

VISION 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. : 201500371E

Letter of Demand

Re : Accident involving my vehicle no. SLJ8355D and vehicle no. SKB3769E on 21/12/19 at 09:05 HRS PM/AM at/along Grange Road towards Paterson Road

We refer to the above matter.

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

Vehicle Repair cost / Excess	\$ 8025.00
Vehicle Rental Fee for <u>11</u> days @ \$ <u>192.60</u> per day	\$ 2118.60
Loss of use for <u>—</u> days @ \$ <u>—</u> per day	\$ —
Police search fee/police report fee/LTA search fees	\$ 7.45
Others	\$ —
Total :	\$ 10151.05

Yours faithfully,

ABBY



ABBY

HP : 9856 4815

E-mail: visionautowork@gmail.com

Authorisation To Act

I, Chiew Siang Wan ("the third party claimant") of
Blk 740 Woodlands Circle, #06-405, SC730740
(address), owner of SLJ8355D (vehicle no.) hereby
authorise Vision AutoWork Pte Ltd
("the workshop") to act for me with respect to my claim for repair
costs and/or rental and/or loss of use ("claim") for my vehicle
no. SLJ8355D that was damaged pursuant to the accident which
occurred on 21/12/19 (date) at/along Slip road of Grange
Road towards Paterson Road (location) involving
vehicle no/s SLB 3769E
("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a manner that they deem it fit and the workshop is further authorised to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further authorise the workshop to execute and/or sign any documents/discharge vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident concerned.

Dated this 21 day of 12 (month) 20 19 (year)



Wan

Signed by "the third party claimant"

N



Signed by "the workshop"

VISION 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. : 201500371E

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SLJ8355D and SCB3765E on 21/12/19
at/along Slip road of Grange Road towards Paterson Road

1. I/We, the Owner of motor vehicle no. SLJ8355D hereby instruct and authorise Vision Autowork Pte Ltd ("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 the repair to my/our said vehicle.
2. 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.
10. 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 21 day of 12 2019

Signature of vehicle owner Wan

Name - Chiew Siang Wen

IC/UEN No : S13669271
(Company stamp, if applicable)

Address : Blk 740 Woodlands Circle
#06-405, S(730740)

Tel : 9669 6469



Witnessed by :

Abby



"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

AUTHORIZATION TO ACT
(AIG Asia Pacific - Express Third Party Claim)

I, Chew Siang Wan ("the third party claimant")
of BK 740 Woodlands Circle, #06-405, S(730740) (address),
owner of SLJ 8355D (vehicle no.) hereby authorize
Vision Autowork Pte Ltd

("the workshop") to act for me with respect to my claim for
repair costs and/or rental and/or loss of use ("claim") for my
vehicle no. SLJ 8355D that was damaged pursuant to the
accident which occurred on 21/12/19 (date) along Slip Road
of Grange Road towards Paterson Road (location)
involving vehicle no/s SKB 3769 E
("the accident").

I further authorize the workshop to settle my above mentioned
claim in a manner that they deem fit and the workshop is further
authorized to receive payment further to settlement of my claim
with payment cheque/s being made in favour of the workshop.

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

Dated this 21 day of 12 (month) 20 19 (year)

Wan
Signed by "the third party claimant"

N
Signed by "the workshop"
(with chop)



VISION 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.: 201500371E

Email : visionautowork@gmail.com

TAX INVOICE

INVOICE No **TI V17102**

Date : 06.02.20

Vehicle Number : **SLJ8355D**

Bill To:

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY
#07-12 AIG BUILDING
SINGAPORE 079120

	DESCRIPTION	AMOUNT
	Carry out lump sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 7,500.00
Sub Total		\$ 7,500.00
Add GST 7%		\$ 525.00
Total Amount		\$ 8,025.00

PAYMENT BY CHEQUE SHOULD BE CROSSED AND MADE PAYABLE TO
' **VISION AUTOWORK PTE.LTD.** '

PLEASE INDICATE THE INVOICE NO. ON THE REVERSE SIDE.

Issued By :



Co's stamp & Authorised Signature

TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO.
CHEW SIONG WAN BLK 740 WOODLANDS CIRCLE #06-405 SINGAPORE 730740

DATE	INVOICE NO.
14-Jan-2020	A 40960

	VHA NO.	DUE DATE	VEH NO.
	A 40960	14-Jan-2020	SJH 5527 D
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 23 DECEMBER 2019 TO 03 JANUARY 2020 YOUR REF: SLJ 8355 D	11	180.00	1,980.00
GST @ 7%			\$138.60
TOTAL			\$2,118.60

All cheques must be made payable to BKW Rent A Car Pte Ltd.
Please write the vehicle and invoice number on the reserve.

VEHICLE HIRING AGREEMENT

Workshop: Vision

HIRER'S PARTICULARS

Name (as in I/C) CHEW SIONG WAN
 NRIC/Passport No: [REDACTED] Date of Birth: 9/9/1959
 Address: BLK 740 WOODLANDS CIRCLE Age: [REDACTED]
#06-405 S(730740)

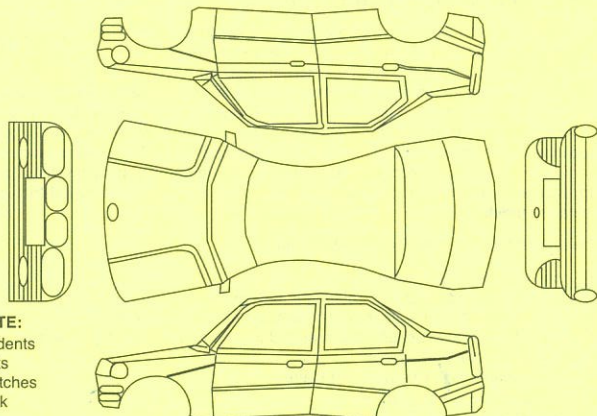
Name & Address of Employer

Occupation [REDACTED] Driving Exp: [REDACTED]
 Driving Licence No: [REDACTED] Passed Date: [REDACTED]
 D/L Type: Local/Int'l/Others: [REDACTED]

DRIVER'S PARTICULARS

Name (as in I/C) CHEW SIONG KIAT
 NRIC/Passport No: [REDACTED] Date of Birth: 8/2/1951
 Address: BLK 588 WOODLANDS DRIVE Age: [REDACTED]
10 # 10-02 S(730588)

Occupation [REDACTED] Driving Exp: [REDACTED] Yrs [REDACTED]
 Driving Licence No: [REDACTED] Passed / Expiry Date: 10/5/1972
 D/L Type: Local/Int'l/Others: [REDACTED] Contact No: [REDACTED]



I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 65 years 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 Authorised Driver.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- 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.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- 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 operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

- legal costs on a 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 be paid immediately in the event of an accident. The owner reserve the right not to replace a replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- 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.
- The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.
- In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. 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.
- The hirer/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.
- All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
- I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Hirer's Own Vehicle No: <u>SLJ9355D</u>		Replace Veh No:	
Loan Vehicle No: <u>5JN 552710</u>		VR No:	
Make & Model: <u>14-STREAM</u>		Auto/Manual Group:	
CHARGES : \$ cts			
Daily	<u>11</u> day @ \$ <u>180</u>	Per day	<u>\$1980</u>
Weekly/Monthly	week @ \$	Per week/Monthly	
Others			
CDW/PAI	@ \$	Per day/Monthly	
Delivery/Collection Svc			
		GST <u>7%</u>	<u>\$138</u>
		(A) SUB-TOTAL	<u>\$2118</u>
Petrol Level & Surcharge	OUT	E	1/4
	IN		
First <u> </u> km FREE per day		GST	
Excess mileage is chargeable at <u> </u> cents per km		TOTAL CHARGES	

NON WAIVER EXCESS (Subject to GST): \$ 2500 / \$ 2500

ACCESSORIES CHECK

- ☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge
☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre

Hirer's Signature : [Signature] Additional Driver's Signature : [Signature]

SINGAPORE Use Only

Date Out	Time Out	Mileage	Check By	Remarks
<u>23/12/19</u>	<u>1415</u>	<u>225760</u>	<u>NIK</u>	

Hirer's/Driver Signature

Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"

Date In	Time In	Mileage	Check By	Remarks
<u>3/1/2020</u>	<u>1155Am</u>	<u>226694</u>	<u>JOHN</u>	<u>collected 3/1/2020</u>

Hirer's/Driver Signature



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

Print Date/Time : 21 Dec 2019 / 11:24:51

Receipt Date/Time : 21 Dec 2019 / 11:24:51

Tax Invoice/Receipt

Receipt No. : ITNET-00000-191221-000728

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SKB3769E

As at 21 Dec 2019/09:05:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1	Insurance Enquiry - SKB3769E Enquiry Fee 20191221112401672319	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

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.

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	21/12/2019 14:01
Date Of Accident	21/12/2019 09:05
Exact Location Of Accident	SLIP ROAD OF GRANGE ROAD TWRD PATERSON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ8355D
Insured/Policyholder	
Name Of Registered Owner	CHEW SIONG WAN
NRIC No	SXXXX927I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96696469
Alternative Phone No	OTHERS-96696469

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH 1.8 A
Exact Purpose for which vehicle was being used at time of accident	WORK
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5110150658
Cover Note Number	

Driver

Name of Driver	CHEW SIONG KIAT
NRIC No	SXXXX614C
Date Of Birth	08/02/1951
Occupation	INDOOR
Date Of Driving Pass	10/05/1972
Driving Experience	47 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90901900
Fax Number	
Contact Number	OTHERS-90901900
EMail Address	NOEMAIL

Address	BLK 588 WOODLANDS DRIVE 16 #10-02
Postcode	730588
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : GRAB PASSENGER GENDER: : MALE
Passenger 2	NAME: : GRAB PASSENGER GENDER: : MALE

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

REFER ATTACHED;

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER/DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKB3769E
Vehicle Make/Model/Colour	MITSUBISHI / OUTLANDER 2.0 CVT SUNROOF
Details Of Properties	
Vehicle Category	PRIVATE CAR
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

CHEW SIONG KIAT

Approximate Age

Injuries Sustain

BODY PAIN

Injured person in which vehicle?

SLJ8355D

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

Address

BLK 588 WOODLANDS DRIVE 16 #10-02

Postcode

730588

Accident Sketch Plan

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 willful 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,
 - (ii) regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (iii) 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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: yackb@singnet.com.sg

Accident Sketch Plan

A: 52183553
 B: 5455002
 Dip/ord/10/11
 6/12/11
 10/12/11
 10/12/11
 10/12/11

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached

DECLARATION

(We declare the foregoing particulars are true in every respect)

Policyholder's Signature
 Date & Time

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

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415935

Tel: 67416697 Fax: 67492305
 Email: vackb@sinanet.com.sg

Accident Sketch Plan

On 21.12.19 at about 09:05 hours at slip road of Grange Road towards Paterson Road.

While I was stopping at the above slip road waiting for oncoming traffic to clear, suddenly I heard a loud bang from behind. When I alighted and realized it was vehicle (B) who hit my rear portion of my vehicle (A) causing damages to my vehicle. I wish to state that I have two passengers inside the vehicle.

Vehicle (A) : SLJ8355D

Vehicle (B) : SKB3769E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S13669271



Name

CHEW SIONG WAN

周 祥 远

Race

CHINESE

Date of birth

09-09-1959

Sex

M

S13669271

Country of birth

SINGAPORE

SLJ8355D

Qahr

4 6 7 5 4 8 4



NRIC No. S13669271



Date of issue

13-01-2011

Address

APT BLK 740 WOODLANDS CIRCLE
#06-405
SINGAPORE 730740

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0146614C



Name

CHEW SIONG KIAT

Race

CHINESE

Date of birth

08-02-1951

Sex

M

Country of birth

SINGAPORE

SLJ 8355D

driver



4364249



NRIC No. S0146614C

Date of issue

16-02-2009

Address

APT BLK 588 WOODLANDS DRIVE 16
#10-02
SINGAPORE 730588

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S0146614C
Name: CHEW SIONG KIAT

Birth Date: 08 Feb 1951
Issue Date: 16 Feb 2009

001707120E



SLJ8355D
driver

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

		PASS DATE
Class 3	Motor cars \leq 3000 kg with \leq 7 passengers, exclusive of the driver; and motor tractors/vehicles \leq 2500 kg	10 May 1972

S0146614C

S / No. 9000235920

NP 428A

Licence No: S0146614C



SL 08355D
driver

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	22/11/2018



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: 5110150658

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : SLJ8355D
Chassis Number : ZNE100336545
2. Name of Policyholder : CHEW SIONG WAN
3. Effective Date of Insurance : 14 Jun 2019
4. Expiry Date of Insurance : 02 Jul 2020
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) 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)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: CHEW SIONG WAN
NAMED DRIVER (1)	: CHEW SIONG KIAT
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: PANG'S MOTOR TRADING 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 : I INSURANCE AGENCY (00000572538)
Date of Issue : 13 Jun 2019 16:50 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive