

Our Ref: PTE/SLR9596B/20180709/DS-CL

17/09/2018

Dear Sirs

AXA Insurance Singapore Pte Ltd C/o LKK Auto Consultants Pte Ltd 51 Ubi Avenue 1, #02-25 Singapore 408933 Attn: Motor Claims Department

Attii. Motor Claims Department

Without Prejudice

ComfortDelGro Engineering Pte Ltd

Corporate Office 205 Braddell Road Singapore 579701 Mainline +65 6383 6280 Facsimile +65 6280 9755

Company Registration No: 199506048W

Car Care Centres

Braddell 205 Braddell Road Singapore 579701 Tel 6383 8110

Loyang 59 Loyang Drive Singapore 508969 Tel 6214 8300

Pandan 45 Pandan Road Singapore 609286 Tel 6338 8778

Sin Ming 383 Sin Ming Drive Singapore 575717 Tel 6553 0400

Sungei Kadut 7 Sungei Kadut Way Singapore 728791 Tel 6369 7369

320 Ubi Road 3 Singapore 408649 Tel 6848 5721

www.SPARKcarcare.com

ACCIDENT ON 09/07/2018 INVOLVING SLR9596B & SJM5653X ALONG 2 KAKI BUKIT AVE 1 CARPARK

We are the authorised repair workshop for the owner of vehicle, SLR9596B, which was involved in the captioned accident with your insured's vehicle. The vehicle owner has requested and authorized us to assist him/her in presenting his claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured, SJM5653X, we are submitting these claims for your consideration on behalf of the owner/driver/claimant.

1. Cost of Repairs	2,451.16
2. Car Rental	-
3. 8.0 days Loss of Rental @ \$76.43	611.44
4. Surveyor Fee	-6
5. LTA Fee	- if -
6. TP/GIA Fee	2.00
7. Medical	
8. Others	
(E&OE)	3,064.60

We enclose the following docume	ents to support the claims: -
Repair/Excess Bill	[/] Insurance Certificate
Surveyor Report	Power of Attorney
Oloured Photographs	[] Car Rental Bill Agreement
[/] GIA/Police Report(s) [/] GIA/TP Search	[] Medical Bill
[/] GIA/TP Search	[] Witness Statement
Others:	

Kindly look into the matter and let us hear from you on the settlement of our client's claim 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/driver/claimant.

Yours faithfully Cecilia Lee

CDGE Claims Department

DID: 6214 8354 FAX: 6214 1843 Email: cecilialee@sparkcarcare.com



ComfortDelGro Engineering Pte Ltd

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Car Care Centres
205 Braddell Road Singapore 579701
59 Loyang Drive Singapore 508969
45 Pandan Road Singapore 609286
383 Sin Ming Drive Singapore 575717
7 Sungei Kadut Way Singapore 728791
320 Ubi Road 3 Singapore 408649
501 Yishun Industrial Park A Singapore 768732 www.SPARKcarcare.com



ComfortDelGro Engineering REG. NO: 199506048W GST REG. NO. M238921817 COMPANY

TAX INVOICE

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01

Description : TP - AIG - AXA

REAR LH RIM COVER

SINGAPORE SG 068811

CONTACT NO: 63387288

VEHCLE NO SLR9596B

MAKE HONDA

MODEL GRACE HYBRID

DATE OF REG 31.08.2017

CHASSIS CODE

10.40

140,00

INVOICE NO./DATE 91391765 25.08,2018

JOB NO. 305189386

ODOMETER READING

10.40

140,00

S/No	Part No. Description	Oty	Unit	Price	Net
01	20-501 LABOUR CHARGES	1 EAC	1,690.00	SGD	1,690.00
02	20-501 WHEEL ALIGNMENT	1 EAC	80.00	SGD	80.00
03	1979 REAR BUMPER	1 PC	370.40	SGD	370.40

1 PC

1 PC

Items total 2,290,80 Add GST (d 7.000 160.36 2.451.16 Invoice amount

SGD

SGD

ssued by Repair type

1979

1979

04

05

SIEWHWA 25.08.2018 10:12:10 CESO/52/5T

REAR BUMPER SIDE RETAINER LH

Cheque should be crossed and made payable to "ComfortDelGro Engineering Pte Ltd"

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office: 205 Braddell Road Blk C Ext 1 Level 2 Singapore 579701

Attn: Finance Department

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ N
8010010	91391765	2,451.16	

ComfortDelGro Engineering Pte Ltd

Corporate Office 205 Braddell Road Singapore 579701 Mainline + 65 6383 6280 Facsimile + 65 6280 9755 www.cdge.com.sg

Car Care Centres
205 Braddell Road Singapore 579701
59 Loyang Drive Singapore 508969
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TAX INVOICE COMPANY RRG. NO: 199506048W GST REG. NO. M228921817

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01 SINGAPORE SG 068811 SLR9596B

MAKE HONDA

VEHCLE NO

MODEL GRACE HYBRID

DATE OF REG 31.08.2017

CHASSIS CODE

INVOICE NO./DATE 91391765 25.08.2018

JOB NO. 305189386

ODOMETER READING

Payment Type/Term: /Credit 30 days

WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS
RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTER
OWNERS RISK.

4) CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS, OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCES IN GOOD ORDER.

OMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR PERIOD OF DEFAULT.

4) PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANG WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office should be crossed and made payable to 205 Braddell Road

Blk C Ext 1 Level 2 Singapore 579701

Attn: Finance Department

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ
ComfortDelGro En	ineering Pte Ltd		
			\



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-18-105465

Date of Request:

10/07/2018

Your Ref No:

Online Purchase

ComfortDelGro Engineering Pte Ltd 205 Braddell Road

205 Braddell Road Singapore 579701

Dear Sir/Madam,

Enquiry Date

10/07/2018

Enquiry By

Kristy Tay Siew Hwa

TP Vehicle No.

SJM5653X

Accident Date

09/07/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJM5653X	AXA Insurance Pte Ltd	09/07/2017-08/01/2019	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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GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-105465

Date of Request:

10/07/2018

Your Ref No:

Online Purchase

ComfortDelGro Engineering Pte Ltd 205 Braddell Road

Singapore 579701

Dear Sir/Madam,

Enquiry Date

10/07/2018

Enquiry By

Kristy Tay Siew Hwa

TP Vehicle No.

SJM5653X

Accident Date

09/07/2018

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:

[X] GIRO [] Cash [] Cheque

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.

By the lodgement of this report to the insurers, you here aforesaid.	eby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	09/07/2018 11:07
Date Of Accident	09/07/2018 10:00
Exact Location Of Accident	2 KAKI BUKIT AVE 1(CARPARK)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLR9596B
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-31584769

Vehicle Particulars

Manufacturer HONDA

Model GRACE HYBRID-1.5 (A)

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 HIRE

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy YES 0 Policy Number

Cover Note Number

Name of Driver JASON NG CONG RONG

NRIC No S8340967C Date Of Birth 22/12/1983 **OUTDOOR** Occupation Date Of Driving Pass 30/04/2004

Driving Experience 14 YEARS AND 2 MONTHS

Gender MALE

(LOCAL) +65-91867974 Mobile Number

Fax Number

Contact Number

EMail Address NOEMAIL Address

BLK212 PETIR ROAD #04-465

Postcode

670212

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

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

NO

Was any body injured in the Accident? Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

3

Passenger 1

NAME:

: AKSHAY SHARMA

GENDER:

: MALE

Passenger 2

NAME:

: PASSENGER 2

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

REFER TO REPORT ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJM5653X

Vehicle Make/Model/Colour

KIA

Details Of Properties Vehicle Category

PRIVATE CAR

Name of Driver

HUANG LING LAN

NRIC/Passport Number

S2720898C

Contact Number

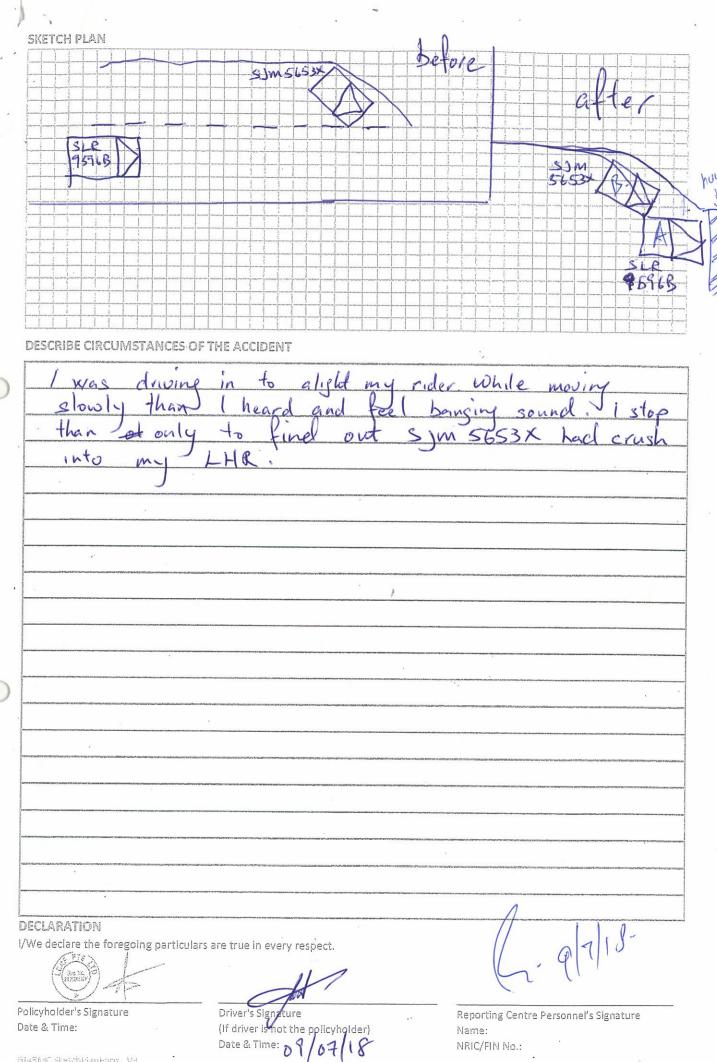
92955134

Address Postcode

Insurance Company Name

Page 2 of 16

Nature Of Damage
No. Of Passenger (Including Driver)



STARMC Steschmanhorm_ye

SKETCH PLAN

INPORTANT 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 <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:
 - (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.

En SE CO

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 .:



HOTLINE TEL: (65) 6419-3000

FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

SLR9596B

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

COMPREHENSIVE COMMERCIAL MOTOR

M.Z.400

(The below excess is subject to GST)

ALL CLAIMS EXCESS

S\$2000.00

WINDSCREEN EXCESS

S\$100.00

SUM INSURED

Market Value

INSURING WITH COE/PARF

Yes

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

CERTIFICATE NO.

SLR9596B LCRF Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF

INSURANCE FOR THE PURPOSES OF THE ACT

25 February 2018 24 February 2019

4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.

If You or Your Authorised Driver is below the age of 21 years old and/or has less than 1 year driving experience, the excess is S\$3,500(All Claims).

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) LIMITATION AS TO USE*

- Use for social, domestic, pleasure purposes and business purposes of Insured
- Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

Refer to Policy Terms and Conditions

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.

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).

Issued in Singapore 13 Feb 2018

AIG Asia Pacific Insurance Pte. Ltd.

030080-000 Aon Singapore Pte Ltd 2 Shenton Way #26-01 SGX Centre 1 SINGAPORE 068804

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPAHN

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8340967C



JASON NG CONG RONG



叢 Race

CHINESE Date of birth

22-12-1983

Country/Place of birth SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S 8 3 4 0 9 6 7 C

JASON NG CONG RONG

Issue Date: 30-Apr 2004



5268931



17~02-2014

APT BLK 212 PETIR ROAD #04-465 SINGAPORE 670212

NRIC No: \$83409670

Date: 27/02/2014

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

PASS DATE

Class 2B* Motorcycles =< 200 CC
Class 3 - Motor cors =< 3000 kg with =< 7 passengers, exclusive of the delectr and notor tractors/vehicles =< 2500 kg

07 Jul 2005 30 Apr 2004

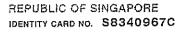
8340967C

s/No. 9000030933

NP 428A

Licence No: \$8340967C

Sketch Plan Pg. 3

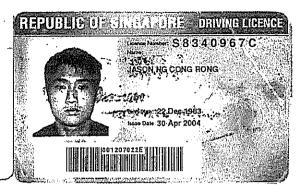




JASON NG CONG RONG

Race CHINESE

22-12-1983 Country/Place of birth SINGAPORE 8824080*1



5268931



17-02-2014 APT BLK 212 PETIR RDAD #04-465 SINGAPORE 670212

NRIC No: \$8340967C

Date: 27/02/2014

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

PASS DATE

Class 219 Motorcycles = 200 CC
Class 3 Motor = rex = 3000 kg with = 7 photoport, earliable of the
Universalid motor fractoralishicles = 2500 kg

8310967C

NP 428A

5/No. 9000030933

COMFORTDELGRO ENGINEERING PTE LTD

A member of COMFORTDELGRO
POWER OF ATTORNEY
ACCIDENT INVOLVING (Owner's Vehicle No.) SLR95968 and (Third Party's Vehicle No.) STMS6S3 X on 9/7/18 along S Karki Bukit Ave /
(Car Park)
Policy Nos:
BY THIS POWER OF ATTORNEY, *I/We, *NRIC/Passp
No (Address)*
/a company
incorporate in Singapore and having its registered office at (Address)*
owner of Vehicle Registered No. 49596
hereby irrevocably appoint ComfortDelGro Engineering Pte Ltd (CDGE),
company incorporated in Singapore and having its registered office at
its agents or any person authorized by CDGE to be *my/our Attomey and in *my/our name(s) and on *my/our bel
to do all or any of the following:
To submit, resolve and make any claim(s) (including the commencement of legal proceedings) which *I/we means against the other *party/parties to the Accident and under the insurance *policy/policies taken up by su *party/parties or alternatively under Insurance Policy No taken up by *me/us in responsible to the cost of repairs, loss of use and at all other costs and expenses, etc. suffered by *me/us arising from Accident (loss and damage).
 For the purpose of such claim(s) as aforesaid, to appoint solicitors on *my/our behalf as * my/our Attorney shall in his absolution, deem fit.
 To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be material by way of cheque in favor of ComfortDelGro Engineering Pte Ltd, CDGE and to give a valid receipt and dischart therefor.
4. For any of the purposes aforesaid, to execute, sign, seal and deliver all documents whatsoever in relation there
5. Generally do all such acts as it shall deem necessary for the purpose of settling such claim(s) and
6. To agree to any settlement at the absolute discretion of CDGE.
*I/We hereby declare that all acts, instruments and documents done by virtue of this Power of Attorney on *my/obehalf by the Attorney, its agents or any person authorized by CDGE in that behalf shall be as good valid and effect to all intents and purposes whatsoever as if the same had been done or executed by *me/us in *my/our own properson(s) and *I/We hereby ratify and confirm, all acts, instruments and documents done or executed by virtue the authority and powers hereby conferred.
*I/We hereby further declare that the powers and authority hereby conferred shall remain irrevocab
*I/We further confirm that the acceptance by CDGE of the settlement amount in respect of such constitute the full dischar of my/our claim(s) in respect of such loss and damage.
*IN WITNESS WHEREOF. *I/We have hereunto to set *my/our hand and seal this day———— of the month
, Year Two Thousand(20)
Signed, Sealed & Delivered By

Customers Name: NRIC No.: Co's rubber Stamp