Our ref: Your ref:	SMP 7068 X	
Date:	- 3 FEB 2020	Direct Settlement
То:	ching Taiping	
Attn:	Motor Claims Department	
Re: Accid	dent Involving Motor Vehicle Nos. SMP7068X long WOODLANDS CROSSING TWDS SINGAPOREM (	& SMN7432M On 12/12/2019 @ 16:35
I am the ow insured vehic	oner of vehicle no. SMP7068X that was in the cle no. SMN7432M of the above accident.	nvolved in an accident with your
As the accid from you for	ent was caused by your insured negligent/incons the following: -	iderate driving, thus I am claiming
1. Cost of Re 2. Loss of Us 3. LTA/GIA 4. GIA Repo 5. Others	se / Rental 4 days @ \$ 171. 10 per day) Search Fee	\$ 4363.96 \$ 664.50 \$
J. Onleis	Ţ	otal: \$ 5.048.76
solicitor to representativ 67714420 (M	e you fourteen (14) days to comply with the above commence legal action against you. If you have of CYCLE & CARRIAGE INDUSTRIE (VIS Kerlyn Ong) / 67714304 (Ms Amanda Ang) we full authority to CYCLE & CARRIAGE IN ive to negotiate/comprise settlement of the abo	ve any queries, please contact the S PTE LTD at Telephone No:  IDUSTRIES PTE LTD and their
Your co-ope forward to h	eration and immediate attention to the above is earing from you soon.	greatly appreciated. I hereby look
Yours faithful Name & Sign		
Address: Cc: E-mail: Fax No.	C/o. 188 Pandan Loop Singapore 128378 Ms Kerlyn Ong/ Ms Amanda Ang <a href="mailto:kerlyn.ong@cyclecarriage.com.sg">kerlyn.ong@cyclecarriage.com.sg</a> / amanda.ang(67795383	@cyclecarriage.com.sg



# TAX INVOICE

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

Invoice Name & Address	Owner Name & Vehicle Info			
CHANG TAXOTHE THEFIDANCE (C) DIE	Cust No/Name	/Lim Hong Ming		
CHINA TAIPING INSURANCE (S) PTE LTD	Reg No/Reg Date	SMP7068X / 28/02/2014		
ATTN: MOTOR CLAIM DEPARTMENT	Date In/Mileage	08/01/2020/ 73914		
3 ANSON ROAD #16-00 SPRINGLEAF TOWER	Chassis No	WDD2120362A942649		
SINGAPORE 079909	Engine No	27492030132417		
Contact No 62222366	Make/Model	MB/E 250 2.0 CGI SEDAN (W212		
	Colour/Trim	029 988 Diamond Sil/ 042 258 Basalt Grey		
Assembly Town Bulletin Device Com-	24:00:00:00:00:00:00:00:00:00:00:00:00:00	TAILOR ATC. ACCOUNTS TO A CONTRACT OF A CONT		

	Terms	Date/Time Prin	ted	CSE	Operator		WIP No	Invoice/Cred	it Note No
WC000668	Credit	15/01/2020/	09:28	KO	301 / Kerlyn Ong		39710	28161607	
-000	.0=	Descriptio	n of Goods	/ Services		Qty	Unit Price St	5	Amount S
	(ie)		- 9 - 9			30,400		1	
Customer	Request								(9.±) 45.0√735 (e)
M BPNSUN									F.O.C
		: GA510830/1							
DRIVE IN	/EXCESS	: 13/12/2019	// SMN7	432M - CHI	NA				
DATE IN/	DATE SURVE	Y: 08/01/2020	1215 //	LKK - RAS	UL				
DIRECT SI	ETTLEMENT	: 27/12/20	19 1333	// CHINA -	BOON SEN			4	
A BPILAB		El alberto and an analysis		<b>6</b> 00					960.00
DISASSEM	BLE AND RE	PLACE ATTACHE	D DAMAGE	D PARTS &	REFINISH.				
A BPIRES									600.0
RESPRAY !	REAR BUMPE	R							
A BPILAB								0.10	380.00
		OSTIC TO CHEC NDARD, NETT	K ON CON	TROL UNIT	RESET MEMORY TO			450H504	
A BPILAB								1	120.00
CHECK REA	R LIGHTIN	G SYSTEM AND	WATER TE	ST FOR ANY	LEAKAGE. NETT				
X REAR BUMP			According to the second	The state of the s	CONTRACTOR OF THE CONTRACTOR O	1.00	1634.56		1634.50
		ROME MOULDING				1.00	134.36		134.30
		ROME MOULDING				1.00	166.46		166.46
		FOR BUMPER				1.00	50.89		50.89
COLD RESIDES TO SECURE		FOR BUMPER				1.00	50.89	1	50.89

## Guarantee Your Warranty, Maintain with Cycle & Carriage!

Parts	2,037.16	Nett	4,097.16
Labour	2,060.00	7% GST on 4097.16	286.80
Standard Menu	0.00		
Specialist Job	0.00	Total Payable	4,383.96
Diagnostics Job	0.00	Paid	0.00
Sundry/Others	0.00	Total Due	4,383.96
Total(w/o GST)	4.097.16		ATES

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

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

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

# **CHAN'S & SONS ENTERPRISE**

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



TAX INVOICE

LIM HONG MING

INVOICE

AR2001-0101

DATE

13/01/2020

TERMS

C.O.D

STAFF ID

ELAINE

640.00

AGREEMENT NO.

HA202001-0062

ATTN: ACCOUNTS PAYABLE

DESCRIPTION

AMOUNT (SGD)

Vehicle Reg No

: SMD8133Y

Make / Model

: SUBARU XV 2.0 AUTO

Rental Dates

: Rental Billing From 07/01/2020 To 10/01/2020 (incl)

Period

: 4 days

Rental Rate

: S\$ 171.20 Per Day

(Including GST)

Reference No

: SMP7068X

AMOUNT: S\$

SIX HUNDRED EIGHTY-FOUR DOLLARS AND CENT

NON-TAXABLE VALUE:

0.00 640.00

EIGHTY ONLY

TAXABLE VALUE : GST 7% :

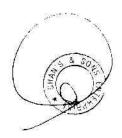
44.80

TOTAL SS

684/80

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

. . . .



For Official USe Only

-801

Payment Date :		F / Amt
CS / CC /CH	i .	
CS / CC /CH	4	

#### 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.

	ACCIDENT STATEMENT
Date Of Report	13/12/2019 11:46
Date Of Accident	12/12/2019 16:35
Exact Location Of Accident	WOODLANDS CROSSING TWDS SINGAPORE CUSTOM
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMP7068X
Insured/Policyholder	
Name Of Registered Owner	LIM HONG MING
NRIC No	S1664778J
Email Address	NOEMAIL
Mobile Phone Na	(LOCAL) +65-91011016
Alternative Phone No	OFFICE-91011016

Vehicle Particulars

MERCEDES-BENZ Manufacturer

E250 Model

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken THIRD PARTY PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

GA510830/1 Policy Number

Cover Note Number

Driver

LIM HONG MING Name of Driver

NRIC No S1664778J 11/11/1964 Date Of Birth INDOOR Occupation 23/06/1992 Date Of Driving Pass

27 YEARS AND 5 MONTHS **Driving Experience** 

Gender MALE

(LOCAL) +65-91011016 Mobile Number

Fax Number

OFFICE-91011016 Contact Number

NOEMAIL **EMail Address** 

56 LAKESIDE DRIVE #13-29 Address

648318 Postcode

Was driver an employee of the Insured's Company

**OWNER** If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions Road Surface DRY

Other Information

NO Was any foreign vehicle involved in this accident?

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

NO ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

2 Number of Passengers (Including Driver)

Passenger 1 NAME: : CHICK YUET FUNG

> GENDER: : FEMALE

> > x615

**Details of Police Action** 

YES Was the accident reported to the police?

If Yes, Please state which Police Station

JURONG WEST NEIGHBOURHOOD POLICE CENTRE Police Station Name

NO

2

NO

ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-2689999 - FAX NO: 62672438

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT NO: T/20191212/2183, JURONG WEST NPC.

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

SMN7432M

Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver CHNG CHUNG HWEE

S1184659I NRIC/Passport Number 83336118 Contact Number

Address

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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:

- 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")
- 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
- my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including (c) their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- 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.
- the information so collected under (d) above may be shared / disclosed: (e)
  - (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 13/12/2019 1023

Driver's Signature

(If driver is not the policyholder)

Date & Time

Kerlyn Ong Kai Li

DID: 6771 4420 HP: 9186 5113

Email: kerlyn.ong@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd

Custom Reporting Conneil Pandan Loop

Name: KERLYN NRIC/FIN No.:

DESCRIBE	CIRCUMSTA	NCES OF	THE AC	CIDENT
----------	-----------	---------	--------	--------

REFER TO POLICE REPORT NO.T/20191212/2183	

# DECLARATION

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

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

(Please contact your insurance company for any further details)

Policyholder's Signature

Date & Time 13/12/2019 1023

Driver's Signature

(If driver is not the policyholder)

Date & Time

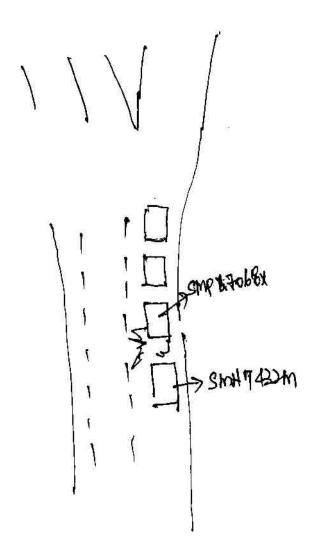
Keriya Ong Kai Li

DID: 6771 4420 HP: 9186 5113 Email ; kerlyn.ong@cyclecarriage.com.sg Cycle & Carriage Industries Pte Ltd

Customer Service Centre - Pandan Loop
Reporting Centre Personnel's

Name: KERLYN NRIC/FIN No.:

( Woodland) Singapore Cheforn







Police Station Of Origin: Jurong West N.P.C

700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

1 of 3 Report No. T/20191212/2183

# REPORT OF A TRAFFIC ACCIDENT

	ne Report N 019 19:42	/lade:	Vide Report No.:	Station Diary No.: 177
Informa	nik Fank	ufars Public P		
	f Informant: NG MING		Address: 56 LAKESIDE DRIVE #13-29	SINGAPORE 648318
	/ ID No.: O / S16647	78J	Contact No.: Home/Office:	Mobile: 91011016
National SINGAF	ity: PORE CITIZ	EN	Email:	· · · · · · · · · · · · · · · · · · ·
Sex: Male	Age: 55	Date of Birth: 11/11/1964	Type of Informant: Driver	
Race: Chinese		3.0	Language: English	Institution / School Name:
Occupation: Real estate agent			Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	5		Date/Time of Accident: 12/12/2019 16:35	Type of Location: Straight Road	
Location: Along Road 1 Woodlands C towards Sings					
Weather: Cloudy		Road Surface: Dry		Road Speed Limit:	
		Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collis Between Mov	ion: ing Vehicles - Head 1	o Rear	3	Anyone conveyed by ambulance:	

Details of a Vehicle No.						The second
SMN7432M	Car	SUBARU			No Damage	1
SMP7068X	Car	MERCEDES BENZ	E250 SEDAN (R18)	Silver	Seriously Damaged	1

SMP7068X	AXA INSURANCE SINGAPORE PTE LTD	GA510830	06/11/2019	05/11/2020



T/20191212/2183

2 of 3

Report No. T/20191212/2183

Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

CONTINUATION OF REPORT

Any Pedestrian Involved: No  No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Miero (1985)			***		
Name	LIM HONG MING		ID No.		S1664778J
Related Vehicle	NIL		Contact No.		91011016
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date Disc				
No. of Days gran	ted Medical Leave NIL	Degree of	f Injury	NIL	
Danology (Egyptomic				1,074	
Name	Chng Chung Hwee		ID No.		S1184659I
Related Vehicle	NIL		Contact No.		83336118
Hospital/Clinic	NIL	***************************************	Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL		
No of Dave grap	ted Medical Leave NIL	Degree o	f Injury	NIL	

# Brief Details.

On 12/12/2019 at about 1635hrs I was driving my vehicle bearing the plate number SMP7068X and I was station as there are vehicle in front of me, suddenly I felt an impact from my rear side of my vehicle and my body was shifted forward and it hit onto my steering wheel. When I alighted to check on my vehicle I then notice a vehicle bearing the plate number SMN7432M had collided onto my vehicle. I have discovered that my bumper has cracks and my rear left bumper is not a line. I am lodging this report for insurance claim purposes.





3 of 3

Report No. T/20191212/2183

Police Station Of Origin: Jurong West N.P.C

700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999 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: J / SC2 LINUS LEOK YI QUAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 12/12/2019 19:42
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp SN I	26



**AXA insurance Pte Ltd** 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 customer.care@axa.com.sg www.axa.com.sg

# **Certificate of Insurance**

account number 04066

-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)

# Policy details to the same that the same to

Policyholder name

LIM HONG MING

Certificate number

GA510830 / 1

Cover Plan name Comprehensive Essential

Chassis number Engine number

WDD2120362A942649 27492030132417

NCD applicable Vehicle registration number 50%

**SMP7068X** 

Period of Insurance

from 06/11/2019 to 05/11/2020 (both dates inclusive)

Finance loan company

#### es of persons entitled to driv Persons or class

(b) Any person who is driving on the Policyholder's order or with their 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.

## Limitation as to use 2

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on. a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

\* 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.

**FYCESS** 

Basic Own Damage Excess

Windscreen Excess

CE HE SAME

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- 2. S\$500 for declared Young and Inexperienced Driver
- 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops.

## Additional clauses & endorsements to your policy

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

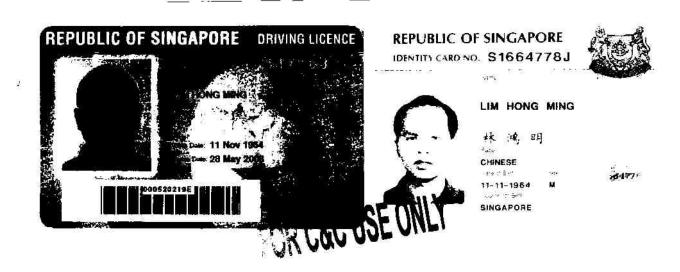
#### AXA Insurance Pte Ltd

Authorised signature

#### Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company, if the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate. endorsement etc.



1

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# Kerlyn Ong

Kerlyn Ong

Chong Boon Sen <boonsen.chong@sg.cntaiping.com> From: Friday, 27 December, 2019 1:33 PM Sent: Kerlyn Ong To: RE: OUR REF: SNM19D205969/SMN7432M/CBS - Accid involving motor vehicle nos. Subject: SMP7068X & SMN7432M along WOODLANDS CROSSING TWDS SINGAPORE CUSTOM, DOA 12/12/19 This email was sent from outside of your organisation Without Prejudice Dear Sir, We are prepared to direct settle subject to surveyor consistencies Chong Boon Sen Claims Executive Department China Taiping Insurance (Singapore) Pte. Ltd. 3 Anson Road #16-00 Springleaf Tower Singapore 079909 DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033 W: https://apc01.safelinks.protection.outlook.com/?url=www.sg.cntaiping.com&data=01%7C01%7C%7C da6356bb640e4fb94b6a08d78a8e4a15%7C8b768fcc12ca4f4c9fde19e8afb863c6%7C0&sdata=%2BGj v'/vYHEBKXttet5unBA9vqBLquQ924Y%2F4%2Bxl3Nyz0%3D&reserved=0 | FB: https://apc01.safelinks.protection.outlook.com/?url=www.facebook.com%2Fchinataipingsg%2F&dat a=01%7C01%7C%7Cda6356bb640e4fb94b6a08d78a8e4a15%7C8b768fcc12ca4f4c9fde19e8afb863c6%7C0 &sdata=uThS9VyUYBxoGYjeeJNOp4xQkFdsp%2FEUhwerq7Um9jo%3D&reserved=0 | WeChat: 太平狮城 Taiping SG 3 Anson Road #16-00 Springleaf Tower Singapore 079909 DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033 ----Original Message----From: Kerlyn Ong [mailto:kerlyn.ong@cyclecarriage.com.sg] Sent: Friday, December 27, 2019 1:31 PM To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com> Subject: RE: OUR REF: SNM19D205969/SMN7432M/CBS - Accid involving motor vehicle nos. SMP7068X & SMN7432M along WOODLANDS CROSSING TWDS SINGAPORE CUSTOM, DOA 12/12/19 Cear Boon Sen, Please advise the liability? Your Sincerely,