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: KCR0520182671AXA Your Ref: S8M00GXL MC/TE

Date

1 3 SEP 2018

WITHOUT PREJUDICE

AXA 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 SJY2671A and SLG1688E on 11.05.2018 along Junction of Ang Mo Kio Ave 6/Ave 5.

We refer to the above accident. On our record showed that you are the insurer of motor vehicle SLG1688E.

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 M/S JD Limo, the owner of motor-vehicle no: SJY2671A, we submit their claim to you:

Cost of repairs (Inclusive of 7% GST)

\$ 4,654.50

Loss of rental (7 days x \$120.00)

\$ 840.00

GIA search fee

\$ 2.00

\$ 5,496.50

======

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

- 1) Tax invoice no: KCR-INV1800528
- 2) GIA report and certificate insurance of SJY2671A
- 3) Police report No: F/20180514/2072
- 4) Rental agreement and rental invoice
- 5) GIA search fee and invoice

We hope to receive your early reply soon.

Thank you.

Yours faithfully,

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

M/S:

AXA INSURANCE PTE LTD

8 SHENTON WAY #24-01 AXA TOWER

SINGAPORE 068811

ATTN: Motor Claim Department

Your Ref No:

SLG1688E Third Party

Claim Type: Accident Date:

11/05/2018 TP Veh Reg No: SLG1688E

Final No:

KCR-INV1800528

Claim No:

EST1800138

Date:

08 Sep 2018

Policy No:

Veh Reg No:

SJY2671A

Make/Model:

HONDA CIVIC 1.8L 5AT

Chassis No:

JHMFD16309S202197 R18A14013418

Engine No:

Reg. Date:

01/07/2009

Tax Invoice to Vehicle No :SJY2671A

		PAGE:1
Description	Quantity List Price	Amount
The state of the s	<u>S\$</u>	<u>\$</u> \$
	As recommended by surveyor to proceed repair at total cost/lumpsum cost	S\$ 4,350.00
	Add GST @ 7%	304.50
	Total Amount payable	S\$ 4.654.50

TOTAL: SINGAPORE DOLLAR FOUR THOUSAND SIX HUNDRED FIFTY FOUR AND CENTS FIFTY **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 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 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	12/05/2018 12:35
Date Of Accident	11/05/2018 19:45
Exact Location Of Accident	JUNCTION OF ANG MO KIO AVE 6 /AVE 5
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJY2671A
Insured/Policyholder	
Name Of Registered Owner	JD LIMO
Co Reg No	53337028X
Email Address	DAMIENTNG1975@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91685123
Alternative Phone No	OFFICE-91685123

١	/eh	icle	Parti	cul	ars

Manufacturer HONDA

Model CIVIC-1.8 L (A)

Exact Purpose for which vehicle was being used at

time of accident

HIRE AND REWARD

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY
PRIVATE HIRE

Vehicle Category

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5080470001-01

Cover Note Number

Driver

Name of Driver TNG TONG SOON

 NRIC No
 \$7526229I

 Date Of Birth
 01/09/1975

 Occupation
 OUTDOOR

 Date Of Driving Pass
 21/01/2004

Driving Experience 14 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91685123

Fax Number

Contact Number

EMail Address DAMIENTNG1975@GMAIL.COM

Address

BLK 622C PUNGGOL CENTRAL #17-288

Postcode

823622

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

NO

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

NO

ambulance?

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)

Passenger 1

NAME:

: Y. Y. LEE

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 81 ANG MO KIO AVE 3, POSTCODE: 569929, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4519999 - FAX NO: 65535679

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

I WAS STATIONARY AT THE TRAFFIC LIGHT JUNCTION OF ANG MO KIO AVE 6 TWDS AVE 5, WAITING FOR TRAFFIC LIGHT TO TURN GREEN. WITH A FEMALE PASSENGER, MS Y.Y.LEE, HP:81005803 IN THE REAR SEAT. SUDDENLY, A VEHICLE B, SLG1688E CANNOT STOPPED IN TIME AS IT WAS RAINING, COLLIDED TO MY REAR PORTION OF MY VEHICLE CAUSING DAMAGE. NOBODY WAS INJURED AT THE TIME OF ACCIDENT, ATTACHED PASSENGER'S POLICE REPORT NO: F/20180514/2072.

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 Witness 1

Name Y.Y.LEE Phone Number 81005803

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLG1688E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

VEHICLE B

PRIVATE CAR

Name of Driver

ROLAND GOH YONG GUAN

NRIC/Passport Number

S7630568D

Contact Number

96890588

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

LEE YUE YUN

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SJY2671A

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address

BLK 596B ANG MO KIO ST 52 #18-331

Postcode

562596

Sketch Plan Pg. 1

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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:
 - 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.

Policyholder's Signature

Date & Time:

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No :

Sketch Plan Pg. 2

SKETCH PLAN

	T L Arg	Mo Eio Ave S
	→ → →	
A: SJY2671A	A	
B:SLG 1688E	Ang Mo Kio Ave	6

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stationary at the traffic light Junction of Ang Mo
Kio Ave 6 trads Ave 5 vaiting for the traffic light to turn
green, with a female passenger, Mr Y.Y. Lee, HP: 81005803 in
the seat. Suddenly, a vehicle B, SLG 1688E cannot stopped
in time as it was raining, collided to my rear portion
of my vehicle causing damage. Hobody was injured at
the time of accident.

DECLARATION

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

Polity bolder Sapature
Date & Birme

Driver's Signature

(If driver is not the policyholder)

Date & Time:

A

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

PASSENGER'S POLICE REPORT Pg. 1





1 of 2

Report No F/20180514/2072

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

Vide Rep	ort No		Station Diary No 61	
#50VV039##		50500	ET 52 #18-331	
100 PM	- T - C	Mobile 81005803		
Email Ad	dress			
Sex	Age	Date of Birth	Race	
Female	31	26/03/1987	Chinese	
Language English	Language			
Location Of Incident ANG MO KIO AVENUE 5 SINGAPORE				
	Address APT BLK SINGAPO Contact I Home/Of Email Add Sex Female Language English Location ANG MO	APT BLK 596B AN SINGAPORE 5625 Contact No. Home/Office Email Address Sex Age Female 31 Language English Location Of Inciden ANG MO KIO AVE	Address APT BLK 596B ANG MO KIO STREE SINGAPORE 562596 Contact No. Home/Office Mobile 81005803 Email Address Sex Age Date of Birth Female 31 26/03/1987 Language English Location Of Incident	

Brief details.

On 11/05/2018 at about 7.45pm, I took a grabcar SJY2671A with the driver Tng Tong Soon. The vehicle was moving along Ang Mo Kio Avenue 6 towards Ang Mo Kio Avenue 5, and is about to turn into Ang Mo Kio Avenue 5 towards CTE. As there was traffic, the right turn lane had a few cars and my driver then stopped behind them. While waiting for the vehicles in front to make the turn, suddenly there was an impact from the rear. The drivers then came out however as the right turn green arrow came up, both vehicles drove off, turned right and stopped after the turn. They then exchanged particulars before going

Signature Of Officer Recording The Report:	Signature Of Informant:
F / Sgt 2 ELAINE ONG EE LING	A A
Signature Of Interpreter: Not applicable	Date/Time: 14/05/2018 13:41
Officer In-Charge Of Case: F / Ang Mo Kio South N.P.C / Staff Sgt ESAENDREE BIN PRAYITNA Contact No.: 64519999	Classification Of Case:
Authentication Stamp	1 10000

PASSENGER'S POLICE REPORT Pg. 2





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No F/20180514/2072

on their way. The driver then sent me to my destination. The driver of the other vehicle is Rolan Goh Yong Guan, NRIC S7630568D and the vehicle number is SLG1688E.

On 12/05/2018, I felt some pain on my neck and back area however I did not see the doctor at that point of time. On 14/05/2018, the pain persists and had gotten stronger. Thus, I went to the doctor at Healthway Medical Clinic and received two days of MC. I then went to NTUC insurance to submit a claim however they informed that they would require a police report regarding the accident. The policy number is 5080470001-01

Signature Of Officer Recording The Report:	Signature Of Informant
F / Sgt 2 ELAINE ONG EE LING	A.
Signature Of Interpreter: Not applicable	Date/Time: 14/05/2018 13:41
Officer In-Charge Of Case: F / Ang Mo Kio South N.P.C / Staff Sgt ESAENDREE BIN PRAYITNA Contact No.: 64519999	Classification Of Case:
Authentication Stamp	

Addendum Sheet Pg. 1



Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

	ADD	DENDUM
(A)	PARTICULARS OF PERSON MAKING THE AMEND	MENTS:
	Original Report NoMCKR18061877	Vehicle Registration No:SJY2671A
	Name(as shown in NRIC): Tng Tong Soon	
	(*Vehicle Driver / Vehicle Owner) (*) Please dele	te as appropriate
	Address : Blk 622C Punggol	Central #17-288Singapore(823622
	Contact (Tel)	Mobile No.: 91865123
	Email Address	
	Date of Accident : 11.05.2018	Time of Accident: 1945hrs
	Place of Accident : Junction of Ang I	Mo Kio Ave 6/Ave 5
	InsuranceCompany: NTUC Income	
2	To add in Pasenger's Police Rep	port No : F/20180514/2072
3		
-	An Mae	L.
F	Policyholder Driver's Signature Date: 14518	Reporting Centre Personnel's Signature Name: NRIC/FINNo.:

Date:

Page 22 of 22



TAX INVOICE

-	USI REU. NO 200100270D			
	DATE	INVOICE NO.		
20	24-May-2018	A 37720		

INVOICE TO TNG TONG SOON **BLK 622C** PUNGGOL CENTRAL #17-288 SINGAPORE 823622

	VHA NO.	DUE DATE	VEH. NO.
	A 37720	24-May-2018	SJS 9079 X
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 12 MAY 2018 TO 19 MAY 2018 YOUR REF: SJY 2671 A	7	112.15	785.05
GST @ 7%			\$54.95
TOTAL		\$840.00	

All cheques must be made payable to BKW Rent A Car Pte Ltd. Please write the vehicle and invoice number on the reserve.







Name (as in I/C) NRIC/Passport No: Address:

Occupation_

Tel(O)

Driving Licence No:_

Name (as in I/C) NRIC/Passport No: _

Occupation

Driving Licence No: _ D/L Type: Local/Int'l/Others:_

Name & Address of Employer_

D/L Type: Local/Int'l/Others: _

(R) _

120 Lower Delta Road #02-15 Cendex Centre Singapore 169208 Tel: 6738 7777 Fax: 6738 6666

ACRA No: 20-0106276-D GST Reg. No: 20-0106276-D 24 HOURS HELPLINE: 6223 1122

VEHICLE HIF

VHA	No: A	3	7	7	21	

CHARGES Daily day @\$ Q Per day Q Per day Q Per week/Monthly Q Per day/Monthly Q Per day/Mon							
CHARGES Daily day @\$ Q Per day Q Per							
CHARGES Daily day @\$ Per day Weekly/Monthly Weekly/Monthly Others CDW/PAI Delivery/Collection Svc GST OR No: Petrol Level & OUT & 1/4 & 1/3 & 3/4 & F & Surcharge IN First km FREE per day Excess mileage is chargeable at cents per km Security Deposit: Security Deposit: CASH/NETS/VISA/MC/AMEX/CHQ No: Expiry Date: Card ID No: Name as in Card: NON WAIVER EXCESS (Subject to GST): \$ ACCESSORIES CHECK	Loan Vehicle No: STR 9079 VR No:						
Daily day @\$ Q Per day Weekly/Monthly week @\$ Per week/Monthly Others CDW/PAI @\$ Per day/Monthly Delivery/Collection Svc GST OR No: (A) SUB-TOTAL Petrol Level OUT E 1/4 1/3 3/4 F Surcharge IN First km FREE per day Excess mileage is chargeable at cents per km Security Deposit: \$ Bank: CASH/NETS/VISA/MC/AMEX/CHQ No: Expiry Date: Card ID No: Name as in Card: NON WAIVER EXCESS (Subject to GST): \$ ACCESSORIES CHECK	Make & Model: 1. 11714 16 (Auto/Manual Group:						
Weekly/Monthly week @\$ Per week/Monthly Others CDW/PAI @\$ Per day/Monthly Delivery/Collection Svc GST OR No: (A) SUB-TOTAL Petrol Level OUT E 1/4 1/2 3/4 F Surcharge IN First km FREE per day Excess mileage is chargeable at cents per km Security Deposit:\$ CASH/NETS/VISA/MC/AMEX/CHQ No: Expiry Date: Card ID No: Name as in Card: NON WAIVER EXCESS (Subject to GST):\$ ACCESSORIES CHECK	cts						
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CDW/PAI @\$ Per day/Monthly Delivery/Collection Svc GST OR No: (A) SUB-TOTAL Petrol Level OUT E 1/4 1/3 3/4 F Surcharge IN First km FREE per day Excess mileage is chargeable at cents per km Security Deposit: \$ Bank: CASH/NETS/VISA/MC/AMEX/CHQ No: Expiry Date: Card ID No: Name as in Card: NON WAIVER EXCESS (Subject to GST): \$ ACCESSORIES CHECK	Weekly/Monthly week @\$ Per week/Monthly						
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Expiry Date: Card ID No: Name as in Card: NON WAIVER EXCESS (Subject to GST): \$ ACCESSORIES CHECK							
Name as in Card: NON WAIVER EXCESS (Subject to GST): \$ ACCESSORIES CHECK							
NON WAIVER EXCESS (Subject to GST): \$ 2000 ACCESSORIES CHECK							
ACCESSORIES CHECK							
☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cal							
□ Data Cards □ Camera Systems □ Hub Cap □ Radio / CD Cartridge							
☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre							
and the second							
The same of the sa							
Hiren's Signature : Additional Driver's Sign.	ture:						
SINGAPORE Use Only							

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

INDICATE: A - Accidents D - Dents S - Scratches Crack

The Hirer and the authorized driver must be over 23 years of age and under 65 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be Borne by the Hirer/the Authorised Driver.

All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.

No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full

HIRER'S PARTICULARS

DRIVER'S PARTICULARS

Driving Exp: Passed Date:

Driving Exp: Passed / Expiry Date:

HP

Contact No:

Age:

where applicable. Any returns after our operation hours will be charged as a full

Use of the vehicle for illegal purpose (For instance: in connection with theft, drug

Use of the verticle for filegal purpose (For Instance: In connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited. Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in additional to the appropriate insurance top up in the case of non-disclosure of Malaysia usage. The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for

The hiller and/or driver shall be responsible in an damages of losses hows caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with it's use or operation. The hirer and/or driver shall be responsible for all claims, damages, losses increased insurance premiums, non-wavier excess and cost expense (inclination).

laims, damage's, losses, and cost expense (including

legal costs on a full indemnity basis), whatsoever and howsoever brought agains legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.

8. Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 - \$400.

9. The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.

10. In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in

all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.

the event of an accident.

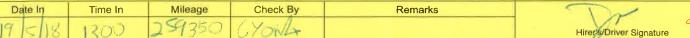
11. The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.

12. All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.

13. I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Mileage Date(Out Time Out Check By Remarks n 258725 1170/1 Hirer's/Driver Signature

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 BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"





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-18-072225

Date of Request:

12/05/2018

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

12/05/2018

Enquiry By

Yee Mei Cheng

TP Vehicle No.

SLG1688E

Accident Date

11/05/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLG1688E	AXA Insurance Pte Ltd	03/11/2017-02/11/2018	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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TAX INVOICE

Our Ref No:

GR-18-072225

Date of Request:

12/05/2018

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

12/05/2018

Enquiry By

Yee Mei Cheng

TP Vehicle No.

SLG1688E

Accident Date

11/05/2018

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