

Torque 5 Pte Ltd

No.8 Kaki Bukit Ave 4, Premier @ Kaki Bukit, #01-50 Singapore 415875 Tel: +65 6452 4457 | Fax: +65 6452 4584 | Email: enquiry@torque5.com Co. & GST Reg. No.: 201313221G

Proforma Invoice

Inv No.: PF51909002 Date: 13 Sep 2019 Ref: 15/01/2019

Currency : SGD

Terms: 30 Days Veh No.: SKR2372M

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building Singapore 079120 Tel: 6419 1000

#	Description	Qty	UOM	U/P	Disc	Amt
1	TO SUPPLY SPARE PARTS AND LABOUR FOR	1.00		8,000.00	0.00	8,000.00
	ACCIDENT REPAIR PARTS LUMP SUM AMOUNT			0,000.00	0,00	0,000,0

Subtotal : GST 7.0% :

S\$ 8,000.00 S\$ 560.00

Total:

S\$ 8,560.00

For TORQUE 5 PTE. LTD.

(Authorised Signature)

(Customer's Signature and Company Stamp)

I agree to the price as listed above and

condition.

affirm that the goods are received in good

PAGE 1 OF 1



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Co. Reg. No.: 201313221G

LETTER OF AUTHORISATION

Accident on along BUKN BOTOR East Ave 4 Involving vehicles SKR 2372m & SLB 5041X
involving venicles
In consideration of Torque 5 Pte Ltd, 8 Kaki Bukit Ave 4, Premier @ Kaki Bukit #01-50 Singapore 415875, repairing my/our motor vehicle no SKR 2372m at my request, I/We, Seny Mey ("the claimant") of 5 2 9 # 0 7 - 3 9 T
(address) bearing NRIC No SIGZ 9462D the owner of motor vehicle no SKZ 2592M, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.
I/We further agree to fully co-operate and attend all court hearings related to this accident that are necessary to prosecute the claims maintained by Torque 5 Pte Ltd .
I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith. In the event that my/our claim is unsuccessful due to untruthful statements from me/us, I/we undertake to pay to Torque 5 Pte Ltd the cost of repairs to my/our vehicle.
In the event that the settlement/payment cheque is being made in my/our favour, I/we hereby undertake to return the full amount to Torque 5 Pte Ltd account, within 7 days from receiving and clearance of the said settlement/payment cheque. Failing which, Torque 5 Pte Ltd will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.
I/We further authorize Torque 5 Pte Ltd to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to Torque 5 Pte Ltd shall amount to a good discharge of Torque 5 Pte Ltd obligation to me/us in respect of the settlement monies. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and condition being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.
Dated this day of (month) 20 (year)
Signed by "the claimant" Signed by Torque 5 Pte Ltd
Name: Town Seng Mens Name: Mench As
NRIC No:3 16 2 9462 0



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-19-008719

Date of Request:

16/01/2019

Your Ref No:

Online Purchase

Torque 5 Pte Ltd No. 8 Kaki Bukit Ave 4, #01-50 Singapore 415875

Dear Sir/Madam,

Enquiry Date

16/01/2019

Enquiry By

Stephanie Teo Wan Ting

TP Vehicle No.

SLB5041X

Accident Date

15/01/2019

our venice :

SKR 2372M

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel, No.	
SLB5041X	AIG Asia Pacific Insurance Pte. Ltd.	12/04/2018-11/04/2019	65-6419-3000	

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



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

TAX INVOICE

Our Ref No:

GR-19-008719

Date of Request:

16/01/2019

Your Ref No:

Online Purchase

Torque 5 Pte Ltd No. 8 Kaki Bukit Ave 4, #01-50 Singapore 415875

Dear Sir/Madam,

Enquiry Date

16/01/2019

Enquiry By

Stephanie Teo Wan Ting

TP Vehicle No.

SLB5041X

Accident Date

15/01/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



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

SEARCH RESULTS

Our Ref No:

GR-19-008750

Date of Request:

16/01/2019

Your Ref No:

Online Purchase

Torque 5 Pte Ltd No. 8 Kaki Bukit Ave 4, #01-50 Singapore 415875

Dear Sir/Madam,

Your Search Criteria:

15/01/2019

Date of Accident: Place of Accident:

BUKIT BATOK EAST AVE 4

Client Vehicle No:

SKR2372M

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

REQ. VEHICLE	ACCIDENT LOCATION	ACCIDENT DATE
SLB5041X	BUKIT BATOK EAST AVE 4 OUTSIDE CC	15/01/2019 15:20

Thank You.

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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

TAX INVOICE

Our Ref No:

GR-19-008750

Date of Request:

16/01/2019

Your Ref No:

Online Purchase

Torque 5 Pte Ltd No, 8 Kaki Bukit Ave 4, #01-50 Singapore 415875

Dear Sir/Madam,

Your Search Criteria:

Date of Accident:

15/01/2019

Place of Accident:

BUKIT BATOK EAST AVE 4

Client Vehicle No:

SKR2372M

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date

[X] GIRO [] Cash [] Cheque



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

TAX INVOICE

Our Ref No:

GR-19-008779

Date of Request:

16/01/2019

Your Ref No:

Online Purchase

Torque 5 Pte Ltd No. 8 Kaki Bukit Ave 4, #01-50 Singapore 415875

Dear Sir/Madam,

Date of Accident:

15/01/2019

Vehicle No:

SKR2372M

Place of Accident:

BUKIT BATOK EAST AVE 4 OUTSIDE POLICE STATION

Involving Vehicle No:

SLB5041X

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLB5041X	BUKIT BATOK EAST AVE 4 OUTSIDE POLICE STATION	14.00	1	13.08
GST Amount				0.92
Total Amount Du	e (GST Inclusive)			14.00

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Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date

[X] GIRO [] Cash [] Cheque



Invoice

SKR2372M

TAN SENG MENG

BLK 529 CHOA CHU KANG ST 51

#07-337

S(680529)

Invoice No: WPLIN0002693

Invoice Date :21/1/2019

Due Date

:21/1/2019

VHA No

:3201

Referral ID : T012

Description:

Amount

Rental for

4

Day/s @

\$130

per Day \$

520.00

Vehicle No

: SKT 5785 A

Vehicle Description

Toyota Altis 1.6 A

Rental Period

15/01/2019

to

19/01/2019

Total Amount Payable : \$

520.00

WIN WIN RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875 Tel: 6315 8479 H/P: 9833 0807

VHA No: 3201 Invoice No: WPLIN 2693

Hirer's Vehicle No:

UEN: 201505115E

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS	Vehicle No: SKT CAReplace Veh No:
Name: (as in I/C) TAN SENG MENG NRIC / FIN No:	Mileage Out: // / / Mileage Out:
NRIC / FIN No:	Make & Model: Auto / Manual
Address (Res): BCK 529 CHOA CHU KHNG STS1 #07-337 S(680529)	TOYOTA ALTIS
	Out: Date / 5/01/2019 Time: / 7/10
Name & Address of Employer:	HIRE / PERIOD EXPIRY Time:
	NON-WAIVER EXCESS=\$ 2000 p
Occupation:Driving Exp:	CHARGES
Singapore Driving Licence No:	Daily 4 @\$ 130 per day # \$20 -
Tel: (O) (R) HP: 9 60 2189 2	
ADDITIONAL DRIVER'S PARTICULARS	Weekly @\$ per week
Name: (as in I/C)	Monthly @\$ per month
NRIC / FIN No:	Hours @\$ per hour
Address (Res):	Extension @\$
	Delivery/Collection Service
Occupation:Driving Exp:	CUD TOTAL A
Singapore Driving Licence No:	SUB-TOTAL \$
Issue Date: Date of Birth:	PETROL LEVEL
Tel: (O)(R):H/P:	Out E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F
VEHICLE CHECK LIST	In E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F
<u>m</u>	Fuel
DENTS SCRATCHES SCRATCHES AND A SCRATCHES	Traffic / Parking Fines
COENT	
	TOTAL CHARGES \$
ATE: CCCIDENTS	
Acceptance	
S A RIGHT FRONT TOP LEFT	Hirer's Signature
MISSING / FAULTY ACCESSORIES / PARTS	
REMARKS:	Additional Driver's Signature
	- Issueria billor o digitataro

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given WIN WIN RENT-A-CAR PTE LTD in connection with this agreement is true.

*IMPORTANT

- 1. VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
- 2. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- 3. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- 4. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- 5. IN CASE OF ACCIDENT. THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES. A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- 6. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY WIN WIN RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEFINED. TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO WIN WIN RENT-A-CAR PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

3	DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	Carl I
	1 = 1 + 9	50 in	77272	Pen In		SIGNATURE OF HIRER/DRIVER

MVA119006896 / VAC - Bukit Batok ENTRY DATE & TIME: 15/01/2019 15:36 SUBMITTED BY: SUSAN SEAH SOH ENG

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.

	ACCIDENT STATEMENT
Date Of Report	15/01/2019 15:36
Date Of Accident	15/01/2019 15:15
Exact Location Of Accident	BUKIT BATOK EAST AVE 4 OUTSIDE POLICE STATION
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKR2372M
Insured/Policyholder	
Name Of Registered Owner	TAN SENG MENG
NRIC No	S1629462D
Email Address	SALOMONKEN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90021892
Alternative Phone No	OFFICE-90021892
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	JETTA
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
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106084025
Cover Note Number	

Driver

Name of Driver	TAN SENG MENG		
NRIC No	S1629462D		
Date Of Birth	19/07/1964		
Occupation	OUTDOOR		
Date Of Driving Pass	19/03/1994		
Driving Experience	24 YEARS AND 9 MONTHS		
Gender	MALE		
Mobile Number	(LOCAL) +65-90021892		
Fax Number			

Contact Number OFFICE-90021892

EMail Address SALOMONKEN@GMAIL.COM Address

BLK 529 #07-337 CHOA CHU KANG STREET 51

Postcode

680529

Was driver an employee of the Insured's Company

Trad arror air employee or are meared e company

OWNER

If No, Relationship of the Driver with the Insured Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

17540

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 (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?
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 STATEMENT (ATTENDED BY: JAMES NG)

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

SLB5041X

Vehicle Make/Model/Colour

KIA FORTEK / RED

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

TAN CHEE CHIEN

NRIC/Passport Number

S7509592I

Contact Number

94303834

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be campleted by the Policyholder and/or the Authorised Driver
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material
 facts may allow insurance companies to <u>repudiate policy flability</u>.
- The issue and acceptance of this Form by Insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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 partles.
- 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:

17 5 JAN 2019

- Of

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

Date & Time:

IDAC BUKIT BATOK (VAC) 511 Bukit Batok Street 23 Singapore 659545 Tel: 6560 3312 Fax: 6569 0722 Email: vacbb@singnet.com.sg

Reporting Centre Personnel's Signature Name:

Name: NRIC/FIN No.:

Sketch Plan #2 Pg. 1

Butit Babk Eat Ave 4 SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 15 Jan 2019 about 15:15 2 was travellus On East Avenue 4. Bukit East Buket Batok Communty tront the 01 statin Police Cendo and this car knocked THIS CAN NUMBER 0+ car. re av 4.4 CIA 5041X vehille hit UNT the reav my vehicl This Jetla. vollesnagen IDAC BURT BA: UNIVICAL 511 Bukit Eato' Street 23 Singapore 659545 Tel: 6560 3312 Fax: 6569 0722 Email: vacbb@singnet.com.sg DECLARATION I/We declare the foregoing particulars are true in every respect. 证。一 Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Time: (If driver is not the policyholder)

17 5 JAN 2019

Date & Time:

Name: NRIC/FIN No.:

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