# 来發(明记)摩哆有限公司 LAI HUAT (MENG KEE) MOTOR PTE LTD

Sector A, Block 21, Sin Ming Industrial Estate #01-56/58/60 Singapore 575679, Tel: 6453 8110 Fax: 6459 6267 RCB No: 199407592C

## **ESTIMATE**

EST. No ....: EST0020405

Back to Flowers

Page ...... 1 of 1

Your ref. ..... TP-SDQ 8063D AXA

Payment .....

Date ...... 4/10/2018

Attn ....:

Vehicle No ...: GBB 9308U

Vehicle Model: Volkswagen Caddy

Accident on ..: 2/10/2018

Quantity Unit	Description	Unit price	Disc. pct.	Amount
	Supply of Parts - Nett item:			
1.00 Pc	Rear tail lamp RH	288.90		288.90
1.00 Pc	Rear sliding door rail cover RH	30.93		30.93
	Labour & Misc:			
1.00	To knock dents on rear fender RH and renew of parts	350.00		350.00
1.00	To spray paint (including rear bumper)	500.00		500.00

 Sub-Total
 1,169.83

 GST 7.00%
 81.89

 Total
 S\$ 1,251.72

本公司拥有最先进的 CAROLINER MARK IV 机械,可提供给多种款式的车身及给于快速与准确的测量方式和大铁修理。除外,还有先进的 SAICO Deluxe 喷漆烘炉。

"Our services include the latest and reliable CAROLINER MARK IV repair bench, draw-aligner and the support dolly system to provide accurate re-alignment and speedy repairs. We also provide the new and advanced SAICC Deluxe oven heater for re-spraying all motor vehicles."

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Fax Number Contact Number EMail Address

- 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</u> 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.

Date Of Report 02/10/2018 09:12  Date Of Accident 02/10/2018 08:10  Exact Location Of Accident T-JUNCTION OF BRIGHT HILL DRIVE ACCOUNTRY/State of Loss SINGAPORE	AND SIN MING AVE
Exact Location Of Accident T-JUNCTION OF BRIGHT HILL DRIVE	AND SIN MING AVE
	AND SIN MING AVE
Country/State of Loss SINGAPORE	
DETAILS OF OWN VEHICLE	
Vehicle Registration Number GBB9308U	
Insured/Policyholder	
Name Of Registered Owner M/S BACK TO FLOWERS	
Co Reg No 53171853X	
Email Address YEWYONGSIM@GMAIL.COM	
Mobile Phone No	
Alternative Phone No OFFICE-97991136	
Vehicle Particulars	
Manufacturer VOLKSWAGEN	
Model CADDY	
Exact Purpose for which vehicle was being used at time of accident WORK PURPOSE	
Are you claiming under your own insurance policy for repair to your vehicle?	
If No, Please state action to be taken THIRD PARTY	
Vehicle Category GOODS VEHICLE	
Insurance Company	
Name of Insurance Company CHINA TAIPING INSURANCE (SINGAP	PORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE	
Fleet Policy NO	
Policy Number DMCVSN1025581808	
Cover Note Number	
Driver	
Name of Driver SIM YEW YONG	
NRIC No S1398511A	
Date Of Birth 15/10/1959	
Occupation INDOOR	
Date Of Driving Pass 03/04/1979	
Driving Experience 39 YEARS AND 5 MONTHS	
Gender MALE	
Mobile Number (LOCAL) +65-97991136	

YEWYONGSIM@GMAIL.COM

Address

BLK 278 BISHAN STREET 24

#18-66

Postcode

570278

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - COMPANY DIRECTOR

Insurance Company of Driver's Own Vehicle

#### General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

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?

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)

2

Passenger 1

NAME:

: SIM YUNYING

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**

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

SDQ8063D

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

#### IMPORTANT NOTICE

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- 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 the purpose(s) and the police).
  - 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

-2 DOT 2010

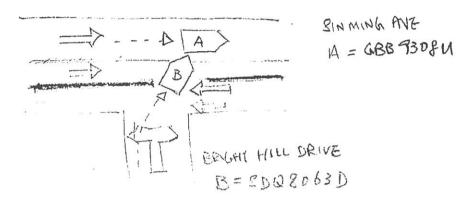
Driver's Signature (If driver is not the policyholder) Date & Time: 2 907 2018

07:17 Am

Reporting Centre Personnel's Signature
Name: Poh Kwee Choo

NRIC/FIN No.: \$68405834

SKETCH PLAN



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Λ.	Le d'alla sua saine accuse tout
71	was travelling along sin ming avenue road.  turned right out onto sin ming account react from  Bright Hill drive.
B	turned right out onto the ming account class from
3	Bright Hill drive.
R	Bright Hill drive. S hits A at the back tyle area on the right of the
	as .
(, (	N
1	Accident Happaned on: 2004 2018 8:12 AM
- 1	rectalist Halbard Dr. 5 net 2016 8.12 His

DECLARATION

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

PolicyHolder's Signature

-2 00T 2018

Driver's Signature

(If driver is not the policyholder) Date & Time: ~ 2 007 2018

Reporting Centre Personnel's Signature

Name:

Name: NRIC/FIN No.: Poh Kwee Choo S6840583A

### REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1398511A



SIM YEW YONG



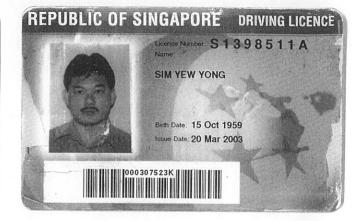


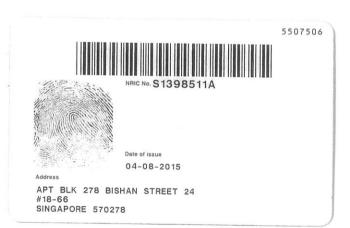
CHINESE Date of birth

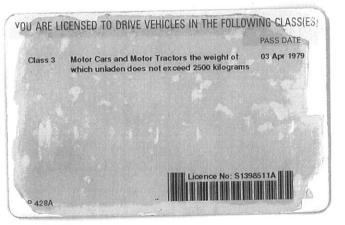
SINGAPORE

15-10-1959 Country/Place of birth

S1398511A









# 中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Co. Reg. No. 200208384E

MZ300/C R SN AN0421A Cov.Type: C

MOTOR COMMERCIAL VEHICLE

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

**ORIGINAL** 

		Engine No :BLSA87080	
CERTIFICATE No.	DMCVSN1025581808	Chano:wv1zzz2kzax018574	
Index Mark and Registration	GBB9308U	AUTOSAFE	
Number of Vehicle			
2. Name of Policy Holder	M/S BACK TO FLOWERS		
Effective date of the Commencement of Insurance for the purposes of the Regularity Ordinance or Enactment		Excess Sect I	
4. Date of Expiry of Insurance	30 August 2019		
Persons or Classes of Persons entitled	to drive*		
Any person who is driving	on the Policyholder's order	or with their permission.	
regulations to drive the M	notor Vehicle or has been so	rdance with the licensing or other laws or permitted and is not disqualified by order of a ion in that behalf from driving the Motor Vehicle.	
6. Limitations as to use:*			
(1) Use in connection with	the Policyholder's busines:	5.	
(2) Use for the carriage of Policyholder's busines		hire or reward) in connection with the	
(3) Use for social, domest The Policy does not cover.			
	- · · · · · · · · · · · · · · · · · · ·	liability trial or speed testing. any one disabled mechanically propelled vehicle.	
HIRE PURCHASE CO.: OCL LT * Limitations rendered inop and Section 95 of the Road	erative by Section 8 of the Motor Ver	nicles (Third-Party Risks and Compensation) Act (Chapter 189) ot 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued	Ву:	VITESSE_SOLUTIONS	
		Authorised Officer	



# 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-18-151749

Date of Request:

02/10/2018

Your Ref No:

Online Purchase

Lai Huat (Meng Kee) Motor Pte Ltd 160 Sin Ming Drive #04-01 Sin Ming AutoCity Singapore 575722

Dear Sir/Madam,

**Enquiry Date** 

02/10/2018

Enquiry By

Jenny Lim Lai Foong

TP Vehicle No.

SDQ8063D

Accident Date

02/10/2018

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SDQ8063D	AXA Insurance Pte Ltd	16/03/2018-16/03/2019	6338 7288

Thank You.

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