



**WITHOUT PREJUDICE**

Our Ref: SNB 8629H

Your Ref: SLP 4495C S2M03UYC

14<sup>th</sup> April 2022

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

Dear Asher,

**Accident Involving:** SNB 8629H and SLP 4495C

**Date of Accident:** 4 March 2022

**Location of Accident:** Haig Road & Block 9 Road T Junction

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

Cost of Repair Inc. GST	\$	5,029.00	\$4700 COR Agreed + \$329 GST
Add Loss of Rental	\$	1,080.00	9 DAYS - Inv#2203.3476
Total	\$	6,109.00	
Add Search Fee	\$	7.45	
<b>GRAND TOTAL</b>	<b>\$</b>	<b>6,116.45</b>	

Kindly pay the Grand Total Amount of **\$6,116.45** 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: teamautoffice@gmail.com

Thank you.



Regards  
Adel

# PROFORMA INVOICE

**ATTENTION:**

Teo Kheng Kim Debra

PI Number	P2204-2596
PI Date	14-Apr-2022
Vehicle No.	SNB 8629H
Accident Date	4-Mar-2022

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SNB 8629H	COR Lump Sum		\$ 4,700.00

**Notes:**

Total Amount	\$	4,700.00
GST 7%	\$	329.00
GRAND TOTAL AMOUNT	\$	5,029.00

Authorized Signature





**TEAM<sup>®</sup>  
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*Your Team Of Automotive Professionals*

## THIS IS YOUR INVOICE

<b>Bill To:</b>
Teo Kheng Kim Debra
34 Tanah Merah Kechil Road #05-30
S'465560

<b>Date:</b>	14 Mar 2022
<b>Invoice Number:</b>	2203.3476
<b>Vehicle Number:</b>	SNB 8629H
<b>Rental Vehicle Number:</b>	SMD 715J, SMD 2232J

S/N	Description	Unit Price	Quantity	Amount
1	Leasing of Vehicle Number: SMD 715J, SMD 2232J Rental Rate Per Day: \$120.00 Rental Duration: 9 Commencement Date: 05-03-2022 Ceasement Date: 14-03-2022	\$120.00	9	\$1,080.00

**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: \$1,080.00

Discount: \$0.00

Total Nett  
Amount Due: \$1,080.00



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





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## RENTAL AGREEMENT

2203.3476

RA/202202/149

<b>HIRER'S PARTICULAR</b>		<b>Vehicle No / Model</b>		<b>Rental Vehicle No / Model</b>														
Name: <u>Teo Kheng Kim Debra</u>		<u>SNB862911</u>		<u>SMD715J</u>														
NRIC/Passport No: <u>513106344</u>		<b>Date / Time Out:</b>		<b>Date / Time In:</b>														
Driving Licence No: _____ Exp: _____		<u>05/07/22 0945</u>		<u>12/03/2022</u>														
Address: <u>34 Tanah Merah kechil Road</u> <u>#05-30 S(465560)</u>		<b>Fuel Tank Level</b> 																
Tel: <u>96642300</u>																		
<b>ADDITIONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)</b>		<b>RENTAL CHARGES</b>																
Name: _____		<table border="1"> <tr> <td>Hour</td> <td>@</td> <td>per hour</td> </tr> <tr> <td>7 Days</td> <td>@</td> <td>\$120</td> </tr> <tr> <td>Weeks</td> <td>@</td> <td>per week</td> </tr> <tr> <td>Months</td> <td>@</td> <td>per month</td> </tr> </table>			Hour	@	per hour	7 Days	@	\$120	Weeks	@	per week	Months	@	per month	TOTAL S\$	
Hour	@				per hour													
7 Days	@				\$120													
Weeks	@				per week													
Months	@				per month													
NRIC/Passport No: _____		9840/-																
Driving Licence No: _____ Exp: _____																		
Address: _____																		
Tel: _____		Additional Payable: <u>—</u> <b>SUBTOTAL Payable:</b> <u>9840/-</u>																
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		<b>DEPOSIT AMOUNT PAID</b>		<b>DEPOSIT AMOUNT REFUNDED / Date</b>														
		<b>Mode of Payment</b>																
		<b>ADDITIONAL REMARKS</b>																
<b>Physical Damage Excess</b>		<b>Acknowledgement</b>		<b>HIRER'S DECLARATION:</b> 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.														
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 )																
<b>IMPORTANT NOTE :</b> 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 peddling 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 Signature / Date 																		
Authorized Signatory On Behalf of Team AutoCare Pte Ltd																		



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## RENTAL AGREEMENT

2203.3476

RA/202203/155

<b>HIRER'S PARTICULAR</b>		<b>Vehicle No / Model</b>		<b>Rental Vehicle No / Model</b>	
Name: Teo Kheng Kim Debra		SMB 8629 H		SMD 2232 J	
NRIC/Passport No: S 1310 634 G		<b>Date / Time Out:</b>		<b>Date / Time In:</b>	
Driving Licence No: Exp:		12/03/2022		14/03/2022	
Address: 34 Tawar Merah Kechil Road #05-30 Singapore 465560		<b>Fuel Tank Level</b> 			
Tel: 9664-2300					
<b>ADDITIONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)</b>		<b>RENTAL CHARGES</b>			
Name:					TOTAL S\$
NRIC/Passport No:					
Driving Licence No: Exp:					
Address:					
Tel:					
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		<b>Hour @</b> per hour <b>2 Days @ \$120</b> per days <b>\$240/-</b> <b>Weeks @</b> per week <b>Months @</b> per month			
		Additional Payable: -			
		SUBTOTAL Payable: \$240/-			
		<b>DEPOSIT AMOUNT PAID</b>		<b>DEPOSIT AMOUNT REFUNDED / Date</b>	
		<b>Mode of Payment</b>			
<b>Physical Damage Excess</b>		<b>Acknowledgement</b>		<b>ADDITIONAL REMARKS</b>	
Singapore - Own Damage	\$2,500			<b>HIRER'S DECLARATION:</b> 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.	
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 )				
<b>IMPORTANT NOTE :</b>					
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					
		 <b>HIRER Signature / Date</b>			
		 <b>Authorized Signatory On Behalf of Team AutoCare Pte Ltd</b>			



> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 05 Mar 2022 / 14:14:36

Receipt Date/Time : 05 Mar 2022 / 14:14:36

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-220305-001312

Previous Receipt No. :

**S/N Item Description/  
Business Transaction Reference  
No.**  
Result of Insurance Enquiry - SLP4495C  
As at 04 Mar 2022/12:45:00  
Insurance Co: AXA INSURANCE PTE LTD  
1 Insurance Enquiry - SLP4495C  
Enquiry Fee  
20220305141351096849

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
-------------------------------	------------------------	------------------------------

<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		
462845XXXXXX8465	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.: SNB8629H  
and SLP4495C and .....  
and ..... and .....  
@ Haig Road & Block 9 Haig Road T-Junction  
dated 04/03/2022

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	05/03/2022 12:52 (SGT)
Date of Accident	04/03/2022 12:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	HAIG ROAD & BLOCK 9 ROAD T JUNCTION
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB8629H
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TEO KHENG KIM DEBRA
NRIC No	SXXXX634G
Email Address	debteo@yahoo.com.sg
Mobile Phone No	(Phone) +65-96642300
Alternative Phone No	(Home) +65-96642300

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Yaris
Variant	CROSS
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	1000

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00190362100
Cover Note Number	DMPCSNW00190362100

#### DRIVER

Name of Driver	TEO KHENG KIM DEBRA
NRIC No	SXXXX634G



Date Of Birth	19/07/1958
Occupation	Indoor
Date Of Driving Pass	02/12/1977
Driving experience	44 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96642300
Alt. Phone Number	(Home) +65-96642300
Email Address	debteo@yahoo.com.sg
Address	34 TANAH MERAH KECHIL ROAD SINGAPORE 465560
Address complement	-
Postcode	465560
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 - Major/Minor Rd
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### 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 ACCIDENT SKETCH PLAN AND STATEMENT

#### 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	SLP4495C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ABDUL HAKIM BIN ZAIDI
Contact Number	(Phone) +65-90256532
Address	-
Address complement	-

Postcode		-
Insurance Company Name		-
Nature Of Damage		-
Details of property damaged in accident		-
No. Of Passenger (Including Driver)		-



中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

N SN

AN0420A

Cov. Type C

# 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)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00190362100

Engine No. M15AY186832

Chs. No. MXPB102010973

1. Index Mark and Registration  
Number of Vehicle

SNB8620H

AUTOSAFE

\*\*\*\*\*

2. Name of Policy Holder

TEO KHENG KIM DEBRA

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

17/09/2021  
(00.00.00)

Named Drivers Ex Sect. 1

\$5500.00

Additional Ex Other than Named Drivers:

Ex Sect. 1 - Age < 25

\$53,000.00

Ex Sect. 1 - Age >= 26

\$5500.00

\* Age as at date of accident

EX. ON WINDSCREEN

\$5100.00

4. Date of Expiry of Insurance

16/09/2022

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 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\*

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

The policy does not cover use for hire or reward tuition driving test 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 the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first \$5500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

\* Limitations rendered inoperative by Section 6 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: INXPRESS INSURANCE AGENCY PTE LTD

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

*杨亚美*

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033


www.sg.cntaiping.com

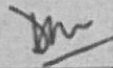
Describe Circumstances of the Accident

on the stated date and time, i vehicle 'A' was travelling  
 along my designated lane along Hwy Road. As i was travelling  
 along, i suddenly noticed vehicle 'B' turning cut into Hwy road.  
 There was barely enough reaction time and as such vehicle 'B'  
 collided into right portion of my vehicle. I got ^ to noticed  
 while 'B' has collided into me. That is all. After the  
 accident, i had difficulty open the front right door.

Declaration

We declare the foregoing particulars are true in every respect.

  
 Policyholder's Signature / Date &  
 Time

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

Witnessed by Reporting Centre  
 Personnel



# SKETCH PLAN

## IMPORTANT NOTICE

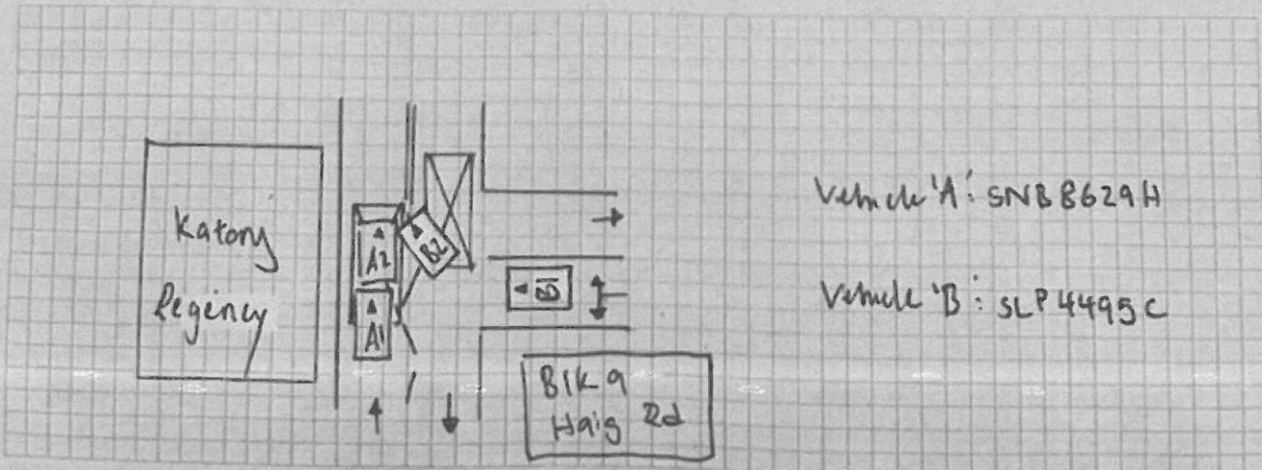
1. Please report correctly the details of the accident to speed up the claims process.
  2. This Form must be completed by the Policyholder and/or the Authorised Driver.
  3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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' 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, 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' 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 Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## Sketch Plan



Motor Private Car

MX1F

N SN

AN0420A

Cov. Type: C

**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)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00190362100

Engine No.: M15AY186832

Cha. No.: MXPB102010973

1. Index Mark and Registration  
Number of Vehicle

SNB8629H

AUTOSAFE

=====

2. Name of Policy Holder

TEO KHENG KIM DEBRA

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment17/09/2021  
(00:00:00)

Named Drivers Ex Sect. I

S\$500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age &lt;= 25

S\$3,000.00

Ex Sect. I - Age &gt;= 26

S\$500.00

\* Age as at date of accident

EX ON WINDSCREEN

S\$100.00

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 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:

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

The policy does not cover use for hire or reward tuition driving test 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 the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

\* 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: INXPRESS INSURANCE AGENCY PTE LTD  
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorised Signatory

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1310634G


 Name  
TEO KHENG KIM DEBRA

Race  
CHINESE

Date of birth  
19-07-1958

Sex  
F

Country/Place of birth  
SINGAPORE

 S1310634G

REPUBLIC OF SINGAPORE DRIVING LICENCE

 Licence Number S1310634G

Name  
TEO KHENG KIM DEBRA

Birth Date 19 Jul 1958

Issue Date 30 Oct 2003

1000962163E

6060428



NRIC No. S1310634G

 Date of issue  
07-11-2018

Address  
34 TANAH MERAH KECHIL ROAD  
#05-30  
SINGAPORE 465560

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  
02 Dec 1977

NP 428A

Licence No: S1310634G