



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.: SJN193J

Your Ref.: SMC4445D

Date: 02.12.2022

ATTN: Motor Claims Department

INS: **AIG ASIA PACIFIC INSURANCE PTE LTD**

Dear Sir/Madam,

Accident Involving: SJN193J & SMC4445D

Date of Accident: 04.09.2022 @ 09:00 HOURS

Location: BLK 903 TAMPINES AVE 4 CARPARK LOT 629

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair: \$ 6,150.00

Loss of Use:
(7 Days x \$180) \$ 1,260.00

LTA Search: \$ 7.45

3rd Party GIA Report: \$ 31.00

Towing Fee: \$ 60.00

Grand Total: \$ 7,508.45

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, Tan Eng Kiat ("the third party claimant") of
B1K 903 Tampines Ave 4 #07-298 S(520903)
(address), owner of SJN193J (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. SJN193J that was
damaged pursuant to the accident which occurred on 04/09/22 (date)
at/along B1K 903 Tampines Ave 4 Carport Lot 629
(location) involving vehicle no/s SMC44450 ("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 05 day of 09 (month) 20 22 (year)



Signed by "the third party claimant"

Signed by "the workshop"

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SJN193J and SMC4445D on 04/09/22
at/along Blk 903 Tampines Ave 4 Carpark Lot 629

1. I/We, the Owner of motor vehicle no. SJN193J 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.
2. 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.
3. 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.
4. 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.
5. 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.
6. 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.
7. 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.
8. 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.
9. 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.
10. 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 05 day of 09 20 22

Signature of vehicle owner

Name: Tan Eng Kiat

IC/UEN No: 51582390I

(Company stamp, if applicable)

Address: Blk 903 Tampines Ave 4
#07-298 S(520903)

Tel: 96395040

Witnessed by:

Frank



"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, Tan Eng Kiat ("the third party claimant")
of Blk 903 Tampines Ave 4 #07-298 S(520903) (address),
owner of SJN193J (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. SJN193J that was damaged pursuant to the
accident which occurred on 04/09/22 (date) along Blk 903
Tampines Ave 4 Carpark Lot 629 (location)
involving vehicle no/s SMC4445D
("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 05 day of 09 (month) 20 22 (year)

[Signature]
Signed by "the third party claimant"

[Signature]
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
02.12.2022	JLP202212-00200	SJN193J

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	\$ 6,150.00
Total	\$ 6,150.00

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

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 05 Sep 2022 / 10:41:17

Receipt Date/Time : 05 Sep 2022 / 10:41:17

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220905-000927

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SMC4445D

As at 04 Sep 2022/09:00:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1	Insurance Enquiry - SMC4445D Enquiry Fee 20220905104035305954	7.00	0.49	7.49
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Sub-Total	7.00	0.49	7.49
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Total Before Rounding	7.00	0.49	7.49
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Rounding Difference			0.04
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Total Amount Payable			7.45
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Paid By

421808XXXXXX9928	eNETS Credit Card	7.45
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Total	7.45
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Cash Change	0.00
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Tendered Amount	7.45
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Excess Refundable Amount	0.00
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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: S66SS0020G

TAX INVOICE

JL PERFECT AUTOWORK PTE LTD -
Tan Eng Kiat

Invoice Number
GR-2022-003372

Invoice Issue Date
06 Sep 2022

Invoice Due Date
13 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	06/09/2022,04/09/2022,SIN193J,SMC4445D	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.*



AUTOW Recovery Services

8 Kaki Bukit Avenue 4, #08-41 Premier @ Kaki Bukit, Singapore 415875
ROC: 53347242C

Hotline: +65 9392 4545

Email: info.autow@gmail.com

CASH ORDER / WORK ORDER

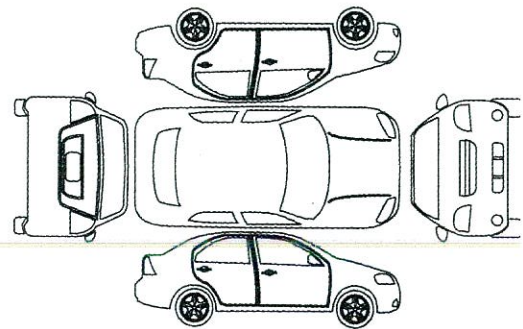
No. A 15021

Service Date: 05-09-2022 Time Received: 0900
Member Name: Cash Time Arrived: 0930
NRIC No.: _____ Time Completed: 1000
Contact No.: 96395040 From: 903 Tampines Ave H
Car Reg No.: SJN 193 J To: 08-09 Premier
Car Make/Model: Vios Tow Truck No.: YMB0794
Remarks: Accident Amount: 60/-
Cash / Credit

ADDITIONAL CHARGES:

- ☐ Dolly Wheels / Flat Bed
- ☐ Basement / Multi Storey
- ☐ Crane up / Bogged
- ☐ Causeway / Second Link
- ☐ Low Body Kit
- ☐ Collection of Key
- ☐ ERP / Carpark _____

BODY & PAINT CONDITION:



[Signature]
Tow Driver's Name & Signature

Member's Name & Signature

Note: Vehicle is towed at owner's risk. The company accepts no responsibility for damage or other misdemeanour to your vehicle / asset whilst being towed.



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	05/09/2022 17:31 (SGT)
Reported by	Both
Date of Accident	04/09/2022 09:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 903 TAMPINES AVE4 CARPARK LOT 629
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN193J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN ENG KIAT
NRIC No	S1582390I
Email Address	abc8627e@gmail.com
Mobile Phone No	(Phone) +65-96395040
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1598

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNW00001642201

DRIVER

Name of Driver	TAN ENG KIAT
NRIC No	S1582390I
Date Of Birth	17/05/1963
Occupation	Outdoor

Date Of Driving Pass	10/02/1984
Driving experience	38 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96395040
Alt. Phone Number	-
Email Address	abc8627e@gmail.com
Address	BLK 903 TAMPINES AVE 4
Address complement	#07-298
Postcode	520903
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Tampines Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005871999
Alt. Police Station Phone No	(Fax) +65-65871699
Police Station Address	6 Tampines Ave 4 Singapore 529682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20220904/2031

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMC4445D
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

TAMPINES AVE 4

Uth A: SJN193J

Uth B: SMC 4245 D

Describe Circumstances of the Accident

REPTA
TO Police
1/20/22 0904/2034

Declaration

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

Public adjuster's Signature, Date & Time

Driver's Signature (if driver is not the public adjuster) / Date & Time

Witnessed by Reporting Officer Personnel



**SINGAPORE
POLICE FORCE**



T/20220904/2034

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

1 of 3

Report No. T/20220904/2034

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/09/2022 13:13		Vide Report No.:		Station Diary No.: 49	
Informant's Particulars					
Name of Informant: TAN ENG KIAT			Address: APT BLK 903 TAMPINES AVENUE 4 #07-298 SINGAPORE 520903		
ID Type / ID No.: NRIC NO / S15823901			Contact No.: Home/Office: Mobile: 96395040		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 59	Date of Birth: 17/05/1963	Type of Informant: Vehicle Owner		
Race: Chinese			Language:		Institution / School Name:
Occupation: Arts and cultural centre manager			Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 04/09/2022 09:00	Type of Location: Car Park
Location: TAMPINES AVENUE 4				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJN193J	Car	TOYOTA	Corolla	Silver	Seriously Damaged	0
SMC4445D	Car	SUBARU	Forester	White	No Damage	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SMC4445D	AIG ASIA PACIFIC INSURANCE PTE. LTD.			



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999



T/20220904/2034

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Report No. T/20220904/2034

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	TAN ENG KIAT	ID No.	S1582390I
Related Vehicle	SJN193J (Car)	Contact No.	96395040
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 04/09/2022, at 0900hrs, I went to my vehicle, SJN193J parked at Blk 903 Tampines Ave 4, Open Carpark, Lot number 629, when I realised that my vehicle was heavily damaged. My front bumper was dislodged. My license plate came off, multiple scratches and dents could be spotted on the front of my vehicle. A note was left on my vehicle apologising regarding the damage. On the note, there was contact information of the driver and the driver is responsive. As such, I am lodging this report for insurance claims.

**SINGAPORE
POLICE FORCE**

T/20220904/2034

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

3 of 3

Report No. T/20220904/2034

CONTINUATION OF REPORT**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:
G/
SR STAFF SGT ZHANG LINHAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
04/09/2022 13:13

Officer In Charge Of Case
TP / GIA /
SR STAFF SGT MUHAMMAD NOOR BIN
ABDUL RAHMAN
Contact No.: 65476219

Classification Of Case:

NP168

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S15823901



Name

TAN ENG KIAT

陳英傑

Race

CHINESE

Date of birth

17-05-1963

Country/Place of birth

SINGAPORE

Sex

M

S15823901



SJN 193J

Owner & Driver

5961742



NRIC No. S15823901



Date of issue

20-06-2018

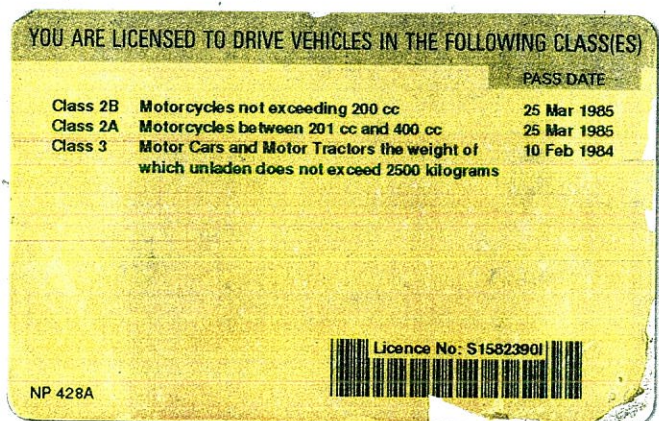
Address

APT BLK 903 TAMPINES AVENUE 4
#07-298
SINGAPORE 520903



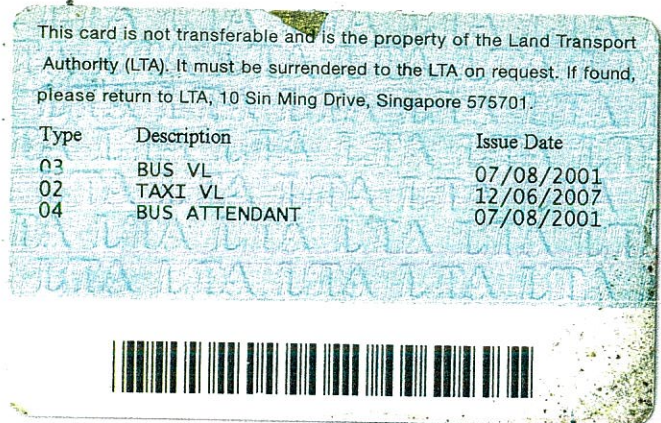
SJN193J

Owner & Driver





SJN 1935
owner & driver



Motor Hire Car

MZ406L/B

R SN

AN0580A

Cov. Type:C

CERTIFICATE OF INSURANCEMotor 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.

DMHCSNW00001642201

Engine No.: 3ZZ4836911

Cha. No.:MR053ZEE106130966

1. Index Mark and Registration
Number of Vehicle

SJN193J

AUTOSAFE

=====

2. Name of Policy Holder

TAN ENG KIAT

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment23/01/2022
(00:00:00)

Excess Sect. I .

S\$1,250.00

Excess Sect. I (Outside Singapore)

S\$2,500.00

Excess Sect. II

S\$1,250.00

4. Date of Expiry of Insurance

22/01/2023

Excess Sect.II (Outside Singapore).

S\$2,500.00

EX ON WINDSCREEN . S\$100.00

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

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.

TAN ENG KIAT

NG GEK BEE

6. Limitations as to use:*

(1) Use for the carriage of passengers or goods in connection with the Policyholder's business.

(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

(1) Use for racing, pace-making, reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : ABWIN PTE LTD

* 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

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

ODDS CAVIN
Authorised Officer

Authorised Signatory