

NATIONAL Assessment Centre Services

Date In: 25/11/2022	Job description	Date & Time Completed	Done by
Ref No: NA/TM122011850/a4	SAS e-filing		
Veh No: GBL 3663 E	E-mail (within 8hrs. A/C 2hrs)		
D.O.A: 24/11/2022 1130	i-Motor Claim Form		
OD <input checked="" type="checkbox"/> Reporting Only	i-Motor W/O (Within 10E 2hrs. TP 4hrs)		
	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: SNC 9542L	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 of 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

NA2203305	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) Add 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		
	5) FT : Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR : Re-inspection \$75		
	7) NI : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	OD:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments :-	TP (N11) : TP (Non INC) against INC \$20		
Cat 1:	9) N12: Idac Mobile 30		
Cat 2 / 3:	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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	25/11/2022 09:08 (SGT)
Reported by	Driver
Date of Accident	24/11/2022 11:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG PIE TOWARDS CHANGI BEFORE UPPER SERANGOON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBL3663E
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Society for the Prevention of Cruelty to Animals, Singapore
Company Reg No	SXXXXX060B
Email Address	yaohuang@spca.org.sg
Mobile Phone No	(Phone) +65-96639041
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Urvan
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	22-MQ002536-R01

DRIVER

Name of Driver	NUR FAEZA BINTE AGUS
NRIC No	SXXXX822C
Date Of Birth	28/03/1995

Occupation	Indoor
Date Of Driving Pass	13/02/2014
Driving experience	8 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-93841894
Alt. Phone Number	-
Email Address	fxckeza@hotmail.com
Address	BLK 202 CHOA CHU KANG AVENUE 1 #06-75
Address complement	-
Postcode	680202
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	Yes
Number of vehicles involved in the accident	4
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)	1
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	JUX995
Vehicle Category	Commercial vehicle

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Marine Parade Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004428999
Alt. Police Station Phone No	(Fax) +65-62447678
Police Station Address	300 Marine Parade Road Singapore 449296
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED REPORT

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	VIDEO WITH WORKSHOP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNC9542L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHONG ZENG RONG , SAMUEL
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	SLP3929A
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)	2

PASSENGER 1

Name	PASSENGER
Gender	Female

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	JUX995
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

INJURED 1

Name of injured person	NUR FAEZA BINTE AGUS
Gender	-

Phone No	(Phone) +65-93841894
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBL3663E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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
(Name as in NRIC/ID card)

Sketch Plan

Vehicle A: GBL 3663 E
Vehicle B: SNC 9542 L
Vehicle C: SLP 3929 A
Vehicle D: JUX 995

PIE towards Changi
before Upper Serangoon Rd

Describe Circumstance of the Accident

Ac of above date and time, I was driving my vehicle (GBL 3663E) along PIE towards Changi before Upper Serangoon Rd on the extreme left lane of a 3 lane Rd. The vehicle ahead of my vehicle braked and I followed accordingly, out of a sudden, vehicle B (SNC 9542L) collided into the rear portion of my vehicle. I alighted and discovered I was involved in a 4 car chain collision.

Video footage Attached

Declaration

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



50 Sungei Tengah Road
Singapore 699012
Tel: 6287 5355
www.sPCA.org.sg

FRIENDS FOR LIFE

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



**SINGAPORE
POLICE FORCE**



T/20221124/2181

1 of 4

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

Report No. T/20221124/2181

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/11/2022 16:05		Vide Report No.: E/20221124/0078		Station Diary No.: 38	
Informant's Particulars					
Name of Informant: NUR FAEZA BINTE AGUS			Address: APT BLK 202 CHOA CHU KANG AVENUE 1 #06-75 SINGAPORE 680202		
ID Type / ID No.: NRIC NO / S9509822C			Contact No.: Home/Office: Mobile: 93841894		
Nationality: SINGAPORE CITIZEN			Email: fxckeza@hotmail.com		
Sex: Female	Age: 27	Date of Birth: 28/03/1995	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: ANIMAL RESCUER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 24/11/2022 11:40	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBL3663E	Van				Slightly Damaged	0
JUX995	Lorry				Slightly Damaged	0
SLP3929A	Car				Seriously Damaged	1
SNC9542L	Car				Slightly Damaged	0
T/JA360	Trailer				No Damage	0



**SINGAPORE
POLICE FORCE**



T/20221124/2181

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

2 of 4

Report No. T/20221124/2181

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NUR FAEZA BINTE AGUS	ID No.	S9509822C
Related Vehicle	GBL3663E (Van)	Contact No.	93841894
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Amran Bin Samsuri	ID No.	NIL
Related Vehicle	JUX995 (Lorry)	Contact No.	+6016-7051556
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Unknown Driver	ID No.	NIL
Related Vehicle	SLP3929A (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight



**SINGAPORE
POLICE FORCE**



T/20221124/2181

3 of 4

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

Report No. T/20221124/2181

CONTINUATION OF REPORT

Driver			
Name	Chong Zeng Rong, Samuel		ID No. NIL
Related Vehicle	SNC9542L (Car)		Contact No. 83233983
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above-mentioned date and time, I was driving my vehicle GBL3663E along PIE towards Changi. While somewhere near Saint Andrew's JC, I was driving at the left most lane, the traffic ahead got slightly congested, so I slowed down. Then I felt impact from the rear of my vehicle. So, I got off from my vehicle and made a check, I realized it was a chain collision involving 4 vehicles.

My van's rear hatch and bumper were dented in, the car behind me SNL9542L's front bumper was slightly dented and its rear bumper slightly dented. The third vehicle SLP3929A was sandwiched between SNC9542L and a big lorry JUX995, the driver was trapped, and we managed to force the passenger door open for the driver to get out. The car's front and rear were dented in. The last vehicle in line was the lorry JUX995, it had a large trailer T/JA360 as well. The front area had some dents and scratches.

The driver of SLP3929A claimed he had some pains and he had called for an ambulance, none of us had visible injuries. I exchanged particulars with some of the drivers and left the area as my vehicle was able to drive off.



**SINGAPORE
POLICE FORCE**



T/20221124/2181

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

4 of 4

Report No. T/20221124/2181

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 /
SGT 3 LIEW JIA MING

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
24/11/2022 16:05

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

Classification Of Case:

NP168

VEHICLE NO: <u>GBL 3663 E</u>	MAKE & MODEL: <u>Nissan Urvan</u>	<u>AUTO</u> / MANUAL
DATE OF ACCIDENT: <u>24 / 11 / 2022</u>	CC: <u>1.6</u>	
TIME OF ACCIDENT: <u>1130</u> HRS		
LOCATION OF ACCIDENT: <u>Along PIE towards Changi before Upper Serangoon Rd</u>		
EXACT PURPOSE USE DURING ACCIDENT: <u>EMPLOYMENT / PRIVATE USE / PRIVATE HIRE</u>		
NAME OF OWNER: <u>Society for the prevention of cruelty to Animals Singapore</u>		
TEL NO: <u>H/P: 96639041</u>	OFFICE:	HOME:
NRIC: <u>S61SS0060B</u>		
ADDRESS: <u>50 Sungei Tengah Road S 699012</u>		
EMAIL: <u>YAOHVANG@SPCA.ORG.SG</u>		
CLAIM TYPE: <u>OD / THIRD PARTY / REPORTING ONLY</u>		
FLEET POLICY: <u>YES / NO?</u>		
INSURANCE COMPANY: <u>Tokio Marine</u>		
TYPE OF COVERAGE: <u>Comprehensive / Third Party / Third Party Fire & Theft</u>		
POLICY NO: <u>22-MQ002536-R01</u>		
NAME OF DRIVER: <u>AS ABOVE / IF NO: Nur Faeza Binte Agus</u>		
NRIC: <u>S9509822C</u>	ANY PASSENGER: <u>NIA</u>	
DATE OF BIRTH: <u>28 / 03 / 1995</u>	LICENCE PASSED DATE: <u>13 / 02 / 2014</u>	
OCCUPATION: <u>OUTDOOR / INDOOR</u>		
GENDER: <u>MALE / FEMALE</u>		
CONTACT NO: <u>H/P: 9384 1894</u>	OFFICE:	HOME:
ADDRESS: <u>Apt BIK 202 Choa Chu Kang Avenue 1 #06-75 S680202</u>		
EMAIL: <u>FxcKeza@hotmail.com</u>		
DOES DRIVER OWNED ANY VEHICLE: <u>NO</u> IF YES, REG NO:	INSURER:	
RELATIONSHIP: <u>Employee</u>		
WEATHER CONDITION: <u>CLEAR</u> / RAINING / OTHERS:		
ROAD SURFACE: <u>DRY</u> / WET / OTHER:		
ANY INJURIES: <u>NO</u> / IF YES, WHO?		
NAME & CONTACT: <u>Nur Faeza Binte Agus (9384 1894)</u>		
NAME & CONTACT:		
POLICE REPORT: <u>NO</u> / IF YES, WHERE?		
NOTICE OF INTENDED PROSECUTION GIVEN? <u>NO</u> / IF YES, WHO?		
VEHICLE B REG NO: <u>SNC 9542 L</u>	ANY PASSENGERS: <u>NIA</u>	
NAME OF DRIVER: <u>Chong Zeng Rong, Samuel</u>	CONTACT NO: <u>Un Known</u>	
VEHICLE C REG NO: <u>SLP 3929 A</u>	ANY PASSENGERS: <u>1 (1F)</u>	
VEHICLE D REG NO: <u>JUX 995</u>	ANY PASSENGERS: <u>NIA</u>	
VEHICLE E REG NO:	ANY PASSENGERS:	
VEHICLE F REG NO:	ANY PASSENGERS:	
VEHICLE G REG NO:	ANY PASSENGERS:	
ANY WITNESS? IF YES, NAME:	WITNESS CONTACT:	
WAS THERE ANY VIDEO CAPTURE? <u>YES</u> / NO		
WAS THERE ANY AUDIO RECORDED? <u>YES</u> / NO		
ACCIDENT SCENE PHOTOS TAKEN? <u>YES</u> / NO		
ACCIDENT PORTION: <u>Rear Portion</u>		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance? <u>YES</u> / NO		
WORKSHOP PARTICULAR: <u>N-51 Automotive Pte Ltd</u>		
CONTACT NO: <u>68420051 / 67440510</u>		
CONTACT PERSON: <u>Steve</u>		
FAX NO: <u>67410510</u>		
WORKSHOP EMAIL: <u>sales@n51.com.sg</u>		



Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: 22-MQ002536-R01 (Comm Vehicle Carry Own Goods)

1. **Index Mark and Registration Number of Vehicle** GBL3663E **Chassis No.:** JN1MA2E26Z0000055
2. **Name of Policyholder** SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS, SINGAPORE
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 09/06/2022
4. **Date of Expiry of Insurance** 08/06/2023
5. **Persons or Class of Persons entitled to drive***
Any person who is driving on the policyholder's order or with their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. **Limitations as to use***

- 1) Use in connection with the policyholder's business.
 - 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.
 - 3) Use for social domestic and pleasure purposes.
- The policy does not cover:-
- 1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
 - 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION**Account:** 0128DDB

Insurance Plan:	Comprehensive Approved Workshop Plan	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Own Damage Claims	SGD 600
	Windscreen Excess	SGD 100

Tokio Marine Insurance Singapore Ltd.

Authorised Signature