



WITHOUT PREJUDICE

Our Ref: SMC 4868S

Your Ref: YM 6777M

8th February 2021

ATTN: LKK Auto Consultants Pte Ltd

INSURER: LonPac Insurance Bhd

Dear Jasper,

Accident Involving: SMC 4868S and YM 6777M

Date of Accident: 6 January 2021

Location of Accident: CTE towards AYE before Jalan Bukit Merah Exit

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

ost of Repair Inc. GST	\$ 19,543.20	\$18,264.67 COR Agreed + \$1,278.53 GST
Add Loss of Rental	\$ 1,669.20	13 Days - Inv#A42554
ACTUAL: 14 DAYS 2 Days PRS (6/7 Jan) + 10 Repair Days Agreed (8/9/11/12/13/14/15/16/18/19 Jan) + 2 Sunday (10/17 Jan)		
Total	\$ 21,212.40	
Add LTA Search Fee	\$ 7.45	
GRAND TOTAL	\$ 21,219.85	

Kindly pay the Grand Total Amount of **\$21,219.85** 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: teamautooffice@gmail.com

Thank you.



Regards

Adel (Ms)

Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

Tel: 6258-1955 Fax: 6258-1956 Email: teamautooffice@gmail.com / teamautopl@gmail.com

PROFORMA INVOICE



ATTENTION:
Cuebeebee

PI Number	P2102-2048
PI Date	8-Feb-2021
Vehicle No.	SMC 4868S
Accident Date	6-Jan-2021

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SMC 4868S	COR Lump Sum		\$ 18,264.67

Notes:

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

Total Amount	\$	18,264.67
GST 7%	\$	1,278.53
GRAND TOTAL AMOUNT	\$	19,543.20

Authorized Signature



TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO.
C/O TEAM AUTOPRO PTE LTD CUEBEEBEE 27 TRANSIT ROAD #05-03 FOREST HILLS CONDOMINIUM SINGAPORE 778904

DATE	INVOICE NO.
20/1/2021	A 42554

	VHA NO.	DUE DATE	VEH NO.
	A 42554	20/1/2021	SLM 8867 C
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 06 JANUARY 2021 TO 19 JANUARY 2021 YOUR REF: SMC 4868 S	13	120.00	1,560.00
Account Name: BKW RENT A CAR PTE LTD Account No: 118-312-9991 Bank: UNITED OVERSEAS BANK LTD (UOB) Branch: UOB Shaw Centre Branch Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG All cheques must be made payable to BKW RENT A CAR PTE LTD. *Please indicate the invoice number and vehicle number in the reference.	Subtotal	\$1,560.00	
	GST @ 7%	\$109.20	
	TOTAL	\$1,669.20	

BKW Rent-A-Car Pte Ltd

120 Lower Delta Road #02-15 Cendex Centre (S) 169208 Tel: 6738 7777 Fax: 6738 6666

ACRA No: 200106276D GST Reg. No: 20-0106276-D Website: www.bkw.sg
A subsidiary of **BKW Automobile Pte Ltd**



bizSAFE

VEHICLE HIRING AGREEMENT

HIRER'S PARTICULARS

Name (as in I/C): *CUEBEEBEE*

NRIC/Passport No: [REDACTED] Date of Birth: [REDACTED]

Address: *27 TRANSIT ROAD #105-03* Age: [REDACTED]
West Hills Condo S(*778904*)

Name & Address of Employer: *CUEBEEBEE*
53354425D

Occupation: [REDACTED] Driving Exp: [REDACTED]

Driving Licence No: [REDACTED] Passed Date: [REDACTED]

D/L Type: Local/Int'l/Others: [REDACTED]

DRIVER'S PARTICULARS

Name (as in I/C): *Sng Shugian*

NRIC/Passport No: [REDACTED] Date of Birth: *02-06-1982*

Address: *457 Jishun Street #1 #07-83* Age: [REDACTED]
S'Pore 760457 S()

Occupation: [REDACTED] Driving Exp: [REDACTED] Yrs

Driving Licence No: [REDACTED] Passed / Expiry Date: [REDACTED]

D/L Type: Local/Int'l/Others: [REDACTED] Contact No: [REDACTED]

Hirer's Own Vehicle No: *SMC48685* Replace Veh No: [REDACTED]

Loan Vehicle No: *SM2862C* VR No: [REDACTED]

Make & Model: *K3 C14* Auto/Manual Group: [REDACTED]

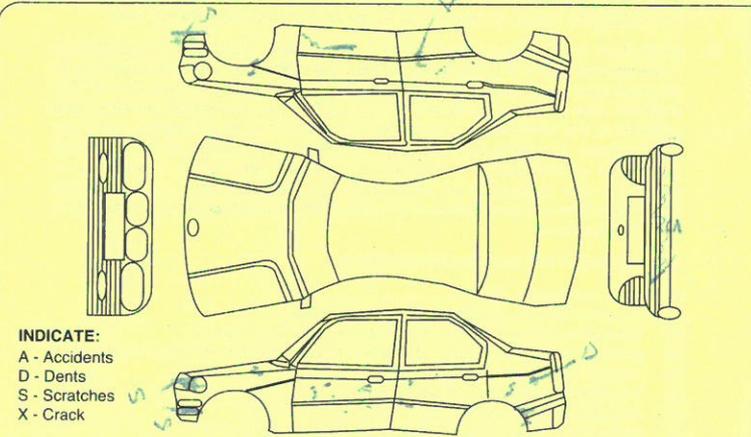
DAILY		WEEKLY/MONTHLY		OTHERS	
Day	@ \$	Week	@ \$	Per day	Per week/Monthly
<i>13</i>	<i>120</i>			<i>1560</i>	
CDW/PAI @ \$ Per day/Monthly					
Delivery/Collection Svc					
GST <i>7%</i> <i>1109</i> <i>20</i>					
OR No: (A) SUB-TOTAL <i>1669</i> <i>20</i>					

Petrol Level & Surcharge	OUT	E	1/4	1/2	3/4	F	GST
			<input checked="" type="checkbox"/>				
				<input checked="" type="checkbox"/>			

First _____ km FREE per day

Excess mileage is chargeable at _____ cents per km

TOTAL CHARGES



NON WAIVER EXCESS (Subject to GST): \$ *> 000*

ACCESSORIES CHECK

Data Cards Camera Systems Hub Cap Radio / CD Cartridge

Jack Tyre Opener Petrol Cap Spare Tyre

Hirer's Signature: _____ Additional Driver's Signature: _____

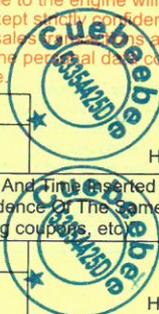
SINGAPORE Use Only

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 65 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be Borne by the Hirer/the Authorised Driver.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 - \$400.
- The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.
- In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
- The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
- All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales and other relating matters.
- I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Date Out	Time Out	Mileage	Check By	Remarks
<i>6/1/21</i>	<i>1630</i>	<i>178234</i>	<i>Andrew</i>	
Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Entered Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)				
Date In	Time In	Mileage	Check By	Remarks
<i>11/1/21</i>	<i>1500</i>	<i>178475</i>	<i>Andrew</i>	<i>19/1/2021 21520</i>



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 06 Jan 2021 / 14:51:54

Receipt Date/Time : 06 Jan 2021 / 14:51:53

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210106-002294

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 - YM6777M As at 05 Jan 2021/08:30:00 Insurance Co: LONPAC INSURANCE BHD				
1	Insurance Enquiry - YM6777M Enquiry Fee 20210106145113613530	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				
	426569XXXXX8855		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.

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.: SMC 4868 S
and YM 6777 M and SHC 1580 A
and and
@ CTE TOWARDS AYE BEFORE JALAN BUKIT MERAH EXIT
dated 06/01/2021.

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,



Claimant Signature & Co's Stamp (if applicable)

Date: 6/1/21

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 07/01/2021 12:53 (SGT)
Date of Accident 06/01/2021 08:30 (SGT)
Exact Location of Accident CTE, Singapore
Additional Location Information TOWARDS AYE BEFORE JALAN BUKIT MERAH EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMC4868S

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner CUEBEEBEE
Company Reg No 5XXXX425D
Email Address NEOQIANBAO@GMAIL.COM
Mobile Phone No (Phone) +65-91016023
Alternative Phone No (Office) +65-91016023

VEHICLE PARTICULARS

Manufacturer Kia
Model Forte
Variant -
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 hire

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5110148729-01
Cover Note Number -

DRIVER

Name of Driver SNG SHUQIAN
NRIC No SXXXX899J
Date Of Birth 02/06/1982
Occupation Indoor

Date Of Driving Pass	06/10/2004
Driving experience	16 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-92977602
Alt. Phone Number	-
Email Address	SHUE.SNGSHUQIAN@GMAIL.COM
Address	27 TRANSIT ROAD #05-03 FOREST HILL CONDO
Address complement	-
Postcode	778904
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

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 ATTACHED ; REMARKS: (1) TYPE OF ACCIDENT PLEASE REFER TO ATTACHED AND ATTACHED STATEMENT (2) DRIVER IS NOT GRAB DRIVER

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	YM6777M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-

Insurance Company Name	-
Nature Of Damage	REFER TO ATTACHED
Details of property damaged in accident	REFER TO ATTACHED
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

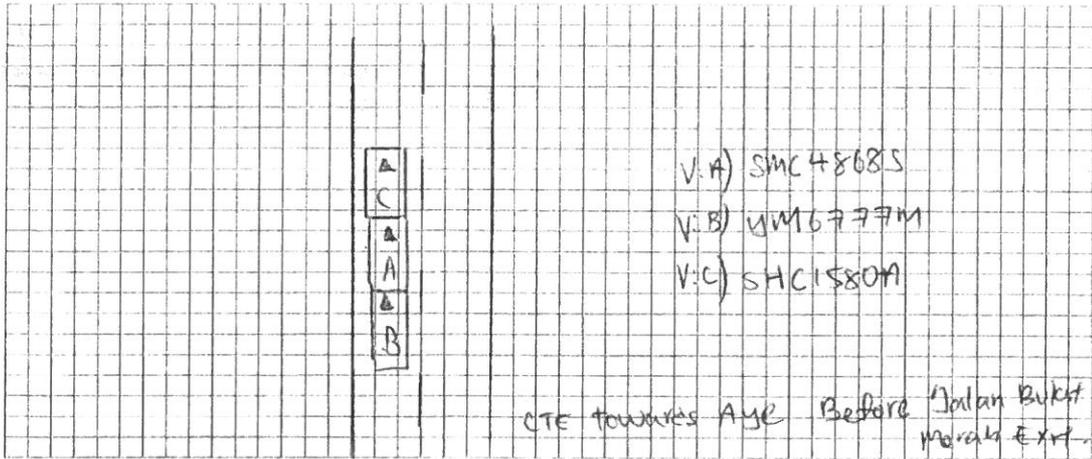
Vehicle Registration Number	SHC1580A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	REFER TO ATTACHED
Details of property damaged in accident	REFER TO ATTACHED
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	SNG SHUQIAN
Address	27 TRANSIT ROAD #05-03 FOREST HILL CONDO
Address Complement	-
Post Code	778904
Approximate Age Years Old	38
Injuries Sustained	REFER TO ATTACHED ; MC 1 DAY
Injured person in which vehicle?	SMC4868S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle 'A' was travelling on the stated venue. I was travelling straight in my lane, slowed down my vehicle as the vehicle in front of me was braking, I kept a safe distance behind the vehicle in front of me. I almost came to a complete stop, the next moment I felt a huge impact against my vehicle rear portion. The impact caused my vehicle to propelled forward and hit onto the vehicle in front. shortly I got out and realised that I was involved in a 3 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.:

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.:

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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5110148729-01

Cover : drivo CLASSIC

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : SMC4868S |
| Chassis Number | : KNAFJ411MJ5766212 |
| 2. Name of Policyholder | : CUEBEEBEE |
| 3. Effective Date of Insurance | : 03 Jul 2020 |
| 4. Expiry Date of Insurance | : 02 Jul 2021 |
| 5. Persons 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. | |
| 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. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. | |

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: GOLDBELL FINANCIAL SERVICES PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : ASSURE (SINGAPORE) PTE. LTD. (00000615327)
Date of Issue : 18 Jun 2020 13:23 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S8216899J**

Name: **SNG SHUQIAN**

Birth Date: **02 Jun 1982**

Issue Date: **05 Oct 2004**

001289857A



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8216899J

Name: **SNG SHUQIAN**

孙淑倩

Race: **CHINESE**

Date of birth: **02-06-1982** Sex: **F**

Country of birth: **SINGAPORE**

58216899J




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

Class 3 Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver, and motor tractors /vehicles =< 2500 kg

PASS DATE
05 Oct 2004

NP 428A

001289857A

License No: **S8216899J**

4919456

001289857A

NRIC No. S8216899J

Date of Issue
03-01-2013

Address
APT BLK 457 YISHUN STREET 41
#07-83
SINGAPORE 760457