

TO :  
ATTN : **MOTOR CLAIM DEPT.**

T/P VEH. NO. : **SMY442Y**

ESTIMATE REPOR 1st QUOTATION  
OWNER'S PARTICULAR

JOB NO : \_\_\_\_\_

NAME : **CERTIS CISCO AUXILIARY POLICE FORCE PTE LTD**  
ADDRESS :

CONTACT :

VEHICLE N **YN4488E** TRANS  
MAKE / MODEL : **ISUZU LORRY**  
OWNER'S INSURE **FIRST CAPITAL**  
JOB-CODE : **OD** S/A :

CHASSIS NO :  
ENGINE NO :

ACCIDENT DATE : **19-Apr-23**

CLAIM DETAIL

MATERIALS

	QTY	QUO-PRICE	MARK UP +15%	DISC- PRICE	SUR .	REV. PRICE
1 TAILLAMP ASSY LH	1.00	\$ 450.00	15.00	\$ 517.50	Y	_____
2 REAR MUFFLER LH	1.00	\$ 520.00	15.00	\$ 598.00	Y	_____
3 REAR MUFFLER LOWER RUBBER - ISUZU	1.00	\$ 180.00	15.00	\$ 207.00	Y	_____
4 REAR WHEEL BEARING LH INNER	1.00	\$ 450.00	15.00	\$ 517.50	Y	_____
5 REAR WHEEL BEARING LH OUTER	1.00	\$ 450.00	15.00	\$ 517.50	Y	_____
6 REAR AXLE LH	1.00	\$ 13,500.00	15.00	\$ 15,525.00	Y	_____
7 REAR AXLE SPRING LH 1SET	1.00	\$ 650.00	15.00	\$ 747.50	Y	_____
8 REAR CENTRE SHAFT	1.00	\$ 8,850.00	15.00	\$ 10,177.50	Y	_____
9 REAR SHAFT BRACKET 2PCS	1.00	\$ 240.00	15.00	\$ 276.00	Y	_____
10 REAR WHEEL SHAFT LH	1.00	\$ 980.00	15.00	\$ 1,127.00	Y	_____
11 REAR WHEEL SHAFT WHEEL BEARING	1.00	\$ 280.00	15.00	\$ 322.00	Y	_____
12 CONTROL VALVE	1.00	\$ 3,880.00	15.00	\$ 4,462.00	Y	_____
13 CONTROL VALVE HOSES 5PCS	5.00	\$ 3,400.00	15.00	\$ 3,910.00	Y	_____
		\$ 33,830.00		\$ 38,904.50		

SPECIAL NETT ITEM

1 REAR CABIN ASSY LH	1.00	\$ 12,800.00	0.00	\$ 12,800.00	Y	_____
2 REAR CABIN TAILLAMP PANEL LH	1.00	\$ 680.00	0.00	\$ 680.00	Y	_____
3 REAR TOP PANEL ALUMINIUM	1.00	\$ 1,200.00	0.00	\$ 1,200.00	Y	_____
4 REAR STICKER 60KM	1.00	\$ 30.00	0.00	\$ 30.00	Y	_____
5 REAR REFLECTOR STICKER - RED	1.00	\$ 180.00	0.00	\$ 180.00	Y	_____
6 REAR REFLECTOR STICKER SIDE LH- BLUE & ORANGE	1.00	\$ 360.00	0.00	\$ 360.00	Y	_____
7 REAR MUFFLER BRACKET LH	1.00	\$ 180.00	0.00	\$ 180.00	Y	_____
8 REVERSE CAMERA	1.00	\$ 380.00	0.00	\$ 380.00	Y	_____
9 REAR TYRE LH INNER - 215/85/R22	1.00	\$ 380.00	0.00	\$ 380.00	Y	_____

10	REAR TYRE LH OUTER - 215/85/R22	1.00	\$ 380.00	0.00	\$ 380.00	Y	_____
11	REAR RIM LH INNER	1.00	\$ 680.00	0.00	\$ 680.00	Y	_____
12	REAR RIM LH OUTER	1.00	\$ 680.00	0.00	\$ 680.00	Y	_____
13	CONTROL LEVER ASSY	1.00	\$ 7,200.00	0.00	\$ 7,200.00	Y	_____
14	REAR SPRING BRACKET REAR	1.00	\$ 650.00	0.00	\$ 650.00	Y	_____
15	REAR CABIN TAILLAMP WIRE HARDNESS	1.00	\$ 860.00	0.00	\$ 860.00	Y	_____
16	HYDRALIC OIL	1.00	\$ 450.00	0.00	\$ 450.00	Y	_____
17	HYDRALIC HOSES 1SET - 12PCS	1.00	\$ 8,160.00	0.00	\$ 8,160.00	Y	_____
TOTAL (PARTS) :			\$ 35,250.00		\$ 35,250.00		

#### LABOUR

1	STRAIGHTEN & PANEL BEAT ACCIDENT AREAS	1.00	\$ 1,800.00	0.00	\$ 1,800.00	Y	_____
2	SPRAY PAINTING ON ACCIDENT AREA	1.00	\$ 1,600.00	0.00	\$ 1,600.00	Y	_____
3	R&R CRANE TO SERVICE TO LIFT UP & DOWN	1.00	\$ 480.00	0.00	\$ 480.00	Y	_____
4	R&R REAR SUSPENSION LH	1.00	\$ 380.00	0.00	\$ 380.00	Y	_____
5	CHECK & REPAIR WIRING SYSTEM	1.00	\$ 80.00	0.00	\$ 80.00	Y	_____
6	RESPRAY TUFF KOTE ON AFFECTED AREA	1.00	\$ 120.00	0.00	\$ 120.00	Y	_____
7	CONDUCT CHASSIC REPAIR REAR LH PORTION	1.00	\$ 1,200.00	0.00	\$ 1,200.00	Y	_____
8	R&R REAR AXLE, AXLE SPRING & LONG SHAFT TO ASSIT R	1.00	\$ 900.00	0.00	\$ 900.00	Y	_____
TOTAL (LABOUR) :			\$ 6,560.00		\$ 6,560.00		
TOTAL PARTS & LABOUR			\$ 75,640.00		\$ 80,714.50		

EXCESS : : S\$ \_\_\_\_\_

NO. OF DAYS : \_\_\_\_\_

RE-SURVEY : BEFORE / AFTER PAINTING

PART-BY-PART OR LUMP-SUM : S\$ \_\_\_\_\_

DATE OF SURVEY : \_\_\_\_/\_\_\_\_/\_\_\_\_

SURVEY BY : \_\_\_\_\_

CONTACT : \_\_\_\_\_

FAX NO : \_\_\_\_\_

NOTE : LUMP-SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED.



## 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	19/04/2023 11:38 (SGT)
Reported by	Actual Driver
Date of Accident	19/04/2023 03:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TAMPINES EXPRESSWAY LAMP POST NUMBER 312
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number YN4488E

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CERTIS CISCO AUXILIARY POLICE FORCE PTE LTD
Company Reg No	2XXXXX882K
Email Address	JEREMYC_QUEK@CERTISGROUP.COM
Mobile Phone No	(Phone) +65-68428849
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	Nhr69e
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	3000

#### INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099255MFVS/6

#### DRIVER

Name of Driver	RAJA LINGAM MUNUSAMY
Work Permit No	GXXXX163M
Date Of Birth	31/08/1980
Occupation	Outdoor



Date Of Driving Pass	03/03/2018
Driving experience	5 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-81735609
Alt. Phone Number	-
Email Address	JEREMYC_QUEK@CERTISGROUP.COM
Address	20 JALAN AFIFI
Address complement	-
Postcode	-
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	Collision - Head to Rear
Weather Conditions	Clear
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	REVANRAJ
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002448999
Alt. Police Station Phone No	(Fax) +65-62446558
Police Station Address	20 Chai Chee Drive Singapore 469045
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT & INCIDENT REPORT.

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMY442Y
Vehicle Manufacturer	Toyota
Vehicle Model	Sienta
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized 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 rescind 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 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.

ii. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

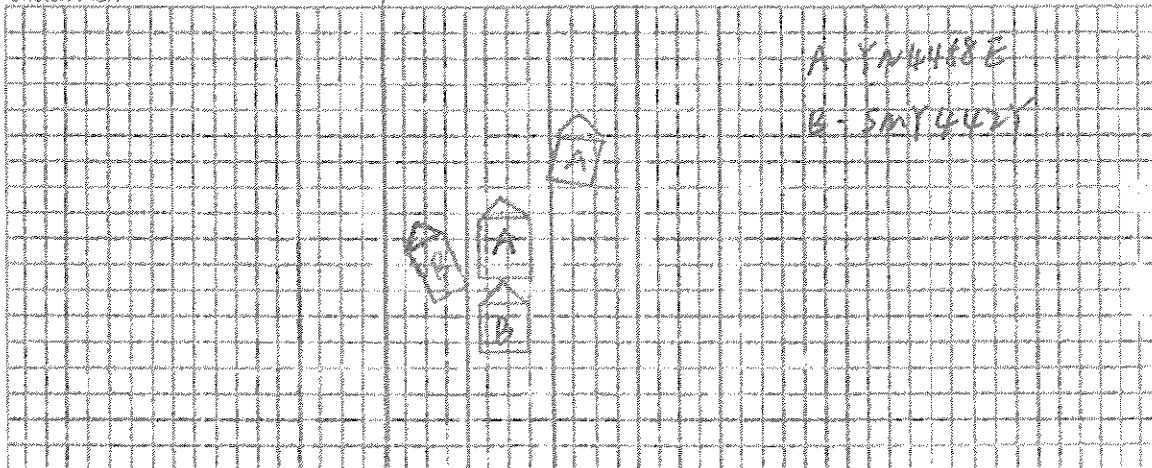
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' law firms/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 law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature & Time

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

Witnessed by Reporting Person/Personnel

Sketch Plan



Describe Circumstance of the Accident

Refer to the attached police report.

Declaration

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



Policyholder's Signature / Date & Time

*[Signature]* 19.4.23 9.30am

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



Witnessed by Reporting Centre Personnel

GLINTIS

19/04/2023 03:26 AM

SUBJECT:

DATE & TIME OF INCIDENT: 19/04/2023 (03:26) AM

LOCATION: TPE/SLE 6 11km LN3 and LN4

PERSONNEL INVOLVED:

FACTS OF THE CASE:

On 19/04/2023 at about 03:26 am <sup>we</sup> was patrolling along TPE (SLE) 6.1km and ~~we~~ was at the third lane when suddenly vehicle bearing the vehicle number ~~our~~ 442Y had collided onto ~~our~~ vehicle by the rear after he had collided onto me, our vehicle swerved to the second lane and subsequently ~~I then~~ my partner drove to the <sup>road</sup> shoulder. The other vehicle had swerved from the fourth lane and stopped at the fourth lane. We then subsequently went down from ~~our~~ vehicle to make a check on ~~our~~ vehicle and saw that our rear left mudguard, bumper body, and tyre and lights is damaged. We then make a check on his vehicle and saw that his vehicle front bumper to his front bracket and his windscreen is dented due to the collision. Not long later the Traffic Police came by.

STATEMENT GIVEN BY

RECORDED BY

Signature (above)

Signature (above)

Name: Reyana J. Pragasathan

Name: \_\_\_\_\_

Staff ID: 117918

Staff ID: \_\_\_\_\_

Dept: \_\_\_\_\_

Dept: \_\_\_\_\_

# CRICIS

## CRASH REPORT FORM

SUBJECT:

DATE & TIME OF INCIDENT: 19.04.2023 (03:26am)

LOCATION: J61/H5 6.1 km Lane 3 and Lane 4

PERSONNEL INVOLVED:

### FACTS OF THE CASE:

On 19.04.2023 at about 03:26am I was passing along J61/H5 6.1 km mark and I was at the third lane when suddenly vehicle bearing the vehicle number JMY 342X had collided onto my vehicle by the rear gate. He had collided onto me, my vehicle swerved to the second lane and subsequently I then drove to the road shoulder. The other vehicle had swerved from the third lane to the fourth lane and stopped at the fourth lane.

I then subsequently went down from my vehicle to make a check on my vehicle and found that my rear left mudguard and rear left brake light is damaged. I then made a check on his vehicle and found that his rear front bumper to his front board is damaged due to the collision. Not long after the Traffic police came by.

STATEMENT GIVEN BY

RECORDED BY

Signature (above)

Signature (above)

Name: Angela Luff  
Staff ID: 120402  
Dept: EMPS

Name: \_\_\_\_\_  
Staff ID: \_\_\_\_\_  
Dept: \_\_\_\_\_











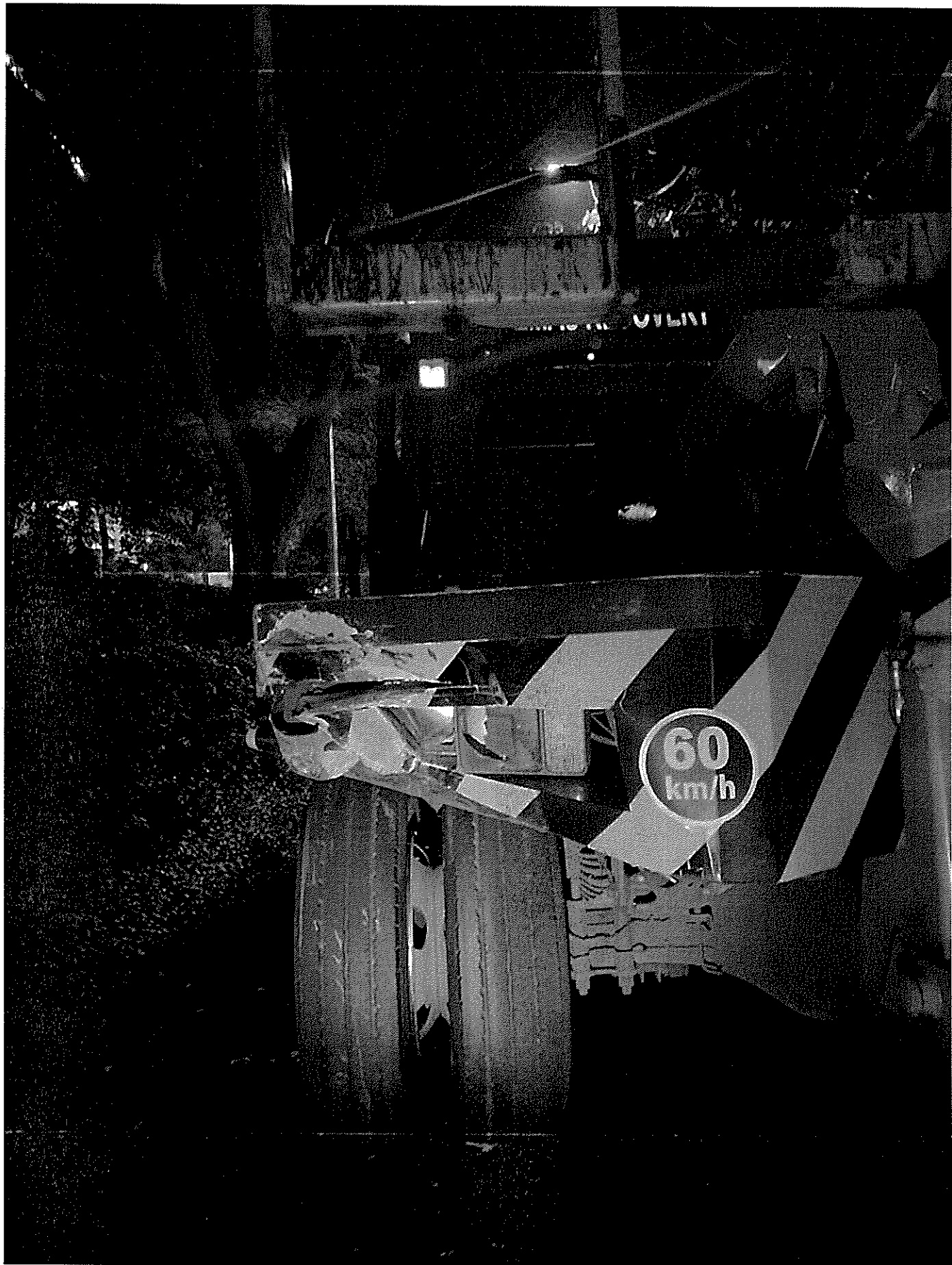












2012-08-11 11:11









## POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20230419/2020

Police Station Of Origin:  
Bedok South NPP  
20 Chai Chee Drive SINGAPORE 469045  
Tel No: 1800-2448999

1 of 5

Report No. T/20230419/2020

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
19/04/2023 07:31	G/20230419/0022	8

## Informant's Particulars

Name of Informant:	Address:		
RAJA LINGAM MUNUSAMY	MALAYSIA NO. 18 JALAN 1/19 BANDAR BARU PERMAS		
ID Type / ID No.:	JAYA PLENTU		
FIN NO / G7098183M	Contact No.:		
Nationality:	Home/Office:	Mobile: 81735609	
MALAYSIAN	Email:		
Sex:	Age:	Date of Birth:	Type of Informant:
Male	42	31/08/1980	Driver
Race:	Language:		
Indian			
Occupation:	Driving Licence Information:		
EMAS DRIVER	Class:	Date of Expiry:	

## General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive:	Date/Time of Accident:	Type of Location:
	Attended by Police	No	19/04/2023 03:20	Expressway
Location:				

## TAMPINES EXPRESSWAY

Lamp Post Number: 312	Road Surface:	Traffic Volume:
Weather:	Dry	No Traffic
Clear	Traffic Control:	Anyone conveyed by ambulance:
Traffic Flow:	Not Controlled	No
One Way		
Type of Collision:		
Between Moving Vehicles - Head To Rear		

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMY442Y	Car	TOYOTA	SIENTA HYBRID	Brown	Seriously Damaged	0
YN4468E	Lorry	ISUZU	1.5X CVT NPR75UK5 W	White	Slightly Damaged	1

## Details of Person Involved

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



**SINGAPORE  
POLICE FORCE**



T/20230419/2020

Police Station Of Origin:  
Bedok South NPP  
20 Chai Chee Drive SINGAPORE 469045  
Tel No: 1200-2448999

2 of 3

Report No. T/20230419/2020

CONTINUATION OF REPORT

Driver Name	RAJA LINGAM MUNUSAMY	ID No.	G709B163M
Related Vehicle	YN4488E (Lorry)	Contact No.	81735609
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
Passenger Name	REVANRAJ RANGANATHAN	ID No.	G8354017L
Related Vehicle	YN4488E (Lorry)	Contact No.	84041012
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 19/04/2023 at about 0320hrs I was driving along TPE(SLE) 6.1km mark and I was at the third lane when suddenly vehicle bearing the vehicle number SMY442Y had collided onto my vehicle by the rear after he had collided onto me. My vehicle swerved to the second lane and subsequently I then drove to the road shoulder. The other vehicle had swerved from the third lane to the fourth lane and stopped at the fourth lane.

I then subsequently went down from my vehicle to make a check on my vehicle and saw that my rear left mudguard and rear left brake light is damaged. I then make a check on his vehicle and saw that his vehicle front bumper to his front bonnet is dented due to the collision. Not long later the Traffic Police came by.

I am lodging this report for claimant and recording purpose.



SINGAPORE  
POLICE FORCE



T/20230419/2020

Police Station Of Origin:  
Bedok South NPP  
20 Chai Chee Drive SINGAPORE 460045  
Tel No: 1800-2448999

3 of 3

Report No. T/20230419/2020

CONTINUATION OF REPORT

Signature of Officer Recording The Report:  
G/

SGT 1 SYED NAWAWI BIN  
SYED ALI ALKAFF

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
19/04/2023 07:31

Officer In Charge Of Case:  
TP / GIT /  
STAFF SGT ROIZMAN BIN MOHAMED  
POSARI  
Contact No.: 65476131

Classification Of Case:

NP168



**WORK PERMIT**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
CERTIS CISCO AUXILIARY POLICE FORCE PTE. LTD.



Name  
**RAJA LINGAM MUNUSAMY**  
Work Permit No.  
4 00784337 Sector:  
**SERVICE**



K3185602

**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **G7098163M**

**RAJA LINGAM MUNUSAMY**

Birth Date: **31 Aug 1980**

Issue Date: **12 Aug 2022**

Valid Till: **11/08/2027**



**VISIT PASS**  
Immigration Regulations

16-07-2021

Name  
**RAJA LINGAM MUNUSAMY**

FIN  
**G7098163M**  
Date of Birth      Sex  
**31-08-1980**      **M**  
Nationality  
**MALAYSIAN**

Download SGWorkPass  
App to check status



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

**EFFECTIVE DATE**

Class 2B	Motorcycles ≤ 200cc / Electric Motorcycles ≤ 15kW	14 Oct 2015
Class 3	Ambulances / Medical transport vehicles / Motor cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver / Motor tractors or vehicles ≤ 2500kg	08 Nov 2017
Class 4	Heavy motor cars and motor tractors > 2500kg	03 Mar 2018

NP 428A



Licence No: G7098163M

Text size + -

**Register New Vehicle (Acknowledgement)****Vehicle Particulars**

Vehicle No.:	YN4488E		
Vehicle Type:	B30 - Goods (Open) Lorry (Wooden Body)	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	ISUZU	Vehicle Model:	NPR75UK5W
Chassis No.:	JAANPR75KD7102878	Engine No.:	4HK1158881
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Diesel	Passenger Capacity:	6
Engine Capacity:	5193 cc	Power Rating:	-
Maximum Power Output:	-		
Unladen Weight:	3100 kg	Maximum Laden Weight:	7900 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	02 Dec 2013	Original Registration Date:	02 Dec 2013
Manufacturing Year:	2013	Open Market Value:	\$34,950.00
PARF Eligibility:	No	Minimum PARF Benefit:	\$0.00
No. of Transfers:	0	Additional Registration Fee Rate:	5.00%

**Owner Particulars**

Owner Name:	LAND TRANSPORT AUTHORITY
Owner ID Type:	Statutory Board
Owner ID:	T08GB0027D
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	1
Registered Street Name:	HAMPSHIRE ROAD
Registered Unit No.:	# 01 - 00
Registered Building Name:	ADMIN SERVICES BLK 3
Registered Postal Code:	219428
COE No. / Expiry Date:	2013100105000239E / 01 Dec 2023
COE Bid Category:	C - Goods Vehicle & Bus
QP Paid:	\$73,999.00

**Transaction Details**

Business Transaction Ref. No.:	20131202084752144681
Business Transaction Date:	02 Dec 2013
Business Transaction Time:	08:47:52

**Message**

The above vehicle has been successfully registered.

Please note that \$66,151.00 will be deducted from your GIRO account.

**CERTIFICATE OF INSURANCE****ORIGINAL**

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)

Type of Policy. : FLEET - HEAVY COMMERCIAL VEHICLE  
Type of Cover. : Comprehensive  
Certificate No. : D-22099255MFVS/6  
Vehicle No / Chassis No : YN4488E / JAANPR75KD7102878  
Name of Insured : LAND TRANSPORT AUTHORITY  
Period Of Insurance : 26.04.2022 To 25.04.2023  
Insured Estimated Value : Market Value At Time Of Loss

**Excess :**

SGD3,000.00 SECTION I & II SEPARATELY (APPLICABLE TO ITEM NO. 1 TO 6)  
SGD5,000.00 SECTION I & II SEPARATELY (APPLICABLE TO ITEM NO.7)  
ADDITIONAL SGD3,000.00 ON SECTION I & II SEPARATELY IS APPLICABLE TO ANY  
NAMED OR UNNAMED DRIVERS AGE 22 TO 24 YEARS OLD AND/OR AGE 66 TO 70 YEARS  
OLD AND/OR WITH DRIVING EXPERIENCE OF LESS THAN 2 YEARS IN SINGAPORE ON  
THE RELEVANT CLASSES OF DRIVING LICENCE  
SGD 600.00 WINDSCREEN (APPLICABLE TO ITEM NO. 1 TO 6)  
SGD1,000.00 WINDSCREEN (APPLICABLE TO ITEM NO. 7)  
ALL EXCESS AMOUNTS ARE SUBJECT TO GST

**Authorised Driver\***

ANY AUTHORISED DRIVERS

**Persons or classes of persons entitled to drive\***

Any person who is driving on the Insured'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.

**Limitations as to use\***

Use in connection with the Insured's business.

Whilst the Motor Vehicle is being so used the carriage of passengers is permitted.

**The Policy does not cover**

- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use for the carriage of passengers for hire or reward
- (3) 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.

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)

MS First Capital Insurance Limited  
(Approved Insurers)

STELLAL/B0029/MZ801

Issued at Singapore on 14.04.2022

  
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Authorised Signature