

KARZ WORKS PTE LTD  
53 UBI AVENUE 1 #01-23, PAYA UBI INDUSTRIAL PARK  
SINGAPORE 408934  
(TEL) 6 8 4 4 5 9 3 4 (FAX) 6 8 4 4 2 4 7 4 (E-MAIL)  
KARZWORKSSG@GMAIL.COM

28<sup>th</sup> November 2019

Our reference: KK1910-30  
Your reference: SHC1331C

**M/s India International Insurance Pte Ltd**  
78 Shenton Way  
#08-16  
Singapore 079120  
**Attn: Motor Claims Department**

**BY HAND**

Dear Sir/ Madam,

Claimant : HAN GHIM THAI  
Address : BLK 250 BUKIT BATOK EAST AVENUE #09-162 S(650250)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **20/10/2019** along **BUKIT BATOK EAST AVE 2** involving our client's vehicle registration number **FBP2457U** and vehicle registrations number **SHC1331C** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair	:	\$ 1,650.00
Loss of Use (25 days x \$80)	:	\$ 2,000.00
Purchase 3P GIA Report Fee	:	\$ 29.00
LTA Search Fee	:	\$7.49
Total	:	\$ 3686.49

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A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) Certificate of Insurance;
- e) Letter Of Authorisation;
- f) Tax Invoice;
- g) LTA Search;
- h) Purchase 3P GIA Report Invoice;
- i) Satisfaction of Repaired Vehicle;

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

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,



Karz Works Pte Ltd

Encl.

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	21/10/2019 18:20
Date Of Accident	20/10/2019 20:15
Exact Location Of Accident	BUKIT BATOK EAST AVE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP2457U
Name Of Registered Owner	HAN GHIM THAI
NRIC No	S0072664H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96601463
Alternative Phone No	OFFICE-96601463

Manufacturer	YAMAHA
Model	CZD300A / XMAX300
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5107880521
Cover Note Number	

Name of Driver	HAN GHIM THAI
NRIC No	S0072664H
Date Of Birth	03/03/1953
Occupation	INDOOR
Date Of Driving Pass	24/11/1977
Driving Experience	41 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96601463
Fax Number	
Contact Number	OFFICE-96601463
Email Address	NOEMAIL

Address	BLK 250 BUKIT BATOK EAST AVENUE 5 #09-162
Postcode	650250
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	-

Type Of Accident	COLLISION - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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?	

REFER TO POLICE REPORT - T/20191020/7025.

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	SHC1331C
Vehicle Make/Model/Colour	HYUNDAI IONIQ
Details Of Properties	
Vehicle Category	TAXI
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 HAN GHIM THAI

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? FBP2457U

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

## Accident Sketch Plan

### **SKETCH PLAN**


#### **IMPORTANT NOTICE**

- 1) Please report **accurately** on the details of the accident to speed up the claims process.
- 2) This form must be completed by the policy holder and/or the authorized driver.
- 3) Information provided must be as **truthful and accurate as possible**. Any willful misrepresentation or withholding of material facts may allow insurance companies to **rescind their 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 statement may be referred to the police for investigation.**
- 6) The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7) By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8) Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in the [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such personal information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers' lawyers/law firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as police), for the purpose(s) of:
  - (i) Processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) Investigations the accident and/or my claims;
  - (iii) Carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) Administering my claims (including the mailing of correspondence, statement, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelope/mail packages); and/or
  - (v) Complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "purposes")
- (b) All insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyer/law firms, may/are permitted to collect, use, disclose and/or process my personal information for one or more of the above purposes; and
- (c) My personal information may/can be disclosed by any of the insurer and/or GIA to their third party service providers or agents (including their lawyer/law firms), which may be sited outside of Singapore, for one or more of the above purposes.
- (d) My personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) The information so collected under (d) above may be shared / disclosed:
  - (i) To all insurers and/or any other third parties that assist in evaluating, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) For complying with requirements under my regulations, laws or court orders.

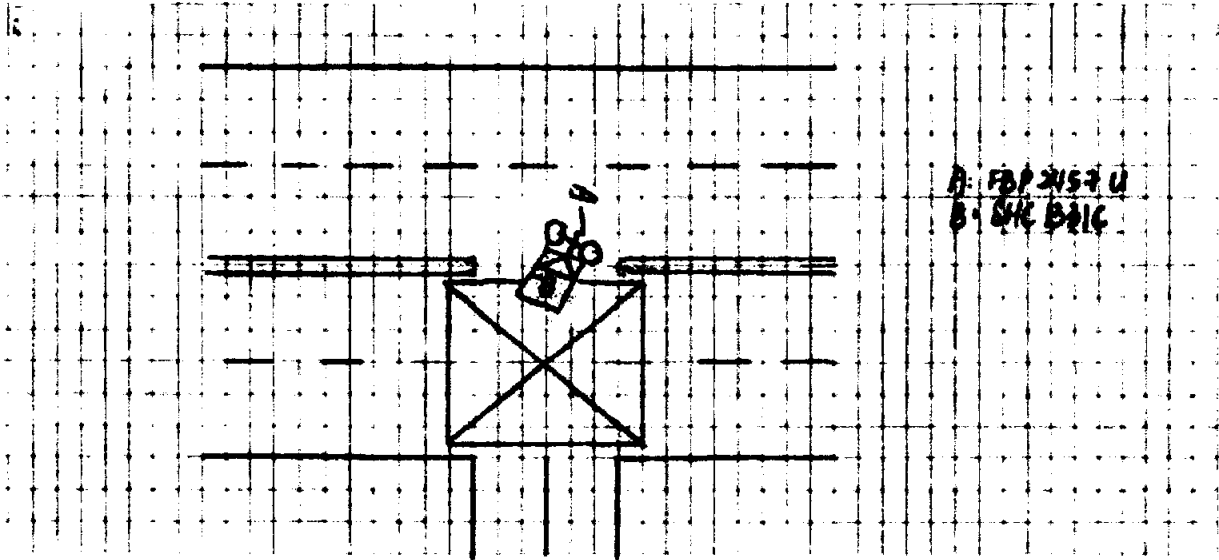
  
Policy holder's signature  
Date / time:

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

  
Reporting centre personnel's Signature  
Date / time:

# Accident Sketch Plan

## SKETCH PLAN




## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

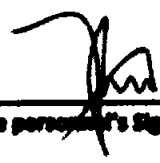
Refer to police report

## DECLARATION

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

  
Policy holder's signature  
Date & time:

\_\_\_\_\_  
Driver's signature  
(If driver is not policy holder)  
Date & time:

  
reporting centre personnel's Signature  
NRAC/FBI No.:



# SINGAPORE POLICE FORCE



T/20191020/7025

1 of 3

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

Report No. T/20191020/7025

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 20/10/2019 23:14		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: HAN GHIM THAI			Address: APT BLK 250 BUKIT BATOK EAST AVENUE 5 #09-162 SINGAPORE 650250		
ID Type / ID No.: NRIC NO / S0072664H			Contact No.: Home/Office: Mobile: 96601463		
Nationality: SINGAPORE CITIZEN			Email: jintai53@gmail.com		
Sex: Male	Age: 66	Date of Birth: 03/03/1953	Type of Informant: Rider		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Props			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/10/2019 20:15	Type of Location: Straight Road
Location:  BUKIT BATOK EAST AVENUE 2				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP2457U	Motorcycle	YAMAHA	CZD300A / XMAX300	Silver	Slightly Damaged	0
SHC1331C	Car				Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBP2457U	NTUC Income Insurance Co-Operative Limited	5107880521	28/02/2019	27/02/2020





# SINGAPORE POLICE FORCE



T/20191020/7025

2 of 3

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

Report No. T/20191020/7025

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	HAN GHIM THAI	ID No.	S0072664H
Related Vehicle	FBP2457U (Motorcycle)	Contact No.	96601463
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	04	Degree of Injury	Slight

### Brief Details.

On stated time and date, I was the rider of vehicle carplate number bearing FBP2457U travelling at bukit batok east ave 2.

I am turning right into the carpark at my right, the taxi vehicle bearing carplate number SHC1331C came out from the carpark and also turning right to my lane and collided into me.

Due to the accident, I suffered from injuries and consult a doctor and get a 4 days MC.



**SINGAPORE  
POLICE FORCE**



T/20191020/7025

3 of 3

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

Report No. T/20191020/7025

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:  
20/10/2019 23:14

Classification Of Case:

Authentication Stamp

NP168

[> Back to OneMotoring](#)

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 664H

### Vehicle Details

Vehicle No.: FBP2457U  
Vehicle to be Exported: No  
Intended Deregistration Date: 22 Oct 2019  
Vehicle Make: YAMAHA  
Vehicle Model: CZD300A / XMAX300  
Primary Colour: Silver  
Manufacturing Year: 2019  
Engine No.: H336E0049277  
Chassis No.: MH3SH0847KK006184  
Maximum Power Output: -  
Open Market Value: \$4,318.00  
Original Registration Date: 28 Feb 2019  
First Registration Date: 28 Feb 2019  
Transfer Count: 1  
Actual ARF Paid: \$648.00

### Intended PARF Rebate Details

PARF Eligibility: No  
PARF Eligibility Expiry Date: -  
PARF Rebate Amount: \$0.00

### Intended COE Rebate Details

COE Expiry Date: 27 Feb 2029  
COE Category: D - Motorcycle  
COE Period(Years): 10  
QP Paid: \$3,399.00  
COE Rebate Amount: \$3,177.00  
**Total Rebate Amount: \$3,177.00**

The information contained herein is correct as at 22 Oct 2019

OK

[> Back to OneMotoring](#)

## Enquire Road Tax Payable / Prerequisite(s) To Fulfil

### Please Note :

- The information contained herein is correct as at 22 Oct 2019.

#### Vehicle Particulars

Vehicle No.: FBP2457U  
Current Road Tax Expiry Date: 27 Feb 2020  
New Road Tax Start Date: 28 Feb 2020  
New Road Tax Expiry Date: 27 Aug 2020

#### Prerequisites (Updating of records may take about 3 working days)

Sufficient Insurance Coverage : No

#### Net Road Tax Amount

	Amount (S\$)
Road Tax Amount:	43.00
Nett Road Tax Amount:	43.00
Amount Payable	

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Nett Road Tax Amount:	43.00	-	43.00

#### Total Amount Payable

#### Late Renewal Fees Payable From

	Late Renewal Fees (S\$)	Total Amount with Late Renewal Fee (S\$)
28 Feb 2020	10.00	53.00
28 Mar 2020	30.00	73.00
12 May 2020	50.00	93.00
28 Aug 2020	130.00	173.00

[Previous](#)

[OK](#)

## 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 : 5107880521

Cover : Third Party, Fire & Theft

- |  |                     |
|--|---------------------|
| 1. Index mark and Registration Number of Vehicle | : FBP2457U          |
| Chassis Number                                   | : MH3SH0847KK006184 |
| 2. Name of Policyholder                          | : HAN GHIM THAI     |
| 3. Effective Date of Insurance                   | : 28 Feb 2019       |
| 4. Expiry Date of Insurance                      | : 27 Feb 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)	: HAN GHIM THAI
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: UNIQUE MOTORSPORTS PTE LTD
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)

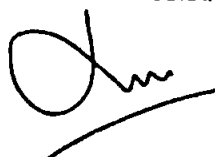
Date of Issue : 28 Feb 2019 17:10 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

## LETTER OF AUTHORIZATION

To III, Karz Works Pte Ltd (Third party insurance & Workshop)

Claimant Han Ghim Thai

Dear Sirs,

I/We, Han Ghim Thai owner of vehicle no. FBP2457U

hereby authorize my/our repairer, Karz Works Pte Ltd

act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or loss of use ("claim") for my/our vehicle no. FBP 2457U that was damage pursuant to the accident which occurred at/along

Bukit Batok East Ave 2

involving vehicle nos. SHC1331C

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies pertaining the above mentioned accident due to me/us to my/our repairer/solicitors Karz Works Pte Ltd. I/We hereby authorize you to forward and release all compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors Karz Works Pte Ltd pertaining to above said accident whom I/we authorized and assigned to collect the said compensation monies.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Thank you.

Dated this 20 day of 10 (month) 20 19 (year)

Signature of owner vehicle (claimant): 

Name of owner of vehicle (claimant): Han Ghim Thai

NRIC Number (claimant): S0072664H

**UEN No. 201802142M**

**CUSTOMER'S SIGNATURE**



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 22 Oct 2019 / 13:54:31

Receipt Date/Time : 22 Oct 2019 / 13:54:31

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-191022-001862

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 - SHC1331C				
As at 20 Oct 2019/20:15:00				
Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SHC1331C Enquiry Fee 20191022135302539350	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SMC2236D				
As at 20 Oct 2019/16:00:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
2	Insurance Enquiry - SMC2236D Enquiry Fee 20191022135302599575	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - GY8569J				
As at 19 Oct 2019/18:15:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
3	Insurance Enquiry - GY8569J Enquiry Fee 20191022135302661219	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		21.00	1.47	22.47
Rounding Difference				0.02
Total Amount Payable				22.45
Paid By				
		xxxxxxxxxxxx4799	Credit Card: Visa/MasterCard	22.45
Total				22.45
Cash Change				0.00
Tendered Amount				22.45
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.





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

KK1910-30 FBP2457U

**TAX INVOICE**

3P

Our Ref No: GR-19-174151

Date of Request: 22/10/2019

Your Ref No: WALK IN SEAH

TEAMWORK GARAGE PTE LTD  
53 UBI AVE 1 #01-24, PAYA UBI INDUSTRIAL PARK  
SINGAPORE 408934

Dear Sir/Madam,

Your Vehicle No: FBP2457U

Date of Accident: 20/10/2019

Place of Accident: BT BATOK EAST AVE 2

Involving Vehicle No: SHC1331C

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:

☐ GIRO ☒ Cash ☐ Cheque



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-19-174152

Date of Request: 22/10/2019

Your Ref No: WALK IN SEAH

TEAMWORK GARAGE PTE LTD  
53 UBI AVE 1 #01-24, PAYA UBI INDUSTRIAL PARK  
SINGAPORE 408934

Dear Sir/Madam,

Date of Accident: 20/10/2019

Vehicle No: FBP2457U

Place of Accident: BUKIT BATOK EAST AVE 2

Involving Vehicle No: SHC1331C

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\$)
SHC1331C	BUKIT BATOK EAST AVE 2	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.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

## SATISFACTION OF REPAIRED VEHICLE

I/We, Han Ghim Thai, owner/driver of vehicle No. FBP 2457 U declare that the repairs of my/our vehicle has been completed and to my/our satisfaction.

I/We agree that I/we hereby irrevocable absolutely accept the settlement amount and the liability from the third party on the repair costs and/or rental and/or loss of use which are final and that the sum of amount are to be released and payment to the workshop for such repairs in respect of the damages caused in the accident.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Dated this 13 day of November (month) 20 19 (year)  
@ 15 hrs 00 mins

Han Ghim Thai  
(Han Ghim Thai)  
Name and Signature