

Our ref:
Your ref:

DS177/24/VS

SLE 3461P

SDW 4455B

CD/11124070151/RMS

Date:

11 OCT 2024

Direct Settlement

To:

India.

Singapore

Attn:

Motor Claims Department

Re: Accident Involving Motor Vehicle Nos. SDW 4455B & SLE 3461P
At/Along Set of Teck Whye Ave On 6/7/2024 @ 11:30am
2 Choa Chu Keng

I am the owner of vehicle no. SDW 4455B that was involved in an accident with your insured vehicle no. SLE 3461P of the above accident.

As the accident was caused by your insured negligent/inconsiderate driving, thus I am claiming from you for the following: -

1. Cost of Repairs
2. Loss of Use / Rental (2 days @ \$ 109 per day)
3. LTA/GIA Search Fee
4. GIA Report Fee
5. Others

\$
\$
\$
\$
\$
\$

9,308.58
218.00

Total: \$ 9,526.58

I hereby give you fourteen (14) days to comply with the above, failing which, I shall instruct my solicitor to commence legal action against you. If you have any queries, please contact the representative of **CYCLE & CARRIAGE INDUSTRIES PTE LTD** at Telephone No: 67714401 (Mr Vincent Seah) / 67714304 (Ms Amanda Ang).

I hereby give full authority to **CYCLE & CARRIAGE INDUSTRIES PTE LTD** and their representative to negotiate/comprise settlement of the above claim on my behalf.

Your co-operation and immediate attention to the above is greatly appreciated. I hereby look forward to hearing from you soon.

Yours faithfully

Name & Signature

Address:

C/o. 188 Pandan Loop Singapore 128378

Cc:

Mr Vincent Seah/ Ms Amanda Ang

E-mail:

vincent.seah@cyclecarriage.com.sg / amanda.ang@cyclecarriage.com.sg

Fax No:

67795383

LETTER OF AUTHORIZATION

To: Ted. S. Tug

Singapore _____

Attn.: Motor Claims Department

Dear Sir / Mdm,


MOTOR ACCIDENT INVOLVING SDW 4455 B (OWNER'S
VEHICLE NO.) AND SLZ 3461 P (3RD PARTY'S VEHICLE NO.)
ON 06/07/2024 (DATE) AT 11:30am (TIME)
AT/ALONG Jct of Teck Whye Ave & Chuan Chuan Rd (ROAD)

I am the registered owner of SDW 4455 P (Vehicle No.).

I hereby authorise CYCLE & CARRIAGE INDUSTRIES PTE LIMITED and its agents or any person(s) authorised by Cycle & Carriage Industries Pte Limited to do all or any of the following:-

- Submit, resolve and make any claims which I may have against the 3rd party insurers; and/or
- Execute and sign discharge voucher, indemnity forms and all necessary documents in connection with and arising from the above claim.

All payment towards settlement of my claim should be made in favour of CYCLE & CARRIAGE INDUSTRIES PTE LIMITED.



Registered Owner's Signature

(Company stamp & authorized signature if it is a company-registered vehicle)

Name : Yiew Siew Morn

NRIC No. : S0446


Date : _____



Mercedes-Benz

TAX INVOICE

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

Invoice Name & Address				Owner Name & Vehicle Info			
INDIA INTERNATIONAL INSURANCE P/L				Cust No/Name	WCV18049/Yiew Siew Mong		
ATTN: MOTOR CLAIM DEPARTMENT				Reg No/Reg Date	SDW4455B / 19/03/2024		
6 RAFFLES QUAY				Date In/Mileage	15/08/2024/ 6163		
#22-00				Chassis No	W1N2476842W3503653		
SINGAPORE 048580				Engine No	28281480076626		
Contact No 63476100				Make/Model	MB/GLB 180		
				Colour/Trim	027 787 Mountain Gt/ 041 101 Black		
Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No	
WI000576	Credit	03/10/2024/ 11:45	VS	356 / Vincent Seah	19243	28202002	
Description of Goods / Services					Qty	Unit Price S\$	Amount S\$

Z REQUEST							
Customer Request							
M BPNSUN							F.O.C.
POLICY NO/ACC DATE :720040441//06.07.2024							
DRIVE IN/EXCESS : 08.07.2024 // TP CAR NO.:SLE3461P-INDIA							
DATE IN/DATE SURVEY:12.08.2024 //12.08.2024 RASUL-LKK 11:25AM							
DIRECT SETTLEMENT: DAPHNE LEE-LKK							
M BPNSUN							
SUNDRIES							15.00
A BPILAB							
CHECK REAR LIGHTING SYSTEM AND WATER TEST FOR ANY LEAKAGE. NETT							120.00
A BPILAB							
DISASSEMBLE AND REPLACE ATTACHED DAMAGED PARTS & REFINISH.							960.00
A BPIRES							
RESPRAY ON REAR BUMPER AND ACCIDENT AFFECTED AREA						0.05	800.00
X REAR BUMPER				1.00	1520.45		1520.45
X STEP PLATE				1.00	251.31		251.31
X REAR LOWER BUMPER				1.00	604.52		604.52
X CHROME COVER,REAR BUMPER				1.00	1474.90		1474.90
X BOTTOM LEFT TRIM STRIP				1.00	141.96		141.96
X LEFT EXHAUST COVER				1.00	180.35		180.35
X LHR RADAR CONTROL UNIT, COMPLETE				1.00	1854.91		1854.91
X LHR RADAR BRACKET				1.00	34.43		34.43
X DISTANCE SENSOR				1.00	329.75		329.75
X DECOUPLING RING				1.00	7.63		7.63
X REFLECTING EMITTER				1.00	49.88		49.88
X ELECTRICAL WIRING HARNESS				1.00	194.89		194.89

Guarantee Your Warranty, Maintain with Cycle & Carriage!

Parts	6,644.98			
Labour	1,880.00			
Standard Menu	0.00	9% GST on	8539.98	8,539.98
Specialist Job	0.00			768.60
Diagnostics Job	0.00			
Sundry/Others	15.00			
Total(w/o GST)	8,539.98			
		Total Payable		9,308.58
		Paid		0.00
		Total Due		9,308.58

Payment should be made strictly by NETS, credit cards or PayNow (via QR code or UEN) only. Thank you.
Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.



and Mercedes-Benz are trademarks of Mercedes-Benz Group AG

Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg

Tax Invoice

chan's

www.chans.com.sg

CHAN'S & SONS ENTERPRISE

Company Reg No:51936900M

363 Sembawang Road, Goodlink Park,
Singapore - 758379

Email: admin@chans.com.sg

Tax Invoice No:
INV0801192024-08Dated:
August 16, 2024Rental Agreement No:
RA 016559 2024-08Terms of Payment:
Due upon receiptCustomer Reference:
SDW4455B (India)Notes:
SDW4455B (India)

Executive Name: C&C VINCENT

Customer Details**YIEW SIEW MONG**BLK 6 TECK WHYE AVENUE #11-130 Singapore
680006

S.No	Product	Description	From Date	To Date	No. of Periods	Price (SGD)	Amount (SGD)
1	SLA8440M	Toyota Altis 1.6 (A) - Yiew Siew Mong	12-08-2024	14-08-2024	2 Days	100.00	200.00
							200.00
						GST 9% (9%)	18.00
Amount in words : Two Hundred Eighteen Singapore Dollar (SGD)						Total (SGD)	218.00

Declaration:Please make your cheques payable to : **CHAN'S & SONS ENTERPRISE**For **CHAN'S & SONS ENTERPRISE**This is a Computer generated document.
No signature is required.**Income Terms**
Terms

RENTAL AGREEMENT

RN 016 559 2624-08

Hirer's Name YIEW SIEW MONG		Date of Birth 28.02.1958	Passport/ Nric No. S132304X	Nationality
Address 6 PECK WHATE AVENUE		Occupation	Driving Licence No.	Date of Expiry
#11-130	Postal Code 680002	Contact No.	Mobile Phone No. 96964921	
Joint Hirer's / Guarantor's Name		Date of Birth	Passport/ Nric No.	Nationality
Address		Occupation	Driving Licence No.	Date of Expiry
	Postal Code	Contact No.	Mobile Phone No.	

CHECK OUT

Date 12.8.24	Time 9.50am	Mileage KM	E 1/4 1/2 3/4 F
Date 14.8.24	Time 2.20pm	Mileage KM	Remarks IND car

CHECK IN

IMPORTANT NOTES:-

- Car is restricted to SINGAPORE use. See clause 1(f) for non-compliance.
- No refund will be given for vehicle that returns early.
- Own Damage Liability – First \$1500 for damage to vehicle plus loss of earnings while damaged vehicle is under repair.
- Third Party Liability – First \$2000 for any Third Party Accident Claim.
- Additional Excess of \$3000 for drivers under 24yrs old or above 70yrs and/or less than 2yrs driving experience.
- Hirer is responsible for all parking fines & traffic summons.
- Extension:- One day's advance notice is required otherwise no extension will be allowed.
- Vehicle should be returned at the same time as collection except on Saturday where return time is before 10am.
- Vehicle returned after office hour will be charged to the next working day.
- Hourly extension is charged at 1/5 of the daily rate.
- As preventive maintenance, please check water & engine oil daily.
- Please check that you have not left any of your personal belongings in the vehicle. Our company and staff will not be responsible for any loss of belongings after the vehicle is returned.
- For the comfort of other users, please refrain from smoking, eating or carrying of pets in the car. A cleaning charge of \$200 will be imposed for smoky, smelly or dirty vehicle.
- Carrying of PASSENGERS in commercial vehicle is strictly prohibited. Only WORKERS covered under hirer's workmen compensation are allowed.

	UNIT		RATE (\$)	TOTAL (\$)
RATE	2	@	100	200
DISCOUNT				
GST @ 9.1				18
TOTAL				218
EXTENSION				
Inv 86119 2624-08				
JAL				
No 1: 60W 4455 B				
DEPOSIT (refundable) S\$			M	
CHANGED OVER FROM VEH.			DATE	

I/We have read and agree to the terms and conditions of the rental agreement above and as set overleaf.
I/We declare that all information given on this form is true and accurate.

Hirer's Signature

Joint Hirer's/ Guarantor's Signature

for CHAN'S & SONS ENTERPRISE

VEHICLE NO. SLA 8440W	MODEL TOYOTA ALTIS 1.6 (A)
FROM	RETURN <small>*Estimate Date. For actual return see CHECK IN</small>

OPERATING HOURS: MONDAY TO FRIDAY 8.30AM TO 5.00PM. SATURDAY 8.30AM TO 12.00PM. CLOSED ON SUNDAY & PUBLIC HOLIDAY

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 withholding 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	08/07/2024 15:21 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	06/07/2024 11:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF TECK WHYE AVENUE & CHOA CHU KANG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDW4455B
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YIEW SIEW MONG
NRIC No	SXXXX044G
Email Address	yiewsm@gmail.com
Mobile Phone No	(Phone) +65-96964921
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	GLB 180
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1332

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	720040441

DRIVER

Name of Driver	YIEW SIEW MONG
NRIC No	SXXXX044G
Date Of Birth	28/02/1958

Occupation		Indoor
Driving Pass Date		18/04/1977
Driving experience		47 YEARS AND 3 MONTHS
Gender		Male
Mobile Number		(Phone) +65-96964921
Alt. Phone Number		-
Email Address		teoeye8@hotmail.com
Address		BLK 6 TECK WHYE QAVENUE #11-130
Address complement		-
Postcode		680006
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?	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	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLE3461P
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
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	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding 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. The report will be forwarded by the insurers to 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.
8. 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 be 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 settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain 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' lawyers/law firms, may be 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 lawyers/law firms), which may be based outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time: 08/07/2024

Driver's Signature (if driver is not the policyholder) / Date & Time: _____

Witnessed by Reporting Centre Personnel: _____

Sketch Plan

Sketch Plan area with grid lines and handwritten notes:

IN: B

A. SAW 4455B

A. SEE 3441P

Describe Circumstances of the Accident

My vehicle SDW 4455 B was stationary
vehicle SLE 3461 P left front left
into my vehicle SDW 4455 B left
Rear

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

08/07/2024
11:15 am

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

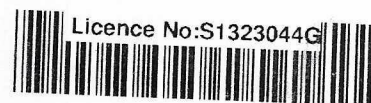
Witnessed by Reporting Centre
Personnel

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 18 Apr 1977

NP 428A





REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S 1323044 G**

Name: **YIEW SIEW MONG**

Birth Date: **28 Feb 1958**

Issue Date: **08 Mar 2017**



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