

Indemnity Form

Test Drive Details

Date & Time	Vehicle Make & Model	Vehicle Plate Number
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Test Driver Details

Name	IC No.	Contact No.
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Vehicle Owner Details

Name	IC No.	Contact No.
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Declaration

By signing below, I, the Test Driver,

1. Will indemnify the Vehicle Owner against all liabilities for claims, demands, actions, suits, losses, costs, charges, expenses, damages, death, personal injury (fatal or otherwise) caused during the test drive.
2. Will bear all loss or damage to the vehicle and any other losses, damage, cost and expenses whatsoever and howsoever caused during the test drive, without claiming from the Vehicle Owner's motor insurance.

I hereby acknowledge that I fully understand this agreement.

Sign for and on behalf of the test driver

Sign for and on behalf of the vehicle owner

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