

**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.: SMU126G

Your Ref.: EV515G

Date: 22.05.2023

ATTN: Motor Claims Department

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

Dear Sir/Madam,

Accident Involving: SMU126G & EV515G

Date of Accident: 21.03.2023 @ 08:45 HOURS

Location: KJE

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	\$ 2,700.00
Loss of Rental:	
(\$194.40 X 05Days):	\$ 972.00
3rd Party Report	\$ 31.00
Grand Total:	\$ 3,703.00

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



Authorisation To Act

I, Lee Hup Hye ("the third party claimant") of
442C Fajar Road #08-14 (673442)
(address), owner of SMU 126C (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. SMU 126C that was
damaged pursuant to the accident which occurred on 21/03/2023 (date)
at/along KJE
(location) involving vehicle no/s EV515G ("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.

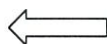
I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

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 29 day of 03 (month) 20 23 (year)



Signed by "the third party claimant"





Signed by "the workshop"


HD PERFECT
AUTOWORK PTE LTD
Co. Reg No: 202136904Z



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. SMU 126C and EV 515G on 21/3/23
at/along KJE

1. I/We, the Owner of motor vehicle no. SMU 126C 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.
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 29 day of 03 2023

Signature of vehicle owner

Name :

IC/UEN No :

(Company stamp, if applicable)

Address :

Tel :

Witnessed by :

Lee Hup Hye
56981043H
442C Fajar Road #08-14
S. 673442
92722126

Joanne



"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, Lee Hup Hye ("the third party claimant")
of 442C Pagar Road #08-14 (673442) (address),
owner of SMU 126C (vehicle no.) hereby authorize
HD Perfect Autowork Pte Ltd

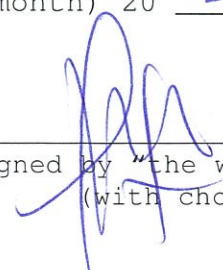
("the workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
vehicle no. SMU 126C that was damaged pursuant to the
accident which occurred on 21/08/23 (date) along KJE
____ (location)
involving vehicle no/s EV515G
("the accident").

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 29 day of 03 (month) 20 23 (year)


Signed by "the third party claimant"


Signed by "the workshop"
(with chop)



HD PERFECT
AUTOWORK PTE LTD
UEN: 2021340047

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

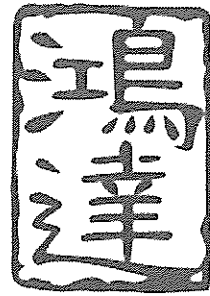
8 Kaki Bukit Avenue 4

#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
22.05.2023	HDP202305-00438	SMU126G

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	\$ 2,700.00
Total	\$ 2,700.00

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



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 - Lee
Hup Hye

Invoice Number
GR-2023-001165

Invoice Issue Date
26 Mar 2023

Invoice Due Date
02 Apr 2023

Total Amount (S\$) 28.70
Total GST 8.00% (S\$) 2.30
Total Amount Incl. of GST (S\$) 31.00

Bill Type	Reference	Amount (S\$)	GST 8.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	24/03/2023,21/03/2023,SMU126G,EV515G	28.70	2.30	31.00
Total Amount (S\$)				28.70
Total GST 8.00% (S\$)				2.30
Total Amount Incl. of GST (S\$)				31.00

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



A subsidiary of BKW Automobile Pte Ltd

B K W RENT A CAR PTE LTD

UEN/GST No.: 200106276D

120 Lower Delta Road #02-15 Cendex Centre

Singapore 169208

Tel: +65 67387777 Fax: 6738 6666

Website: <https://bkw.sg>

TAX INVOICE

Invoiced To
LEE HUP HYE
BLK 442C FAJAR ROAD
#08-14
SINGAPORE 673442

Invoice Number A 10811
Invoice Date 11/04/2023
Due Date 11/04/2023
VHA Number A 10811
Vehicle Number SKS 1567 U

S/N	Description	No. of Days	Rate	Amount
1	RENTAL FROM 29 MARCH 2023 TO 03 APRIL 2023 YOUR REF: SMU 126 G	5	180.00	900.00

Subtotal	900.00
GST @ 8%	72.00
Total (incl. GST)	972.00
Less: Payments	-
Amount Due	S\$972.00

Account Name: BKW RENT A CAR PTE LTD
Account No: 118-312-9991 Paynow UEN: 200106276D
Bank: UNITED OVERSEAS BANK LTD (UOB)
Branch: UOB Shaw Centre Branch
Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208
Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG

All cheques must be made payable to BKW RENT A CAR PTE LTD.
* Please indicate the invoice number and vehicle number in the reference.



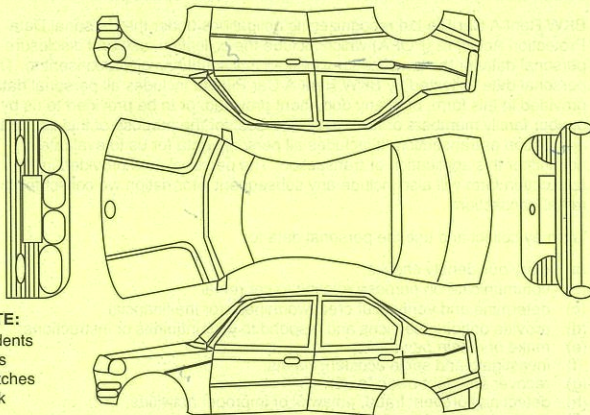
VEHICLE HIRING AGREEMENT

HIRER'S PARTICULARS

Name (as in I/C) **LEE HUP HYE**
NRIC/Passport No: **[REDACTED]** Date of Birth: **16/11/1969**
Address: **BLK 442C FATAR ROAD #08-14** Age: **673442**
S(**1 1**)
Name & Address of Employer
Occupation
Driving Licence No: **[REDACTED]** Driving Exp: **16/5/94**
Passed Date:
D/L Type: Local/Int'l/Others:

AUTHORIZED DRIVER'S PARTICULARS

Name (as in I/C)
NRIC/Passport No: **[REDACTED]** Date of Birth:
Age:
S()
Occupation
Driving Exp: Yrs
Driving Licence No: **[REDACTED]** Passed / Expiry Date:
D/L Type: Local/Int'l/Others: Contact No: **[REDACTED]**



I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver by BKW must be over 23 years of age and under 70 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be borne by the Hirer/the Authorised Driver.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$10 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling, illegal racing), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of minimum \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

Hirer's Own Vehicle No: SMU126G		Replace Veh No:	
Loan Vehicle No: SKS 15674		VR No:	
Make & Model: Peria		Auto/Manual Group:	
CHARGES : \$ cts			
Daily	5 day @ \$ 180	Per day	\$900
Weekly/Monthly	1 week @ \$ 7	Per week/Monthly	7
Others			
CDW/PAI	@ \$	Per day/Monthly	
Delivery/Collection Svc			
GST 8% A 72			
OR No:		(A) SUB-TOTAL 8972	
Petrol Level & Surcharge	OUT	E	1/4
	IN	1/2	3/4
		F	
<input type="checkbox"/> Return the same petrol level		GST	
First km FREE per day		TOTAL CHARGES	
Excess mileage is chargeable at cents per km			

NON WAIVER EXCESS (Subject to GST): \$ 3000

ACCESSORIES CHECK

- ☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge
☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre

Hirer's Signature :

Additional Driver's Signature :

SINGAPORE Use Only *Please refer to point 5

- legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's fur **between \$300 - \$500**.
- The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at **\$60.00 per trip**.
- In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
- The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
- All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
- I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Date Out	Time Out	Mileage	Check By	Remarks
29/03/23	2:15pm	201856		

Hirer's/Driver Signature

Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"

Date In	Time In	Mileage	Check By	Remarks
03/04/23	7:35pm	202211	JTMY	

Hirer's/Driver Signature

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	21/03/2023 16:41 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/03/2023 08:45 (SGT)
Exact Location of Accident	KJE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMU126G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LEE HUP HYE
NRIC No	S6981043H
Email Address	SAOCHENCHU@GMAIL.COM
Mobile Phone No	(Phone) +65-92722126
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	ESTIMA 2.4 A
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2362

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5117783584-02

DRIVER

Name of Driver	LEE HUP HYE
NRIC No	S6981043H
Date Of Birth	16/11/1969
Occupation	Indoor

Date Of Driving Pass	16/05/1994
Driving experience	28 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92722126
Alt. Phone Number	-
Email Address	SAOCHENCHU@GMAIL.COM
Address	BLK 442C FAJAR ROAD
Address complement	#08-14
Postcode	673442
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	Collision - Change/cross lane
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
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	-

PASSENGER 1

Name	PASSENGER
Gender	Female

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

-

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	SUBMIT TO INCOME

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EV515G
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)	1

SKETCH PLAN

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.

[Signature]

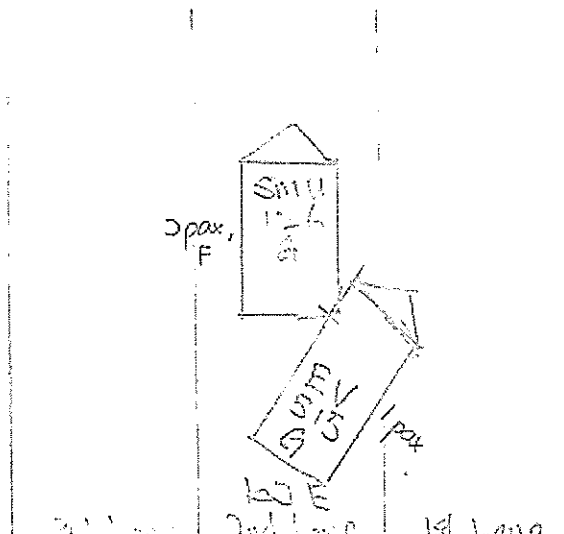
Policyholder's Signature / Date & Time

Sketch Plan

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

PIE (Tuas)

Witnessed by Reporting Centre Personnel



Rain/Wet

Describe Circumstances of the Accident

Describe Circumstances of Accident:

LICENSE PLATE: SMU1269 ACCIDENT DATE & TIME: 21/3/23 08:45 hrs

CONTACT NUMBER: 9592 2126 E-MAIL ADDRESS: sanchoonchu@gmail.com

LOCATION: KJE

When travelling along KJE, the traffic was heavy and raining.

Vehicle behind me, PV5758 wanted to change lane but he unable to change on time and hit onto my vehicle rear side.

No injury involved.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.

Please state:

☐ Claim Own Policy ☐ Claim Third Party ☒ Claim OD/TP at other workshop ☐ Reporting Only

Declaration

We declare the foregoing particulars are true in every respect.

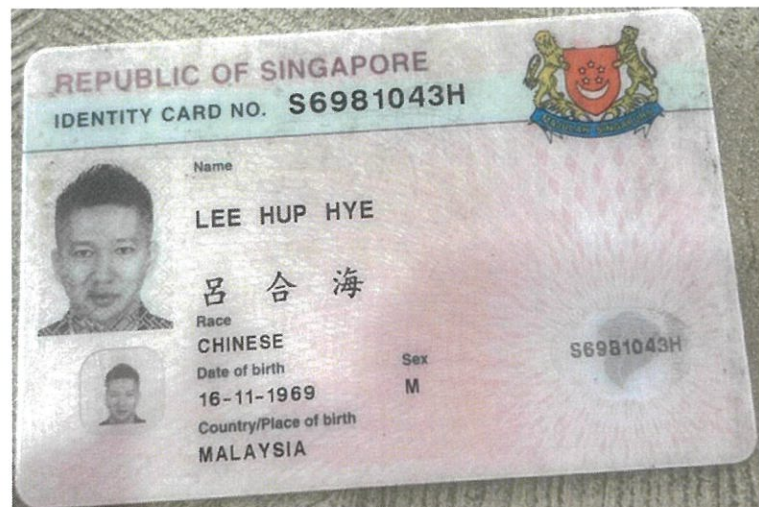

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel

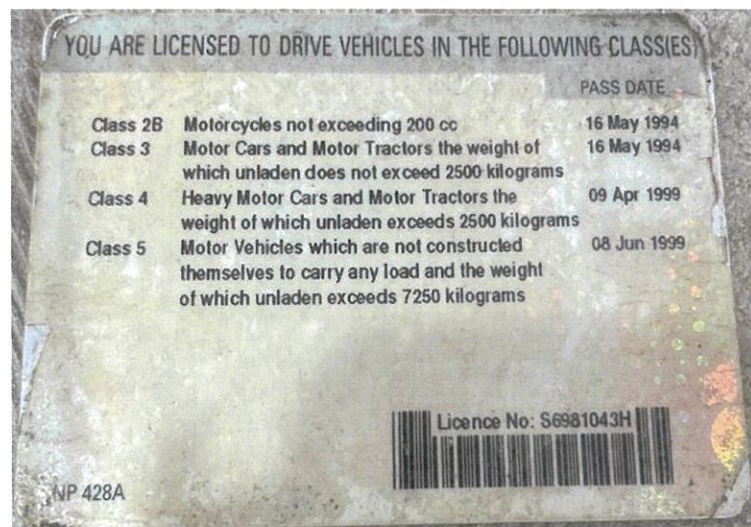
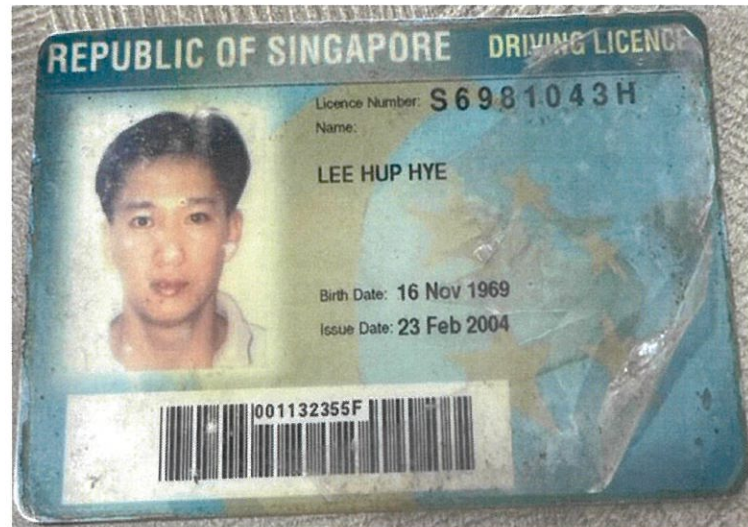
SMU126G

Owner and Driver



SMU126G

Owner and Driver



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5117783584-02

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SMU126G**
 Chassis Number : ACR507025209
2. Name of Policyholder : LEE HUP HYE
3. Effective Date of Insurance : 18 Jul 2022
4. Expiry Date of Insurance : 17 Jul 2023
5. Persons or Classes of Persons entitled to drive#
 (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with his/her permission.
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

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

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: LEE HUP HYE
NAMED DRIVER (1)	: VINCENT LEE HONG YI
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

Agency : TONG HIN INSURANCE AGENCY PTE. LTD. (00000614661)
 Date of Issue : 21 Jun 2022 17:35 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive