JK AUTOMOBILE PTE LTD

60, KAKI BUKIT AVENUE 6 ARK@KB Singapore 417892 Tel: 6455 2957 Fax: 6445 2368 Email: jkautopl@gmail.com GST NO: 201425206K

By Email

Date: 06 May 2016

Our Ref. No.: JK0416-0236

Attn: The Motor Claims Department M/s AIG Asia Pacific Insurance Pte Ltd. **CHARTIS Building** 78 Shenton Way #07-16 Singapore 079120

Dear Sir / Madam

PROPERTY CLAIM ONLY

ACCIDENT INVOLVING SKC1562S AND SK111E ON 19/04/2016 ALONG CORONATION WALK TURNING CORONATION SHOPPING PLAZA

We refer to the above-mentioned accident.

We are writing on behalf of M/S TAY NGIANG MENG the registered owner of motor vehicle number SKC1562S which was involved in the above accident.

We are instructed that the above accident was caused by the negligence and management of your insured's vehicle No: SK111E As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows: -

1. Cost Of Repair (Inclusive of 7% GST) 2,300.50 : S\$ 2. Loss of used (2days x \$100) 200.00 : S\$ 2,500.50

TOTAL AMOUNTS

We enclosed a list of the supporting documents: -

- (a) Original Final Repair Bill
- (b) GIA/Police Report Lodged By Our Client
- (c) Letter of Authority
- (d) Authorisation to Act & Letter of Discharge

Kindly acknowledge receipt of the above said documents and your favorable reply is greatly appreciated.

Any settlement reached is strictly without prejudice to and shall not affect any other claims arising from this accident. Settlement is solely for the items claimed only.

Yours faithfully,

Edison

JK AUTOMOBILE PTE LTD

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TAX INVOICE

M/s AIG Asia Pacific Insurance Pte Ltd.

CHARTIS Building

78 Shenton Way

#07-16

Singapore 079120 TEL: 6419 3000

FAX: 6835 7416

DATE

: 06/05/2016

VEHICLE NO : SKC1562S

MAKE/MODEL: MER BENZ E200 ACC DATE

: 19/04/2016

CLAIM NO

: JK0416-0236

POLICY NO

AMOUNT S\$

LUMP SUM REPAIR COST

Repair Amount

2,150.00

GST 7%

150.50

Total

2,300.50

Singapore Dollars: Two Thousand Three Hundred Fifty Only.

JK Automobile Pte Ltd

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 Authorised 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 ability
- 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 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

	ACCIDENT STATEMENT
Date Of Report	20/04/2016 11:24
Date Of Accident	19/04/2016 12:00
Exact Location Of Accident	CORONATION WALK TURNING CORONATION SHOPPING PLAZA
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKC1562S

Insured/Policyholder

Name Of Registered Owner TAY NGIANG MENG

NRIC No S1567931Z Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-92718389

Alternative Phone No Office-92718389

Vehicle Particulars

Manufacturer MERCEDES-BENZ

Model E200

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

If No, Please state action to be taken

Third Party

Vehicle Category

Private Car

Insurance Company

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.

Type Of Coverage Comprehensive

Fleet Policy No

Policy Number 2100267218

Cover Note Number

Driver

Name of Driver TAY NGIANG MENG

 NRIC No
 \$1567931Z

 Date Of Birth
 03/05/1962

 Occupation
 Indoor

 Date Of Driving Pass
 20/01/1981

Driving Experience 35 Years And 2 Months

Gender Male

Mobile Number (Local) +65-92718389

Fax Number

Contact Number Office-92718389

EMail Address NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company No
If No, Relationship of the Driver with the Insured Owner

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident Unknown - REFER TO SKETCH AND STATEMENT

Weather Conditions Clear Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident?

Was any body injured in the Accident?

Was any other material or property damaged?

Yes

Was there any video captured by Car Camera?

No

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

Yes

No

No

If Yes, Please state which Police Station

Police Station Name Bishan Neighbourhood Police Centre

Police Station Address ROAD: 20 Bishan Street 23, POSTCODE: 579757, COUNTRY: Singapore

Police Station Contact **TEL NO**: 1800-5529999 - **FAX NO**: 65561905

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SK111E

Vehicle Make/Model/Colour

TOYOTA ESTIMA

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name LOW EE CHING

Phone Number 90017431

Email Address

SKETCH PLAN

IMPORTANT NOTICE

- 1. Rease report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and for 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 Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. An v 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 Sin gapore (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. Comsent under the Personal Data Protection Act (PDPA)

lunde rstand, 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' law yers/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;

BUKIT TIMAH RD

WITNECC SGK34SIX

- (iv) ad ministering 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' 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/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policy holder's Signature / Date &

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

CORONAITON SHOPPING PLAZA

CARPARK

Sketch Plan

Witnessed by Reporting Centre Personnel

REFER	70	THE	POLICE	REPORT	MO	THOK	0420/2000	
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Declaration

IWe declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre





Date of Expiry:

Police Station Of Origin:

Bishan N.P.C

Self Employed

20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

T/20160420/2000			

1 of 3

Report No. T/20160420/2000

REPORT OF	A TRAFFIC A	ACCIDENT					
Date/Time Report Made: 20/04/2016 00:17			Vide Report No.:	Station Diary No.: 12			
Informant'	s Particul	ars.					
Name of In	formant:	•	Address:				
TAY NGIANG MENG			APT BLK 112 PASIR RIS STREET 11 #07-647 SINGAPORE 510112				
ID Type / II	O No.:		Contact No.:				
NRIC NO / S1567931Z			Home/Office: Mobile: 92718389				
Nationality:			Email:				
SINGAPORE CITIZEN			<u> </u>				
Sex:	Age:	Date of Birth:	Type of Informant:				
Male 53 03/05/1962			Driver				
Raće:			Language:	Institution / School Name:			
Chinese			English	ļ			
Occupation:			Driving Licence Information:				

Class: 3

Type of Accident:	Injury Others	Drink Drive:	Date/Time of Accident:	Type of Location: Straight Road	
Accident:		No	19/04/2016 12:00)	
Location: Along Road 1 CORONATIO	N WALK	•			
Towards Bt Ti	mah Road (nearby	to the main entrance to 0		laza) Road Speed Limit:	
Clear		Dry		•	
Traffic Flow:		Traffic Control:		Fraffic Volume:	
Two Way Not Controlled			Į Į	Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance:	

	ehicle Involved	 Figure 1 and the region was and the purpose for the purpose. 	and the second section of the second section is a second section of the second	har metalikasa zitenasi kalanda ana	DEPOSISSORS FOR THE SUPPLIES.	CAMERICA CONCENTRALES NO
Vehicle No.	Type	Make	Model	Color	Condition	No of
SGK3451X	Car	TOYOTA	WISH 1.8 A	Grey		0
SK111E	Car	TOYOTA	ESTIMA 3.5	Red		0
SKC1562S	Car	MERCEDES BENZ	E 200CGI	Grey	Slightly Damaged	0

Details of Vehicle Insurance
Value No. Lineurance Company Instrume No. Effective Expiry Date
Vehicle No. Insurance Company Insurance No. Effective Expiny Date





Police Station Of Origin: Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

2 of 3 Report No. T/20160420/2000

CONTINUATION OF REPORT

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Details of Ve	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKC1562S	AIG ASIA PACIFIC INSURANCE PTE.	2100267218	26/07/2015	25/07/2016
	LTD.			

Details of Perso	n Involved	AND CARDON STATE				
Any Pedestrian I	nvolved: No					200 and 400 and 500 an
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver					Geraham USA Salah Salah Salah	
Name	TAY NGIANG MENG		ID No	•	S1567931Z	
Related Vehicle	SKC1562S (Car)			Conta	ct No.	92718389
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	19/04/2016	Date Disc	harge	19/04	/2016	
No. of Days granted Medical Leave 03			Degree of		NIL	

Brief Details.

On 19th April 2016 at 12:00pm, I was driving my vehicle registration number: SKC1562S (V1) and driving along Coronation Walk towards Bukit Timah Road (Infront of Coronation Plaza at the main entrance).

It was 2 ways road. I wished to turn right to the main carpark however there was another vehicle registration number: SGK3451X (V2) from the opposite direction, reversing as the carpark was full.

As such, I was in the stationary position just before the yellow box. There was an impact from my right front portion and I discovered that there was another vehicle registration number: SK111E (V3) had collided to my vehicle.

The other driver whom is a Malay driver alighted from the vehicle and refused to give his details to me. He told me to report to my insurance. After the accident, there is a witness who came and approached me. He claimed that he witness (V2) the occurrences and wished to by my witness.

I decided to lodge a Police report for insurance claimed.





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Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

Report No. T/20160420/2000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Signature Of Informant: MOHAMAD FARID BIN JAMAL Date/Time: Signature Of Interpreter: 20/04/2016 00:17 Not applicable Officer In Charge Of Case: Classification Of Case: TP / AEIT / YEO GEAK ENG CECILIA Contact No.: 65476404 Authéntication Stamp Vagagore Police 0.00NP168

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

WITNESS STATEMENT
Name : Lowee ching
NRIC/Passport No.: S 7987131 A
Address : BB Admiralty St #02-07
(S) 再787440
Email: L: brother-low @gmail.com.
Telephone No : 90017431
On (Date) 19/4/16 at about 1150 Hiss along Coronation Walk
On 19/4/16 at about 1150HRS, I was driving.
along coronation Walk marking a left turn into
Coronation shopping plaze carpark. As the carpark
is full, so I make a reverse out to find another
parking place. After making reverse, as I about
to drive straight, Suddenly a red car SKIIIE
COPPOSITE DIRECTION) overtake a car SKC 15625
which is stationary and drive into my lane
(again traffic flow) and hit onto a car SKC 1562S
after he saw my car and immediately cut
back to his lane.
I willing to be a witness as I saw the red car
SKIIIE hit onto the car SKC15625.

The state of the s

Signature

TO: THE MOTOR CLAIMS PEPARTMENT ALG AGIA PACIFIC INSURANCE PTE LTD CHARTIS PUILDING 78 SHENTON WAY # 07-16 SINGAPORE 079/20
Dear Sirs,
CLAIMANT:
ACCIDENT INVOLVING SKC 1562S AND SK/1/E ON 19/04/2016 AT CORONATION WALK TURNING CORONATION SHOPPING PLAZA
I/We, TAY NG/ANG MENG, am/are the registered owner of motor car no. <u>CKC 1562S</u> .
Please note that I have assigned all compensation monies due to me/us in the above said accident to M/S JK AUTOMOBILE PTE LTD.
I/We, hereby authorize you to release all compensation monies pertaining to the above mentioned accident to M/S JK AUTOMOBILE PTE LTD and forward your settlement cheque to M/S JK AUTOMOBILE PTE LTD whom I had authorized to collect the said compensation monies.
Thanks You.
Signature of Claimant Witness By

Date: 06-MAY-2016

Date: 06- may-206



AUTHORIZATION TO ACT

(AIG Asia Pacific - EXPRESS THIRD PARTY CLAIM)

I, TAY HGIANG MENG	(the third party claimant) of BLK 112 PASIR RIG ST-11
# 87-647 (510112)	(the third party claimant) of BLK 1/2 PASIR RIG ST.// (address), owner of SKC /5625 (vehicle no.)
hereby authorize JK AUTOMOBILE	PTE LTD ("the workshop") to act for me
	and/or rental and/or loss of use ("claim") for my vehicle
no. SKC1562S that was damaged pu	rsuant to the accident which occurred on 19-04-2016
(date) along COPONATION WALK FIRMIN	G CONANATION SHOPPING PLAZA (location) involving vehicle no/s
SKME ("the accident").	
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	of the workshop.
I further acknowledge that any settlemen	nt the workshop may reach on my behalf is on a withou
prejudice and without admission of liabi	lity basis insofar as the driver/owner/insurers of the other
vehicle/s is concerned.	
Dated this (day) of MAY	(month) 20 <u>/6</u> (year)
× AZ	Zatte tuy 20104 +
Signed by "the third party claimant"	Signed by "the workshop"
(with chop if applicable)	(with chop)

* STRICTLY WITHOUT PREJUDICE TO PERSONAL INJURY CLAIMS.



***This Discharge Voucher applies only to the claimant's clair for his property damage and will not affect his personal injuries claim and/or uninsured losses claim on a later date.

Further, the settlement terms herein shall not be used as evidence to prejudice the claimant's personal injuries claim and/or other examples and the subject matter in the action.

(AIG Asia Pacific - EXPRESS THIRD PARTY CLAIM)

"We/I, JK AUTOMOBILE PTE LTD ("the workshop") hereby confirm that we/I
have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd <u>LKK</u>
AUTO CONSULTANTS PTE LTD (name of surveyor) with respect to the amount claimed for
(Repair Cost), S\$ (Loss of rental/use), S\$ (Disbursement), for vehicle no.
KC/562S that was damaged pursuant to the accident which occurred on 15-04-2016 (date) along
COPERATION WALK TUKNING CORONATION SHOPPING PLAZA (location) involving vehicle no/s SKIII E
pursuant to the inspection conducted on $\frac{22/64/20/6}{20/6}$ (date) at "the workshop".
We/I confirm that we/I are/am authorized by the owner TAY NGIANG MENG
("the third party claimant") of vehicle no. <u>SKC/5625</u> make the claim as set out in the above paragraph
and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I
enclose herein the letter of authority given by "the third party claimant".
We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss
and/or expense that they will or have already incurred in the event that "the third party claimant" after the
above said agreement lodges a further claim against the former for any loss and expenses suffered
pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to \$\frac{\xiC}{5625}\$
(vehicle no.) as a result of the accident.
We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third
party claimant' pursuant to the accident and that further this settlement is reached on a without prejudice
and without admission of liability basis.
and willout definistion of futility dubit.
This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive
jurisdiction over any dispute arising out of the same.
Dated this 66 (day) of MAY (month) 2016 (year)
(month) 20/2 (cm)

Signed by appointed surveyor

Signed by "the workshop" (with chop)