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TP Printfellings Veh Not Su	18421	, MG(Tel:	, ())
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2) QC Check/Post Repair Inspection	(,)		•		
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§N0821290005 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 09/02/2021 17:09 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (09/02/2021 17:09 (SGT))



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 aforesaid.

ACCIDENT STATEMENT

Date of Submission Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

09/02/2021 17:09 (SGT) 08/02/2021 00:19 (SGT) Keong Saik Rd., Singapore KRETA AYER Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMA2144X

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes SUNRITA PRIVATE LIMITED 1XXXXXX361G zhiyangyap@gmail.com (Phone) +65-90998910 +65-90998910

VEHICLE PARTICULARS

Manufacturer Model Variant

Toyota C-hr

Exact purpose for which vehicle was being used at time of accident

Employment

Are you claiming under your own insurance policy for repair to your vehicle?

No - Reporting only Private hire

Vehicle Category

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy

NTUC Comprehensive 5110111062-01

Policy Number Cover Note Number

DRIVER

Name of Driver NRIC No

YAP ZHIYANG SXXXX835E

Date Of Driving Pass	31/12/2009
Briving experience	11 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90998910
Alt. Phone Number	
Email Address	zhiyangyap@gmail.com
Address	BLK 441B BUKIT BATOK WEST AVENUE 8 #13-913
Address complement	•
Postcode	652441
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Does Driver Own Other Vehicle Owned by Driver	110
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 - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry
Trock Garden	
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
	No
	110
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	1
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	No
soliciting/offering accident claims assistance?	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was the accident reported to the point	No
VVas Houce of Internace 1 Telephone	-
If yes, against whom?	1
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 OTH	IER VEHICLE PROPERTY 1
Vehicle Registration Number	SLL1842A
Vehicle Manufacturer	Mitsubishi
Vehicle Model	Evo
Vehicle Variant	randi.
Verileic Variant	-
Vernois Colos.	Private car
Vehicle Category	DAVID LIM
Name of Driver	SXXXX543H
NRIC No	(Phone) +65-91502295

(Phone) +65-91502295

Contact Number Address

Addrage complement

Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	4

SKETCH PLAN

IMPORTANT NOTICE

- 1. 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 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

09/02/2021

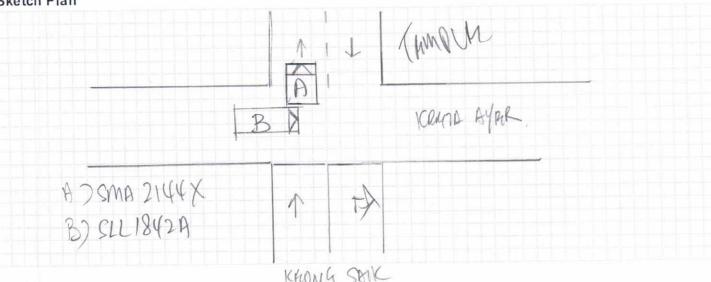
16:08W

Witnessed by Reporting Centre

Personnel

Sketch Plan

X



Describe Circumstances of the Accident
EN 08/02/2021 AT ABOUT 00:19 HRS I WAS AT KEONEG SAIK ROAD FUCTION
OF KREMA AYER. AT THE FUNCTION T SAW ON MY LEFT THERE WAS ON
OF KREMA AYER. AT THE JUNCTION I SAW ON MY LEFT THERE WAS ON
Commula VEHICLE WHICH QUIT A DISTANCE SO I PROCEED WHILE I WAS
MILLY VERY FAR I
GOING HALFWAY THEN, THAN I SAW CAR (B) WAS VERY CLOSE, I TRY
To SPERO UP, BYT STILL CORNIOT COR (B) STILL BRUSH AGAINST MY
CHR (A) BUAK PORTION WE EXCHANGE DARTICULAR & MOULD ON
CHR (A) WHAK PORTION. WE EXCHANGE PARTICULAR & MOUR ON.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

09/02/2021

16:08

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

Witnessed by Reporting Centre

Personnel

ACCIDENT'STATEMENT

ACCIDENT DATE: (08. 102 12021) (DD/MM/YYYY), TIME: (00. 19) (HH:MM)
LOCATION: Keong Siak Street Junction Kreta Ayer
1. DETAILS OF VEHICLE a) VEHICLE NUMBER: SMA21442
CIPOLICY NUMBER: 5110111062-01-00003
DIPOLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE &THEFT)
FITYPE: KALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE) h) PURPOSE OF USING AT ACCIDENT TIME: Private Hickory
I) ARE YOU CLAIMING UNDER YOUP OWN INSURANCE (YES/NO) IF NO, PLEASE STATE (THIRD PARTY CLAIM (REPORTING ONLY)
2. INSURED / POLICY HOLDER
A)NAME: SUNRITH Prince Linited (MALE / FEMALE) b)NRIC/FIN/PASSPORT: CONTACT:
c) ADDRESS:
* CONTINUE TO 3.d IF DRIVER ALSO POUCY HOLDER WALE FEMALE
(Including driver) bINRIC/FIN/PASSPORT: 58814835E CONTACT: 90998916 (1) CIADDRESS: 4418 Brack Back World Brack 8 #13-913
*d) DATE OF BIRTH: (2 104 1 1988)(DD/MM/YYYY)
OCCUPATION: (INDOOR / OUTDOOR) FINATE OF DRIVING PASC 31/12/2009
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: How
5. d) WEATHER CONDITION: (CLEAR / RAINING / OTHERS
6. WAS ANYBODY INJURED (YES IND)
7. a) REPORTED TO POLICE (YES , NO) <
He of passinger a) VEHICLE NUMBER: SLL 18424 MODEL: Mitshilish Exor.
(Induding driver) b) DRIVER'S NAME: David Lim (Indud driver) b) DRIVER'S NAME: David Lim (Indud driver) b) DRIVER'S N
9. THIRD PARTY VEHICLE
Ho of passanger of DRIVER'S NAME: MODEL:
(Including driver) NRIC/FIN/PASSPORT: CONTACT:

email = zhiyangyap@gmail.com

HYBRID VEHICLES SINGAPORE PTE LTD 24 LENG KEE ROAD, #03-04/05 SINGAPORE 159096

TEL- 6250 7887, FAX-6250 7997 COMPANY REGISTRATION NO: 201712402Z

EMAIL: hvsi::gapore@mail.com

This is an agreement between **Hybrid Vehicles Singapore Pte Ltd** (thereafter known as "The Company") **YAP ZHIYANG** NRIC NO.:S8814835E, residing 405 Jurong West Street 42 #06-609 S640405 (thereafter known as "The Driver") dated on 5.April.2018.

Details of vehicle: Toyota CHR Hybrid S 1.8 A (Brand New Car)

Particulars of Driver

Name: YAP ZHIYANG

NRIC No: S8814835E DOB: 21-04-1988

Address : Blk 405 Jurong West Street 42 #06-609 S640405

Mobile : 9099 8910

Deposit amount and Contract Period: SGD1,500/- Deposit. \$500 on 7April 2018 and the Remaining \$1,675 upon Collection of Vehicle, S\$675/week for 260 weeks.

Terms and Conditions:

- 1. The vehicle is loaned in exchange for a daily jobs assignment as per stated on the company's arrangement. If the driver is unable to fulfill the daily jobs, the driver is to reimburse the company \$90/- per day for the use of vehicle. All reimbursements against the vehicle must be paid to the company by every end of the week, i.e. Monday. In the event of failure to pay on time, the company reserves the right to collect/repossess the vehicle for alternative deployment.
- 2. Notification must be given to the company 30 minutes in advance if the driver is unable to fulfill any of the 2 assigned jobs. IF APPLICABLE
- 3. Any extra job (trips or hours) will be paid at a rate of \$90 per trip or per hour. All extra jobs done will be submitted every Friday weekly for payment to be made the following Monday. The driver must submit acknowledgment forms duly signed by the customers promptly to the company to avoid delay for the payments date, i.e. Saturday Friday. IF APPLICABLE
- 4. In the event that there are no daily jobs available, the driver may continue to use the vehicle at a rental fees of S\$90/- per day. Should the company require the driver's service, driver's should prioritize service to company.IF APPLICABLE
- 5. Driver also is responsible for all related vehicle matters (maintenance, repair, and fines etc). Only 5 years insurance and road tax is free up to maximum paid out of S\$4,000/ year), any amount more than S\$4,000 is payable by the driver.
- 6. Driver will need to check all related summons and fines on a weekly basis. The Driver will need to clear all fines one week before due date. In the event that driver fails to pay the fine, company will pay on his behalf and claim from driver with an additional of \$10/- admin charge.

HYBRID VEHICLES SINGAPORE PTE LTD 24 LENG KEE ROAD, #03-04/05 SINGAPORE 159096

TEL- 6250 7887, FAX-6250 7997

COMPANY REGISTRATION NO: 201712402Z EMAIL: hvsingapore@mail.com

CUSTOMER NAME: HYBRID VEHICLES SINGAPORE PTE LTD

NRIC.

: S8814835E

HP. : 9099 8910

This is an official receipt that we hereby received the balance deposit including the 1st week rental of \$1,630 from the above customer.

Vehicle: SMA2144X

Chassis no. : ZYX102118974

Sales Consultant Name: Julie Ana Hp: 8809 0293

Customer Name:

NRIC: 58814835E

Claim Handling

Claim Handling						
Accident MT/1120657						
Policy No.	5110111062-01	Vehicle No.	****			
Certificate No.	5110111062-01-000003	venicle No.	SMAZ144X		GST Regi	istration
Policyholder Name	SUNRITA PRIVATE LIMITED					
Product Code	FLEET MASTER INSURANCE				Policyhold	der NRI
Contact No.(Mobile)	90998910	Cover Type	drivo CLASSIC		Loading	
Email Address	30330310	Contact No.(Office)			Contact N	No.(Hon
KFK	No. Yes	Special Remark			eCode	
NCD Protection	No Yes	TCA	No Yes		eCode Re	ason
	No	NCD Entitlement(%)	0		Private H	ire
Accident Details						
eport Date	09/02/2021 17:10	Accident Report Within 24 hrs	Yes		Accident 1	Type
Date of Accident	08/02/2021	Time of Accident hh:mm	00:19		Country o	
Reporting Centre		Orange Force			ICM No.	, ricela
Accident Location	KEONG SAIK ROAD / KREAT AUER JUNCTION					
▼ Total Excess Applicable						
xcess Type	Per Accident	Windscreen Excess		100.00		
DD Standard Excess						
IED OD Excess	2,000.00	TP Standard Excess		1,500.00		
	0.00	YIED TP Excess		0.00	Driver is 0	Covered
Additional Excess	0					
Total OD Excess Applicable	2000.00	Total TP Excess Applicable		1,500.00		
▽ Benefits						
	tion					
ST Registered	Yes		GST Regis	tration Date		01/04/
ST Registration No. Iodification History	M200091442		GST Statu	s Verified		Yes
address 1	24 LENG KEE ROAD	Address 2 Address Type	#03-02 LENG KEE Singapore address	AUTOPOINT	Address 3 Post Code	
Jnit No.		Related Policy Number	5110341426-01			
✓ OI Driver Info						
river Name	Unnamed Driver	Driver Type	Unnamed Driver			
nnamed driver Name	YAP ZHIYANG	Driver NRIC	S8814835E		Driver DO	В
legister Date of Driver License	31/12/2009	Driver Age	32		Driving Ex	perienc
Contact No.(Mobile)	90998910	Contact No.(Office)			Contact N	o.(Hom
Address 1	BLK 441B #13-913	Address 2	BUKIT BATOK WES	ST AVENUE 8	Address 3	
Address 4	SINGAPORE 652441	Address Type	Foreign address		Post Code	
Init No.	13-913					
Ooes he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SMA2144X		Driver Ins	urer Co
eclaration Breathalyser or Blood Test						
leading?	0 mg	Any injury?	Yes No			
odification History						
Claim 001 New						
Claim Type *				OD-MX	Insured	CUND
				OD-17IA	Name	SUNR
ontact No.(Mobile)				96604433	Contact No. (Home)	
mail Address					OI Vehicle	SMAS
					Number	SMA2
laim Description				SMA2144X / SLL1842A O	N 8 Feb 2021	
referred /orkshop	Insured Liability Not at Fault					
BANGE No. Yes	✓ Repair Preferred Workshop, Nam	e unknown GIA Received	· ·			
ate Registered	Option	report Received		00/02/2021 17 11	Claim	
				09/02/2021 17:16	Close	

09/02/2021 17:16

Report Taken By

ROSLI WAHAB

Print AK letter Save Submit Attachment Claim No. Accident No. MT/1120657 09/02/2021 17:17 Upload Date Yes ○ No Last Doc. Received Confidential Category * Path * Clear Please Select V NO Choose File No file chosen NO Clear Please Select Choose File | No file chosen NO Please Select Clear Choose File No file chosen NO Clear Please Select Choose File No file chosen NO Please Select Clear Choose File No file chosen NO Clear Please Select Choose File No file chosen Descr Urgency Uploaded By/Date Category Attachment NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:17 Photos 2 Normal Photos NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:17 Photos 2 Normal Photos Photos 2 NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:17 Normal Photos NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:17 Photos 2 Normal Photos NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:17 Photos 2 Photos Normal NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:16 Photos 2 Normal Photos NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:16 Normal Photos 2 Photos NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:16 Photos 2 Normal Photos NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:16 Photos 2 Normal Photos

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Uploaded By/Date

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NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 09 Feb 2021 17:16

Folder Date

File Name

NRIC/ Driving L

SAS 20

Display in New Window Scan and uploading

NRIC/ Driving License

SAS

Normal



Certificate of Insurance

Cover : drivo CLASSIC

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: 5110111062-01-000003

1. Index mark and Registration Number of Vehicle

Chassis Number 2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

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.

: SMA2144X

: 03 Jun 2020

: 02 Jun 2021

: ZYX102118974

: SUNRITA PRIVATE LIMITED

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

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	: TECK WEI CREDIT 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 (Malaysla)

: TECK WEI CREDIT PTE. LTD. (00000572499)

Date of Issue

: 29 May 2020 12:37 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

Register New Vehicle (Acknowledgement) Vehicle Particulars

Vehicle No.:

SMA2144X

Vehicle Type:

Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover

Vehicle Attachment 1:

No Attachment

ZYX102118974

07WA18B08831

90.0 kW (120 bhp)

Petrol-Electric

1797 сс

1440 kg

30 May 2018

\$10,190.00

Company

03 - 08

179094

196800361G

SUNRITA PRIVATE LIMITED

Shopping / Office Complexes

NORTH BRIDGE ROAD

HIGH STREET CENTRE

Private Residential (Condo Apt or House) /

Silver

2018

Yes

TOYOTA

Vehicle Attachment 2:

Vehicle Make:

Chassis No.: Motor No.:

Propellant:

Engine Capacity:

Maximum Power Output:

Unladen Weight:

Primary Colour:

First Registration Date:

Manufacturing Year:

PARF Eligibility:

No. of Transfers:

Actual ARF Paid:

Owner Particulars

Owner Name:

Owner ID Type:

Owner ID:

Registered Address Type:

Registered Block/House No.:1 Registered Street Name:

Registered Unit No.:

Registered Building Name:

Registered Postal Code:

COE No. / Expiry Date:

COE Bid Category:

QP Paid:

Business Transaction Date: 30 May 2018

Business Transaction Time: 16:28:49

Message

The above vehicle has been successfully registered.

Please note that \$40,185.00 will be deducted from your GIRO account.

Please note that the name you have entered is different from LTA's record.

Vehicle Scheme:

Normal

Vehicle Attachment 3:

Vehicle Model:

C-HR HYBRID 1.85 CVT

Engine No.:

2ZR8433209

4

Trailer Chassis No.:

Passenger Capacity:

Power Rating:

53.0 kW

1715 kg

\$27,278.00

\$5,095.00

Maximum Laden Weight:

Secondary Colour:

Original Registration Date: 30 May 2018 Open Market Value:

Minimum PARF Benefit:

Additional Registration Fee First \$20,000.00 (100%), next \$7,278.00

(140%)

2018030107000961M / 29 May 2028 E - Open - all except motorcycle \$38,801.00

Transaction Details

Business Transaction Ref.

20180530162849990169

OK

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