

KIEN CHEONG AUTOMOTIVE

BLK 9 SIN MING INDUSTRIAL ESTATE

#01-26 SINGAPORE 575644

TEL : 8125 9406 Fax : 6455 0902

Date : 20/6/2022

AXA Insurance Pte Ltd

9, North Buona Vista Drive

#18-01/06 Tower 1 The Metropolis

Singapore 138528

Attn: Motor Claims Dept.

Dear Sir/Mdm,

ACCIDENT INVOLVING VEHICLE NO. GBE 3099X AND SLN 2182D
ALONG Ang Mo Kio Ave 1 ON 25/4/2022

We understand that you are the insurer of SLN 2182D vehicle.

We wish to inform you that vehicle no. GBE 3099X have been completed repairs to the owner of car no. GBE 3099X satisfaction by M/s **KIEN CHEONG AUTOMOTIVE**.

We therefore propose to claim from you as follows:-

1. Cost of Repair	: S\$	<u>1,450.00</u>
2. Loss of Use/Rental(S\$ <u>80</u> X <u>6</u> days)	: S\$	<u>480.00</u>
3. LTA Search Fee/GIA Reports	: S\$	<u>31.00</u>
4. Others	: S\$	<u>-</u>
TOTAL	: S\$	<u>1,961.00</u>

Please let us have your reply soonest possible.

Thank you.

Yours faithfully,

KIEN CHEONG AUTOMOTIVE



PAYMENT AUTHORISATION LETTER

Your Ref. No. : SLN2182D

Date : 9/6/2022

To : AXA Insurance Pk Hl
9, North Buona Vista #18-01/06
Tower 1 The Metropolis, Singapore 138586
Attn: Motor Claims Dept.

Dear Sir /Madam,

RE : ACCIDENT ON 25/4/2022 BETWEEN VEHICLE NO. GBE3099X
AND YOUR INSURED VEHICLE NO. : SLN 2182D

I/We refer to the above matter, and wish to notify your good selves that I have take possession of the said vehicle, and I am completely satisfied with the repairs undertaken by the repairer of **M/S KIEN CHEONG AUTOMOTIVE**.

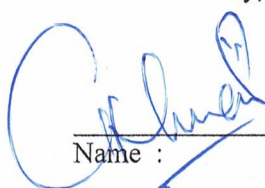
I/We have further authorized **M/S KIEN CHEONG AUTOMOTIVE** to sign discharge voucher on my/our behalf.

Kindly accept the signed discharge voucher and disperse all payment accordingly.

Your cooperation on the above mater is much appreciated.

Thank you.

Yours faithfully,



Name :



NRIC No. :

KIEN CHEONG AUTOMOTIVE

BLK 9 SIN MING INDUSTRIAL ESTATE SECTOR C

#01-26 SINGAPORE 575644

TEL : 8125 9406 FAX : 6455 0902

INVOICE

AXA Insurance Pte Ltd

9 North Buona Vista Drive, #18-01/06,
Tower 1 The Metropolis, Singapore 138588

Attn : Motor Claims Dept

INVOICE NO. :

KCA1266/05/22

DATE :

06/06/2022

VEHICLE NO. :

GBE 3099X

MODEL/MAKE:

Nissan NV200

DATE OF ACCIDENT :

25/04/2022

TERM OF PAYMENT :

CASH

ITEM	DESCRIPTION	QTY	AMOUNT
1	Being lump sum repair to accident vehicle GBE 3099X	L/S	\$ 1,450.00
TOTAL AMOUNT			\$ 1,450.00

E. & O.E.

(SINGAPORE DOLLARS : ONE THOUSAND FOUR HUNDRED AND FIFTY ONLY.)



KIEN CHEONG AUTOMOTIVE

Blk 9 Sin Ming Industrial Estate Sect C #01-26 Singapore 575644

Tel : 6453 2052 Fax : 6455 0902

UEN : 53317106K

VEHICLE RENTAL AGREEMENT

Date : 11-05-2022 Agreement No. : **10067**
Hirer : AGILITY TRADING & TRANSPORT
Address : BLK 1007, ELMOR AVENUE 7 #01-31 S 409578
NRIC/Co. Reg. No. : 53160922K Tel: _____ HP: 84484599

Owner and Hirer have agreed to enter into this Vehicle Rental Agreement for the motor vehicle described below and upon the terms and conditions. Hirer acknowledges having read and understood all the terms and conditions and signifies acceptance upon signing.

Vehicle Reg. No.: SMZ 6148C
IU No : _____

Driver's Particulars

Name : CHUN TECK CHUAN
Address : BLK 416 ANG MO KIO AVE 10 #06-959
S 56041611
I/C No : S 12837081
D.O.B: 23-03-1958
Dr/Licence No.: S 12837081
Date of Issue : 12 Sept 1978
Occupation: _____

Date / Time Out:	<u>11-05-2022 9am</u>
Date / Time In:	<u>17-05-2022 11am</u>
Hour @\$	
<u>6</u> Days @\$	<u>8.80</u>
Wks @\$	
Mths @\$	
Sub-Total:	<u>8.480 -00</u>
Deposit:	<u>-</u>
Balance to Pay:	<u>8.480 -00</u>
(Payment will be on _____ of every month)	
Petrol :	E 1/4 1/2 3/4 F

Third Party Claim

In respect of each third party insurance claim arising from the date of hire to date of return of the vehicle (both dates inclusive). Hirer unconditionally agrees to pay owner **S\$ 1500 (excluding 7% GST)** comprising excess payable and compensation to owner for impact of claim on future motor insurance premiums.

Own Vehicle Damage

Hirer is responsible for the first **S\$ 2000** excess for collision/damage of first party, (i.e.) **KIEN CHEONG AUTOMOTIVE** (including windscreen) plus loss of earnings while damaged vehicle is under repair.

Authorised Driver

Hirer shall pay additional excess of **S\$3500** if the Authorised Driver is below the age of 25 or is above 65 years old or has less than 2 years driving experience.

Driver Not Cover By Insurance

General Exception: Insurance policy does not cover against any driver aged below 22 and/or above 70 years old and/or with driving experience of 1 year and below, and break insurance policy term and condition

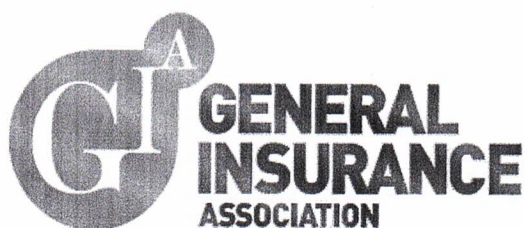
Late Payment of Rental

Owner have right to charge 1% late payment against the Hirer after 7 days of the payment due date. Owner will engage towing company to tow back the above mentioned vehicle, if no payment made from the hirer after 14 days of the payment due date.

KIEN CHEONG AUTOMOTIVE

Authorised Signature _____

Hirer's Signature / Company Chop(if any) _____



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Date of Request: 29/04/2022

Your Ref No: 220267-KLY

Dear Sir/Madam,

Date of Accident: 25/04/2022 00:00 (SGT)

Vehicle No: GBE3099X

Place of Accident: Near Golden Hill Est, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLN2182D	Near Golden Hill Est, Singapore	(31.00)	1	(28.97)
GST Amount				(2.03)
Total Amount Due (GST Inclusive)				(31.00)

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.

BIZ CHECK

COMPANY NAME: AGILITY TRADING & TRANSPORT SERVICES
REGISTRATION NO.: 53160922K

SINGAPORE
COMMERCIAL
CREDIT BUREAU

REQUEST DATE	REQUEST NO.	CLIENT'S A/C REF.	REMARKS
12/05/2022 10:02:14	ONL220294818		

**ACCOUNTING AND CORPORATE REGULATORY
AUTHORITY BUSINESS PROFILE INFORMATION**



REGISTRY

REGISTRATION DATE	03/02/2010
COMMENCEMENT DATE	15/02/2010
NAME EFFECTIVE DATE	03/02/2010
COMPANY TYPE / CONSTITUTION	SOLE PROPRIETOR
REGISTERED ADDRESS	415 ANG MO KIO AVENUE 10, 08 - 959 TECK GHEE HEARTLANDS 560415 SINGAPORE
CHANGE ADDRESS DATE	16/09/2020
COMPANY STATUS	LIVE
STATUS EFFECTIVE DATE	09/01/2018
REGISTERED ACTIVITIES	1. 52292 - FREIGHT TRANSPORT ARRANGEMENT (DELIVERY SERVICES) 2. 46900 - WHOLESALE TRADE OF A VARIETY OF GOODS WITHOUT A DOMINANT PRODUCT (GENERAL TRADING)
EXPIRY DATE	03/02/2024
RENEWAL DATE	09/01/2018

The information from ACRA is updated 1 day from the date of request.

GST

GST REGISTRATION NUMBER	N/A
GST REGISTERED FROM	N/A
GST REGISTERED TO	N/A
GST STATUS	N/A

(GST information is as per SCCB's database. Whilst every effort has been made to ensure that the information is complete & up-to-date. SCCB shall not be liable of any damage loss that may be caused as a result of any error, omission or reliance on the information.)

CHANGE OF BUSINESS NAME

PREVIOUS NAME	EFFECTIVE DATE
Nil	

The information from ACRA is updated 1 day from the date of request.

OFFICER(S)/ OWNER(S)

OFFICER NAME/ ADDRESS/ CHANGE ADDRESS DATE	IDENTITY NO. / PA REG. NO.	POSITION	APPOINTMENT DATE / DISQUALIFIED DATE	CESSATION DATE	NATIONALITY/ COUNTRY OF INCORPORATION
CHUN TECK CHUAN	S1283708I	OWNER	03/02/2010	-	

415 ANG MO KIO AVENUE 10 , 08 - 959 - 560415, SINGAPORE -			-		SINGAPORE CITIZEN
---	--	--	---	--	----------------------

The information from ACRA is updated 1 day from the date of request.

* Disqualified from acting as a director. However, he/she has obtained the Leave of the Court/Approval from the Official Assignee to act as a director.

SEARCH BY FINANCIAL SECTORS

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2022	0	0	0	0	0	0	0	0	0	0	0	0
2021	0	0	0	0	0	0	0	0	0	0	0	0
2020	0	0	0	0	0	0	0	0	0	0	0	0

The number of times the above subject has been searched using SCCB.

SEARCH BY NON-FINANCIAL SECTORS

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2022	0	0	0	0	0	0	0	0	0	0	0	0
2021	0	0	0	0	0	0	0	0	0	0	0	0
2020	0	0	0	0	0	0	0	0	0	0	0	0

The number of times the above subject has been searched using SCCB.

DISCLAIMER THIS REPORT MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM OR MANNER WHATSOEVER.

This report is forwarded to the Subscriber in strict confidence for use by the Subscriber as one factor in connection with credit and other business decisions. The report contains information compiled from sources which Singapore Commercial Credit Bureau Pte. Ltd. does not control and which has not been verified. Singapore Commercial Credit Bureau Pte. Ltd. therefore cannot accept responsibility for the accuracy, completeness or timeliness of the contents of the report. Singapore Commercial Credit Bureau Pte. Ltd. disclaims all liability for any loss or damage arising out of or in anyway related to the contents of this report.

[Financial Online](#)

ADD TO CART

[Historical Comprehensive
Reports\(Singapore\)](#)

ADD TO CART

[Litigation Search \(Corporate\)](#)

ADD TO CART

[Payment Assessment Report](#)

ADD TO CART

MY CART

Review cart details and checkout.

REPORT	CLIENT REFERENCE	PRICE(SGD)
1. - AGILITY TRADING & TRANSPORT SERVICES 53160922K		
Biz Check		3.80
Grand Total		3.80

DELETE

CHECKOUT

REPORT SEARCH

- Commercial Search
- Litigation Search
- Individual Search
- Property Search
- International Search

ABOUT US

- About Us
(<https://sccb.com.sg/about/>)

Corporate Profile
(<http://www.dnb.com.sg/company-profile.html>)

Investor Relations
(<https://creditbureauasia.com/investor-information/>)
- SALES

PHONE +65 6439 6608

EMAIL felicia.kow@sccb.com.sg (<mailto:felicia.kow@sccb.com.sg>)

CUSTOMER SERVICE

PHONE +65 6565 6262

EMAIL csc@sccb.com.sg (<mailto:csc@sccb.com.sg>)

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	25/04/2022 16:44 (SGT)
Date of Accident	25/04/2022 07:38 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ANG MO KIO AVE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE3099X
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AGILITY TRADING & TRANSPORT SERVICES
Company Reg No	5XXXX922K
Email Address	ARTHURCHUNTC@GMAIL.COM
Mobile Phone No	(Phone) +65-84484599
Alternative Phone No	+65-84484599

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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	Commercial vehicle
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5103766860-03
Cover Note Number	-

DRIVER

Name of Driver	CHUN TECK CHUAN
NRIC No	SXXXX708I

Date Of Birth	23/03/1958
Occupation	Outdoor
Date Of Driving Pass	12/09/1976
Driving experience	45 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-510376686003
Alt. Phone Number	-
Email Address	ARTHURCHUNTC@GMAIL.COM
Address	BLK415 ANG MO KIO AVE 10, #08-959
Address complement	-
Postcode	560415
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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	Side Swipe
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 SKETCH PLAN

ATTACHMENT(S)

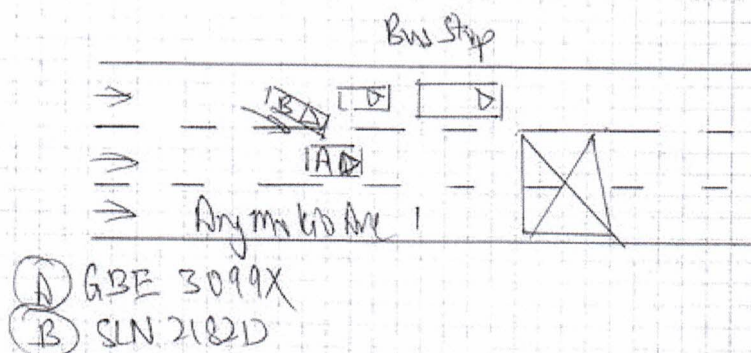
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLN2182D
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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Any mtr to Ave 1. Suddenly, vehicle (B) cut into my lane and hit into my left portion.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

[Signature]
Policyholder's Signature
Date & Time: 25/4



[Signature]
Driver's Signature
(If driver is not the policyholder)
Date & Time: 25/4/22

CITY AUTO PTE LTD

Blk 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapore 575643
Tel: 6453 1235 Fax: 6453 7944
(Claims Section)

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

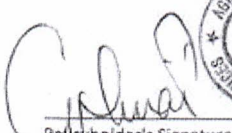
SKETCH PLAN**IMPORTANT NOTICE**

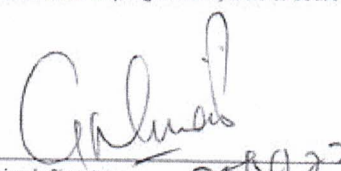
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


 Policyholder's Signature
 Date & Time:


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

CITY AUTO PTE LTD
 Blk 8 Sin Ming Road
 #01-58/60/62 Sin Ming Ind Est
 Singapore 575643
 Tel: 6453 1235 Fax: 6453 7944
 (Claims Section)
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

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 : 5103766860-03

Cover : Comprehensive

- | | |
|--|--|
| 1. Index mark and Registration Number of Vehicle | : GBE3099X |
| Chassis Number | : VM20082812 |
| 2. Name of Policyholder | : AGILITY TRADING & TRANSPORT SERVICES |
| 3. Effective Date of Insurance | : 29 Oct 2021 |
| 4. Expiry Date of Insurance | : 28 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 business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: N/A
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 : KHC HOLDINGS PTE LTD (00000613934)


Date of Issue : 08 Sep 2021 13:44 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S12837081



Name
CHUN TECK CHUAN

曾德全

Race
CHINESE

Date of Birth Sex
23-03-1958 M

Country of Birth
SINGAPORE

S12837081

078987



NRIC No. **S12837081**



Blood Group Date of Issue
A+ 23-02-1993

APT BLK 415 ANG MO KIO AVE 10 #08-959
SINGAPORE 660415
NRIC No: S12837081 Date: 07-10-1998 No: 2693149


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S12837081**

Name:
CHUN TECK CHUAN

Birth Date: **23 Mar 1958**

Issue Date: **28 Feb 2004**



001140829A

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	23 Mar 1979
Class 2A	Motorcycles between 201 cc and 400 cc	23 Mar 1979
Class 2	Motorcycles exceeding 400 cc	23 Mar 1979
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	12 Sep 1978
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	26 May 1982

NP 428A

Licence No: S12837081

