



FORMTRAP MARINE INSURANC (MALAYSIA) BERHAD
(Co. No. FT-14556-U)

STAMP
DUTY
PAID

COMMERCIAL VEHICLE POLICY
POLISI KENDERAAN PERDAGANGAN

POLICY NO: **CVG-V0002842-SD-AGY-13**
NO POLISI:

VEHICLE NO: **9010520**
NO KENDERAAN:

C.A.K PLANTATION SDN BHD
W D T NO 126
SANDAKAN
90000 SABAH

SD-04-0006504M

In saving the earth and supporting the "GREEN" project,
FORMTRAP MARINE INSURANC (MALAYSIA) BERHAD
has adopted a paperless printing concept.

Please log into our website "www.formtrap.com" to view or print
the English and/or Bahasa Malaysia language Policy wording,
terms, conditions and exclusions. For further enquiries, please
contact your insurance intermediary or any of our offices as shown
on the last page of this Policy Schedule.

www.formtrap.com

Your policy wording code:

CVG10313

Your branch details:

Sandakan Branch

Bangunan FormTrap Marine Insuranc
Lot 6, Block 7, Bandar Indah
Mile 4, North Road
90000 Sandakan, Sabah
Tel: **089 222 9780/0223 578**
Fax: **089 218 898**

Your agent details:

RELISUPER ENTERPRISE SDN BHD
LOT 6 BLOCK 1
BANDAR KIM FUNG BATU 4
JALAN UTARA
SANDAKAN
Tel: **089212150**
Mob: **0138837578**



MOTOR INSURANCE SCHEDULE / JADUAL INSURANC MOTOR

Policy Type: A & C-PERMIT VEHICLES
Jenis Polisi:

Class: C PERMIT-COMMERCIAL
Kelas: VEHICLE

Replacing Cover Note No.: VH011654
Menggantikan Nota Perlindungan No.:

Policy No.: CVG-V0002842-SD-AGY-13
No. Polisi:

The Insured & Address.: C.A.K PLANTATION SDN BHD
Pihak Diinsuranskan & Alamat: W D T NO 126
SANDAKAN
90000 SABAH

Date: 25/03/2013
Tarikh:

Account No.: SD-04-0006504M
No. Akaun:

Agent Name: RELISUPER
Nama Ejen: ENTERPRISE SDN BHD

Contact No.: 089212150
No. Telefon:

Period of Insurance / Tempoh Perdlindungan:

From: 11/03/2013 **To:** 10/03/2014
Dari: **Hingga:**
(both dates inclusive) / (termasuk kedua-dua tarikh)

Any subsequent period for which the insured shall pay and the company shall agree to accept a renewal premium
Mana-mana tempoh selanjutnya yang mama pihak diinsuranskan hendaklan membayar dan syarikat handaklah bersetuju menerima satu premium pembaharuan.

Insured Contact No.: **Insured Contact Number**
No. Telefon:

I/C No. / Business Registration No.: 246331-U
No. KP / No. Pendaftaran Syarikat:

Business / Profession: PLANTATION
Perniagaan / Pekerjaan:

Act:	208.30
Akta:	
Premium:	118.45
Premium:	
Loading: (100%)	118.45
Tambahan:	
Service Tax:	14.22
Cukai Perkhidmatan:	
Stamp Duty:	10.00
Duti Setem:	
Annual premium:	261.12
Premium Tahunan:	
Total Payable:	261.12
Jumlah Berbayar:	

Vehicle / Trailer Registration No: No. Pendaftaran Kenderaan / Treler:	Make Model & Type of Body Model Buatan Dan Jenis Badan	Cubic Capacity / H.P. / Kg / Watt Keupayaan Enjin / H.P. / Kg / Watt	Year of Manufacture Tahun Diperbuat	Seating Capacity including Driver Kapasiti Tempat Duduk Termasuk Pemandu	Insured's Estimated Value including Accessories / Trailer Value Nilai Anggaran Anda Termasuk Aksesori / Nilai Treler
9010520	ISUZU LIGHT TRUCK LORRY	4,000 KG	1986	3	3.00

Type of Cover.: THIRD PARTY
Jenis Perlindungan:

Excess.: NIL EXCESS
Lebihan:

Named Drivers: ANY AUTHORISED DRIVERS, named
Pemandu Yang Dinamakan: drivers2, named drivers3, named
drivers4

Engine/Motor No.: 885899
No. Enjin/Motor:

Chassis No.: 7100271
No. Casis:

Registration Card No.: 9010520
No. Kad Pendaftaran:

Geographical Area: Malaysia, Republic of Singapore
Kawasan Geografii: and Negara Brunei Darussalam.

Replacing Policy No.: replacing policy
Nenggantikan Polisi No.:

Issued and Signed At: Sandakan Branch
Dikeluarkan Dan Ditandatangani:

CVG10313

For and on Behalf of / Bagi Pihak
FORMTRAP MARINE INSURANC (MALAYSIA) BERHAD

(Authorised Signatory)
(Penandatanganan Yang Dibenarkan)