

Tha3

Our ref:
Your ref:

8LE7790M
8LS6282X

Date:

27 JUL 2018

Direct Settlement

To:

AXA

(LKK)

Singapore

Attn:

Motor Claims Department

Re: Accident Involving Motor Vehicle Nos. 8LE7790M & 8LS6282X
At/Along Queensway On 31/5/18 @ 1015

I am the owner of vehicle no. 8LE7790M that was involved in an accident with your insured vehicle no. 8LS6282X of the above accident.

As the accident was caused by your insured negligent/inconsiderate driving, thus I am claiming from you for the following: -

1. Cost of Repairs	\$ <u>13,130.84</u>
2. Loss of Use / Rental (<u>9</u> days @ \$ <u>160</u> per day)	\$ <u>1440.00</u>
3. LTA/GIA Search Fee	\$ <u> </u>
4. GIA Report Fee	\$ <u> </u>
5. Others	\$ <u> </u>
Total:	\$ <u>14,570.84</u>

I hereby give you fourteen (14) days to comply with the above, failing which, I shall instruct my solicitor to commence legal action against you. If you have any queries, please contact the representative of **CYCLE & CARRIAGE INDUSTRIES PTE LTD** at Telephone No: 67714353 (Mr Yik Chan Hoe) / 67714304 (Ms Amanda Ang).

I hereby give full authority to CYCLE & CARRIAGE INDUSTRIES PTE LTD and their representative to negotiate/comprise settlement of the above claim on my behalf.

Your co-operation and immediate attention to the above is greatly appreciated. I hereby look forward to hearing from you soon.

Yours faithfully

Name & Signature

Address: C/o. 188 Pandan Loop Singapore 128378

Cc: Mr Yik Chan Hoe/ Ms Amanda Ang

E-mail: chanhoe.yik@cyclecarriage.com.sg / amanda.ang@cyclecarriage.com.sg


Fax No. 67795383



Mercedes-Benz

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

TAX INVOICE

Invoice Name & Address				Owner Name & Vehicle Info			
MICHELLE PUISY CHEONG				Cust No/Name	WCV28294/MICHELLE PUISY CHEONG		
C/O AXA INSURANCE PTE LTD				Reg No/Reg Date	SLE7790M / 10/01/2017		
MOTOR CLAIM DEPARTMENT				Date In/Mileage	20/06/2018/ 28971		
8 SHENTON WAY #24-01				Chassis No	WDD2050422R207421		
SINGAPORE 068811				Engine No	27492030706098		
Contact No 63387288				Make/Model	MB/MB C 200 SEDAN (W205) "AVANTGARDE / A		
				Colour/Trim	027 799 Diamond Whi/ 042 201 Leather Bla		
Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No	
CSI00001	Cash	16/07/2018/ 13:05	YK	395 / Yik Chan Hoe	24062	28144302	
Description of Goods / Services					Qty	Unit Price S\$	Amount S\$
Z REQUEST							
Customer Request							
M BPNSUN							F.O.C.
POLICY NO/ACC DATE : P28876255DMA // 31/05/2018							
DRIVE IN/EXCESS : 31/05/2018 // TP VEH NO SLS6282X AXA							
DATE IN/DATE SURVEY: 20/06/2018 // TAUFIKH LKK							
BY/AUTHORIZED ON : DIRECT SETTLEMENT // VIC LKK							
A BPILAB							2880.00
PANEL BEATING TO REPAIR AFFECTED AREAS, REMOVE AND REPLACE WITH NEW BODY PANELS WITH REFINISH.							
A BPIRES							2700.00
RESPRAY BOOT LID, REAR BUMPER AND REAR END PANEL. (DIAMOND WHITE)							
A BPILAB					0.10		380.00
USING XENTRY SYSTEM TO CHECK CONTROL UNITS, RESET MEMORY TO STANDARD SETTINGS.							
A BPILAB							120.00
CHECK REAR LIGHTING SYSTEM AND CONDUCT WATER TEST FOR ANY LEAKAGE.NETT							
A BPILAB							960.00
REMOVE AND REFIT REAR UPHOLSTERY, TRIMS GARNISHS AND SEATS FOR NEC. REPAIRS.							
S BPNSUB							60.00
SUPPLY 1 PC NO PLATE							
X	REAR PTS SPACER RING			4.00	6.42		25.68
X	REAR BASIC MOUNTING FOR BUMPER			1.00	84.30		84.30
X	REAR BUMPER LOWER CHROME MOULDING			1.00	245.09		245.09
X	REAR BUMPER LOWER			1.00	208.27		208.27
X	REAR MERCEDES STAR			1.00	46.63		46.63
X	MB STAR SEALING GROMMET			3.00	1.81		5.43
X	BOOT LID CHROME MOULDING			1.00	126.83		126.83
X	BOOT LID RETAINER WEDGE			2.00	10.46		20.92
X	BOOT LID RETAINER WEDGE			2.00	9.41		18.82
X	BOOT LID			1.00	2049.31		2049.31

Payment should be made strictly by cash, NETS or credit cards. Thank you.

Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.



WE DRIVE FIRST CLASS

Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg



Mercedes-Benz - are registered trademarks of Daimler, Stuttgart, Germany



Mercedes-Benz

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

TAX INVOICE

Invoice Name & Address	Owner Name & Vehicle Info
MICHELLE PUISY CHEONG	Cust No/Name WCV28294/MICHELLE PUISY CHEONG
C/O AXA INSURANCE PTE LTD	Reg No/Reg Date SLE7790M / 10/01/2017
MOTOR CLAIM DEPARTMENT	Date In/Mileage 20/06/2018/ 28971
8 SHENTON WAY #24-01	Chassis No WDD2050422R207421
SINGAPORE 068811	Engine No 27492030706098
Contact No 63387288	Make/Model MB/MB C 200 SEDAN (W205) "AVANTGARDE / A
	Colour/Trim 027 799 Diamond Whi/ 042 201 Leather Bla

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No
CSI00001	Cash	16/07/2018/ 13:05	YK	395 / Yik Chan Hoe	24062	28144302

Description of Goods / Services	Qty	Unit Price S\$	Amount S\$
X NUT	4.00	4.86	19.44
X REAR BUMPER	1.00	1559.46	1559.46
X REAR C200 MODEL PLATE	1.00	82.11	82.11
X LEFT REAR LAMP COMBINATION	1.00	679.52	679.52

Parts	5,171.81	Nett	12,271.81
Labour	7,040.00	7% GST on	12271.81
Standard Menu	0.00		859.03
Specialist Job	60.00	Total Payable	13,130.84
Diagnostics Job	0.00	Paid	0.00
Sundry/Others	0.00	Total Due	13,130.84
Total(w/o GST)	12,271.81		

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Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg

CHAN'S & SONS ENTERPRISE

363 Sembawang Road
Singapore 758379
Tel: 67532536 Fax: 67567565
GST Reg No: 51-936900-M

chan's
www.chans.com.sg

TAX INVOICE

MICHELLE PUISY CHEONG

INVOICE : AR1807-0077
DATE : 03/07/2018
TERMS : C.O.D
STAFF ID : ELAINE
AGREEMENT NO. : HA201806-0211

ATTN : ACCOUNTS PAYABLE

DESCRIPTION	AMOUNT (SGD)
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Vehicle Reg No : SKT379Y
Make / Model :
Rental Dates : Rental Billing From 20/06/2018 To 29/06/2018
Period : 9 days
Rental Rate : S\$ 160.00 Per Day (Including GST)
Reference No : SLE7790M

1,345.79

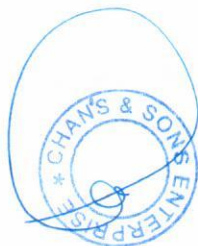
AMOUNT : S\$

ONE THOUSAND FOUR HUNDRED FORTY DOLLARS
ONLY

NON-TAXABLE VALUE : 0.00
TAXABLE VALUE : 1,345.79
GST 7% : 94.21

TOTAL S\$: 1,440.00

Please make your cheques payable to : **CHAN'S & SONS ENTERPRISE**



For Official Use Only

Payment Date :	F / Amt
CS / CC / CH :	
CS / CC / CH :	





MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1
Individual Ownership

DRIVESHIELD - PREMIER PLAN
Comprehensive

Certificate No. P 28876255 DMA

Excess : SGD700

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
SLE7790M

2. Name of Policyholder
Michelle Puisy Cheong (Not Driving)

3. Effective Date of the Commencement of Insurance for the purposes of the Act
10/01/2018

4. Date of Expiry of Insurance
09/01/2019

5. Persons or Classes of Persons entitled to drive*

Gerald Pak Kuen Sun

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers

for Chief Executive Officer

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S2550852A**

Name:

CHEONG MENG KEONG

Birth Date: **12 Jan 1943**

Issue Date: **22 Jul 2003**



000671685C

FOR C&C USE ONLY

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

03 Jun 1986

FOR C&C USE ONLY

NP 428A



Licence No: S2550852A

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	31/05/2018 13:12
Date Of Accident	31/05/2018 10:15
Exact Location Of Accident	QUEENSWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE7790M
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Insured/Policyholder

Name Of Registered Owner	MICHELLE PUISY CHEONG
NRIC No	S7370275E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96319673
Alternative Phone No	OFFICE-96319673

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C200

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

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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P28876255DMA
Cover Note Number	

Driver

Name of Driver	CHEONG MENG KEONG
NRIC No	S2550852A
Date Of Birth	12/01/1943
Occupation	INDOOR
Date Of Driving Pass	03/06/1986
Driving Experience	31 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96319673
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	371 HOLLAND RD #09-01
Postcode	278698
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
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	CLEAR
Road Surface	DRY

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 SLOWED DOWN AS THE CARS AHEAD SLOWED DOWN, CAR B (SLS6282X) WHICH WAS BEHIND MY CAR DID NOT SLOW DOWN AND KNOCKED INTO THE REAR OF MY CAR.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REFER CSE YIK
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLS6282X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PHUA WOAN JIUN
NRIC/Passport Number	S7978032D
Contact Number	
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
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.

Policyholder's Signature

Date & Time



Driver's Signature

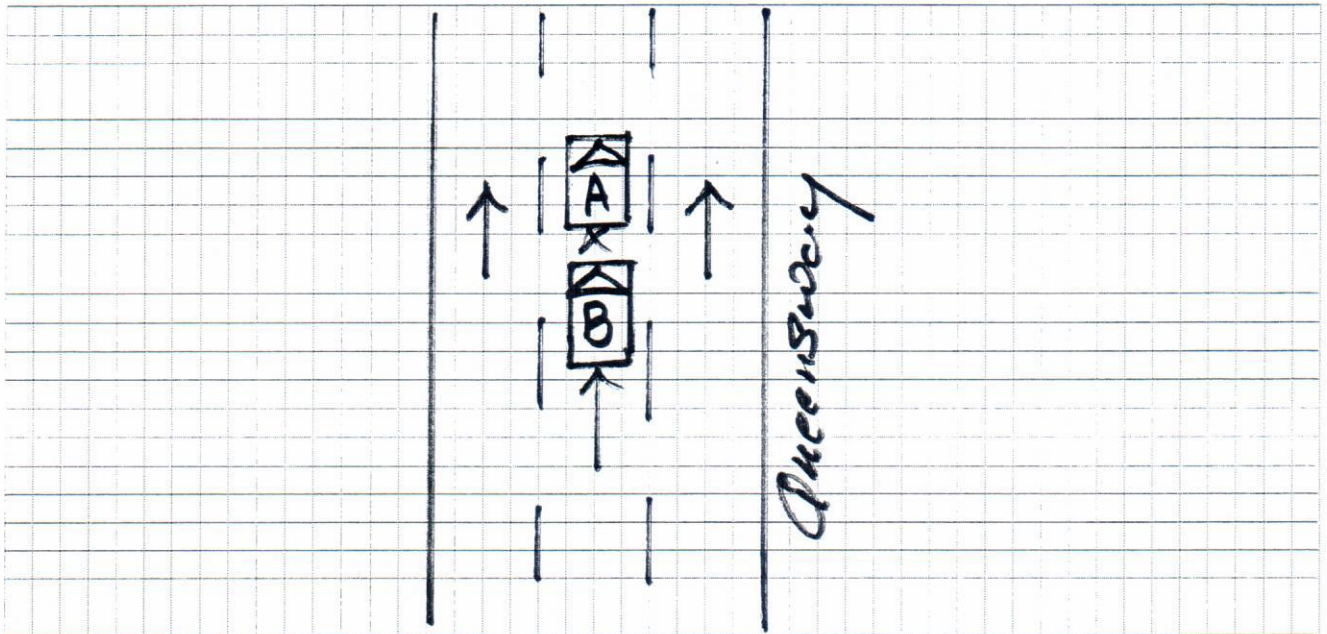
(If driver is not the policyholder)

Date & Time

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe.yik@cyclecarrige.com.sg

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I slowed down as the cars ahead slowed down, Car B which was behind my car did not slow down and knocked into the rear of my car.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe.yik@cyclecarriage.com.sg

Policyholder's Signature

Date & Time



Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's

Name:

NRIC/FIN No.: