



**江氏修理汽車私人有限公司**  
**KANG CAR REPAIRERS PTE LTD**

1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883

TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

Our Ref : KCR042018992DAI

Your Ref : SJW9857X

Date : - 5 SEP 2018

WITHOUT PREJUDICE

**Direct Asia Insurance (Singapore) Pte Ltd**

C/O LKK Auto Consultants Pte Ltd

51 Ubi Ave 1

#01-25 Paya Ubi Industrial Pk

Singapore 408933

Attention : Motor Claim Department

Dear Sirs,

Accident involving SFR992X and SJW9857X on 22.04.2018 along Tampines St 81.

We refer to the above accident. On our record showed that you are the insurer of motor vehicle SJW9857X.

We are instructed that the accident was caused by your insured's negligent driving and/or management of his vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense.

On behalf of and as authorized by Mr Yusof Bin Abu Kassim, the owner of motor-vehicle no: SFR992X, we submit his claim to you:

Cost of repairs (Inclusive of 7% GST)	\$ 4,280.00
Loss of use (6 days (5 days +1PRI)x \$80.00)	\$ 480.00
GIA search fee	\$ 2.00
	<u>\$ 4,762.00</u>
	=====

Enclosed herewith are copies of the following documents in support of our client's claim:

- 1) Tax invoice no: KCR-INV1800482
- 2) GIA report and certificate of insurance of SFR992X
- 3) GIA search fee and invoice

We hope to receive your early reply soon.

Thank you.

Yours faithfully,

**KANG CAR REPAIRERS PTE LTD**

.....



# 江氏修理汽車私人有限公司

## KANG CAR REPAIRERS PTE LTD

1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883

TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

M/S : DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD  
88 SOUTH BRIDGE ROAD  
SINGAPORE 058716

TEL: 65322888  
ATTN: Motor Claim Department

Your Ref No: SJW9857X  
Claim Type: Third Party  
Accident Date: 22/04/2018  
TP Veh Reg No: SJW9857X

Final No: KCR-INV1800482  
Claim No: EST1800109  
Date: 29 Aug 2018  
Policy No: 5069751627-03  
Veh Reg No: SFR992X  
Make/Model: HYUNDAI HD  
AVANTE 1.6A  
Chassis No: KMHDU41BR9U679810  
Engine No: G4FC9U595919  
Reg. Date: 11/02/2009

### Tax Invoice to Vehicle No :SFR992X

PAGE:1

Description	Quantity	List Price	Amount
		S\$	S\$

As recommended by surveyor to proceed repair at total cost/lumpsum cost	S\$ 4,000.00
Add GST @ 7%	280.00
Total Amount payable	S\$ 4,280.00

TOTAL: SINGAPORE DOLLAR FOUR THOUSAND TWO HUNDRED EIGHTY ONLY

For Kang Car Repairers Pte Ltd

E. & O. E.

AUTHORISED SIGNATURE

## 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 withholding 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 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 Report	23/04/2018 11:33
Date Of Accident	22/04/2018 14:00
Exact Location Of Accident	TAMPINES ST 81
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFR992X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YUSOF BIN ABU KASSIM
NRIC No	S1463381B
Email Address	YUSOFABUKASSIM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98353574
Alternative Phone No	OFFICE-98353574

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5069751627-03
Cover Note Number	DRIVO CLASSIC

### Driver

Name of Driver	YUSOF BIN ABU KASSIM
NRIC No	S1463381B
Date Of Birth	20/10/1961
Occupation	INDOOR
Date Of Driving Pass	17/07/2001
Driving Experience	16 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98353574
Fax Number	
Contact Number	OFFICE-98353574
Email Address	YUSOFABUKASSIM@GMAIL.COM

Address	BLK 729 TAMPINES ST 71 #07-47
Postcode	520729
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	COLLISION - MAJOR/MINOR RD
Weather Conditions	DRIZZLING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

I WAS DRIVING STRAIGHT ALONG TAMPINES ST 81. SUDDENLY A VEHICLE B, SJW9857X CAME OUT ON MY RIGHT FROM THE EXIT OF THE CARPARK ON THE OPPOSITE DIRECTION WITHOUT STOPPING & COLLIDED TO MY RIGHT SIDE OF MY VEHICLE CAUSING DAMAGES ON MY FRONT AND REAR DOOR. I DID NOT MANAGE TO TAKE ANY SCENE PHOTOS AS THE TRAFFIC WAS ONE WAY TRAFFIC AND CAUSING MASSIVE JAM BEHIND MY VEHICLE. WE EXCHANGED PARTICULAR AND LEFT THE SCENE.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJW9857X
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	SHARINA BYNES SHAH SIN MEI NA
NRIC/Passport Number	S8713519E
Contact Number	92742794
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**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 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. The 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 lodgment 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/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' 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/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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

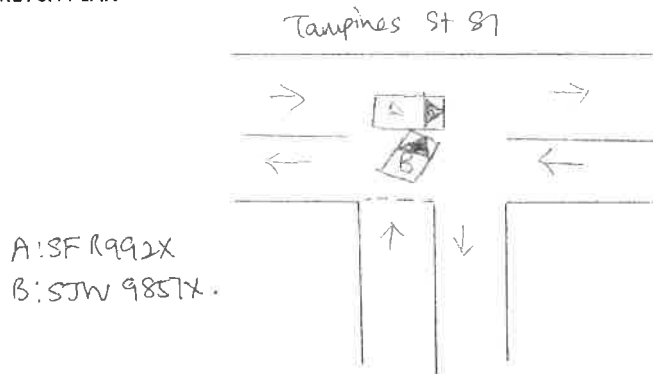
  
03/04/18  
Policyholder's Signature  
Date & Time:

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

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Sketch Plan Pg. 2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving straight along Tampines St 81. Suddenly, a vehicle B, STW 9857X came out on my right from the exit of the carpark on the opposite direction without stopping & collided to my right side of my vehicle causing damage on my front & rear door. I did not manage to take any scene photos as the traffic was 1 lane traffic & causing massive jam behind my vehicle. We exchanged particular & left the scene.

### DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time:

03/04/18

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5069751627-03

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SFR992X**  
Chassis Number : KMHDU41BR9U679810
2. Name of Policyholder : YUSOF BIN ABU KASSIM
3. Effective Date of Insurance : 11 Feb 2018
4. Expiry Date of Insurance : 10 Feb 2019
5. Persons or Classes of Persons entitled to drive#  
(a) The Policyholder.  
(b) Any other person who is driving on the Policyholder's order or with his/her permission.  
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#  
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: YUSOF BIN ABU KASSIM
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SKYWAY CREDIT & LEASING PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

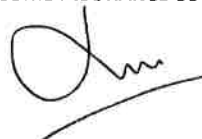
Agency : GOLDEN PRIME INSURANCE AGENCY (00000613808)  
Date of Issue : 27 Jan 2018 10:06 hrs  
Reprint : 27 Jan 2018 10:07 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

**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-18-060752

Date of Request: 23/04/2018

Your Ref No: Online Purchase

Kang Car Repairers Pte Ltd  
No 1 Kaki Bukit Ave 6  
#02-06 AutoBay@Kaki Bukit  
Singapore 417883

Dear Sir/Madam,

Enquiry Date 23/04/2018  
Enquiry By Yee Mei Cheng  
TP Vehicle No. SJW9857X  
Accident Date 22/04/2018

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJW9857X	Direct Asia Insurance (Singapore) Pte Ltd	26/02/2018-25/02/2019	65322888

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.

This is a computer generated document and requires no signature.

**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-18-060752  
Date of Request: 23/04/2018

Your Ref No: Online Purchase

Kang Car Repairers Pte Ltd  
No 1 Kaki Bukit Ave 6  
#02-06 AutoBay@Kaki Bukit  
Singapore 417883

Dear Sir/Madam,

Enquiry Date 23/04/2018  
Enquiry By Yee Mei Cheng  
TP Vehicle No. SJW9857X  
Accident Date 22/04/2018

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:

☒ GIRO ☐ Cash ☐ Cheque