

NATIONAL Assessment Centre Services

(wef 1 Jan 06)

SM08237 V0004

| | | | |
|----------------------------|--|-----------------------|---------|
| Date In: 31/07/2023 17:42 | Job description | Date & Time Completed | Done by |
| Ref No: N188/C17280 7712/4 | SAS e-filing | | |
| Veh No: SMC 2161M | E-mail (within 3hrs, AIC 2hrs) | | |
| D.O.A: 30/07/2023 14:00 | i-Motor Claim Form | | |
| OD / (TP) / Reporting Only | 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: | Yel. No: SMV 1937X | 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] () | | |

| Date/Time | Actions |
|-----------|---------|
| | |
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| | | | | |
|---------------------------------|---|-------------|-----------|------|
| Claimant's Particulars | Invoice Preparation Checklist | | Unit (\$) | Unit |
| Driver/Owner: | 1) AR: Accident Reporting (\$30); | | 1st Bill | Add. |
| Contact No: | 2) DA: Damage Assessment (\$100); INC (\$80) | | | |
| Damaged Portion: | 3) TF: Towing Fee \$40/\$45 | | | |
| QC Checked by (Engr-In-Charge): | 4) FT: Follow-Through Survey \$120 | | | |
| Auditors' Comments: | 5) FT: Follow-Through Survey (Resurvey) \$30 | | | |
| Cat. 1: | For claiming against INC Only (wef 10 Jan 2005) | | | |
| Cat. 2/3: | 6) TR: Re-inspection \$75 | | | |
| | 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 \$30 | | | |
| | 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 First Submission | 31/07/2023 17:42 (SGT) |
| Reported by | Actual Driver |
| Date of Accident | 30/07/2023 14:00 (SGT) |
| Exact Location of Accident | Hougang Ave 3, Singapore |
| Additional Location Information | TOWARDS BARTLEY ROAD EAST |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SML2161M |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|----------------------------------|
| Is company? | Yes |
| Name Of Registered Owner | 1AXIS PRESTIGE LEASING PTE. LTD. |
| Company Reg No | 2XXXXX962N |
| Email Address | reporting.gt@gmail.com |
| Mobile Phone No | (Phone) +65-97612148 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Honda |
| Model | Vezel |
| 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 | Private hire |
| Transmission | Auto |
| CC | 1496 |

INSURANCE COMPANY

| | |
|-----------------------------------|---|
| Name of Insurance Company | China Taiping Insurance (Singapore) Pte. Ltd. |
| Policy Number / Cover Note Number | DMHCSNA00017352200 |

DRIVER

| | |
|----------------|----------------|
| Name of Driver | LEONG KOK WENG |
| NRIC No | SXXXX244C |
| Date Of Birth | 11/08/1972 |
| Occupation | Outdoor |

| | |
|--|----------------------------|
| Date Of Driving Pass | 08/06/2012 |
| Driving experience | 11 YEARS AND 1 MONTH |
| Gender | Male |
| Mobile Number | (Phone) +65-97612148 |
| Alt. Phone Number | - |
| Email Address | reporting.gt@gmail.com |
| Address | 76 HOUGANG AVENUE 7 #09-21 |
| Address complement | - |
| Postcode | 538807 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Hirer |
| 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 | 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? | Yes |
| Was any injured conveyed to hospital by ambulance? | No |
| Was any other vehicle or property damaged? | Yes |
| Number of Passengers (Including Driver) | 3 |
| 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 | UNKNOWN |
| Gender | Male |

PASSENGER 2

| | |
|--------------|---------|
| Name | UNKNOWN |
| Gender | Female |

DETAILS OF POLICE ACTION

| | |
|---|--------------------------------------|
| Was the accident reported to the police? | Yes |
| Police Station Name | Sengkang Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18003438999 |
| Alt. Police Station Phone No | (Fax) +65-63438939 |
| Police Station Address | 2 Sengkang Square #01-02 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230730/2050

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 WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|---|-------------|
| Vehicle Registration Number | SMV1937X |
| 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) | - |

INJURED PERSONS DETAILS

INJURED 1

| | |
|---|----------------------|
| Name of injured person | LEONG KOK WENG |
| Gender | Male |
| Phone No | (Phone) +65-97612148 |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | SLIGHT INJURY |
| Injured person in which vehicle? | SML2161M |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | No |

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 Actual 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 use 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 lodging 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 processed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurers) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in the 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 making 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/postal 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/are be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



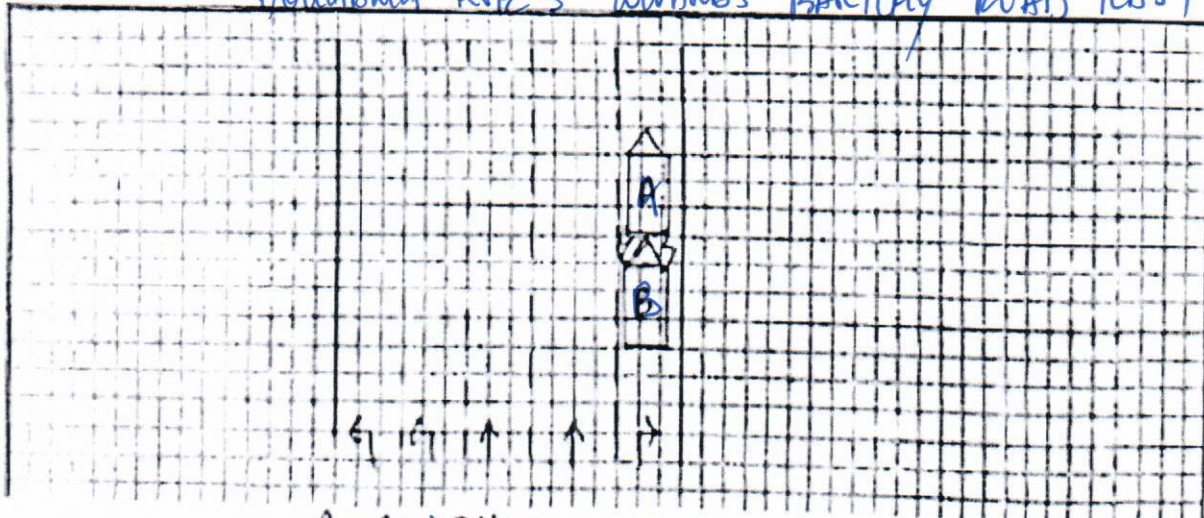
Policyholder's Signature Date & Time

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

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

Sketch Plan

Hougang Ave 3 Towards Parkway Road East



A: 3mL2161M
B: 3mV1937Y

Under the Circumstances of the Accident

Ref. to Police report T(20230730)2050

Declaration

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



Reporting Centre Personnel

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

Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE



T/20230730/2050

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. T/20230730/2050

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|--|--------------------------|--|
| Date/Time Report Made: 30/07/2023 16:37 | | Vide Report No.: | | Station Diary No.: 69 | |
| Informant's Particulars | | | | | |
| Name of Informant: LEONG KOK WENG | | | Address: 76 HOUGANG AVENUE 7 #09-21 SINGAPORE 538807 | | |
| ID Type / ID No.: NRIC NO / S7263244C | | | Contact No.: Home/Office: Mobile: 97612148 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 50 | Date of Birth: 11/08/1972 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | | |
| Occupation: PRIVATE HIRER | | | Driving Licence Information: Class: 3 Date of Expiry: | | |

General Information of the Accident

| | | | | |
|--|------------|---|--|-------------------------------------|
| Type of Accident: | Non-Injury | Drink Drive: No | Date/Time of Accident: 30/07/2023 14:00 | Type of Location: X-Junction |
| Location: HOUGANG AVENUE 3 | | | | |
| Weather: Clear | | Road Surface: Dry | | |
| Traffic Flow: One Way | | Traffic Control: Traffic Light - Working | | Traffic Volume: Moderate |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|-------|------------------------|--------|------------------|-----------------|
| SML2161M | Car | HONDA | VEZEL HYBRID 1.5X AUTO | Silver | Slightly Damaged | 2 |
| SMV1937X | Car | HONDA | HRV 1.5 DX CVT | Red | | 0 |

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20230730/2050

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

2 of 3

Report No. T/20230730/2050

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|-----------------------|--|---------------------------------|
| Driver | | | |
| Name | LEONG KOK WENG | ID No. | S7263244C |
| Related Vehicle | SML2161M (Car) | Contact No. | 97612148 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | KANNUSAMY SANTHAKUMAR | ID No. | S7366805J |
| Related Vehicle | SMV1937X (Car) | Contact No. | NIL |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On the 30/07/2023 at about 1400hrs, I (SML2161M) was driving at junction Hougang Avenue 3 and Bartley East Road. The traffic light was red, and I was on the most right lane to turn right. Suddenly, there was an impact from the rear. The vehicle (SMV1937X) behind me had hit onto my vehicle. No one was injured. I had checked on the passengers and they claimed that they were fine.

My vehicle damages were a dented rear with scratches. There was in car camera footage however I only have the front footage. I do not have the rear footage of the accident. No Police or ambulance attended the accident. Initially, the driver refused to acknowledge that he hit onto my vehicle. After exchanging particulars, we continued our journey. I did not manage to get his contact number.



**SINGAPORE
POLICE FORCE**



T/20230730/2050

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

3 of 3

Report No. T/20230730/2050

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
F /
SGT 1 NUR SYAHIRAH BINTE
MD LAZIM

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
SSI TAY CHUN KEEN
Contact No.: 65476436

Signature Of Informant:

Date/Time:
30/07/2023 16:37

Classification Of Case:

NP168

This Car Rental Agreement ("Agreement") is made and entered into as of 15/3/23 between 1AXIS
PRESTIGE LEASING PTE. LTD. ("Owner"), and LEONG KOK WENG ("Renter")

Owner and Renter may also be referred to as "Party" in the singular or "Parties" in the plural in this
agreement subject to the following terms and conditions.

RENTER - means the person(s) signing this agreement. Any other person or entity to which the charges
incurred under the agreement are to be billed, permitted to drive the vehicle with written consent of the
Owner

VEHICLE - means the motor vehicle or any substitute or replacement vehicle described in this agreement
and other Form of Records. Includes tires, tools, accessories, equipment, keys and vehicle documents of
vehicle

OWNER - means, 1AXIS PRESTIGE LEASING PTE. LTD. (Company)

RENTAL VEHICLE

| Vehicle Make | Vehicle Model | Vehicle Plate Number | Vehicle Colour |
|--------------|---------------|----------------------|----------------|
| Honda | vesel Hybrid | SPL2161H | silver |

Owner agrees to rent Vehicle to Renter for the following period:

Start Date 15/3/23 End Date: 15/3/24 Contract Period: 1 year

☐ NO CONTRACT

The Parties agree that this Agreement will run perpetually until either party provides a termination notice of at
least fourteen (14) days OR pay the rental in lieu of the shortfall days if notice is less than fourteen (14) days.

☒ CONTRACT

The Parties agree that this Agreement terminates upon the End Date specified above. Notwithstanding
anything to the contrary in this Agreement or any Exhibits, RENTER may terminate this agreement ONLY to
End Date specified above, if given fourteen (14) days' notice prior End Date. If this agreement is terminated
prior to the End Date, the Owner reserves the right to forfeit full deposit and one month's worth of rental.

RENTAL FEES

The Renter hereby agrees to pay the Owner for use of Vehicle as follows:

Rental Fees: \$ 91.80 per 1 day(s) / month.

Payment Reminders will be send up to 2 weeks(or earlier if Renter is under Early Bird Promo) prior to rental
expiry date

WITNESS WHEREOF, the Parties have signed this Agreement as of the day and year written.

| ACCEPTED BY RENTER | ACCEPTED BY OWNER |
|-------------------------------|---|
| Name: <u>Leong Kok Weng</u> | Name: <u>1Axis Prestige Leasing Pte. Ltd.</u> |
| NRIC Number: <u>S92632446</u> | Registration Number: <u>202121962N</u> |
| Signature: <u>[Signature]</u> | Signature/Company Stamp: <u>[Signature]</u> |



Date of Accident : 30/07/2023 Accident Time: 1400 (24-HR-FORMAT)
Accident Place : Hougang Ave 3 towards Bartley Rd East
Vehicle Reg. No (Car plate No.) : SM L 2161 M CC: 1500 Vehicle Make/Model: Honda Vezel
Insurance Company : China Taiping Policy No. DMHCSNA00017352200
Name of Registered Owner : Company / Individual 1 Axis Prestige Leasing Pte Ltd
ID of Registered Owner : Co Reg No: 202121962N Owner's NRIC No: _____
OWNER EMAIL ADDRESS: reporting.gt@gmail.com Co Contact No: _____ Owner's Contact No: _____
DRIVER'S Name : Leong Kok Weng DRIVER'S NRIC No: S7263244C
DRIVER'S Date of Birth : 11/08/1972 DRIVER'S License Pass Date 08/06/2012
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: wife
DRIVER'S Address : 76, Hougang Ave 7, #09-21, S(538807)
DRIVER'S Contact No./ Alt No. : 1) 9761 2148 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)
Email Address : brianleong72@hotmail.com
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including Driver): 3 Name & Gender: unknown (male)
Was the accident reported to the police? YES \ NO
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any injuries, if yes (name of the injured person) Driver

Other Party Driver's Particulars (if any)

| | |
|----------------------------------|-------------------------------|
| Vehicle Reg No: <u>SMV 1937X</u> | Vehicle Reg No: _____ |
| Vehicle Make/Model: _____ | Vehicle Make/Model: _____ |
| Name DRIVER: _____ | Name DRIVER: _____ |
| IC No. DRIVER: _____ | IC No. DRIVER: _____ |
| DRIVER'S Contact & add: _____ | DRIVER'S Contact & add: _____ |

REPORT FORM EXPLAINED IN : ENGLISH / CHINESE / MALAY / TAMIL OTHERS: _____

WHO REPORTED THE ACCIDENT : OWNER / DRIVER / BOTH

Motor Hire Car

MZ406L/B

E SN

AN0055A

Cov. Type C

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)

CERTIFICATE No.

DMHCSNA00017352200

Engine No.: LEB5927063

Cha. No.: RU31227050

1. Index Mark and Registration
Number of Vehicle

SML2161M

AUTOSAFE
=====

2. Name of Policy Holder

1AXIS PRESTIGE LEASING PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations, (00:00:00)
Ordinance or Enactment

20/03/2023

Excess Sect. I SS2,000.00

Excess Sect. I (Outside Singapore) SS4,000.00

Excess Sect. II SS1,500.00

Excess Sect. II (Outside Singapore) SS3,000.00

EX ON WINDSCREEN SS100.00

4. Date of Expiry of Insurance

18/09/2023

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

Provided that the person driving is permitted in accordance with the licensing or other laws or
regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of
a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor
Vehicle.

6. Limitations as to use:

(1) Use for the carriage of passengers or goods in connection with the Policyholder's business.

(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

(1) Use for racing, pace-making, reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: MONEymax LEASING 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

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: Lee Kian Heng, Fred

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