



AUTOBAY@KAKIBUKIT

1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883 Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Email: huameng@live.com.sg Reg. No.: 254678/00M



Your Ref:

Our Ref

Date: 26.03.2025

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Attn: Motor Claims Dept

ACCIDENT ON 06.12.2024 INVOLVING VEHICLE SFJ5511K & GW5757M ALONG YISHUN AVE 7 TWDS YISHUN AVE 8

With regards to the above, we are writing on behalf of the registered owner of vehicle SFJ5511K which was involved in the above mentioned accident.

We are informed that the above accident was caused solely br the negligence of your insured vehicle GW5757M. AS a result of the accident, our client's vehicle was damaged and our client had instructed us to submit his claims for loss and expense, particulars of which are follows:

1) Repair cost		\$ 9,000.00
2) Loss of use - \$280 x 7 days (+GST)		\$ 2,136.40
3) LTA search	_	\$ 26.75
	Total	\$ 11,163.15

We hereby enclosed herewith the following documents for your consideration of the above claim.

a) Final Repair Bill Of SFJ 5511 K

c) LTA SEARCH

b) GIA report

d) Owner / Driver NRIC & Driving License

Yours faithfully,

HUA MENG SPRAY PAINTING WORKSHOP

ym

華明 噴漆廠 HUA MENG SPRAY PAINTING WORKSHOP AUTOBAY @ KAKI BUKIT 1 KAKI BUKIT AVE 6 #01-34 SINGAPORE 417883 TEL: 6747 8064, 6746 5519 FAX: 6743 4896



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Email: huameng@live.com.sg Reg. No.: 254678/00M



Your Ref:

Our Ref

Date: 26. 03. 2025

VEHICLE NO

MAKE / MODEL

NAME

ADDRESS

: SFJ 5511 K

: MERCEDES E300

: TONG HWEE HWEE : 30 KERONG LANE

(S) 757394

FINAL REPAIR BILL FOR VEHICLE NO: SFJ5511K

TO SUPPLY AND REPLACE PARTS, LABOUR CHARGES FOR REPAIRING, KNOCKING, WELDING AND TO RESPRAY PAINTING (LUMPSUM REPAIR)

\$ 9,000.00

SINGAPORE DOLLARS: NINE THOUSAND ONLY

SK0N24C9M00T-02 / KAN FOOK SING MOTOR WORKSHOP [533758] SUBMITTED BY: MAK SWEE WAN
VERSION: 3 (10/12/2024 12:30 (SGT))

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 09/12/2024 17:40 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 06/12/2024 17:25 (SGT) **Exact Location of Accident** Singapore Additional Location Information YISHUN AVE 7 TOWARDS YISHUN AVE 8 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFJ5511K

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address**

Mobile Phone No

Alternative Phone No

No

TONG HWEE HWEE SXXXX357H

JOANNETONG915@GMAIL.COM

(Phone) +65-81880320

VEHICLE PARTICULARS

Manufacturer

Model

Variant

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

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission

CC

Vehicle Fuel

First Regisration Date

Chassis no

Effective Date/Time of Ownership

MERCEDES BENZ E300 AMG

No - Claiming third party

Private car

Auto

1991

Petrol

28/12/2017

WDD2383482F004362

28/12/2017 03:12 (SGT)

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Income Insurance Limited

5132437252-01

DRIVER



Name of Driver TONG HWEE HWEE NRIC No SXXXX357H Date Of Birth 15/09/1972 Occupation Indoor **Driving Pass Date** 14/12/1995 **Driving License Pass Class** Driving License Validity Valid Driving experience 29 YEARS Gender Female Mobile Number (Phone) +65-81880320 Alt. Phone Number **Email Address** JOANNETONG915@GMAIL.COM Address BLK 30 KERONG LANE - SINGAPORE 757394 Address complement Postcode Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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) 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 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 PR 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 File size too large

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer	GW5757M
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Commercial vehicle
Name of Driver	MR LEE
Contact Number	(Phone) +65-87587321
Address	-
Address complement	_
Postcode	=
Insurance Company Name	_
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	-
Cr. decenger (modding Enver)	-

INJURED PERSONS DETAILS

INJURED 1

TONG HWEE HWEE
-
_
-
-
_
3 DAYS MC
SFJ5511K
-
No

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised 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 Formby insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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 todgement 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.
- Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that :

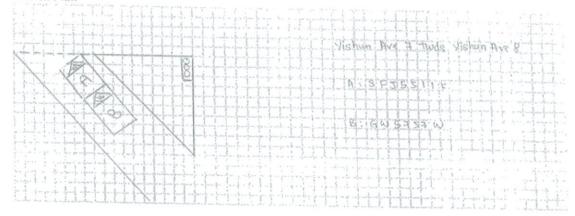
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this 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 softlement of the claims and any necessary investigations relating to
- (ii) investigating the accident and/or my claims;
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by ma;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of cortain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail 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' law yers/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/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/faw firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Policyholder's Signature / Date &



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Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



T/20241209/7077

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20241209/7077

CONTINUATION OF REPORT

Details of Person						
Any Pedestrian In	volved: No					
No. of Pedestrians	s Injured: NIL		Use of Pede	estrian	Crossin	g: NA
Driver						
Name	TONG HWEE HWEE			ID No		S7233357H
Related Vehicle	SFJ5511K (Motor car)			Conta	act No.	81880320
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY			Class Drivin Licen Expir	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date Disch			arge	NIL	
No. of Days grant	of Days granted Medical Leave (MC) 03		Degree of I	njury	Slight	

Brief Details.

Along YISHUN AVE 7 TWDS YISHUN AVE 8 on 06.12.2024 at about 05.25pm.

My vehicle(SFJ5511K) already stopped at filter lane a wait exit to main road, but GW5757M suddenly collided with the rear portion of my vehicle (SFJ5511K).



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



3 of 3 Report No. T/20241209/7077

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/12/2024 15:40
Officer In Charge Of Case: TP / AEIT / CHUA SOON KEONG Contact No.: 65476030	Classification Of Case:
NP168	



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raifler Quay #18-00 Singapore 048580
Tel (63) 6224 0030 Fax (63) 6224 0030
Operating Hours: Monday to Friday, 05:00 – 17:00
UCM. 564590206 / GST Ruy, No.: Mc00017725

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: SKON24C9M00T SFJ5511K Original Report No :_ Vehicle Registration No: _ Name(asshownin NRIC): __ NRIC/FIN/Passport No : __ ("Vehicle Driver / Vehicle Owner) (") Please delete as appropriate Address Singapore(Contact (Tel) Mobile No.: Email Address Time of Accident : _ Date of Accident Place of Accident Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include attritional information or make the following amendments: Add video Add police report KAN FOOK SING MOTOR WORKSHOP Policyholder / Driver's Signature Reporting Centre Personnel's Signature Date: Name: NRIC/FINNO .:

Date:



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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5132437252-01

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SFJ5511K

Chassis Number

: WDD2383482F004362

2. Name of Policyholder

: TONG HWEE HWEE (TANG HUTHU!)

3. Effective Date of Insurance

: 28 Dec 2023

4. Expiry Date of Insurance

: 27 Dec 2024

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/ner permission.

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#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.

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

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

8 Umitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsament and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: \$\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: \$\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: 140
INSURE WITH COS	: YES
NCD PROTECTION	: YES (FREE)
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TONG KWEE HWEE (TANG HUHUN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM WISURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: KCB AGENCY (00000614904)

Date of Issue

: 15 Dec 2023 11:18 hrs

For INCOME INSURANCE LIMITED

Chi C Change and have

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

09 Dec 2024 / 15:46:50

Receipt Date/Time: 09 Dec 2024 / 15:46:50

Tax Invoice/Receipt

Receipt No.: ITNET-00000-241209-003182

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No. Posuit of Insurance Enquiry, GW/5757M		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GW5757M As at 06 Dec 2024/17:25:00 Insurance Co: AIG ASIA PACIFIC INSURAN 1 Insurance Enquiry - GW5757M	ICE PTE. LTD.			
Enquiry Fee 20241209154620236089		25.00	2.25	27.25
	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			
	20241209154630180	Direct Debit: el (Intern	NETS Debit et Banking)	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.

REPUBLIC OF SINGAPORE

NATIONAL DIGITAL IDENTITY CARD





TONG HWEE HWEE (TANG HUIHUI)

NRIC NO. S7233357H Ø

15 SEP 1972

SEX FEMALE

NATIONALITY / CITIZENSHIP
SINGAPORE CITIZEN

10 JUL 1994

30 KERONG LANE
SINGAPORE 757394



∧ Hide details



DRIVING LICENCE

REPUBLIC OF SINGAPORE



S7233357H Ø

CLASS AND ISSUE DATE
3 • 14 DEC 1995

CERTIFICATE OF MERIT
NOT ELIGIBLE

DEMERIT POINTS

CARD SERIAL NO. 002854032C

Hide details



Last updated on 09 Dec 2024



Show NRIC



A subsidiary of BKW Automobile Pte Ltd

BKW RENT A CAR PTE LTD

UEN/GST No.: 200106276D

120 Lower Delta Road #02-15 Cendex Centre

Singapore 169208

Tel: +65 67387777 Fax: 6738 6666

Website: https://bkw.sg

TAX INVOICE

Invoiced To

TONG HWEE HWEE (TANG HUIHUI) C/O HUA MENG SPRAY PAINTING WORKSHOP 1 KAKI BUKIT AVENUE 6 BLK C #01-61/01-34 AUTOBAY@KAKI BUKIT SINGAPORE 417883 Invoice Number Invoice Date Due Date VHA Number Vehicle Number

A 15679 20/12/2024 20/12/2024 A 15679 SKR 6989 H

S/N	Description	No. of Days	Rate	Amount
	RENTAL FROM 09 DECEMBER 2024 TO 16 DECEMBER 2024 YOUR REF: SFJ 5511 K	7	280.00	1,960.00
			Subtotal	1,960.00
		G	ST @ 9%	176.40
		Total (in	ncl. GST)	2,136.40
		Less: P	ayments	-
		Amo	unt Due	\$\$2,136.40

Account Name: BKW RENT A CAR PTE LTD

Account No: 118-312-9991 Paynow UEN: 200106276D

Bank: UNITED OVERSEAS BANK LTD (UOB) Branch: UOB Shaw Centre Branch

Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG

All cheques must be made payable to BKW RENT A CAR PTE LTD.

* Please indicate the invoice number and vehicle number in the reference.





BKW CAR

120 Lower Delta Road #02-15 Cendex Centre Singapore 169208 Tel: 6738 7777 Fax: 6271 1661 ACRA No: 20-0106276-D GST Reg. No: 20-0106276-D 24 HOURS HELPLINE: 6223 1122

VHA	No:	TO	01	9	
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Work	rehon	ATU	an	lone	1

VEHIC	IF F	IIRING /	AGR	EEMENT

HIRER'S PARTICULARS	CATALON THE THE DISTURD WE STREET, BUILT AS DESIGN TRANSPERS OF THE PROPERTY O
Name (as in I/C) Town House House	Hirer's Own Vehicle No: 373 55 W Replace Veh No: Loan Vehicle No: Sk. 6 989 H VR No:
NRIC/Passport No: Date of Birth: 15.09.1932	To the Object of the Control of the
Address: 30 krong Lane Age:	Make & Model: MERC. E210 Auto/Manual Group:
18 FEZZ 18 Comment of the comment of	CHARGES : cts
Name & Address of Employer	Daily 7 day @\$ 280 Per day \$1960 }
U.G. anto in Latento II personale para vinte e con está la enclue con time acto. La claim contrato II de consegue vinte está o los respectos está la está con contrato especial.	Weekly/Monthly week @\$ Per week/Monthly
Occupation Driving Exp:	Others 1911 of 150 house tricked will be internet about shell injury to be 1881 fields as well on 1811 to
Driving Licence No: Passed Date: 14 12 1995	CDW/PAI @\$ Per day/Monthly
D/L Type: Local/Int'l/Others:	Delivery/Collection Svc
	GST 9% \$176 40
AUTHORIZED DRIVER'S PARTICULARS	OR No: (A) SUB-TOTAL \$2)36 40
Name (as in I/C)	Petrol Level OUT E 1/4 1/2 3/4 F
NRIC/Passport No: Date of Birth:	botto & unit the same see March 1995 and 1995 the State of Sales S
Address: Age:	Peturn the come netrol level
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Occupation Driving Exp. Yrs	Excess mileage is chargeable at cents per km TOTAL CHARGES
Driving Licence No: Passed / Expiry Date:	いちゃく マグ・ス・マグ・ス・マグ・ス・アグ・ス・ス・マグ・ス・マグ・ス・マグ・ス・マグ・
D/L Type: Local/Int'l/Others: Contact No:	<u> </u>
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	☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre
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INDICATE: A - Accidents	The second second control of the second seco
D - Dents S - Scratches	Hirer's Signature : Additional Driver's Signature :
X-Crack	SINGAPORE Use Only *Please refer to point 5
I have read and agree to the terms and condition on both sides of this agreement payable under this agreement and for parking and traffic infringements may be	billed to that account and my signature above will be considered to have been
made on the charge/credit card voucher. All information I have been give	ven BKW Rent A Car Pte Ltd in connection with this agreement is true.
IMPORTANT 1. The Hirer and the authorized driver by BKW must be over 23 years of age and	legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the
under 70 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be Borne by the Hirer/the Authorised Driver.	vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident
	occurred. Any damage to the car will be repair at BKW authorized workshop. 8. Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear
should he fail to return the vehicle at the appropriate petrol level.	the cost of removing the offensive smell or pet's fur. between \$300 - \$500. 9. The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or
for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full	locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to
day rental. 4. Use of the vehicle for illegal purpose (For instance: in connection with theft,	such occurrence, the Hirer shall bear the cost of such response at \$60.00 per trip., 10. In case of accident, the hirer shall report to rental office immediately. An accident
drug peddling or trafficking, smuggling, illegal racing), is strictly prohibited. 5. Vehicle strictly for Singapore use only and may not be driven out of Singapore	report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in
without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of minimun \$200 in additional to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.	the event of an accident. 11. The hirer/Driver also have the responsibility to ensure that the radiator water level
6. The hirer and/or driver shall be responsible for all damages or losses howsoever	in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
whatsoever reason in respect of or in connection with it's use or operation.	12. All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.13. I understand and agree to the personal data collection statement stated on the
increased insurance premiums, non-wavier excess and cost expense (including	Terms and Conditions Page.
Date Out Time Out Mileage Check By	Remarks
Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hir	Hirer's/Driver Signature
Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall	Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or

HAN

AUTHORISATION TO ACT

I/We, Tong Hwee Hwee	("the third party claimant") of
Blk 30 Kerong Lane (8) 757394	(address),
owner of SF3 5511 k (vehicle no.) hereby authori	
WORKSHOP ("the workshop") to act for me with rental and/or loss of use ("claim") for my vehicle no to the accident which occurred on (location) involving vehicle vehicle which occurred on (location) involving vehicle	F5 6511 C that was damaged pursuant
I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.	
I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.	
Dated this 09 (day) of Dec (month) 2034 (year)	
Signed by "the third party claimant" (with company stamp if applicable)	Signed by "the work thop (with company stamp)