Our ref: Your ref:	SJZ 7846A	
Date:	2 5 JUN 2019	Direct Settlement
То:	AXA lugarance	TKK
	Singapore 068811	
Attn:	Motor Claims Department	
Re: A	ecident Involving Motor Vehicle Nos.	SJ 27846A & SLE3393C Vescent On 06/05/19@ 13:45
I am the insured v	owner of vehicle no. ST77846A ehicle no. SLE 3353 of the abov	that was involved in an accident with your eaccident.
	ecident was caused by your insured neg for the following: -	ligent/inconsiderate driving, thus I am claiming
1. Cost of 2. Loss of 3. LTA/C		s 4,330-68 s 480 s 2-00
	eport Fee	\$

I hereby give you fourteen (14) days to comply with the above, failing which, I shall instruct my solicitor to commence legal action against you. If you have any queries, please contact the representative of CYCLE & CARRIAGE INDUSTRIES PTE LTD at Telephone No: 67714377 (Mr Alan Quek) / 67714304 (Ms Amanda Ang).

I hereby give full authority to CYCLE & CARRIAGE INDUSTRIES PTE LTD and their representative to negotiate/comprise settlement of the above claim on my behalf.

Your co-operation and immediate attention to the above is greatly appreciated. I hereby look forward to hearing from you soon.

Yours faithfully

Name & Signature

Address: C/o. 188 Pandan Loop Singapore 128378

Ce: Mr Alan Quek/ Ms Amanda Ang

E-mail: alan.quek@cyclecarriage.com.sg/amanda.ang@cyclecarriage.com.sg

Fax No. 67795383

Total: \$ 4, 812.68



Cycle & Carriage Industries Pte Limited Authorized Desire Company No. 196400367W GST Reg No. MR-8500111-X

TAX INVOICE

Invoice Name & Address Cust No/Name				Owner Name & Vehicle Info				
			/As	hok Singhani	a			
	Ashok Singi	nansa		Reg No/Reg Date	SJZ7846A	/ 28/12/20	10	
	C/O AXA INS	SURANCE PTE LTD		Date In/Mileage	10/06/2019/	79825		
		M DEPARTMENT		Chassis No	WDD2120472A	343578		
	8 SHENTON I			Engine No	27186030149	047		
	SINGAPORE	700011		Make/Model		I SEDAN (W2)	12)	
	Contact No	63387288		Colour/Trim		rite Bro/ 04		ther Bla
				Colodiritiin	024 497 Cup	rice bio, o	FE 200 LCG	LIICI DIG
Account No	Terms	Date/Time Printed	CSE	Operator		WIP No	Invoice/Cr	edit Note No
:5100001	Cash	25/06/2019/ 09:45	AQ	305 / Alan Quek	Ai Lun	33161	28155063	
		Description of Good	s / Services		Qty	Unit Price SS		Amount S
DRIVE DATE I	IN:06-05-20 N/DATE SURVE	E:2100242224 // 06-09 19 // TP CAR NO:SLE339 EY:10-06-2019 // LKK NO:SVIC ALPEH // 29-05-	93C (AXA IN: RASUL	SURANCE)				F.0.C
A BPILAB USE XE	NTRY TO CHE	CK CONTROL UNITS & RES		го			0.10	380.00
A BPILAB	RD SETTINGS & REPLACE	NETT REAR BUMPER & REMOVE F	REAR SUPPOR	Т				960.0
	OMPONENTS &	REFINISH.						600.0
A BPIRES	Y REAR BUMP!	D						000.0
X REAR B	ALL STREET, ST	ch.			1.00	1634.76	+	1634.76
	UMPER GARNIS				1.00	132.65		132.65
	UMPER GARNIS				1.00	132.65 178.58		132.6 178.5
	UMPER GARNIS ARKING SENSO				4.00	7.18		28.72
							100	
				brates 120 years. om/120 for more inj	fo!			
Parts Labour	. Moreon	2,107. 1,940.	.00		7% GST on	Nett 4047.36		4,047.36 283.32
Standard			.00		Ŷ	otal Payable		4,330.68
Constalla	25 000	100				Pair Pair		0.00
Speciali	fire Joh	0	.00			F 40.11		9:00
Speciali Diagnost Sundry/0			.00			Total Due		4,330.68

Payment abould be made strictly by cash, NETS or credit cards. Thank you.

Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.

Pandan Loop Service Center 188 Pandan Loop Singapore 128378 Tel: 6777 8388 Fax: 6779 5383 www.mercedes-benz.com.sg

FLEXI-DRIVE ENTERPRISE

SJZ 7846A

Blk 8 Kaki Bukit Avenue 4 Premier@kaki bukit gate 2 #06-33 lobby C Singapore 415875 Tel: (65) 6292 5455 Fax: (65) 6292 2866 e-mail: sales@wellscope.com.sg INVOICE

H/Phone: 9667 5455 (24 Hrs)

AM. RA: 08977

V. A. No.	Vehicle Regn. Ne	1247 X Model Type	DA 6	Renting Locatio	inden Luc	n Cac
Reference	1		Agreed Return Date		5 Hours = 1 Day Re (1 Day Rental ÷ 5 =	
s 160 plamet	per Day \$	per per	KM In		Time / Date In	19 18301
\$ Hirer's Name	per Month Cts	per Kilometre	Out KM		Total / Time Charge	(4. U
Mr Asho	K Sing h	spure 299441	Rental Charges Total	Days Rental <	R Thop	Cents Cents
2 Harlyn		sport ciliii			1	1
Reference Contact	13)02	98233867				
Driver's Name		Passport / IC No. / Country				
Address			Petrol E 14 Out	12 34 F	Petrol E 14	12 34 5
Driving Licence No.	Expiry	Issued by		l will charge in ever r 1/4	ery 1/4, 1/2, 3/4, F	
Additional Driver		Tel. No. (Home)	Sub-Total Others			
Address		Passport / IC No. / Country	Grand Total		8	480.00
Driving Licence No.	Expiry	Issued by	Prepayment Received \$ By: (Name in Block L	etters)		
Method of Payment	YCLES	EBD.	Amount Due / Refund	fable	CASH	CHEQUE
RATES QUOTED A	MEDAN	LOOP.	Refund			
THE HIRER IS SOLI	ELY RESPONSIE ID ANY PARKING F HIRE.	BLE FOR BREACH OF G FINES OR SURCHARGES	Received \$	3	In by	
· Righ		. 0	FRONT			126
Hiner's Signature Co	ompany Stamp					
			CAR		MPV	=

riemono



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-19-070947

Date of Request:

06/05/2019

Your Ref No:

Online Purchase

Cycle & Carriage Industries Pte Ltd 188 Pandan Loop Singapore 128378

Dear Sir/Madam,

Enquiry Date

06/05/2019

Enquiry By

Lim Xin Yi

TP Vehicle No.

SLE3393C

Accident Date

06/05/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.	
SLE3393C	AXA Insurance Pte Ltd	08/05/2018-06/09/2019	6338 7288	

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.



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TAX INVOICE

Our Ref No:

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Date of Request:

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Your Ref No:

Online Purchase

Cycle & Carriage Industries Pte Ltd 188 Pandan Loop Singapore 128378

Dear Sir/Madam,

Enquiry Date

06/05/2019

Enquiry By

Lim Xin Yi

TP Vehicle No.

SLE3393C

Accident Date

06/05/2019

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

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.

- Any false reporting may be referred to the Police for investigation.
 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.

By the lodgement of this report to the insurers, you hereby con aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
THE RESIDENCE OF THE RE	ACCIDENT STATEMENT
Date Of Report	07/05/2019 08:59
Date Of Accident	06/05/2019 13:45
Exact Location Of Accident	HARLYN ROAD / TREVOSE CRESCENT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJZ7846A
Insured/Policyholder	
Name Of Registered Owner	ASHOK SINGHANIA
NRIC No	S2704350Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98236867
Alternative Phone No	OFFICE-98236867
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E250
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
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100242224-08
Cover Note Number	
Driver	
Name of Driver	RASHMI SINGHANIA

Name of Driver RASHMI SINGHANIA

NRIC No S71830961 Date Of Birth 20/12/1971 Occupation INDOOR Date Of Driving Pass 16/01/2003

16 YEARS AND 3 MONTHS Driving Experience

Gender FEMALE disposality manufaction

Mobile Number (LOCAL) +65-98236867

> Fax Number Contact Number

EMail Address NOEMAIL Address 2 HARLYN ROAD

Postcode 299441
Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured SPOUSE

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

2

NO

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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 TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLE3393C

NO

Vehicle Make/Model/Colour

Details Of Properties

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

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.
- 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:

- 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, involces, 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
 - complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- 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
- 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.

Date & Time

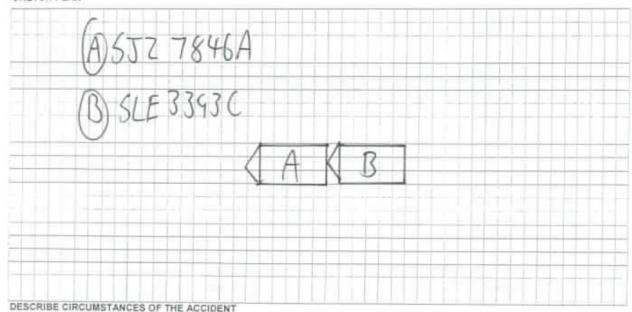
Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting

NRIC/FIN



Ref	to	Ohrer	Letter	for	detail.
0.000			01110		01111

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature

Date & Time

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's

Name: Alsy

Statement of Events

- At 1.42pm, I was stationary at Harlyn Road Trevose Crescent junction, waiting to turn right onto Trevose Crescent from Harlyn Road.
- Suddenly, I heard a bump sound at the back of my car. As my car was stationary at the stop line, I turned back to see that a vehicle (SLE3393C) had collided into my car at the back.
- I alighted from the vehicle to inspect the damage; and the driver of SLE3993C alighted as well.
- The driver of the perpetrating vehicle (SLE3993C) proceeded to apologize several times, claiming that she was "sorry."
- We took pictures, and the perpetrating driver requested me to move the car as there were many cars in the way.
- She again apologized and said that "it was her mistake, and that she should be more careful."



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

: Ashok Singhania Name of Policyholder

: 28 Dec 2018 To 27 Dec 2019 Period of Insurance

: 27186030149047 Engine No.

: WDD2120472A343578 Chassis No.

: SJZ7846A Vehicle No. : 2100242224-08 Policy No.

Endorsement No.

: 21 Dec 2018 **Issued Date**

ABOUT THE COVER

Make/Model MERCEDES BENZ E250 CGI BE

First Year of Registration : 2010 Sum Insured : Market Value Engine Capacity/Tonnage : 1,796.00 CC Insuring with COE/PARF : Yes Off Peak Car : No Driver Restriction NA

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder
 b) Any after person who is driving on the Policyholder's order or with his/her permission.
 c) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than

Age Condition : All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for him or neward, driving fution, driving fest, racing, pace-making, reliability trial or speed-sesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 85 of the Road Transport Act, 1987 (Melaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Dwn Damage - \$800 Theft - \$0 Flood Cover - \$0

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Ashox Singhania - \$800 (Dwn Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Cycle & Carriage Euros Service Center (For accident reporting only). Add: 330 Util Road 3 Singapore 408650 62061818.
 Cycle & Carriage Pandan Loop Service Center - Body Care & Repair. Add: 188 Pandan Loop Singapore 128378 62061818.

For other: Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotims at +65-6338-6200. Alternatively, you may refer to AIG website www.aig.com.ag or AIG SD Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

DWe haveby cartify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189). Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1989 (Malaysia).

0500660374

CYCLE & CARRIAGE - EDTANG 239 ALEXANDRA ROAD SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Mourite

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S 7 1 8 3 0 9 6 1 Name:

RASHMI SINGHANIA

Birth Date: 20 Dec 1971

Issue Date: 16 Jan 2003



COR CACUSE ONLY

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

PASS DATE

Class 3 Moto. Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

16 Jan 2003

FORCACUSEONLY

Licence No: S7183096

NP 428A