

Ethicarz Pte. Ltd.

56 Loyang Way, Loyang Enterprise Building

#04-04 Singapore 508775

Tel: +65 6384 4404 Fax: +65 6384 0444

E-mail: enquiries@ethicarz.sg Comapany No.: 201729003E

Our Ref

: SKN1339M

Your Ref

: SKN7441K

Date

: 14/3/2018

Attn

: Motor Claim Department

Dear Sir/Mdm,

ACCIDENT INVOLVING

SKN1339M & SKN7441K

DATE OF ACCIDENT

20/1/2018

ALONG

TELOK BLANGAH RD

We refer to the above mentioned accident.

We are claiming as below:

Cost of Repair

4,400.00

Car Rental 1 DAY AT \$120/DAY

120.00

Car Rental

6 DAY AT \$120/DAY

720.00

LTA Search

7.45

Third Party

29.00

Grand Total

: \$ 5,276.45

The above settlement is in respect of our client's for damage pertaining to his motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his personal injuries.

Kindly take note that our office is located at 56 Loyang way, Loyang Enterprise Building, #04-04 Singapore 508775

If you have any queries, please contact Siew Khim at 6384 4404, or email 'skgan@ethicarz.sg

Yours Failthfully, Siew Khim





Invoice To:

AXA INSURANCE PTE LTD 8 SHENTON WAY, #24-01 AXA TOWER SINGAPORE 068811

Description

LUMP SUM COST OF REPAIR FOR SKN1339M

Ethicarz Pte. Ltd.

56 Loyang Way, Loyang Enterprise Building #04-04 Singapore 508775

Tel: +65 6384 4404 Fax: +65 6384 0444

E-mail: enquiries@ethicarz.sg Comapany No.: 201729003E

REPAIR BILL NO.

Repair Bill No.

Date

14/3/2018

Vehicle No.

SKN1339M

Vehicle Model

MERCEDES-BENZ B170

Accident Date

20/1/2018

Amount

\$

4,400.00

Kindly cross & make cheque payable to : Ethicarz Pte. Ltd.

Total Payable

\$

4,400.00







Ethicarz Pte Ltd

56 Loyang Way #04-04 Loyang Enterprise Building Singapore 508775

Tel: +65 6384 4404 | Fax: +65 6384 0444

Company No: 201729003E

LETTER OF AUTHORISATION

Accident on
In consideration of Ethicarz Pte Ltd, 56 Loyang Way #04-04 Loyang Enterprise Building Singapore 508775, repairing my/our motor vehicle no SKN1339M at my request, I/We, Ng Kok Yong ("the claimant") of 21 Hillwew Terrale # 06-12 s (669232) (address) bearing NRIC No S7624093) the owner of motor vehicle no SKN1339M, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.
I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by Ethicarz Pte Ltd .
I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.
In the event that my/our claim is unsuccessful, I/we undertake to pay to Ethicarz Pte Ltd The cost of repairs to my/our vehicle. In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into Ethicarz Pte Ltd account. Upon clearance of the said cheque, I/we further authorize Ethicarz Pte Ltd and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to Ethicarz Pte Ltd shall amount to a good discharge of Ethicarz Pte Ltd and/or their appointed law firm's obligation to me in respect of the settlement monies.
Dated this day of (month) 20 (year)
Signed by "the claimant" Name: No Kok Yorg NRIC No: \$7624093)



155 Kaki Bukit Avenue 1 Shun Li Industrial S (416012) Tel: 6748 9747 Fax: 67483762 www.dreamcarrental.com.sg

Reg No: 201420013Z

SKN1339M

,		AG	KEEIVIENT FOR	<u>IVI</u>			
NAME:	ng kok yong			1	NRIC:	S7624093J	
CONTACT:	9 239 2979 (MOBILE) (RESIDENCE)						
ADDRESS	21 Hill view Terra	ce #06-12	5(669232)		SINGA	PORE ()
Hereby declare the	hat I will take over this sta	ated vehicle for the	stated period and sh	nall abide to the ter	ms and condi	tions as listed below	,
Vehicle Registration No	Model	Colour	From	Time	Till	Time	
552 JUT 6 H	white	Colour	22/01/18	3-18 pm HRS	23/1/	18 6pm	HRS
ehicle is in your po	e is insured for use on Singa ssession and is driven in or lose, fire or theft caused to	outside of Singapor	The state of the s	Andrew Control of the	and the second s	The state of the s	
2. The use of this ve the driver.	hicle during the period fron	n the date of taking o	over until the terminat	ion date of this agree	ment will be u	nder the full responsib	oility
using the vehicle, th	above named/authorized in the owner will have the right that accident, damages, los	to repossess the ve	hicle stated above and				
	e be involved in any traffic of times and any amount gove				with the vehice	cle that arise under you	ur ca
5. Upon claiming th	e vehicle's insurance which	the driver stated al	bove shall be liable to	pay an excess of S\$1	0,000/- NETT	to the owner.	
any other breakdov.	me if the vehicle breakdown on not due to vehicle mainte of Sunday, PH 24Hours)						
negligence, repair a	of the vehicle will be borne and any misc cost shall be bo diately and seek for advice/	ourn by the driver. If	there is any problem of	due to wear and tear	The state of the s		
	ted met with an accident, t t repairing the vehicle at a ation.						
Contract to the second	ch includes physical damag ve arrangements is made.	e or any other gener	ral damages to the veh	nicle, payment of rep	air cost has to	be made immediately	unle
	ing will not be responsible during storage or during th						
	s to return vehicle's fuel at er for every 10% of fuel use		he/she collect at the	level of% other	erwise, a paym	ent of S\$20.00/- NETT	will
12. Vehicle is hande	ed over clean and it should	be returned clean. If	vehicle is returned dir	ty, a nominal charged	of S\$10.00/- s	shall be collected.	
11. NO Smoking, D	urians and Transportation	of Pets are allowed.	Hirer is responsible fo	r a penalty of S\$500,	/-		
	Reckless Driving, Racing or cle with an additional S\$15				s vehicle. The	owner reserves the ri	ghts
13. Should there be compensation of S.	pe any breaches to any of \$2000/- imposed.	the above clauses;	the owner reserves	the right to reposse	ess the vehicle	without any refund	with
A-mand and facility						•	
Agreed and acknow	vledged the above stated by	/ :					
Name:		aasino	\				
Signature:		Co. Reg. No. 32	b) el d				
NRIC:		E POJO *					

I have read and fully understood the content of this agreement. I will not dispute to the claims made against me for any incident occurring during the stated period and thus this agreement.



INVOICE



Dream Car Leasing Pte. Ltd. (Co. Reg. 201420013Z)

155 Shun Li Industrial Park, Kaki Bukit Ave 1, #02-01 S(416012)

Tel: 6748 9747 Mobile: 8128 8789/ 9845 1151

BILL TO

NG KOK YONG 21 HILLVIEW TERRACE #08-12 SINGAPORE 669232 INVOICE #
INVOICE DATE

00154

25/01/2018

DESCRIPTION		AMOUNT
Rental of Toyota Vios (SJS2056H) from 22/01/2018 to 23/01/201	120.00	
	TOTAL	\$ 120.00



AZ LEASING LLP

NO. 1 KAKI BUKIT AVENUE 6 # 02-22 AUTOBAY@KAKI BUKIT SINGAPORE 417883

TEL: 8132 1313 FAX: 6753 5346

EMAIL: azleasing.sg@gmail.com Co. Reg. No. T17L0515G

VEHICLE RENTAL AGREEMENT No. 1079

HIRER'S PARTICULARS	Vehicle No: 8 Lm 1929 DReplace Veh No: 5KN 1339 M			
Name:	Mileage Out: 257345Mileage Out:			
Address:	Make & Model: T. Make & Model: Auto / Manual			
	OUT: Date 23 01 (8 OUT: Time			
Contact Person: Tel:	HIRE EXPIRY TIME EXPIRY			
DRIVER'S PARTICULARS	RENTAL CHARGES			
Name:	Daily @\$			
Name.	Weekly @\$			
	Monthly @\$			
Address:	Hours @\$			
	Others @\$			
	CDW @\$			
Tel No: H/P No:	PAI @\$			
P.P. / I.C. No.: D/L. NO:	Delivery Service			
Date of Birth: Date of Issue / Expiry:	SUB-TOTAL \$			
Nationality: Pl. Of Issue:	OUT IN			
Occupation: Driving Exp:	$\frac{1}{2}$ $\frac{1}{2}$			
Refundable Deposits:	E FE F			
Cash/Nets/Cheque No.:	EXTENSION			
(A) ACCIDENTS (D) - DENTS (S) - SCRATCHES	Deposit Received			
FRONT	Misc.			
	ESTIMATED TOTAL RENTAL \$			
	Sales Person Code:			
ACCESSORIES CHECK Ashtray STD Tools Radio / Cass CD / Cartridges RIGHT RIGHT RIGHT RIGHT	Hirer is responsible for the first \$ excess for collision / damage to first party. (i.e) AZ LEASING Vehicles (including windscreen) and also first \$ excess for collision/damage to third party's vehicles for each and every accident / damage HIRER's Signature Additional Driver's Signature			

I/We agree to the terms and conditions above, overleaf and that all information given is true and correct in all respect. My/Our Driving licence(s) is /are current and not disqualified from driving.

IMPORTANT

- 1. IN THE EVENT OF AN ACCIDENT, THE HIRER OR AUTHORISED DRIVER:
 - (I) shall report all accidents involving the said vehicle to the Owner immediately
 - (ii) shall take immediate steps to complete and sign Form Mar 1(Motor Accident Report from)and do all other acts required in compliance with the "NON-INJURY MOTOR ACCIDENT REPORT SCHEME" (the form will be made available when the accident is reported to the owner)
 - (lii) shall report to the police within 24 hours from the occurrence, the following types of accidents:
 - (a) injury case;
 - (b) non-injury case involving a Government vehicles or damage to Government property;
 - (c) non-injury case involving a foreign vehicle (to obtain their motor insurance, policy, passport No./Name of the driver, Vehicle number, Log card and Vehicle road tax informational);
 - (d) non-injury case involving a pedestrian or cyclist.

RETURN OF VEHICLE - THE HIRER/DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER/DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO AZ LEASING LLP AND THE SAME SHALL BE A CCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

,	DEPOSIT REFUND	REMARKS	CHECKED BY	MILEAGE	TIME IN	DATE IN
/ Ses						
SIGNATURE OF HIRER/DRIVER						



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

23 Jan 2018 / 10:46:09

Receipt Date/Time: 23 Jan 2018 / 10:46:09

Tax Invoice/Receipt

Receipt No.: ITNET-00000-180123-000445

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 - SKN7441K As at 20 Jan 2018/19:30:00 Insurance Co: AXA INSURANCE PTE LTD Insurance Enquiry - SKN7441K Enquiry Fee		7.00	0.49	7.49
20180123104523872574		7.00	0.40	7.10
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	xxxxxxxxxxxx8056	Credit Card: Visa/MasterCard		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	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.



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-012872

Date of Request:

24/01/2018

Your Ref No:

WALK IN BRYAN

ETHICARZ PTE LTD

56 LOYANG WAY #04-04 LOYANG ENTERPRISE BUILDING

SINGAPORE 508775

Dear Sir/Madam,

Your Vehicle No:

SKN1339M

Date of Accident:

20/01/2018

Place of Accident:

TELOK BLANGAH RD

Involving Vehicle No: SKN7441K,SLF1462U

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-012873

Date of Request:

24/01/2018

Your Ref No:

WALK IN BRYAN

ETHICARZ PTE LTD

56 LOYANG WAY #04-04 LOYANG ENTERPRISE BUILDING

SINGAPORE 508775

Dear Sir/Madam.

Date of Accident:

20/01/2018

Vehicle No:

SKN1339M

Place of Accident:

TELOK BLANGAH RD

Involving Vehicle No: SKN7441K

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SKN7441K	TELOK BLANGAH RD	14.0	00 1	13.08
GST Amount	0.92			
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[] GIRO [X] Cash [] Cheque