

振明摩哆 CHIN MENG MOTORS

1 Kaki Bukit Ave 6, #01-40 Autobay@Kaki Bukit, Singapore 417883
Tel: 6747-4810 Fax: 6745-5018
cmmotors@singnet.com.sg

Our Ref: CMM062/20/TP
Your Ref: TP claim against SHD428J

31-Mar-20

AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way
#07-16
Singapore 079120

Attn: Motor Claims Department

Dear Sir/Ms,

Accident Involving SFR7242R and SJZ3234S on 11-12-2018 at Bukit Timah Road

We refer to the above matter. The accident was caused solely by the negligence of your insured and as a result, our client had incurred the following cost and losses:-

Cost of Repair (Surveyed by your surveyor):	S\$	4,685.51
Rental 04 days (3 days + 1 Sunday) @\$200.00 :		800.00
GIA search fee:		7.45
	S\$	<u>5,492.96</u>

Enclosed are copies of following documents for your perusal:

- (X) Repair bill
- (X) Letter of authorisation
- (X) GIA report
- (X) Photocopy of driver's IC & DL
- (X) GIA search fee

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AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way
#07-16
Singapore 079120

Attn: Motor Claims Department

Dear Sir/Ms,

Re: Final cost of repair to Land Rover Discovery no: SFR7242R

Date of accident: 11-12-2018

Parts supply:

1 pc Tailgate emblem - SPORT	S\$	45.80
1 pc Tailgate emblem - LANDROVER		85.60
1 pc Tailgate emblem - HSE Si4		55.60
1 pc Tailgate emblem - DISCOVERY		62.50
1 pc Rear bumper		2,242.70
1 pc Rear bumper reflector L/h		133.00
1 pc Rear bumper inner garnish		197.00
1 pc Rear bumper beam		504.60
2 pcs Rear bumper reverse sensor holder @\$35.20		70.40
1 pc Rear bumper centre pad (silver)		686.70
		<hr/>
		4,083.90
		(408.39)

Labour charges:

To panel beating, welding, removing damaged parts and replacement of the new parts as mentioned above etc.		400.00
To respray affected part.		500.00
To reset fault code after repair.		80.00
To check wirings.		30.00
	S\$	<hr/> <hr/>
		4,685.51

Dollars: Four thousand six hundred eighty five and cents fifty one only.

振明摩哆
CHIN MENG MOTORS



AUTHORISATION TO ACT
(AIG Express Third Party Claim)

I, Wong Pomp Hin (the third party claimant) of 52 Jalan Tanah Puteh S457357 (address), owner of SFR7242G (vehicle no.) hereby authorize CHIN MENG MOTORS ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SFR7242G that was damaged pursuant to the accident which occurred on 11-12-2018 (date) along Bukit Timah Road (location) involving vehicle no/s SJZ3234S ("the accident").

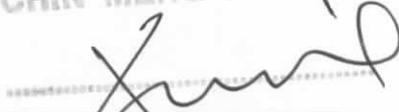
I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this _____ (day) of _____ (month) 20__ (year)



Signed by "the third party claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)

振 明 摩 哆
CHIN MENG MOTORS

RELEASE VOUCHER
(AIG Express Third Party Claim)

“We/I, CHIN MENG MOTORS (“the workshop”) hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd **LKK AUTO CONSULTANTS PTE LTD** (name of surveyor) with respect to the amount claimed for **S\$** _____ (Repair Cost), **S\$** _____ (Loss of rental/use), _____ (Disbursement), for vehicle no. SFR7242G that was damaged pursuant to the accident which occurred on 28-09-17 (date) along Bukit Timah Road (location) involving vehicle no/s SJZ3234S. This is pursuant to the inspection conducted on _____ (date) at “the workshop”.

We/I confirm that we/I are/am authorized by the owner Wong Pomp Hin (“the third party claimant”) of vehicle no. SFR7242G make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by “the third party claimant”.

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that “the third party claimant” after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to SFR7242G (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of “the third party claimant” pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this _____ (day) of _____ (month) 20____ (year)

Signed by appointed surveyor

振明摩托
CHIN MENG MOTORS

Signed by “the workshop” (with chop)

> Back to OneMotoring



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

Print Date/Time : 12 Dec 2018 / 16:53:40

Receipt Date/Time : 12 Dec 2018 / 16:53:40

Tax Invoice/Receipt

Receipt No. : ITNET-00000-181212-002992

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$)	GST Amount (\$)	Amount After GST (\$)
Result of Insurance Enquiry - SJZ3234S As at 11 Dec 2018/16:15:00 Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SJZ3234S Enquiry Fee 20181212165227718434	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				
	xxxxxxxxxxx0994		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.

MSME18160516 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 12/12/2018 16:35
 SUBMITTED BY: Chia Pei Ying

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	12/12/2018 16:35
Date Of Accident	11/12/2018 16:15
Exact Location Of Accident	BUKIT TIMAH RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFR7242G
Insured/Policyholder	
Name Of Registered Owner	WONG POMP HIN
NRIC No	S7224222Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96200461
Alternative Phone No	OFFICE-96200461

Vehicle Particulars

Manufacturer	LAND ROVER
Model	DISCOVERY
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 CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA168741
Cover Note Number	

Driver

Name of Driver	WONG POMP HIN
NRIC No	S7224222Z
Date Of Birth	06/07/1972
Occupation	INDOOR
Date Of Driving Pass	11/01/1992
Driving Experience	26 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96200461
Fax Number	
Contact Number	OFFICE-96200461

Address	52 JALAN TANAH PUTEH
Postcode	457357
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	RAINING
Road Surface	WET

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?	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

ON 11/12/2018 AT AROUND 4.15PM, I WAS STATIONARY AT RIGHT LANE ALONG BUKIT TIMAH ROAD DUE TO RED LIGHT. SUDDENLY, VEHICLE B COLLIDED ONTO MY REAR.

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	SJZ3234S
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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 Pg. 1

SKETCH PLANIMPORTANT 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.

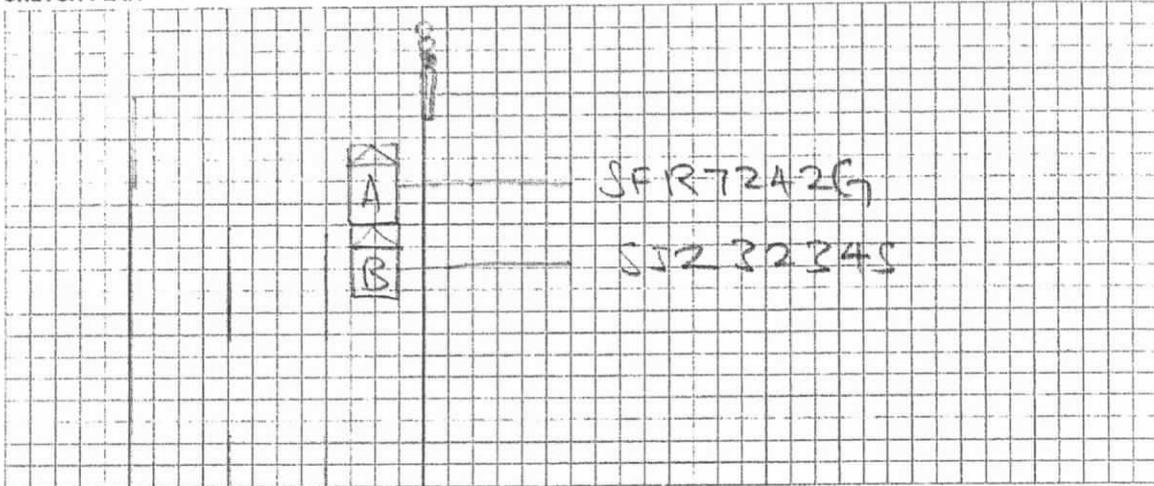
 Policyholder's Signature
 Date & Time:

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 11/12/18 at around 4:15pm, I was stationary at right lane along Bukit Timah Road due to red light when suddenly Veh B collided onto my rear.

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.:



Chin Meng
Land Rover

DAWN ENTERPRISES

21 Seletar West Farmway 1
Singapore 798125
Tel: 63832661 Fax: 64842836
Reg No.430058/00D

N^o 36390

RENTAL AGREEMENT

DATE 24/1/19

HIRER'S PARTICULARS

Name X NONG RONG HIN
Address X 52 JALAN TANAH PUTIH
5457357
I/C or Passport No. X S12242222 Country _____
Occupation _____
Date of Birth 6/7/72 Age _____
Driving Licence No. _____ Date Passed _____
Tel: (HP) X 96200461 (Residence) _____

DRIVER'S PARTICULARS

Name _____
Address _____
I/C or Passport No. _____ Country _____
Occupation _____
Date of Birth _____ Age _____
Driving Licence No. _____ Date Passed _____
Tel: (Office) _____ (Residence) _____

IMPORTANT NOTES:

- No Insurance Coverage if the driver is below 24yrs old or less than 2 years driving licence.
- This vehicle is licenced to carry 2800 passengers only.
- Hirer is liable to pay first \$ 2800 as excess all claims any accident plus loss of earning while damaged vehicle is under repair.
- For usage to Malaysia subject to higher excess all claims of S\$5,000.00 and different rental rate
- Please notify our office should there be any accident involving this hired vehicle within 24 hrs
- No refund will be given for vehicle returns early.
- No refund will be given for petrol left in vehicle.
- Hirer is liable to pay all parking fee and traffic summonses.
- Vehicles to be return during office hour only.
- No Service on Public Holiday and Sunday.

CHARGES

<u>4</u> Day at \$ <u>200.00</u> per days	\$ <u>800.00</u>
Day at \$ _____ per week	
Day at \$ _____ per month	

TOTAL AMOUNT \$ 800.00

AMOUNT PAID \$ 800.00

BALANCE DUE

Days Extension From _____ To _____

Amount Deposit (refundable) \$

SCHEDULE

MODEL

SJU 3724X

T/Camry

Date	Time	Mileage
<u>24/1/19</u>		

FROM

TO

I/we have read and understood the terms and conditions above and hereby agreed to abide

X

Hirer's Signature

Driver/Gurantor's Signature

DAWN ENTERPRISES



redefining / insurance

1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

account number
 14537

-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)

Policy details

Policyholder name	WONG POMP HIN (WANG BANGXING)	Certificate number	GA168741 / 1
Cover	Comprehensive	Chassis number	SALCA2AG5HH676483
Plan name	Flexi	Engine number	015074153002204PT
NCD applicable	50%		
Vehicle registration number	SFR7242G		
Period of Insurance	from 02/03/2018 to 01/03/2019 (both dates inclusive)		
Finance loan company	OCBC BANK LIMITED		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) Any person who is driving on the Policyholder's order or with their 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.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
 The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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	Basic Own Damage Excess	SGD 500.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

