

103, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax. 64747773

280, Kampong Arang Road
East Coast Centre
Singapore 48180
Tel. 63190888 (AfterSales)
Fax. 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/536 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)



SERVICE TAX INVOICE

Repair Order No. : B1 1379153

Date IN : 16/07/2019

Motor Claim Advisor: Han Kwan Yong

Page No. : 1 of 3

Invoice Number : 2134142 / WSB

Invoice Date : 07/08/2019

Payment Terms : 30 Days From Invoice

Invoice By : Toh Jing Xuan

- CUSTOMER INFORMATION -

Mdm Shang Jing
7 Lorong 42 Geylang
#05-02

Singapore 398028

- INVOICE TO - 121

AIG Asia Pacific Insurance Pte. Ltd.
78 Shenton Way
#08-16 Chartis Building
Singapore 079120

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SLD5822Z	NU06331	23/06/2016	330IA/4DR	43585

- - - - LABOUR 1 - - - -

NETT

To tow accident vehicle to PML workshop.	195.00
To replace front bumper and attachments, front right fender and attachments, bonnet, front top mount, front right deformation element, right fog lamp support, right support, right bottom cover, air duct radiator, horn including knock out dented area caused by the accident.	3,400.00
To respray front bumper, front right fender and bonnet.	2,899.00
To carry out body cavity preservation. (2x). (Per panel).	200.00
To check steering geometry and conduct wheel alignment in accordance with BMW specifications.	451.00
To replace right LED technology headlight including program and conduct tests for proper function.	408.00
To check electrical wiring systems at the front section for proper function.	150.00
To diagnose and replace front right wire harness including reset and checks connections for proper function.	451.00
To diagnose and replace REM control unit, set LED module, right LED module direction indicator including program and conduct checks for proper function.	451.00
Sundries.	150.00
INS CLAIMS : ACCIDENT REPAIR. DIRECT SETTLEMENT.	0.00
DATE OF ACCIDENT : 14.07.2019. 3RD PARTY CAR : SLT3757H.	
YOUR REF NO : NIL.	
VEHICLE WAS SURVEYED BY MR RASUL FROM LKK AUTO ON 16.07.2019 AT 2:35PM. AUTHORISED REPAIR BY MS VIC ALPEH FROM LKK AUTO ON 24.07.2019 VIA EMAIL.	
PROPOSE LOSS OF USE = \$120x14. THE AMOUNT IS SUBJECTED TO INSURANCE COMPANY CONFIRMATION.	0.00
GIA SEARCH FEE = \$2.00.	0.00
VEHICLE WAS ALSO SURVEYED BY OD SURVEYOR MR SAM CHAN FROM AXA INSURANCE ON 16.07.2019 AT 12:35PM.	0.00

Total Labour 1: 8,755.00



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Fax. 64767770

260, Kampong Arang Road
East Coast Centre
Singapore 438180
Tel. 63190888 (AfterSales)
Fax. 63449773

115, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/330 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)

SERVICE TAX INVOICERepair Order No. : **B1 1379153**Date IN : **16/07/2019**Motor Claim Advisor: **Han Kwan Yong**Page No. : **2 of 3**Invoice Number : **2134142 / WSB**Invoice Date : **07/08/2019**Payment Terms : **30 Days From Invoice**Invoice By : **Toh Jing Xuan**

P A R T S		Qty	Retail Price	NETT
FRT RH 2 SIDE PANEL BRACKET		1	34.25	34.25
DECOUPING RING PDC TORQUE CONVERTER		2	5.05	10.10
BONNET		1	1,274.80	1,274.80
FRT RH SIDE PANEL		1	702.65	702.65
EXPANDING RIVET		10	0.50	5.00
FRT BUMPER PANEL PRIMED (SPORT LINE		1	1,027.25	1,027.25
(DG/SL) ADHESIVE SET K6		1	53.05	53.05
SET MOUNTING PDC/PMA SENSOR FRT		1	84.10	84.10
FRT RH GRILLE (SPORT)		1	128.60	128.60
MODEL LETTERING SIDE (SPORT LINE)		1	46.30	46.30
RIVET		4	0.45	1.80
PLAQUE 82MM		1	71.25	71.25
RH HEADLIGHT LED TECHNOLOGY		1	3,068.40	3,068.40
FRONT ENGINE HOOD SEALING		1	38.85	38.85
FRT BUMPER TOWING LUG COVER PRIMED		1	43.25	43.25
RH FINISHER ROD (SPORT)		1	56.00	56.00
RH PARTIALLY OPEN GRID (SPORT)		1	91.75	91.75
FRT BUMPER TOP MOUNT		1	378.10	378.10
FRT RH DEFORMATION ELEMENT		1	101.80	101.80
FRT SHOCK ABSORBER ECE		1	54.50	54.50
AIR DUCT RADIATOR		1	61.50	61.50
RH SUPPORT		1	131.50	131.50
RH HEADLIGHT BRACKET		1	10.10	10.10
BLIND RIVET		2	1.55	3.10
BLIND RIVET		1	1.25	1.25
RH AIR INLET FINISHER (SPORT)		1	53.20	53.20
RH AIR DUCT BRAKE		1	55.95	55.95
INSERT AIR INLET MIDDLE		1	120.60	120.60
FANFARE HORN HIGH TONE ELECTRONIC		1	94.70	94.70
CONTROL UNIT FRT LIGHT ELECTRONICS		1	893.90	893.90
RH LED MODULE DIRECTION INDICATOR		1	789.75	789.75
RH COVER BOTTOM		1	116.55	116.55
RH FOG LAMP SUPPORT		1	41.85	41.85
INTAKE DUCT		1	69.25	69.25
UNFILTERED AIR SNORKEL		1	55.20	55.20
SET LED MODULE		1	162.05	162.05
ULTRASONIC SENSOR BLACK		1	236.85	236.85
FRT RH REPAIR WIRING SET		1	596.85	596.85
CONTROL UNIT REM		1	501.00	501.00

Total Parts : **11,266.95**

Performance Motors Limited

A member of the Sime Darby Group

Co. Reg. No. 197401559W GST Reg. No. M1-3020081-x



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- - - - L A B O U R 2 - - - -

NETT

0.00

Total Labour 2: 0.00

Labour Charges : **8,605.00**Parts Charges : **11,266.95**Lubricant/Misc : **150.00**Total Labour & Parts Charges : **S\$ 20,021.95**Less Insurance Excess : **S\$ 0.00**Invoice Total Amount Exclude GST : **S\$ 20,021.95**GST @ 7% : **S\$ 1,401.54**Invoice Total Amount Include GST : **S\$ 21,423.49**

Computer generated invoice. No signature is required.

Amount Payable Include GST : **S\$ 21,423.49**

All amounts are in Singapore Dollars.

Work was carried out subject to the Company's Terms and Conditions of Service.

No complaints will be entertained unless reported within seven (7) days of the date of this invoice.

For credit purchases, interest @1% per month will be debited on overdue amounts.




AUTHORISATION TO ACT
(AIG Express Third Party Claim)

I, Ms Shang Jing (the third party claimant) of 19 Shelford Rd #03-27, Spire 288408 (address), owner of SLD5822Z (vehicle no.) hereby authorize PERFORMANCE MOTORS LTD ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SLD5822Z that was damaged pursuant to the accident which occurred on 14/07/19 (date) along Kent Ridge Road (location) involving vehicle no/s SLT3757H ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

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

Dated this _____ (day) of _____ (month) 20____ (year)


Signed by "the third party claimant"
(with chop if applicable)



HAN KWAN YONG
Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941

Signed by "the workshop"
(with chop)

RELEASE VOUCHER
(AIG Express Third Party Claim)

"We/I, Performance Motors Ltd ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of surveyor) with respect to the amount claimed for S\$21423.45 (Repair Cost), S\$ (Loss of rental/use), S\$2.00 (Disbursement), for vehicle no. SLO 58222 that was damaged pursuant to the accident which occurred on 14/7/19 (date) along Kent Ridge Road (location) involving vehicle no/s 3LT375714. This is pursuant to the inspection conducted on 16/7/19 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner Sheng Jing ("the third party claimant") of vehicle no. SLO 58222 make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to SLO 58222 (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this _____ (day) of _____ (month) 20____ (year)

Signed by appointed surveyor

HAN KWAN YONG
Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941

Signed by "the workshop" (with chop)

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

**AIG THIRD PARTY EXPRESS SETTLEMENT
FOR ACCIDENTS ON OR AFTER 1ST JUNE 2008
(PAYMENT BREAKDOWN)**

Vehicle No:	SLD58222	Model:	
Date of Accident:	14.7.19		

Global Sum Settlement	: [] Yes	[] No	
Repair Estimate	: \$	21,150.21	
Final Repair Cost	: \$	21,423.49	
Loss of Use	: \$	1,680.00	14 days at \$ 120 per day
Rental (if any)	: \$	-	days
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$	/	
	: \$		
Final Settlement Sum	: \$	23,105.49	
Is Third Party Workshop GIA Registered? [] YES [] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: _____	
	BOLA Liability: _____ (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks			

Payment Instruction: Payee's Breakdown			
1)	Performance Motors Ltd	: \$	21,423.49
2)	Performance Motors Ltd	: \$	2.00
3)	Shang Jing	: \$	1,680.00

Signed by appointed surveyor

Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act;
Survey Report; Medical Report/ Bill (if any))

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-19-113401
Date of Request: 15/07/2019

Your Ref No: Online Purchase

Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941

Dear Sir/Madam,

Enquiry Date 15/07/2019
Enquiry By Han Kwan Yong
TP Vehicle No. SLT3757H
Accident Date 14/07/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLT3757H	AIG Asia Pacific Insurance Pte. Ltd.	21/10/2018-20/10/2019	65-6419-3000

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

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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-19-113401
Date of Request: 15/07/2019

Your Ref No: Online Purchase

Performance Motors Limited
303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941

Dear Sir/Madam,

Enquiry Date: 15/07/2019
Enquiry By: Han Kwan Yong
TP Vehicle No: SLT3757H
Accident Date: 14/07/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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	15/07/2019 14:12
Date Of Accident	14/07/2019 18:50
Exact Location Of Accident	KENT RIDGE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD5822Z
Insured/Policyholder	
Name Of Registered Owner	SHANG JING
NRIC No	S2730362E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96169668
Alternative Phone No	OTHERS-96169668

Vehicle Particulars

Manufacturer	BMW
Model	330IA
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	UNAVAILABLE
Cover Note Number	

Driver

Name of Driver	LIU XUDONG
NRIC No	S2730361G
Date Of Birth	12/02/1966
Occupation	INDOOR
Date Of Driving Pass	14/04/2008
Driving Experience	11 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91553578
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	19 SHELFORD ROAD #03-27
Postcode	288408
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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	3
Was any body injured in the Accident?	NO
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: : SHANG JING GENDER: : FEMALE
Passenger 2	NAME: : LIU JIANI SHERRY GENDER: : FEMALE
Passenger 3	NAME: : SHANG XIAO MENG GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 DUKE ROAD , POSTCODE: 268914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4629999 - FAX NO: 64628933
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACH.

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	SLT3757H
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	CLEMENT GP PERVAIZ MARCE VERONIQUE CATHERINE
NRIC/Passport Number	F5509530L
Contact Number	91773862
Address	
Postcode	
Insurance Company Name	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMA604Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (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 this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, 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' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:



Driver's Signature
(If driver is not the policyholder)
Date & Time:

15/07/19 (12.29pm)



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police Report no: T/20190714/2099

DECLARATION

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

X 

Policyholder's Signature
Date & Time:

X 

Driver's Signature
(If driver is not the policyholder)
Date & Time:

15/07/19
(12.29 PM)



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/07/2019 22:07	Vide Report No.: D/20190714/0100	Station Diary No.: 46
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Informant's Particulars

Name of Informant: LIU XUDONG			Address: 19 SHELFORD ROAD #03-27 SINGAPORE 288408		
ID Type / ID No.: NRIC NO / S2730361G			Contact No.: Home/Office: Mobile: 91553578		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 53	Date of Birth: 12/02/1966	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: General manager			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/07/2019 18:50	Type of Location:
Location: Along Road 1 KENT RIDGE ROAD				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLD5822Z	Car				Slightly Damaged	4
SLT3757H	Car				Seriously Damaged	0
SMA604Z	Car					0

Details of Person Involved

Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA		

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: SLD5822Z
Name (as shown in NRIC) : SHANG JING NRIC/FIN/Passport No : 92730362E
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No.: 96169668
Email Address : _____
Date of Accident : 14/07/19 Time of Accident : 18.50 hrs
Place of Accident : Kent Ridge Road
Insurance Company: AXA Ins Pte Ltd

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Liability clear in my favour and 3rd party ins
agree on 'Direct Settlement'
I wish to revert to 3rd party claim instead of
claiming own ins policy for repair my vehicle



Policyholder / Driver's Signature

Date: 24/07/19 (12.27pm)



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date:



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. : VPA/P1890331 Account No. : 13854
Coverage : Comprehensive
Sum Insured : Market Value At The Time Of Loss
Name of Policy Holder : SHANG JING
Vehicle Registration No. : SLD5822Z
Period of Insurance : From 23/06/2019 To 22/06/2020 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

(a) The Policyholder
The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner
(b) Any other person who is driving on the Policyholder's order or with his 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.

LIMITATIONS 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, speedtesting, 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.

(01)

Basic Own Damage Excess : SGD 400.00

An Additional Excess is applicable as follows:

S\$500.00 for Unnamed Authorized Driver &/or Declared Young & Inexperienced Driver.

S\$5,000.00 for Undeclared Young and Inexperienced Driver.

(Please refer to your policy on the terms & conditions)

* 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.

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).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOVGBP2 on 06/06/2019

IMPORTANT :

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, covernote and endorsement etc.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO S2730362E



Name

SHANG JING

尚 静

Race

CHINESE

Date of birth

25-10-1967

Country/Place of birth

CHINA

Sex

F

S2730362E



5342439



NRIC No S2730362E



Date of issue

20-08-2014

Address

7 LORONG 42 GEYLANG
#05-02
SINGAPORE 398028

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2730361G



Name

LIU XUDONG

刘 旭 东

Race

CHINESE

Date of birth

12-02-1966

Sex

M

S2730361G

Country of birth

CHINA

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S2730361G

Name

LIU XUDONG

Birth Date: 12 Feb 1966

Issue Date: 14 Apr 2008

00158 1954H



4122651



NRIC No. S2730361G

Date of issue

20-11-2007

18 SHELFDOR ROAD #03-27
SINGAPORE 268408

NRIC No. S2730361G

Date: 11/10/2018

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 14 Apr 2008



Licence No. S2730361G