ASS. REC. BY: Steve 7 CS/AIGO	1005795/EVF3 : 1
A\$5	IGNMENT
From: Dale:	Veh No: SLA 39980 Yr Regn: 29/2/16 Type: M.Car) M.Cycle / Bus / Van / Lorry ATaxi / Prime Mover /
(OD) TPIWS TPRESTOD RESTEVATINY MY	Truck / Trailer or
To inspect Vehicle No:	1/.0
ul Workshop m/s	Make: KIA Forte - c.c. 1591
ol .	Colour NC: Insured / Std / N1 / N
The second secon	Sp.Reading : 128659 T/Radio; Insured Std N1 H
Insured:	Eng/No:
Policy No.	CNO: KNIHFX41H165579600
Cialms No.	Gen. Cond: Good I Folly Poor I Burnt
Sum Insured: Excess:	Steering: Inorder / Jemmed / Leaked / Burnt or
(Cliont's Record)	Brakes Inorder / Jammed / Leaked / Burnt or
Make of Veh;	Modi: Nil / 4/Rim / STO A/Rim or
1	Tyre Size: F: 205/55R16
(Policy Condition)	R: 11
Remark: The veh had commenced its N/S?" 10/5	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of in spection.	TOYOTYOKO or B Rad Ster
Rai. or Market Value:	Front Rear
IDAC Accident Rport: Consistent?: Yes or No	R/Bal, 4 : mm R/Bal, 4 mr
SIA / PR Seem Consistent?: Yes or No	UBal: 4 mm UBal, 4 mr
Est Repairs: days Res.: Yes or No	D.O.A. 12/5/21 0.O.L 17/5/21
Lum Sum: % 3 Val.: Yes or No	Survey held at Cycle I Call lage
CA REV REP. 24 HRS Vehicle: IN/OUT	Des. of Damages : Frt Rear O/S N/S U/C Rooftop or
Dale:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Cate / Yims Action / Instruction	
MV- COK	
ale/Time, File Ross W Prell. Report	Days Of Repair:
The state of the s	Resurvey No. of Trip: Survey Fee:
ale/Tuno, File Return 107	Transportation:
Add Fee	: : Site insp (\$) _ s -R38/
	: Interview (\$) Protes
openationness:	: Yeoh, Inva 1% .) Offices
ning sum / LEA: Co	: Weel and 15
	. TOTAL



CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

EST	MA	-

GST Reg No : MR-8500111-X

199405410K		Owner Name & Vehicle Info
Invoice Name & Address AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPARTMENT 78 SHENTON WAY #09-16	Cust No/Name Reg No/Reg Date Date In/Mileage Chassis No	/Pang Cheng Chin SLA3998D / 29/02/201 / 0 KNAFX411MG5579600
AIG BUILDING	Engine No	G4FGFH609748
SINGAPORE 079120 Contact No 64191000	Make/Model	KIA/FORTE K3 1.6 A EX BF4
Contact No 04191000	Colour/Trim	D7U / WK

				CSE	Operator		11/24	WIP No			
Account No	Terms	Date/Time Pri	MARKET MAZGIN		289 / Patrick	Lee Vev	in	33327			
AX00000	Credit	14/05/2021/	09:35	QUK			ty	Unit Price	Disc%	Ar	nount
		Description of	of Goods	s / Services							1600.00
PNT88000				3	RTER PANEL, REAF	RUMPER	. 4 X	400			
REPLACE	FRT RH D	OOR, REAR'RH D	OOR, RE	EAR RH QUA	KIEK PANEL, KLA	DOTTER		NO 0.80 EXIV			
& AFFECT	ED AREAS										1400.0
PNT98000	1		0000	DEAD DUI	ARTER PANEL, REA	R BUMPER	IL Y	750			
	FRT' RH	DOOR, REAR RH	DOOK,	KEAK KII QU	ARTER Trinee,		4 ^	000		80	120.0
PNT88000		DADVING ACCIO	T CENS	ΛD						-	040 0
	INSTALL	PARKING ASSIS	1 35430	UK							240.0
PNT88000	ND THETA	LL DEAD WINDSO	PEEN GI	ASS TO FA	CILITATE REPAIR						80.0
	NU INSTA	LL KEAR WINDS	KEEN G	LASS IS IN							80.0
SUNDRY	LITHIDSCO	EEN SEALANT				П	507 <u>44</u> 55				120.0
			_ /	257	TIPO G	25		1			120.0
PNT88000	EED EDT I	RH DOOR ATTAC	MENTS	TO NEW PAN		7111	=	.)			120.0
PNT88000	FER INI	KII 000K M. 1/2	7	J) (4		27 17	\cup	7			120.0
TO TDANS	FFR RFAR	RH DOOR ATTAC	HMENTS	TO NEW PA	NEL					1	80.0
DALTOODAA					2 /	4.)					00.0
TO REMOV	F REAR C	ABIN COMPARTME	NT TO	FACILITATE	REPAIR C Ph	10				40	120.0
4 SUNDRY					1002 // M 1					40	120.0
TO APPLY	BODY SE	ALANT ON AFFEC	TED ARE	EAS						40	120.0
M SUNDRY										7 -	120.0
TO PERFO	RM RUST	PREVENTION								30	120.0
A 54900099										0 3	
CHECK ON	WIRING	& CHASSIS ELEC	TRICAL	SYSTEM						120	280.0
10028901					a TECT					12	
TO CARRY	OUT DIA	GNOSTIC CHECK	USING I	HI-SCAN PR	0 1521						
USING HI	-SCAN PR	O TEST								20	50.0
M SUNDRY											
SUNDRIES			00			1.	00	1542.00	20.00		1233.6
M PANEL AS	SY-FRONT	DOOR,RH	00			ī.		1361.00			1088.8
M PANEL AS	SY-REAR	DOOR, RH	0.056			1.		791.00			632.8
M CUALD DI	RIMPLE	/ IIE	200			1.		33.00	20.00		26.4
M BRACKET-	KK BOWLE	R SIDE MTG, RH	1			1.	00	843.00	20.00		674.4
M LAMP A22	DI-KEAK C	COMBINATION, RH	•								

Confirm & accepted by

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



CYCLE & CARRIAGE KIA PTE LTD PANDAN GARDENS CUSTOMER SERVICE CENTRE



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65651240

ESTIMATE GST Reg No : MR-8500111-X Co Reg No : 199405410K Owner Name & Vehicle Info Invoice Name & Address /Pang Cheng Chin Cust No/Name AIG Asia Pacific Insurance Pte. / 29/02/201 Reg No/Reg Date SLA3998D Ltd. Date In/Mileage MOTOR CLAIM DEPARTMENT KNAFX411MG5579600 78 SHENTON WAY #09-16 Chassis No G4FGFH609748 AIG BUILDING Engine No KIA/FORTE K3 1.6 A EX BF4 SINGAPORE 079120 Make/Model Contact No 64191000 Colour/Trim

			CSE	Operator		WIP No		
Account No	Terms	Date/Time Printed		289 / Patrick L	ee	33327		
AX00000	Credit	14/05/2021/ 09:35	QUK	209 / Facility	Qty	Unit Price	Disc%	Amount
		Description of Goods	Services		1.00	1213.00		970.40
PANEL AS	SY-QUART	ER OUTER, RH / 00			1.00	27.00	20.00	21.60
FILM-ANT	I CHIPPG	RH / MC			1.00	13.00	20.00	10.40
BLACK TA	PE-FR DR				1.00	11.00	20.00	8.80
BLACK TA	PE-RR DR	FRAME UPR, RH			1.00		20.00	9.60 6.40
I BLACK IA	PE-FK UK	KK, KII			1.00		20.00	60.00
TAPE-RR	DR FRAME	DEACH MILLIAM			1.00		20.00	46.40
4 GUARD AS	SY-REAR	WHEEL, RH / CRY	?		1.00	58.00	20.00	97.60
W/STRIP	ASSY-FR	DR BELT O/S RH DR SIDE RH	**		1.00		20.00	71.20
M W/STRIP	ASSY-FR	DR SIDE RH			1.00	89.00	20.00	91.20
M W/STRIP	ASSY-KK	DR BELT O/S RH			$\Pi^{1.00}$	114.00	20.00	12.80
M W/STRIP	4221-KK	DR SIDE RH	25	ima	25 8.89		20.00	427.20
M PAD-WIN	SSY-REAR	WINDOW X	≤ 11	1111116	11.00		20.00	21.60
M GLASS A	DEAD WI	INDOW GLASS	\bigcirc		71 (3.00)		20.00	6.40
M MOOFDIN	DD WIND	OW GLASS _ nl(_		2.00	4.00	20.00	1 1/400-000
1 3101. 2		> 1100						
				SURVEYOR NAME:	Steve C	The second secon	7 5 21,	4.999~
				SURVEYOR SIGNATU	INF: UII-	NU A	<u></u>	
				SURVETOR SIGNA	EXC	111 -7		
				DATE :	<u> </u>	11		
					ρp			
				REMARKS:		BL GA		
					-	00 14		
50					1 '5	J		
i i	T			_	1 dy]			
		KK Auto Consultants hence	notify		-1			
Confirm	accepte	e Repairer of the following:	ina					
		To display damaged part(s) during r					lett	9,967.6
		Parts prices are subject to confirma			7% GST o	n 9967	.60	697.7
	1989	Third party survey is on a "Without I					LIA	10,665.3
_	0.00	No illegal modification(s) is allowed				Total Paya	DIE	20,000.0
		Supplementary item(s) must be res tory; and company stamp	urveyed and					
Authori:	red stona	tory and company stamp	more company	1				

Validity of this estimate is 14/days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commendement of the work. Payment for this may be made in cash, credit card or deposit of 50% of the above estimate is payable before commendement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



SINGAPORE ACCIDENT STATEMENT

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
 This Form must be completed by the Policyholder and/or the Authorised Driver
 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 erchiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

12/05/2021 12:37 (SGT) Date of Submission 12/05/2021 08:05 (SGT) Date of Accident Adam Rd, Singapore **Exact Location of Accident** TOWARDS PIE, JURONG Additional Location Information Singapore Country/State of Loss

IDETAILS OF OWN VEHICLE

SLA3998D Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? PANG CHENG CHIN Name Of Registered Owner NRIC No SXXXX063F c2pang@hotmail.com **Email Address** Mobile Phone No (Phone) +65-92391231 Alternative Phone No (Home) +65-92391231

VEHICLE PARTICULARS

Manufacturer Kia Model Forte Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? Yes Vehicle Category Private car Transmission Auto CC 1600

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No **Policy Number** 2100453630-05 Cover Note Number

DRIVER

Name of Driver PANG CHENG CHIN NRIC No SXXXX063F



note Of Birth 24/08/1963 occupation Indoor 14/11/1988 pate Of Driving Pass 32 YEARS AND 6 MONTHS Driving experience Male Gender (Phone) +65-92391231 Mobile Number (Home) +65-92391231 Alt. Phone Number c2pang@hotmail.com Email Address Blk 718 Tampines Street 72 #03-53 Singapore Address Address complement 520718 Postcode Yes Is the driver the policyholder? If No, Relationship of the Driver with the Insured No Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Collision - Change/cross lane Type of Accident Clear Weather Conditions Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No 2 Number of vehicles involved in the accident No Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? PASSENGER 1 LIM SOO SOO Name Female Gender DETAILS OF POLICE ACTION Was the accident reported to the police? No No Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO THE ATTACHMENT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? No EDETAILS OF OTHER VEHICLE PROPERTY 111 Vehicle Registration Number FBP9374D Vehicle Manufacturer Vehicle Model

Motorcycle

Vehicle Variant Vehicle Colour Vehicle Category

ame of Driver	Shakthivelan s/o Mohan
ARIC NO	SXXXX922C
Contact Mullion	(Phone) +65-84994390
Address	(
Address complement	2
Postcode	
Insurance Company Name	
Nature Of Damage	-
Details of property damaged in accident	
No. Of Passenger (Including Driver)	5.50 - 1.50 - 1.50

SKETCH PLAN

IMPORTANT NOTICE

- 1. Rease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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
- 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 wall 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 erchiving of this report at the centre and to copies of the report being made available aforesaid.
- 5. Consent under the Personal Data Protection Act (PDPA)

funderstand, 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 sat 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, handing 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;
- (a) administuring my claims (including the mailing of correspondence, statements, involces, 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 Purposess

SERVICE Witnessed by Reporting Oriver's Signature (If driver is not the policyholder) / Date Policyholder's Signature / Date & Personnel 15 HOS/104151 Sketch Plan VEHICLE A - SLA 3998D moter cacle = 75793740

escribe Circumstances of the Accident	
on 12 May Dual morning of us. I was driving	4 towards also
Adam road turn towards PIB Jurong. Du	
on PIF (Jurong). I wanted to take the 10	
Tinuals. I dillered lane to the right	
	ion clouded.
	ere a loud noise
4 6/03	end oud to their
saw it a motorbite oviver on the g	
Astering him whether best to 6 injuice	
At I moved the car the the side and h	e drove to the
side also.	
Nopody was injured.	
0	
A A Y	
Declaration	
We declare the foregoing particulars are true in overy respect.	THIS MOVE
1 2	
	S SERVICE S
7	
Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Time & Time	Witnessed by Reporting Centre Personnel





Police Station Of Origin: Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

1 of 4 Report No. T/20210515/2050

DEPORT	OF A	TRAFFIC	ACCIDEN'	Т
--------	------	---------	----------	---

Date/Time 15/05/202	Report M 11 14:15	ade:	Vide Report No.:	Station Diary No.: 32
Informan	t's Particu	lars		
Name of	Informant: HENG CHII		Address: APT BLK 718 TAMPINES ST 520718	REET 72 #03-53 SINGAPORE
ID Type /	ID No.: / \$161606	33F	Contact No.: Home/Office:	Mobile: 92391231
Nationali			Email: c2pang@hotmail.com	
Sex: Male	Age:	Date of Birth: 24/08/1963	Type of Informant: Driver	
Race: Chinese		100	Language:	Institution / School Name:
Occupat	ion:		Driving Licence Information: Class: 2B,2A	Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/05/2021 08:05	Type of Location Straight Road
Location: ADAM ROAL				
Lamp Post N Weather: Clear	lumber: 45	Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Wo	king	Traffic Volume: Heavy
Type of Coll	ision: oving Vehicles - Hea	d To Rear	*	Anyone conveyed by ambulance: No

	ehicle involve		Model	Color	Condition	No of Passenge
Vehicle No.	Туре	Make	INIOGEI	00.0.		0
FBP9374D	Motorcycle		1			U
SLAGGED	Car	KIA	FORTE K3	Blue	Slightly	2
SLA3998D	Car	KIA	FORTE K3	Blue	Damaged	2

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
venicle No.	1	2100453630-05	01/03/2021	28/02/2022





Police Station Of Origin: Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Report No. T/20210515/2050

etails of Person	1 Involveu	-	and the second state of the second se	THE RESIDENCE AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON		
ny Pedestrian Involved: No			Use of Pedestrian Crossing: NA			
o. of Pedestrian	s Injured: NIL		a language of the second	17.		
Oriver	CONTRACTOR CONTRACTOR OF STREET, STREE	ID No.		S1616063F		
vame	PANG CHENG CHIN					
				Contact No.		92391231
Related Vehicle	NIL					
	NIL			Class of Driving Licence & Expiry Date		Class: 2B,2A Date of Expiry: NIL
Hospital/Clinic						
				Date Disc		
	Date Treatment	NIL Degr			Injury	NIL
No. of Days gran	ted Medical Leave		and the second s	The State Control		S9506922C
	SHAKTHIVELAN S/O MOHAN			ID No. Contact No.		595009220
Name						84994390
	NIL					04934330
Related Vehicle						Class: 2B
it-UClinia	NIL			Class of Driving Licence & Expiry Date		Date of Expiry: NIL
Hospital/Clinic						
					of Injury NIL	

On 12/05/2021 at about 0805 hrs, I was driving my vehicle with my wife (SLA3998D), Kia Grey Blue Car, along Adam road, from Lornie Highway towards PIE Tuas, I collided into a motorcyle bearing registration no (FBP9374D) while I was making a change lane to the right. Due to a slow traffic on PIE Jurong, I wanted to take the route via Bukit Timah. I filtered lane to the right after checking right rear traffic which I saw a truck has slowed down. I then signal and filter to the right. After which, I heard a loud sound and managed to stop the vehicle on time however due to the collision, it has caused the motorcyclist to fall down and suffered a slight damages on both vehicles. My right side, passanger door seat has a slight scratch and dented and my bumper rear side, on the right was dented and damage.

For the motorbike, I observed that the left brake handle of the bike was damaged and small parts from the bike was fallen off. The motorcyclist suffered abbrasion on the right elbow however he refused any medical attention after I asked him. I have settled amicably with the motorcyclist and agreed to settle insurance claims respectively.

I did not suffer any injuries and so did my wife. I have already reported this incident to my insurance agent however he advised me to lodge a police for insurance claiming purposes. There was no damages in the government property as well.





Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Report No. T/20210515/2050





Police Station Of Orlgin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

4 of 4 Report No. T/20210515/2050

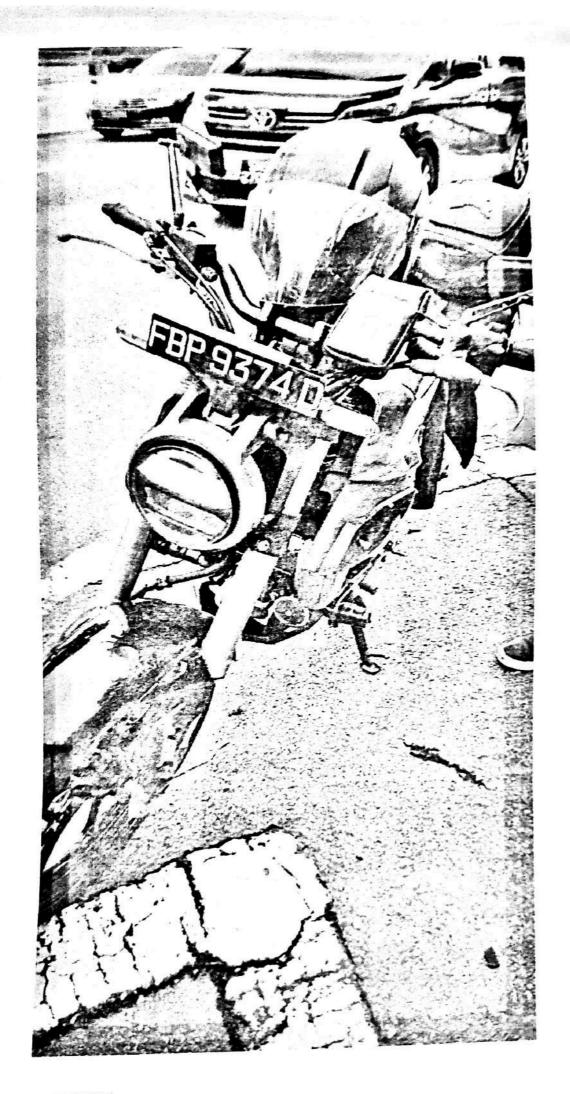
CONTINUATION OF REPORT

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.

Of Office Reporting The Report	Signature Of Informant:
Signature Of Officer Recording The Report:	1 9
Sgt 2 NUR AZFARINAH BINTE ABDULLAH	
W	Z Y
Signature Of Interpreter:	Date/Time:
Not applicable	15/05/2021 14:15
Officer in Charge Of Case:	Classification Of Case:
TP / AEIT /	
SI TAN JEOK LENG	101 (105 Care)
Contact No.: 65476151 SINGAPORE	
Authentication Stamp	
NP168	
50 to 20 to	



CHARACTER CONTRACTOR OF THE PROPERTY OF THE PR

KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Pang Cheng Chin

Period of insurance

: 01 Mar 2021 To 28 Feb 2022

Engine No.

: G4FGFH609748

Checale No.

: KNAFX411MG5879800

Vehicle No.

: 9LA3998D

Policy No.

: 2100453630-05

Endorsement No.

laqued Date

: 11 Jan 2021 A STATE OF THE STATE OF

ABOUT THE COVER

Make/Model

: KIA FORTE K3 1.8 A EX

Engine Capacity/Tonnage: 1,591.00 CC

Sum Insured : Market Value

First Year of Registration : 2018

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*;

at the notice participation.

2) Any other participation who is driving on the Policyholder's order or with his her permission.

The Policy well indemnify the Policyholder or any authorised driver only if his him emests the specified age condition.

You have to pay an additional sum of \$3,000 se "Young and/or inexperienced Driver Excess" ("YIDR") If You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving expenses.

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

like only for social, domestic and pressure purposes and for the Policyholder's business. This Policy does not cover use for him or reward, driving builton, driving seal, recing, pece-mesting, reliability that or species consistent and pressure purposes and for the Policyholder's business or use for any purpose in connection with Motor Trade species and pressure purposes in connection with Motor Trade

Contrations rendered Inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Companisation) Act (Cap. 189). Section 95 of the Road Transport Act, 1987 (Malaysia) and 1987 (Loss of Use 150000 - 160000 The second secon

EXCESS TO SELECT A SECOND OF SECOND

Section 1 Fig. - \$0 Dam Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2 Properly Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Pang Cheng Chin - \$600 (Own Damage), \$600 (Flood Cover)

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

1.0 yibs & Cerrange Brody & Heint Centre. Add. 209 Pandan Gardens 3 ingepore 009939 69884501.
2 Cybs & Cerrange Authorised Service Centre (For eccident reporting 5 windspream talkt only). Add: 330 Ubi Rd 3 Singapore 408850 87481 000.
3 Cybs & Cerrange Authorised Service Centre (For eccident reporting 6 windspream talkt only). Add: 241 Alexandra Robal Singapore 108931 64278830.
3 Cybs & Cerrange Authorised Service Centre (For eccident reporting 6 windspream calm only). Add: 600 Sin Ming Ave Singapore 676733 66318000.

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