



HD PERFECT AUTOWORK PTE LTD

Co. & GST Reg. No.: 202136904Z

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

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

Email: hdperfectautowork@gmail.com

Our Ref.: PC8121B

Your Ref.: GBK122A

Date: 04.05.2023

ATTN: Motor Claims Department

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

Dear Sir/Madam,

Accident Involving: PC8121B & GBK122A
Date of Accident: 09/12/2022@ 20:30 HOURS
Location: OPEN CARPARK AT BLK 668 BELILIOS ROAD

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 1,650.00</u>
Loss of Rental :	
(\$260.00 X 02 Days):	<u>\$ 520.00</u>
3rd Party Report	<u>\$ 31.00</u>
LTA Search	<u>\$ 7.45</u>
Grand Total:	<u>\$ 2,208.45</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 Joanne @ 97231055, or email to hdperfectautowork@gmail.com

Thank You,

Joanne



HD PERFECT
AUTOWORK PTE LTD

HD Perfect Autowork Pte. Ltd.
Co. Reg No: 202136904Z
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: hdperfectautowork@gmail.com

Authorisation To Act

I, Rushowl Singapore Pte Ltd ("the third party claimant") of
67, Ayer Rajah Crescent, #04-03 Singapore 139950
(address), owner of PC 8121B (vehicle no.)
hereby authorise HD 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. PC 8121B that was
damaged pursuant to the accident which occurred on 09/12/2022 (date)
at/along Open Carpark of B1K668 Bellios Road
(location) involving vehicle no/s GBK 122A ("the accident").

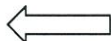
I further hereby authorise the workshop to settle my above mentioned claim in a manner that they deem it fit and the workshop is further authorised to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

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 12 day of 12 (month) 20 22 (year)

RUSHOWL SINGAPORE PTE LTD



Signed by "the third party claimant"



HD PERFECT
AUTOWORK PTE LTD
UEN: 202136904Z

Signed by "the workshop"



HD PERFECT
AUTOWORK PTE LTD

HD Perfect Autowork Pte. Ltd.
Co. Reg No: 202136904Z
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: hdperfectautowork@gmail.com

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. PC 8121 B and GBK 122A on 09/12/2022
at/along Open Carpark of B1K668 Belilios Road

- I/We, the Owner of motor vehicle no. PC 8121 B hereby instruct and authorise HD 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 12 day of 12 2022

Signature of vehicle owner [Signature]

Name : Rushowl Singapore Pte Ltd

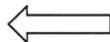
IC/UEN No : 201815849W

(Company stamp, if applicable)

Address : 67, Ayer Rajah Crescent,

#04-03 Singapore 139950

Tel : 9234 9610



Witnessed by : [Signature]

Joanne

RUSHOWL SINGAPORE PTE LTD



"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, Rushowl Singapore Pte Ltd ("the third party claimant")
of 67, Ayer Rajah Crescent #04-03 Singapore 139950 (address),
owner of PC 8121B (vehicle no.) hereby authorize
HD Perfect Autowork Pte Ltd

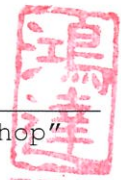
("the workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
vehicle no. PC 8121B that was damaged pursuant to the
accident which occurred on 09/12/2022 (date) along Open Carpark of B1K668 Belilios Road (location)
involving vehicle no/s GBK 122A
("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 12 day of 12 (month) 20 22 (year)

[Signature]
Signed by "the third party claimant"

[Signature]
Signed by "the workshop"
(with chop)

HD PERFECT
AUTOWORK PTE LTD
TEL: 2021 2640

RUSHOWL SINGAPORE PTE LTD

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com



HD PERFECT
AUTOWORK PTE LTD

Date	Invoice Number	Vehicle Number
04.05.2023	HDP202305-00416	PC8121B

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	\$ 1,650.00
Total	\$ 1,650.00

Cross cheques and pay: HD PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

HD 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 : 12 Dec 2022 / 16:08:08

Receipt Date/Time : 12 Dec 2022 / 16:08:08

Tax Invoice/Receipt

Receipt No. : ITNET-00000-221212-003299

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 - GBK122A As at 09 Dec 2022/20:30:00 Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - GBK122A Enquiry Fee 20221212160720013734	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: S66SS0020G

TAX INVOICE

HD Perfect Autowork Pte Ltd -
Rushowl Singapore Pte Ltd

Invoice Number
GR-2023-000097

Invoice Issue Date
07 Jan 2023

Invoice Due Date
14 Jan 2023

Total Amount (S\$) 28.70
Total GST 7.00% (S\$) 2.30
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	06/01/2023,09/12/2022,PC8121B,GBK122A	28.70	2.30	31.00
		Total Amount (S\$)		28.70
		Total GST 7.00% (S\$)		2.30
		Total Amount Incl. of GST (S\$)		31.00

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

HIRING AGREEMENT

Vehicle No.

PC 7890X

Owner

HUP HOE COACH SERVICE

Hirer

Radin Mohammad Asri Bin Ramley

Address

Blk 434 Fernvale Road # 09-250

Singapore 791434

Contact No.

8233 2467

Hiring Period

9/2/23 THURS 0925HR

10/2/23 FRI 1225HR

Hiring Rate

2 DAYS X \$260/- = \$520/-

Hiring Rules

Full tank of diesel at the point of vehicle-hand-over before and after used.

All damages, summons and accident's excess during the hiring period are to be borne by the hirer.

The standard terms and conditions of hiring services apply over the hiring period.

Please pickup the vehicle at

Attn : Mr Lim 93227087
: Ms Lilian 96881679
: Ms Sandy 97306185

D.O.B

19/4/1981

Pickup point

 RUSHOWL SINGAPORE PTE LTD

Signature of Owner

I/C no.

Name

Date

Signature of hirer

I/C no.

Name

Date

(Please attach copies of I/C, Driving Licence & Vocational Licence of the hirer.)

ACCIDENT DRIVER AS HIRER

GOPIANAND S/O KALIPERMAL HP. 81206112

Blk 527 WOODLANDS DRIVE 1A

#12-507 S(730527)

S8524986/2

29/8/1985

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	12/12/2022 17:59 (SGT)
Reported by	Driver
Date of Accident	09/12/2022 20:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	OPEN CARPARK OF BLK 668 BELILIOS ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC8121B
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	RUSHOWL SINGAPORE PTE LTD
Company Reg No	201815849W
Email Address	gopianand.290885@gmail.com
Mobile Phone No	(Phone) +65-92349610
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	Bus
Transmission	Auto
CC	2982

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMB1SNW00016272200

DRIVER

Name of Driver	GOPIANAND S/O KALIPERMAL
NRIC No	S8524986Z
Date Of Birth	29/08/1985
Occupation	Outdoor

Date Of Driving Pass	05/07/2016
Driving experience	6 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81206112
Alt. Phone Number	+65-84291445
Email Address	gopianand.290885@gmail.com
Address	527 WOODLANDS DRIVE 14
Address complement	12-507
Postcode	730527
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED STATEMENT

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	GBK122A
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) -

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 willful 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.

RUSHOWL SINGAPORE PTE LTD

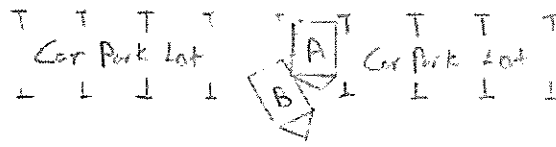
12/12/2022

Policyholder's Signature / Date & Time

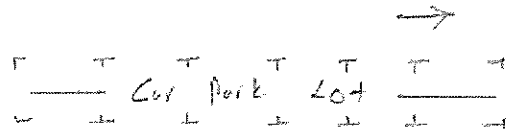
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



A = PC81213
 B = GBK122A



Open Carpark of
 BIK 668
 Belitos Road

Describe Circumstances of the Accident

Refer to attached

Declaration

We declare the foregoing particulars are true in every respect.

RUSHOWL SINGAPORE PTE LTD

Policyholder's Signature / Date & Time

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

12/12/2021

Witnessed by Reporting Centre Personnel

On 09.12.2022 at about 20:30 hours at Open Carpark of BLK 668 Belilios Road, I was parked stationary at Carpark Lot No.4 and when I saw vehicle (B) that parked on my right hand side coming out from the Carpark Lot No.3 was so near to my vehicle (A), I immediately horn to alert the driver of vehicle (B). Unfortunately, the driver of vehicle (B) still proceeds to came out from the carpark lot, hence collided onto the front right hand side portion of my vehicle (A).

Vehicle (A): PC 8121B

Vehicle (B): GBK 122A



RUSHOWL SINGAPORE PTE LTD

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8524986Z



Name

GOPIANAND S/O KALIPERMAL

கோபிஆனந்த் கலியபெருமாள்

Race

INDIAN

Date of birth

29-08-1985

Sex

M

S8524986Z

Country/Place of birth

SINGAPORE



PC 8121B

drives

6272377



NRIC No. S8524986Z



Date of issue

527 WOODLANDS DRIVE 14 #12-507
APRE 730527

No. S8524986Z

Date: 16/01/2020

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8524986Z
Name: GOPIANAND S/O KALIPERMAL

Birth Date: 29 Aug 1985
Issue Date: 03 Mar 2019

002906875J




PC 8121B
driver

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	12 Nov 2010

NP 428A

Licence No: S8524986Z



3:54

69%



board.gobusiness.gov.sg



28



My Licences

Last updated at 03:52pm Sync



How to download, renew or amend your licences

Either click on the "Select Action" at the right of each licence, or click on "Manage/Renew via GoBusiness Licensing" to download, amend, renew or cancel licences through GoBusiness Licensing.

View By

Active Licences (1)

Bus Driver's Vocational Licence (BDVL) / Bus Attendant Vocational Licence (BAVL)

Active

Licence No.

S8524986Z

Agency

LTA

Expiry Date

17 Jul 2025

Issue Date

5 Jul 2016

[Manage via GoBusiness Licensing](#)



GoBusiness Singapore

GoBusiness is jointly developed as a Whole-

of Government initiative for businesses in





Motor Bus

MZ601

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)

N SN

AN0420A

Cov. Type:C

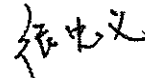
CERTIFICATE No.	DMB1SNW00016272200	Engine No.: 1KD2828378	
		Cha. No.: JTFST22PB00038198	
1. Index Mark and Registration Number of Vehicle	PC8121B	AUTOSAFE	*****
2. Name of Policy Holder	RUSHOWL SINGAPORE PTE LTD		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	03/10/2022 (11:17:11)	Excess Sect. I .	SS\$1,500.00
		Excess Sect. II	SS\$3,000.00
4. Date of Expiry of Insurance	02/10/2023	EX ON WINDSCREEN .	SS\$100.00
5. Persons or Classes of Persons entitled to drive*	<p>Any person provided he is in the Policyholder's employ and is driving on their order or with their permission or any person driving with policyholder's 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.</p>		
6. Limitations as to use:	<p>Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Schedule.</p> <p>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.</p>		
<p>HIRE PURCHASE CO. : SWEE SENG CREDIT 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.</p>			

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: 
INXPRESS INSURANCE AGENCY PTE LTD
Authorised Officer


Authorised Signatory