

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

GST Register No: 201015366H

23th September 2019

Our reference: 1906-17 // Your reference: SMA3464R

AIG Asia Pacific Insurance Pte Ltd

BY HAND

78 Shenton Way

#08-16

Ť

Singapore 079120

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant: NORSHAIRAZI BIN NORUDIN

BLK 632 CHOA CHU KANG NORTH 6 #04-209 S(680632) Address

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident **05/06/2019** along **LOYANG** AVENUE TOWARDS TPE (PIE) involving our client's vehicle registration number <u>SMF2929Y</u> and vehicle registrations number <u>SMA3464R</u> 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 \$ 13,375.00

Loss of Rental \$ 2,880.00

LTA Search \$ 7.49

Total \$ 16,262.49 A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Certificate of Insurance;
- d) Owner / Driver's IC & Driving License;
- e) LTA Search Tax;
- f) Letter Of Authorisation;
- g) Tax Invoice;
- h) Satisfaction of Repaired vehicle;
- i) 2X 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.

ON THE PARTY OF TH

Yours faithfully

Teamwork Gárage Pte Ltd

Encl.

LETTER OF AUTHORIZATION

To Ala and teamwit garage He ud (Third party insurance & Workshop)
Claimant Nov Monivazi Bin Novudin
Dear Sirs,
I/We. NVShaivazi bin Novudin owner of vehicle no. SMFJ979Y hereby authorize my/our repairer, Teamwork garage pte La
hereby authorize my/our repairer, 189 MWO N GAVAGE At Lo
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 MINGO that was damage pursuant
to the accident which occurred at/along Lyang Humul towards TPF (PIE)
involving vehicle nos. SMA3464R
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
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
Signature of owner vehicle (claimant):
Name of owner of vehicle (claimant) NOV Shaivazi Bin Novacin
NRIC Number (claimant) S 76 (98486



TEAMWORK GARAGE PTE LTD

BLK 53 UBI AVE 1 #01-23/24 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934

(TEL)(65) 6844 2475(FAX) (65) 6844 2474 (E-MAIL) claims@teamworkgarage.com

UEN

201015366H

GST Reg

201015366H

Bill To:

AIG ASIA PACIFIC INSURANCE PTE LTD AIG BUILDING 78 SHENTON WAY #08-16 SINGAPORE 079120

Tax Invoice

Invoice number:

TI-6933

Date:

23-09-19

Terms:

C.O.D.

Vehicle number:

SMF2929Y

Make / Model:

MITSUBISHI EVO X

Description	Amount (S\$)
ACCIDENT INVOLVING SMF2929Y / SMA3464R ON 05/06/2019 @ LOYANG AVENUE TOWARDS TPE (PIE)	
INCLUSIVE OF SUPPLYING PARTS , LABOUR , PANEL BEATING AND SPRAY PAINTING	
LUMP SUM REPAIR	\$12,500.00
SINGDOLLARS : THIRDTEEN THOUSAND THREE HUNDRED AND SEVENTY-FIVE DOLLARS ONLY	
Thank you for your business and have a nice day !	
Reference: 1906-17 Subtotal	\$12,500.00
* Cheque payment should be issued in favour to TEAMWORK GARAGE PTE LTD Add: GST 7%	\$875.00
** Please ensure that your vehicle is of good condition upon the point of collection. Total Inc GST 7%	\$13,375.00
Less: Deposit	\$0.00
E. & O. E Balance Due	\$13,375.00



CUSTOMER'S SIGNATURE

SATISFACTION OF REPAIRED VEHICLE

I/We,, owner/driver vehicle No, owner/driver declare that the repairs of my/our vehicle has be completed and to my/our satisfaction.	
I/We agree that I/we hereby irrevocable absolutely accept the settlement amount and liability from the third party on the repair costs and/or rental and/or loss of use which are fi and that the sum of amount are to be released and payment to the workshop for such repairs respect of the damages caused in the accident.	nal
I/We further acknowledge that any settlement the workshop may reach on my/our behalf is a without prejudice and without admission of liability basis insofar as the driver/owner/insur of the other vehicle/s concerned.	
I/We acknowledge that the Discharge Voucher applies only to my/our property damage a will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim a later date. Further the settlement terms herein should not be used as an evidence to prejud to any personal injuries claim(s) involved and/or other uninsured losses claim arising of subject matter in the action.	in ice
Dated this $\frac{28}{}$ day of $\frac{1}{}$ (year) $\frac{7}{}$ hrs $\frac{25}{}$ mins	
Nors HAIRA21 NoruDIN Name and Signature	

6/6/2019 Receipt

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time : 06 Jun 2019 / 13:38:28
Receipt Date/Time : 06 Jun 2019 / 13:38:28

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190606-001484

Previous Receipt No.:

S/N	N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Res	ult of Insurance Enquiry - SMA3464R		(,	ζ- • /	, .,
	at 05 Jun 2019/19:16:00				
	rance Co: AIG ASIA PACIFIC INSURAN	NCE PTE. LTD.			
1	Insurance Enquiry - SMA3464R				
	Enquiry Fee		7.00	0.49	7.49
	20190606133735065841				
		Sub-Total	7.00	0.49	7.49
	sult of Insurance Enquiry - SGQ3658K at 03 Jun 2019/20:00:00				
Insu	irance Co: AIG ASIA PACIFIC INSURAN	NCE PTE. LTD.			
2	Insurance Enquiry - SGQ3658K				
	Enquiry Fee		7.00	0.49	7.49
	20190606133735148147				
		Sub-Total	7.00	0.49	7.49
	sult of Insurance Enquiry - SLP4231Y				
	at 04 Jun 2019/15:30:00				
	urance Co: MSIG INSURANCE (SINGAF	PORE) PTE LTD			
3	Insurance Enquiry - SLP4231Y Enquiry Fee		7.00	0.49	7.49
	20190606133735214868		7.00	0.43	7.43
	201000001001002111000	Sub-Total	7.00	0.49	7.49
Res	sult of Insurance Enquiry - GBC4556Y	V = 1012.	,,,,,	****	
	at 03 Jun 2019/16:25:00				
	urance Co: SOMPO INSURANCE SING	APORE PTE. LTD.			
4	Insurance Enquiry - GBC4556Y				
	Enquiry Fee		7.00	0.49	7.49
	20190606133735266885				
		Sub-Total	7.00	0.49	7.49
Res	sult of Insurance Enquiry - GBH3231P				
	at 03 Jun 2019/20:25:00				
	rance Co: NTUC INCOME INS CO-OP	LTD			
5	Insurance Enquiry - GBH3231P			0.40	7.40
	Enquiry Fee 20190606133735314048		7.00	0.49	7.49
	20190000133733314048	Sub-Total	7.00	0.49	7.49
			35.00	2.45	37.45
		Total Before Rounding	35.00	2.45	
		Rounding Difference			0.00
		Total Amount Payable			37.45
		Paid By	Canadia Canada		
		xxxxxxxxxxxx3725	Credit Card: Visa/MasterCard		37.45
		Total			37.45
		Cash Change			0.00

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 <u>truthful and accurate</u> 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.
- 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	06/06/2019 17:15
Date Of Accident	05/06/2019 19:15
Exact Location Of Accident	LOYANG AVE TWDS TPE (PIE)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMF2929Y
Insured/Policyholder	
Name Of Deviators of Occurrent	MD MODELLA DA TI DINA MODUDA.

Name Of Registered Owner MR NORSHAIRAZI BIN NORUDIN

NRIC No S8619848G Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-94599613
Alternative Phone No OFFICE-94599613

Vehicle Particulars

Manufacturer MITSUBISHI

Model LANCER EVO-GSR 2.0 MT ABS D/AB 4WD TURBO

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 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMPCSN1840861800

Cover Note Number

Driver

Name of Driver NORSHAIRAZI BIN NORUDIN

NRIC No S8619848G
Date Of Birth 30/07/1986
Occupation INDOOR
Date Of Driving Pass 18/01/2005

Driving Experience 14 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94599613

Fax Number

Contact Number OFFICE-94599613

EMail Address NOEMAIL

Address

BLK 632 CHOA CHU KANG NORTH 6

#04-209

Postcode

680632

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OWNER

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?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

NO YES

YES

Was any other material or property damaged?

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

Number of Passengers (Including Driver)

4 NAME:

NO

: NUR AL' ANNISA NATASHA BINTE NOR HISHAM

GENDER:

: FEMALE

Passenger 2

Passenger 1

NAME:

: IZZ KHALIFAH

GENDER:

: MALE

Passenger 3

NAME:

: YUNIZAR BINTE HAMBALI

GENDER:

: FEMALE

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

SMA3464R

Vehicle Make/Model/Colour

HONDA

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)

DETAILS OF INJURED PERSON 1

Name

NORSHAIRAZI BIN NORUDIN

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SMF2929Y

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

NUR AL' ANNISA NATASHA BINTE NOR HISHAM

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SMF2929Y

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

DETAILS OF INJURED PERSON 3

Name

IZZ KHALIFAH

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SMF2929Y

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

DETAILS OF INJURED PERSON 4

YUNIZAR BINTE HAMBALI

Name

Approximate Age

Injuries Sustain

s Sustain

BODY

Injured person in which vehicle?

SMF2929Y

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.
- Information provided must be as <u>truthful and accurate as accelled</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy flability.</u>
- 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.
- 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)

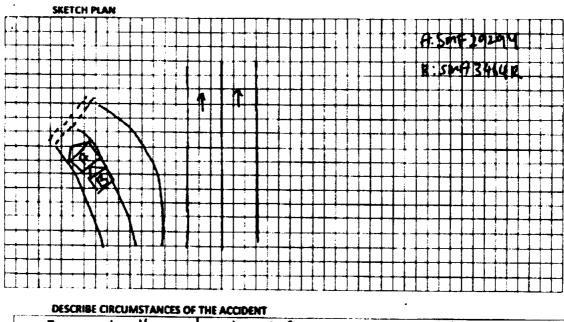
I understand, acknowledge, agree and consent that

- (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:
 - Processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (H) Investigations the accident and/or my claims,
 - (iii) Carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - 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 envelops/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
 - 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 purposed 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



DESCRIBE CIRCUM	ISTANCES OF THE ACCIDENT	•	
I WAS TRAVE	Ilan orlang Loyang A	lant Toulines Joseph	5 5 M
Tyrning int		words 196 (PIG) -	I men proceed
10 stop to	check for once many	trattic and was st	HADA SHELL
I fell a	nuce impact on the	no of my vehicle	I got cours
and police	I was involved in a	n ovisions.	J
-			
;			
7.174			
DECLARATION			
I/we declare the foregoing	particulars are true in every respo	rct.	
12 3/	1/1/		√
	K-V		
Policy holder's signature	Driver's signature		
Date & time:	(if driver is not policy holder)	reporting centre personne? Name:	i alguature
	Date & time:	name: NRIC/FIN No.:	l

Page 6

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Singapore NRIC Owner ID Type: 9848G

Owner ID:

Vehicle Details

SMF2929Y Vehicle No.:

No Vehicle to be Exported:

06 Jun 2019 Intended Deregistration Date: **MITSUBISHI** Vehicle Make:

LANCER EVO-GSR 2.0 MT ABS D/AB 4WD TURBO Vehicle Model:

Primary Colour: 2008 Manufacturing Year:

4B11BQ8485 Engine No.:

JMFSNCZ4A9U000243 Chassis No.: 217.0 kW (290 bhp) Maximum Power Output:

Open Market Value: \$44,740.00 12 Dec 2008 Original Registration Date: First Registration Date: 12 Dec 2008

Transfer Count:

Actual ARF Paid: \$44,740.00

Intended PARF Rebate Details

PARF Eligibility: **Forfeited**

PARF Eligibility Expiry Date: PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 30 Sep 2028

COE Category: B - Car (1601cc & above)

COE Period(Years): 10

PQP Paid: \$33,377.00 **COE Rebate Amount:** \$31,096.00 \$31,096.00 **Total Rebate Amount:**

The information contained herein is correct as at 06 Jun 2019

OK



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

MXI /BN JN AN0592A Cav.Type: C AUTOSAFE

CERTIFICATE OF INSURANCE

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)

CE	RTIFICATE No.	DMF09N1=40+61800	Engling Dr. :4B11B05455 Chassis No:CMESNCZ4A9U01U145
	ndex Mark and Registration umber of Vehicle	SWLTe1 at	
2. N	lame of Policy Holder	MR NORSHAIRAZI BI	R MORULIN
	ffective date of the Commencement of Insurance for e purposes of the Regulations, Ordinance or Enactmen		EXCESS SECT. I OUTSING SINGAFORE9\$7,001.05
4 C	ate of Expiry of Insurance	19 DECEMBER DI19	TO CAN HARVE BELOW THE FOUND THE FOU
5 F	Persons or Classes of Persons entitled to drive *	MR NORSHAIFADI BIR BORULIN OF CO DECEMBER TOTA NAMED DRIVERS EX SECT. I	
	AS FER NAMED IRIVER ST STATED BELOW.		
	REQUIATIONS TO INIVE THE MOTOR MERICIA	E CR HAS BEEN SO I	ERMITTED AND IS NOT I SQUALIFIED BY OKLER OF A
	THE INCURED DESIGNATION OF Y		
6 L	imitations as to use: *		
	OUE FOR SOCIAL, DOMESTIC AND FLEASURE THE FOLICY MORS NOT MOVER USE FOR BIN TRIAL, SPEEL-TESTING, THE CARRIAGE OF OR USE FOR ANY FURFUSE IN MUSICULION (E OR REWARD TUITIC GOODS OTHER THAN	NIGHTING TEST RACING FACE-MAKING, BELIABILITY SAMELES IN CONNECTION WITH ANY TRADE OF BUTINESS
	EIRE FURCHAUT CO. : SEFFEO CAETTAL FI * Limitations rendered inoperative by Sectic and Section 95 of the Road Transport Act.	on 8 of the Motor Vehicle	s (Third-Party Risks and Compensation) Act (Chapter 189) to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By

Authorised Officer

Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com









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.: 3219

OFFICIAL RECEIPT	Date: 2 3 SEY 2019
Received from Norsmairazi Bin n The Sum of Dollars Seven munded	
Being payment of SLK 4701D \$ 720 Cheque No.:	06/06/2019 -11/06/2019 K & t Cars
	Authorised 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 Rea. No.: 53208965X

VEHICLE RENTAL AGREEMENT

NO.: KT-04430

Veh. No.: SMF2929Y

Veh. M/M: MitSubiShi Evo X

Replace Veh. M/M: toyota Altis

Biz Reg. No.: 53208965X	
HIRER'S PARTICULAR	SAME AS HIRER DRIVER'S PARTICULAR
Name: NOV SNairazi Bin novu Wdin	Name:
Address: BIK 632 (Noa Chu Cong novth 6	Address:
#04-209 S1690632)	
I/C: 586198486 D.O.B: 3010711986	I/C: D.O.B:
Contact: 9459 9613 Pass Date: 18/01/2005	Contact: Pass Date:

Left ®	A – ACCIDENT	Hirer's acceptance
	C – CRACKED	
Rear	D – DENTS	Driver's acceptance
Right	S – SCRATCHES	a thousand to a large to the large seat the

RENTAL DETAILS							
Mileage Out		REMARKS	Mileage In		REMARKS		
Date Out	06/06/2019		Date In	11/06/2019			
Time Out	1115		Time In	1200			
ASSIGNED BY			CHECKED BY				

		RENTAL	CHARGES			PE	TROL / DI	ESEL LEV	/EL	
Daily	@\$	120	6_ Days @	\$ 726	OUT	E	1/4	1/2	3/4	F
Weekly	@\$		Wks @	\$						
Monthly	@\$		Mth @	\$	IN	E	1/4	1/2	3/4	F
Hours	@\$		Hrs @	\$		No observation	water min	Mary		MT III
*Inclusive of	*Inclusive of additional charges (if any) Amt payable* \$ 720			Petrol Cha	arges	YES	NO	AMT:		
Amt payable* \$ 120		CDW		YES	NO	AMT:				
Payment	Payment: □ CASH □ NETS □ CHQ □ VISA □ MAST			Security D	Deposit	YES	NO	AMT:	nia -	
Bank / Ch	eque l	No.:			Advance I	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.
- Venicle is strictly for singapore use only and may not be driven out or singapore without prior consent of the company K & CAR
 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 SGD\$3,500-/ excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party vehicle.

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

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.: 3220

OFFICIAL RECEIPT	2 3 SEP 2019 Date:
The Sum of Dollars Two this Sand one	
Being payment of MH 3212P \$ 2160 Cheque No.:	

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934

Tel: 6844 5938 Fax: 6285 5228 Email: kntcars@gmail.com

VEHICLE RENTAL AGREEMENT

NO.: KT-04433

Replace Veh. No.: SMH 3212P Veh. No.: SMF29294 Replace Veh. M / M: MAZDA 3 Veh. M/M: MITSUDISHI EVO X

BIZ Reg. No.: 53208965X					
HIRER'S PA	ARTICULAR	SAME AS HIRER DRIVER'S PARTICULAR			
Name: NORSHAIRAZI BIN	NORUDIN	Name:	pur la additional de estado en familia de proprieto en la compansión de la		
Address: BIK 632 Choa	Chu Rang north 6	Address:			
#04-209 S(680)	632)	Carried Lands	throw and majored by the legion will pr		
1/c: 58619847 G	D.O.B: 30/07/1986	I/C:	D.O.B:		
Contact: 9459 9613	Pass Date: 18/01/2005	Contact:	Pass Date:		

Left ®	A – ACCIDENT	Hirer's acceptance
	C – CRACKED	and countries and construction of the construc
Rear	D – DENTS	Driver's acceptance
® Right	S – SCRATCHES	of these control and to difficult pass proof to

RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	11/06/2019		Date In	28/06/2019	
Time Out	1200		Time In	11925	
ASSIGNED BY	a material designation of the same		CHECKED BY		

		RENTAL	CHARGES			PE	TROL / DI	ESEL LEV	/EL	all all
Daily	@\$	120	Days @	\$ 2160	OUT	E	1/4	1/2	3/4	F
Weekly	@\$		Wks @	\$					198	
Monthly	@\$		Mth @	\$	IN	E	1/4	1/2	3/4	F
Hours	@\$		Hrs @	\$		la Management		of male	smills for and	AT III
*Inclusive of additional charges (if any)		Petrol Ch	arges	YES	NO	AMT:	MT Ju			
	Amt payable*		\$ 2160	CDW		YES	NO	AMT:		
Payment: □ CASH □ NETS □ CHQ □ VISA □ MAST		Security Deposit		YES NO	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

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 SGD\$3,500-/ excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party

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