	Services will		A #1" - /1-	a fatasi i	Done by	
Date In: 30/11/22	Job description		Onte &Time Com	nielou i	Tychic cy	
REINO NBM/C7722011995/13	SAS e-illing	1		<u>i'</u>		,
VeliNo. SKZ8648L	E-mail (within Shre, A	atC 2hts)	. 1 3		_ · _L	
D.O.A. 30/11/22 0750	1-Motor Claim Fo	rin	5 7 7			
	FMotor W/O (wh	his: QD 1519, 7	7 (1:22)			
OD (TP) Reporting Only	i-Photo Uploaded			- !	and a second of the second of	MANUAL REPORTS
* *** ********************************	Assessment/Survey	Report			whitemer explore from to rail 1	
TP (neutet)	Ass't Report by Fa	x / Rand to	Owner/Wissa		The second of the second of the second of	
referred Wksp / INC Assign Wksp / QW: (Tel:	Fa	х:	1
The state of the s	SMN86414	, INC()/ Non-INC () ',		
Owner / Driver: (Tel:)	Palament and American
Policy Not () Per	ried: (Cover Type: (<u> </u>	According to the second
Confirmed by ! "(ale:	Timer	p. 20.11	10101	
Name of the Party	Note-Est Status (WO)		11 11 24 1 2 7 10	, , , , , , ,		CALLED FROM STATE
The second secon	Warranty: YES ()	1	*			
A STATE OF THE STA	00()/\$2,000(, 1682-11913	San Salah San	0.635	120 B	
eneral Remarks-2 (Salt. 1995) allere		Alg. Walare 11				
) Walk-In Gustomar : Customers info		grana a au	217 110 12101	or one or partners		
Total Luss Case : to e-mail Insur	er URGENTLY.		wing Co: ()
Drive-In ()/ Towed-In (); Invoice	e: YES() / NO	() ; ()	William Co. C			· · · · · · · · · · · · · · · · · · ·
NAME OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY.						TOTAL CONTRACTOR OF THE PARTY O
Places of the second se			Dricksty Co.	hple'edi-	Done!	y
Cemarks (A. A. (186 Locklines, 6788(6616))				plated	Sept. Done	y
temarks: (*) (ING horling: 6788:6616) (*) (*) Apply for Transport Allowance (**) / (*)				o plate of the	Done	y
Remarks: (ING horling: 6788-6616) Apply for Transport Allowance () / 6 OC Check / Post Repair Inspection	Courtasy Car ()			apleted in	Done	
Remarks: (ING horling: 6788-6616) Apply for Transport Allowance () / 6 OC Check / Post Repair Inspection	Courtasy Car ()			0 10 100 11	Donel) y
Cemarks (** AUNG Ediline: 6788-6616) * (*) Apply to: Transport Allowance (**) / (**) (*) QC Check / Post Repair Inspection (*) Upload Resurvey Photo [Repair Cost > \$* Injury : **	Courtasy Car () () 3000] ()		Os.&Tino On		Done	Y
(emarks: % A (ING horline: 6788:6616)) Apply for Transport Allowance () / 6 CO Check / Post Repair Inspection Diplosd Resurvey Photo [Repair Cost > \$ Injury :	Courtasy Car ()		Os.&Tino On	aglo: va ii	Done	Y
Remarks: (ING hotline: 6788:6616) 1) Apply for Transport Allowance () / 6 2) CC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$ Injury :	Courtasy Car () () 3000] ()		Os.&Tino On		Done	y y
Remarks: (ING horline: 6788:6616) 1) Apply for Transport Allowance ()/6 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo (Repair Cost > \$ Injury: Onto Tunal Actions (2007)	Courtasy Car () () 3000] ()		Os.&Tino On		Done!	y y
Templister 2 (ING horling: 6788:6616) Apply for Transport Allowance ()/ () QC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > \$ Injury :	Courtasy Car () () 3000] ()		Os.&Tino On		Done	
Templister 2 (ING horling: 6788:6616) Apply for Transport Allowance ()/ () QC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > \$ Injury :	Courtasy Car () () 3000] ()		Os.&Tino On		Jan Donel	
Apply to: Transport Allowance () / (c) CC Check / Post Repair Inspection Di Upload Resurvey Photo (Repair Cost > S Injury : Onto Tuna Actions (S) 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Courtasy Car () () 3000] ()					NARO
Apply for Transport Allowance ()/ (2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo (Repair Cost > S Injury :	Courtesy Car () () 3000] ()	nvoice Pro	paration Clear			NARO
Cemarics P. (ING horling: 6788-6616) Apply for Transport Allowance ()/6 CC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > \$ Injury: Actions Actions MADDO333 \((Courtasy Car ()	AN Accident DA : Dorne /	paration Check (National Check	inc (150)	NARO
Cemarics P. (ING horling: 6788:6616) Apply for Transport Allowance ()/6 CC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > \$ Injury: Actions	Courtasy Car ()	nveice Pro AR: Acciden DA: Demay TF: Towing	paration Check Personal (30) Againment (310)	INC (13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NAME
Remarks A ING horline: 6788(6616) Apply for Transport Allowance ()/6 CC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > \$ Injury : Onto Tuna Actions () Injury : Injury: I	Courtasy Car ()	NVOICE Pro AR: Acciden DA: Demay TF: Towing FF: Fellow-	paration Circles (300): Assistment (300): Fig. (5100): Fi	inc (150 150 150 150 150 150 150 150	NAMO
Cemarks: A (ING holling: 6788:6616) Apply for Transport Allowance ()/6 CC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > S Injury: Actions Action	Courtesy Car () () 3000] ()	NVOICE Pro AR: Acciden DA: Demag TF: Towing FF: Fellow Control TR: Recommendation	DESCRIPTION OF STATE	INC (150) 150) 150) 150) 150)	NAMO
Cemarks: A (ING holling: 6788:6616) Apply for Transport Allowance ()/6 CC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > S Injury : Actions of the contract of the cost > S Injury : Actions of the cost > S Injury : Action of the cost >	Courtasy Car () () 3000] ()	AND ITE Pro AR: Acciden DA: Domag) TF: Towing I) FT: Fellow For alternate O) TR: Recomp	DESCRIPTION CONTROL OF THE PROPERTY (30): Approving (30): Approving (30): Fastings Servey Through Survey (Research and 180 Only 180	INC (150 150 150 150 255 255 255	NAMO
Remarks (NG boiline: 6788:6616) Apply to: Transport Allowance ()/6 CC Check / Post Repair Inspection Diplosed Resurvey Photo (Repair Cost > S Injury : Actions Actions Ever/Owner: Sintact No.	Courtasy Car () () 3000] ()	AR: Acides) DA: Perior) Fr: Fellow Existing as () Tr: Resident () NTUC Alon OD:	Description Check Donation Check Donation (30) Approving (30) Approving (30) Fair Charles Survey (Baserian 180 Cm) Fair Survey (Baserian 180 Cm)	INC (150 250 250 250 250 250 250 250 250 250 2	NA-TO
Remarks A (ING horline: 6788:6616) Apply for Transport Allowance ()/6 CC Check / Post Repair Inspection Dipload Resurvey Photo (Repair Cost > S Injury: Onto Timal Actions Actions Expression of the post	Courtasy Car () () 3000] ()	Notice Pro AR: Acciden) DA: Demag) TF: Fellow-) FT: Fellow-) FT: Fellow- 1) NTUC Ald QU' 'NS: Conte	Description Constitution of the Constitution o	INC (150 200 200 200 200 200 200 200 200 200 2	NAMO
Cemaplism 2 (ING hotline: 6788:6616) (1) Apply to: Transport Allowance () / (2) CC Check / Post Repair Inspection (3) Upload Resurvey Photo (Repair Cost > \$ Injury : Onto Tunal Actions (injury: Actions (iver/Owner: ontact No: ontaged Portion: ***** Checked by (Engr-In-Charge):	Courtasy Car () () 3000] ()	AR: Accident Date of the Control of	DESCRIPTO CONTROL OF THE PROPERTY OF THE PROPE	1NC (13	NAMO
Remarks (NG hotline: 6788:6616) 1) Apply for Transport Allowance ()/6 2) CC Check / Post Repair Inspection 3) Upload Resurvey Photo (Repair Cost > \$ Injury / Part Tunal Actions () It imant's Ramiculius () It imant's Ramiculius () Inver/Owner: Intact No:	Courtasy Car () () 3000] ()	Natice Pro AR: Accident DA: Demage) TF: Tewing) FT: Fellow-) FT: Fellow-) TR: Re-ing 1) NTUC Alor QD: 'NE: Reper 'NE: Reper 'NE: For / 'NE: For /	DESCRIPTE COS DESCRIPTE COS DESCRIPTE CASE DESCRIPTE CASE DESCRIPTE CASE ASSESSMENT SURVEY Through Surve	1NC (13 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	WAR(X)
Remaplication (ING horline: 6788:6616) 1) Apply for Transport Allowance ()/6 2) QC Check/Post Repair Inspection 3) Upload Resurvey Photo (Repair Cost > \$ Injury / Actions Actions iver/Owner: antact No: amaged Portion: C. Checked by (Engr-In-Charge):	Courtasy Car () () 3000] ()	AR: Accident Date of the Control of	DESCRIPTE COS DESCRIPTE COS DESCRIPTE CASE DESCRIPTE CASE DESCRIPTE CASE ASSESSMENT SURVEY Through Surve	1NC (130 310 310 310 310 310 310 310 310 310	WARREN TANK

,

SN0922BU0004 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 30/11/2022 16:21 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (30/11/2022 16:21 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

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 30/11/2022 16:21 (SGT) Reported by Driver Date of Accident 30/11/2022 07:50 (SGT) Exact Location of Accident Singapore Additional Location Information CTE TWDS CITY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKZ8648L

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner 1AXIS PRESTIGE LEASING PTE LTD Company Reg No 2XXXXX962N **Email Address** dericktay@gmail.com Mobile Phone No (Phone) +65-98760361 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Shuttle 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? Vehicle Category

Transmission CC

No - Claiming third party Private hire

Auto 1496

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd. DMHCSNA00017352200

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

TAY TOK TONG SXXXX592A 10/09/1979 Outdoor

Date Of Driving Pass Driving experience	24/01/2017
Gender	5 YEARS AND 10 MONTHS
Mobile Number	Male
Alt. Phone Number	(Phone) +65-98760361
Email Address	-
	charlottevehicles@gmail.com
Address	BLK 334A ANCHORVALE CRES
Address complement	#13-116
Postcode	541334
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	
Does Driver Own Other Vehicles?	Hirer
Vehicle Registration Number of Other Vehicle Owned by Driver	No
verticle registration Number of Other Verticle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	
Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the anxidenta	
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)	2
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	
Original language used in the statement	•
PASSENGER 1	
Name	
Name Gender	PASSENGER
Gender	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Market Control of the
	Yes
	MacPherson Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18007449999
Alt. Police Station Phone No	(Fax) +65-65476366
Police Station Address	Blk 54 Pipit Road #01-82/84 Singapore 370054
Was notice of intended Prosecution given?	No
If yes, against whom?	=
CIRCUMSTANCES OF ACCIDENT	
PLS REFER TO THE POLICE REPORT:T/20221130/2046	
ATTACHMENT(S)	
¥	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
	U JOSES

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMN8641U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	= 4
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
NRIC No	TAN KHEE YONG
	SXXXX685A
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 Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance? INJURED 2	TAY TOK TONG Male NECK & SHOULDER SKZ8648L Yes No
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	PASSENGER Female SLIGHT SKZ8648L Yes No

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate</u> policy <u>liability</u>.
- 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.
- 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)

Lunderstand, 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

v.lun2022

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

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

30/11

Sketch Plan

Central Expressway towards City

A Sk286481

R SMN 864410

Please refer to Police Report / T/20221130/2046
)
/
·
<u> </u>

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

Policyholder & Grand

Actual Driver's Signature (if driver is not the policyholder)

/ Date & Time

Actual Driver's Signature (if driver is not the policyholder)

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





1 of 3

Report No. T/20221130/2046

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054 Tel No: 1800-7449999

PRIVATE HIRER

REPORT OF	F A TRAFFIC	ACCIDENT		Otation Diamy No.
Date/Time Report Made: 30/11/2022 13:03			Vide Report No.:	Station Diary No.: 22
	nt's Particu	lars		
	Informant:		Address: APT BLK 334A ANCHORVALI 541334	E CRES #13-116 SINGAPORE
ID Type / ID No.: NRIC NO / S7927592A		92A	Contact No.: Home/Office:	Mobile: 98760361
Nationali		26	Email:	
Sex: Male	Age:	Date of Birth: 10/09/1979	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: PRIVATE HIRER			Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 30/11/2022 07:5	Type of Location Straight Road
Location: CENTRAL EX	XPRESSWAY	Road Surface:		Road Speed Limit:
Sunny		Dry Traffic Control:		Traffic Volume:
Traffic Flow: One Way		Not Controlled		Light
	sion:			Anyone conveyed by ambulance:

CARRELL TO THE STATE OF THE STA		No of Passenge
DII	Cliabtly	1
Black	Slightly Damaged	1
White	Slightly	2
		Damaged

Details of Person Involved	
Any Pedestrian Involved: No	- NA
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3

Report No. T/20221130/2046

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

Tel No: 1800-7449999

CONTINUATION OF REPORT

Driver			NEW CO.	5		
Name	TAY TOK TONG		ID No		S7927592A	
Related Vehicle	SKZ8648L (Car)			Conta	ct No.	98760361
Hospital/Clinic	GSH CLINIC & SURGERY PTE. LTD.					Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	30/11/2022		Date Disc	harge	30/11	/2022
No. of Days gran	s granted Medical Leave 03 Degre			of Injury NIL		
Driver				Victoria i		
Name	TAN KHEE YONG			ID No	•	S0854685A
Related Vehicle	SMN8641U (Car)		Conta	ct No.	NIL	
Hospital/Clinic	NIL		Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ited Medical Leave	NIL	Degree of	Injury	NIL	

On 30/11/2022 at about 7.50pm, I was driving my car(SKZ8648L/Honda/Black) along CTE towards City. While travelling straight on the said expressway on the most right lane, before Boundary Road exit, the traffic ahead of me suddenly had slowed down and stopped. I then had slowed down and come to a stop. Suddenly, about 3 seconds later, I felt an impact collison on my car's rear. I then had alighted and managed to exchange particulars with the driver(SMN8641U), who collided onto my car's rear.

As there was no need for immediate medical attention, both the driver and myself had drove off after exchanging particulars and took photos of the accident.

After I had drove off, about 10 minutes later, I felt pain on my neck and shoulder. Subsequently, I went to GSH Clinic & Surgery to make a check on myself. I was discharge from the clinic with 3 days of medical leave.





T/20221130/2046

3 of 3

Report No. T/20221130/2046

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

Tel No: 1800-7449999

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.

CONTINUATION OF REPORT

Signature of Officer Recording G /	The Report:
SGT 3 MUHAMMAD ABDURRAHMAN MUBARAK B	BIN A
ASMAWI	7
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / AEIT /	

TP / AEIT / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219

NP168

Signature Of Informant:	4
Date/Time: 30/11/2022 13:03	
Classification Of Case:	

Som PU

ACCIDENT STATEMENT

ACCIDENT DATE (30 , 11 jana)	1 . Y
ACCIDENT DATE (30/11/2022) (DD/MM/YYY), TIME: (07.50) (HH:MM)	
LOCATION: Central Expressivay towards (its	
10 maris City	
1. DETAILS OF VEHICLE	
OJVEHICLE NUMBER: SKZ 8648L	10
PARTICIPALITY SET 8648 C	
DINSURANCE COMPANY: China Taiping	
d)POUCYTYPE (COMPRESSION IN THE STATE OF THE	
e) MAKE & MODEL: Honda Stutile	76
FITYPE: (SALOON / COURSE (MEN) AUTO / MANUAL	
FITYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)	*
B) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE. / OTHERS) h) PURPOSE OF USING AT ACCIDENT TIME	
MAKE YOU CLAIMING INDER VI	
IF NO. PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY) 2. INSURED / POLICY HOLDER	
2. INSURED / POLICY HOLDER	
A)NAME:	(9.2)
DINRIC/FIN/PASSPORT:(MALE / FEMALE)	
C)ADDRESS: CONTACT:	
	*
*CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER	
Who of persongs DRIVER DRIVER ALSO POLICY HOLDER	10.00
() "duding disign) a) NAME: lay lok Tom (2heno 2h godons)	
(2) : ASSPORT: STOLETS OF A	
CINCIDICESS. ICIK SEGA A. I TO TO OSGI	
1000	
e)OCCUPATION: (INDOOR (OUTPAGE)	
17 LANS OF DRIVING EXPRIENTING	
WAS LIKEVER AN EMPLOYEE OF THE VICTOR	
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HIVE	
6. WAS ANYBODY IN HUBER IN GOVERNMENT OF THERS	
7. alreported to police (YES / NO) Vriver and Vassenger.	E 3
We will be with the state of th	
To the of presenger O) VEHICLE NUMBER: SMN 8641 U MODEL:	
DRIVER'S NAME: Ian Khee YMO	
C) NRIC/FIN/PASSPORT: SURFULER A CONTINUE	,
7. MIKD PARTY VEHICLE	
Ho of presidings d) VEHICLE NUMBER:MODEL:	
Octudion ded on State State	
(CONTACT:	
CONTACT.	
	9
email = dericktayegmail.com i chariottevenida	
	W @ gmail -cor
lax =	J .
VIDEO = Yes :	





Motor Hire Car

MZ406L/B

N SN

AN0055A Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 16
Motor Vehicles (Third-Party Risks and Compensation) Rules. 1950
Road Transport Act. 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules. 1959 (Malaysia)

CERTIFICATE No.

DMHCSNA00017352200

Engine No.: L15B3530975 Cha. No.: GK81000799

Index Mark and Registration

SK786481

AUTOSAFE =======

Number of Vehicle

1AXIS PRESTIGE LEASING PTE LTD

Name of Policy Holder

19/09/2022

Excess Sect I.

S\$2.0

Effective date of the Commencement of Insurance for the purposes of the Regulations. Ordinance or Enactment

(00:00:00)

Excess Sect. I (Outside Singapore)

554.

S\$1,! Excess Sect. II

Date of Expiry of Insurance

18/09/2023

Excess Sect.II (Outside Singapore).

\$\$3,0 S\$10

EX ON WINDSCREEN .

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

(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.: SKYWAY CREDIT & LEASING PTE LTD

*Limitations rendered inoperative by Section B 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) P

issued By:

Tan Jia Hwei

Authorised Officer

Authorised Signatory

往七义

China Taining Insurance (Singapore) Pte 1td (Co Reg No 200208384F)

Please check that the owner and vehicle details are correct:

1.	Name	: 1AXIS PRESTIGE LEASING PTE. LTD.
2.	Identification No. Type	: Company
3.	Identification No.	: 202121962N
4.	Country/Region	: -
5.	Vehicle Registration No.	: SKZ8648L
6.	Previous Vehicle Registration No.	1-
7.	Effective Date of Ownership	: 20 Sep 2022
8.	Original Registration Date	: 05 Feb 2016
9.	First Registration Date	: 05 Feb 2016
10.	Vehicle Type	: Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	:-
14.	Attachment 3	:-
15.	Vehicle Make Description	: HONDA
16.	Vehicle Model	: SHUTTLE 1.5G CVT
17.	Year of Manufacture	: 2015
18.	Primary Colour	: Black
19.	Secondary Colour	:-
20.	Passenger Capacity	: 4
21.	Chassis/Trailer Chassis No.	: GK81000799 / -
22.	Propellant	: Petrol
23.	Engine No./Motor No.	: L15B3530975 / -
24.	Engine Capacity(cc)/Power Rating(kW)	: 1496 / -
25.	Maximum Power Output(kW/bhp)	: 97.0 / 130
26.	Unladen Weight(kg)	: 1130
27.	Maximum Laden Weight(kg)	: 1405
28.	Open Market Value	: \$14,972.00

Please check that the owner and vehicle details are correct:

29. PARF Eligibility	: Yes
30. PARF Eligibility Expiry Date	: 04 Feb 2026
31. Minimum PARF Benefit	: \$2,500.00
32. No. of Transfers	: 1
33. IU Label No.	: 1126345106
34. COE No.	: 2016030101000383N
35. COE Expiry Date	: 04 Feb 2026
36. COE Category	: A - Car up to 1600cc & 97kW (130bhp)
37. Quota Premium/Prevailing Quota Premium	: \$46,651.00
38. Actual Quota Premium/PQP Paid	: \$46,651.00
39. Actual ARF Paid	: \$5,000.00
40. CO2 Emission(g/km)	: 119.00
41. CO Emission(g/km)	:-
42. HC Emission(g/km)	:-
43. NOx Emission(g/km)	:-
44. PM Emission(mg/km)	:-
45. Actual CEVS/VES Rebate Utilised	: \$9,972.00
46. CEVS/VES/CVES Surcharge Paid	15
47. Actual Green Vehicle Rebate Utilised	: -
48. Actual EV Rebate Utilised	;
49. CVES Incentive Eligible	i -
50. Total CVES Incentive Disbursed	1 =
51. Vehicle Lifespan Expiry Date	: -
52. Nett Road Tax Amount	1)-
53. Road Tax Start Date	0.7
54. Road Tax End Date	3-
55. Remarks	: To renew the COE, the Prevailing Quota Premium payable is that of Category A.