

96 MOTORSPORTS PTE LTD

Company Registration: 201711783Z

62 Kaki Bukit Ave 6

Singapore 417893

ARK@KB

Tel: 6702 6996

Fax: 6384 6996

E-mail: claims@96motorsports.com

Our Ref : 96M-19-379
Your Ref : S9M01I5T MC/NPS

Date : 02-04-19

Attn : Motor Claim Department

Dear Sir/Mdm,

ACCIDENT INVOLVING : SLF 5877E & SDS 1666A & SHC 8802P & SKD 8204A
DATE OF ACCIDENT : 07-03-19
ALONG : PIE > CHANGI BEF TPY LOR 6 EXIT

We refer to the above mentioned accident.

We are claiming as below:

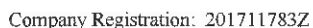
Cost of Repair	:	\$	<u>5,136.00</u>
Loss of Use \$80 x 7 days	:	\$	<u>560.00</u>
LTA Search	:	\$	<u>7.45</u>
3rd Party Report	:	\$	<u>57.00</u>
Towing	:	\$	<u>60.00</u>
Grand Total	:	\$	<u>5,820.45</u>

The above settlement is in respect of our client's for damage pertaining to his motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his personal injuries.

Kindly take note that our office is located at 62 Kaki Bukit Ave 6 THE ARK@KB Singapore 417893

If you have any queries, please contact me at 6702 6996, or email 'claims@96motorsports.com

Yours Faithfully,
Jade Lim



E-mail: claims@96motorsports.com

SINGAPORE 530924

Repair Bill No.	96-ACC-0419-0230
Date	02-04-19
Vehicle No.	SLF 5877E
Vehicle Model	HONDA CIVIC
Accident Date	07-03-19

Description	Amount
LUMP SUM REPAIR COST FOR VEHICLE SLF 5877E	\$ 4,800.00
Sub-Total	\$ 4,800.00
GST 7%	\$ 336.00
Total Payable	\$ 5,136.00

Kindly cross & make cheque payable to : **96 MOTORSPORTS PTE LTD**

62 / 64 Kaki Bukit Avenue 6
ARK@KB Singapore 417893

64 Kaki Bukit Avenue 6 Singapore (417894)

LETTER OF AUTHORISATION

Accident on 07/3/19 along DLE > Changi Bef TPI Lor 6 Exit
Involving vehicles SLF 5877E, SDS 1666A, SHC 8802P, SKD 204A

In consideration of 96 MotorSports Pte Ltd 64 Kaki Bukit Avenue 6 Singapore (417894), repairing my/our motor vehicle no SLF 5877E at my request,

I/We, Ho Wei Jie ("the claimant") of 924 Hongan, Ave 9
07-68 SC 530924 (address) bearing NRIC No S9347391D the owner
of motor vehicle no SLF 5877E, 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 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 that are necessary to prosecute the claims maintained by 96 Motorsports 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, I/we undertake to pay to 96 Motorsports Pte Ltd The cost of repairs to my/our vehicle.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into 96 Motorsports Pte Ltd account. Upon clearance of the said cheque, I/we further authorize 96 Motorsports Pte Ltd and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to 96 Motorsports Pte Ltd shall amount to a good discharge of 96 Motorsports Pte Ltd and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 07 day of 03 (month) 20 19 (year)

Signed by "the claimant"

Name: Ho Wei Jie

NRIC No: S9347391D



96 MOTORSPORTS PTE LTD



24 HOUR RECOVERY SERVICES

24 HRS HOTLINE: 8455 5669

Co.Reg No: 53333929D

No. **15426**

Date : **07-03-19**



M/S : Cash

Vehicle No : SLF S877 E Model : CIVIC

From : PIE => changer Time Start : 1500

To : Kaki Bukit Ave 6 Time End : 1530

Remarks : 1600

- | | | | |
|--|---|---|---------------------------------|
| <input type="checkbox"/> Change Tyres / Jump Start | <input checked="" type="checkbox"/> Accident | <input type="checkbox"/> Use Car Carrier | <input type="checkbox"/> Loaded |
| <input type="checkbox"/> Basement / Multi Carpark | <input type="checkbox"/> Low Body Kit / Low Spoiler | <input type="checkbox"/> Open Door | |
| <input type="checkbox"/> Using King Dolley | <input type="checkbox"/> Dismantle Brake / Shaft | <input type="checkbox"/> Crane Up / Winch Out | |

AMOUNT S\$ 601

Received By

[Signature]
for 24 hour Recovery Services

Vehicle is transported at owner's risk, The company accepts no responsibility for damaged or other misdemeanour to your vehicle whilst being transported.

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 08 Mar 2019 / 15:44:30

Receipt Date/Time : 08 Mar 2019 / 15:44:30

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190308-002542

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 - SDS1666A

As at 07 Mar 2019/14:40:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1 Insurance Enquiry - SDS1666A

Enquiry Fee

20190308154349607800

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

xxxxxxxxxxxx1094	Credit Card: Visa/MasterCard	7.45
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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.

Print Receipt

OK

Save as PDF

**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-19-041382
Date of Request: 15/03/2019

Your Ref No: WALK IN ROY

96 MOTORSPORTS PTE LTD
62/64 KAKI BUKIT AVENUE 6
SINGAPORE 417893

Dear Sir/Madam,

Your Vehicle No: SLF5877E
Date of Accident: 07/03/2019
Place of Accident: PIE
Involving Vehicle No: SKD8204A,SDS1666A,SHC8802P

DESCRIPTION	AMOUNT (\$\$)
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:

☐ GIRO ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-19-041383
Date of Request: 15/03/2019

Your Ref No: WALK IN ROY

96 MOTORSPORTS PTE LTD
62/64 KAKI BUKIT AVENUE 6
SINGAPORE 417893

Dear Sir/Madam,

Date of Accident: 07/03/2019
Vehicle No: SLF5877E
Place of Accident: PIE TWDS CHANGI BEFORE TOA PAYOH LOR 6 EXIT
Involving Vehicle No: SHC8802P

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\$)
SHC8802P	PIE TWDS CHANGI BEFORE TOA PAYOH LOR 6 EXIT	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-19-041386
Date of Request: 15/03/2019

Your Ref No: WALK IN ROY

96 MOTORSPORTS PTE LTD
62/64 KAKI BUKIT AVENUE 6
SINGAPORE 417893

Dear Sir/Madam,

Date of Accident: 07/03/2019
Vehicle No: SLF5877E
Place of Accident: PIE TWDS CHANGI BEFORE TOA PAYOH LOR 6 EXIT
Involving Vehicle No: SDS1666A

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\$)
SDS1666A	PIE TWDS CHANGI BEFORE TOA PAYOH LOR 6 EXIT	14.00	1	13.08
GST Amount				0.92
Total Amount Due (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:

☐ GIRO ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-19-041384
Date of Request: 15/03/2019

Your Ref No: WALK IN ROY

96 MOTORSPORTS PTE LTD
62/64 KAKI BUKIT AVENUE 6
SINGAPORE 417893

Dear Sir/Madam,

Date of Accident: 07/03/2019
Vehicle No: SLF5877E
Place of Accident: PIE TWDS CHANGI BEFORE TOA PAYOH LOR 6 EXIT
Involving Vehicle No: SKD8204A

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\$)
SKD8204A	PIE TWDS CHANGI BEFORE TOA PAYOH LOR 6 EXIT	14.00	1	13.08
GST Amount				0.92
Total Amount Due (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:


☐ GIRO ☒ Cash ☐ Cheque

REPUBLIC OF SINGAPORE
CERTIFICATE OF REGISTRATION OF DEATH

DEATH REGISTRATION NO

282243A

DECEASED	Death registered at TAN TOCK SENG HOSPITAL PTE LTD, SINGAPORE			
	Full name of deceased HO KOON WAH			
	NRIC/Identification Document No. S1773988C	Sex MALE	Date of birth 27/06/1965	
	Race/Dialect Group CHINESE/KHEK	Nationality SINGAPORE CITIZEN	Country/Place of birth SINGAPORE	
	Home Address APT BLK 924 HOUGANG AVENUE 9 #07-68 SINGAPORE 530924		Date and hour of death 29/09/2018 1337	
CAUSE OF DEATH BY CERTIFIER	Place or Address where death occurred TAN TOCK SENG HOSPITAL PTE LTD		Approximate interval between onset and death	
			Years	Months
			Days	Hours
	I (a) ALCOHOLIC CIRRHOSIS OF LIVER		20	
	Disease or Condition leading to death			
	(b)			
	Antecedent Causes			
	(c)			
	II Other Significant conditions			
INFORMANT	Name and official status of person certifying cause of death DR CAMELIA TANG QIAN YING, MEDICAL PRACTITIONER		Certificate of Cause of Death Reference No.: COD-2018-TQ-006506 Date: 29/09/2018	
	Name HO WEI XIONG		I certify that the above information given by me is correct.	
	Address APT BLK 924 HOUGANG AVENUE 9 #07-68 SINGAPORE 530924		 29/09/2018	
	NRIC/Identification Document No. S8942737A		Informant's Signature/	
	Relationship SON		Thumb impression	
REGISTRATION OFFICER	Name of Registration Officer MOHD KAMAL BIN MOHAMMAD SALLEH			
	Designation REGISTRATION OFFICER			
	Date 29/09/2018		for Registrar of Births and Deaths	

DISPOSITION	PERMIT TO BURY/CREMATE BODY [The Environment Public Health Act (Chapter 95)]			
	Place of Burial or Place of Cremation MANDAI CREMATORIUM		Religious type TAOIST	
INFORMANT MAKING APPLICATION	I HO WEI XIONG			
	NRIC/Identification Document No S8942737A apply for a permit to <input type="checkbox"/> bury + <input checked="" type="checkbox"/> cremate + 282243A the deceased referred to in the Death Certificate No. 282243A		 29/09/2018	
REGISTRATION OFFICER	For application to cremate only <input checked="" type="checkbox"/> I certify that to the best of my knowledge, the deceased has no written direction that he/she should not be cremated +		Informant's Signature/ Thumb impression	
	The Certificate of Cause of Death certified that there is <input checked="" type="checkbox"/> No evidence of pacemaker in the body of the deceased + <input type="checkbox"/> Evidence of pacemaker/device removed from the body of the deceased + Permit is approved. 29/09/2018		for Commissioner of Public Health	



REPUBLIC OF SINGAPORE
CERTIFICATE OF REGISTRATION OF BIRTH

BIRTH REGISTRATION NO.

89347391D

CHILD'S PARTICULARS	Birth Registered at KANDANG KERBAU HOSPITAL PTE LTD, SINGAPORE	
	Full Name HO WEI JIE 何伟杰	
	Sex MALE	Date of Birth 09/12/1993
	Time of Birth 2329 Hours	
Place and Address of Birth KANDANG KERBAU HOSPITAL PTE LTD, SINGAPORE		
MOTHER'S PARTICULARS	Name LOW BEE HOON	
	Date of Birth 24/07/1968	
	Identification Document and No. S/PINK S6827983F	Race CHINESE
	Dialect TEOCHEW	
Nationality SINGAPORE CITIZEN		Country of Birth SINGAPORE
Address APT BLK 204 TAMPINES STREET 21 #09-1213 SINGAPORE 1852		
FATHER'S PARTICULARS	Name HO KOON WAH	
	Date of Birth	
	Identification Document and No. S/PINK S1773988C	Race CHINESE
	Dialect KHEK	
Nationality SINGAPORE CITIZEN		Country of Birth SINGAPORE
INFORMANT'S PARTICULARS	Name HO KOON WAH	
	Date of Birth	
	Identification Document and No. S/PINK S1773988C	Relationship FATHER
	Address APT BLK 204 TAMPINES STREET 21 #09-1213 SINGAPORE 1852	
FOR OFFICIAL USE THE CHILD IS A CITIZEN OF SINGAPORE AT THE TIME OF BIRTH		

I certify that the above information given by me is correct.

Informant's Signature or Thumb Impression

23/12/1993

Date

ANG HUI TIONG

for Registrar of Births and Deaths

23/12/1993

Date