



**WITHOUT PREJUDICE**

Our Ref: SMP 5997C

Your Ref: YP 5949A

22<sup>nd</sup> August 2022

**ATTN:** LKK Auto Consultants Pte Ltd  
**INSURER:** AXA Insurance Pte Ltd

Dear Hsiao Tong,

**Accident Involving:** SMP 5997C and YP 5949A

**Date of Accident:** 21 January 2022

**Location of Accident:** Junction of Woodlands Ave 12 and Woodlands Ave

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

Cost of Repair Inc. GST	\$ 29,552.37	\$27,619.04 COR Agreed + \$1,933.33 GST
Add Loss of Rental	\$ 4,280.00	40 DAYS - Inv#A43969
<b>TOTAL</b>	<b>\$ 33,832.37</b>	
Add Tow Fee	\$ 180.00	
Add Search Fee	\$ 7.45	
<b>GRAND TOTAL</b>	<b>\$ 34,019.82</b>	

Kindly pay the Grand Total Amount of **\$34,019.82** to:

**Team AutoPro Pte Ltd**  
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 (Ms)

**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:**

Chee Ling Kien

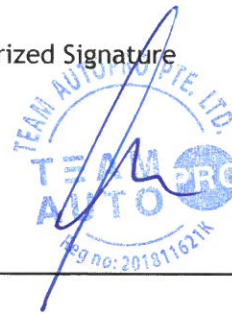
PI Number	P2208-2745
PI Date	22-Aug-2022
Vehicle No.	SMP 5997C
Accident Date	21-Jan-2022

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SMP 5997C	COR Lump Sum		\$ 27,619.04

Notes:

Total Amount	\$	27,619.04
GST 7%	\$	1,933.33
GRAND TOTAL AMOUNT	\$	29,552.37

Authorized Signature



# TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO.
C/O TEAM AUTOPRO PTE LTD CHEE LING KIEN BLK 518B TAMPINES CENTRAL 7 #11-64 SINGAPORE 522518

DATE	INVOICE NO.
17/3/2022	A 43969

	VHA NO.	DUE DATE	VEH NO.
	A 43969	17/3/2022	SMP 760 B
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 21 JANUARY 2022 TO 02 MARCH 2022 YOUR REF: SMP 5997 C	40	100.00	4,000.00
Account Name: BKW RENT A CAR PTE LTD Account No: 118-312-9991 Paynow UEN: 200106276D Bank: UNITED OVERSEAS BANK LTD (UOB) Branch: UOB Shaw Centre Branch Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG  All cheques must be made payable to BKW RENT A CAR PTE LTD. *Please indicate the invoice number and vehicle number in the reference.	Subtotal	\$4,000.00	
	GST @ 7%	\$280.00	
	<b>TOTAL</b>	<b>\$4,280.00</b>	



## VEHICLE HIRING AGREEMENT

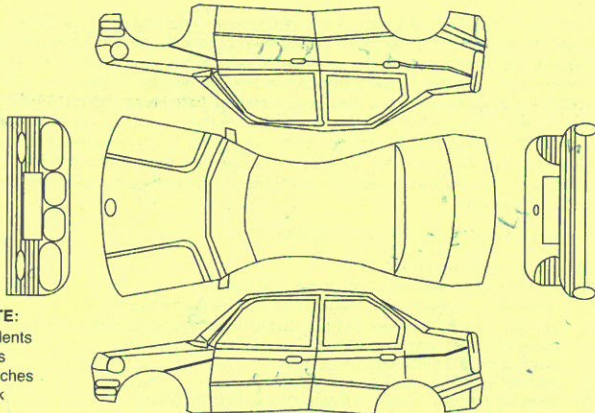
### HIRER'S PARTICULARS

Name (as in I/C) *CHEE LING KEN*  
NRIC/Passport No: *[REDACTED]* Date of Birth: *22/4/1967*  
Address: *BLK 518B TAMPAINES CENTRAL* Age: *52*  
*7 #11-64* S( *52518* )  
Name & Address of Employer  
Occupation Driving Exp:  
Driving Licence No: *[REDACTED]* Passed Date: *8/3/8*  
D/L Type: Local/Int'l/Others:

### DRIVER'S PARTICULARS

Name (as in I/C)  
NRIC/Passport No: *[REDACTED]* Date of Birth:  
Address: Age:  
S( )  
Occupation Driving Exp: Yrs  
Driving Licence No: *[REDACTED]* Passed / Expiry Date:  
D/L Type: Local/Int'l/Others: Contact No: *[REDACTED]*

Hirer's Own Vehicle No: <i>SMP 5977</i>		Replace Veh No: <i>SMP</i>	
Loan Vehicle No: <i>SMP 760B</i>		VR No:	
Make & Model: <i>11. Shuttle</i>		Auto/Manual Group:	
CHARGES \$ cts			
Daily <i>40</i>	day @ \$ <i>100</i>	Per day	<i>\$4000</i>
Weekly/Monthly	week @ \$	Per week/Monthly	
Others			
CDW/PAI	@ \$	Per day/Monthly	
Delivery/Collection Svc			
GST <i>7%</i> <i>\$280</i>			
OR No:		(A) SUB-TOTAL <i>\$4280</i>	
Petrol Level & Surchage	OUT	E	1/4 1/2 3/4 F
	IN		
First <i>100</i> km FREE per day		GST	
Excess mileage is chargeable at <i>10</i> cents per km		TOTAL CHARGES	



NON WAIVER EXCESS (Subject to GST): \$ *2000*

### ACCESSORIES CHECK

- ☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge  
☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre

Hirer's Signature: *[Signature]* Additional Driver's Signature: *[Signature]*

SINGAPORE Use Only

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

### IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 70 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be Borne by the Hirer/the Authorised Driver.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$10 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

- legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$300 - \$500.
- The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$60.00 per trip.
- In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
- The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
- All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
- I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Date Out	Time Out	Mileage	Check By	Remarks
<i>21/01/22</i>		<i>100704</i>		

Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"

Date In	Time In	Mileage	Check By	Remarks
<i>21/03/22</i>		<i>156732</i>	<i>NIK</i>	<i>3/2/22 @ 1100</i>

Hirer's/Driver Signature *[Signature]*





# 24 HOUR RECOVERY SERVICES

Co.Reg No: 53333929D

24 HRS HOTLINE: 8455 5669 Fax: 6741 1981

8 Kaki Bukit Road 2 #02-04 Ruby Warehouse Complex Singapore 417841

Email: 24hoursrecovery@gmail.com

Acasun

No. 33046

Date: 20/1/22



M/S

Team Auto

Vehicle No

SMP5897C

Model

Shuttle

From

Willands Ave 12

Call Time

To

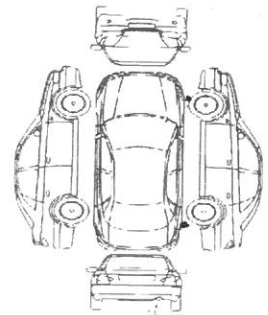
81-14 Auto city

Time Arrival

Remarks

WIN

Arrival Workshop



- |  |   |   |                                     |
|--|---|---|-------------------------------------|
| <input type="checkbox"/> Change Tyres / Patch Tyre   | <input checked="" type="checkbox"/> Accident        | <input type="checkbox"/> Use Car Carrier      | <input type="checkbox"/> Loaded     |
| <input type="checkbox"/> Basement / Multi Carpark    | <input type="checkbox"/> Low Body Kit / Low Spoiler | <input type="checkbox"/> Open Door            | <input type="checkbox"/> Jump Start |
| <input checked="" type="checkbox"/> Using King Dolly | <input type="checkbox"/> Dismantle Brake / Shaft    | <input type="checkbox"/> Crane Up / Winch Out |                                     |

AMOUNT S\$ 80+

Received By

for 24 hour Recovery Services

Vehicle is transported at owner's risk. The company accepts no responsibility for damaged or other misdemeanour to your vehicle whilst being transported.



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 21 Jan 2022 / 18:02:44

Receipt Date/Time : 21 Jan 2022 / 18:02:44

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-220121-003236

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 - YP5949A				
As at 21 Jan 2022/14:05:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - YP5949A Enquiry Fee 20220121180137417859	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				0.04
<b>Total Amount Payable</b>				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.: SMP 5997 C  
and YP 5949 A and .....  
and ..... and .....  
@ Junction of Woodlands Ave 12 and Woodlands Ave 1  
dated 21/01/2022.

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: .....

## 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	22/01/2022 13:14 (SGT)
Date of Accident	21/01/2022 14:05 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF WOODLANDS AVE 12 AND WOODLANDS AVE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP5997C
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEE LING KIEN
NRIC No	SXXXX460E
Email Address	LINGKIE@GMAIL.COM
Mobile Phone No	(Phone) +65-91007530
Alternative Phone No	(Home) +65-91007530

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Jazz
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	1500

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5119068268-01
Cover Note Number	-

#### DRIVER

Name of Driver	CHEE LING KIEN
NRIC No	SXXXX460E



Date Of Birth	22/04/1967
Occupation	Outdoor
Date Of Driving Pass	08/03/1988
Driving experience	33 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91007530
Alt. Phone Number	(Home) +65-91007530
Email Address	LINGKIE@GMAIL.COM
Address	BLK 518B TAMPINE CENTRAL 7 #11-64
Address complement	-
Postcode	522518
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle 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	CHEOK SWEE HONG
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 TO ATTACHED

#### 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	YP5949A
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	CHEE LING KIEN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMP5997C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

### INJURED 2

Name of injured person	CHEOK SWEE HONG
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMP5997C
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 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)

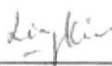
I understand, acknowledge, agree and consent that:

(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:

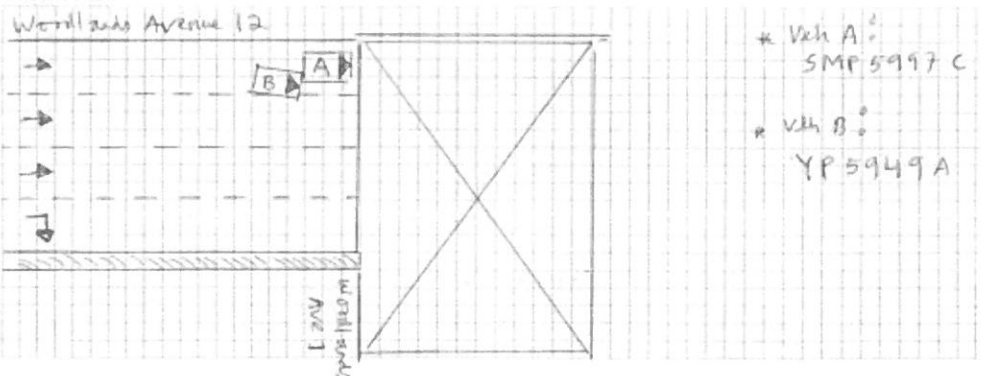
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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	SHUYI Witnessed by Reporting Centre Personnel
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Sketch Plan





## Describe Circumstances of the Accident

On the stated date and time, I was travelling along the stated venue. As I saw the traffic light changing from amber to red before reaching the traffic junction, I applied brake to stop my vehicle. When I was in stationary position, suddenly vehicle B collided onto the rear of my vehicle. Not long after the collision, there was an ambulance which happened to pass by the accident scene. The paramedic officers did some checks for me and also my friend who was travelling together with me. Both of us felt unwell and disoriented on our heads. After that my friend assisted me to take some pictures and some traffic officers also arrived at the accident scene. We were advised to shift our vehicles to the road side and waited for towing services. My friend and I will go to seek medical treatment too.

### Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Daylan

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

SHUYI

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Witnessed by Reporting Centre  
Personnel

## 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:** 5119068268-01

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SMP5997C**  
Chassis Number : GK82001141
2. Name of Policyholder : CHEE LING KIEN
3. Effective Date of Insurance : 03 Oct 2021
4. Expiry Date of Insurance : 02 Oct 2022
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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: CHEE LING KIEN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SING INVESTMENTS & FINANCE 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 : META AGENCY PTE. LTD. (00000573430)

Date of Issue : 01 Sep 2021 17:56 hrs

**For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED**



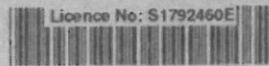
Chief Executive

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE  
08 Mar 1986

NP 428A



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
13	PRIVATE HIRE CAR VL	10/08/2018



0227162

NRIC No: S1792460E

Blood Group: A+ Date of issue: 19-01-1992

APT BLK 518B TAMPINES CENTRAL 7 #11-64  
SINGAPORE 522518  
NRIC No: S1792460E Date: 29/05/2009 (R) No: 6259466

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1792460E

Name: CHEE LING KIEN

Birth Date: 22 Apr 1967  
Issue Date: 11 Feb 2003

Land Transport Authority

VOCATIONAL LICENCE

Licence No: S1792460E  
Name: CHEE LING KIEN

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1792460E

Name: CHEE LING KIEN

朱凌堅

Race: CHINESE

Date of Birth: 22-04-1967 Sex: M

Country of Birth: SINGAPORE