

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02

SINGAPORE 486443

TEL:65446671 FAX:62141511

CO. REG:200707743D GST REG:200707743D

Our Ref: SHB8703Y/GS

WITHOUT PREJUDICE

19th December 2018

(By Email Only)

Attn: The Motor Claims Department

India International Insurance Pte Ltd

64 Cecil Street #04/#05

IOB Building

Singapore 049711

Dear Sir/Madam

ACCIDENT INVOLVING SHB8703Y & SH8235U ALON CHANGI AIRPORT T3 – DEPARTURE HALL ON 02.11.18

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: SHB8703Y, to claim against the party/parties responsible for the damages arising from the above-mentioned accident.

Our records show that you are the insurers of vehicle number: SH8235U at the material time of the accident with the driver of our client's vehicle, Mr Tan Gek Choon

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: SH8235U, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of repair	\$	749.00 (Incl. GST)
(2) Loss of Rental - 2Days @\$102.51per day	\$	205.02
(3) Loss of Income – 2Days @\$100.00per day	\$	200.00
	\$	<u>1154.02</u>

A copy of each of the following supporting documents is enclosed:

- (1) Final Repair Bill, GIA report & sketch plan of SHB8703Y
- (2) Driver's I/C and Driving Licence
- (3) Vehicle Registration card, Certificate of Insurance
- (4) Check In/Out Voucher

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Our Ref: SHB8703Y/GS

We would appreciate if you could look into the subject matter and let us have your favorable offer within 14 days. If you are agreeable to the settlement of the above said claims, please forward us your discharge voucher as for our client's signature and payment made to "Premier Automotive Services Pte Ltd".

Please note that if we do not hear from you within the stipulated 14 days, we will have no alternative but to appoint our solicitor to act on our behalf to commence proceedings against you without further notice to you.

Yours faithfully,



Claims Department – Gary Shi

Email: gary.shi@premiertaxi.com

NB: We encourage all parties to liaise with us via email to expedite all matters

PS: Please quote our reference no when replying

c.c. Client – Premier Taxis Pte Ltd



PREMIER AUTOMOTIVE SERVICES PTE LTD
OFFICE: 23 Changi South Avenue 2 #01-02 S(486443)
TEL: 65436676 / 65436689 FAX: 62141511
CO. REG NO.: 200707743D GST. REG. NO.: 200707743D

PREMIER TAXIS PTE LTD
23 CHANGI SOUTH AVENUE 2 #03-02
SINGAPORE 486443

TAX INVOICE

DATE 19-Dec-2018
PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	AMOUNT
	FINAL REPAIR BILL FOR KIA OPTIMA REGN NO: SHB 8703 Y			\$ 700.00
TOTAL LUMP SUM REPAIR COSTS AS RECOMMENDED BY SURVEYOR				\$ 700.00
GST @ 7%				\$ 49.00
GRAND TOTAL				\$ 749.00



for Premier Automotive Services Pte Ltd

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)



09 November 2018

To Whom It May Concern

Dear Sir/Madam

CERTIFICATION LETTER

This letter serves to inform that Tan Gek Choon of NRIC Number S13744621 is a registered driver of SHB8703Y. Tan Gek Choon is paying daily rental rate of \$102.51 (Inclusive of GST).

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to be "Kellie Poh", written over a circular stamp.

Kellie Poh

Administration Manager

Prepared By: Hasnah

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#03-02
Singapore 486443
Telephone: +65 6214 8880 Fax: +65 6214 0330
www.premiertaxi.com
Co. Reg. No. 20030497511

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	05/11/2018 11:58
Date Of Accident	02/11/2018 07:00
Exact Location Of Accident	CHANGI AIRPORT T3 - DEPARTURE HALL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB8703Y
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

Vehicle Particulars

Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

Driver

Name of Driver	TAN GEK CHOON
NRIC No	S1374462I
Date Of Birth	07/04/1959
Occupation	OUTDOOR
Date Of Driving Pass	19/07/1978
Driving Experience	40 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93882350
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 227 #07-229 PENDING ROAD
Postcode	670227
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	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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

VEH. A - NO PAX VEH. B - 1 PAX

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	SH8235U
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	VEH. B
Vehicle Category	TAXI
Name of Driver	MALE CHINESE
NRIC/Passport Number	
Contact Number	92708292
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

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.

05 NOV 2018

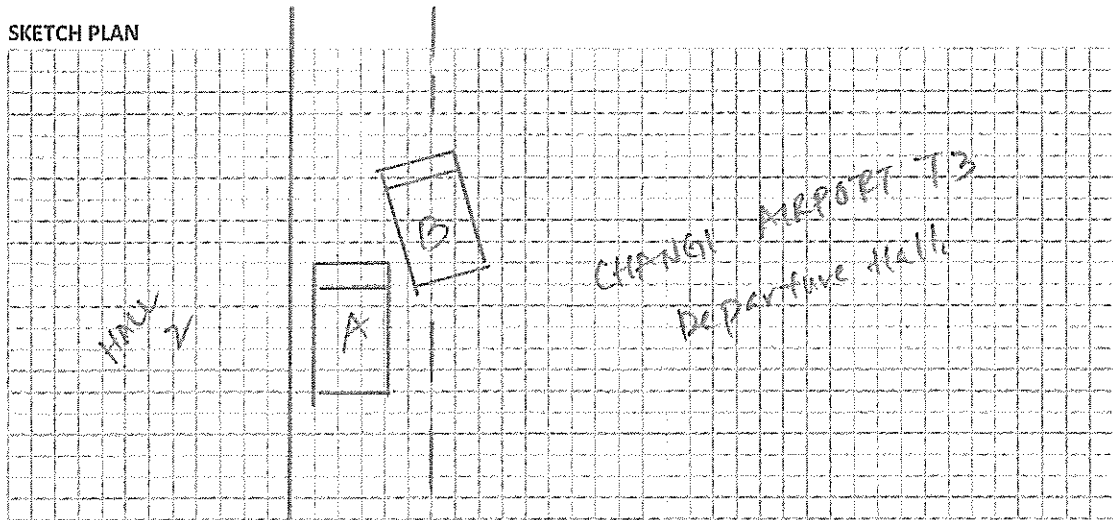


Policyholder's Signature
Date & Time:

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

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

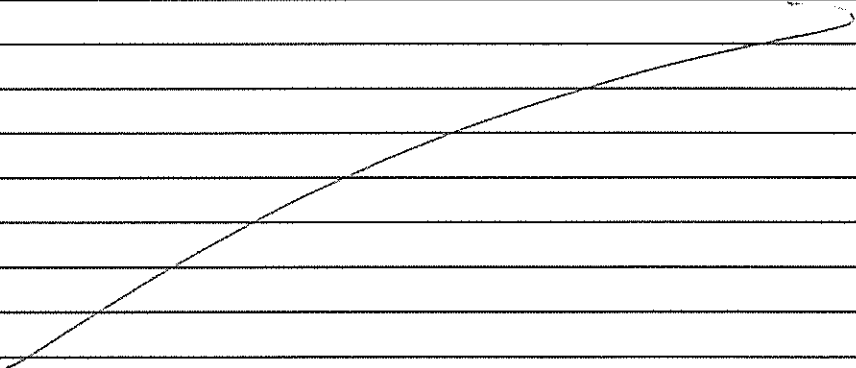
SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SHB 8703Y

B: SH 82354

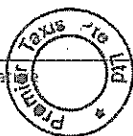


DECLARATION

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

05 NOV 2018

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.:

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31374462

Describe Circumstance of the Accident.

ON 02/11/2018 @ 0700HRS, I WAS IN MY TAXI (SHB 8703 Y¹), STATIONARY ALONG THE DROP OFF POINT @ CHANGI AIRPORT T3.

AFTER CHECKING FOR CLEARANCE FROM THE RIGHT, I THEN STARTED TO MOVE FORWARD BUT SUDDENLY VEHICLE B (SH 8235 U – COMFORT TAXI) WHICH WAS FROM THE RIGHT- FAILED TO KEEP FOR PROPER LOOK OUT, HAD ENCROACHED ONTO MY PATH ON MY FRONT RIGHT ABRUPTLY.

AS SUCH, THE LEFT PORTION OF VEHICLE B COLLIDED ONTO THE FRONT RIGHT PORTION OF MY TAXI WHILE HE WAS FILTERING INTO THE LEFT LANE.

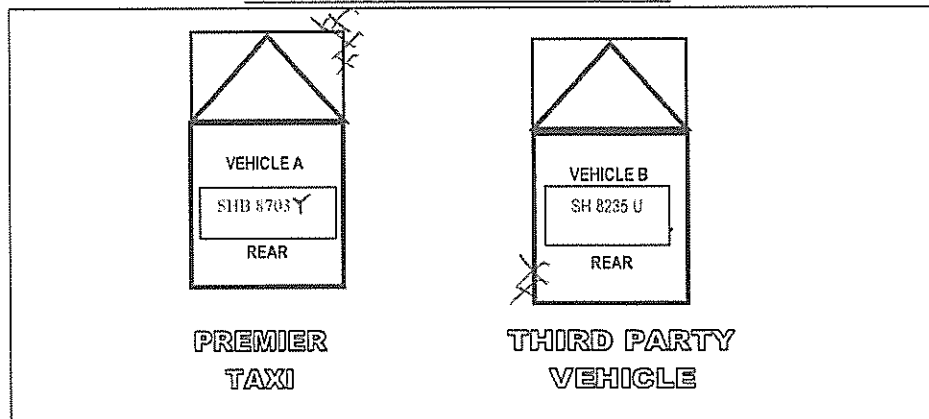
DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE FRONT RIGHT PORTION AND VEHICLE B HAD DAMAGES ON THE LEFT PORTION.

NO INJURY INVOLVED.

NO PASSENGERS ONBOARD MY TAXI & VEHICLE B HAD A PASSENGER ONBOARD.

*VIDEO FOOTAGE CAPTURED.

DAMAGES FOUND ON VEHICLE A & VEHICLE B



Key

[Signature] S13799621

Driver's Signature & NRIC Number

@ 12:07:32 PM

(attended by)

VEHICLE NO.

SHB 8703P

CONTACT NO.

9388 2350

NEW MAILING

ADDRESS

(if any)

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S13744621



Name

TAN GEK CHOON

Race

CHINESE

Date of birth

07-04-1959

Sex

M

S13744621

Country of birth
SINGAPORE

Licence Number: S13744621

Name

TAN GEK CHOON

Birth Date: 07 Apr 1959

Issue Date: 12 Aug 2003



Land Transport Authority

VOCATIONAL LICENCE



Licence No: S13744621

Name: TAN GEK CHOON

Issue Date: 30/12/2005

Please visit www.lta.gov.sg to check the status of this Vocational licence

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(E)

PASS DATE

Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	19 Jul 1978
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	07 Aug 1980

3414659



NRIC No. S13744621



Date of issue

17-10-2003

Address

APT BLK 227 PENDING ROAD
#07-229
SINGAPORE 670227



Licence No: S13744621

NP 428A

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	30/12/2005



Enquire Transaction History**Transaction History Details**

Log Date/Time:	27 Sep 2013 / 09:42:10	Receipt No.:	AACCK001-AX239-130927-000010
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Asset Type:	Vehicle	Transaction Amount:	\$70,976.00
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Asset ID:	SHB8703Y	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
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Transaction Type:	01.02 Register New Vehicle (AA)
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Business Transaction Reference No.:	20130927094210788068
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Vehicle No.:	SHB8703Y
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Vehicle Type:	H10 - Public Transport Taxi (Motor Car)
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Vehicle Attachment 1:	Air-Con (Taxi)
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Vehicle Attachment 2:	-
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Vehicle Attachment 3:	-
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Vehicle Scheme:	Taxi (Company)
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First Registration Date:	27 Sep 2013
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Original Registration Date:	27 Sep 2013
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Vehicle Make:	KIA
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Vehicle Model:	OPTIMA 1.7(A) DIESEL
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Chassis No.:	KNAGM414ME5446593
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Engine No.:	D4FDDH308049
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Motor No.:	-
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Trailer Chassis No.:	-
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Propellant:	Diesel
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Passenger Capacity:	4
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Engine Capacity:	1685
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Power Rating:	-
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Unladen Weight:	1584
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Maximum Laden Weight:	2050
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Primary Color:	Silver
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Secondary Color:	-
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Manufacturing Year:	2013
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Open Market Value:	\$20,137.00
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Minimum PARF Benefit:	\$7,615.00
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PARF Eligibility:	Y
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No. of Transfer:	0
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Effective Ownership Date/Time:	27 Sep 2013 09:42:10
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COE No.:	2013092701000788N
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COE Expiry Date:	26 Sep 2021
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COE Bid Category:	-
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Actual QP/PQP Paid Amount:	\$58,144.00
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Lifespan Expiry Date:	26 Sep 2021
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Owner ID Type:	Company
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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)

Certificate Number : 5095103893	Cover : Third Party
1. Index mark and Registration Number of Vehicle	: SHB8703Y
Chassis Number	: KNAGM414ME5446593
2. Name of Policyholder	: PREMIER TAXIS PTE. LTD.
3. Effective Date of Insurance	: 20 Oct 2017
4. Expiry Date of Insurance	: 31 Jan 2019
5. Persons or Classes of Persons entitled to drive*	
(a) The Policyholder.	
(b) Any licensed taxi driver driving on the Policyholder's order or with his/her permission.	
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. Limitations as to Use*	
(a) Use as a Taxi.	
(b) Use for social domestic and pleasure purposes.	

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION I)	: N/A
EXCESS (SECTION II)	: S\$3,500
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : HL SUNTEK INSURANCE BROKERS PTE LTD (00000690672)
Date of Issue : 16 Oct 2017 17:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive

