



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

Singapore 079120

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant : NORSHAIRAZI BIN NORUDIN

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

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 **SMF2929Y** and vehicle registrations number **SMA3464R** 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.

Yours faithfully,



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	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 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	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)	4
Passenger 1	NAME: : NUR AL' ANNISA NATASHA BINTE NOR HISHAM GENDER: : FEMALE
Passenger 2	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

Name YUNIZAR BINTE HAMBALI
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

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 authorized driver.
- 3) Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to rescind 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:



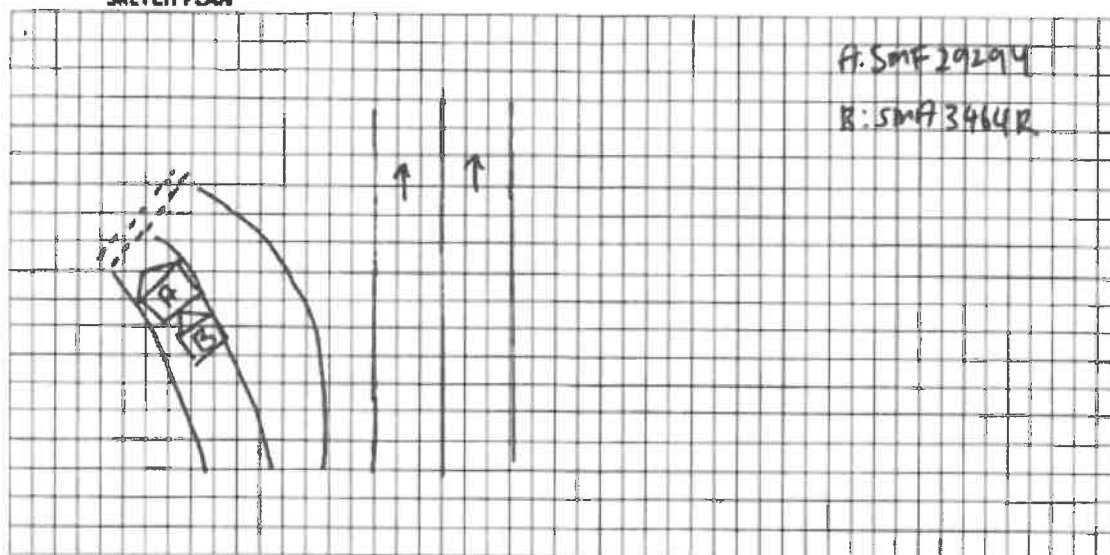
Driver's signature
(If driver is not policy holder)
Date / time:



reporting centre personnel's Signature
Date / time:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Layang Avenue towards ~~direction~~ & my turning into a slip road towards TP6 (PIG) - I then proceeded to stop to check for oncoming traffic and was stationary. Suddenly I felt a huge impact on the rear of my vehicle. I got down and realised I was involved in an accident.

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.:

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC
Owner ID: 9848G

Vehicle Details

Vehicle No.: SMF2929Y
Vehicle to be Exported: No
Intended Deregistration Date: 06 Jun 2019
Vehicle Make: MITSUBISHI
Vehicle Model: LANCER EVO-GSR 2.0 MT ABS D/AB 4WD TURBO
Primary Colour: Blue
Manufacturing Year: 2008
Engine No.: 4B11BQ8485
Chassis No.: JMFSNCZ4A9U000243
Maximum Power Output: 217.0 kW (290 bhp)
Open Market Value: \$44,740.00
Original Registration Date: 12 Dec 2008
First Registration Date: 12 Dec 2008
Transfer Count: 3
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
Total Rebate Amount: \$31,096.00

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

MX1/BN SN
AN0592A
Cov.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)

CERTIFICATE No.	DMPCSN1640861800	Engine No : 4B11BQE485 Chassis No: JMF5NCZ4A9U000243
1. Index Mark and Registration Number of Vehicle	SMF2929Y	
2. Name of Policy Holder	MR NORSHAIRAZI BIN NORUDIN	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	20 DECEMBER 2018 (16:00 HOURS)	NAMED DRIVERS EX SECT. 1S\$3,500.00 EXCESS SECT. 1 (OUTSIDE SINGAPORE).....S\$7,000.00 EX ON WINDSCREENS\$100.00
4. Date of Expiry of Insurance	19 DECEMBER 2019	
5. Persons or Classes of Persons entitled to drive *	<p>AS PER NAMED DRIVER(S) STATED BELOW.</p> <p>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.</p> <p>THE INSURED DRIVING ONLY</p>	
6. Limitations as to use: *	<p>USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING FACE-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 THE MOTOR TRADE.</p>	
<p>HIRE PURCHASE CO. : SPEEDO CAPITAL PTE LTD AS HP OWNER * 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.</p>		

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

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Vehicle Description	Pass Date
Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors / vehicles =< 2500 kg	18 Jan 2005

NP 428A

Licence No: S8619848G



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8619848G



Name: NORSHAIRAZI BIN NORUDIN

Race: MALAY

Sex: M

Date of birth: 30-07-1986

Country/Place of birth: SINGAPORE



REPUBLIC OF SINGAPORE

DRIVING LICENCE



Licence Number: S8619848G

Name: NORSHAIRAZI BIN NORUDIN

Birth Date: 30 Jul 1986

Issue Date: 18 Jan 2005

001315016H



5701066



NRIC No. S8619848G



Date of Issue: 15-02-2017

APT BLK 632 CHOA CHU KANG NORTH 6 #04-209
SINGAPORE 680632

NRIC No: S8619848G Date: 23/03/2019

> 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 Item Description/
Business Transaction Reference
No.**

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
-------------------------------	------------------------	------------------------------

Result of Insurance Enquiry - SMA3464R

As at 05 Jun 2019/19:16:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1 Insurance Enquiry - SMA3464R
Enquiry Fee
20190606133735065841

7.00	0.49	7.49
------	------	------

Sub-Total

7.00	0.49	7.49
------	------	------

Result of Insurance Enquiry - SGQ3658K

As at 03 Jun 2019/20:00:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

2 Insurance Enquiry - SGQ3658K
Enquiry Fee
20190606133735148147

7.00	0.49	7.49
------	------	------

Sub-Total

7.00	0.49	7.49
------	------	------

Result of Insurance Enquiry - SLP4231Y

As at 04 Jun 2019/15:30:00

Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD

3 Insurance Enquiry - SLP4231Y
Enquiry Fee
20190606133735214868

7.00	0.49	7.49
------	------	------

Sub-Total

7.00	0.49	7.49
------	------	------

Result of Insurance Enquiry - GBC4556Y

As at 03 Jun 2019/16:25:00

Insurance Co: SOMPO INSURANCE SINGAPORE PTE. LTD.

4 Insurance Enquiry - GBC4556Y
Enquiry Fee
20190606133735266885

7.00	0.49	7.49
------	------	------

Sub-Total

7.00	0.49	7.49
------	------	------

Result of Insurance Enquiry - GBH3231P

As at 03 Jun 2019/20:25:00

Insurance Co: NTUC INCOME INS CO-OP LTD

5 Insurance Enquiry - GBH3231P
Enquiry Fee
20190606133735314048

7.00	0.49	7.49
------	------	------

Sub-Total

7.00	0.49	7.49
------	------	------

Total Before Rounding

35.00	2.45	37.45
-------	------	-------

Rounding Difference

0.00

Total Amount Payable

37.45

Paid By

xxxxxxxxxxxx3725 Credit Card:
Visa/MasterCard

37.45

Total

37.45

Cash Change

0.00

LETTER OF AUTHORIZATION

To : (Third party insurance & Workshop)

Claimant :

Dear Sirs,

I/We, _____ owner of vehicle no. _____

hereby authorize my/our repairer, _____

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. _____ that was damage pursuant to the accident which occurred at/along

_____ involving vehicle nos. _____

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 hereby authorize you to forward and release all compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors _____ 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 _____ day of _____ (month) 20 _____ (year)

Signature of owner vehicle (claimant): 

Name of owner of vehicle (claimant) :

NRIC Number (claimant):

CUSTOMER'S SIGNATURE

SATISFACTION OF REPAIRED VEHICLE

I/We, _____, owner/driver of vehicle No. SMP 2929Y 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 28 day of June (month) 20 19 (year)

@ 7 hrs 25 mins

NORSHAIRAZI NORUDIN 

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.: 3219

OFFICIAL RECEIPT

Date: 23 SEP 2019

Received from Norshairazi Bin norudin

The Sum of Dollars Seven hundred and twenty dollars only

Being payment of SLR 4801D 06/06/2019 - 11/06/2019

\$ 720

K & t Cars

[Signature]



Cheque No.: _____

Authorised Signature

K & t Cars

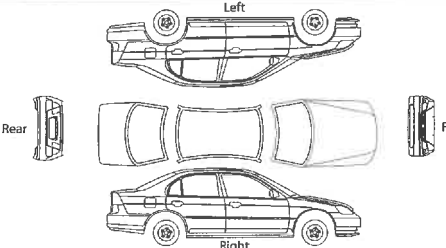
53 Ubi Ave 1 #01-23 Paya Ubi Ind Park
Singapore 408934
Tel: 6844 5938 Fax: 6285 5228
Email: kntcars@gmail.com
Biz Reg. No.: 53208965X

VEHICLE RENTAL AGREEMENT

NO.: KT-04430

Veh. No.: SMF2929Y	Replace Veh. No.: SLK 4801D
Veh. M / M: Mitsubishi Evo X	Replace Veh. M / M: Toyota Altis

HIRER'S PARTICULAR		<input checked="" type="checkbox"/> SAME AS HIRER DRIVER'S PARTICULAR	
Name: Novshairazi Bin Norudin		Name:	
Address: BK 632 Choa Chu Kang North 6 #04-209 (S1680632)		Address:	
I/C: 886198486	D.O.B: 30/07/1986	I/C:	D.O.B:
Contact: 94599613	Pass Date: 18/01/2005	Contact:	Pass Date:

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



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				PETROL / DIESEL LEVEL					
Daily	@ \$	120	6 Days @ \$ 720	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 \$ 720	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 SGD\$3,500/- excess payable to K & t CARS and also the first SGD\$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)

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

23 SEP 2019

OFFICIAL RECEIPT

Date: _____

Received from Norshairazi Bin Norudin

The Sum of Dollars Two thousand one hundred and sixty dollars
only

Being payment of CMH 3212P 11/06/2019 - 28/06/2019

K & t Cars

\$ 2160



Cheque No.: _____

[Signature]
Authorised Signature

K & t Cars

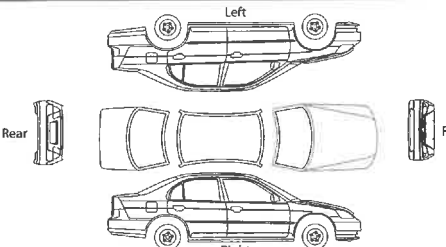
53 Ubi Ave 1 #01-23 Paya Ubi Ind Park
Singapore 408934
Tel: 6844 5938 Fax: 6285 5228
Email: kntcars@gmail.com
Biz Reg. No.: 53208965X

VEHICLE RENTAL AGREEMENT

NO.: KT-04433

Veh. No.: SMF2929Y	Replace Veh. No.: SMH 3212P
Veh. M / M: Mitsubishi EVO X	Replace Veh. M / M: MAZDA 3

HIRER'S PARTICULAR		<input checked="" type="checkbox"/> SAME AS HIRER DRIVER'S PARTICULAR	
Name: NORSHARAZI BIN NORUDIN		Name:	
Address: BIK 632 Choa Chu Kang north 6 #04-209 S(680632)		Address:	
I/C: S8619848 G	D.O.B: 30/01/1986	I/C:	D.O.B:
Contact: 94599613	Pass Date: 18/01/2005	Contact:	Pass Date:

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




RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	11/06/2019		Date In	28/06/2019	
Time Out	1200		Time In	1925	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES					PETROL / DIESEL LEVEL						
Daily	@ \$	120	18	Days @ \$	2160	OUT	E	¼	½	¾	F
Weekly	@ \$			Wks @ \$							
Monthly	@ \$			Mth @ \$		IN	E	¼	½	¾	F
Hours	@ \$			Hrs @ \$							
Inclusive of additional charges (if any)			Amt payable	\$ 2160	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 SGD\$3,500/- excess payable to K & t CARS and also the first SGD\$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)