

India Ref: TP/MCT19070455

Occupation:

INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Fax (65) 62244174

Office (65) 63476100 Email insure@bi.com.sg Website www.iii.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

Claimant Ref: PA5442E ("the workshop") hereby confirm that we/l have reached an agreement We/l. FOCUS AUTO PTE LTD with the appointed Surveyor of India International Insurance Pte Ltd _____ LKK Auto Consultants Pte Ltd ___ (name __ (loss of of Surveyor) with respect to the amount claimed for S\$ 3,852.00 (repair cost), S\$ 1,050.00 use/rentel), S\$ 29.00 (search fee), vehicle no. PAS442E that was damaged pursuant to the accident which occurred (location) involving vehicle no. SHB4081J (insured on 18/07/2019 (date) at SENTOSA GATEWAY NEAR VIVO CITY vehicle). This is pursuant to the inspection conducted on 22/07/2019 (date) at "the workshop". ("the third party We/I confirm that we/I are/am authorized by the owner THAN CONSTRUCTION & ENGINEERING P/L claimant") of vehicle no. PA5442E to 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/l deem fit. We/l enclose herein the letter of authority given by "the third party claimant". We/I further confirm that we/I will indemnify India International 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 cost of repairs and/or rental and/or loss of use pursuant to the damage to PA5442E (vehicle no.) as a result of the accident. We/I confirm that the agreement reached above is in full and final settlement of all claims 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. We/Fauthorize you to pay the total amount of \$\$ 4,931.00 to Focus AUTO PTE LTD Dated this 21. day of Notrember 2019. **CLAIMANT:** WITNESS: Signature: Signature: Signed by appointed Surveyor Signed by "the workshop" (with chop) LKK Auto Consultants Pte Ltd Name: Name: 199607198R Focus Auto Pte Ltd NRIC: NRIC: No 1 Kaki Bukit Ave 6 Auto Bay 51 Ubi Avenue 1 Address: Address: #02-50 Singapore 417883 #01-25 Paya Ubi Ind. Park S(408933) Tel: 66043335 Nationality: Nationality:

Occupation:

LETTER OF AUTHORIZATION

PATE : \(\frac{18\07\2019}{}\)
To :
RE: ACCIDENT INVOLVING VEHICLE NO. PA 5442 2 2 SHB 4081 J
ALONG 52N703A GA78WAY NEAR UIVO CLTY ON 18/07/2019
I/WE THAN CONSTRUCTION & ENGINEERING P/L OF (NRIC/ROC NO.) 2U/3U5215M
OF 18 BOWN HAY WAY #10-1386 TRANS 21 SINGAPORE 609966
Owner of vehicle no. PA 5442 & in consideration of M/S FOCUS AUTO PTE LTD repairing my / our
vehicle PR 57442 \(\Sigma\) at my / our instruction and hereby authorize FOCUS AUTO PTE LTD to demand
claim settle receive whatever amount settled / payable by the Insurance Company and / or third party or to commence
legal proceeding. If necessary, under my name, for the cost of repairs, car rental and / or loss of use, etc and to their
appointing Solicitor to act for me / us in respect of the said accident / claim and all claimed and / or settled shall belong
to them absolutely.
I further agree and undertake to indemnify them against the above mentioned claim cost which may arisen therewith.
Signature of Owner : (Company's chop – if any)

Name of Owner : THAN CONSTRUCTION & SWINSERING PTE LTD

NRIC No : 201305215M

Focus Auto Pte Ltd

Business Reg. No. 201004495R GST Reg. No. 201004495R Tel: 6886 9097 Fax: 6481 9095 Email: claims@focusauto.com.sg

Date :

02/10/2019

Your ref: SHB4081J

Our ref: PA5442E

BY E-MAIL / MAIL

WITHOUT PREJUDICE

M/S India International Insurance Pte Ltd

64 Cecil Street, #04/60-00, IOB Building

Singapore 049711

Dear Sir/Madam,

ACCIDENT INVOLVING: (PA5442E & SHB4081J) ALONG SENTOSA GATEWAY NEAR VIVO CITY

DOA:

18/07/2019

TIME:

0710 HOURS

We refer to the above matter and write on behalf of <u>THAN CONSTRUCTION & ENGINEERING P/L</u>, the registered owner of <u>PA5442E</u> in respect of the above accident.

We are instructed that the above accident was caused by your insured's negligent driving / or management of your insured vehicle. Your insured's vehicle SHB4081J collided onto the rear portion of our client vehicle PA5442E. As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows:

1. Cost of Repair	(\$3600 + 7% GS ⁻	\$ 3,852.00
2. Loss of Used	(7 days × \$150)	\$ 1,050.00
3. Buy 3rd party's Gl	A report	\$ 29.00

Total Amount: \$ 4,931.00

Enclosed are the following documents for your perusal.

- 1) Driver's driving license / Identity card
- 2) Certificate of Insurance
- 3) GIA report
- 4) GIA Search
- 5) Original repair claim
- 6) Car Rental Agreement / Receipt

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

Kindly acknowledge receipt of the above said documents within 7 days and your favourable reply is deeply appreciated.

Yours faithfully,

Jenny Kól

FOCUS AUTO PTE LTD

NO. 1 KAKI BUKIT AVE 6, #02-48 AUTOBAY@KAKI BUKIT

SINGAPORE 417883

Co..RegNo.: 201004495R GST Reg No.: 201004495R

Tel No.: 6886 9097 Fax No.: 6844 4625

Bill To#

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET #04/#05/#06-02 **IOB BUILDING SINGAPORE 049711** TAX INVOICE

FA-INV000276 No.:

Date: 20/11/2019

P/O Ref.: PA5442E

Terms: C.O.D. Page:

Tel: 63496100 Fax: 62244174

(GST ID No.: M2-0078806-X)

PA5442E TOYOTA HIACE 2.5 DOA: 18/07/2019

No. Code	Description	Qty	Price	Disc. Tax	Amount
				Code	S\$
1 COR	COST OF REPAIR	1	3,600.00	SR	3,600.00
2 LOU	LOSS OF USE	7	150.00	ZR	1,050.00
3 GIAS	GIA SEARCH	1	29.00	SR	27.10

SINGAPORE		NE HUNDRED THIRTY	Subtotal (Excluding GST)	4.677.10
	ONE ONLY	ONE ONLY		0.00
FOCUS 163/2019			GST 7% on 3,627.10	253.90
			Total	4,931.00
GST summary	Amount (S\$)	GST (S\$)	Rounding Adj.	0.00
SR @ 7%	3,627.10	253.90		
ZR @ 0%	1,050.00	0.00	Grand Total	4,931.00



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 truthful and accurate 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

aforesald.		
	ACCIDENT STATEMENT	
Date Of Report	18/07/2019 14:45	
Date Of Accident	18/07/2019 07:10	
Exact Location Of Accident	SENTOSA GATEWAY NEAR VIVO CITY	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	PA5442E	
Insured/Policyholder		

THAN CONSTRUCTION & ENGINEERING P/L Name Of Registered Owner

201305215M Co Reg No

THANCONSTRUCTION13@GMAIL.COM **Email Address**

Mobile Phone No

OFFICE-68634186 Alternative Phone No.

Vehicle Particulars

TOYOTA Manufacturer

Model HIACE-2.5 (M)

Exact Purpose for which vehicle was being used at

time of accident

WORK PURPOSE

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

COMMERCIAL VEHICLE

Insurance Company

AXA INSURANCE PTE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage Fleet Policy NO

Policy Number P0347583

Cover Note Number

Driver

Name of Driver SOKKIAH ASHOR

Passport No/FIN G7902157T Date Of Birth 10/07/1986 Occupation OUTDOOR Date Of Driving Pass 03/09/2018

0 YEAR AND 10 MONTH Driving Experience

MALE Gender

(LOCAL) +65-91348647 Mobile Number

Fax Number

Contact Number

NOEMAIL **EMail Address**

N/A Address

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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

2

NO Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

YES

Was any other material or property damaged?

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

NO

3

Number of Passengers (Including Driver)

Passenger 1

NAME:

: RAMASAMY GOVINDHARAJ

GENDER: : MALE

Passenger 2

NAME:

: SHENEEVASAN ARIVAZHGAN

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

'Vas notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN

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 SHB4081J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver PARAMPAL SINGH S/O JASWANI SINGH

NRIC/Passport Number S0175874H 96194670 Contact Number

Address Postcode Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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.
- Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- 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
- 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:

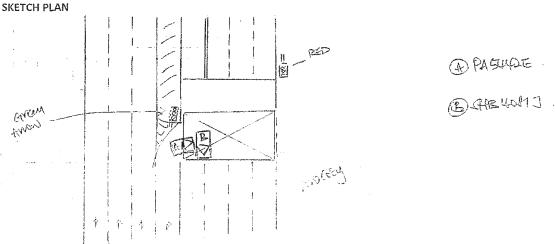
Driver's Signature

(If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name

NRIC/FIN No.:

TAM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT ANOWH DAMAGE CLAIM UNDER MY OWN POLICY, FWILL CHECK MY POLICY FOR MORE DETAILS.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 18/02/19 (a around of Bhis Sento19 Gateriey. I WAS travelling I stopped my vehicle on my officere viglet 1st line in front for traffic light prinction two once it town to fixen from in my favour and I more out last juddenty while is dach at from opposite direction traffic princtions without oftopping a ended him Part gardin . Do one was injury. collided anto my Olaim dwn policy Claim third party
 Claim OD (Text other works hop) ☐ For record purpose DECLARATION Policy No. I/We declares field esoing particulars are true in every respect. Insurer AXA Policyholder's Signati Reporting Centre Personnel's Signature Date & Time: (If driver is not the policyholder) Name: Date & Time: NRIC/FIN No.:

World Committee . Car.



AXA lesurance Pte Util

1800 880 4888 (Within Single (65) 6880 4888 (International)

(65) 6880 4740

customer.care@axa.com.sg

WWW.EXE.COM.SE

date

23/01/2019

policy number CB3 / GA324426

Certificate of Insurance

Commercial Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Commercial Vehicles (Third-Party Risks and Compensation) Rules. 1960 Road Campert Act. 1987 (Malaysia) - Commercial Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Pellcyholder name

THAN CONSTRUCTION & ENGINEERING PTE LTD

Certificate number

GA324426 / 1

Caver

Sum Insured

Third Party, Fire & Theft

NCD

Engine number

2KD1270387

Chassis number

KDH2000016938

Vehicle Registration number Period of Insurance

PA5442E

NII

from 15/02/2019 to 14/02/2020 (both dates inclusive)

Market Value at The Time of Less

Finance Loan Company

Any person provided he is in the Policyholder's employ and/or is driving on their order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

- (a) Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Policy.
- (b) Use only in the Republic of Singapore.

The Policy does not cover

- (a) Use for racing, pace-making, reliability trail or speed testing
- (b) Use whilst drawing a trailer except the towing (other than for reward) of anyone disabled mechanically propelled vehicle
- Limitations rendered inoperative by Section B of the Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Excess

Sec. 2010 (1997) 1997 (1997) 1997 (1997) 1997 (1997) 1997 (1997) 1997 (1997) 1997 (1997) 1997 (1997) 1997 (199

An additional excess is applicable as follows: Additional All Claims Excess of \$\$2,000 is applicable for any named/unnamed univers who a) is 18 years old to 26 years old and/or b) is 66 years old and above and/or r) with driving experience of less than 1 year on the relevant classes of driving license.

Additional clauses & endorsements to your policy

Nil





AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
(65) 6880 4740

customer, care@axa.com.sg

date

23/01/2019

policy number CB3 / GA324426

www.axa.com.sg

Certificate of Insurance

Commercial Vehicles (Third-Perty Risks and Compensation Act. (Chapter 182) - Commercial Vehicles (Third-Party Pisks and Compensation) Bules, 1980 -Poad Renaport Act. 1987 (Malaysia) - Commercial Vehicles (Third-Party Risks & Pules, 1989 (Malaysia)

edile attability

 Policyholder name
 THAN CONSTRUCTION & ENGINEERING PTE LTD
 Certificate number
 GA324426 / 1

 Cover
 Third Party, Fire & Theft
 NCD
 10%

 Engine number
 2KD1270387
 Chassis number
 KDH2000016938

Vehicle Registration number PA5442E

Period of Insurance from 15/02/2019 to 14/02/2020 (both dates inclusive)

Sum Insured Market Value at The Time of Loss

Finance Loan Company Nil

Persons of classes of persons entitled to drive

Any person provided he is in the Policyholder's employ and/or is driving on their order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitations as to use*

- (a) Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Policy.
- (b) Use only in the Republic of Singapore.

The Policy does not cover

- (a) Use for racing, pace-making, reliability trail or speed testing
- (b) Use whilst drawing a trailer except the towing (other than for reward) of anyone disabled mechanically propelled vehicle

Excess

Section 11 SGD1.500.00

The modified are expected in policies of the court of the court of the manufacture of the

Additional clauses & endorsements to your policy

Mil

^{*} Limitations rendered inoperative by Section 3 of the Commercial Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Section 35 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-19-117928

Date of Request:

22/07/2019

Your Ref No:

MSAT19094098

Focus Auto Pte Ltd 1 Kaki Bukit Ave 6 #02-48/50 Autobay Singapore 417883

Dear Sir/Madam,

Your Search Criteria:

Date of Accident:

18/07/2019

Place of Accident:

SENTOSA GATEAWAY

Client Vehicle No:

PA5442E

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-19-117969

Date of Request:

22/07/2019

Your Ref No:

MSAT19094098

Focus Auto Pte Ltd 1 Kaki Bukit Ave 6 #02-48/50 Autobay Singapore 417883

Dear Sir/Madam,

Date of Accident:

18/07/2019

Vehicle No:

PA5442E

Place of Accident:

SENTOSA GATEWAY NEAR VIVO CITY

Involving Vehicle No: SHB4081J

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SHB4081J	SENTOSA GATEWAY NEAR VIVO CITY	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)			14.00	

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque