

Kah Motor Co. Sdn. Bhd. Body Repair & Paint Centre 6A Mandai Estate

Singapore 729903 Tel: +65 6841 3838 Fax: +65 6362 5015 www.honda.com.sg

M/s: Lonpac Insurance Bhd

100 Beach Road #19-00

**Shaw Towers** 

Singapore 189702

**Attn: Motor Claims Department** 

Your ref : CC4/LPC18018821/ha3

8/4/2019

C/o LKK Auto Consultants Pte Ltd

Ms Vie Alpeh

Our ref :

Date

SLF6314G

Dear Sir / Madam,

### THIRD PARTY DIRECT SETTLEMENT

## ACCIDENT INVOLVING SLF6314G & GX7427Y DOA: 12/10/2018

We	refe	er to the item(s) marked ( 🗸 ) below	v:
( 🗸	)	We refer to your fax dated 19/10	/2018
( 🗸	)	We enclosed herewith the repair	invoice / Third Party Direct Settlement Agreement.
( 🗸	)	Kindly forward the discharge von	ucher for our client's signature within 2 weeks via
		email to: desmondtoh@honda.	com.sg
(	)	We return your discharge vouche	er duly completed.
( 🗸	)	Kindly expedite settlement the fo	llowing :-
		Repair Cost S\$ 1:	2,047.55 payable to Kah Motor Co. Sdn. Bhd.
		Rental S\$ 1	048.60.00 payable to Sim Wee Siang
		Kindly let us have your cheque n	nade in favour of the above mentioned name(s) for
( 🗸	)	our	
		transmission as soon as possible.	
( 🗸	)	Letter of Authority, Rental Bill,	
		Thank you.	

Yours faithfully,

Anikka Lai

# LETTER OF AUTHORITY

# TO WHOM IT MAY CONCERN

ACCIDENT INVOLVING (OWNER'S VEHICLE NO.) & & & &
(THIRD PARTY'S VEHICLE NO.) GX 7437Y ON 13/10/18
ALONG
I hereby authorize Kah Motor Co. Sdn Bhd (Kah Motor) and its agents or any person authorized by Kah Motor to do all or any of the following:
<ul> <li>To submit, resolve and make any claim(s) which I may have against the 3<sup>rd</sup> party insurers.</li> </ul>
<ul> <li>To execute, sign discharge voucher/indemnity forms and all necessary documents in connection with and arising out of the above claim.</li> </ul>
• Any payment should be made in favour of my name / Kah Motor Co. Sdn. Bhd.
***************************************
Ale .
Owner Signature Co stamp & authorized signature if is Co registered vehicle)
same: Sim Wee Stang
RIC No:
ehicle No:
ote .



Kah Motor Co. Sdn. Bhd.

# Service Tax Invoice

GST Reg No.

M200050223

Company Ref. No. S60FC1380G

(A Member of Oriental Holdings Berhad)

6A Mandai Estate, SINGAPORE 729903

Mandai Parts Centre

Phone No.: +65 6841 3838 Fax No.:

LONPAC INSURANCE BHD MOTOR CLAIMS DEPT 100 BEACH ROAD #19-00 SHAW TOWERS SINGAPORE, 189702

Customer No.: WZL009 Payment Term: 30 Days

Invoice No. SINV-BM19000468

**Invoice Date** 29/03/19 Order No. SVO18062186

Reference

Job Card No. 08001

Date/Time Received 12/10/18 / 8:42:03 PM Licence No. SLF6314G

HRV LX-SIN CVT YM 2016 Model Car Chassis No. JHMRU1830GX200236

Car Engine No. L15B4530236 Mileage 48220

Service Advisor ANIKKA LAI SWEE KAM 1821 Served By **ANIKKALAI** 

**Page** :

7.2		2 3 2						7% GST Am	
No.		Description	Qty.	. UoM	U. PriceD	isc %	Amount	Amount	GS
		TP DIRECT SETTLEMENT (J/NO:	1						
		OWNER: SIM WEE SIANG							
		OWNER INSURER: LIBERTY							
		ACC DATE: 12/10/2018							
		SURVEYED BY: NAZ /LKK							
		DATE: 22/10/2018							
		REF NO:							
		TP INSURER: LONPAC							
DOCUM	0704	TP VEH: GX7427Y							
BOSUN	0701	SUNDRIES	1	Hours	80.00		80.00	5.60	85.6
BOJSE	1610	BODY JOINT SEALANT TAILGATE	1	Hours	80.00		80.00	5.60	85.6
BOJSE	1610	BODY JOINT SEALANT END PANEL	1	Hours	80.00		80.00	5.60	85.6
BOJSE	1610	BODY JOINT SEALANT FLOOR PANEL	1	Hours	80.00		80.00	5.60	85.6
BOMISC1	1757	RESET & CALLIBRATE SMART ENTRY SYSTEM (N)	1	Hours	200.00		200.00	14.00	214.0
BOMISC1	1757	REMOVE & INSTALL REAR VIEW CAMERA (N)	1	Hours	220.00		220.00	15,40	235.4
BA02R	0671	REMOVE & RENEW REVERSE SENSORS-4	1	Hours	140.00		140.00	9.80	149.8
5.10211	00.1	PCS (N)	•	riodio	1-10.00		1-10.00	0.00	140.0
BMI03D	0671	REMOVE & INSTALL REAR COMPARTMENT	1	Hours	360.00		360.00	25.20	385.2
		LININGS							
DVTCOOD	0074	GARNISHES.(N)			500.00		500.00	00.00	500.0
BKTG02R	0671	REMOVE & TRANSFER ITEMS TO NEW TAILGATE. ADJUST &	1	Hours	560.00		560.00	39.20	599.2
		ALIGN TAILGATE.(N)							
BMU30R	0671	RMOVE & REPLACE EXHAUST SYSTEM.(N)	1	Hours	560.00		560.00	39.20	599.2
BKRP21B	0671	CUT OFF & RENEW RR FLOOR PANEL &	1	Hours	1,960.00		1,960.00	137.20	2,097.2
		DAMAGE PARTS.		,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1,000,00	101.20	_,00112
		STRAIGHTEN ALIGN RR CHASSIS & RENEW D	AMA	(GE					
BP06R	1610	PARTS. SPRAY PAINTING ON REPAIRED OR	1	Цонго	3,470.00		2 470 00	242.00	2 742 0
Brook	1010	REPLACED AREAS. (6P)	'	Hours	3,470.00		3,470.00	242.90	3,712.9
68100-T7A-J20ZZ		TAIL GATE COMP	1	Each	855.70	25	641.77	44.92	686.6
74440-T7A-003		WEATHERSTRIPTAILGATE	1	Each	98.70	25	74.02	5.18	79.2
74800-T7A-J02		LOCK ASSYTAILGATE	1	Each	78.90	25	59.17	4.14	63.3
84550 <b>-T</b> 7A-J00		BOX ASSY,CARGO FLOOR	1	Each	129.50	25	97.12	6.80	103.9
75722-T7W-A01		EMBLEMRR.	1	Each	13,30	25	9.97	0.70	10.6
75725-T8N-T00		EMBLEM,RR. I-VTEC	1	Each	14.50	25	10.87	0.76	11.6
75701-T5A-000		EMBLEMH	1	Each	10.70	25	8.02	0.56	8.5
90301-ST0-003		NUTPUSH 3MM	2	Each	2.10	25	3.15	0.22	3.3
04715-T7A-900ZZ		FACE,RR.BUMPER	1	Each	463.70	25	347.77	24.34	372.1
71593-T7A-J00		SPACER R,RR.BPR S	1	Each	16.90	25	12.67	0.89	13.5
71598-T7A-J00		SPACER,L.RR.BPR S	1	Each	16.90	25	12.67	0.89	13.5

This is a computer generated invoice. No signature is required, Please review your bill and advise us of any errors or omissions, Kah Motor reserves the right to deliver a subsequent bill for any charge omitted. GST Amount is calculated from individual line(s). Please give us your feedback by scanning the QR Code using mobile device.



#### Kah Motor Co. Sdn. Bhd.

(A Meniber of Oriental Holdings Berhad) 6A Mandai Estate, SINGAPORE 729903

Mandai Parts Centre

Phone No.: +65 6841 3838 Fax No.:

LONPAC INSURANCE BHD MOTOR CLAIMS DEPT 100 BEACH ROAD #19-00 SHAW TOWERS SINGAPORE, 189702

Customer No.:

WZL009

Payment Term: 30 Days

# Service Tax Invoice

GST Reg No.

M200050223

Company Ref. No. S60FC1380G

7% GST Amount incld

Invoice No. SINV-BM19000468 **Invoice Date** 29/03/19 :

Order No. SVO18062186

Reference

Model

Job Card No. 08001

Date/Time Received 12/10/18 / 8:42:03 PM Licence No. SLF6314G

HRV LX-SIN CVT YM 2016 Car Chassis No. : JHMRU1830GX200236 Car Engine No. L15B4530236

Mileage 48220 ANIKKA LAI SWEE KAM 1821 Service Advisor

Served By **ANIKKALAI Page** 2

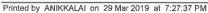
No.		Description	Qty.	UoM	U. PriceD	isc %	Amount	Amount	GST
91505-TM8-003		CLIPBUMPER	7	Each	2.30	25	12.07	0.84	12.91
33555-T7A-J01		REFLECTOR ASSYL.RR.	1	Each	156.30	25	117.22	8.21	125.43
04717-T7A-000ZZ		FACER.RR.BUMPER CORNER	1	Each	94.10	25	70.57	4.94	75.51
04718-T7A-000ZZ		FACEL.RR.BUMPER CORNER	1	Each	94.10	25	70.57	4.94	75.51
66100-T7A-300ZZ		PANEL COMPRR.	1	Each	373.10	25	279.82	19.59	299.41
04655-T7A-310ZZ		PANEL SETRR.FLOOR	1	Each	675.50	25	506.62	35.46	542.08
18307-T7A-901		SILENCER COMPEXHUAST	1	Each	538.60	25	403.95	28.28	432.23
74646-T7A-010		COVERRR.FLOOR UN	1	Each	120.70	25	90.52	6.34	96.86
74940-TZ5-A01		BUZZER ASSYSMART	1	Each	60.40	25	45.30	3.17	48.47
65513-T7A-300ZZ		STIFFENERRR.JACK UP	1	Each	61.40	25	46.05	3.22	49.27
91505-T5A-003		CLIPUNDER COVER	2	Each	0.70	25	1.05	0.07	1.12
BG02R	1757	REPLACE RR. WINDSCREEN.(N)	1	Hours	360.00		360.00	25.20	385.20
73214-T7J-H01		RUBBER CR.WINDSHIELD DAMPER	1	Each	19.30	25	14.47	1.01	15.48
73226-SZW-000		DAMPERSTD 5X5	1	Each	8.50	25	6.37	0.45	6.82
73254-T7J-H01		RUBBER CL.WINDSHIELD DAMPER	1	Each	19.30	25	14.47	1.01	15.48
76711-T6A-003		CAPPIVOT	1	Each	4.80	25	3.60	0.25	3.85
91501-S70-003		FASTENER BW/SHIELD	4	Each	5.30	25	15.90	1.11	17.01
91502-S70-003		FASTENER B	2	Each	5.30	25	7.95	0.56	8.51
91536-SS0-J01		FASTENER AW/SHIELD	2	Each	3.80	25	5.70	0.40	6.10
BO-WS-SEALANT		WINDSCREEN SEALANT (N)	2	Each	60.00		120.00	8.40	128.40

Sum Item	3,109.40	217.65	3,327.05
Sum Labor	8,150.00	570.50	8,720.50

**Total SGD** 11.259.40 788.15 12,047.55

Total Payable (SGD)

12,047.55





sental & Leasing Department 370 Ubi Road 3 Singapore 408651 Tel: +65 6513 0645 | Fax: +65 6841 2611 | www.honda.com.sg GST Reg. No.: M200050223 Company Reg. No.: S60FC1380G

### **RENTAL AGREEMENT**

No. 05337

Date: 20 Oct 2018

		Date: 20 Oct 2018
VEHICLE PARTICULA	R has not been been been been	PAYMENT
Vehicle No.	: SJL754B	Day: 14 days x 70.00 980.00
Make	: HONDA	Week 0.00
Model	: HONDA CITY LX 1.5 I-VTEC AUTO	Month 0.00 Add HRS 0.00
Out (Date & Time)	g: 22 Oct 2018   0900	SUB TOTAL 980.00
In (Date & Time)	: 05 Nov 2018   1720	GST 68.60
HIRER PARTICULAR		NETT AMOUNT 1,048.60
Name	: SIM WEE SIANG	
Address (Res)	: BLK 19 DOVER CRESCENT #12-24 SINGAPORE 130019	SECURITY DEPOSIT 0.00
Tel	: 98738795	REMARKS
Name on Credit Card	:	SLF6314G SA: ANIKKA
Credit Card No.	:	TP CLAIM > LONPAC
Payment Mode	: Cash	TERMS & CONDITIONS
MAIN DRIVER PARTIC	CULAR	Malaysia Drive Surcharge
Name	: SIM WEE SIANG	<ul> <li>Normal days \$20/day + 7% GST</li> <li>Blackout dates, Eve of PH &amp; PH \$40/day +7% GST</li> </ul>
Address (Res)	: BLK 19 DOVER CRESCENT #12-24 SINGAPORE 130019	<ul> <li>Insurance Excess</li> <li>S'pore Drive Excess - \$1500 + 7% GST</li> </ul>
Driving License No.	: S7813165I	O Malaysia Crive Courses towing & custor
Passing Date	: 18/12/1998	Vehicle is n state and back of this agreen
Date of Birth	: 19/05/1978	Vehicle is to key Sev4.0 d above.      Historic rest W NETSU0016D SON RHD
NRIC/FIN/Passport No	: S7813165I	Hirer mustr MANDAI EST :currence.
ADDITIONAL DRIVER	PARTICULAR	• Violation of 111804418000 80441601 ble for the
Name	:	NETS PURCHASE SAU
Address (Res)	: "	use. 17:58123
Driving License No.	:	charges: 2002797
Passing Date	:	1. Less that <b>\$1,048.60</b> 2. More that <b>\$1,048.60</b>
Date of Birth	:	Unpaid rental
NRIC/FIN/Passport No	:	released after APPROVED  • Rental Depo
E 0 5 NOV 20	18	O A rental d Down Loaded NETSPay yet? O Rental de booking is rental. O Rental de Com. s9/netsPay ooking.  O Refund pri G used at po
		Otherwise, thereജ. 🏎 ചാവാട്ടാലട കഥര്മർ to your final bill. **

Hirer's Signature

for

Main Driver's Signature Credit Card Holder's (if not hirer) Signature (if not hirer)





SIM WEE SIANG

BLK 19 DOVER CRESCENT

#12-24

SINGAPORE 130019

GST Reg. No.: M200050223 Company Reg. No.: S60FC1380G

Tax Invoice

Invoice No. : CRINV/18/02225

Tel: +65 6513 0645 | Fax: +65 6841 2611 | www.honda.com.sg

Invoice Date : 10 Nov 2018 Customer No. : \*\*\*\*\*165

Ref

кепта: с севзінд рерагилент

370 Ubi Road 3 Singapore 408651

Currency : SGD Terms : COD

**RA No.** : 05337

**Customer Information** 

Customer Name : SIM WEE SIANG

Customer Ref No. : SLF6314G (AL)

Car Information

Registration No. : SJL754B

Car Model : HONDA CITY LX

1.5 I-VTEC AUTO

Car Color : RED

**Rental Information** 

Date/Time Out : 22/10/2018 09:00 Date/Time Return : 05/11/2018 09:00

Starting Mileage : 103081 Ending Mileage : 103880 Mileage Travelled : 799

**Billing Detail** 

# Description

Amt

1 14 DAYS @ 70.00

980.00

#### Remarks:

MD/BS - SA: ANIKKA LAI

Payment due upon Payment Terms as stated above. Please make payment strictly in accordance with payment terms. Interest will be charged at 2% per month on overdue amounts.

Printed by mdbdysa01 at 30/03/2019 08:47

Subtotal : GST 7.0% : S\$ 980.00 S\$ 68.60

Total:

S\$ 1,048.60

Paid:

S\$ 1,048.60

Outstanding:

S\$ 0.00

#### 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 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. 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	12/10/2018 20:04	
Date Of Accident	12/10/2018 08:10	
Exact Location Of Accident	BKE > KJE (TUAS)	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLF6314G	
Insured/Policyholder		
Name Of Registered Owner	SIM WEE SIANG	
NRIC No	S7813165I	
Email Address	WSSHEN@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-98738795	
Alternative Phone No	OFFICE-98738795	
Vehicle Particulars		
Manufacturer	HONDA	

Manufacturer	HONDA
Model	HR-V-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?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

**Insurance Company** 

Name of Insurance Company LIBERTY INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number
Cover Note Number

Driver

 Name of Driver
 SIM WEE SIANG

 NRIC No
 \$7813165I

 Date Of Birth
 19/05/1978

 Occupation
 INDOOR

 Date Of Driving Pass
 18/12/1998

Driving Experience 19 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98738795

Fax Number

Contact Number OFFICE-98738795

EMail Address WSSHEN@GMAIL.COM

Address

Postcode

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

**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

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

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** 

AS ANNEX D&E

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

GX7427Y

Vehicle Make/Model/Colour

TOYOTA / WHITE

**Details Of Properties** 

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

RAJARETHINAM JITAY

NRIC/Passport Number

G7846686W

Contact Number

84219452

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SLF 63146 Vehicle No

# SKETCH PLAN

Anney O

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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 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.
- 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' law yers/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 malling 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
- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

12/10/18

Policyholder's Signature / Date & 0900

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel

Sketch Plan

Please continue to Annex E.

### Sketch Plan Pg. 2

	-
Vehicle No SLF 63146	Annex E
Describe Circumstances of the Accident	
Describe Circumstances of the Accident  I was driving on my way to work and I had slowed an the extrance ramy to kit from BKT towards Turn I was hit behind by the other remide (1x7417) while I was stationary.  Refer to the photos affinence.	down
	42
	(partitions (partitions))
Declaration  We declare the foregoing particulars are true in every respect.	
Driver's Signature (If driver is not the policyholder) / Date    2   (0   18	entre