



JL PERFECT AUTOWORK PTE LTD

Co. & GST Reg. No.: 202136905K

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

Tel: +65 6341 6789 | Fax: +65 6341 6778

Email: jlperfectautowork@gmail.com

Our Ref.: EM822S

Your Ref.: SKZ2233P

Date: 18.11.2022

ATTN: Motor Claims Department

INS : AIG ASIA PACIFIC INSURANCE PTE LTD

Dear Sir/Madam,

Accident Involving: EM822S & SKZ2233P

Date of Accident: 18.08.2022 @ 13:35 HOURS

Location: T-JUNCTION OF HOLLAND ROAD AND NORTH BUONA VISTA ROAD

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 5,900.00</u>
Loss of Rental:	
(7 Days x \$120.00):	<u>\$ 840.00</u>
LTA Search	<u>\$ 7.45</u>
GIA 3rd Party Report	<u>\$ 31.00</u>
Grand Total:	<u>\$ 6,778.45</u>

The above-mentioned settlement is in respect for our client of damage pertaining to his/her motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his/her personal injuries.

For any further queries, please kindly contact Irene @ 8297 9787, or email to jlperfectautowork@gmail.com

Thank You,

Irene



Authorisation To Act

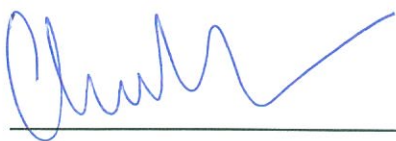
I, Chew Kon (Zhou Gan) ("the third party claimant") of
23 West Coast Rise #02-03 Singapore 127466
(address), owner of EM822S (vehicle no.)
hereby authorise JL Perfect Autowork Pte Ltd ("the workshop")
to act for me with respect to my claim for repair costs and / or rental and / or
loss of use ("claim") for my vehicle no. EM822S that was
damaged pursuant to the accident which occurred on 18/08/2022 (date)
at/along T-Junction of Holland Road and North Buona Vista Road
(location) involving vehicle no/s SKZ 2233P ("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a manner that
they deem it fit and the workshop is further authorised to receive payment further to settlement
of my claim with payment cheque/s being made in favour of the workshop.

I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without
prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by
me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident
concerned.

Dated this 18 day of 08 (month) 20 22 (year)



Signed by "the third party claimant"



Signed by "the workshop"



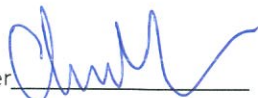
Letter of Authorisation & Indemnity

Accident involving motor vehicles no. EM822S and SKZ2233P on 18/08/2022
at/along T-Junction of Holland Road and North Buona Vista Road

- I/We, the Owner of motor vehicle no. EM822S hereby instruct and authorise JL Perfect Autowork Pte Ltd ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$_____ being refundable deposit of the repair to my/our said vehicle.
- You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
- You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
- My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
- Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
- I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
- I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
- In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
- In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
- I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 18 day of 08 20 22

Signature of vehicle owner





Name : Chew Kon (Zhou Gan)

IC/UEN No : S7316137A

(Company stamp, if applicable)

Address : 23 West Coast Rise #02-03

Singapore 127466

Tel : 9820 2622



Witnessed by :

IRENE



"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

AUTHORIZATION TO ACT
(AIG Asia Pacific - Express Third Party Claim)

I, Chew Kon (Zhou Gan) ("the third party claimant")

of 23 West Coast Rise #02-03 Singapore 127466 (address),

owner of EM822S (vehicle no.) hereby authorize

JL Perfect Autowork Pte Ltd

("the workshop") to act for me with respect to my claim for

repair costs and/or rental and/or loss of use ("claim") for my

vehicle no. EM822S that was damaged pursuant to the

accident which occurred on 18/08/2022 (date) along T-Junction

of Holland Road and North Buona Vista Road (location)


involving vehicle no/s SKZ2233P


("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 18 day of 08 (month) 20 22 (year)


Signed by "the third party claimant"


Signed by "the workshop" (with chop)



TAX INVOICE

JL PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136905K

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: jlperfectautowork@gmail.com



Date	Invoice Number	Vehicle Number
18.11.2022	JLP202211-00180	EM822S

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-12 AIG BUILDING

SINGAPORE 079120

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 5,900.00
Total	\$ 5,900.00

Cross cheques and pay: JL PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

JL PERFECT AUTOWORK PTE LTD

AUTO Generated - Signature Not Required

CARS FOR RENT (2016) PTE LTD

Mailing Address:

10 Kaki Bukit Ave 4 #09-60 Premier@Kaki Bukit, Singapore 415874

Tel Nos.: +65 6970 9119 / 6789 5155

Co. Reg'n No.: 201609732N

GST Reg'n No.: 201609732N

Tax Invoice #: E2208279

Date: 31-08-22

Bill To:

JL Perfect Autowork Pte Ltd
For the account of:
Chew Kon (Zhou Gan)
S7316137A
23 West Coast Rise
#02-03

Ship To:

1

JL Perfect Autowork Pte Ltd
For the account of:
Chew Kon (Zhou Gan)
S7316137A
23 West Coast Rise
#02-03

Description	Amount	Job No.
Vehicle Rental for Period 18.08.2022 to 25.08.2022 (Billing for days 7 X \$120.00/per day) (Vehicle No.: EM822S)	\$840.00	SMM2103B SR

Your Order #: 20574

		Terms: Net 30th after	GST:	\$54.95
COMMENT	CODE	RATE	GST SALE AMOUNT	Total Inv Amt: \$840.00
	SR	7%	\$54.95 \$785.05	Amount Applied: \$0.00
Balance Due:				\$840.00



CARS FOR RENT (2016) PTE LTD

10 Kaki Bukit Ave 4 #09-60 Premier @ Kaki Bukit Singapore 415874

Tel: 6970 9119 Fax: 6970 9961

Website: www.carsforrent2016.com

No: 20574

ROC/GST No: 201609732N

VEHICLE RENTAL AGREEMENT

(5L Partent)

HIRER'S PARTICULAR

Name: (as in I/C) Chew Kon (Zhou Gan)

Email: _____

NRIC/PASSPORT No: S7316137A

Date of Birth: 9/5/1973

Address (Res): 23 West Coast Rise
#02-03 S(17466)

Driving Licence No: S731 D/L Type: Local / International

Issue Date: _____

Tel: (O) _____ HP _____

Company Name: _____

Company UEN: _____

Company Address: _____

ADDITIONAL DRIVER'S PARTICULARS

Name: (as in I/C) Adeline Tai Wei Lin (Adeline Dai Wei Lin)

NRIC/PASSPORT No: S7314659C

Date of Birth: 23/4/1973

Address (Res): 365 Holland Road
#10-04 S(278639)

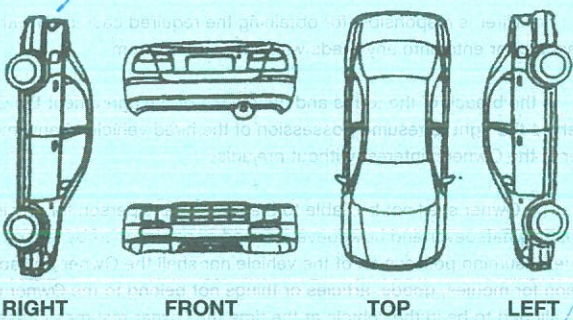
Driving Licence No: S7314659C D/L Type: Local / International

Issue Date: _____

Tel: (O) _____ HP _____

VEHICLE CHECK LIST

INDICATE:
D - DENTS
S - SCRATCHES
A - ACCIDENTS



Vehicle No: Smm2103B Replace Veh No: EM822S

Mileage out: 73150km

Make & Model: Honda Vezor Auto / Manual

OUT : Date 18 Aug 2022 Time: 7:30 pm

HIRE PERIOD

OWN DAMAGE CLAIM Excess S\$ 2000

THIRD PARTY CLAIM Excess S\$ 1500

CHARGES

Daily @ \$ 120.00 per day 840.00

Weekly @ \$ _____ per week

Monthly @ \$ _____ per month

Others @ \$ _____

Delivery Service _____

GST _____

SUB-TOTAL \$

PETROL LEVEL

Out	E	1/4	1/2	3/4	F
In	E	1/4	1/2	3/4	F

EXTENSION

Misc. _____

GST _____

TOTAL CHARGES 840.00

Rented out by: _____

Hirer's Signature _____

Addition Driver's Signature _____

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 amount 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 given CARS FOR RENT (2016) PTE LTD in connection with this agreement is true.

* IMPORTANT

- ONLY PERSON ABOVE 22 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN ABOVE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY AND BE RESPONSIBLE FOR THE INSURANCE EXCESS. IF THERE IS BODILY INJURIES, POLICE REPORT MUST BE MADE.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CARS FOR RENT (2016) PTE LTD

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVE" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CARDS FOR RENT (2016) 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.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER / DRIVE
<u>25/08/22</u>	<u>8:00pm</u>				<u>[Signature]</u> HIRER'S SIGNATURE

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 18 Aug 2022 / 19:33:19

Receipt Date/Time : 18 Aug 2022 / 19:33:19

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220818-003711

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 - SKZ2233P				
As at 18 Aug 2022/13:35:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SKZ2233P Enquiry Fee 20220818193232425442	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
421808XXXXXX9928		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.



RECORD MANAGEMENT CENTRE

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

9 Temasek Boulevard #42-01b, Singapore 038989

Email: gears-support@shift-technology.com

GST Reg No: M400017735

UEN: S66S0020G

TAX INVOICE

JL PERFECT AUTOWORK PTE LTD -
Chew Kon

Invoice Number
GR-2022-003181

Invoice Issue Date
25 Aug 2022

Invoice Due Date
01 Sep 2022

Total Amount (S\$) 28.97
Total GST 7.00% (S\$) 2.03
Total Amount Incl. of GST (S\$) 31.00

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	24/08/2022,18/08/2022,EM822S,SKZ2233P	28.97	2.03	31.00
		Total Amount (S\$)		28.97
		Total GST 7.00% (S\$)		2.03
		Total Amount Incl. of GST (S\$)		31.00

*This is a computer generated document.
No signature is required.*

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 Actual 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	19/08/2022 17:11 (SGT)
Reported by	Both
Date of Accident	18/08/2022 13:35 (SGT)
Exact Location of Accident	Holland Rd & North Buona Vista Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	EM822S
-----------------------------	--------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEW KON
NRIC No	SXXXX137A
Email Address	ADDIETAI@GMAIL.COM
Mobile Phone No	(Phone) +65-98202622
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Sylphy
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	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5126819186

DRIVER

Name of Driver	ADELINE TAI WEI LIN (ADELINE DAI WEILIN)
NRIC No	SXXXX659C
Date Of Birth	23/04/1973
Occupation	Indoor

Date Of Driving Pass	07/07/1992
Driving experience	30 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-98302622
Alt. Phone Number	-
Email Address	ADDIETAI@GMAIL.COM
Address	365 HOLLAND ROAD
Address complement	10-04
Postcode	278639
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Raining
Road Surface	Wet

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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	PHUA KOK HUA
Gender	Female

PASSENGER 2

Name	GILBERT TAI
Gender	Male

PASSENGER 3

Name	MARCUS TAI
Gender	Male

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 ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKZ2233P
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)	-

INJURED PERSONS DETAILS

RED 1

Name of injured person	ADELINE TAI WEI LIN (ADELINE DAI WEILIN)
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	EM822S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

- 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 Actual 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 Traffic Police Department for investigation.
- 6 This report will be forwarded by the insurers to 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.

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.

File number of the signature: Date & Year:


 J. Edgar Hoover, Director, Federal Bureau of Investigation, U.S. Dept. of Justice
 400 ...
 Washington, D.C.



Will report to Reporting Center for Future of America
 Phone: 1-800-441-1111

Sketch Page

[illegible]

Describe Circumstance of the Accident

Refer to Attached

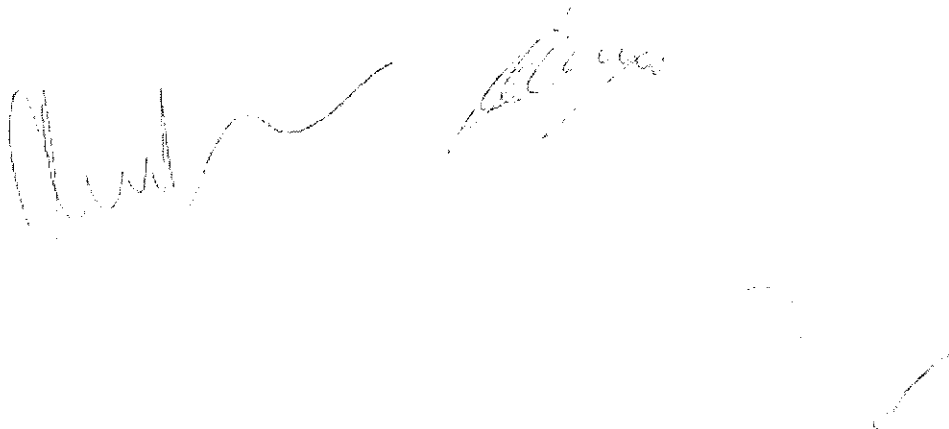
On 18.08.2022 at about 13:35 hours at T-Junction of Holland Road and North Buona Vista Road, I was travelling straight on lane 2 (along Holland Road towards Ulu Pandan Road) and when the traffic light turned amber from green, I slowed down and stopped my vehicle (A).

Suddenly, I heard a loud bang and felt a great impact from behind. When I alighted, I realised it was vehicle (B) that collided onto the rear portion of my vehicle (A).

I wish to state that I have 3 passengers in my vehicle (A).

Vehicle (A) : EM 822S

Vehicle (B) : SKZ 2233P

The block contains several handwritten signatures and marks. On the left, there is a large, stylized signature. To its right, there is another signature that appears to be 'Alvin'. Below these, there are several smaller, less distinct marks and signatures, including one that looks like 'S' and another that is a simple checkmark-like stroke.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7316137A



Name



CHEW KON
(ZHOU GAN)

周 幹

Race

CHINESE

Date of Birth

09-05-1973

Sex

M

Country of Birth

SINGAPORE

S7316137A

EM 822S

owner



3331055

NRIC No. S7316137A



Blood Group

Date of issue

12-05-2003

23 WEST COAST RISE #02-03
SINGAPORE 127486

NRIC No: S7316137A

Date: 18/01/2019

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7314659C



Name

ADELINE TAI WEI LIN
(ADELINE DAI WEILIN)

戴 玮 琳

Race

CHINESE

Date of birth

23-04-1973

Sex

F

Country/Place of birth

SINGAPORE



00314659C

Em8225

Driver

5263619



NRIC No. S7314659C



Date of issue

03-02-2014

Address

365 HOLLAND ROAD
#10-04
SINGAPORE 278639

EM822S

Driver

DRIVING LICENCE

REPUBLIC OF SINGAPORE



LICENCE NO.

S7314659C



CLASS AND ISSUE DATE

3 • 07 JUL 1992

CERTIFICATE OF MERIT

ELIGIBLE

DEMERIT POINTS

0

CARD SERIAL NO.

000460921A

^ Hide details





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: 5126819186

Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle : **EM8225**
 Chassis Number : **MNTBBAB17Z0031883**
2. Name of Policyholder : **CHEW KON**
3. Effective Date of Insurance : **27 Apr 2022**
4. Expiry Date of Insurance : **26 Apr 2023**
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.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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

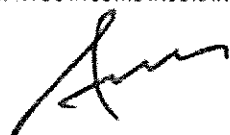
EXCESS (SECTION 1)	N/A
EXCESS (SECTION 2)	N/A
WINDSCREEN EXCESS	S\$100
ADDITIONAL EXCESS	N/A
UNNAMED DRIVER EXCESS	PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	YES
INSURE WITH COE	YES
NCD PROTECTION	YES
ROADSIDE ASSISTANCE AND WELLNESS COVER	YES
TRANSPORT ALLOWANCE	YES
EXCESS WAIVER	YES
PRIMARY DRIVER	CHEW KON
NAMED DRIVER (1)	TAI WEI UN
NAMED DRIVER (2)	CHEW SU KEE
HIRE PURCHASE COMPANY	UNITED OVERSEAS BANK LIMITED
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 : MATAHARI INSURANCE AGENCY & TRADING PTE LTD (00000614991)

Date of Issue : 18 Apr 2022 17:14 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive