4815



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8 Kaki Bukit Avenue 4  
#08-09 Premier @ Kaki Bukit  
Singapore 415875  
Tel: 6341 6789 Fax: 6341 6778  
Email: ishareauto@gmail.com

## Authorisation To Act


I, Rohani Binte Mohamed Hassan ("the third party claimant") of  
BLK 190A Rivervale Drive #03-988 Singapore 541190  
(address), owner of SJX 5462Y (vehicle no.)  
hereby authorise iShare Auto Pte. Ltd. ("the workshop")  
to act for me with respect to my claim for repair costs and / or rental and / or  
loss of use ("claim") for my vehicle no. SJX 5462Y that was  
damaged pursuant to the accident which occurred on 25/12/2020 (date)  
at/along Bedok North Road towards KPE  
(location) involving vehicle no/s SLW 7378B ("the accident").

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

I further authorise the workshop to execute and/or sign any documents/discharge  
vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without  
prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by  
me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident  
concerned.

Dated this 26 day of 12 (month) 20 20 (year)

  
\_\_\_\_\_  
Signed by "the third party claimant"



  
\_\_\_\_\_  
Signed by "the workshop"







iShare Auto Pte. Ltd.  
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#08-09 Premier @ Kaki Bukit  
Singapore 415875  
Tel: 6341 6789 Fax: 6341 6778  
Email: ishareauto@gmail.com

## Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SJX 5462Y and SLW 7378B on 25/12/2020  
at/along Bedok North Road towards KPE

1. I/We, the Owner of motor vehicle no. SJX 5462Y hereby instruct and authorise iShare Auto Pte. Ltd. ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$\_\_\_\_\_ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 26 day of 12 2020

Signature of vehicle owner 

Name : Rohani Binte Mohamed Hassan

IC/UEN No : S1811244B

(Company stamp, if applicable)

Address : BLK 190A Rivervale

Drive #03-988 Singapore 541190

Tel : 9004 8098

Witnessed by :

  
Michelle



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

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

I, Rohani Binte Mohamed Hassan ("the third party claimant")  
of BLK 190A Rivervale Drive #03-988 Singapore 541190 (address),  
owner of SJX 5462Y (vehicle no.) hereby authorize  
iShare Auto Pte. Ltd.

("the workshop") to act for me with respect to my claim for  
repair costs and/or rental and/or loss of use ("claim") for my  
vehicle no. SJX 5462Y that was damaged pursuant to the  
accident which occurred on 25/12/2020 (date) along Bedok  
North Point towards KPE (location)  
involving vehicle no/s SLW7378B  
("the accident").


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

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

Dated this 26 day of 12 (month) 20 20 (year)

\$  
Signed by "the third party claimant"

M  
Signed by "the workshop"  
(with chop)



# TAX INVOICE

iShare Auto Pte. Ltd.

Co. Reg No: 201939376R

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: ishareauto@gmail.com



| Date       | Invoice Number  | Vehicle Number |
|------------|-----------------|----------------|
| 02.03.2021 | ISA202103-00049 | SJX5462Y       |

## AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-12 AIG BUILDING

SINGAPORE 079120

| Description   | Amount (SGD) |
|---|--------------|
| Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges | \$ 3,400.00  |
| Total   | \$ 3,400.00  |

Cross cheques and pay: iShare Auto Pte. Ltd.

Please indicate the invoice number on the reverse side.

iShare Auto Pte. Ltd.

AUTO Generated - Signature Not Required

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

Print Date/Time : 26 Dec 2020 / 15:22:54

Receipt Date/Time : 26 Dec 2020 / 15:22:54

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-201226-001379

Previous Receipt No. :

| S/N  | Item Description/<br>Business Transaction Reference<br>No.          | Amount<br>Before<br>GST (\$\$) | GST<br>Amount<br>(\$\$) | Amount<br>After GST<br>(\$\$) |
|--|---|--------------------------------|-------------------------|-------------------------------|
| Result of Insurance Enquiry - SLW7378B             |   |                                |                         |                               |
| As at 25 Dec 2020/21:30:00                         |   |                                |                         |                               |
| Insurance Co: AIG ASIA PACIFIC INSURANCE PTE, LTD. |   |                                |                         |                               |
| 1  | Insurance Enquiry - SLW7378B<br>Enquiry Fee<br>20201226152201907305 | 7.00                           | 0.49                    | 7.49                          |
| Sub-Total  |   | 7.00                           | 0.49                    | 7.49                          |
| Total Before Rounding                              |   | 7.00                           | 0.49                    | 7.49                          |
| Rounding Difference                                |   |                                |                         | 0.04                          |
| Total Amount Payable                               |   |                                |                         | 7.45                          |
| Paid By  |   |                                |                         |                               |
| 526471XXXXXX1359                                   |   | eNETS Credit Card              |                         | 7.45                          |
| Total  |   |                                |                         | 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.

## 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              | 26/12/2020 14:44 (SGT) |
| Date of Accident                | 25/12/2020 21:30 (SGT) |
| Exact Location of Accident      | Bedok, Singapore       |
| Additional Location Information | BEDOK NORTH ROAD       |
| Country/State of Loss           | Singapore              |

### DETAILS OF OWN VEHICLE

|                             |                             |
|-----------------------------|-----------------------------|
| Vehicle Registration Number | SJX5462Y                    |
| INSURED/POLICYHOLDER        |                             |
| Is company?                 | No                          |
| Name Of Registered Owner    | ROHANI BINTE MOHAMED HASSAN |
| NRIC No                     | SXXXX244B                   |
| Email Address               | AZHAR.MOHDYUSOPE@YAHOO.COM  |
| Mobile Phone No             | (Phone) +65-97285278        |
| Alternative Phone No        | (Home) +65-97285278         |

### VEHICLE PARTICULARS

|  |                           |
|--|---------------------------|
| Manufacturer   | Proton                    |
| Model  | Persona                   |
| Variant  | -                         |
| Exact purpose for which vehicle was being used at time of accident           | -                         |
| 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 | AIG           |
| Type of Coverage          | Comprehensive |
| Fleet Policy              | No            |
| Policy Number             | 2100214175    |
| Cover Note Number         | -             |

### DRIVER

|                |                       |
|----------------|-----------------------|
| Name of Driver | AZHAR BIN MOHD YUSOPE |
| NRIC No        | SXXXX601A             |
| Date Of Birth  | 23/12/1973            |
| Occupation     | Outdoor               |



|  |   |
|--|---|
| Date Of Driving Pass   | 04/11/2013                                    |
| Driving experience   | 7 YEARS AND 1 MONTH                           |
| Gender   | Male  |
| Mobile Number  | (Phone) +65-97285278                          |
| Alt. Phone Number  | -   |
| Email Address  | AZHAR.MOHDYUSOPE@YAHOO.COM                    |
| Address  | APT BLK 190A RIVERVALE DRIVE #03-988 S 541190 |
| Address complement   | -   |
| Postcode   | -   |
| Is the driver the policyholder?                              | No  |
| If No, Relationship of the Driver with the Insured           | Spouse  |
| 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)   | 2   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No  |

#### PASSENGER 1

|        |                              |
|--------|------------------------------|
| Name   | ROHAINI BINTE MOHAMED HASSAN |
| Gender | Female                       |

#### DETAILS OF POLICE ACTION

|   |   |
|---|---|
| Was the accident reported to the police?  | Yes   |
| Police Station Name                       | Kaki Bukit Neighbourhood Police Post                  |
| Police Station Phone No                   | (Phone) +65-18004429999                               |
| Alt. Police Station Phone No              | (Fax) +65-62444377                                    |
| Police Station Address                    | Blk 526 Bedok North Street 3 #01-448 Singapore 460526 |
| Was notice of intended Prosecution given? | No  |
| If yes, against whom?                     | -   |

#### CIRCUMSTANCES OF ACCIDENT

REFER TO THE ATTACHED.

#### 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 | SLW7378B |
| Vehicle Manufacturer        | -        |
| Vehicle Model               | -        |
| Vehicle Variant             | -        |



|   |                      |
|---|----------------------|
| Vehicle Colour                          | -                    |
| Vehicle Category                        | Private car          |
| Name of Driver                          | TUANG SHI YIN        |
| NRIC No                                 | SXXXX463E            |
| Contact Number                          | (Phone) +65-81812512 |
| Address                                 | -                    |
| Address complement                      | -                    |
| Postcode                                | -                    |
| Insurance Company Name                  | -                    |
| Nature Of Damage                        | -                    |
| Details of property damaged in accident | -                    |
| No. Of Passenger (Including Driver)     | -                    |

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 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.

**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.

Policyholder's Signature, Date & Time

Sketch Plan

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

26/12/2020

Witnessed by Reporting Centre Personnel



A - 52754624

B - 62W 7:78B

Refer to the police report T/20201225/2086

Insurance Co. AGI  
Vehicle # 50Y54624 Date of Acc. Report 25/12/2020  
☐ Reporting Only  
☐ Own Damage Claim  
☒ Third Party Claim  
☒ Other Workshop  
J&E Automobile  
Service

I/We declare the foregoing particulars are true in every respect

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

Witnessed by Reporting Centre  
Personnel



**SINGAPORE  
POLICE FORCE**



T/20201225/2086

Police Station Of Origin:  
Kaki Bukit NPP  
526 Bedok North Street 3 #01-448  
SINGAPORE 460526  
Tel No: 1800-4429999

1 of 3

Report No. T/20201225/2086

**REPORT OF A TRAFFIC ACCIDENT**

|  |                  |                          |
|--|------------------|--------------------------|
| Date/Time Report Made:<br>25/12/2020 22:32 | Vide Report No.: | Station Diary No.:<br>11 |
|--|------------------|--------------------------|

**Informant's Particulars**

|   |            |                              |  |  |                            |
|---|------------|------------------------------|--|--|----------------------------|
| Name of Informant:<br>AZHAR BIN MOHD YUSOPE |            |                              | Address:<br>APT BLK 190A RIVERVALE DRIVE #03-988 SINGAPORE<br>541190 |  |                            |
| ID Type / ID No.:<br>NRIC NO / S7347601A    |            |                              | Contact No.:<br>Home/Office: Mobile: 97285278                        |  |                            |
| Nationality:<br>SINGAPORE CITIZEN           |            |                              | Email:   |  |                            |
| Sex:<br>Male                                | Age:<br>47 | Date of Birth:<br>23/12/1973 | Type of Informant:<br>Driver   |  |                            |
| Race:<br>Malay                              |            |                              | Language:  |  | Institution / School Name: |
| Occupation:<br>DRIVER                       |            |                              | Driving Licence Information:<br>Class: 3 Date of Expiry:             |  |                            |

**General Information of the Accident**

|  |            |   |  |                                     |
|--|------------|---|--|-------------------------------------|
| Type of Accident:  | Non-Injury | Drink Drive:<br>No                          | Date/Time of Accident:<br>25/12/2020 21:30 | Type of Location:<br>Straight Road  |
| Location:<br><br>BEDOK NORTH ROAD                            |            |   |  |                                     |
| Lamp Post Number: 10   |            |   |  |                                     |
| Weather:<br>Clear  |            | Road Surface:<br>Dry                        |  | Road Speed Limit:                   |
| Traffic Flow<br>One Way                                      |            | Traffic Control:<br>Traffic Light - Working |  | Traffic Volume:<br>Light            |
| Type of Collision:<br>Between Moving Vehicles - Head To Rear |            |   |  | Anyone conveyed by ambulance:<br>No |

**Details of Vehicle Involved**

| Vehicle No. | Type | Make   | Model         | Color | Condition           | No of Passenger |
|-------------|------|--------|---------------|-------|---------------------|-----------------|
| SJX5462Y    | Car  | PROTON | PERSONA1<br>6 | White | Slightly<br>Damaged | 1               |
| SLW7378B    | Car  | MAZDA  |               | Blue  | Slightly<br>Damaged | 0               |

**Details of Person Involved**

|                                 |                                |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No     |                                |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |





**SINGAPORE  
POLICE FORCE**



T/20201225/2086

2 of 3

Police Station Of Origin:  
Kaki Bukit NPP  
526 Bedok North Street 3 #01-448  
SINGAPORE 460526  
Tel No: 1800-4429999

Report No T/20201225/2086

## CONTINUATION OF REPORT

|                                   |                       |                  |  |                                   |
|-----------------------------------|-----------------------|------------------|--|-----------------------------------|
| <b>Driver</b>                     |                       |                  |  |                                   |
| Name                              | AZHAR BIN MOHD YUSOPE |                  | ID No                                  | S7347601A                         |
| Related Vehicle                   | SJX5462Y (Car)        |                  | Contact No.                            | 97285278                          |
| Hospital/Clinic                   | NIL                   |                  | Class of Driving Licence & Expiry Date | Class: 3<br>Date of Expiry: NIL   |
| Date Treatment                    | NIL                   | Date Discharge   | NIL                                    |                                   |
| No. of Days granted Medical Leave | NIL                   | Degree of Injury | NIL                                    |                                   |
| <b>Driver</b>                     |                       |                  |  |                                   |
| Name                              | TUANG SHI YIN         |                  | ID No.                                 | S8240463E                         |
| Related Vehicle                   | SLW7378B (Car)        |                  | Contact No.                            | 81812512                          |
| Hospital/Clinic                   | NIL                   |                  | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                   | Date Discharge   | NIL                                    |                                   |
| No. of Days granted Medical Leave | NIL                   | Degree of Injury | NIL                                    |                                   |

**Brief Details.**

On 25 December 2020 at about 2107hrs, I was driving my vehicle (SJX5462Y) together with my wife proceeding back home. On the same date at about 2127hrs, While traveling along Bedok North Road towards KPE. My vehicle came to a complete stop at the traffic light junction as the traffic light was red. out of a sudden I heard a loud bang sound from my rear of my vehicle.

After the incident I did made a checked on my wife and luckily she did not suffer any injury. I alighted my vehicle and discovered that one vehicle (SLW7378B), had hit onto my rear side of my vehicle.

I did check on the driver condition and she informed me that she was not injured and thereafter exchanged particular and left the location



SINGAPORE  
POLICE FORCE



T/20201225/2086

Police Station Of Origin  
Kaki Bukit NPP  
526 Bedok North Street 3 #01-448  
SINGAPORE 460526  
Tel No: 1800-4429999

3 of 3

Report No. T/20201225/2086

## CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sr Staff Sgt SIM CHENG SIONG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time

25/12/2020 22:32

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168



SJX 54627 (Owner)

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1811244B



Name

ROHANI BINTE MOHAMED  
HASSAN

Race

MALAY

Date of Birth

29-12-1967

Sex

F

Country of Birth

SINGAPORE



0493234



NRIC No. S1811244B



Blood Group

O+

Date of issue

27-08-1992

Address

APT BLK 190A RIVERVALE DRIVE #03-988  
SINGAPORE 541190


NRIC No. S1811244B


Date: 30-12-1999

No: 3170134



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7347601A



Name  
AZHAR BIN MOHD YUSOPE


ازهر بن محمد يوسف

Race  
MALAY

Date of birth  
23-12-1973

Sex  
M


Country/Place of birth  
SINGAPORE




SJX 54627

driver

5402294



NRIC No. S7347601A



Date of issue  
20-12-2014

Address  
APT BLK 190A RIVERVALE DRIVE  
#03-988  
SINGAPORE 541190




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7347601A**  
Name:  
**AZHAR BIN MOHD YUSOPE**

Birth Date: **23 Dec 1973**  
Issue Date: **04 Nov 2013**

00224 1241K



SJX 5462Y  
driver

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 04 Nov 2013

NP 428A

Licence No: S7347601A



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Rohani Binte Mohamed Hassan  
 Period of Insurance : 24 Jun 2020 To 23 Jun 2021  
 Engine No. : S4PHQH3616  
 Chassis No. : PL1CM6SNRAG260622

Vehicle No. : SJX5462Y  
 Policy No. : 2100214175-10  
 Endorsement No. : 00000000345126  
 Issued Date : 26 Jun 2020

### ABOUT THE COVER

|                         |                |              |              |                            |      |
|-------------------------|----------------|--------------|--------------|----------------------------|------|
| Make/Model              | PROTON PERSONA | Sum Insured  | Market Value | First Year of Registration | 2010 |
| Engine Capacity/Tonnage | 1 597 00 CC    | Off Peak Car | Yes          | Insuring with COE/PAF      | Yes  |
| Driver Restriction      | NA             |              |              |                            |      |

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

Any person other than the Policyholder who is driving on the Policyholder's order or with his/her permission. This Policy will indemnify any authorized driver other than the Policyholder only if he/she meets the specification below.

\*You have to pay an additional sum of \$3,000 as "Inexperienced Driver Excess" (IDEX) if you are an "Inexperienced Driver" (i.e. never licensed or unlicensed) 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 loss or damage 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 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 169), Section 95 of the Road Transport Act, 1997 (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)

Rohani Binte Mohamed Hassan - \$600 (Own Damage) - \$600 (Flood Cover) Azhar Bin Mohd Yusoff - \$600 (Own Damage) - \$600 (Flood Cover)

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

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

Any accident repairs to the vehicle must be carried out by one of our Authorized Repairers. Within the first 1 year 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 Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6330 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: HONG LEONG FINANCE 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. 169), Part IV of the Road Transport Act, 1997 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1969 (Malaysia).

0503972000  
 INSURHUB LLP

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 SINGAPORE 038989

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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