KIM CHWEE AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-50 Autobay Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 199802379R

Date: 02.05.2018

AXA Insurance Singapore Pte Ltd 8 Shenton Way #27-01 AXA Tower Singapore 068811

Attn: Motor Claim Department

ACCIDENT INVOLVING VEHICLE: SLL251L AND SGE4281U ON 16.04.2018

We are the authorized repair workshop for the owner of motor vehicle no: **SLL251L**, which was involved in the captioned accident with your insured vehicle no: **SGE4281U**. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

		\$ 4,356.63
3)	GIA Search Fee	\$ 2.00
2)	Loss Of-Use-Rental	\$ 360.00
1)	Cost of Repair (inclusive of GST)	\$ 3,994.63

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) Rental Agreement/Invoice
- e) Insurance Certificate
- g) Letter of Authorisation, etc...

- b) Vehicle Registration Log Card
- d) I/C & Driving Licence
- f) GIA Search Result/GIA Report

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Jason Tang (jason@fast/echauto.com.sg)

For Kim Chwee Auto Pte Ltd

TAX INVOICE

KIM CHWEE AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-50 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 199802379R

Tax Invoice: 20250

AXA Insurance Singapore Pte Ltd

Attn: Motor Claim Department

8 Shenton Way #27-01 AXA Tower Singapore 068811

Vehicle No:

Date:

02.05.2018 SLL251L

Make/Model: TOYOTA HARRIER

Chassis/Eng#

Accident Date: 16.04.2018

Claim No:

0418-20250

Amount

S\$

3,733.30

To proceed on parts by parts repair inclusive of knocking ,spray painting labour charges and etc.

E. & O. E.

Total: S\$

3,733.30

GST @ 7%: S\$

261.33

Amount Due · S\$

3,994.63

for KIM CHWEE AUTO PTE LTD

All Invoices are subjected to GST

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: NG HOWE THIAN

Invoice

: DCR-2018-04-16

Date: 19.04.2018

Agreement No: 20530
Payment Term: LOD

DESCRIPTION

AMOUNT

Rental charges for vehicle :

SKG3439G

(0418-20250)

\$ 360.00

Rental Period from 17.04.2018

to

19.04.2018

E. & O. E.

Total \$

360.00

NANCY LAM

for Dynamic Car Rental

Dynamic Car Rental DCR-2018-04-16

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 20530

Name Ny Howe Thian		REG. No. MAKE MODEL:			
ADDRESS)		SK-3436 DIE	SEL PETROL E	1/4 1/2 3/4 F	
			KM IN	DATE & TIME IN	6-30pm
the second of the second			- KM OUT	DATE & TIME OUT	3011
THE RESERVE OF THE PARTY.	A series of the series of the series	sour of her or has a design	KM DRIVEN	TIME USED	2 7 7 - 1
NAMED DRIVER				and the second second	
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	The second street and second on the	NAME OF TAXABLE PARTY.	ont -
The Land Letwer	ti sati salahadi Atausi	no. And of the grand property	HOURS		in a full
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	2 DAYS	es\$ 180	360
ADD NAMED DRIVER			WEEKS	@S\$	
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	MONTHS	@S\$	TRUTH.
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALLING, RENTER AGREES TO PAY ADD FEE		360
IMPORTANT NOTES:			FOR COLLISION DAMAGES WAIVER (C.D.W.)		
This vehicle is licenced to carry 0 No refund will be given for vehicl	e returns early.		The same and the same	TOTAL RENTAL	S IF I P
No refund will be given for period Hirer is liable to pay first \$4000 un is under repair.		lus loss of earnings while damaged vehicle	Historian country of control	DELIVERY FEE	
Hirer is liable to pay all parking for			American Mr. 1976	COLLECTION FEE	Farke
			PER DAY PER WEEK	PER MONTH	Carl Til
"Sec II - Used in S'pore Only :SG "Sec I - Used Outside S'pore On "Sec II - Used Outside S'pore On "Sec II - Used Poutside S'pore On Wiscreen Excess In S'pore: SGE Wiscreen Excess Outside S'pore ADDITIONAL CONDITIONS: "Geographical areas: Singapon	BD2000 ly: SGD4000 hily: SGD4000 D100 a: SGD200		BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)		
Driver must be: a) 18 years old and above; b) holding a valid relevant class			X		
* Additional Own Damage Excess of S\$1,000 is applicable for any named/unnamed drivers who: a) age 22 to 23 years old; b) age 66 to 70 years old; c) with driving experience of 1 year to less than 2 years in Singapore on the relevant classes of driving		PER DAY PER WEEK \$ \$	PER MONTH \$	Was S	
license.			PREPAYMENT	TOTAL CHARGE	
 a) is 18 years old to 21 years of b) is 71 years old and above a 	nd/or		CHECK	DEPOSIT	nor-dh sa
	est than 1 year on the relevant class	all expensive and important items to be	CASH	A PROPERTY OF	
removed away from this replace	cement vehicle. We/I will not be res	sponsible for any reporting of such losses. I plus loss of earning while damage vehicle	RECEIPT NO.	NETT CHARGE	Complete all
is under repair.			THE A STATE OF THE STATE OF		
Hirer is responsible for Addit to the THIRD PARTY DAMA			AMOUNT DUE / REFUND		
	S AND CONDITIONS ON BO MENT AND AGREE THERE		neally with the second of the leading of the leadin	ter and of the three of the control	
SIGNED BY THE PARTIES	HERETO ON THE	lente figera de 1911 - Ologo estado	DAY OF		
			1		
		of spirits gave on and Mary asymmetric	7	Analog States and Co.	
X	24		X	fun	
DY	NAMIC CAR RENTAL		RENTER'S	S/DRIVER'S SIGNA	ATURE



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-18-072252

Date of Request:

12/05/2018

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

12/05/2018

Enquiry By

Tang Kok Wee, Allan

TP Vehicle No.

SGE4281U

Accident Date

16/04/2018

DESCRIPTION	AMOUNT (S\$)	
TP Insurer Enquiry	1.87	
GST Amount	0.13	
Total Amount Due (GST Inclusive)	2.00	

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] 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

Third Party Insurer Enquiry

Our Ref No:

GR-18-072252

Date of Request:

12/05/2018

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

12/05/2018

Enquiry By

Tang Kok Wee, Allan

TP Vehicle No.

SGE4281U

Accident Date

16/04/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGE4281U	AXA Insurance Pte Ltd	17/03/2018-16/03/2019	6338 7288

Thank You.

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.

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AUTHORISATION TO ACT

I/We, Ng Howe Thian (the third	party claimant") of BIK 103A Depot Road
+ J4-545 Depot Helights SIUI 103 (address), or	vner of SLL251L (vehicle no.) hereby
authorize Kim Chuee Auto Pte Ltd	_("the workshop") to act for me with respect
to my claim for repair costs and/or rental and/or lo	ss of use ("claim") for my vehicle no.
SLL 351 L that was damaged pursuant to the	accident which occurred on 16/4/18 (date)
along Clementi Ave 3 > Ave 2	(location) involving
vehicle no/s SGE 42814 ("the accident").	
I further authorize the workshop to settle my abo	ve 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 wo	orkshop may reach on my behalf is on a
without prejudice and without admission of liability	y basis insofar as the driver/owner/insurers
of the other vehicle/s is concerned.	
Dated this (day) of (month) 20(year)
	4 LTD
Sian -	
Out and	THE THE PARTY OF T
THE	4
Signed by "the third party claimant"	Signed by "the workshop"
(with company stamp if applicable)	(with company stamp)