



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

16 SEP 2021

Accident involving my vehicle number SFE8000A and vehicle number
SLN 4755M on 15/03/2021 at 10:55 HOURS at/along
Lorong 8 Toa Payoh towards Lorong 6 Toa Payoh (Near National Healthcare
Group Toa Payoh Polyclinics)

We refer to the above matter.

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

Vehicle Repair Cost / Excess-	\$ 15800-00
Rental for <u>—</u> days x \$ <u>—</u> /day	\$ —
Loss of Use for <u>8</u> days x \$ <u>200-00</u> /day	\$ 1600-00
LTA Search Fee / 3 rd Party GIA Report	\$ 7-45
Others → <u>Towing fee</u>	\$ 70-00
Total:	\$ 17,477-45

Yours faithfully,

Michelle



Michelle

HP: 9856 4815



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Authorisation To Act

I, Chia Choon Hiang ("the third party claimant") of
11A Lorong Pisang Raja Singapore 597744
(address), owner of SFE 8000A (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. SFE 8000A that was
damaged pursuant to the accident which occurred on 15/03/2021 (date)
at/along Lorong 8 Toa Payoh towards Lorong 8 Toa Payoh (Near National Healthcare
(location) involving vehicle no/s SLN4755M Group Toa Payoh Polyclinics) ("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 15 day of 03 (month) 20 21 (year)

Signed by "the third party claimant"



Signed by "the workshop"



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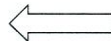
Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SFE 8000A and SLN 4755M on 15/03/2021
at/along Lorong 8 Toa Payoh towards Lorong 6 Toa Payoh (Near National Healthcare Group
Toa Payoh Polyclinics)

1. I/We, the Owner of motor vehicle no. SFE 8000A 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 15 day of 03 20 21

Signature of vehicle owner



Name :

Chia Choon Hiang

Witnessed by :

Michelle

IC/UEN No :

S1615372I

(Company stamp, if applicable)

Address :

11A Lorong Pisang

Raja Singapore 597744

Tel :

8613 8000

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
16.09.21	ISA202109-00137	SFE8000A

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET

#04/#05 IOB BUILDING

SINGAPORE 049711

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 15,800.00
Total	\$ 15,800.00

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

Print Date/Time : 15 Mar 2021 / 12:56:37

Receipt Date/Time : 15 Mar 2021 / 12:56:37

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210315-001851

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
	Result of Insurance Enquiry - SLN4755M As at 15 Mar 2021/10:55:00 Insurance Co: INDIA INT'L INS PTE LTD Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD			
1	Insurance Enquiry - SLN4755M Enquiry Fee 20210315125557674498	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.



PRINCE TOWING SERVICES

CO REG NO: 53405980E

PRINCETOWING.SERVICES@GMAIL.COM / 165 9322 7993

NO. 2755

DATE: 15/3/21



M/S

Cash

VEHICLE NO

SFE 8000A

MODEL

Aiphard.

FROM

1999 1or 8 Ton payoh

CALL TIME

1145

TO

08-09 Premier F.B

TIME ARRIVAL

1210

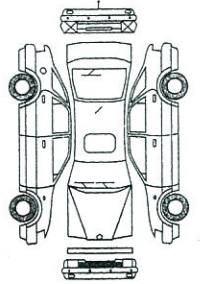
REMARKS

96875870

ARRIVAL WORKSHOP

1235

(A) 86138000



CHANGE TYRES/PATCH TYRES

ACCIDENT

USE CAR CARRIER

LOADED

BASEMENT/MULTI CARPARK

LOW BODY KIT/LOW SPOILER

OPEN DOOR

JUMP START

USING KING DOLLEY

DISMANTLE BRAKE/SHAFT

CRANE UP/WINCH OUT

AMOUNT S\$

70/-

RECEIVED BY

PRINCE TOWING



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 6259
www.police.gov.sg

Our Ref : TP/IP/13215/2021
Date : 29 March, 2021

CHIA CHOON HIANG
11A LORONG PISANG RAJA
SINGAPORE 597744

Dear Sir/Madam

**ACCIDENT INVOLVING SFE8000A & SLN4755M ALONG TOA PAYOH LORONG 8
TOWARDS TOA PAYOH LORONG 6 ON 15 MARCH 2021 AT 1057 HRS**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver of SLN4755M had committed an offence of Careless Driving causing hurt under Sec 65 (4) (a) of the Road Traffic Act. Action has been initiated against the said driver for the said offence.
3. If you have any queries, please contact the Investigation Officer, Muhd Syakir at 9623 8905 or via email Muhd_Syakir_ADANAN@spf.gov.sg

Yours faithfully

Perlin Chong
for Head Traffic Investigation
Traffic Police

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	16/03/2021 16:11 (SGT)
Date of Accident	15/03/2021 10:55 (SGT)
Exact Location of Accident	Lor 8 Toa Payoh, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFE8000A

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHIA CHOON HIANG
NRIC No	SXXXX372I
Email Address	WILLIAMCHIA8000@GMAIL.COM
Mobile Phone No	(Phone) +65-86138000
Alternative Phone No	(Home) +65-86138000

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Alphard
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
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	5114321920-01
Cover Note Number	-

DRIVER

Name of Driver	CHIA CHOON HIANG
NRIC No	SXXXX372I
Date Of Birth	18/02/1963
Occupation	Outdoor

Date Of Driving Pass	11/06/1980
Driving experience	40 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86138000
Alt. Phone Number	(Home) +65-86138000
Email Address	WILLIAMCHIA8000@GMAIL.COM
Address	11A LORONG PISANG RAJA
Address complement	-
Postcode	597744
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 - Change/cross lane
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	UNKNOWN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Timah Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004689999
Alt. Police Station Phone No	(Fax) +65-64623782
Police Station Address	Blk 1 Toh Yi Drive #01-139 Singapore 591501
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO 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	SLN4755M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	PASSENGER
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLN4755M
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	CHIA CHOON HIANG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SFE8000A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



Describe Circumstances of the Accident


Refer to Police Report

Police Report No. : T/202/0315/2107

Declaration

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


Witnessed by Reporting Centre Personnel

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 :

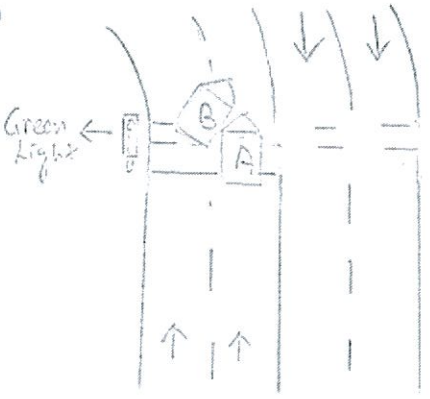
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (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	 _____ Driver's Signature (if driver is not the policyholder) / Date & Time	 _____ Witnessed by Reporting Centre Personnel
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Sketch Plan



A = SFE 8000A
 B = SLN 4755M

Leaving B Toa Payoh
 towards Lorong 6 Toa Payoh
 (Near National Healthcare
 Group Toa Payoh Polyclinics)



**SINGAPORE
POLICE FORCE**



T/20210315/2107

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

1 of 3

Report No. T/20210315/2107

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/03/2021 18:15		Vide Report No.: E/20210315/0056		Station Diary No.: 13	
Informant's Particulars					
Name of Informant: CHIA CHOON HIANG			Address: 11A LORONG PISANG RAJA SINGAPORE 597744		
ID Type / ID No.: NRIC NO / S1615372I			Contact No.: Home/Office: Mobile: 86138000		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 58	Date of Birth: 18/02/1963	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: GRAB DRIVER		Driving Licence Information: Class: 3,4,5		Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/03/2021 10:55	Type of Location: Straight Road
Location: LORONG 8 TOA PAYOH				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFE8000A	Car	TOYOTA	ALPHARD HYBRID 7-SEATER 2.5X CVT	Grey	Seriously Damaged	1
SLN4755M	Car	HONDA	VEZEL HYBRID 1.5X AUTO	Gold		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20210315/2107

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

2 of 3

Report No. T/20210315/2107

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFE8000A	NTUC Income Insurance Co-Operative Limited	5114321920-01	02/12/2020	01/12/2021

Brief Details.

On 15/03/2021 at around 1055hrs, I was driving my vehicle SFE8000A along lorong 8 toa payoh towards 6 toa payoh (near national healthcare group toa payoh polyclinic). I was travelling straight on lane 1, traffic light was green in my favor. Suddenly, a vehicle SLN4755M from lane 2 on my left side made an illegal U-turn, hence collided onto the front and left side portion of my vehicle. After the collision, at that point of time I was feeling okay so as my passenger, I checked on the other vehicle and knowing that they are trapped inside the vehicle I called for ambulance assistance. The passenger was of the other vehicle was conveyed, traffic police attended to us and interviewed us. The traffic police seized my micro sd card with reference number E/20210315/0056 under investigation officer Syakir. After the incident, I went to the mount Elizabeth hospital at orchard and was given 7 days MC.



SINGAPORE
POLICE FORCE



T/20210315/2107

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

3 of 3

Report No. T/20210315/2107

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:
D /
Sgt 1 HENG BOONCHAI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
15/03/2021 18:15

Officer In Charge Of Case:
TP / GIT /
Staff Sgt SITI NORHAFIDAH BINTE HANAFI
Contact No.: 65476202

Classification Of Case:

Authentication Stamp
NP 168 SINGAPORE POLICE FORCE

SIGNATURE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1615372I



Name

CHIA CHOON HIANG

謝 俊 賢

Race

CHINESE

Date of birth

18-02-1963

Sex

M

Country/Place of birth

SINGAPORE

S1615372I

SFE 8000A
owner's driver



6100567

NRIC No. S1615372I



Date of issue

11-01-2019

Address

11A LORONG PISANG RAJA
SINGAPORE 597744

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S 16153721**

Name: **CHIA CHOON HIANG**

Birth Date: **18 Feb 1963**

Issue Date: **08 May 2003**

000465447B




*SFZB000A
owner & driver*

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


		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	11 Jun 1980
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	08 May 1984
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	04 Jul 1984


Fuel Up to the Power of 2!


Expiry date 31 Jan 2005. Terms & Conditions Apply

NP 428A

Licence No. S16153721



Land Transport  Auth

 PDVL/TDVL
33 888 8888
287113

VOCATIONAL LICENCE

 Licence No: S16153721
Name: CHIA CHOON HIANG
Issue Date: 29/9/2008
Please visit www.lta.gov.sg to check the status of this vocational licence

SFE 800 A
Owner & driver

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	09/10/1996



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: 5114321920-01 **Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SFE8000A**
Chassis Number : AYH3000090366
2. Name of Policyholder : CHIA CHOON HIANG
3. Effective Date of Insurance : 02 Dec 2020
4. Expiry Date of Insurance : 01 Dec 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	: CHIA CHOON HIANG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: OCBC BANK 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 : INSURE LINK PTE LTD (00000614836)
Date of Issue : 24 Nov 2020 10:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

Insure Link Pte Ltd
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