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 : 19/11/2018

Your Ref : **SHD4403D**

To : **INDIA INTERNATIONL INSURANCE PTE LTD**

Attn : Motor Claims Department

Dear Sir/Mdm,

RE: ACCIDENT INVOLVING VEHICLE SJY1577X & SHD4403D ON 29/08/2018 AT ALONG UPPER BUKIT TIMAH ROAD BEFORE GOMBAK DRIVE.

We refer to the above matter.

Attached copies of the following for your kind perusal:

1) Proforma Bill No.**188394 @ S$7,383.00 (Inclusive Of 7% GST)**
2) Loss of Use @ **S$1,680.00 (7 Days x S$240)**
3) LTA Search @ **S$7.45**
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,

MG SOLUTION PTE LTD 201427944N

Sharon

Sharon Chia

HP: 9188 6931
E-mail: mg3solution@gmail.com

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. 20-1427944-N)

PROFORMA BILL

Bill To:
INDIA INTERNATIONAL INSURANCE PTE LTD
64 CECIL STREET
#05-02 IOB BUILDING
SINGAPORE 049711

Bill No : 188394

Date : 19-November-2018

Vehicle Number : *SJY 1577X*

ATTN : MOTOR CLAIMS DEPARTMENT

QTY	CLAIM	AMOUNT
1	To carried out accident repair as per surveyor's recommendation (Lump Sum)	$ 6,900.00
	BEFORE GST	6,900.00
	7% GST	483.00
	TOTAL	$ 7,383.00

Tax Invoice will be issue upon amount finalised.

Please note that our above offer and any settlement arising from the above offer are made on a without prejudice basis with sole intention of resolving the matter amicably without parties resorting to legal proceeding. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

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: HOO KOK PENG

CAR/ LORRY/CYCLE: REG NO: SJY1577X POLICY NO: .....

ACCIDENT CLAIM NO: .....

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

Registered No. SJY 1577X 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 29 day of 08 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: .....

30/8/2018 - PRI
2/9/2018 - Sunday

Vehicle In - 30/8/2018
Vehicle Out - 5/9/2018
LOU - 7 days x #240
= # 1,680

> Back to OneMotoring

Land Transport Authority

Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 29 Aug 2018 / 17:43:13
Receipt Date/Time : 29 Aug 2018 / 17:43:13

Tax Invoice/Receipt

Receipt No. : ITNET-00000-180829-001825

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S$)	GST Amount (S$)	Amount After GST (S$)
	Result of Insurance Enquiry - SHD4403D As at 29 Aug 2018/15:40:00 Insurance Co: INDIA INT'L INS PTE LTD			
1	Insurance Enquiry - SHD4403D Enquiry Fee 20180829174232998655	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45

Paid By		
20180829174237948	Direct Debit: eNETS Debit (Internet Banking)	7.45
Total		7.45
Cash Change		0.00
Tendered Amount		7.45
Excess Refundable Amount		0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

> Back to OneMotoring

Vehicle Insurance Particulars Result

Vehicle No.	Incident Date/Time	Insurance Company Name
SHD4403D	29 Aug 2018 / 15:40:00	INDIA INT'L INS PTE LTD

Print OK Save as PDF

LETTER OF AUTHORITY

Name : HOO KOK PENG

Address : BLK 461 SEGAR ROAD
#13-303 SINGAPORE 670461

Contact No :

TO:
INDIA INTERNATIONAL INSURANCE PTE LTD

Dear Sirs,

ACCIDENT INVOLVING SJY1577X AND SHD4403D ON 29/08/2018

AT/ ALONG UPPER BUKIT TIMAH ROAD BEFORE GOMBAK DRIVE

I/We, HOO KOK PENG, am/are the registered owner of motor car no. SJY1577X

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

X ----------

Signature of Claimant

Witness By

MAL18112540 / Alpine Motors Pte Ltd - HQ
ENTRY DATE & TIME: 30/08/2018 14:54
SUBMITTED BY: RONNIE TAN GUAN HIN

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.

ACCIDENT STATEMENT

Date Of Report	30/08/2018 14:54
Date Of Accident	29/08/2018 15:40
Exact Location Of Accident	UPPER BUKIT TIMAH ROAD B4 GOMBAK DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY1577X

Insured/Policyholder

Name Of Registered Owner	HOO KOK PENG
NRIC No	S8111643A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97404939
Alternative Phone No	OFFICE-60000000

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	B180-1.7 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA139648/1
Cover Note Number	

Driver

Name of Driver	HOO KOK PENG
NRIC No	S8111643A
Date Of Birth	11/04/1981
Occupation	INDOOR
Date Of Driving Pass	30/09/2009
Driving Experience	8 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97404939
Fax Number	
Contact Number	OFFICE-60000000
EMail Address	NOEMAIL

Address	BLK 461 SEGAR ROAD #13-203
Postcode	670461
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

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)	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

Report please refer to sketch Plan

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	SHD4403D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YP9303L
Vehicle Make/Model/Colour	

Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

[illegible]

Consent under the Personal Data Protection Act 2012

[illegible]

(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:

[illegible]

(ii) investigating the accident and/or my claim;

(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

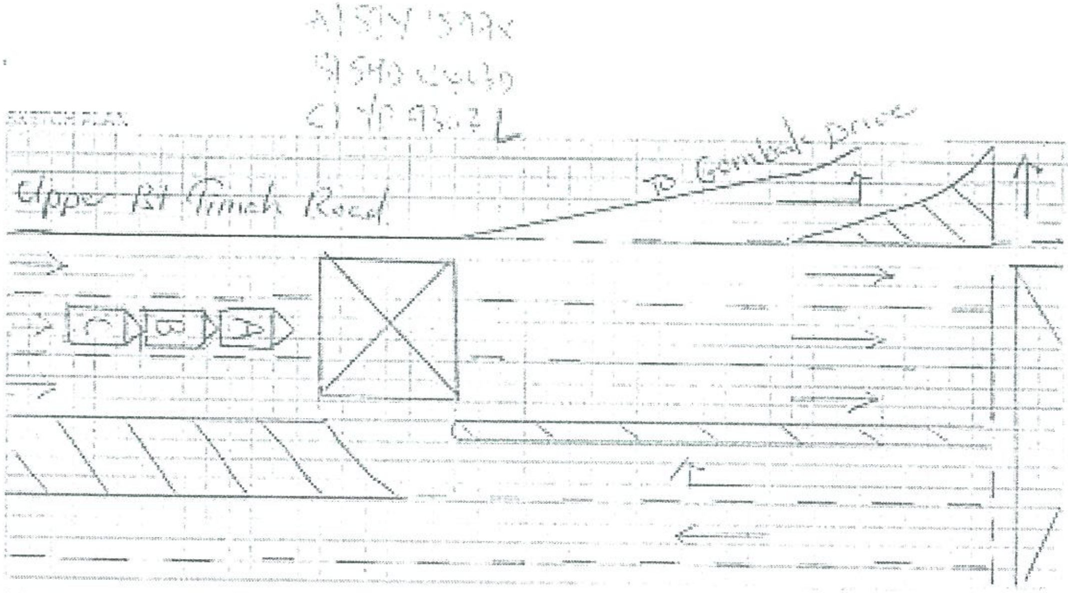
[illegible]

Renuri

S7131869E

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 29/08/2018 at about 1540 hrs at along Upper Bukit Timah Road before Gombak Drive, I was travelling on the Centre lane and when my front vehicle slow down and stop hence I follow suit and came to a complete halt. Suddenly I heard a loud bang from behind and when I alighted, I realised that it was Vehicle (B) who hit onto my Rear Portion of my Vehicle (A) causing damages to my vehicle. It was a chain collision of total 3 vehicles involved.

Note. Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

DECLARATION

5/9/2018