

NATIONAL Assessment Centre Services

Date In: 17/03/21	Job description	Date & Time Completed	Done by
Ref No: NA/C7301003459/13	SAS e-filing		
Veh No: GE20415	E-mail (within 8hrs. AIC 2hrs)		
D.O.A: 16/03/21 1940	i-Motor Claim Form		
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs. TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: GBK4276M	INC () / Non-INC ()
Owner / Driver: (Tel:	()
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Time: ()
Insured/Driver Liability: () %	[Note-Est. Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]	
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.
() Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co. ()

Remarks:- (INC hotline: 6788 6616)	Date&Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury:

Date/Time	Actions

Claimant's Particulars :-	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments :-	5) FT: Follow-Through Survey (Resurvey) \$30		
Cat. 1:	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 2 / 3:	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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	17/03/2021 15:26 (SGT)
Date of Accident	16/03/2021 14:40 (SGT)
Exact Location of Accident	Bukit Timah Rd, Singapore
Additional Location Information	JUNC OF WHITLEY RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GK2241S
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	WING LIAN ENGINEERING CONSTRUCTION
Company Reg No	5XXXX600E
Email Address	GENERAL.WLEC@GMAIL.COM
Mobile Phone No	(Phone) +65-65138807
Alternative Phone No	(Office) +65-65138807

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
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 - Claiming third party
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00098962000
Cover Note Number	-

DRIVER

Name of Driver	SEAH CHYE GUAN
NRIC No	SXXXX943F
Date Of Birth	24/01/1968
Occupation	Outdoor

Date Of Driving Pass	29/09/1989
Driving experience	31 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98198330
Alt. Phone Number	-
Email Address	EDWINGOOD77@GMAIL.COM
Address	BLK 648A JURONG WEST ST 61
Address complement	#03-230
Postcode	641648
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Side Swipe
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?	No
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	LIN SOK KEAN
Gender	Female

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

PLS REFER TO THE ATTACHED STATEMENT.

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	GBK4276M
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	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	SEAH CHYE GUAN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	GK2241S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	LIN SOK KEAN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	GK2241S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	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:

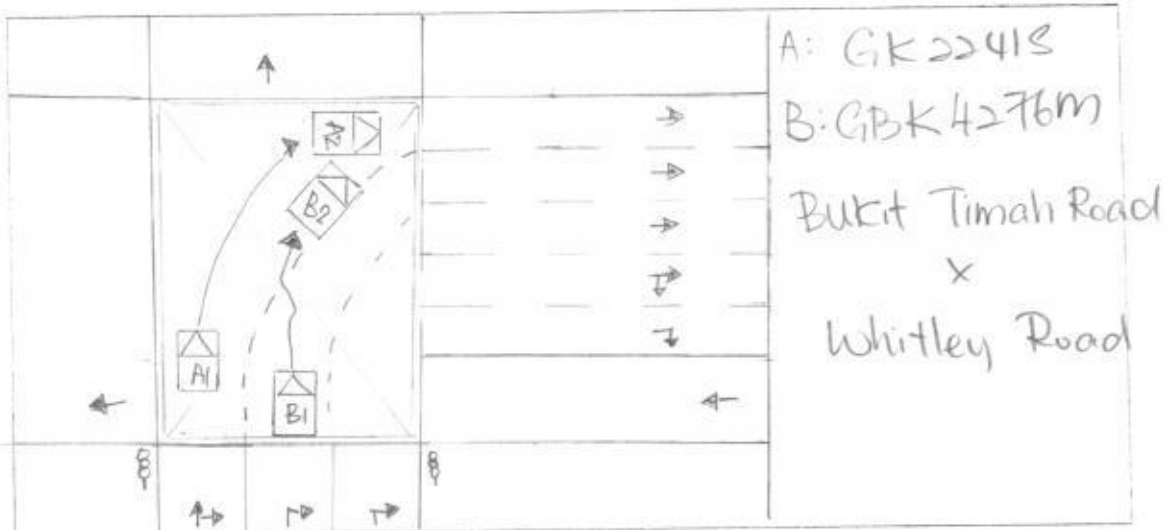
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

GIA's Standard Form 42

I authorized IDAC to email
GIA Report to admin@nhtmotor.com

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along the Bukit Timah Road
x Whitley Road at extreme left lane of
3 lanes

Suddenly, I felt an impact.

Veh "B" encroached into my path from
the 2nd and collided onto the right portion
of my vehicle and caused damages

After the accident, I alighted and exchange
the Particular with veh "B" driver and left
the scene.

(Signature)

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:

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

VEHICLE NO: GK2241S

MAKE & MODEL: Toyota Dyna

AUTO ☒ MANUAL

DATE OF ACCIDENT	16 / 03 / 2021	*C.C. 150
TIME OF ACCIDENT	1439	AM / <input checked="" type="checkbox"/> PM
LOCATION OF ACCIDENT	Bukit Timah Road x Whitley Road	
EXACT PURPOSE USED AT TIME OF ACCIDENT	<input checked="" type="checkbox"/> EMPLOYMENT / <input type="checkbox"/> PRIVATE USE / <input type="checkbox"/> PRIVATE HIRE	
NAME OF OWNER	Wing Lian Engineering Construction	
TELP NO.	Mobile:	Email: genetal.wlec@gmail.com
NRIC	Office: 65138807	Home:
CLAIM TYPE	51238600E	
FLEET POLICY	OD / <input checked="" type="checkbox"/> THIRD PARTY	REPORTING ONLY
INSURANCE CO.	China Taiping	
TYPE OF COVERAGE	<input checked="" type="checkbox"/> Comprehensive / <input type="checkbox"/> Third Party / <input type="checkbox"/> Third Party Fire & Theft	
POLICY NO.	DMCVSNW009896200	
NAME OF DRIVER	AS ABOVE / IF <input checked="" type="checkbox"/> Seah Chye Guan	
NRIC	S6803943F	
DATE OF BIRTH	24 / 01 / 1968	
ANY PASSENGER	YES / NO: 01 (F) Lin Sok Kean	
NAME OF PASSENGER		
GENDER OF PASSENGER	<input checked="" type="checkbox"/> MALE / <input type="checkbox"/> FEMALE	
OCCUPATION	<input checked="" type="checkbox"/> Outdoor / <input type="checkbox"/> Indoor	
DATE OF DRIVING PASS	29 / 09 / 1989	
GENDER	<input checked="" type="checkbox"/> Male / <input type="checkbox"/> Female	
CONTACT NO.	Mobile: 98198330 Office: Home:	
EMAIL:	edwingood77@gmail.com	
ADDRESS	BLK648A Jurong West Street 61 #03-230 (S)	
DOES DRIVER OWN OTHER VEHICLES?	NO / If yes, Reg No. INSURER: 641648	
RELATIONSHIP	<input checked="" type="checkbox"/> Employee / <input type="checkbox"/> If No.	
WEATHER CONDITION	<input checked="" type="checkbox"/> Clear / <input type="checkbox"/> Raining / <input type="checkbox"/> Other	
ROAD SURFACE	<input checked="" type="checkbox"/> Dry / <input type="checkbox"/> Wet / <input type="checkbox"/> Other	
ANY INJURIES	No / If yes, Who? 01-M - Seah Chye Guan	
CONTACT NO.	F - Lin Sok Kean	
POLICE REPORT	No / If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES, WHO?	
VEHICLE B NO.	G1BK4276M Any Passenger: 01	
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	<input checked="" type="checkbox"/> YES / <input type="checkbox"/> NO	
WAS THERE ANY AUDIO RECORDED?	YES / <input checked="" type="checkbox"/> NO	
SCENE ACCIDENT PHOTOS TAKEN?	YES / <input checked="" type="checkbox"/> NO	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / <input checked="" type="checkbox"/> NO	

NEW HOCK TECK MOTOR PTE LTD

Email: admin@nhtmotor.com / yunli@nhtmotor.com

Tel: 6747 9241



**SINGAPORE
POLICE FORCE**



J/20210315/2065

1 of 7

POLICE REPORT (NP322)

Report No. J/20210315/2065

Police Station Of Origin
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Date/Time Report Made 15/03/2021 14:59	Vide Report No.	Station Diary No. 37
Name Of Informant SEAH CHYE GUAN	Address APT BLK 648A JURONG WEST STREET 61 #03-230 SINGAPORE 641648	
ID Type / ID No. NRIC NO / S6803943F	Contact No. Home/Office Mobile 98198330	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Lorry driver	Sex Male	Age 53
Institution/School Name	Date of Birth 24/01/1968	Race Chinese
Date/Time Of Incident 15/03/2021 13:05	Location Of Incident 648A JURONG WEST STREET 61 HDB-JURONG WEST SINGAPORE 641648 At the void deck	

Brief details.

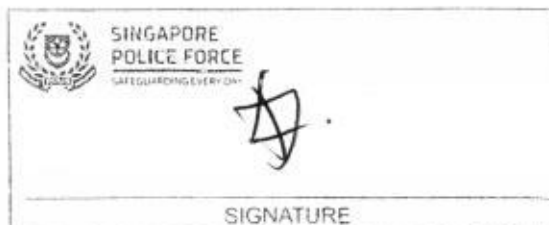
On the above mentioned date, time and location, I discovered that the below mentioned items were missing. I made a search however to no avail.

This report is lodged for replacement purposes.

Signature Of Officer Recording The Report: J / Sgt 2 CHUA KIAN TIONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 15/03/2021 14:59
Officer In-Charge Of Case: J / Nanyang N.P.C / Staff Sgt PEH SEOK CHENG Contact No.: 65152151	Classification Of Case:

Authentication Stamp

FUPO hotline number: 68429645





**SINGAPORE
POLICE FORCE**



J/20210315/2065

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POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. J/20210315/2065

Property Information								
S/N	Item	Type	Brand/ Account/ Property/ Security- Type	Make/ Model/ Bank/ Address/ Counter	Serial No./ IMEI/ Acct No.	Quantity	Value	Description
1	General property	Lost	Picard			1	Singapore Dollars 88.00	01 Long Brown Picard Wallet belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
2	Cash	Lost				10	Singapore Dollars 100.00	10 SGD\$100/- amounting to SGD\$1000/- belonging to SEAH CHYE GUAN (NRIC NO S6803943F)

Signature Of Officer Recording The Report:

J / Sgt 2 CHUA KIAN TIONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Nanyang N.P.C /
Staff Sgt PEH SEOK CHENG
Contact No.: 65152151

Signature Of Informant:

Date/Time:
15/03/2021 14:59

Classification Of Case:

Authentication Stamp

FUPO hotline number: 68429645





**SINGAPORE
POLICE FORCE**



J/20210315/2065

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POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. J/20210315/2065

3	Cash	Lost				4	Singapore Dollars 50.00	04 SGD\$50/- amounting to SGD\$200/- belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
4	Credit Card / Debit Card/ ATM Card	Lost	DBS BANK LTD			1		01 DBS Bank Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
5	Credit Card / Debit Card/ ATM Card	Lost	POSB			1		01 POSB Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)

Signature Of Officer Recording The Report:

J / Sgt 2 CHUA KIAN TIONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Nanyang N.P.C /
Staff Sgt PEH SEOK CHENG
Contact No.: 65152151

Authentication Stamp

Signature Of Informant:

Date/Time:
15/03/2021 14:59

Classification Of Case:

FUPO hotline number: 68429645





**SINGAPORE
POLICE FORCE**



J/20210315/2065

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POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. J/20210315/2065

6	Credit Card / Debit Card/ ATM Card	Lost	POSB			1		01 POSB Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
7	Credit Card / Debit Card/ ATM Card	Lost	OCBC LTD			1		01 OCBC Bank Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
8	Credit Card / Debit Card/ ATM Card	Lost	OCBC LTD			1		01 OCBC Bank Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
9	Credit Card / Debit Card/ ATM Card	Lost	OCBC LTD			1		01 OCBC Bank Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)

Signature Of Officer Recording The Report:

J / Sgt 2 CHUA KIAN TIONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Nanyang N.P.C /
Staff Sgt PEH SEOK CHENG
Contact No.: 65152151

Signature Of Informant:

Date/Time:
15/03/2021 14:59

Classification Of Case:

Authentication Stamp

FUPO hotline number: 68429645





**SINGAPORE
POLICE FORCE**



J/20210315/2065

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POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. J/20210315/2065

10	Credit Card / Debit Card/ ATM Card	Lost	CITIBANK LTD			1		01 Citibank Bank Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
11	Credit Card / Debit Card/ ATM Card	Lost	CITIBANK LTD			1		01 Citibank Bank Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
12	Credit Card / Debit Card/ ATM Card	Lost	BANK OF CHINA LTD			1		01 Bank of China Bank Card belonging to SEAH CHYE GUAN (NRIC NO S6803943F)

Signature Of Officer Recording The Report:

J / Sgt 2 CHUA KIAN TIONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Nanyang N.P.C /
Staff Sgt PEH SEOK CHENG
Contact No.: 65152151

Signature Of Informant:

Date/Time:
15/03/2021 14:59

Classification Of Case:

Authentication Stamp

FUPO hotline number: 68429645





SINGAPORE
POLICE FORCE



J/20210315/2065

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POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. J/20210315/2065

13	General property	Lost				1		01 Driving License belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
14	Identity Card	Lost	SINGAPORE NRIC			1		01 Singapore Pink NRIC belonging to SEAH CHYE GUAN (NRIC NO S6803943F)
15	CashCard	Lost				1		01 Cashcard belonging to SEAH CHYE GUAN (NRIC NO S6803943F)

Signature Of Officer Recording The Report:

J / Sgt 2 CHUA KIAN TIONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Nanyang N.P.C /
Staff Sgt PEH SEOK CHENG
Contact No.: 65152151

Signature Of Informant:

Date/Time:
15/03/2021 14:59

Classification Of Case:

Authentication Stamp



FUPO hotline number: 68429645

Motor Commercial

MZ300/C

N SN

AN0132A

Gov. Type C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1966
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1950 (Malaysia)

CERTIFICATE No.

DMCVSNW00098962000

Engine No. 1KD2106014

Chassis No. JTFAT35Y10K201591

1. Index Mark and Registration
Number of Vehicle

GK2241S

AUTOSAFE

2. Name of Policy Holder

WING LIAN ENGINEERING CONSTRUCTION

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

12/10/2020

Excess Sect 1 S\$500.00
EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

31/08/2021

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their 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*

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : LAKE VIEW CREDIT PTE LTD

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

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).

Please see reverse

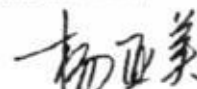


Issued By:

LAKE VIEW AGENCY PTE LTD

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorised Signatory