

# NATIONAL Assessment Centre Services (wef 1 Jan 06)

Date In: 30/06/2023	Job description	Date & Time Completed	Done by
Ref No: NA/C7123006661/d4	SAS e-filing		
Veh No: SNK 37X	E-mail (within 8hrs. AIC 2hrs)		
D.O.A: 27/05/2023 14:25	i-Motor Claim Form		
OD / TP / <u>Reporting Only</u>	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SJR 62624	INC ( ) / Non-INC ( )
Owner / Driver: (	Tel:	( )
Policy No: ( )	Period: ( )	Cover Type: ( )
Confirmed by: (	Date:	Time: ( )
Insured/Driver Liability: ( )	% [Note-Est. Status (WO): N: 0-20%; P: 21-79% F: 80-100%]	
Year of Registration: ( )	Warranty: YES ( ) / NO ( )	
Excess: (\$ )	Loading: \$1,000 ( ) / \$2,000 ( )	

**General Remarks:-**

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks: (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

**Injury:**

Date/Time	Actions

NA2301970	<b>Invoice Preparation Checklist</b>	Amf (\$)	An
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);	1st Bill	Ad
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 1:	6) TR: Re-inspection \$75		
Cat. 2 / 3:	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	



## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date of Submission	30/06/2023 17:54 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/05/2023 14:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TOMLINSON ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNK37X
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ZHANG XIAN
NRIC No	SXXXX061F
Email Address	jhameszhang@hotmail.com
Mobile Phone No	(Phone) +65-97668660
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Glc250
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1991

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00268162202

#### DRIVER

Name of Driver	ZHANG XIAN
NRIC No	SXXXX061F
Date Of Birth	09/06/1983
Occupation	Indoor

Date Of Driving Pass	02/01/2010
Driving experience	13 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97668660
Alt. Phone Number	-
Email Address	jhhjameszhang@hotmail.com
Address	11 YISHUN CLOSE
Address complement	# 03-23
Postcode	768009
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	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?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230628/2112

#### 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	SJR6262H
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)	-



## SKETCH PLAN

### IMPORTANT NOTICE

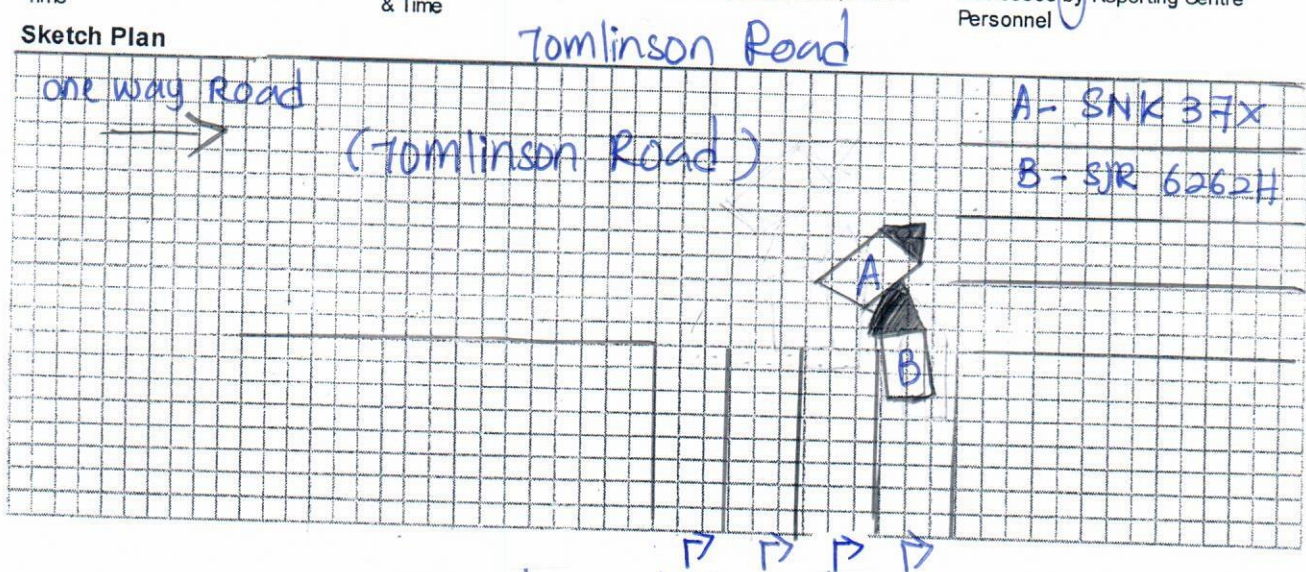
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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]* 30/6/2023  
Policyholder's Signature / Date & Time

*[Signature]* 30/6/2023  
Driver's Signature (If driver is not the policyholder) / Date & Time

*[Signature]* 30/6/2023  
Witnessed by Reporting Centre Personnel

### Sketch Plan





**Describe Circumstance of the Accident**

please Refer to the attached  
police Report - 7/20230628/2112 -

**Declaration**

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

Mr 30/6/2023

Policyholder's Signature / Date & Time

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

Mr 30/6/2023

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



# SINGAPORE POLICE FORCE



T/20230628/2112

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

1 of 3

Report No. T/20230628/2112

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/06/2023 17:43	Vide Report No.:	Station Diary No.: 95
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**Informant's Particulars**

Name of Informant: ZHANG XIAN			Address: 11 YISHUN CLOSE #03-23 SINGAPORE 768009		
ID Type / ID No.: NRIC NO / S8382061F			Contact No.: Home/Office: Mobile: 97668660		
Nationality: CHINESE			Email:		
Sex: Male	Age: 40	Date of Birth: 09/06/1983	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: MANAGER			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 27/05/2023 14:25	Type of Location: T-Junction
Location:  TOMLINSON ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJR6262H	Car				Slightly Damaged	0
SNK37X	Car	MERCEDES BENZ	GLC250 4MATIC AUTO	Black	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNK37X	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW002681 62202	19/12/2022	18/12/2023





# SINGAPORE POLICE FORCE



T/20230628/2112

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

2 of 3

Report No. T/20230628/2112

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	ZHANG XIAN	ID No.	S8382061F
Related Vehicle	SNK37X (Car)	Contact No.	97668660
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 27/05/2023 at about 1425hrs, I was driving my vehicle bearing the registration number SNK37X from Orchard. I then reached a T-junction, turning right into Tomlinson Road, which is a one way road. I was at the 2nd lane turning right into Tomlinson Road. As I was turning right, suddenly another vehicle bearing the registration number SJR6262H on the most right lane also making a right turn into Tomlinson Road. However, the vehicle had then side swipe against my vehicle when negotiating the turn as the vehicle is bigger and longer. I then alighted from the vehicle and contacted the driver. We then exchanged details. The damages were scratches on my tires which were very minor. There is also no injury due to the incident. I then waited for the driver to call me about the settlement of the damages however he did not. I then received a letter from Traffic Police advising me to lodge a traffic accident report reference TP/IP/15651/2023.





**SINGAPORE  
POLICE FORCE**



T/20230628/2112

Police Station Of Origin:

Yishun North N.P.C

31 Yishun Central SINGAPORE 768827

Tel No: 1800-8529999

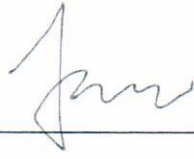

3 of 3

Report No. T/20230628/2112

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report: L / SR STAFF SGT MD ZURFARHAN BIN BORHAN
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG LESLIE Contact No.: 65476151

NP168

Signature Of Informant: 
Date/Time: 28/06/2023 17:43
Classification Of Case: 



**SINGAPORE  
POLICE FORCE**

SAFEGUARDING EVERY DAY

Our Ref: TP/IP/15651/2023

ZHANG XIAN  
11 YISHUN CLOSE  
#03-23  
Singapore 768009

000058

Traffic Police  
10 Ubi Avenue 3  
Singapore 408865

IB Call Centre: 65470000

Date: 06/06/2023

Dear Sir

**CASE OF TRAFFIC ACCIDENT INVOLVING SNK37X ALONG TOMLINSON ROAD ON 27 May 2023 @ 2.25 PM**

Traffic Police has received a Traffic Accident Report indicating that party(s) involved in the accident sustained some injuries. Investigation into the case is ongoing and we will update you on the status in due course.

2. If you have not lodged a Traffic Accident Report in respect of the accident which is now under police investigation, please do so as soon as possible via <http://www.eservices.police.gov.sg>.

3. Please note that the information given by you in the Traffic Accident Report will be carefully considered and if the information is sufficient for our investigation, you would not be required to attend an interview. If you have further information or evidence (such as CCTV footages) in relation to your case to assist in the investigation, please email the information to Investigation Officer (IO) Tan Jeok Leng Leslie at [leslie\\_jl\\_tan@spf.gov.sg](mailto:leslie_jl_tan@spf.gov.sg). For submission of footages, you may do so via these avenues:

- Upload the video to a file sharing website (dropbox, googledrive, wetransfer, etc) and inform IO on the link via email to retrieve it.
- Lodge another Traffic Accident Report using our e-services portal at <http://www.eservices.police.gov.sg> and upload the video (not exceeding 50Mb).
- Send the video footage via email (not exceeding 30Mb).

4. For insurance claim and related matters, a person's liability is to be determined by the respective insurers. Under the circumstances, we are unable to assist or advise you on such matter. For investigation

A FORCE FOR THE NATION





5. Thank you.

Yours faithfully,  
SI Tan Jeok Leng  
IO (Accident Enquiry & Investigation)  
Traffic Police  
Singapore Police Force

This is a computer-generated letter. No signature is required.



# VISION LAW LLC

Advocates & Solicitors - Notary Public - Commissioner for Oaths  
(Incorporated with limited liability)

ERIC NG CHING BOON  
WONG KENG LEONG RAYNEY  
AUDREY WONG SU-HSIEN  
PAUL YAP TAI SAN  
ANJALLI D/O MUNIANDY  
ANG KIM NOI DIANE  
RAVENDRA KRISHNASAMY  
BATES STEFANIE YOLANDA  
TAN SIEW CHERN AGNES  
MUHAMMAD SHEREFUDIN BIN JAMAL

Unique Entity Number: 200721148H

133 New Bridge Road  
#25-03/04/05 Chinatown Point  
Singapore 059413

**Main**  
TEL : (65) 6534 2811  
FAX : (65) 6535 6802  
E-MAIL : ct-admin@visionlawllc.com

**Conveyancing & Family Law Practices**  
TEL : (65) 6358 0703  
FAX : (65) 6358 0448  
E-MAIL : admin\_tp@visionlawllc.com

WHEN REPLYING, PLEASE QUOTE OUR REFERENCE.

Our Ref : AW1-scv-Ins-Y46-120625-23(js) (sallychong@visionlawllc.com)

19 June, 2023

WITHOUT PREJUDICE

**ZHANG XIAN**  
11 Yishun Close  
#03-23  
Singapore 768009

BY POST ONLY

Dear Sir,

**CLAIMANT: LIM ZHAO JUN DALLEN**  
**ACCIDENT INVOLVING SJR 6262 H & SNK 37 X ON 27-May-2023 ALONG TOMLINSON ROAD**  
**TOWARDS TANGLIN ROAD AT ABOUT 14:25 HRS**

We act for **Lim Zhao Jun Dallen**, the owner of motor vehicle no. **SJR 6262 H**.

Our investigation reveals that you were the owner of motor vehicle **SNK 37 X** at the time of the accident. Kindly confirm.

Please let us have the following particulars:-

- (a) the name, address, contact no, NRIC No. of the driver and copy of NRIC (front and back) ;
- (b) whether the said motor vehicle was at the time of the accident covered by a policy of insurance, if so, the name of the insurance company thereof;
- (c) whether the driver was at the time of the accident driving as your servant or agent;
- (d) whether the driver was an authorised driver and covered by the policy of insurance;
- (e) A copy of accident report.

Please take notice that there is a presumption in law that the said driver was driving as your servant or agent and if we do not hear from you within seven (7) days from the date hereof, we shall commence action against you as a Defendant.

**If the information requested above are not provided within 14 days, any amendments are to be made thereafter to the Writ of Summons and / or any Pleadings, you will be responsible for the costs and disbursements incurred.**

We would advise that upon receipt of this letter, you report the above accident to your insurers immediately together with your Certificate of Insurance to enable them to assist you.

If you fail to do so, your said insurers may exercise their right not to cover you against our client's claim. In such event, our client will have to look towards you for his claim and if you are found liable, you will have to pay our client's damages out of your own pocket.

Yours faithfully

C.c. (Client **SJR 6262 H**) (By mail: yeeautopteltd@gmail.com only)

**CONFIDENTIALITY**  
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10 Sin Ming Drive Singapore 575701  
www.lta.gov.sg

17 Jan 2023

Our ref 1701230203N061161226

ZHANG XIAN  
11 YISHUN CLOSE  
#03-23  
SINGAPORE 768009

Dear Sir/Madam

**You Have Successfully Replaced Vehicle Registration No. SMV762P With SNK37X**

You have successfully replaced your vehicle registration number. The vehicle, whose previous number was SMV762P, now has the number SNK37X.

The vehicle details after the transaction are:

Transaction No.	: 20230117161225903421
Vehicle Registration No.	: SNK37X (Previously SMV762P)
Vehicle Make	: MERCEDES BENZ
Vehicle Model	: GLC250 4MATIC AUTO
Chassis No.	: WDC2539462F131750
Engine No./ Motor No.	: 27492030615278 / -

**What You Need To Do:**

- You must show the new number SNK37X on your vehicle by 20 Jan 2023.

Please change the number plates on this vehicle to show SNK37X by 20 Jan 2023. Otherwise, it is an offence and the penalty is a fine of up to \$2,000 or imprisonment of up to 6 months, or both.

## IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 27/05/2023	TIME OF ACCIDENT : 14:25
VEHICLE NO : SNK37X (SMV762P)	TRANSMISSION : <u>AUTO</u> / MANUAL
MAKE & MODEL : Mercedes Benz	LOCATION : Tomlinson Road
EXACT PURPOSE USE DURING ACCIDENT: EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE	CLAIM TYPE: <u>OD / THIRD PARTY / REPORTING ONLY</u>
INSURANCE COMPANY : China Taiping	POLICY NO : DMPCSNW 00268162202
TYPE OF COVERAGE :	VEHICLE TYPE :
<u>COMPREHENSIVE</u> / THIRD PARTY / THIRD PARTY & THEFT	<u>(SALOON)</u> / COUPE/MPV/VAN/LORRY/MOTORCYCLE
NAME OF OWNER : Zhang xian	NRIC : S8382061F
ADDRESS : 11 Yishun close # 03-23 S 768009	CONTACT NO : 97668660
EMAIL ADDRESS : jhameszhang@hotmail.com	VIDEO RECORDING : YES / <u>NO</u>
NAME OF DRIVER : <u>AS ABOVE</u> / IF NO :	NRIC : _____ CONTACT NO : _____
DRIVER OWNER RELATIONSHIP:	PASSENGER : <u>0</u> MALE ( ) FEMALE ( )
DATE OF BIRTH : 09 / 06 / 1983	DRIVING PASSING DATE : 02 / 01 / 2010
OCCUPATION: <u>INDOOR</u> / OUTDOOR	ADDRESS :
ANY INJURIES: <u>NO</u> , IF YES :	POLICE REPORT : NO / IF YES WHERE ? Yishun North
WEATHER CONDITION: <u>CLEAR</u> / RAINING / OTHERS:	ROAD SURFACE: <u>DRY</u> / WET / OTHERS
VEHICLE B REG NO : SJR 62624	VEHICLE C REG NO : _____
DRIVER NAME : _____	DRIVER NAME : _____
NRIC : _____	NRIC : _____
CONTACT : _____	CONTACT : _____
VEHICLE D REG NO : _____	ANY WITNESS ? NO, IF YES :
DRIVER NAME : _____	NAME : _____
NRIC : _____	CONTACT : _____
CONTACT : _____	
WAS NOTICE OF PROSECUTION GIVEN? ( YES / <u>NO</u> ) IF YES, AGAINST WHOM :	WERE SEAT BELTS WORN ? <u>YES</u> / NO
	WERE INJURY CONVEYED BY AMBULANCE : YES / <u>NO</u>
DOES THE ACTUAL DRIVER OWN OTHER VEHICLES: YES / <u>NO</u>	
VEHICLE NUMBER:	HANDLING INSURER:





中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

### 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)

MX1E

E SN

AN0667A

Cov. Type:C

CERTIFICATE No.

DMPCSNW00268162202

Engine No.: 27492030615278

Cha. No.: WDC2539462F131750

1. Index Mark and Registration  
Number of Vehicle

SNK37X

AUTOSAFE

=====

2. Name of Policy Holder

ZHANG XIAN

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

17/01/2023  
(00:00:00)

Named Drivers Ex Sect. I \$S\$750.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 \$S\$3,000.00

Ex Sect. I - Age >= 26 \$S\$500.00

4. Date of Expiry of Insurance

18/12/2023

\* Age as at date of accident

EX ON WINDSCREEN . \$S\$100.00

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 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:\*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first \$S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our

Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : STANDARD CHARTERED BANK(S) LIMITED

\* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: TRILLIUM INSURANCE AGENCY PTE LTD

Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com