



WITHOUT PREJUDICE

Our Ref: SKS 3957P

Your Ref: GBH 1157J

22nd March 2022

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AIG Asia Pacific Insurance Pte Ltd

Dear Hsiao Tong

Accident Involving: SKS 3957P and GBH 1157J

Date of Accident: 22 November 2021

Location of Accident: PIE towards Jurong before Eunus Exit

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

Cost of Repair Inc. GST	\$ 10,700.00	\$10,000 COR Agreed + \$700 GST 7%
TOTAL LOR/U DAYS	19 DAYS	2 Days PRS (22/23 Nov) + 1 Day Resurvey + 14 Days Repair Days Agreed + 2 Sunday
Add Loss of Rental	\$ 2,880.00	16 DAYS - Inv#2112.2885
Add Loss of Use	\$ 360.00	3 DAYS
Total	\$ 13,940.00	
Add Search Fee	\$ 7.45	
GRAND TOTAL	\$ 13,947.45	

Kindly pay the Grand Total Amount of **\$13,947.45** to:

160 Sin Ming Drive #02-12

Sin Ming AutoCity

Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautooffice@gmail.com

Thank you.



Regards

Adel

Team AutoPro Pte Ltd Co Reg No: 201811621K

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

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

PROFORMA INVOICE

**ATTENTION:**

Vincent Lye Chiang Soon

PI Number	P2203-2583
PI Date	22-Mar-2022
Vehicle No.	SKS 3957P
Accident Date	22-Nov-2021

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SKS 3957P	COR Lump Sum		\$ 10,000.00

Notes:

Total Amount	\$	10,000.00
GST 7%	\$	700.00
GRAND TOTAL AMOUNT	\$	10,700.00

Authorized Signature





**TEAM[®]
AUTO**

Your Team Of Automotive Professionals

THIS IS YOUR INVOICE

Bill To:
Vincent Lye Chiang Soon
213 Pasir Ris Street 21 #05-206
S'510213

Date:	8 Dec 2021
Invoice Number:	2112.2885
Vehicle Number:	SKS 3957P
Rental Vehicle Number:	SGY 3731P

S/N	Description	Unit Price	Quantity	Amount
1	Leasing of Vehicle Number: SGY 3731P Rental Rate Per Day: \$180.00 Rental Duration: 16 Commencement Date: 22-11-2021 Ceasement Date: 08-12-2021	\$180.00	16	\$2,880.00

Notes:

- Kindly remit payment to our office address as stated. If you have any query pertaining to this invoice, please do not hesitate to contact us.
- Preferred Payment Mode: Cash
- Alternative Payment Mode : Bank transfer to UOB
Current Account Number: 3243141123 or PayNow to Unique Entity Number (UEN): 202013212Z, immediately or prior to the collection of your vehicle.
- Invoice Raised By: **David SEOW**

Total Amount: \$2,880.00

Discount: \$0.00

Total Nett Amount Due: \$2,880.00



Authorized Signature And Date

Official Use - Payment Details

Bank Transfer / Cash / Cheque / Credit Card: _____

Date: _____

Team AutoCare Pte. Ltd. (Registration No: 202013212Z)

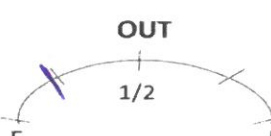
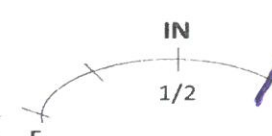
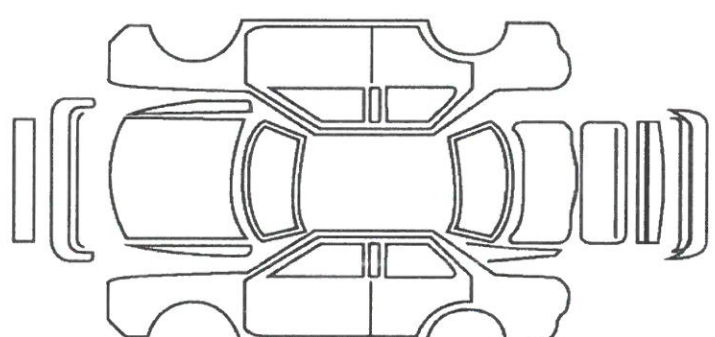


160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722

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

RENTAL AGREEMENT

2112.2885

RA/202111/108

HIRER'S PARTICULAR		Vehicle No / Model		Rental Vehicle No / Model									
Name: <u>Vincent Lye Chiang Soon</u>		<u>SKS 3957 P</u>		<u>SGY 3731 P</u>									
NRIC/Passport No: <u>S 1691116 Z</u>		Date / Time Out:		Date / Time In:									
Driving Licence No: _____ Exp: _____		<u>22/11/2021</u>		<u>08/12/2021</u>									
Address: <u>Blk 213 Pass Rd Street 21</u> <u># 05-206 Singapore 510213</u>		Fuel Tank Level <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> OUT  </div> <div style="text-align: center;"> IN  </div> </div>											
Tel: <u>9634 1300</u>													
ADDITIONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)		RENTAL CHARGES											
Name: _____													
NRIC/Passport No: _____		<div style="display: flex; justify-content: space-between;"> <div> 16 Days @ \$180 </div> <div> per hour per days per week per month </div> </div>		<div style="display: flex; justify-content: space-between;"> <div></div> <div>TOTAL S\$</div> </div> <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> \$2800/- </div>									
Driving Licence No: _____ Exp: _____													
Address: _____													
Tel: _____													
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES 		Additional Payable: <u>-</u> SUBTOTAL Payable: <u>\$2800/-</u>											
Physical Damage Excess <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Singapore - Own Damage</td> <td>\$2,500</td> </tr> <tr> <td>Singapore - 3rd Party Damage</td> <td>\$2,500</td> </tr> <tr> <td>Malaysia (If applicable)</td> <td>\$8,000</td> </tr> <tr> <td>For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age</td> <td>\$3,000 (Additional)</td> </tr> </table>		Singapore - Own Damage	\$2,500	Singapore - 3rd Party Damage	\$2,500	Malaysia (If applicable)	\$8,000	For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age	\$3,000 (Additional)	DEPOSIT AMOUNT PAID		DEPOSIT AMOUNT REFUNDED / Date	
		Singapore - Own Damage	\$2,500										
		Singapore - 3rd Party Damage	\$2,500										
		Malaysia (If applicable)	\$8,000										
For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age	\$3,000 (Additional)												
Mode of Payment		ADDITIONAL REMARKS											
IMPORTANT NOTE : 1. The person(s) signing this rental Agreement assumes full personal responsibility, jointly and severally with the firm, person or organization, the driver or all authorized driver in whose name he/they might sign. 2. Only persons above 23 years of age with more than 2years driving experience, authorised, licensed and signing this agreement may drive the vehicle. 3. Vehicle is strictly for use in Singapore only and may not be driven or taken out of Singapore without the prior written consent of Team AutoCare Pte Ltd. 4. Use of vehicle for illegal purposes (e.g. in connection with theft, drug pedalling or trafficking, smuggling), commercial purposes (e.g. taxi, uber, grab car / car pool usage) is strictly prohibited. 5. In case of accident, the hirer shall report to Team AutoCare Pte Ltd immediately. If there are bodily injuries, a police report must be made within 24 hours		HIRER'S DECLARATION: I/WE agree to the terms and conditions above and as set overleaf and declare that all information given on this form are true and accurate. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amounts due on the rental to my/our account.											
		<div style="text-align: center;">  <hr/> HIRER Signature / Date  Authorized Signatory On Behalf of Team AutoCare Pte Ltd </div>											



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 22 Nov 2021 / 15:50:22

Receipt Date/Time : 22 Nov 2021 / 15:50:22

Tax Invoice/Receipt

Receipt No. : ITNET-00000-211122-002775

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBH1157J				
As at 22 Nov 2021/09:25:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - GBH1157J Enquiry Fee 20211122154943461251	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				
426569XXXXXX8100		eNETS Credit Card		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

To : **Team AutoPro Pte Ltd**
CRN : **201811621K**
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

Letter of Authorization & Undertaking


In Respect of Accident Involving my/our Vehicle No.: SKS 3957 P
and GBH 1157 J and
and and
@ PIE Towards Jurong before Eunus Exit
dated 22/11/2021.

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,



Claimant Signature & Co's Stamp (if applicable)

Date: 22/11/21

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	22/11/2021 18:23 (SGT)
Date of Accident	22/11/2021 09:25 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE towards Jurong before Eunos exit
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS3957P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Vincent Lye Chiang Soon
NRIC No	S1691116Z
Email Address	lye.vincent@gmail.com
Mobile Phone No	(Phone) +65-96341300
Alternative Phone No	(Home) +65-96341300

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Previa
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2362

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA548458/1
Cover Note Number	-

DRIVER

Name of Driver	Vincent Lye Chiang Soon
NRIC No	S1691116Z

Date Of Birth	11/01/1965
Occupation	Indoor
Date Of Driving Pass	14/09/2005
Driving experience	16 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96341300
Alt. Phone Number	(Home) +65-96341300
Email Address	lye.vincent@gmail.com
Address	Blk 213 Pasir Ris Street 21 #05-206
Address complement	-
Postcode	510213
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 - Head to Rear
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Mr Bach
Gender	Male

PASSENGER 2

Name	Ms Rose
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

refer attached report.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH1157J
Vehicle Manufacturer	-



Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Nicholas Yeo
NRIC No	S9448633E
Contact Number	(Phone) +65-92380644
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



POLICYHOLDER ACKNOWLEDGEMENT FORM

Date: 22/11/2021To: Owner of Vehicle Number: SKS 3957 P

The following has been advised to you via your workshop, Se H Koon through their staff, Indy. Please tick the applicable box if you had been advised on any of the following:

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☒ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☒ You had been advised by the workshop of the claims procedure as follows:
- if fire damage and you claim under your own insurance, any applicable excess will be waived. However, there will be no recovery prospect and NCD will be affected.
 - if fire damage and you are claiming against the Third Party, your NCD will not be affected. However, the recovery is not guaranteed, and AXA will not be held responsible.
- ☒ If you had been involved in an accident with a foreign registered vehicle and wished to attempt recovery with AXA help, please forward the photos of the front and back of the NRIC and driving license to motor.doc@axa.com.sg.
- ☐ You have agreed to let AXA assign a workshop for your vehicle repairs. In the process, your vehicle might be towed out to another workshop assigned by AXA. In return, you will get:
- \$200 off on your Basic Own Damage Excess or
 - \$200 as a benefit if your policy has \$0 excess and no Loss of Use benefit or
 - Additional \$200 on top of existing Loss of Use benefit if your policy has \$0 excess and existing Loss of Use benefit.
- ☒ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas. The estimated waiting time for the spare parts to arrive is _____ The estimated arrival time does not include the repair period.
- ☒ There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☒ You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
- ☒ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- ☒ For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.

For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using any combination of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.

- ☒ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.

Signed and acknowledged by:

VINCENT LYE CHIANG SOON

Name and signature of policyholder/ authorized driver* and company stamp (where applicable)

*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle.

Name and signature of workshop personnel including company stamp

AXA Insurance Pte Ltd (Company Reg. No. 199903512M)
8 Shenton Way #24-01 AXA Tower Singapore 064831
AXA Customer Centre 601-21122

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 willful 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

Sketch Plan

PIE Towards Jurong Besar Bus Ex



* Vch A: SKS 3957P

* Vch B: GBH 1157J


Describe Circumstances of the Accident


On the stated date and time, I was travelling along the stated venue.


The traffic was very heavy at that time. As I saw from vehicle stopped, I followed to stop too. When I was stationary, suddenly, vehicle B collided into the rear of my vehicle.

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



redefining / insurance

AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)

(65) 6880 4740

customer.care@axa.com.sg

www.axa.com.sg

Certificate of Insurance

account number
08198

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960 - Road Transport Act. 1987 (Malaysia)
-Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	VINCENT LYE CHIANG SOON	Certificate number	GA548458 / 1
Cover	Comprehensive	Chassis number	JTEGD56MX07166152
Plan name	Flexi	Engine number	2AZ1A86987
NCD applicable	30%		
Vehicle registration number	SKS3957P		
Period of Insurance	from 15/10/2021 to 14/10/2022 (both dates inclusive)		
Finance loan company	Maybank Singapore Limited		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
(b) 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.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* 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.

EXCESS	Basic Own Damage Excess	SGD 500.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

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

AXA Insurance Pte Ltd

Authorised signatory

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1691116Z**

Name: **VINCENT LYE CHIANG SOON**

Birth Date: **11 Jan 1965**
Issue Date: **14 Sep 2005**

001368550E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1691116Z**



Name: **VINCENT LYE CHIANG SOON**
賴長順

Race: **CHINESE**

Date of birth: **11-01-1965**

Country/Place of birth: **SINGAPORE**

Sex: **M**

S1691116Z



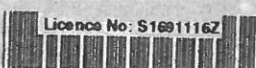
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

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


PASS DATE: **14 Sep 2005**

Licence No: **S1691116Z**


NP 428A



6404029



NRIC No. **S1691116Z**



Date of issue: **09-03-2020**

Address: **APT BLK 213 PASIR RIS STREET 21
#05-206
SINGAPORE 510213**