

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MFL2019D0000842
Claimant Ref: FBK 9952L

***This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date.

Further, the settlement terms herein should not be used as evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this action.

We/I, T & T AUTO SERVICES PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of Surveyor) with respect to the amount claimed for S\$ 6,000.00 (~~CASH-IN-LIEU~~), S\$ 280.00 (loss of use/~~rental~~), S\$ 57.45 (~~TOWING FEE &~~ (search fee)), vehicle no. FBK 9952L that was damaged pursuant to the accident which occurred on 27/07/2019 (date) at JUNCTION OF WOODLANDS AVE 3 & WOODLANDS CTR RD (location) involving vehicle no. GBC 2645L (insured vehicle). This is pursuant to the inspection conducted on 23/08/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner WONG BAOYANG ALISTAIR ("the third party claimant") of vehicle no. FBK 9952L 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/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 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 FBK 9952L (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/I authorize you to pay the total amount of S\$ 6,337.45 to T & T AUTO SERVICES PTE LTD

Dated this 19 SEP 2019 day of 20

CLAIMANT:

Signature:

Signed by "the workshop" (with chop)

Name:

NRIC:

Address:

Nationality:

Occupation:

T & T Auto Services Pte Ltd
160 Sin Ming Drive,
#08-14 Sin Ming AutoCity
Singapore 575722
Tel: 6266 6876 Fax: 6266 6861

WITNESS:

Signature:

KSC

Signed by appointed Surveyor

Name:

LKK AUTO CONSULTANT PTE LTD

NRIC:

199607198R

Address:

51 UBI AVE 1 #02-25

PAYA UBI INDUSTRIAL PARK S(408933)

Nationality:

Occupation:

***This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date.

Further, the settlement terms herein should not be used as evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this action.

T & T Auto Services Pte Ltd

160 Sin Ming Drive
#08-14 Sin Ming AutoCity
Singapore 575722
Tel: 6266 6876 Fax: 6266 6861
GST Registration No: 200910712E
Email: tntautoservices@gmail.com

Date: 09th September 2019
Our Ref: 0919-1420
Your Ref:

Attn: The Motor Claims Department

India International Insurance Pte Ltd
64 Cecil Street
#04/#05 IOB Building
Singapore 049711

Dear Sir,

ACCIDENT INVOLVING GBC2645L / FBK9952L ON 27/07/2019

Please refer to the above-mentioned accident.

We are writing on behalf of **Wong Baoyang Alistar**, the registered owner of motor vehicle no: **FBK9952L** which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle no: **GBC2645L**. As a result of which, our client have suffered loss and expenses.

We are instructed by our client to claim for:-

1. Cash-In-Lieu	:S\$6,000.00
2. Loss of Use(14 days @ \$20.00/day)	:S\$ 280.00
3. LTA Search	:S\$ 7.45
4. Towing Fee	:S\$ 50.00
5. Storage Fee (14 days @ \$50.00/day)	:S\$ 700.00
TOTAL	<u>:S\$7,037.45</u>

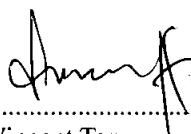
We enclosed hereby the following documents for your consideration:

- (a) GIA Report lodged by our driver
- (b) Owner & Driver I/C/Driving Licence
- (c) Certificate of Insurance
- (d) LTA Search
- (e) Towing Receipt

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Yours faithfully,

T & T Auto Services Pte Ltd


Vincent Tan

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	23/08/2019 15:03
Date Of Accident	27/07/2019 00:20
Exact Location Of Accident	JUNC. OF WOODLANDS AVE 3 & WOODLANDS CENTRE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK9952L
Insured/Policyholder	
Name Of Registered Owner	WONG BAOYANG ALISTAIR
NRIC No	S9170428E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81230009
Alternative Phone No	OFFICE-81230009

Vehicle Particulars

Manufacturer	YAMAHA
Model	YZF-R3-3?1CC ABS

Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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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	MOTORCYCLE
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Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5079877183-03
Cover Note Number	

Driver

Name of Driver	WONG BAOYANG ALISTAIR
NRIC No	S9170428E
Date Of Birth	15/03/1991
Occupation	OUTDOOR
Date Of Driving Pass	18/03/2016
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81230009
Fax Number	
Contact Number	OFFICE-81230009
Email Address	NOEMAIL

Address	APT BLK 168 WOODLANDS STREET 11 #02-125 SINGAPORE
Postcode	730168
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 - 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
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED

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	GBC2645L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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	WONG BAOYANG ALISTAIR
Approximate Age	28
Injuries Sustain	REFER POLICE REPORT
Injured person in which vehicle?	FBK9952L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	APT BLK 168 WOODLANDS STREET 11 #02-125 SINGAPORE
Postcode	730168

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:

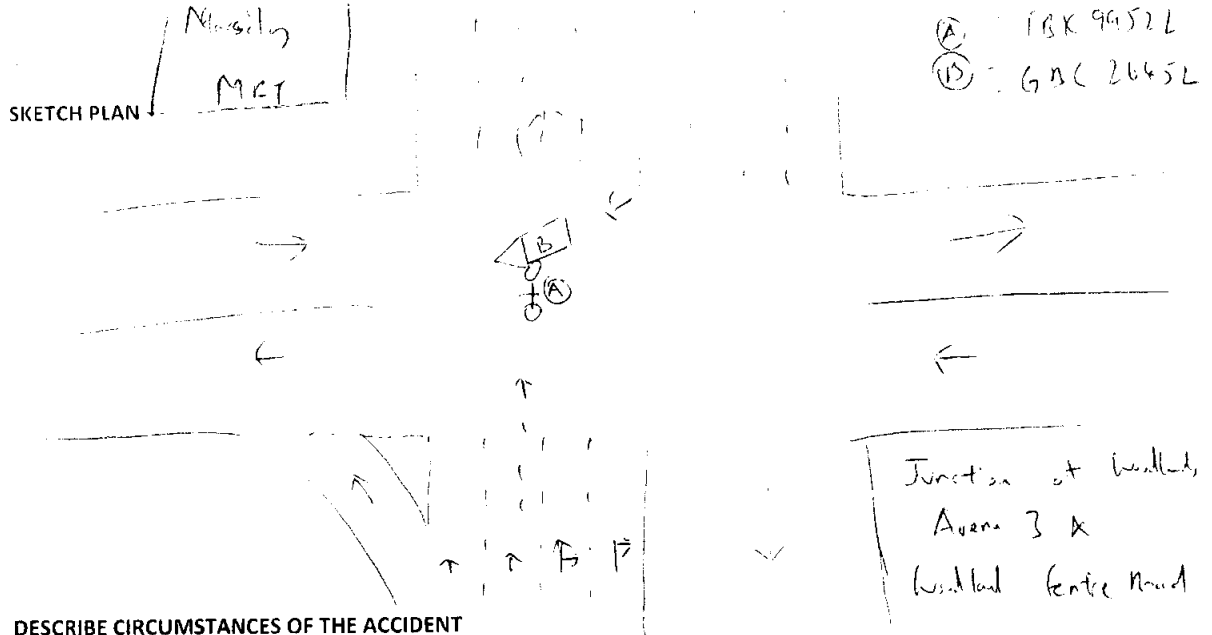
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

Sketch Plan #2 Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Report

to

Police

DECLARATION

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

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.

Common Statement Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190822/2056

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20190822/2056

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/08/2019 13:00		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: WONG BAOYANG ALISTAIR			Address: APT BLK 168 WOODLANDS STREET 11 #02-125 SINGAPORE 730168		
ID Type / ID No.: NRIC NO / S9170428E			Contact No.: Home/Office: Mobile: 81230009		
Nationality: CHINESE			Email:		
Sex: Male	Age: 28	Date of Birth: 15/03/1991	Type of Informant: Rider		
Race: Chinese			Language:		Institution / School Name:
Occupation: OTHERS			Driving Licence Information: Class: 2A Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 27/07/2019 00:20	Type of Location: X-Junction
Location: Along Road 1 WOODLANDS AVENUE 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision:				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK9952L	Motorcycle	YAMAHA	YZF-R3 ABS	Blue	Slightly Damaged	0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
FBK9952L	NTUC Income Insurance Co-Operative Limited	5079877183-03	27/04/2019	26/04/2020	

Common Statement Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190822/2056

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20190822/2056

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider:			
Name	WONG BAOYANG ALISTAIR	ID No.	S9170428E
Related Vehicle	NIL	Contact No.	81230009
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

ON 27.07.2019 AT ABOUT 0020 HRS, I WAS TRAVELLING STRAIGHT ALONG WOODLANDS AVE 3 TOWARDS WOODLANDS AVENUE 5 ON LEFT OF 4 LANES AND BEFORE APPROACHING THE JUNCTION OF WOODLANDS CENTER ROAD TRAFFIC LIGHT WAS GREEN, I ALSO NOTICED THE VAN WHICH HIT ONTO ME WAS STATIONARY ALONG THE OPPOSITE DIRECTION INSIDE THE RIGHT TURNING POCKET. WHEN I JUST RODE PAST THE STOP LINE, I SAW THE VAN STARTED TO TURN RIGHT AND TRAFFIC LIGHT WAS STILL GREEN, I TRIED TO APPLIED BRAKE BUT DUE TO THE DISTANCE WAS TOO CLOSE, AND UNFORTUNATELY I STILL HIT ONTO THE LEFT FRONT PORTION OF THE VAN.

Common Statement Pg. 1



SINGAPORE
POLICE FORCE



T/20190822/2056

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190822/2056

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:
TP /
YOGENDRAN S/O RAJASAKARAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI
Contact No.: 65476904

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
22/08/2019 13:00

Classification Of Case:



SINGAPORE
POLICE FORCE

Signature:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9170428E



Name

WONG BAORYANG ALISTAIR

黄宝扬

Race

CHINESE

Date of birth

15-03-1991

Sex

M

S9170428E

Country of birth

MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE



WONG BAORYANG ALISTAIR

Birth Date: 15 Mar 1991

Issue Date: 19 Jun 2014



0023163418



9095387



NRIC No. S9170428E

Nationality

MALAYSIAN

Date of issue

04-06-2010

Address

APT BLK 168 WOODLANDS STREET 11
#02-125
SINGAPORE 730168

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

EFFECTIVE DATE

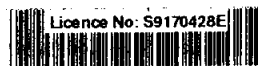
C Class 2B
Class 2A

MOTORCYCLES NOT EXCEEDING 200 CC
MOTORCYCLES BETWEEN 201 CC AND 400 CC

19 Jun 2014
18 Mar 2016

S9170428E

S / No. 9000246079



Licence No: S9170428E

NP 428A

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 Number : 5079877183-03

Cover : Third Party, Fire & Theft

- | | |
|---|-------------------------|
| 1. Index mark and Registration Number of Vehicle | : FBK9952L |
| Chassis Number | : MH3RH071000004594 |
| 2. Name of Policyholder | : WONG BAOYANG ALISTAIR |
| 3. Effective Date of Insurance | : 27 Apr 2019 |
| 4. Expiry Date of Insurance | : 26 Apr 2020 |
| 5. Persons or Classes of Persons entitled to drive# | |

(a) Named Driver(s) Only.

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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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 (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: WONG BAOYANG ALISTAIR
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SOON HIN
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : WTT INSURANCE AGENCIES PTE LTD (00000614933)
Date of Issue : 22 Apr 2019 21:12 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

> [Back to OneMotoring](#)


Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 22 Aug 2019 / 15:13:18

Receipt Date/Time : 22 Aug 2019 / 15:13:18

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190822-001972

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 - GBC2645L As at 27 Jul 2019/00:00:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - GBC2645L Enquiry Fee 20190822151205892373	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
	20190822151220870	Direct Debit: eNETS Debit (Internet Banking)		7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



Efficient Towing Services

403 Sin Ming Avenue #13-307, Sin Ming Garden, Singapore 570403

Ah Di Mobile: 8588 8877

Email : efficienttowing.sg@gmail.com

Business Reg. No.: 53349344K

NO. 36730

CASH SALE / JOB ORDER

Date: 24/08/19

Messrs: Cash
车牌 FKC 90316 车型 Yamaha
Vehicle No. FKC 90316 Model No: Yamaha
时间 (日/夜) 联络号码
Time (day/night): Contact No:
由
Location: T. P Compound
到
To: Auto City #02-16
银额 其他
Cash \$ \$50 Others:
经手人
Authorised By: AMZ Tow Truck Driver Name: Vic

- ☐ Jump Start/Changing of battery
- ☐ Tyre Replacement
- ☒ Accident/Breakdown
- ☐ Multi/Basement
- ☐ With Load/Cargo Box
- ☐ King Dolly
- ☐ Transport Charge
- ☐ Low Body Kit
- ☐ Door Opening Service
- ☐ Crane Up/Winch Out
- ☐ Collect Doc/Key
- ☐ Repo
- ☐ Woodlands and Tuas Checkpoint

注意: 本公司对所拖之车辆, 在進行中如有任何损失或破坏, 一概由车主自行负责。

Note: Vehicle is towed at owner's risk. The company accepts no responsibility for damages or other misdemeanour to your vehicle whilst being towed.

E. & O. E.