

Mirai Auto Performance Pte Ltd
53 Ubi Ave 1 #01-33
Paya Ubi Industrial Park
Singapore 408934

M I R A I

Main line: +65 9348 9483

Email: claims@miraisg.com

19.09.2024

Our Reference: SNG535X
Your Reference: SLN8873D

INDIA INTERNATIONAL INSURANCE PTE LTD
6 Raffles Quay #22-00
Singapore 048580

Attn: Motor Claims Department

Dear Sir/ Madam

Claimant: LUMENS PTE LTD

ACCIDENT INVOLVING MOTOR VEHICLES NO. SNG535X AND SLN8873D ALONG TOWNSHEND ROAD ON 01.08.2024 AT ABOUT 1625 HOURS

1. We act for **LUMENS PTE LTD**, the owner of vehicle No. **SNG535X** involved in the abovementioned road accident, in his/her claim for damages of the consequential property losses and expenses incurred as a result of the said accident.
2. We are instructed that the accident was caused solely or contributed by your / your authorized driver's / your insured's authorized driver's negligent driving, use and/or management of motor vehicle No. **SLN8873D**.
3. Copies of the following supporting documents are enclosed herewith for your perusal: -

a.	Singapore Accident Statement / Police Report
b.	LTA Search
c.	Repair Invoice
d.	Rental Agreement/ Invoice

4. As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows:

i.	Cost of Repair	\$5,325.75
ii.	Pre-Inspection Days – 2 Days	\$240.00
iii.	Rental / Loss of Use (6 days + 1 day weekend)	\$840.00
iv.	LTA and GIA Search Fees	\$27.25
v.	Towing Fee	\$87.20
vi.	Total	\$6,520.20

Yours sincerely,



Mirai Auto Performance Pte Ltd
Director: Chong Hoe Fei



MIRAI AUTO PERFORMANCE PTE. LTD.

53 UBI AVENUE 1#01-33, PAYA UBI INDUSTRIAL PARK, S408934
Tel: 8399 8422

INVOICE # **INV 2024 -203**

Customer名称	LUMENS PTE LTD
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DATE September 19, 2024

ADDRESS/COMPANY

Vehicle INFO

CHASSI 标签: JTDZS3EU60J068134

Make车型: TOYOTA PRIUS

CAR NOS 车号: SNG535X

Mileage里程:

POSTAL CODE地址

CONTACT TEL/HP	96474936
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PART NAME	DESCRIPTION	QTY	UNIT PRICE (SGD)	AMOUNT (SGD)
COST OF REPAIR		1	5,325.75	5,325.75
Sub Total (SGD)				5,325.75

OTHER COMMENTS

1. Total payment due within 30 days
2. Please include invoice number on your cheque
3. Mode of payment:
 - a) Cheque
 - b) Bank transfer

GST	0.00
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Total (SGD)	5,325.75
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Paid (SGD)	0.00
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Total Due	5,325.75
(SGD)	

DBS Singapore: 072-115049-2

UEN:202420342R

Limited warranty effective until(保证)

(Please show this invoice for warranty claim)

Thank You For Your Business!





**SINGAPORE
POLICE FORCE**



T/20240802/7021

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

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Report No. T/20240802/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/08/2024 10:50			Vide Report No.: A/20240801/0113		Station Diary No.:
Informant's Particulars					
Name of Informant: JAMIN GAN WEI'EN			Address: 5 GHIM MOH ROAD #11-238 SINGAPORE 270005		
ID Type / ID No.: NRIC NO / S8132708D			Contact No.: Home/Office: Mobile: 98794410		
Nationality: SINGAPORE CITIZEN			Email: JAMIN.GWE@GMAIL.COM		
Sex: Male	Age: 42	Date of Birth: 24/10/1981	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Private-hire car driver			Driving Licence Information: Class: 3,3A Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/08/2024 16:25	Type of Location: X-Junction
Location: TOWNSHEND ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLN8873D	Motor car	TOYOTA	PRIUS	Silver	Seriously Damaged	0
SNG535X	Motor car	TOYOTA	PRIUS PLUS HYBRID	Black	Seriously Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNG535X	TOKIO MARINE INSURANCE SINGAPORE LTD.	23-MAA00603-R00	30/09/2023	29/09/2024



**SINGAPORE
POLICE FORCE**



T/20240802/7021

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

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Report No. T/20240802/7021

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ADDY	ID No.	NIL
Related Vehicle	SLN8873D (Motor car)	Contact No.	86862862
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL
Driver			
Name	JAMIN GAN WEI'EN	ID No.	S8132708D
Related Vehicle	SNG535X (Motor car)	Contact No.	98794410
Hospital/Clinic	RAFFLES HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,3A Date of Expiry: NIL
Date Treatment	01/08/2024	Date Discharge	02/08/2024
No. of Days granted Medical Leave (MC)	07	Degree of Injury	Slight
Passenger			
Name	SNG	ID No.	NIL
Related Vehicle	SNG535X (Motor car)	Contact No.	90081972
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	Slight

Brief Details.

With a passenger I picked up near Jalan Berseh Food Centre, I headed along Townshend Road towards Kitchener Road. As I was passing along the junction at Maude Road, another car came out from my right side and hit my vehicle. I was unable to react to avoid in anyway. The impact caused me and my passenger to hit the right side windows/door in the cabin. I hit my head on the side window and my right shoulder against the door. I stopped the vehicle, switched off the vehicle and checked on the driver of the other car. At that point an off-duty officer from SOC came to assist and render assistance to all parties involved. The other driver was slumped in the driver's seat looking dazed and breathless. The off duty SOC officer attended to the other driver. I then checked with my passenger if he was fine and if he needed medical assistance. He said he was fine and needed to continue to his way to his next destination. I then proceeded to call 995 assistance as the other driver was acting dazed and



**SINGAPORE
POLICE FORCE**



T/20240802/7021

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

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Report No. T/20240802/7021

CONTINUATION OF REPORT

claimed to be in discomfort. It was after police resource came on site and took over the accident site that I started feeling migraine headaches and sought medical attention. The other driver subsequently said he did not need medical attention and declined to be conveyed to the hospital.



KAOLIN LOGISTIC PTE LTD UEN: 201730867M
61 WOODLANDS INDUSTRIAL PARK E9 #04-19 SINGAPORE 757047
TEL: 6977 9771 HP: +88009090
EMAIL: kaolin2020hq@gmail.com

DELIVERY ORDER

BILL TO: LUMENS PTE LTD

DELIVERY ORDER : E19450

Date: 07/08/2024

Payment Due Date: 06/09/2024

DATE	DESCRIPTION	VEHICLE NO.	JOB NO.	AMOUNT
07/08/2024	517 AIRPORT ROAD 53 UBI AVENUE 1 #01-33 COMPOUND AREA TOW	SNG535X	E19450	\$80.00
Note : Please be requested to pay the current invoice amount within 30 days upon receipt				
PAYNOW to: 201730867M				Amount: \$ 80.00
Remit to: KAOLIN LOGISTIC PTE LTD				
Bank: OCBC				
Bank Code: 7339 Branch Code: 712				GST@ 9% 7.20
Account No.: 712452515001 (SGD)				Net Payable 87.20

Date: 29/07/2024

PRIVATE AND CONFIDENTIAL

Jamin Gan Wei'en (Jamin Yan Weien)
5 GHIM MOH ROAD
#11-238
Singapore 270005

Dear Jamin Gan Wei'en (Jamin Yan Weien),

USE OF CAR AGREEMENT ("AGREEMENT")

1. Subject to your agreement to the terms and conditions set out herein, we, Lumens Pte. Ltd. (Company Registration No. 201426961K), a company incorporated in Singapore with its registered address at 22 Sin Ming Lane, #01-74 Midview City, Singapore 573969 ("**Company**"), authorizes you to use the following motor vehicle owned by the Company ("**Vehicle**") on the terms and conditions set out herein:

- (a) Make and model: Toyota Prius Plus
- (b) Registration number: SNG535X
- (c) Colour: Grey

2. You shall use the Vehicle for the sole purpose of providing the services under the service agreement with any ride-hail service provider authorised by the laws of Singapore ("**Service Company**"), which is in the business of providing car sharing services in Singapore whereby customers are able to book cars and be driven to their specified destination in return for a fare determined by the Service Company.

3. The term of this Agreement shall commence and end on the following dates:

Commencement date: 29/07/2024 ("**Commencement Date**")

Expiry date: 28/07/2026 ("**Expiry Date**")

This Agreement may be terminated early in accordance with the Standard Terms (as defined below).

In the event that this Agreement is terminated early for any reason whatsoever, you acknowledge and agree that the Deposit (as defined below) will be not refunded by the Company to you, and in the event that you have not paid the Deposit in full, you shall make payment of any shortfall in Deposit to the Company immediately.

4. In consideration for the use of the Vehicle, you shall pay to the Company, and the Company shall be entitled to, a facilitation fee of SGD134.07 per day ("**Facilitation Fee**") (comprising a daily lease rate of SGD \$113.00 + prevailing GST) commencing on the Commencement Date and ending on the date on which this Agreement expires or is terminated. For the avoidance of doubt, the Company shall be entitled to charge goods and services tax at the prevailing daily lease rate and adjust the Facilitation Fee and any other amounts payable by you to the Company under this Agreement (including the Standard Terms (as defined below)) to reflect any changes in the goods and services tax.

As a matter of goodwill, the Company will waive the Facilitation Fee payable for the Commencement Date.

5. On the Commencement Date, you shall place with the Company a deposit amounting to SGD500.00 ("**Deposit**"). The Deposit may be refunded to you only in accordance with the specific circumstances specified in the Standard Terms.

6. You shall also pay to the Company a daily collision waiver damage fee of SGD10 (before GST) for purposes of reducing the amount of insurance excess that you may be required to pay in the event of an accident or incident involving the Vehicle. Please refer to the Standard Terms for the further terms and conditions in respect of such collision waiver damage fee.

> Back to OneMotoring

Land Transport Authority
Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 12 Aug 2024 / 09:02:14

Receipt Date/Time : 12 Aug 2024 / 09:02:14

Tax Invoice/Receipt

Receipt No. : ITNET-00000-240812-000405

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 - SLN8873D As at 01 Aug 2024/16:25:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SLN8873D Enquiry Fee 20240812085957452259	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				
	526471XXXXXX9201	eNETS Credit Card		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 AUTHORISATION

To: MIRAI AUTO PERFORMANCE

RE: ACCIDENT INVOLVING VEHICLE NOS. SN6535X & SLN8873D
ALONG Townshend Road ON 01.08.2024

I/We Lumens Pte Ltd NRIC / Passport No.: 201426961K
the owner of vehicle no. SN6535X hereby authorise you to commence repair to the said vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request:

- 1) I/We hereby irrevocably authorise you to demand, claim, settle (in any manner you deem fit), receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceedings, if necessary, in my/our name for the cost of repair and loss of use, etc and to appoint any solicitor to act for me/us in respect of the claim and all or any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third-party claim to you and my/our solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated directly to you after deduction of their costs on a solicitor and client basis. I/We undertake to co-operate fully with you and my/our solicitors to see the claim to a successful conclusion.
- 2) If the third-party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim directly from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my/our behalf.

- 3) If the own insurers' claim is not applicable and/or the third-party claim fails and/or either of the aforesaid is inadequate, I/we undertake to pay you for your expenses, costs and fees immediately.
- 4) I undertake to pay you the cost of repair of my vehicle and all costs, fees and expenses incurred by you in pursuing the claim on my/our behalf, in the event the contents of my accident report is untrue or inaccurate or not believed by the court.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of solicitors on my/our behalf as you shall deem fit for the purpose of the third-party/own insurer's claim.

I/We undertake to inform you and/or the solicitors appointed by you on my behalf in the event the third-party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third-party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third-party claim and in case the settlement monies is sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repair settled and related expenses, costs and disbursement incurred.

My/Our insurer is/are

Policy No. _____ Expiry Date: _____

Date: _____ Excess: _____



Owner's Signature/Co's Stamp (if applicable)

Witness Signature/Name

Date: _____

Attn: Motor Claims Department

Dear Sir Madam,

RE: ACCIDENT INVOLVING VEHICLE NOS. SNQ535X & SLN8873D
ALONG

Townshend Road
01-08-2024 ON _____

I/We, the registered owner of vehicle registration no. SNQ535X which was
involved in the above accident with vehicle no. SLN8873D insured by
India Int'l Ins Pte Ltd hereby authorize that any payment due
to me/us from the above said claim be paid to MIRAI AUTO (SINGAPORE) PRIVATE LIMITED.

I/we hereby indemnify MIRAI AUTO (SINGAPORE) PRIVATE LIMITED against all claims and/or
damages which may arise from all actions taken for or on my/our behalf.

Yours faithfully

Owner Signature (company stamp if applicable)

Name in Full: _____

NRIC / FIN / UEN No: _____

Address: _____

