

Our ref: SGE32Z
Your ref: _____

Direct Settlement

Date: 28 AUG 2019

To: China Taiping 1XX

Singapore _____

Attn: Motor Claims Department

Re: **Accident Involving Motor Vehicle Nos.** SGE32Z & SJH4799S
At/Along JCT OF SEMBAWANG RD YISHUN AVE 3 **On** 27/06/2019 **@** 10:35

I am the owner of vehicle no. SGE32Z that was involved in an accident with your insured vehicle no. SJH4799S of the above accident.

As the accident was caused by your insured negligent/inconsiderate driving, thus I am claiming from you for the following: -

1. Cost of Repairs	\$ <u>7741.21</u>
2. Loss of Use / Rental (<u>4</u> days @ \$ <u>107</u> per day)	\$ <u>428.00</u>
3. LTA/GIA Search Fee	\$ <u>2.00</u>
4. GIA Report Fee	\$ _____
5. Others	\$ _____
Total: \$ <u>8,171.21</u>	

I hereby give you fourteen (14) days to comply with the above, failing which, I shall instruct my solicitor to commence legal action against you. If you have any queries, please contact the representative of **CYCLE & CARRIAGE INDUSTRIES PTE LTD** at Telephone No: **67714420 (Ms Kerlyn Ong) / 67714304 (Ms Amanda Ang)**.

I hereby give full authority to CYCLE & CARRIAGE INDUSTRIES PTE LTD and their representative to negotiate/comprise settlement of the above claim on my behalf.

Your co-operation and immediate attention to the above is greatly appreciated. I hereby look forward to hearing from you soon.

Yours faithfully



Name & Signature

Address: C/o. 188 Pandan Loop Singapore 128378
Cc: Ms Kerlyn Ong/ Ms Amanda Ang
E-mail: kerlyn.ong@cyclecarriage.com.sg / amanda.ang@cyclecarriage.com.sg
Fax No. 67795383



Mercedes-Benz

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

TAX INVOICE

Invoice Name & Address	Owner Name & Vehicle Info
CHINA TAIPING INSURANCE (S) PTE LTD ATTN: MOTOR CLAIM DEPARTMENT 3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909	Cust No/Name WCV35906/Yong Edward Reg No/Reg Date SGE32Z / 26/06/2018 Date In/Mileage 29/07/2019/ 24504 Chassis No WDD2462422J478178 Engine No 27091031631557 Make/Model MB/B 180 SEDAN (W246) "STYLE Colour/Trim 028 890 Cavansite B/ 041 118 ARTICO Leat
Contact No 62222366	



Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No
WC000668	Credit	14/08/2019/ 19:11	K0	301 / Kerlyn Ong	34621	28156806

Description of Goods / Services	Qty	Unit Price S\$	Amount S\$
Z REQUEST Customer Request			F.O.C.
M BPNSUN POLICY NO/ACC DATE : 1800072643 // 27/06/2019 DRIVE IN/TP VEHICLE NO : 27/06/2019 // SJH4799S - CHINA DATE IN/DATE SURVEY: 29/07/2019 1225 // LKK - RASUL DIRECT SETTLEMENT : 18/07/2019 // CHINA - CHONG BOON SEN			
A BPILAB DISASSEMBLE AND REPLACE ATTACHED DAMAGED PARTS & REFINISH.			1440.00
A BPIRES RESPRAY FRONT BUMPER & LH/ FRONT FENDER			1200.00
A BPILAB USING XENTRY DIAGNOSTIC TO CHECK ON CONTROL UNIT RESET MEMORY TO IDENTIFICATION STANDARD. NETT		0.10	380.00
A BPILAB TO REMOVE, REPLACE HEADLAMP WITH FOCUS . NETT			120.00
X FRONT BUMPER	1.00	1406.40	1406.40
X FRONT BUMPER COMPANY SIGN	1.00	62.95	62.95
X LOCK CLIP	2.00	2.83	5.66
X SPACER RING	1.00	6.35	6.35
X LH/ HEADLAMP UNIT	1.00	2613.42	2613.42

Cycle & Carriage celebrates 120 years.
Visit www.cyclecarriage.com/120 for more info!

Parts	4,094.78	Nett	7,234.78
Labour	3,140.00	7% GST on	506.43
Standard Menu	0.00		
Specialist Job	0.00	Total Payable	7,741.21
Diagnostics Job	0.00	Paid	0.00
Sundry/Others	0.00	Total Due	7,741.21
Total(w/o GST)	7,234.78		

Payment should be made strictly by cash, NETS or credit cards. Thank you.

Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.



Mercedes-Benz - are registered trademarks of Daimler, Stuttgart, Germany

Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg

CHAN'S & SONS ENTERPRISE

363 Sembawang Road
Singapore 758379
Tel 67532536 Fax:67567565
GST Reg No: 51-936900-M

chan's
www.chans.com.sg

TAX INVOICE

EDWARD YONG

INVOICE : AR1908-0337
DATE : 19/08/2019
TERMS : C.O.D
STAFF ID : ELAINE
AGREEMENT NO. : HA201907-0227

ATTN : ACCOUNTS PAYABLE

DESCRIPTION	AMOUNT (SGD)
-------------	--------------

Vehicle Reg No : SKZ1922R 400.00
Make / Model : TOYOTA ALTIS 1.6 AUTO
Rental Dates : Rental Billing From 29/07/2019 To 02/08/2019
Period : 4 days
Rental Rate : S\$ 107.00 Per Day (Including GST)
Reference No : SGE32Z

AMOUNT : S\$
FOUR HUNDRED TWENTY-EIGHT DOLLARS ONLY

NON-TAXABLE VALUE : 0.00
TAXABLE VALUE : 400.00
GST 7% : 28.00

TOTAL S\$: 428.00

Please make your cheques payable to : **CHAN'S & SONS ENTERPRISE**



For Official Use Only

Payment Date :	F / Amt
CS / CC / CH :	
CS / CC / CH :	

RENTAL AGREEMENT

201907-0229

Hirer's Name → EDWARD YONG		Date of Birth	Passport/ Nric No. S16478221	Nationality
Address		Occupation	Driving Licence No.	Date of Expiry
Postal Code		Contact No.	Mobile Phone No. 90693019	
Joint Hirer's / Guarantor's Name LORRAINE YONG PEI XIAN		Date of Birth 31.12.1992	Passport/ Nric No. S9248467D	Nationality
Address 32 SPRINGSIDE AVE		Occupation	Driving Licence No.	Date of Expiry
Postal Code 786551		Contact No.	Mobile Phone No. 92311292	

CHECK OUT	Date 28.7.19	Time 10am	Mileage KM	E 1/4 1/2 3/4 F
CHECK IN	Date 2.8.19	Time 5.05pm	Mileage KM	Remarks China.

IMPORTANT NOTES:-

- ❑ Car is restricted to SINGAPORE use. See clause 1(f) for non-compliance.
- ❑ No refund will be given for vehicle that returns early.
- ❑ Own Damage Liability – First \$1500 for damage to vehicle plus loss of earnings while damaged vehicle is under repair.
- ❑ Third Party Liability – First \$2000 for any Third Party Accident Claim.
- ❑ Additional Excess of \$3000 for drivers under 24yrs old or above 70yrs and/or less than 2yrs driving experience.
- ❑ Hirer is responsible for all parking fines & traffic summons.
- ❑ Extension:- One day's advance notice is required otherwise no extension will be allowed.
- ❑ Vehicle should be returned at the same time as collection except on Saturday where return time is before 10am.
- ❑ Vehicle returned after office hour will be charged to the next working day.
- ❑ Hourly extension is charged at 1/5 of the daily rate.
- ❑ As preventive maintenance, please check water & engine oil daily.
- ❑ Please check that you have not left any of your personal belongings in the vehicle. Our company and staff will not be responsible for any loss of belongings after the vehicle is returned.
- ❑ For the comfort of other users, please refrain from smoking, eating or carrying of pets in the car. A cleaning charge of \$200 will be imposed for smoky, smelly or dirty vehicle. -
- ❑ Carrying of PASSENGERS in commercial vehicle is strictly prohibited. Only WORKERS covered under hirer's workmen compensation are allowed.

	UNIT	RATE (\$)	TOTAL (\$)
RATE	1 @	100 + gst	400.00
DISCOUNT			
GST @ 7%			28.00
TOTAL			428.00
EXTENSION			
new girl .			
SGE 322			
DEPOSIT (refundable) \$\$			
CHANGED OVER FROM VEH.		DATE	

I/We have read and agree to the terms and conditions of the rental agreement above and as set overleaf.
I/We declare that all information given on this form is true and accurate.

Hirer's Signature _____

Joint Hirer's/ Guarantor's Signature

for **CHAN'S & SONS ENTERPRISE**

VEHICLE NO.	SK2 1922 R	MODEL	
FROM		RETURN	<small>*Estimate Date. For actual return see CHECK IN</small>

OPERATING HOURS: MONDAY TO FRIDAY 8.30AM TO 5.00PM. SATURDAY 8.30AM TO 12.00PM. CLOSED ON SUNDAY & PUBLIC HOLIDAY

Kerlyn Ong

From: Amanda Ang
Sent: Thursday, 27 June, 2019 1:17 PM
To: Kerlyn Ong
Subject: Emailing: SJH4799S



RECORDS MANAGEMENT CENTRE

**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-19-102706
Date of Request: 27/06/2019

Your Ref No: Online Purchase

Cycle & Carriage Industries Pte Ltd
188 Pandan Loop
Singapore 128378

Dear Sir/Madam,

Enquiry Date 27/06/2019
Enquiry By Ang Ying Chun
TP Vehicle No. SJH4799S
Accident Date 27/06/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJH4799S	China Taiping Insurance (Singapore) Pte. Ltd.	08/08/2018-07/08/2019	6389 6111
SJH4799S	China Taiping Insurance (Singapore) Pte. Ltd.	08/08/2018-07/08/2019	6389 6111

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.

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RECORDS MANAGEMENT CENTRE

**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-19-102706

Date of Request: 27/06/2019

Your Ref No: Online Purchase

Cycle & Carriage Industries Pte Ltd
188 Pandan Loop
Singapore 128378

Dear Sir/Madam,

Enquiry Date 27/06/2019
Enquiry By Ang Ying Chun
TP Vehicle No. SJH4799S
Accident Date 27/06/2019

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	27/06/2019 14:04
Date Of Accident	27/06/2019 10:35
Exact Location Of Accident	JCT OF SEMBAWANG RD YISHUN AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGE32Z
Insured/Policyholder	
Name Of Registered Owner	EDWARD YONG
NRIC No	S1647822I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90693019
Alternative Phone No	OFFICE-90693019

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	B180

Exact Purpose for which vehicle was being used at time of accident

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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800072643
Cover Note Number	

Driver

Name of Driver	LORRAINE YONG PEI XIAN
NRIC No	S9248487D
Date Of Birth	31/12/1992
Occupation	INDOOR
Date Of Driving Pass	28/06/2011
Driving Experience	7 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92311292
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	32 SPRINGSIDE AVENUE
Postcode	786995
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	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)	2
Passenger 1	NAME: : KOH SIEW LIAN
	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

I WAS DRIVING MY CAR ALONG SEMBAWANG RD TOWARD YISHUN AVE 3. I WAS ON THE EXTREME RIGHT LANE WANTED TO TURN RIGHT AT THE JUNCTION. BEFORE I COULD PROCEED TO TURN RIGHT, CAR B (SJH4799S) ON MY LEFT SUDDENLY CUT INTO MY LANE WHILE TURNING RIGHT AND COLLIDED ONTO MY LEFT PORTION.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REFER CSE KO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJH4799S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CELINE HU GUIQING
NRIC/Passport Number	S0250253D
Contact Number	
Address	
Postcode	

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

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarrriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre, Pandan Loop
Name:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my car (SGE322) along Sembawang road toward Yishun Ave 3. I was on the extreme right lane wanted to turn right at the junction.

Before I could proceed to turn right, vehicle B (JH4799) on my left suddenly cut into my lane while turning right and collided into my left position.


DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature
Date & Time



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

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre Pandan Loop
Reporting Centre Personnel's
Name:

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9248487D**

Name: **LORRAINE YONG PEI XIAN**

Birth Date: **31 Dec 1992**

Issue Date: **26 Jun 2012**

002081066G



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S9248487D**



Name: **LORRAINE YONG PEI XIAN**

楊佩嫻

Race: **CHINESE**
Date of birth: **31-12-1992**
Country of birth: **SINGAPORE**

Sex: **F**

S9248487D

FOR C&C USE ONLY


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg 28 Jun 2011

NP 428A

Licence No: S9248487D



4157263



NRIC No. **S9248487D**



Date of issue: **09-01-2008**

Address: **32 SPRINGSIDE AVENUE
SINGAPORE 786995**

FOR C&C USE ONLY

Kerlyn Ong

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Thursday, 18 July, 2019 5:33 PM
To: Kerlyn Ong
Subject: RE: OUR REF: SNM19D202991/CHONGBS - Accident involving motor vehicle nos. SGE32Z & SJH4799S along JCT OF SEMBAWANG RD TOWARD YISHUN AVE 3, Accident date: 27/06/2019

This email was sent from outside of your organisation

Without Prejudice

Dear Kerlyn,

We are prepared to direct settle subject to estimate.

Chong Boon Sen
Claims Executive
Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

W:

<https://apc01.safelinks.protection.outlook.com/?url=www.sg.cntaiping.com&data=01%7C01%7C%7Caf5fd4d8bd124e43cf4e08d70b62f464%7C8b768fcc12ca4f4c9fde19e8afb863c6%7C0&data=CpdDsb dHertEEOlXlb19yeSG8PStbv731L3LnmA9ibw%3D&reserved=0> | FB:

<https://apc01.safelinks.protection.outlook.com/?url=www.facebook.com%2Fchinataipingsg%2F&data=01%7C01%7C%7Caf5fd4d8bd124e43cf4e08d70b62f464%7C8b768fcc12ca4f4c9fde19e8afb863c6%7C0&data=rloL%2BWshMZM4AlpUV71OGDr9S5Jcw1cc2OBXuFCDaYI%3D&reserved=0> | WeChat:

太平獅城 Taiping SG 3 Anson Road #16-00 Springleaf Tower Singapore 079909

DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

-----Original Message-----

From: Kerlyn Ong [mailto:kerlyn.ong@cyclecarriage.com.sg]
Sent: Friday, 12 July, 2019 6:00 PM
To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Subject: RE: OUR REF: SNM19D202991/CHONGBS - Accident involving motor vehicle nos. SGE32Z & SJH4799S along JCT OF SEMBAWANG RD TOWARD YISHUN AVE 3, Accident date: 27/06/2019

Dear Boon Sen,

Please refer to attachment.

Your Sincerely,