DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875 Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No.: 201436361C

Letter of Demand

Re: Accident involving my vehicle no. <u>SLKB456R</u> and vehicle no. <u>SKHB970A</u> on <u>19/12/19</u> at <u>16-30</u> HRS PM/AM at/along <u>ECP</u> towards Charge Airport Chefore Marine Paracle Exit 10B)

We refer to the above matter.

Attached pleas find copies of the following for your kind perusal:

Vehicle Repair cost / Excess	\$	24075.00
Vehicle Rental Fee for days @ \$_150.00 per day	\$	2850.00
Loss of use for days @ \$ per day Police search fee/police report fee/LTA search fees Others	\$ \$ \$	14.90
Total:	\$	26982.90

Yours faithfully,

ABBY HP: 9856 4815

E-mail: dynamicautowork@gmail.com

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875 Tel: 6341 6789 Fax: 6341 6778 Co. Reg. No. : 201436361C

Authorisation To Act

I, Ng Eng Sun AIA Bedok Ria Crescent, # 01-26	_("the third party claimant") of
(address), owner of SLK 8436 R	(vehicle no.) hereby
("the workshop") to act for me with costs and/or rental and/or loss of no. 5468456 R that was damaged occurred on 19/12/19 (date) at/a (Before Marine Purade Ent 1015) vehicle no/s 5448970 A ("the accident").	respect to my claim for repair use ("claim") for my vehicle pursuant to the accident which
I further hereby authorise the workshop to manner that they deem it fit and the workshop further to settlement of my claim with payme workshop.	is further authorised to receive payment
I further authorise the workshop to execute vouchers/agreements regarding my/our claim/	
I further acknowledge that any settlement the a without prejudice and without admission of claim (s) whatsoever by me and/or the drive arising from the aforesaid accident concerned.	of liability basis in so far as any other er/owner/insurers of the other vehicle/s
Dated this day of	(month) 20(year)
· MM.	OWORF PTE.
Signed by "the third party claimant"	Signed by "the workshop"

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875 Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No.: 201436361C

Letter of Authorisation & Indemnity				
Accident	involving motor vehicles no. SLK 8456 R and SKH 8970 A on 19/2/19			
at/along_	ECP towards Changi Airpost (Before Marine Paracle Exit 1015)			
1.	I/We, the Owner of motor vehicle no. SLK8456 hereby instruct and authorise Market Artowerk for the Like ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$ being refundable deposit of			
2.	the repair to my/our said vehicle. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.			
3.	You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.			
4.	My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.			
5.	Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.			
6.	I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.			
7.	I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.			
8.	In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.			
9.	In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this			
	action agreeing to pay or receive any monies due to this claim.			
	Dated this			
Signature	e of vehicle owner \(\square \)			
Name -	Ng Eng San Witnessed by:			
IC/UEN I	No: 51656579 19 y stamp, if applicable) Mahry			
	41A Bedok Ria Coescent			
# 01-	26,5(489929)			

Tel: 9680 5055

Dynamic Autowork Pte.Ltd.

8 Kaki Bukit Ave 4, #08-09, Premier@Kaki Bukit

Singapore 415875 Tel: 6341 6789 Fax: 6341 6778

ROC / GST REG NO.: 201436361C Email:dynamicautowork@gmail.com



Invoice #: 00001058

Date: 12.02.20 Vehicle No: SLK8456R

Bill To:

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

3 ANSON ROAD #16-00 SPRINGLEAF TOWER SINGAPORE 079909

DESCRIPTION	AMOUNT
Carry out lump sum repair on accident vehicle corresponding to	\$ 22,500.00
supply of spare parts, labour and spray painting charges	
Sub Total	\$ 22,500.00
Add GST 7%	\$ 1,575.00
Total Amount	\$ 24,075.00

PAYMENT BY CHEQUE SHOULD BE CROSSED AND MADE PAYABLE TO 'DYNAMIC AUTOWORK PTE.LTD."

PLEASE INDICATE THE INVOICE NO. ON THE REVERSE SIDE.

Issued By:



ABBY

Authorised Signature

Rapid Rental Pte.Ltd.

8 Kaki Bukit Ave 4, #08-09 Premier@Kaki Bukit Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

ROC No.: 201627936K

TAX INVOICE

Invoice No. : DR2001-0172

Date : 10.01.20

: SMM9261G Vehicle No. Vehile Model: : HONDA SHUTTLE

To: NG ENG SAN 41A BEDOK RIA CRESCENT

#01-26

SINGAPORE 489929

DESCRIPTION	NO. OF DAYS	RATE	Α	MOUNT
RENTAL FROM 19/12/2019 - 07/01/2020 YOUR REF: SLK 8456R	19	150.00	\$	2,850.00
		TOTAL:	\$	2,850.00

Payment by cheque should be crossed and made payable to 'Rapid Rental Pte.Ltd.'

This is computer generated document. No signature is required.

RAPID RENTAL PTE. LTD.

8 KAKI BUKIT AVENUE 4 #08-09 PREMIER @ KAKI BUKIT SINGAPORE 415875

ROC:201627936K	VRA NO: DR 2001 - C)172
VEHICLE RE HIRER'S PARTICULARS	Hirer's Own Vehicle No: JLK & 456 K	
Name (as in I/C): Na Eng San	Loan Vehicle No: SMM9261G	
NRIC/Passport No: Date of Rirth: 24/10/1964	Make & Model: Honda Shuttle	
NRIC/Passport No: Date of Birth: 24/10/1964 Address: 4A Bedok Ria Crescentage: 56		
#01-26 s(489929)	Daily 19 day @\$150 Per day 2850	cts
Name & Address of Employer:	Weekly day @\$ Per week	
Name & Address of Employer.	Monthly day @\$ Per month	
Occupation: Driving Exp:	Others	
Driving License No:Passed Date:	CDWS/PAI	
D/L Type: Local/Int'l/Others:	Delivery/Collection Svc	
Tel: (H/P)(O)	Delivery/ collection 3vc	
DRIVER'S PARTICULARS	SUB-TOTAL 2850	
Name (as in I/C):		
NRIC/Passport No: Date of Birth:	Petrol Level OUI	
Address:Age:	& E 1/4 1/2 3/4 F	
	Surcharge IN	
Occupation: Driving Exp:	TOTAL 2850 .	_
Driving License No:Passed Date:		
D/L Type: Local/Int'l/Others:		
Tel: (H/P)(O)		
EXCESS: Section (1) \$2,500.00		>
Section (2) \$2,500.00		
		~
m/m	INDICATE: A - Accidents D - Dents S - Seratches	-
Hirer's Signature: Additional Hirer's Signature:	x - Crack	
	ment. If I have presented a charge for payment. I agree that all amounts payable at account and my signature above will be considered to have been made on the	

voucher. All information I have been given RAPID RENTAL PTE, LTD, in connection with this agreement is true,

IMPORTANT

- 1. The Hirer and the authorized driver must be over 25 years of age and under 65 years of ages and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be borne by the Hirer/the Authorized Driver.
- 2. All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on lop of petrol surcharge is payable by the hirer should he fail to return the vehicle at line appropriate petrol level.
- 3. No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- 4. Use of the vehicle for illegal purpose (for instance: in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited.
- 5. Vehicle strictly for Singapore use only and may not driven out of Singapore without prior written consent of RAPID RENTAL PTE. LTD. The hirer is liable for a penalty fee of \$200 in additional to appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- 6. The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or
- 7. The hirer and/or driver shall be responsible for all claims, damages,

- losses, increased insurance premiums, non-waiver excess and cost expenses (including legal costs on full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to pay immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damages to the car will be repair at RAPID RENTAL PTE. LTD. authorized workshop.
- 8. Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 - \$400.
- 9. The Hirer agrees that a punctured tyre, empty petrol tank, lost of vehicle's key or locked keys inside of vehicle by itself, does not constitute a breakdown and that in event the owner's 24-Hours Emergency Services is called upon to respond to such occurrence, the Hirer shall bear cost of such responses at \$150 per trip.
- 10. In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
- 11. The hirer and/or driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
- 12. All customers' data will kept strictly confidential and is solely used for the purpose of completing the sales transaction and other relating matters.
- 13. I understand and agreed to personal data collection statement stated on the Term and Conditions page.

Date / Time OUT	Mileage	Check By	Remark	
19/12/19 7-20pm	7658			Hirer's/Driver Signature
Date / Time IN	Mileage	Check By	Remark	
07/01/2020 11-50am.	8563			Hirer's/Driver Signature



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

19 Dec 2019 / 19:12:02

Receipt Date/Time: 19 Dec 2019 / 19:12:02

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191219-003311

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 - SKH8970A				
As at 19 Dec 2019/16:30:00				
Insurance Co: CHINA TAIPING INSURANCE 1 Insurance Enquiry - SKH8970A	E (SINGAPORE) PTE LTD			
Enquiry Fee 20191219191126706724		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			
	xxxxxxxxxxxx1359	Credit Card: Visa/MasterCard		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.



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

19 Dec 2019 / 19:13:55

Receipt Date/Time: 19 Dec 2019 / 19:13:55

Tax Invoice/Receipt

Receipt No.: ITNET-00000-191219-003312

Previous Receipt No.:

S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at Insura	t of Insurance Enquiry - SLL4056H 19 Dec 2019/16:30:00 ance Co: NTUC INCOME INS CO-OP I	LTD			
-	Insurance Enquiry - SLL4056H Enquiry Fee 20191219191316602450		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			
		xxxxxxxxxxxx1359	Credit Card: Visa/MasterCard		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!

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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-19-211715

Date of Request:

24/12/2019

Your Ref No:

WALK IN GOH HUA LOON

DYNAMIC AUTOWORK PTE. LTD

8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT

SINGAPORE 415875

Dear Sir/Madam,

Your Vehicle No:

SLK8456R

Date of Accident:

19/12/2019

Place of Accident:

ECP TOWARDS CHANGI AIRPORT (BEFORE MARINE PARADE EXIT 10B)

Involving Vehicle No:

SLL4056H,SKH8970A

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 [X] 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-19-211717

Date of Request:

24/12/2019

Your Ref No:

WALK IN GOH HUA LOON

DYNAMIC AUTOWORK PTE. LTD

8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT

SINGAPORE 415875

Dear Sir/Madam,

Date of Accident:

19/12/2019

Vehicle No:

SLK8456R

Place of Accident:

ECP Twds Changi Airport bfr Marine Parade exit 10b

Involving Vehicle No:

SKH8970A

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\$)
SKH8970A	ECP Twds Changi Airport bfr Marine Parade exit 10b	14.00	1	13.08
GST Amount				0.92
Total Amount Due	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:

[] GIRO [X] 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-19-211716

Date of Request:

24/12/2019

Your Ref No:

WALK IN GOH HUA LOON

DYNAMIC AUTOWORK PTE. LTD

8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT

SINGAPORE 415875

Dear Sir/Madam.

Date of Accident:

19/12/2019

Vehicle No:

SLK8456R

Place of Accident:

ECP Twds Changi Airport bfr Marine Parade exit 10b

Involving Vehicle No:

SLL4056H

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\$)
SLL4056H	ECP Twds Changi Airport bfr Marine Parade exit 10b	14.00	1	13.08
GST Amount				0.92
Total Amount Due	e (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:

[] GIRO [X] Cash [] Cheque

MBHH19167250-01 / Ajax Mars Pte Ltd - Bukit Merah ENTRY DATE & TiME: 19/12/2019 23:38 SUBMITTEO BY: Sabitra Shangri Kanthirajan

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 aforesaid.

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RIGHT SHOW	Constitutes	Malau 3	Same and the	40 B 60 B u	o Status S	ASS ALL	and the last	500000000	ali di

 Date Of Report
 19/12/2019 23:38

 Date Of Accident
 19/12/2019 16:30

Exact Location Of Accident ECP TWDS CHANGI AIRPORT BFR MARINE PARADE EXIT 10B

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLK8456R

Insured/Policyholder

Name Of Registered Owner NG ENG SAN NRIC No SXXXX579B

 Email Address
 EGPLSIN@GMAIL.COM

 Mobile Phone No
 (LOCAL) +65-96805055

 Alternative Phone No
 OFFICE-96805055

Vehicle Particulars

Manufacturer RENAULT

Model MEGANE SEDAN 1.5 DCI AT EU6

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE

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 AVIVA LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 10721156

Cover Note Number

Driver

Name of Driver NG ENG SAN
NRIC No SXXXX579B
Date Of Birth 24/10/1964
Occupation INDOOR
Date Of Driving Pass 28/04/1987

Driving Experience 32 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96805055

Fax Number

Contact Number OFFICE-96805055

EMail Address EGPLSIN@GMAIL.COM

Address

Postcode

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

CHAIN COLLISION Type Of Accident

NIL

3

NO

YES

NO

NO

NO

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

NO Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

On 19.12,2019 at about 16:30 hours at along ECP Towards Changi Airport (Before Marine Parade Exit 10B). I was travelling on the lane one and when my front vehicle slow down and stop Hence I follow suit. Suddenly, I heard a loud bang from behind and I bang the front vehicle SLL4056H. When I alighted I realized it was vehicle SKH8970A who hit my rear portion of my vehicle SLK8456R causing damages to my front & rear portion of my vehicle. It was a chain collision of total 3 vehicle involved. I felt some pain on my body, may consult doctor If needed.

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKH8970A

Vehicle Make/Model/Colour MERCEDES BENZ / A170

Details Of Properties NA

Vehicle Category PRIVATE CAR

Name of Driver ONG JACK SEN(WANG JIESENG)

NRIC/Passport Number SXXXX526H Contact Number 96828233

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SLL4056H

SEAT / TOLEDO 1.4 TDI 90 STYLE 7AT

NA

PRIVATE CAR

TAN CHEE WEE (CHEN ZHIWEI)

91010307

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.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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:

19-12-2019

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
VOO CHEON YEE

Sketch Plan #2

SKITCH PLAN		
A: Slæsayar B: Sæhbyyada C: Slædsseh Describe circumstanci		Along ECP Tonads Clagi Misport before Marine Porode Exit 108.
REFER TO ATTACHED STA	TEMENT.	
DECLARATION /We declare the foregoing partie COMMON	MARIOTIVOS MARIOS (INDIA) MARIOTIVOS	VERIFY BY AJAX MARS (ARC) REPORTING OFFICER VOO CHEON YEE
lekcybolder's lignature late & Titre:	(I diver a ser the pelcyholom)	Reporting Centre Personnel's Signature Name:

Sketch Plan #3 Pg. 1

ACCIDENT STATEMENT (2000 characters)

Marine Parade Exit 10B). I was travelling slow down and stop Hance I follow suit I bang the front vehicle SLL4056H. When who hit my rear portion of my vehicle S	t along ECP Towards Changi Airport (Before ng on the lane one and when my front vehicle t. Suddenly, I heard a loud bang from behind and len I alighted I realised it was vehicle SKH8970A SLK8456R causing damages to my front & rear ollision of total 3 vehicle involved. I felt some pain ded.
Taxi Voucher No.:	
DECLARATION I/We declare that the above particulars & information prov VERIFIED BY AJAX MARS REPORTING OFFICER - JOHNNY VOO CHEON YEE	ided above are true in every aspect
MARS Officer	
Job Complete Date/Time	Registered Owner or Driver's Signature Date/Time:
19 December 2019 at 9:37 PM	19 December 2019 at 9:37 PM

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1656579B





NG ENG SAN

美荣山 Race CHINESE Date of Birth Sex 24-10-1964 M Country of Birth SINGAPORE

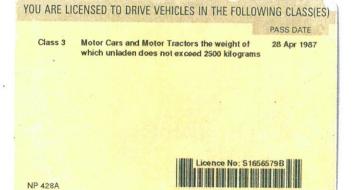
S14574792

SLK8456R Own Schriver





SLK8456 R Owar & driver





Avila ttd: 4 Shentan Way, #01-01 SGX Centre 2, Singapore 068807, Tel: 65: 6827,9966, www.aviva.com.sq

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION

(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

CERTIFICATE NUMBER, 10721156

1) VEHICLE REGISTRATION NO. CHASSIS NO.

SLK8456R

ENGINE NO.

VF1RFB00056020401 K9KG657R001834

2) NAME OF INSURED

FAMILY NAME GIVEN NAME

NG ENG SAN

3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE PURPOSE OF THE ACT

31-Jan-2019 00:00hours

4) DATE OF EXPIRY OF INSURANCE

30-Jan-2020 23:59hours

5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE

You and any driver

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 any reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been canceled at the time of accident or loss.

Please refer to the policy document for full terms and conditions.

6) LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

NAMED DRIVER

7) FINANCE COMPANY

HL BANK

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), or any amendment, act or acts passed in substitution thereof.

Issued in Singapore: 15-Jan-2019 at 17:29hours

Aviva Ltd.

IMPORTANT NOTE:

- If you want to cancel your policy at any time, you will need to return the certificate to us.
- You must report all accidents to Us within 24 hours of the occurrence or by the next working day at our accident
 reporting centre regardless of whether you intend to claim on your own policy or not, or whether your car is
 damaged or not. Should you fail to do so, Your NCD could be affected and your claim may be prejudiced.

For the list of our accident reporting centres, please visit https://www.aviva.com.sg/CarRepairers. Alternatively, you may call us at 6333 2222 for assistance (including assistance on windscreen damage).

Nishit Majmudar Chief Executive Officer

In case of vehicle breakdown, accident or windscreen damage, please call 6333 2222 (24 hours) immediately.