



**Motor Image Enterprises Pte Ltd**  
19 Lorong 8 Toa Payoh Singapore 319255  
Service Centre Tel: (65) 6703 8101 / 102 Fax: (65) 6253 5535  
25 Leng Kee Road Singapore 159097  
Service Centre Tel: (65) 6703 8163 Fax : (65) 6479 1137  
Website: www.motorimage.net



## TAX INVOICE

GST Reg No. M2-0076975-9  
Co. Reg No. 198702032R

**Sales: INSURANCE CUSTOMER**

**Invoice No: L514238**

**For cash sales, payment will be  
endorsed on this invoice and no  
separate receipt will be issued.**

**DATE REC'D: 28-May-2019**

**SERVICE ADVISOR: HOOI**

**JOB No.: L501962**

**MILEAGE: 83726**

**ID:**

**NAME:** AXA INSURANCE PTE LTD  
**ADDRESS:** 8 SHENTON WAY  
#27-01 AXA TOWER. S(068811)  
**TELEPHONE:** 63387288  
**MODEL:** LEGACY 2.5I-S AWD CVT  
**ENGINE No.:** FB251607229  
**CHASSIS No.:** JF1BN9KC2FG002812  
**REGISTRATION No.:** SKT8493Y

ITEMS CODE	DESCRIPTION OF REPAIRS	AMOUNT
1	TPCLAI CONDUCT BODYWORK REPAIR (THIRD PARTY CLAIM) AGAINST SJR3833E - AXA INSURED	
2	REMARK CONDUCT TP CLAIM AXA DATE:06/05/2019 TIME:0755HRS LOCATION:SLIP RD FROM SCOTTS RD TWD ORCHARD RD	
3	INS01 FOR ACCIDENT CAR OR REPAIR JOB QUOTATION, AN ADMINISTRATIVE CHARGE WILL BE IMPOSED IF VEHICLE	
4	INS02 IS WITHDRAW AND TOWED OUT FOR REPAIR. REFER TO STANDARD RATE CHART (REF. 0338).	
5	INS03 STORAGE CHARGES OF \$30/DAY WILL BE IMPOSED FROM THE DATE OF CONFIRMATION OF AUTHORISATION BY THE	
6	INS04 SURVEYOR SHOULD THE OWNER DECIDE NOT TO CARRY OUT THE REPAIR IN MOTORIMAGE ENTERPRISES PTE LTD.	
7	INS05 INSTRUCTIONS WILL BE TAKEN FROM THE OWNER ONLY. IF IT IS NOT POSSIBLE, AN AUTHORISATION LETTER FROM	
8	INS06 THE OWNER IS REQUIRED.	
9	INS07 CUSTOMER ARE INFORMED AND ACCEPT THAT NUMBER OF DAYS FOR LOSS OF USE IS BASE ON THE FOLLOWING:	
10	INS08 NO.OF DAYS FOR LOSS OF USE RECOMMENDED BY INS.CO. APPOINTED SURVEYOR NO FURTHER CLAIM CAN BE ALLOWED	
11	INS09 CUST ACK THAT CLAIMS NOT EXCEEDING \$3,000 & ABOVE WILL HAVE TO BE REFER TO FIDREC DIRECTLY.	
12	REMARK REPAIR/REPLACE REAR BUMPER & END PANEL	560.00
13	REMARK RESPRAY REAR BUMPER & END PANEL	420.00
	TOTAL(LABOUR)	980.00
1	BUMPER FACE R SDNFHI 57704AL120(Qty : 1 @ 594.00 each(Discount 20.00%))	475.20
	TOTAL(SPARE PARTS)	475.20

Subtotal 1,455.20  
GST(7%) 101.86  
**TOTAL \$1,557.06**

DATE : 09-Apr-2020

CUSTOMER

MANAGER

The customer acknowledges and confirms by taking delivery of the vehicle and/or upon receipt of this invoice, either personally or by an agent that his/her complaints relating to the vehicle have been rectified to his/her satisfaction and that the Company's liability for defective work and/or materials will be limited to rectification works and/or replacement of parts without charge or at discounted charge, at the Company's option. The customer further acknowledges that any discrepancy in this invoice (with the exception of errors and omissions) must be brought to the Company's attention in writing within three(3) days from the date of this invoice failing which it will be deemed correct.

**CUSTOMER**

**Not yet a DUO Member? Join us now at [www.DUO.com.sg](http://www.DUO.com.sg) and start accumulating your points for your invoice today!**

Certified True Copy



Motor Image Enterprises Pte Ltd  
19 Lorong 8 Toa Payon  
Singapore 319255  
Tel : (65) 6417 0333  
Fax : (65) 6252 5655  
BRN 198702022R

## BREAKDOWN OF PAYMENT

Attn: Motor Claims Department

Dear Sir/ Madam,

Accident involving vehicle SKT8493Y and SJR 3883E on 06.05.2019

The accident was caused solely by your insured's negligence. We therefore, seeking compensation from you for my financial loss as itemised below:

a)	Repair Cost/ Excess	S\$ 1557.06
b)	Loss of Use/ Rental of vehicles for _____ day(s) @ S\$ _____ per day	S\$ 385.20
c)	LTA/ GIA Search Fees	S\$ 2.00
d)	Towing Fees	S\$
e)	Others _____	S\$
TOTAL		S\$ 1944.26

I enclose herewith copy of the following: (please tick the appropriate boxes)

<input checked="" type="checkbox"/>	Repair Invoice	<input checked="" type="checkbox"/>	LTA/ GIA Search Receipt
<input type="checkbox"/>	Policy Excess Invoice	<input checked="" type="checkbox"/>	NRIC/ Driving License
<input checked="" type="checkbox"/>	Discharge Voucher	<input checked="" type="checkbox"/>	Letter Of Authority
<input checked="" type="checkbox"/>	Rental Invoice	<input type="checkbox"/>	GIA Report
<input checked="" type="checkbox"/>	Certificate of Insurance	<input type="checkbox"/>	Survey Report
<input type="checkbox"/>	Towing Invoice	<input type="checkbox"/>	Medical Invoice

All payment should be payable to **Motor Image Enterprises Pte Ltd/my favour** and the said payment as full and final settlement of my claim.

Please acknowledge receipt and let me have your favourable reply soon.

\*Contact person: Siow Hooi – 6703 8115  
hooi@motorimage.net



**Motor Image Enterprises Pte Ltd**  
19 Lorong 8 Toa Payoh Singapore 319255  
T (65) 6417 0333 F (65) 6252 5655  
W www.motorimage.net  
Co Reg No: 198702032R

# DISCHARGE VOUCHER

Name of Insured: **TOH KHAI LEE**  
Address of Insured: **12 TREVOSE PLACE S(297996)**  
Name of Repairs: **MOTOR IMAGE ENTERPRISES PTE LTD / WORKSHOP**  
Address of Repairs: **NO. 19 LORONG 8 TOA PAYOH SINGAPORE 319225**  
Place of Accident: **SLIP ROAD FROM SCOTTS TOWARDS ORCHARD ROAD**  
Date of Accident: **06/05/2019** Vehicle No: **SKT8493Y**  
Policy No: **VA1/GA225637** Claim No: \_\_\_\_\_

I/We hereby declare that I/We have received from the aforesaid repairers my/our aforesaid Motor Vehicle in good running order and repaired to my/our entire satisfaction and in consideration of **AXA INSURANCE PTE LTD** settling the repair costs stated above with the said repairers, I/We hereby release and discharge the said insurers from all further obligations and liabilities under the aforesaid policy in respect on and accident involving my/our said motor vehicle on or about the abovementioned date and place.

I/We agree that by virtue of such payment, all my/our rights and remedies in respect of the damages to the said Motor Vehicle are subrogated to the said Insurers in accordance with the laws governing such matters.

I/We hereby grant the said insurers the authority to use my/our name to the extent necessary to effectively exercise all or any of such rights and remedies including the right to give discharge and receipts therefore.

I/We further agree to furnish the said Insurers with any assistance that they may reasonably require of me/us when exercising such rights and remedies whilst on their parts they agree to indemnify me/us against liability for costs charges and expenses arising in connection with any proceedings which they may take in my/our name in the exercise of such rights and remedies.

REPAIRERS:



Company's Chop & Signature

INSURED:

**S1748600D**

IC No. & Signature/Company's Chop

**DANIEL A JUDE**

Name

**TOH KHAI LEE**

Name

**31/05/2019**

Date

**31/05/2019**

Date





## LETTER OF AUTHORITY AND INDEMNITY

### Motor Image Enterprises Pte Ltd

- ☐ Toa Payoh Service Center, 19, Lorong 8, Toa Payoh, Singapore 319255  
☐ Leng Kee Service Center, 25, Leng Kee Road, Singapore 159097

### Type of Claim:

- ☒ Third Party (Direct Settlement)  
☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SKT 8493Y AND SJR 3833E  
ON 06<sup>th</sup> MAY 19 AT SLIP RD FROM SCOTTS RD TWDS ORCHARD RD


1. I, the owner of vehicle no. SKT 8493Y hereby instruct you and authorise you to act for me with respect to the following: -
  - (a) To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
  - (b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
  - (c) To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
  - (d) To sign discharge voucher on my behalf.
2. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
4. In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
5. If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
7. I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
8. I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
  - a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
  - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.


Claimant's Particulars		Authorized Workshop
Name <u>TOH KHAI LEE</u>		Company Name <u>MOTORIMAGE ENTERPRISES PTE LTD</u>
Address <u>12 TREVISE PLACE</u> <u>S (297996)</u>		Claim Officer's Name <u>DANIEL JUDE</u>
Telephone No <u>9780 4400</u>		Telephone No <u>6703 8107 / 8611 3195</u>
Date <u>08<sup>th</sup> MAY 19</u>	Email <u>-</u>	Date <u>08<sup>th</sup> MAY 19</u>
Company Stamp [For Co Regn Vehicle]	Authorized Signature <u>X Tami</u>	Claim Officer Signature <u>[Signature]</u>

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S 1748600D**  
Name: **TOH KHAI LEE**

Birth Date: **25 Aug 1966**  
Issue Date: **28 Apr 2010**



 001850962H

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

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 07 Nov 1985

NP 428A





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  
 03703

-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	TOH KHAJ LEE	Certificate number	GA225637 / 1
Cover	Comprehensive	Chassis number	JF1BN9KC2FG002812
Plan name	Flexi	Engine number	FB251607229
NCD applicable	50%		
Vehicle registration number	SKT8493Y		
Period of Insurance	from 25/06/2018 to 24/06/2019 (both dates inclusive)		
Finance loan company	HL BANK		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder  
 (b) Any Named Driver as stated in the Policy:  
 1. TOH YIH FENG JOSHUA  
 2. HO KWAI YUEN  
 3. TOH YIH SHYAN JOEL  
 (c) 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      Windscreen Excess

Not Applicable

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 signatory

### 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.





RECORDS MANAGEMENT CENTRE

**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-19-075217

Date of Request: 13/05/2019

Your Ref No:

Online Purchase

Motor Image Enterprises Pte Ltd  
19 Lorong 8 Toa Payoh  
Singapore 319255

Dear Sir/Madam,

Enquiry Date 13/05/2019

Enquiry By Mohamed Isman Bin Mohamed Hepbun

TP Vehicle No. SJR3833E

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.

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For GIARMC Official use:

Date:

☒ [X] GIRO ☐ [ ] Cash ☐ [ ] Cheque



# Hiring Agreement

Co.Reg.No : 198403671H  
GST Reg.No.: M2-0067432-1

TP2019408

ACCOUNTS COPY

SALESMAN CODE: HB

Vehicle Number: SKQ5357T Make & Model: SUBARU IMPREZA 4D 1.6I-S AWD CVT ✓ Date: 27/05/2019  
 Change Over 1: SK41735R Initial: Subaru Impreza 1.6I ✓ Date: \_\_\_\_\_  
 Change Over 2: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_

## Hirer

Name: MOTOR IMAGE ENTERPRISES PTE LTD  
 Address: 19 LORONG 8 TOA PAYOH  
 Singapore: (319255) SAYEDINAH  
 Contact Person: CHRISTY (MIE) Tel: \_\_\_\_\_

## 1st Driver

Name: TOH KHAI LEE  
 Address: 12 TREVOSE PLACE  
 Singapore: (297996)  
 Contact No: (H) (O) (HP)  
 Occupation: \_\_\_\_\_ Date of Birth: 25/08/1966  
 Passport / NRIC No: S1748600D Nationality: SINGAPOREAN  
 Driver's Licence No: S1748600D Driving Exp:  yrs  
 Country of Issue: SINGAPORE Driving Date: 06/11/2030

## Additional Driver

Name: HO KWAI YUEN  
 Address: 12 TREVOSE PLACE  
 Singapore: (297996)  
 Contact No: (H) (O) (HP)  
 Occupation: \_\_\_\_\_ Date of Birth: 03/08/1966  
 Passport / NRIC No: S1774670G Nationality: SINGAPOREAN  
 Driver's Licence No: S1774670G Driving Exp: 33yrs  
 Country of Issue: SINGAPORE Driving Date: 13/04/2030

## Remarks / Delivery Location

3RD PARTY CLAIM - REF: MIE (TP) JUDE

**Additional \$2000/- + existing Excess**  
**Driver: 40 years & above**  
**Driver: 40 years & above**

## Check In / Out

Date Out: 27/05/2019 Time Out: 10:05:34 Km Out: 8888.00

Petrol Level: E

Agreed Date of Return: 01/06/2019 10:05:34

Date In: \_\_\_\_\_ Time In: \_\_\_\_\_ Km In: \_\_\_\_\_

Petrol Level: E

## Collision Damage Waiver & PAI

### ACCEPTS

To Pay Extra Fees

Daily S\$0.00

Weekly S\$

Monthly S\$

Weekend S\$

Non-Waivable Excess

S\$ 0.00 per accident

### DECLINES

Hirer Declines CDW

Excess S\$ 2,000.00

per accident

Signature \_\_\_\_\_

Signature Toi

\*The above is subjected to 7% GST.

Per Day	90.00	450.00
Per Week		
Per Month		
Weekend		
<b>Rental Charges</b> <u>4 days x \$90</u>	<u>450.00</u>	<u>360.00</u>
CDW	0.00	
PAI	0.00	
Deliver / Collection	0.00	
Malaysia Charge		
Petrol		
Other Charge		
<b>Sub Total</b>	<u>450.00</u>	<u>360.00</u>

## OVERALL CHARGES

\$ 385.20

Hirer hereby agrees to abide to the terms and conditions as set out overleaf. If I opt to pay by credit / charge card, my signature here will be deemed to have been made on the applicable credit and card charge slip.

I also agree to allow the company to hold a security deposit equivalent to the excess amount as set out in the Hire Agreement for the term of hire by credit card/ cash.

The Hirer agrees that smoking and carriage of pets are not allowed in the hired vehicle. An extra charge of S\$250 will be applicable to ionize the vehicle.

The Hirer agrees that the vehicle must be returned at the agreed time and date. Late return is chargeable, an hourly charge of S\$50 will be applied.

## Deposit Tax Invoice

Deposit Inv: \_\_\_\_\_ Amount: \_\_\_\_\_

O/R No: \_\_\_\_\_ Date: \_\_\_\_\_

## For Official Use

INV: 81015308 O/R: \_\_\_\_\_ Date: 31/5/19

INV: \_\_\_\_\_ O/R: \_\_\_\_\_ Date: \_\_\_\_\_

INV: \_\_\_\_\_ O/R: \_\_\_\_\_ Date: \_\_\_\_\_

HIRER'S SIGNATURE

DOWNTOWN TRAVEL SERVICES PTE LTD





Motor Image Enterprises Pte Ltd

Request For Car Rental

Date: 24<sup>th</sup> MAY 19

Department: INS

Request By: JUDE

Invoice To: MIE SVC - TP / MIE SVC - LK

Reason:

3<sup>RD</sup> PARTY RENTAL REQUEST

TOH KHAI LEE → 9780 4400

Owner's Car Plate No: SKT 8493Y

Authorized No. of days:

Owner's Car Model: LEGACY 2.5

Date Required: 27<sup>th</sup> MAY 19

Date Returned:                     

Model of Vehicle Required: (Auto Manual):                     

Authorized By: DANIEL Lim (Name & Signature of Dept Mgr)

To Be Completed by Downtown Travel Service P L Staff:

Vehicle Number Assigned: SKU 1735R Car Model: Subaru Impreza

Rental Date: 27/5/19

Date Returned: 31/5/2019

Process by: Hamidah.

TP2019408

3101 5308

MOTOR IMAGE ENTERPRISES PTE LTD  
~~CHRISTY (SERVICE DEPT)~~  
19 LORONG 8 TOA PAYOH

S(319255)  
ATTN : ~~CHRISTY (MIE)~~ SAYEDINAH

GST Reg No. : M2-0067432-4  
Tax Invoice : S1015308  
Inv. date...: 31-MAY-2019  
Print date...: 31-MAY-2019  
Print time...: 17:37:17  
Page no.....: 1  
Agreement no: TP2019408  
Salesman.....: HB

Description	Amount
RENTAL CHARGE FROM 27-MAY-2019 TO 31-MAY-2019 SUBARU IMPREZA 4D 1.6I-S AWD CVT - SKU1735R (TOH KHAI LEE)	360.00

TOTAL SGD(BEFORE GST)	360.00
GST(7%)	25.20
TOTAL SGD(AFTER GST)	385.20

N.B. Cheques should be crossed and made payable to  
**DOWNTOWN TRAVEL SERVICES PTE LTD**  
Interest at 0.05% per day on overdue account. Terms  
of payment strictly 7 days.

**DOWNTOWN TRAVEL SERVICES PTE LTD**

  
Authorised Signature