



**Teamwork Garage Pte Ltd**  
53 Ubi Avenue 1 #01-23/24 Singapore 408934  
Paya Ubi Industrial Park  
Tel: 6844 2475 Fax: 6844 2474  
Email: [claims@teamworkgarage.com](mailto:claims@teamworkgarage.com)  
GST Register No: 201015366H

17<sup>th</sup> September 2019

Our reference: 1905-74 // Your reference: SJT7305B

**AIG Asia Pacific Insurance Pte Ltd**

**BY HAND**

78 Shenton Way  
#08-16  
Singapore 079120

**Attn: Motor Claims Department**

Dear Sir/ Madam,

Claimant : HAMID BIN AHMAD  
Address : BLK 287C JURONG EAST STREET 21 #03-322 S(603287)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident **22/05/2019** along **BUKIT BATOK ROAD TOWARDS PIE** involving our client's vehicle registration number **SLC1493X** and vehicle registrations number **SJT7305B** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair	:	\$ 3,745.00
Loss of Rental	:	\$ 1,560.00
LTA Search	:	\$ 7.49
<b>Total</b>	<b>:</b>	<b>\$ 5,312.49</b>

A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) LTA Search Tax;
- e) Letter Of Authorisation;
- f) Tax Invoice;
- g) Satisfaction of Repaired vehicle;
- h) Rental Agreement and Official Receipts;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,



A handwritten signature in black ink, appearing to be "W. A. A.", written over a diagonal line.

Teamwork Garage Pte Ltd

Encl.

## 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	23/05/2019 12:31
Date Of Accident	22/05/2019 18:00
Exact Location Of Accident	BUKIT BATOK RD TWDS PIE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC1493X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HAMID BIN AHMAD
NRIC No	S1158667H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81261505
Alternative Phone No	OFFICE-81261505

### Vehicle Particulars

Manufacturer	HONDA
Model	HRV 1.5 LX CVT ABS D/AIRBAG 2WD
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5090390190-02
Cover Note Number	

### Driver

Name of Driver	HAMID BIN AHMAD
NRIC No	S1158667H
Date Of Birth	25/08/1956
Occupation	OUTDOOR
Date Of Driving Pass	25/11/1981
Driving Experience	37 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81261505
Fax Number	
Contact Number	OFFICE-81261505
EEmail Address	NOEMAIL

Address	BLK 287C JURONG EAST STREET 21 #03-322
Postcode	603287
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	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?	YES
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**

REFER TO STATEMENT.

**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	SJT7305B
Vehicle Make/Model/Colour	KIA
<b>Details Of Properties</b>	
Vehicle Category	PRIVATE CAR
Name of Driver	GARY KHO HOE SIANG
NRIC/Passport Number	S9350007E
Contact Number	91771134
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF INJURED PERSON 1**

Name	HAMID BIN AHMAD
------	-----------------

Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SLC1493X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

- 1) Please report correctly on the details of the accident to speed up the claims process.
- 2) This form must be completed by the policy holder 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 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
- 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 the [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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) For complying with requirements under my regulations, laws or court orders

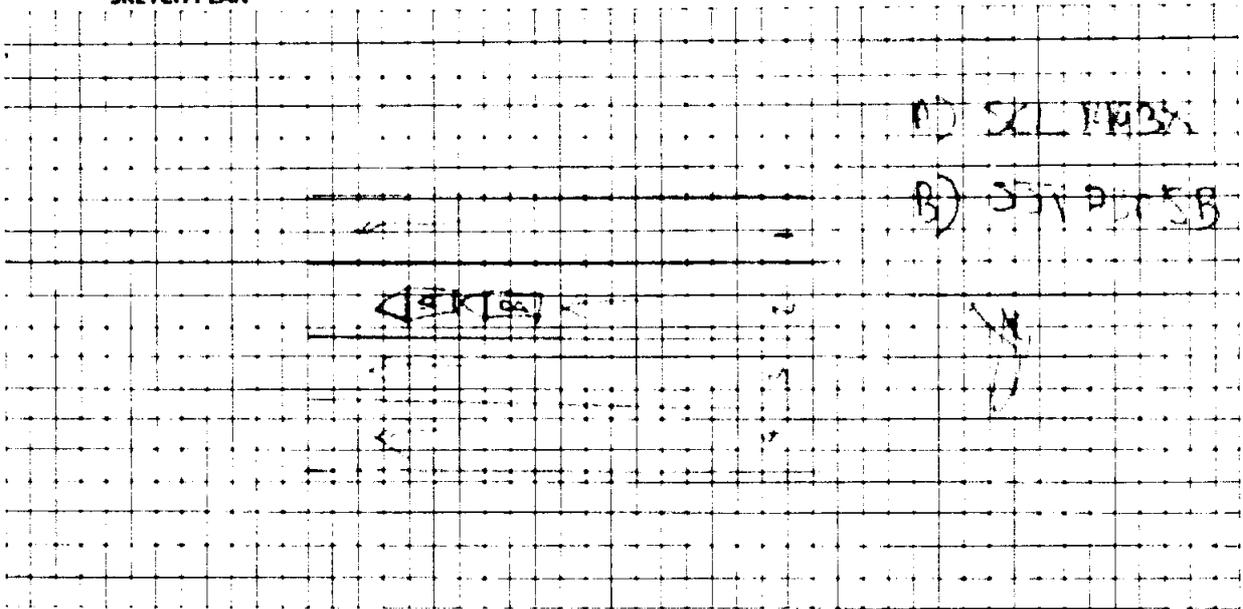
  
\_\_\_\_\_  
Policy holder's signature  
Date / time:

  
\_\_\_\_\_  
Driver's signature  
(If driver is not policy holder)  
Date / time:

  
\_\_\_\_\_  
reporting centre personnel's Signature  
Date / time:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along left hand road towards P/E, I was doing Lane 2 and my vehicle was slipping due to the tarmac was very slippery. The vehicle then moved towards my rear section of my vehicle of 7/11 from 10. I was involved.

DECLARATION

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

\_\_\_\_\_  
Policy holder's signature  
Date & time:

\_\_\_\_\_  
Driver's signature  
(if driver is not policy holder)  
Date & time:

\_\_\_\_\_  
reporting centre personnel's Signature  
Name:  
NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No. 1800-8999999



720190523/2030

1 of 4

Report No. T720190523/2030

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made 23/05/2019 10:09	Vide Report No.	Station Diary No 31
<b>Informant's Particulars</b>		
Name of Informant: HAMID BIN AHMAD	Address APT BLK 287C JURONG EAST STREET 21 #03-322 SINGAPORE 603287	
ID Type / ID No.: NRIC NO / S1158687H	Contact No. Home/Office: Mobile: 81261505	Email:
Nationality: SINGAPORE CITIZEN	Type of Informant: Driver	Institution / School Name:
Sex: Male	Age: 62	Date of Birth: 25/08/1956
Race: Boyanesse	Language: English	
Occupation: SUPERVISOR	Driving Licence Information: Class: 2B.3 Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/05/2019 18:00	Type of Location: Straight Road
Location: Junction of Road 1 and Road 2 BUKIT BATOK ROAD BUKIT BATOK WEST AVENUE 3 Lane 2 of Bukit Batok Road towards Jurong Town Hall Road, before junction of Bukit Batok West Avenue 3				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 70 Km/h		
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Rear	Anyone conveyed by ambulance: No			

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJT7305B	Car	KIA		Blue		0
SLC1493X	Car	HONDA	HRV 1.5 LX CVT ABS D/AIRBAG 2WD	Black	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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CONTINUATION OF REPORT

Details of Vehicle Insurance			
Vehicle No	Insurance Company	Insurance No	Effective
SLC1493X	NTUC Income Insurance Co-Operative Limited	5090390190-02	03/05/2019
			Expiry Date 02/05/2020
Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Use of Pedestrian Crossing: NA			
Driver			
Name	GARY KHO HOE SIANG	ID No	S9350007E
Related Vehicle	SJT7305B (Car)	Contact No.	91771134
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment			
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	HAMID BIN AHMAD	ID No	S1158667H
Related Vehicle	SLC1493X (Car)	Contact No.	81261505
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B.3 Date of Expiry: NIL
Date Treatment			
Date Treatment	22/05/2019	Date Discharge	22/05/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

**Brief Details.**

On 22/05/2019 at about 1800hrs, I was driving my vehicle bearing registration plate no. SLC 1493 X along Bukit Batok Road, towards Jurong Town Hall Road. There was a traffic light along the said road, at the junction of Bukit Batok West Avenue 3 ( Shell Petrol Station )

I was on the second lane from the right going straight. The traffic light was red, and I was the 4th vehicle.

After the traffic light turned green, the car in front of me had moved off. I was engaging my gear to move off when there was another car hit onto the rear of my vehicle. I was shocked for a while and subsequently I alighted from my vehicle and made a check.

The other driver also alighted. Since at that point of time, none of us was injured, we both decided to head to the Shell Petrol Station to make settle the accident matters.

Over at Shell Petrol Station, both of us made a check on our vehicle. My car rear bumper and boot was



**SINGAPORE  
POLICE FORCE**



T/20190523/2530

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No. 1800-8999999

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Report No. T/20190523/2530

CONTINUATION OF REPORT

dented. The other part front plate no. was slightly cracked

Both of us exchanged particulars and decided to claim insurance.

Subsequently, I then send my car to the workshop. Thereafter, I felt pain left thumb, back and neck area as well as left thigh muscle. I then went to Mount Alvernia Hospital for checks, and was given 05 days of Outpatient Sick Leave.

There is no in-car camera attached to my vehicle. I am not sure if the other party has an in-car camera built in it.



**SINGAPORE  
POLICE FORCE**



Police Station Of Origin  
Jurong East N.P.C  
82 Boon Lay Way SINGAPORE 609862  
Tel No. 1800-8999999

Report No. 13019023006

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference

Signature Of Officer Recording The Report  
D /  
Sgt 2 MUHAMMAD SYAZWAN BIN ROSELI  
PANE

Signature Of Informant

Signature Of Interpreter  
Not applicable

Date/Time  
23/05/2019 10:09

Officer In Charge Of Case  
TP / AEIT /  
Sr Staff Sgt ONG YONG HOCK  
Contact No. 65476436

Classification Of Case

Authentication Stamp  
NP168

577 78  
[Stamp]

> Back to OneMotoring

PARF/COE Rebate Enquiry

### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	8667H
Vehicle Details	
Vehicle No.:	SLC1493X
Vehicle to be Exported:	No
Intended Deregistration Date:	23 May 2019
Vehicle Make:	HONDA
Vehicle Model:	HRV 1.5 LX CVT ABS D/AIRBAG 2WD
Primary Colour:	Black
Manufacturing Year:	2016
Engine No.:	L15Z71100031
Chassis No.:	MRHRU1830GP000050
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$21,083.00
Original Registration Date:	03 May 2016
First Registration Date:	03 May 2016
Transfer Count:	0
Actual ARF Paid:	\$21,517.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 May 2026
PARF Rebate Amount:	\$16,137.00
Intended COE Rebate Details	
COE Expiry Date:	02 May 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$46,009.00
COE Rebate Amount:	\$31,937.00
<b>Total Rebate Amount:</b>	<b>\$48,074.00</b>

The information contained herein is correct as at 23 May 2019

OK

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1158667H



Name: **HAMID BIN AHMAD**  
Race: **BOYANESE**  
Date of Birth: **25-08-1956** Sex: **M**  
Comm. of Birth: **SINGAPORE**



REPUBLIC OF SINGAPORE DRIVING LICEN



License Number: **S1158667H**  
Name: **HAMID BIN AHMAD**  
Birth Date: **25 Aug 1956**  
Issue Date: **13 Feb 200**



001478204F



Applicant No: **S1158667H**  
Blood Group: \_\_\_\_\_ Date of issue: \_\_\_\_\_  
Class: **02-09-1993**

APT BLK 287C JURONG EAST STREET 21 #03-322  
SINGAPORE 603287  
NRIC No: **S1158667H** Date: **01/03/2011 (R)** No: **0757081**

\* YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(E

CLASS	VEHICLE CLASSIFICATION	PASS DATE
Class 2B	Motorcycles =< 200 cc	12 Feb 1983
Class 3	Motor Cars =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	25 Nov 1981



License No: S1158667H

&gt; Back to OneMotoring



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

Print Date/Time : 23 May 2019 / 16:40:34

Receipt Date/Time : 23 May 2019 / 16:40:34

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-190523-002568

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
<b>Result of Insurance Enquiry - SJR105T</b>				
As at 18 May 2019/16:30:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
1	Insurance Enquiry - SJR105T Enquiry Fee 20190523163923439908	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Result of Insurance Enquiry - SJT7305B</b>				
As at 22 May 2019/18:00:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
2	Insurance Enquiry - SJT7305B Enquiry Fee 20190523163923475254	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Result of Insurance Enquiry - PA7151G</b>				
As at 22 May 2019/20:15:00				
Insurance Co: TOKIO MARINE INSURANCE SINGAPORE LTD				
3	Insurance Enquiry - PA7151G Enquiry Fee 20190523163923509584	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Result of Insurance Enquiry - GBF8309C</b>				
As at 19 May 2019/15:09:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
4	Insurance Enquiry - GBF8309C Enquiry Fee 20190523163923561182	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Result of Insurance Enquiry - SKM9568X</b>				
As at 22 May 2019/12:50:00				
Insurance Co: AXA INSURANCE PTE LTD				
5	Insurance Enquiry - SKM9568X Enquiry Fee 20190523163923606620	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		35.00	2.45	37.45
<b>Rounding Difference</b>				0.00
<b>Total Amount Payable</b>				37.45
Paid By				
	xxxxxxxxxxxx4633	Credit Card: Visa/MasterCard		37.45
<b>Total</b>				37.45
<b>Cash Change</b>				0.00

# LETTER OF AUTHORIZATION

To ALG and TEAMWORK garage pte ltd (Third party insurance & Workshop)  
Claimant HAMIR BIN AHMAD

Dear Sirs,

I/We, HAMIR BIN AHMAD owner of vehicle no. SLC 1493X  
hereby authorize my/our repairer, TEAMWORK garage pte ltd

act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or loss of use ("claim") for my/our vehicle no. SLC 1493X that was damage pursuant to the accident which occurred at/along BUKIT BATOR ROAD TANJANG PIE

involving vehicle nos. SJT 7305B

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies pertaining the above mentioned accident due to me/us to my/our repairer/solicitors TEAMWORK garage pte ltd. I/We hereby authorize you to forward and release all compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors TEAMWORK garage pte ltd pertaining to above said accident whom I/we authorized and assigned to collect the said compensation monies.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Thank you.

Dated this 23 day of 05 (month) 2019 (year)

Signature of owner vehicle (claimant): [Signature]

Name of owner of vehicle (claimant): HAMIR BIN AHMAD

NRIC Number (claimant): S11576674



# SATISFACTION OF REPAIRED VEHICLE

I/We, Hamid Bin Ahmad, owner/driver of vehicle No. 1493 declare that the repairs of my/our vehicle has been completed and to my/our satisfaction.

I/We agree that I/we hereby irrevocable absolutely accept the settlement amount and the liability from the third party on the repair costs and/or rental and/or loss of use which are final and that the sum of amount are to be released and payment to the workshop for such repairs in respect of the damages caused in the accident.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Dated this 3 day of Jun (month) 20 19 (year)

@ 11.45 hrs 00 mins

  
\_\_\_\_\_  
Name and Signature

# K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934  
Tel: 6844 5938 Fax: 6285 5228 Email : kntcars@gmail.com  
Biz Reg. No.: 53208965X

No.: 3185

## OFFICIAL RECEIPT

Date: 16 SEP 2019

Received from HAMID BIN AHMAD

The Sum of Dollars one thousand five hundred and sixty Dollars only

Being payment of SLK480D 22/05/2019 - 03/06/2019

\$ 1560

K & t Cars



Cheque No.: \_\_\_\_\_

Authorized Signature

# K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park  
Singapore 408934  
Tel: 6844 5938 Fax: 6285 5228  
Email: kntcars@gmail.com  
Biz Reg. No.: 53208965X

## VEHICLE RENTAL AGREEMENT

NO.: KT-04279

Veh. No.: SLC 4801D	Replace Veh. No.: SLC 1493X
Veh. M / M: Toyota Altis	Replace Veh. M / M: Honda HRV

HIRER'S PARTICULAR		<input checked="" type="checkbox"/> SAME AS HIRER DRIVER'S PARTICULAR	
Name: HAMID BIN AHMAD		Name:	
Address: BIK 287C Jurong east street 21 #03-322 S(603287)		Address:	
I/C: S11586674	D.O.B: 25/08/1956	I/C:	D.O.B:
Contact: 81261505	Pass Date: 25/11/1971	Contact:	Pass Date:

	A - ACCIDENT	Hirer's acceptance
	C - CRACKED	
	D - DENTS	Driver's acceptance
	S - SCRATCHES	

RENTAL DETAILS					
Mileage Out	22/5/2019	REMARKS	Mileage In		REMARKS
Date Out	<del>22/5/2019</del>		Date In	03/06/2019	
Time Out	0900		Time In	1145	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES				PETROL / DIESEL LEVEL					
Daily	@ \$	120	13 Days @ \$ 1560	OUT	E	1/4	1/2	3/4	F
Weekly	@ \$		Wks @ \$						
Monthly	@ \$		Mth @ \$	IN	E	1/4	1/2	3/4	F
Hours	@ \$		Hrs @ \$						
*Inclusive of additional charges (if any)			Amt payable* \$ 1560	Petrol Charges	YES	NO	AMT: _____		
				CDW	YES	NO	AMT: _____		
Payment: <input type="checkbox"/> CASH <input type="checkbox"/> NETS <input type="checkbox"/> CHQ <input type="checkbox"/> VISA <input type="checkbox"/> MAST				Security Deposit	YES	NO	AMT: _____		
Bank / Cheque No.:				Advance Payment	YES	NO	AMT: _____		

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tender accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true and accurate.

**IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)**

- ❖ Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- ❖ Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- ❖ Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- ❖ Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- ❖ The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- ❖ In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- ❖ In view of all accident, the hirer will bear the full responsibility for the SG\$3,500/- excess payable to K & t CARS and also the first SG\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT	
 Signature of hirer / driver (company stamp if any)	 For and on behalf of K & t CARS (authorised signature only)

