



Version: 1.1
Date: Jan 2019

ASEAN NCAP Label Application Form

Please fill up the following application form and attach related documents as required.

| VEHICLE MODEL | |
|--|--|
| <i>Manufacturer</i> | |
| <i>Model</i> | |
| <i>Variant</i> | |
| <i>Capacity</i> | |
| SAFETY FEATURES | |
| <i>No. of airbags</i> | |
| <i>Anti - Lock Braking System (ABS)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Electronic Stability Control (ESC)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Blind Spot Detection</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Lane Keep Assist</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Lane Departure Warning</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Forward Collision Warning</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Seatbelt Reminder</i> | <input type="checkbox"/> Driver <input type="checkbox"/> Front Passenger <input type="checkbox"/> Rear Passengers |
| <i>Autonomous Emergency Braking (AEB)</i> | <input type="checkbox"/> AEB City <input type="checkbox"/> AEB Pedestrian <input type="checkbox"/> AEB Inter-urban |
| <i>Other safety features</i> (Please specify and attach new page (if insufficient space) and related documents) | |

Note – Please enclose vehicle model brochure with specific variant.



Version: 1.1
Date: Jan 2019

ASEAN NCAP Label Application Form

| | | | |
|---|---------------------------------|---------------------------------|---------------------------------|
| ASEAN NCAP Ratings <i>(Please attach related documents)</i> | <input type="checkbox"/> 5-star | <input type="checkbox"/> 4-star | <input type="checkbox"/> 3-star |
| | <input type="checkbox"/> 2-star | <input type="checkbox"/> 1-star | <input type="checkbox"/> 0-star |

| | | |
|---|----------------------|----------------------|
| Other NCAPs Ratings <i>(Please specify and provide related documents)</i> | <u>NCAPs</u> | <u>Ratings</u> |
| | | |

Submitted by:

Name:
Designation:
Date:

FOR OFFICE USE:

REF NO.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

Checked & Received by:

Name:
Designation:
Date: