



N-51 AUTOMOTIVE PTE LTD

(3.7)

Kaki Bukit Autohub,
2 Kaki Bukit Ave 2
#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27
Singapore 417921
Tel No. : +65 6842 0051 / 6744 0510 Fax No. : +65 6741 0510
Company Reg. No. : 200616038C
GST Registration No. : 200616038C

13 March 2019

Our Ref : CLM14848 / SKW9444S / OCT-21/2018

LONPAC INSURANCE BHD

100 BEACH ROAD
#19-00 SHAW TOWER
SINGAPORE 189702

ATTN: MOTOR CLAIMS DEPARTMENT

Dear Sir @ Madam,

Re: Accident involving SKW9444S & GBE2108K on 13/10/2018
Along Blk 115 Bedok Reservoir Road Open Carpark

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **GBE2108K** whose vehicle was insured with you at the material date of the accident.

We are proposing for a direct settlement on the claims as following EXCLUDE personal injury in respect of claim arising out of the above mentioned accident.

Cost of repairs	\$	2,889.00	(Include 7% GST)
Loss of rental	\$	898.80	(\$128.40 X 7 Days)
LTA search fee	\$	7.45	
	S	<u>\$ 3,795.25</u>	

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM14848
- 2) Twincar Leasing Pte Ltd - Invoice No: TLCS17809
- 3) LTA search fee
- 4) Letter of Authorisation
- 5) GIA report of SKW9444S
- 6) Accident video

We look forward to your prompt reply.

Yours faithfully,



N-51 AUTOMOTIVE PTE LTD

S.Y.NEO

Director



bizSAFE₃

P.I.C - Melody Chin

Reply to : huixin@n51.com.sg

N-51 AUTOMOTIVE PTE LTD

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2 Kaki Bukit Ave 2
#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27
Singapore 417921
Tel No. : +65 6842 0051 Fax No. : +65 6741 0510
E-Mail : sales@n51.com.sg
Company Reg. No. : 200616038C
GST Registration No. : 200616038C

LONPAC INSURANCE BHD
100 BEACH ROAD
#19-00 SHAW TOWER
SINGAPORE 189702

TWINCAR LEASING PTE LTD
2 KAKI BUKIT AVE 2 #01-17
KAKI BUKIT AUTOHUB
SINGAPORE 417921

Contact : 91426464

TAX INVOICE

Date : 28/02/2019
Date in : 15/10/2018
Vehicle Num. : SKW9444S
Make/Model : TOYOTA COROLLA ALTIS CLASSIC 1.6 CVT-2015
Chassis/Eng# : MR053REH104537084/1ZRX525656
Accident Date : 13/10/2018
Claim No : CLM14848
Reference : OCT-21/2018
Policy No. : SD17V11639/VPZ/R02 (18/10/2018)

LUMPSUM REPAIR BILL
REF : CLM14848-N51 DATED 16/10/2018
BY DIRECT

Amount S\$
2,700.00



E. & O.E.	Sub S\$:	2,700.00
	Add GST (7%) S\$:	189
	Total Amount S\$:	2,889.00

for N-51 AUTOMOTIVE PTE LTD



bizSAFE₃

TWINCAR LEASING PTE. LTD.

Company & GST Registration Number : 201533046C
2 Kaki Bukit Avenue 2 #01-17 Kaki Bukit Autohub, Singapore 417921
Tel: 6744 0510 Fax: 6741 0510 email: twincar.rental@n51.com.sg

Invoice To

YA'ACOB BIN WAKAM
Blk 773 Bedok Reservoir Vie
#13-135
Singapore 470773

TAX INVOICE

Invoice No. TLCS 17809
Date 21/11/2018
Terms Cash

No. Days	Description	Rate	Amount
7	Vehicle No. SKX2179Z - Car Rental for the period 15/10/2018 to 22/10/2018 (ref. Vehicle SKW9444S) Tax collected on sales	120.00 7.00%	840.00 58.80
		7% GST	\$58.80
		Total Amount	\$898.80

TWINCAR LEASING PTE. LTD.

Authorized Signature



Note : Kindly make payable to " TWINCAR LEASING PTE LTD"
or by Bank-in/transfer to UOB Bank A/c No. 310-307-697-6 (Bank Code 7375)



TWINCAR LEASING PTE LTD

Company Registration Number : 201533046C
2 Kaki Bukit Avenue 2 #01-17, Singapore 417921
Tel: 67440510 Fax: 67410510 email: twincar.rental@n51.com.sg

VEHICLE RENTAL AGREEMENT

VHA NO:

HIRER'S PARTICULAR

Name(as in I/C): YA'ACOB BIN WAKAM
NRIC/PASSPORT No: S2002180B
Address(Res): BLK 773 BEDOK RESERVOIR VIEW #13-135 SINGAPORE 470773
Occupation: Driver Driving Exp: 384
Driving License No: S2002180B D/L Type: Local
Issue Date: 1980-09-01 Date of Birth: 1954-02-12
Tel: (HP) 91426464
Email: WAKAMYA@GMAIL.COM

Vehicle No: SKX2179Z

Make: TOYOTA

Model: COROLLA ALTIS

Auto/Manual Group: AUTO

Year: 2015

Colour: GREY

Mileage Out:

OUT: Date 2018-10-15

Time: 11: 55AM

NON-WAIVER EXCESS:

Section1: \$2000

Section2: \$2000

ADDITIONAL DRIVER'S PARTICULARS

Name(as in I/C):
NRIC/PASSPORT No:
Address(Res):
Occupation: Driving Exp:
Driving License No: D/L Type:
Issue Date: Date of Birth:

CHARGES

Daily rate SGD120.00

PETROL-LEVEL

Out	E	1/4	1/2	3/4	F	1/4
In	E	1/4	1/2	3/4	F	E

Extension (Accessories)

Collection Service

Misc.

Security Deposit Collected

Rental Term

Cash

Start Date

2018-10-15

End Date

2018-10-29

Rented out by:

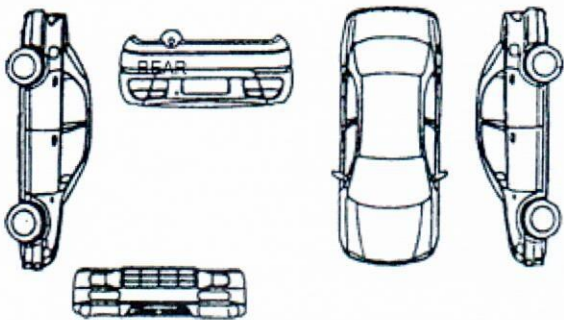
Hirer signature:

Addition Driver's Signature:

VEHICLE CHECKLIST

D - DENTS
S - SCRATCHES

INDICATE:
A - ACCIDENTS



RIGHT

FRONT

TOP

LEFT

ACCESSORIES CHECK

<input checked="" type="checkbox"/> Cig Lighter	<input checked="" type="checkbox"/> S/Tyre	<input checked="" type="checkbox"/> STDTools
<input checked="" type="checkbox"/> Reverse Sensor	<input checked="" type="checkbox"/> Hub Caps	<input checked="" type="checkbox"/> Remote Control
<input checked="" type="checkbox"/> CD/ Radio Player	<input checked="" type="checkbox"/> Reverse Camera	<input checked="" type="checkbox"/> Camera Recorder

I have read and agreed to the terms & conditions on both sides of this agreement. All information I have given TWINCAR LEASING PTE LTD in connection with this agreement is true.

IMPORTANT

- YOU HEREBY EXPRESSLY CONSENT AND AUTHORIZE TWINCAR LEASING PTE LTD AND GRABCAR TO DEDUCT FROM THE FARES GENERATED BY YOU AND/OR GRATUITY GRANTED TO YOU BY GRABCAR (IF ANY) FOR THE CAR RENTAL FEE AND ANY CHARGES PROVIDED HEREIN AND IN THE EVENT THAT THE FARES ARE INSUFFICIENT, ANY BALANCE SHALL BE PAID TO US IMMEDIATELY. THESE CHARGES SHALL INCLUDE BUT ARE NOT LIMITED TO CHARGES FOR 1.CAR RENTAL. 2. COST OF INSURANCE EXCESS, REPAIRS, REPLACEMENT OF PARTS TO THE CAR AND/OR DAMAGE TO THIRD PARTY PROPERTIES WHERE THE DAMAGES ARE DUE TO YOUR ACTIONS OR LACK OF CARE. 3. ANY UNSETTLED SUMMONS, FINES, PARKING CHARGES AND TOLL.
- THE VEHICLE SHALL BE RENTED OUT ON A DAILY BASIS, WITH A MINIMUM RENTAL PERIOD OF SIX MONTH.
- IN THE EVENT THAT THE HIRER RETURN THE VEHICLE PRIOR TO THE END OF THE MINIMUM RENTAL PERIOD, THE HIRER WILL BE REQUIRED TO PAY THE FULL RENTAL FEE APPLICABLE FOR THE REMAINING PERIOD UP TO THE END OF THE MINIMUM RENTAL PERIOD.
- ONLY PERSONS ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON TRAFFIC VIOLATIONS REDIRECTED.
- IN THE EVENT OF AN ACCIDENT, THE HIRER SHALL BE LIABLE FOR THE INSURANCE EXCESS OF SECTION 1 (OWN DAMAGE) AND SECTION 2 (CLAIM BY 3RD PARTY).
- IN CASE OF ACCIDENT THE HIRER SHOULD REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- THE VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY TWINCAR LEASING PTE LTD.
- AN ADDITIONAL EXCESS OF \$2000 OF ALL CLAIM WILL APPLY FOR VEHICLE USE OUTSIDE SINGAPORE AND \$3000 FOR AGE ABOVE 68.
- THE HIRER SHALL NOT USE THE VEHICLE FOR ANY OTHER COMMERCIAL ACTIVITY OTHER THAN SOLELY FOR THE PURPOSES OF PROVIDING TRANSPORTATION SERVICES REQUESTED BY GRABCAR USERS VIA GRAB APP. FAILING WHICH, WE RESERVE THE ABSOLUTE RIGHT AND OPTION TO TERMINATE THIS CAR RENTAL AGREEMENT, FORFEITING YOUR DEPOSIT, AND YOU SHALL BE REQUIRED TO RETURN THE CAR IMMEDIATELY AND YOU SHALL CONTINUE TO BE LIABLE FOR RENTAL DUE FOR THE REMAINING RENTAL TERM.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
22/10/2018	11:40AM				

> Back to OneMotoring



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

Print Date/Time : 15 Oct 2018 / 15:10:01

Receipt Date/Time : 15 Oct 2018 / 15:10:01

Tax Invoice/Receipt

Receipt No. : ITNET-00000-181015-001503

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - GBE2108K

As at 13 Oct 2018/18:10:00

Insurance Co: LONPAC INSURANCE BHD

1 Insurance Enquiry - GBE2108K
Enquiry Fee
20181015150913143804

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

xxxxxxxxxxxx2392 Credit Card:
Visa/MasterCard 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.

LETTER OF AUTHORISATION

To: **M/s N-51 Automotive Pte Ltd**
Singapore

RE: ACCIDENT INVOLVING VEHICLE NOS: SKW 9444 S & GBE 2108 K
ALONG BLK 115 BEDOK RESERVOIR RD OPEN CARPARK ON 13/10/2018 @ 18:10HRS

I/We TWINCAR LEASING PTE LTD NRIC/Passport No: 20533046 C
of 2 KAKI BUKIT AVE S #01-17 KAKI BUKIT AUTOHUB S(47921)
the owner of vehicle no. SKW 9444 S hereby authorise you to commence repair to the said
vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request.

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident' claim and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is inadequate, I/we undertake to pay you for your expenses, costs and fees immediately.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.

My/Our insurer is/are _____

Policy No. _____

Expiry Date: _____

Date: _____

Excess: _____

Owner's Signature/Co's stamp (if applicable)

Witness Signature/Name

Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident.

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 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	15/10/2018 17:05
Date Of Accident	13/10/2018 18:10
Exact Location Of Accident	BLK 115 BEDOK RESERVOIR OPEN CSR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW9444S
Insured/Policyholder	
Name Of Registered Owner	TWINCAR LEASING PET LTD
Co Reg No	201533046C
Email Address	SALES@N51.COM.SG
Mobile Phone No	(LOCAL) +65-83802233
Alternative Phone No	OFFICE-68420051

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 CLASSIC CVT (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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD17V11639/VPZ/R02
Cover Note Number	

Driver

Name of Driver	YA'ACOB BIN WAKAM
NRIC No	S2002180B
Date Of Birth	12/02/1954
Occupation	OUTDOOR
Date Of Driving Pass	01/09/1980
Driving Experience	38 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91426464
Fax Number	
Contact Number	
Email Address	WAKAMYAACOB@GMAIL.COM

Address	BLK 773 BEDOK RESERVOIR VIEW, #13-135
Postcode	470773
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	
Was any body injured in the Accident?	YES
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

REFER TO ATTACHED SKETCH PLAN

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	GBE2108K
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)	

DETAILS OF INJURED PERSON 1

Name	YA'ACOB BIN WAKAM
Approximate Age	64

Injuries Sustain

Injured person in which vehicle?

SKW9444S

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan

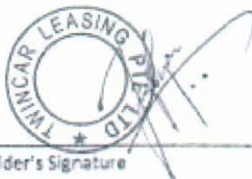
SKETCH PLAN

IMPORTANT NOTICE

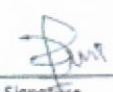
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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:



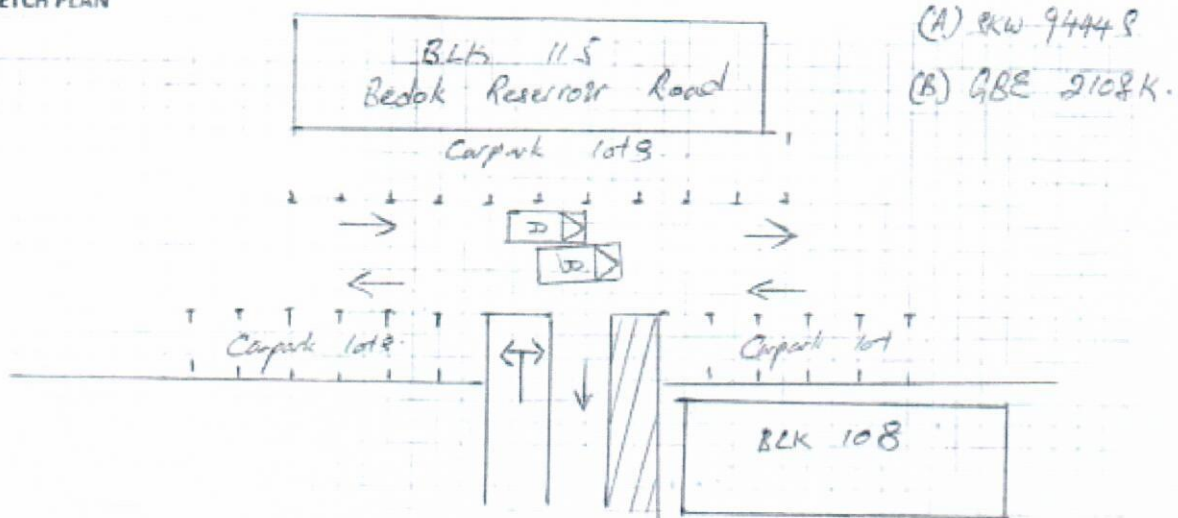
Driver's Signature
(if driver is not the policyholder)
Date & Time:



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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13/10/18 at @ 1810 hrs, I was travelling in my vehicle (9KW 9444 S) in front of BLK 115, Bedok Reservoir Road heading straight. I slow down near the junction to check for traffic and suddenly, a van (GBE 2108 K) from behind overtake me and swerve into my lane and collided onto the front right portion of my vehicle.

DECLARATION

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

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.: