MG SOLUTION PTE LTD



23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #04-01 Singapore 415933
Tel: 6744 4986 / 6744 4165
(GST Reg. No. 201427944N)

Date

: 26/03/2025

Your Ref

: SNG2099A

To

: AIG ASIA PACIFIC INSURANCE PTE LTD

Attn

: Motor Claims Department

Dear Sir/Mdm.

RE: ACCIDENT INVOLVING VEHICLE SMY3348S & SNG2099A ON 04/08/2024 AT OPEN CARPARK OF BLK 681 HOUGANG AVENUE 8.

We refer to the above matter.

Attached copies of the following for your kind perusal:

- 1) Proforma Bill No.258031 @ S\$1,308.00 (Inclusive of 9% GST)
- 2) Loss of Use @ S\$600.00 (3 Days x S\$200)
- 3) LTA Search @ **\$\$27.25**
- 4) Authorisation to Act
- 5) GIA Report

Hope the above is in order and kindly let us have your confirmation soon.

Tax invoice will be issue upon amount finalized.

Thank You.

Yours faithfully,

\$ 100 x

Sharon Chia

HP: 8121 1373

E-mail: mg3solution@gmail.com





23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #04-01 Singapore 415933 Tel: 6744 4986 / 6744 4165 (GST Reg. No. 201427944N)

PROFORMA BILL

Bill To:

Bill No: 258031

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY #07-12 AIG BUILDING SINGAPORE 079120 Date: 26-March-2025

Vehicle Number: SMY 3348S

ATTN: MOTOR CLAIMS DEPARTMENT

QTY	CLAIM		AMOUNT
1	To carried out accident repair as per surveyor's recommendation		\$ 1,200.00
	(Lump Sum)		
	. *		
		SUB-TOTAL	1,200.00
	V 4	GST 9%	108.00
		TOTAL	\$ 1,308.00

Tax Invoice will be issue upon amount finalised.

Please note that our above offer and any settlement arising from the above offer are made on a without prejudice basis with sole intention of resolving the matter amicably without parties resorting to legal proceeding. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

Co's stamp & Authorised Signature

MG SOLUTION PTE LTD

23 Kaki Bukit Ave 4 (South Wing) #04-01 Vicom Inspection Centre, Singapore 415933 Tel: 6744 4986 / 6744 4165 Co. Reg. No.: 201427944N

MOTOR CLAIM DISCHARGE VOUCHER

1/We PRIME CAR LIMO PTE LTD
the owner of the vehicle no. $8m\sqrt{33485}$ hereby confirm that I / we have taken
delivery of vehicle from the repairers MG Solution Pte Ltd and that all repairs necessary as
a result of an accident in which the said vehicle was involved on or about the $_{-}$ 0 $^{\checkmark}$ day
of 20 have been completed to my / our satisfaction. Save for my / our
rights under the Warranty set out below, I / we have no further claim on the above
company in respect of such repairs.

Signature of Policyholder

12/09/2024-PRI

Company Stamp (if applicable)

vehicle 12-12/09/2024 Vehicle Out-14/09/2024 Lon: 3 days x \$ 200 : \$ 600



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 24 Aug 2024 / 10:36:19

Receipt Date/Time: 24 Aug 2024 / 10:36:19

Tax Invoice/Receipt

Receipt No.: ITNET-00000-240824-000619

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SNG2099A As at 04 Aug 2024/07:30:00 Insurance Co: AIG ASIA PACIFIC INSUR 1 Insurance Enquiry - SNG2099A Enquiry Fee		25.00	2.25	27.25
20240824103506250820		20.00	2.20	27.20
	Sub-Total	25.00	2.25	27.25
	Total Before Rounding	25.00	2.25	27.25
	Rounding Difference			0.00
	Total Amount Payable			27.25
	Paid By			
	DICNV20240824103506537398	SGQR	R(PayNow)	27.25
	Total			27.25
	Cash Change			0.00
	Tendered Amount			27.25
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

LETTER OF AUTHORITY

Name : PRIME CAR LIMO PTECTD
Address : 61 UBLAVE 2 #01-03
AUTOMOBILE MELAMART
5 (408898)
2 (1000) 0 /
Contact No :
TO: AGG ASIA PACIFIC INSURANCE PTE LTD
Dear Sirs,
ACCIDENT INVOLVING SMY 3348S AND SNG 2099A ON 04/08/2024
AT/ALONG OPEN CARPARK OF BLK 6SI HOUGANG AVENUE &
I/We,PRIME CAR LIMO PTELTO, am/are the
registered owner of motor car no. SMY 3348S
Please note that I have assigned all compensations monies due to me/us in the above said accident to M/S MG SOLUTION PTE LTD.
I/We, hereby authorize you to release all compensation monies pertaining to the above-mentioned
accident to M/S MG SOLUTION PTE LTD and forward your settlement cheque to M/S MG SOLUTION PTE LTD whom I had authorized to collect the said compensation monies.
accident to M/S MG SOLUTION PTE LTD and forward your settlement cheque to M/S MG SOLUTION
accident to M/S MG SOLUTION PTE LTD and forward your settlement cheque to M/S MG SOLUTION PTE LTD whom I had authorized to collect the said compensation monies.



AUTHORIZATION TO ACT (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

PRIME GAR LIMO PTE CT	("the third party claimant")
of 61 WBI AVE & \$101-03 AUTOM	DBILE MEGAMART S (408898) address)
owner of Smy 3348S	_(vehicle no.) hereby authorize
MG SOLUTION PTE	LTD
("the workshop") to act for me with res	spect to my claim for repair costs and/or
	ny vehicle no. SMY 33485 that was
	ch occurred on 04/08/204(date) along
OPEN CARPARK OF BUK 681 HOR	16ANG AVENUE 8 (location)
involving vehicle no/sSNG 20	^ ·
	(3.10 3.00 1.00 1.00 /.
I further authorize the workshop to	settle the above mentioned claim in a
manner that they deem fit and the w	orkshop is further authorized to receive
payment furtherto settlement of my cla	im with payment cheque/s being made in
favour of the workshop.	respired chadaoio bonig made in
I further acknowledge that any settle	ement the workshop may reach on my
behalf is on a without prejudice and v	vithout admission of liability basis insofar
as the driver/owner/insurers of the other	
,	or romere, a re-comporting.
Date thisday of _	(month) 20 (year)
PIE	(year)
11/4/10: 10: 10: 10: 10: 10: 10: 10: 10: 10:	NOITU ARA
PAIME	STATE OF THE PARTY
	The state of the s
Signed by "the third party claimant"	Signed by "the workshop"
	8. 100 is a motivation



RELEASE VOUCHER (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

"We/I,		_("the workshop") hereby confirm that	н
have reached an agreement with	the appointed surveyor	of AIG Asia Pacific Insurance Pte.	We/I
	("name of sun	veyor") with respect to the amount claime	Liu.
S\$(repair costs	s), S\$(lc	oss of use/rental) S\$ (search f	face)
for Venicle no.	that was damaged pu	ursuant to the accident which occu	irred
on(date) along	· · · · · · · · · · · · · · · · · · ·	(location) invo	lvina
vehicle no/s	···································	, , , , ,	
This is pursuant to the inspection cond	ucted on	(date) at "the workshop".	
We/I confirm that we/I are/am authoriz	red by the owner	("third party claim	
of vehicle no to r	nake the claim as set out	t in the above paragraph and we/l have	iant")
authority to settle the matter on his/he	er behalf in a manner that v	we/I deem fit. We/I enclose herein the leti	tor of
authority given by "the third party clain	nant".	and the resident title left	101 01
We/I further confirm that we/I will ind	emnify AIG Asia Pacific Ins	surance Pte. Ltd for all damages, loss a	and/or
expense that they will or have alread	y incurred in the event that	"the third party claimant" after the above	hise s
agreement lodges a further claim aga	inst the former for any loss	s and expenses suffered pertaining to co-	ctc of
repairs and/or rental and/or loss of us	e pursuant to the damage	to(vehicle no.) as a	result
of the accident.			
Well confirm that the agreement rec	ahad ahawa la la Sul 1 s		
claimant" pursuant to the accident and	d that further this settlement	inal settlement of any claim of "the third	party
admission of liability basis.	restroction this settletten	nt is reached on a without prejudice and w	/lthout
,			
This agreement is subject to the a	pplication of Sincapore la	aw and the Singapore Courts have exc	. 1
jurisdication over any dispute arising	out of the same.	and the enigapore Courts have exc	JIUSIVE
Dated this _	day of((month) 20(year)	
		VITION	
		COLUMN SIM	
		(§(MG))	
Signed by AIC on a sind of	_	*3014279 AN	
Signed by AIG appointed surveyor		Chopped & Signed by "the workshop"	



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 witholding 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

Reported by

Date of Accident

kact Location of Accident

Additional Location Information

Country/State of Loss

05/08/2024 12:32 (SGT)

Both Policyholder and Actual Driver

04/08/2024 07:30 (SGT)

681 Hougang Ave 8, Singapore 530681

CARPARK PREMISES

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMY3348S

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

Yes

PRIME CAR LIMO PTE LTD

20126883W

SUPREMELEASINGSG@GMAIL.COM

(Phone) +65-86836000

VEHICLE PARTICULARS

Manufacturer

Model

Variant Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category Transmission

Vehicle Fuel

First Regisration Date

Chassis no

Effective Date/Time of Ownership

Honda Shuttle

Private use

No - Claiming third party

Private car

Auto

1496

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Income Insurance Limited 5119742081-03-000015

DRIVER



Name of Driver MUHAMMAD ISKANDAR BIN IDRIS NRIC No S7623760C Date Of Birth 09/08/1976 Occupation Outdoor Driving Pass Date 20/12/1996 Driving License Pass Class Driving License Validity Valid Driving experience 27 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-93281712 Alt. Phone Number Email Address SUPREMELEASINGSG@GMAIL.COM Address BLK 98B HOUGANG STREET 61 #02-318 Address complement Postcod e 532698

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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions 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 riginal language used in the statement

DETAILS OF POLICE ACTION

Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No. (Phone) +65-65470000 Alt. Police Station Phone No. (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? No If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20240805/7018.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Yes Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SNG2099A 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 **VEHICLE B** No. Of Passenger (Including Driver)

IMPORTANT NOTICE

- The issue and accomplance of the Form by industrials companies is not all agric sound pourly habits so the past of the insurance companies.
- Any false reporting may be referred to the Traffic Police Department for investigation.
- This report will be forwarded by the instities in the 6.4 Eveboris Management Centre established by the General Industriace Association of Singlabore (CUA) for an littling and that copies of this report valids is for, the made available uson application by interested parties
- 7. Sy the inagement of this report to the instances, you benefit consent to the processing of the report of the centre and its copies of the report being made available aforesaid
- 8 Consent under the Personal Data Protection Act (PDPA)

understand, acknowledge, agree and consent that

- ia. My insurer my workshop and the General histrance Association of Sugapure ("GbA") may are permitted to collect, use, disclose and or product my tersonal data personal information set out in the floring and any other personal information provided by the or possessed by my insured (collectively the "Personal Information"; and discuss and transfer such Personal Information to all insurers; who have insured virtidities, involved in this accident (at insurence who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers" (the Insurers, taxiversitax films, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police) for the surpose shot
- in, processing frainding and/or dealing with my dains including the settlement of the claims and any necessary investigations relating to the claims
- including out and/or dealing with my instructions or responding to aby endurines by me
- test administering my planns underlying the making of correspondence, statements, invalid, impage or nedges to me, which could exceed discussion of contain personal data about me to bring should delivery of the same as well at on the external cover of envelopes must раскарея галогог
- (v) complying with applicable law is administering processing, handling and/or snaling watchy claims inchectively the Purposes)
- (b) all mauterist who have insured vehicles i involves in this accident and the lineurers, lawyers haw firm; imagine permitted to collect but disclose anothir process my Personal Information for one or more of the above Purposes, and
- (c) my Fersona. Information may/can be disclosed by any of the insurers, and/or SIA to their fluid-party service providers or agents rinclosting their varyers/faw firms), which may be seen burside of Singapore, for one or more of the above Purposes



Sketch Plan

vehicle A: SMY 33485 vehille B: SNg 2099A

Prescribe Sittimptance of the Accident Attached traffic police Report no: T/20240805/7018







Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240805/7018

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/08/2024 10:30			Vide Report No.:	Station Diary No.;		
Informan	t's Particular	rs .		<u> </u>		
Name of Informant: MUHAMMAD ISKANDAR BIN IDRIS			Address: 698B HOUGANG STREET 61 #02-318 SINGAPORE 532698			
ID Type / ID No.: NRIC NO / S7623760C		Contact No.: Home/Office:	Mobile: 93281712			
Nationality: SINGAPORE CITIZEN		N	Email: MISK.IDRIS@GMAIL.COM			
Sex: Male	1.3-		Type of Informant: Driver			
Race: Malay			Language: English			
Occupation: ASSITANT DIRECTOR SECURITY AND SAFETY			Driving Licence Information: Class:	: Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/08/2024 07:30	Type of Location Car Park
Location:			A designation of the second of	
HOUGANG AVEN	UE 8			
Weather:		Road Surface:		
Weather: Clear		Road Surface: Dry		
			Tra	ffic Volume:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMY3348S	Motor car					0
SNG2099A	Motor car	KIA	CERATO	Red		0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



2 of 3

Report No. T/20240805/7018

CONTINUATION OF REPORT

Driver		***************************************				
Name	MUHAMMAD ISKAND	AR BIN ID	RIS	ID No),	S7623760C
Related Vehicle	SMY3348S (Motor car)			Conta	act No.	93281712
Hospital/Clinic	NIL			Class Drivin Licen Expir	ng .	Class; NIL Date of Expiry; NIL
Date Treatment	NIL Date Disc			narge	NIL	
No. of Days grant	ed Medical Leave (MC)	NIL	Degree of	Injury	NIL	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE

Brief Details.

ON 04/08/2024 AT ABOUT 0730HRS AT OPEN CARPARK OF BLK 681 HOUGANG AVENUE 8. MY VEHICLE WAS STATIONARY PARKED ON 0710HRS ON THE ABOVE MENTIONED PREMISES AND EVERYTHING WAS INTACT. WHEN I RETURNED TO MY VEHICLE AT ABOUT 0735HRS ON THE GIVEN DATE, I REALISED THAT MY RIGHT FRONT PORTION WAS DAMAGED. I CHECKED MY CCTV FOOTAGE AND REALISED THAT AT ABOUT 0730HRS A VEHICLE (B) REVERSED HER VEHICLE WITHOUT CAUTION AND HENCE COLLIDED ONTO THE RIGHT FRONT PORTION OF MY VEHICLE (A) CAUSING DAMAGES TO MY VEHICLE. I WISH TO STATE THAT THIS WAS A HIT AND RUN ACCIDENT.

VEHICLE A: SMY3348S VEHICLE B: SNG2099A



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



3 of 3

Report No. T/20240805/7018

CONTINUATION OF REPORT

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 05/08/2024 10:30
Classification Of Case: