



MG SOLUTION PTE LTD

23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #02-03 Singapore 415933

Tel: 6243 1373 Fax: 6243 1376

(GST Reg. No. 201427944N)

Date : 27/08/2018

Your Ref : CC4/ASM18009844/ua3 (SLM8547B)

To : AXA INSURANCE SINGAPORE PTE LTD

Attn : Motor Claims Department

Dear Sir/Mdm,

**RE: ACCIDENT INVOLVING VEHICLE SJM2793U & SLM8547B ON 28/05/2018 AT
ALONG TELOK BLANGAH ROAD TOWARDS JENDERSON ROAD BESIDE BT
CHEMIN ROAD.**

We refer to the above matter.

Attached copies of the following for your kind perusal:

- 1) Proforma Bill No.188262 @ S\$2,996.00 (Inclusive Of 7% GST)
- 2) Loss of Use @ S\$560.00 (7 Days x S\$80)
- 3) LTA Search @ S\$29.00
- 4) Authorisation to Act
- 5) GIA Report

Hope the above is in order and kindly let us have your confirmation soon.

Tax invoice will be issue upon amount finalized.

Thank You.

Yours faithfully,



Sharon Chia

HP: 9188 6931

E-mail: mg3solution@gmail.com

Co's stamp & Authorised Signature

MG SOLUTION PTE LTD
23 Kaki Bukit Ave 4 (South Wing) #02-03B
Vicom Inspection Centre, Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
GST Reg. No. : 201427944N

MOTOR CLAIM DISCHARGE

INSURED: SGRENTA car pte ltd

CAR/ LORRY/CYCLE: REG NO: SJM 27934 POLICY NO: -

ACCIDENT CLAIM NO: -

I / We confirm that I / we have taken delivery of Car / Lorry / Motor Cycle

Registered No. SJM 27934 from the repairers,

Messrs MG solution pte ltd

And that all repairs necessary as a result of an accident in which the said vehicle was Involved on or

about the 28 day of 05 20..... 18 have been completed to my / our satisfaction, and that

I / we have no further claim on the above company in Respect thereof.



Date: Signature:

Co's Stamp: NRIC No:

31/05/2018 - PRI
03/06/2018 - Sunday

Vehicle In - 31/05/2018
Vehicle Out - 06/06/2018
LOU - 7 days x \$80
= \$560

TAX INVOICE

Our Ref No: GR-18-089163

Date of Request: 11/06/2018

Your Ref No: WALK IN HONG

MG SOLUTION PTE LTD - KAKI BUKIT
25 KAKI BUKIT ROAD 4 #04-01
SINGAPORE 41800

Dear Sir/Madam,

Your Vehicle No: SJM2793U

Date of Accident: 28/05/2018

Place of Accident: TELOK BLANGAH

Involving Vehicle No: SLM8547B

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 ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-18-089164
Date of Request: 11/06/2018

Your Ref No: WALK IN HONG

MG SOLUTION PTE LTD - KAKI BUKIT
25 KAKI BUKIT ROAD 4 #04-01
SINGAPORE 41800

Dear Sir/Madam,

Date of Accident: 28/05/2018
Vehicle No: SJM2793U
Place of Accident: TELOKBLANGAHRDTWDSHENDERSONRDBESIDE BTCHEMINRDEXIT
Involving Vehicle No: SLM8547B

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\$)
SLM8547B	TELOKBLANGAHRDTWDSHENDERSONRDBESIDE BTCHEMINRDEXIT	14.00	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 ☒ Cash ☐ Cheque

LETTER OF AUTHORITY

Name : SGRENTACAR PTE LTD

Address : 1 BUKIT BATOK CRESCENT #02-53
WCEGA PLAZA SINGAPORE 658064

Contact No : _____

TO: AXA INSURANCE SINGAPORE PTE LTD

Dear Sirs,

ACCIDENT INVOLVING SJM 27934 AND SLM 8547 B ON 28/05/2018
AT/ ALONG TELOK BLANGAH ROAD TOWARDS HENDERSON ROAD BESIDE BT CHEMIN ROAD

I/We, SGRENTACAR PTE LTD, am/are the registered owner of
motor car no. SJM 27934

Please note that I have assigned all compensations monies due to me/us in the above said accident to **M/S MG SOLUTION PTE LTD**.

I/We, hereby authorize you to release all compensation monies pertaining to the above-mentioned accident to **M/S MG SOLUTION PTE LTD** and forward your settlement cheque to **M/S MG SOLUTION PTE LTD** whom I had authorized to collect the said compensation monies.

Thank you



Signature of Claimant



Witness By

Provided always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect my further claim for general and special damages for my personal injuries sustained in the same accident.

AUTHORIZATION TO ACT

I, SG RentA Car Pte Ltd ("the third party claimant")

of 1 Bukit Batok Crescent #02-53 WCEGA Plaza 5 (658064) (address),

owner of SJM 27934 (vehicle no.) hereby authorize

MG Solution Pte Ltd

("The workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my Vehicle No. SJM 27934 that was damaged pursuant to the accident which occurred on 28/05/2018 (date) along Telok Blangah Road towards Henderson Road Beside BT Chemin Road (location)

involving Vehicle No/s SLM 8547B

("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 the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 28 day of 05 (month) 20 18 (year)



Signed by "the third party claimant"



Signed by "the workshop"

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	30/05/2018 15:18
Date Of Accident	28/05/2018 14:15
Exact Location Of Accident	TELOKBLANGAHRDTWDSHENDERSONRDBESIDE BTCHEMINRDEXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM2793U
Insured/Policyholder	
Name Of Registered Owner	SGRENTACAR PTE LTD
Co Reg No	201329402W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91180710
Alternative Phone No	OFFICE-91180710

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC 1.6L 5AT

Exact Purpose for which vehicle was being used at time of accident WORK

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 HIRE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSN1761781700
Cover Note Number	

Driver

Name of Driver	KOH WING HONG
NRIC No	S8532728C
Date Of Birth	05/10/1985
Occupation	INDOOR
Date Of Driving Pass	26/02/2005
Driving Experience	13 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91180710
Fax Number	
Contact Number	OTHERS-91180710
EEmail Address	NOEMAIL

Address	BLK 276D JURONG WEST STREET 25 #10-05
Postcode	644276
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	SIDE SWIPE
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
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)	4
Passenger 1	NAME: : KOH CAI HONG GENDER: : FEMALE
Passenger 2	NAME: : PANG YOKE HOON GENDER: : FEMALE
Passenger 3	NAME: : QUINTON CHOO GAA KYUN GENDER: : FEMALE

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SLM8547B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN



Figure 1 shows a schematic diagram of a circular structure, likely representing a cell or a microfluidic device. It consists of a central region and an outer ring. The diagram is labeled with 'a' and 'b' and includes a scale bar.

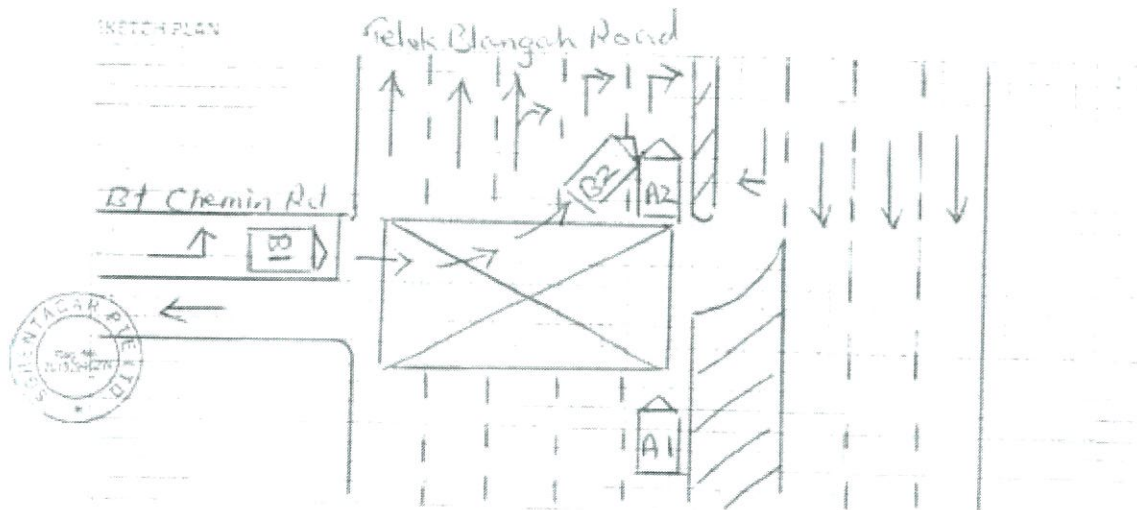
$$\begin{aligned}
 & \frac{1}{2} \left(\frac{1}{2} + \frac{1}{2} \right) = \frac{1}{2} \\
 & \frac{1}{2} \left(\frac{1}{2} + \frac{1}{2} \right) = \frac{1}{2} \\
 & \frac{1}{2} \left(\frac{1}{2} + \frac{1}{2} \right) = \frac{1}{2}
 \end{aligned}$$

$\frac{1}{x^2} = x^{-2}$

$$\frac{d}{dx} x^{-2} = -2x^{-3} = -\frac{2}{x^3}$$
$$= -\frac{2}{x^3}$$

30/5/2018

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28/05/2018 at about 1415 hrs at along Telok Blangah Road towards Henderson Road beside Bt Chemin Road. I was travelling on the extreme Right lane along Telok Blangah Road and when coming towards the junction of Bt Chemin Road, a Vehicle (B) exited out from Bt Chemin Road without proper lookout and without cautious and hence collided onto my Left Front Portion of my Vehicle (A) causing damages to my vehicle. I have 3 passengers inside my vehicle.

(A) SJM 2793 U

(B) STM 8547 B

DECLARATION



[Signature]

Witness Name
Witness Address
Date & Time

28/5/2018