

NATIONWIDE Assessment Centre Services

SN0822350002

Date: 28/03/2012 12:53	Description: SASE filing	Completed: ()
Ref: N/A/AH 22002809/4	E-mail (with star) ()	
Veh No: SDV 65224	i-Motor Claim Form	
Date: 25/03/2012 08:29	i-Motor W/O (with star) ()	
TP () Reporting On:	i-Photo Uploaded	
TP Insurer:	Assessment/Survey Report	
	Ass't Report by Fax / Hand to Owner/Wksp	

Preferred Wksp / INC Assign Wksp / QW: ()	Tel: ()	Fax: ()
TP Particulars:	Veh No: SMP515JR	INC () / Non-INC ()
Owner / Driver ()	Tel: ()	
Policy No ()	Period ()	Cover Type ()
Confirmed by: ()	Date: ()	Time: ()
Insured/Driver Liability ()	[Note-Est. Status (WO): N: 0-20%, P: 21-79%, F: 80-100%]	
Year of Registration: ()	Warranty YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer or repairer

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co ()

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

Injury: _____

Date/Time	Actions

N/A2200803	Invoice Preparation Checklist		And (\$)	And (\$)
			1st Bill	2nd Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30)			
Driver/Owner:	2) DA: Damage Assessment (\$100), INC (\$80)			
Contact No:	3) TF: Towing Fee \$40 \$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) RT: Follow-Through Survey (Resurvey) \$10			
Auditors' Comments :-	For claiming against INC Only (wef 19 Jan 2011)			
Cat 1:	6) TR: Re-inspection \$15			
Cat 2 & 3:	7) N1: Inc DA + SMRT Survey \$160			
	8) NTUC Additional Services:			
	9) N12: Max Mobile			
	10) N13: Max Mobile			
	11) N14: Max Mobile			
	12) N15: Max Mobile			
	13) N16: Max Mobile			
	14) N17: Max Mobile			
	15) N18: Max Mobile			
	16) N19: Max Mobile			
	17) N20: Max Mobile			
	18) N21: Max Mobile			
	19) N22: Max Mobile			
	20) N23: Max Mobile			
	21) N24: Max Mobile			
	22) N25: Max Mobile			
	23) N26: Max Mobile			
	24) N27: Max Mobile			
	25) N28: Max Mobile			
	26) N29: Max Mobile			
	27) N30: Max Mobile			
	28) N31: Max Mobile			
	29) N32: Max Mobile			
	30) N33: Max Mobile			
	31) N34: Max Mobile			
	32) N35: Max Mobile			
	33) N36: Max Mobile			
	34) N37: Max Mobile			
	35) N38: Max Mobile			
	36) N39: Max Mobile			
	37) N40: Max Mobile			
	38) N41: Max Mobile			
	39) N42: Max Mobile			
	40) N43: Max Mobile			
	41) N44: Max Mobile			
	42) N45: Max Mobile			
	43) N46: Max Mobile			
	44) N47: Max Mobile			
	45) N48: Max Mobile			
	46) N49: Max Mobile			
	47) N50: Max Mobile			
	48) N51: Max Mobile			
	49) N52: Max Mobile			
	50) N53: Max Mobile			
	51) N54: Max Mobile			
	52) N55: Max Mobile			
	53) N56: Max Mobile			
	54) N57: Max Mobile			
	55) N58: Max Mobile			
	56) N59: Max Mobile			
	57) N60: Max Mobile			
	58) N61: Max Mobile			
	59) N62: Max Mobile			
	60) N63: Max Mobile			
	61) N64: Max Mobile			
	62) N65: Max Mobile			
	63) N66: Max Mobile			
	64) N67: Max Mobile			
	65) N68: Max Mobile			
	66) N69: Max Mobile			
	67) N70: Max Mobile			
	68) N71: Max Mobile			
	69) N72: Max Mobile			
	70) N73: Max Mobile			
	71) N74: Max Mobile			
	72) N75: Max Mobile			
	73) N76: Max Mobile			
	74) N77: Max Mobile			
	75) N78: Max Mobile			
	76) N79: Max Mobile			
	77) N80: Max Mobile			
	78) N81: Max Mobile			
	79) N82: Max Mobile			
	80) N83: Max Mobile			
	81) N84: Max Mobile			
	82) N85: Max Mobile			
	83) N86: Max Mobile			
	84) N87: Max Mobile			
	85) N88: Max Mobile			
	86) N89: Max Mobile			
	87) N90: Max Mobile			
	88) N91: Max Mobile			
	89) N92: Max Mobile			
	90) N93: Max Mobile			
	91) N94: Max Mobile			
	92) N95: Max Mobile			
	93) N96: Max Mobile			
	94) N97: Max Mobile			
	95) N98: Max Mobile			
	96) N99: Max Mobile			
	97) N100: Max Mobile			
	98) N101: Max Mobile			
	99) N102: Max Mobile			
	100) N103: Max Mobile			
	101) N104: Max Mobile			
	102) N105: Max Mobile			
	103) N106: Max Mobile			
	104) N107: Max Mobile			
	105) N108: Max Mobile			
	106) N109: Max Mobile			
	107) N110: Max Mobile			
	108) N111: Max Mobile			
	109) N112: Max Mobile			
	110) N113: Max Mobile			
	111) N114: Max Mobile			
	112) N115: Max Mobile			
	113) N116: Max Mobile			
	114) N117: Max Mobile			
	115) N118: Max Mobile			
	116) N119: Max Mobile			
	117) N120: Max Mobile			
	118) N121: Max Mobile			
	119) N122: Max Mobile			
	120) N123: Max Mobile			
	121) N124: Max Mobile			
	122) N125: Max Mobile			
	123) N126: Max Mobile			
	124) N127: Max Mobile			
	125) N128: Max Mobile			
	126) N129: Max Mobile			
	127) N130: Max Mobile			
	128) N131: Max Mobile			
	129) N132: Max Mobile			
	130) N133: Max Mobile			
	131) N134: Max Mobile			
	132) N135: Max Mobile			
	133) N136: Max Mobile			
	134) N137: Max Mobile			
	135) N138: Max Mobile			
	136) N139: Max Mobile			
	137) N140: Max Mobile			
	138) N141: Max Mobile			
	139) N142: Max Mobile			
	140) N143: Max Mobile			
	141) N144: Max Mobile			
	142) N145: Max Mobile			
	143) N146: Max Mobile			
	144) N147: Max Mobile			
	145) N148: Max Mobile			
	146) N149: Max Mobile			
	147) N150: Max Mobile			
	148) N151: Max Mobile			
	149) N152: Max Mobile			
	150) N153: Max Mobile			
	151) N154: Max Mobile			
	152) N155: Max Mobile			
	153) N156: Max Mobile			
	154) N157: Max Mobile			
	155) N158: Max Mobile			
	156) N159: Max Mobile			
	157) N160: Max Mobile			
	158) N161: Max Mobile			
	159) N162: Max Mobile			
	160) N163: Max Mobile			
	161) N164: Max Mobile			
	162) N165: Max Mobile			
	163) N166: Max Mobile			
	164) N167: Max Mobile			
	165) N168: Max Mobile			
	166) N169: Max Mobile			
	167) N170: Max Mobile			
	168) N171: Max Mobile			
	169) N172: Max Mobile			
	170) N173: Max Mobile			
	171) N174: Max Mobile			
	172) N175: Max Mobile			
	173) N176: Max Mobile			
	174) N177: Max Mobile			
	175) N178: Max Mobile			
	176) N179: Max Mobile			
	177) N180: Max Mobile			
	178) N181: Max Mobile			
	179) N182: Max Mobile			
	180) N183: Max Mobile			
	181) N184: Max Mobile			
	182) N185: Max Mobile			
	183) N186: Max Mobile			
	184) N187: Max Mobile			
	185) N188: Max Mobile			
	186) N189: Max Mobile			
	187) N190: Max Mobile			
	188) N191: Max Mobile			
	189) N192: Max Mobile			
	190) N193: Max Mobile			
	191) N194: Max Mobile			
	192) N195: Max Mobile			
	193) N196: Max Mobile			
	194) N197: Max Mobile			
	195) N198: Max Mobile			
	196) N199: Max Mobile			
	197) N200: Max Mobile			
	198) N201: Max Mobile			
	199) N202: Max Mobile			
	200) N203: Max Mobile			
	201) N204: Max Mobile			
	202) N205: Max Mobile			
	203) N206: Max Mobile			
	204) N207: Max Mobile			
	205) N208: Max Mobile			
	206) N209: Max Mobile			
	207) N210: Max Mobile			
	208) N211: Max Mobile			
	209) N212: Max Mobile			
	210) N213: Max Mobile			
	211) N214: Max Mobile			
	212) N215: Max Mobile			
	213) N216: Max Mobile			
	214) N217: Max Mobile			
	215) N218: Max Mobile			
	216) N219: Max Mobile			
	217) N220: Max Mobile			
	218) N221: Max Mobile			
	219) N222: Max Mobile			
	220) N223: Max Mobile			
	221) N224: Max Mobile			
	222) N225: Max Mobile			
	223) N226: Max Mobile			
	224) N227: Max Mobile			
	225) N228: Max Mobile			
	226) N229: Max Mobile			
	227) N230: Max Mobile			
	228) N231: Max Mobile			
	229) N232: Max Mobile			
	230) N233: Max Mobile			
	231) N234: Max Mobile			
	232) N235: Max Mobile			
	233) N236: Max Mobile			
	234) N237: Max Mobile			
	235) N238: Max Mobile			
	236) N239: Max Mobile			
	237) N240: Max Mobile			
	238) N241: Max Mobile			
	239) N242: Max Mobile			
	240) N243: Max Mobile			
	241) N244: Max Mobile			
	242) N245: Max Mobile			
	243) N246: Max Mobile			
	244) N247: Max Mobile			
	245) N248: Max Mobile			
	246) N249: Max Mobile			
	247) N250: Max Mobile			
	248) N251: Max Mobile			
	249) N252: Max Mobile			
	250) N253: Max Mobile			</

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	28/03/2022 12:53 (SGT)
Date of Accident	25/03/2022 08:29 (SGT)
Exact Location of Accident	ECP, Singapore
Additional Location Information	TOWARDS CTE AFTER MARINE PARADE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDV6522H
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM SIN BIN
NRIC No	SXXXX068G
Email Address	citizenpwer555@gmail.com
Mobile Phone No	(Phone) +65-97801638
Alternative Phone No	+65-97801638

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	CX8
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2488

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2070150881-01
Cover Note Number	-

DRIVER

Name of Driver	LIM SIN BIN
NRIC No	SXXXX068G

Date Of Birth	07/03/1961
Occupation	Indoor
Date Of Driving Pass	03/11/1963
Driving experience	58 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97801638
Alt. Phone Number	+65-97801638
Email Address	citizenpwer555@gmail.com
Address	BLK 268A BUKIT BATOK STREET 25
Address complement	-
Postcode	650288
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	6
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	LIM JUN YAN
Gender	Male

PASSENGER 2

Name	LIM SHI TIAH
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

PLEASE REFER TO SKETCH PLAN

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	SMP5155R
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLJ5179R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SHA2037G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SGT889P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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) -

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SMZ3845T
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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) -

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

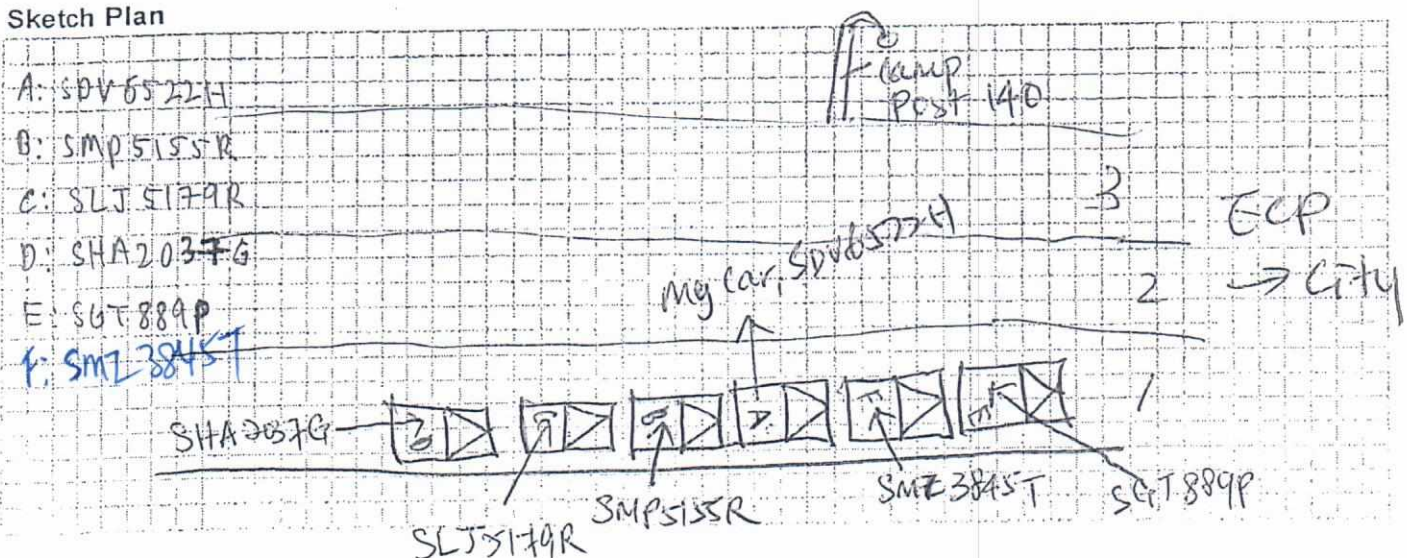
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 25/3/2022 at about 0829 hrs, while travelling on ECP toward the direction of city, one white car SMZ3845T stopped suddenly. I braked my car on seeing the stopped car and the car behind me SMR5122R hit ~~me~~ from behind and pushed my car moved forward further.

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

VEHICLE NO: SDV 6522 H

MAKE & MODEL: MAZDA CX 8

AUTO / MANUAL

DATE OF ACCIDENT	25 / 03 / 2022	*C.C.
TIME OF ACCIDENT	0829 AM / PM	
LOCATION OF ACCIDENT	BCP TOWARDS CITY AFTER MARINE PARADE EXH	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	LIM SIN BIN	
EMAIL: CITIZENPOWER555 @ Gmail.com	Office: /	MOBILE: 97801638
NRIC	S1476068 G	
CLAIM TYPE	OD / <u>THIRD PARTY</u> / REPORTING ONLY	
FLEET POLICY:	YES / NO ?	
INSURANCE CO.	AIG	
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	2070150881-01	
NAME OF DRIVER	<u>AS ABOVE</u> / IF NO:	
NRIC		
DATE OF BIRTH	07 / 05 / 1961	
ANY PASSENGER	<u>YES</u> / NO :	
NAME OF PASSENGER	1) Lim Jun Yan (m) 2) Lim Shi Tiah (F)	
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	Outdoor / <u>Indoor</u>	
DATE OF DRIVING PASS	01 / 08 / 2003	
GENDER	<u>Male</u> / female	
CONTACT NO.	Mobile: /	Office: / Home: /
EMAIL:	/	
ADDRESS	APT BLK 288A BUKIT BATOK STREET 25 # 11-230	
DOES DRIVER OWN OTHER VEHICLES?	<u>NO</u> / If yes: Reg No.	INSURER
RELATIONSHIP	Employee / <u>If No: Self</u>	
WEATHER CONDITION	<u>Clear</u> / Raining / Other:	
ROAD SURFACE	<u>Dry</u> / Wet / Other:	
ANY INJURIES	<u>No</u> / If yes: Who?	
CONTACT NO.		
POLICE REPORT	<u>No</u> / If yes: Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES: WHO?	
VEHICLE B NO.	SMP 5155 R	Any Passenger:
NAME		
CONTACT NO.		
VEHICLE C NO.	SLT 5179 R	Any Passenger:
VEHICLE D NO.	SHA 2037 G	Any Passenger:
VEHICLE E NO.	SGT 889 P	Any Passenger:
VEHICLE F NO.	SMZ 3845 T	Any Passenger:
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / <u>NO</u>	
WAS THERE ANY AUDIO RECORDED?	YES / <u>NO</u>	
SCENE ACCIDENT PHOTOS TAKEN?	YES / <u>NO</u>	
**WORKSHOP:		
Have you been approach by unknown person soliciting (s) /		



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lim Sin Bin
Period of Insurance : 27 Oct 2021 To 26 Oct 2022
Engine No. : PY31180411
Chassis No. : JM6KG2WLA00100068

Vehicle No. : SDV6522H
Policy No. : 2070150881-01
Endorsement No. :
Issued Date : 03 Sep 2021

ABOUT THE COVER

Make/Model : MAZDA CX8 (Elegance/ Luxury)
Engine Capacity/Tonnage : 2,488.00 CC Sum Insured : Market Value First Year of Registration : 2020
Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person 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.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "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 experience.

Age Condition : All Age Condition

Mileage Condition : Unlimited Mileage

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or 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.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$750 Theft - \$0 Flood Cover - \$750

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Lim Sin Bin - \$750 (Own Damage), \$750 (Flood Cover)

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

1. Trans Eurokars Pte Ltd Add: 27A Tanjong Penjuru, Singapore 609042 63310608

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503599190

ARF (AP) PTE LTD - MAZDA

7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX
SINGAPORE 069111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPCUE