

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN1751231801 Claim No : SNM19D200958C02/0

Claimant : TAN CHEE KIONG

Amount : **S\$2,440.00**
SINGAPORE DOLLARS TWO THOUSAND FOUR HUNDRED FORTY Only

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SGH7333T
Insured Vehicle No. : GBG3800C

Date of Loss : 07/02/2019
Place of Accident : DEVONSHIRE ROAD TOWARDS GRANGE ROAD

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : SPOTLESS CLEAN PTE LTD
Driver Name : LEE TIOW KIONG

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1) General Damages	S\$	
(2) Cost of Repair/ Excess	S\$	2,140.00
(3) Loss of Use/ Rental/Earning	S\$	300.00
(4) GIA/Police Reports/ Investigation Results/Search Fees	S\$	
(5) Medical Reports/Expenses	S\$	
(6) Survey Fees/P.T. Fees	S\$	
(7) Cost including Disbursement	S\$	
TOTAL	S\$	2,440.00

Claimant Name : Tan Chee Kiong

NRIC No : S71048091H

Signature : Tan Chee Kiong

Date : 28/5/19



TO:

CHINA TAIPING INSURANCE (S) PTE LTD
3 ANSON ROAD
#16-00 SPRINGFIELD TOWER
S(079909)

Dear Sirs,

CLAIMANT:

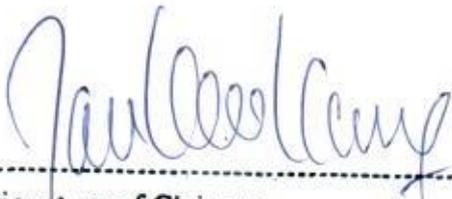
ACCIDENT INVOLVING QBQ 3800 C AND SGH 7333T ON 07/04/19
AT DEVONSHIRE ROAD TOWARDS GRANGE ROAD

I/We, TAN CHEE KIONG, am/are the registered owner of motor
car no. SGH 7333T.

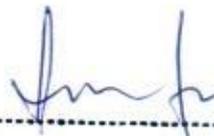
Please note that I have assigned all compensation monies due to me/us in the above said accident
to **M/S T & T AUTO SERVICES PTE LTD.**

I/We, hereby authorize you to release all compensation monies pertaining to the above-
mentioned accident to **M/S T & T AUTO SERVICES PTE LTD** and forward your settlement
cheque to **M/S T & T AUTO SERVICES PTE LTD** whom I had authorized to collect the said
compensation monies.

Thank you.



Signature of Claimant
Date:


Witness By
Date:



100



T & T Auto Services Pte Ltd

160 Sin Ming Drive
#08-14 Sin Ming AutoCity
Singapore 575722
Tel: 6266 6876 Fax: 6266 6861
GST Registration No: 200910712E
Email: tntautoservices@gmail.com

Date: 28th February 2019
Our Ref: 0219-1405
Your Ref:

Attn: The Motor Claims Department

China Taiping Insurance (S) Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

Dear Sir,

ACCIDENT INVOLVING GBG3800C / SGH7333T ON 07/02/2019

Please refer to the above-mentioned accident.

We are writing on behalf of **Tan Chee Kiong**, the registered owner of motor vehicle no: **SGH7333T** which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle no: **GBG3800C**. As a result of which, our client have suffered loss and expenses.

We are instructed by our client to claim for:-

1. Cost of Repair (inclusive of 7% GST)	:S\$2,140.00
2. Loss of Use (3 days @ \$200.00/day)	:S\$ 600.00
TOTAL	<u>:S\$2,740.00</u>

We enclosed hereby the following documents for your consideration:

- (a) Original Tax Invoice
- (b) GIA Report lodged by our driver
- (c) Owner & Driver I/C/Driving Licence
- (d) Certificate of Insurance

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Yours faithfully,

T & T Auto Services Pte Ltd



Vincent Tan



T & T Auto Services Pte Ltd

160 Sin Ming Drive
#08-14 Sin Ming AutoCity
Singapore 575722
Tel: 6266 6876 Fax: 6266 6861
GST Registration No: 200910712E

China Taiping Insurance (S) Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

TAX INVOICE

DATE : 28/02/2019
VEHICLE NO : SGH 7333 T
MAKE/MODEL : Mercedes SLK200
ACC DATE : 07/02/2019
CLAIM NO : 0219-1405
POLICY NO :

AMOUNT S\$

Lump sum repair inclusive of supplying parts, labour,
panel beating and spray painting

Repair Amount	2,000.00
Add 7% GST	140.00
Total	<u><u>2,140.00</u></u>

Singapore Dollars: Two Thousand One Hundred And Forty Only.


T & T Auto Services Pte Ltd



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	08/02/2019 08:21
Date Of Accident	07/02/2019 13:00
Exact Location Of Accident	DEVONSHIRE ROAD TOWARDS GRANGE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH7333T
Insured/Policyholder	
Name Of Registered Owner	TAN CHEE KIONG
NRIC No	S7104809H
Email Address	CHEEKIONG@SEAHONG.COM.SG
Mobile Phone No	(LOCAL) +65-96825001
Alternative Phone No	OTHERS-96825001

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	SLK 200
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA342090/1
Cover Note Number	

Driver

Name of Driver	TAN CHEE KIONG
NRIC No	S7104809H
Date Of Birth	08/02/1971
Occupation	INDOOR
Date Of Driving Pass	10/12/2005
Driving Experience	13 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96825001
Fax Number	
Contact Number	OTHERS-96825001
Email Address	CHEEKIONG@SEAHONG.COM.SG

Address 2 RIVER VALLEY CLOSE
 Postcode 238423
 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 - CHANGE/CROSS LANE
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles (including own vehicle) 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) 2
 Passenger 1
 NAME: : MR
 GENDER: : MALE

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

PLEASE REFER TO ATTACHED.

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 GBG3800C
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver
 NRIC/Passport Number
 Contact Number 98512150
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

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 reassess 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:

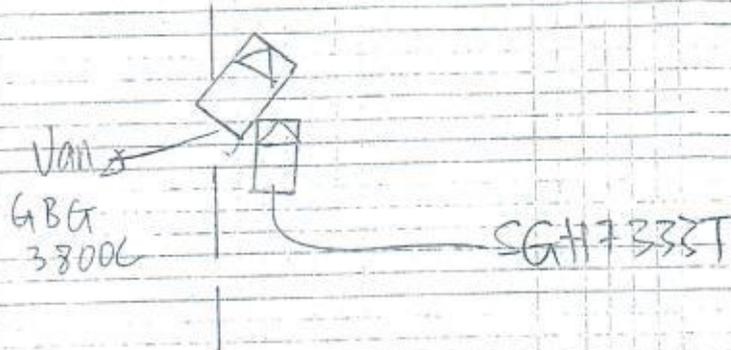
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 7/2/19

 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

Please refer to attached

DECLARATION

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

James Lee Kwong
Policyholder's Signature

Date & Time:

7/2/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/PIN No.:

Sketch Plan Pg. 3

On 07.02.19, at around 1 pm, I was traveling on Devonshire Road going to Grange Road. After moving off from the red light at the junction, I was traveling straight and suddenly, a van came very close to the left side of my car. I immediately braked and swerved slightly to the right. The van swerved in even more sharply and grazed the left front fender of my car even though my car had already slowed down and stopped. The van was trying to turn right from a straight going only lane.


TAN CHEE KUANG
7/2/19

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7104809H



Name

TAN CHEE KIONG

陈志强

Race

CHINESE

Date of birth

08-02-1971

Sex

M

S7104809H

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7104809H

Name

TAN CHEE KIONG

Birth Date: 08 Feb 1971

Issue Date: 01 Oct 2015



002478540H

SG
50



4477685

NRIC No. S7104809H



Date of issue
20-10-2009

2 RIVER VALLEY CLOSE #17-01
SINGAPORE 238428

NRIC No: S7104809H

Date: 01/02/2013

No: 7296022

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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg 10 Dec 2005
< 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals =< 2500kg

NP 428A



Licence No: S7104809H



redefining / insurance

AXA Insurance Pte Ltd
 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
 03740

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980 - Road Transport Act, 1987 (Malaysia)
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	TAN CHEE KIONG	Certificate number	6A342090 / 1
Cover	Comprehensive	Chassis number	WDD1724482F017339
Plan name	Fled	Engine number	27186130294301
NCD applicable	50%		
Vehicle registration number	SGH7333T		
Period of Insurance	from 08/05/2018 to 07/05/2019 (both dates inclusive)		
Finance loan company	Nil		

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 600.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

- \$5500 for unnamed *Authorised Driver*
- \$5500 for declared *Young and Inexperienced Driver*
- \$55,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to \$52,500 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.

AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #B1-01