

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02

SINGAPORE 486443

TEL:65446671 FAX:62141511

CO. REG:200707743D GST REG:200707743D

Our Ref: SHC6856Y/VC

You Ref: SH7706J

WITHOUT PREJUDICE

28 February 2020

(AR Registered)

Attn: The Motor Claims Department

MS First Capital Insurance Limited

36 Robinson Road

#16-01

City House

Singapore 068877

Dear Sir/Madam

ACCIDENT INVOLVING SHC6856Y AND SH7706J ALONG TANAH MERAH COAST ROAD ON 27.01.2020

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: **SHC6856Y**, to claim against the party/parties responsible for the damages arising from the above-mentioned accident.

Our records show that you are the insurers of vehicle number: **SHC6856Y** at the material time of the accident with the driver of our client's vehicle, **Mr. Lui Chung Sin**.

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: **SHC6856Y**, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of repairs	\$ 5082.50 (Incl. GST)
(2) Loss of Rental – 11 Days @ \$99.51 per day	\$ 1094.61
(3) Loss of Income – 11 Days @ \$100.00 per day	\$ 1100.00
(4) Towing Fee	\$ 50.00
	<u>\$ 7327.11</u>

A copy of each of the following supporting documents is enclosed:

- (1) GIA report, Police Report & sketch plan of **SHC6856Y**
- (2) Driver's I/C and Driving License
- (3) Final repair bill
- (4) Vehicle Registration card, Certificate of Insurance, Certification Letter
- (5) Check In/Out Voucher
- (6) Towing Slip
- (6) Scene video (when require)

PREMIER AUTOMOTIVE SERVICES PTE LTD

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SINGAPORE 486443

TEL:65446671 FAX:62141511

CO. REG:200707743D GST REG:200707743D

Our Ref: **SHC6856Y/VC**

We would appreciate if you could look into the subject matter and let us have your favorable offer within 14 days. If you are agreeable to the settlement of the above said claims, please forward us your discharge voucher as for our client's signature and payment made to "Premier Automotive Services Pte Ltd".

Please note that if we do not hear from you within the stipulated 14 days, we will have no alternative but to appoint our solicitor to act on our behalf to commence proceedings against you without further notice to you.

Yours faithfully,



Claims Department – Vincent Chua

Email: vincent.chua@premierauto.com.sg

DID: 65446689

NB: We encourage all parties to liaise with us via email to expedite all matters

PS: Please quote our reference no when replying

c.c. Client – Premier Taxis Pte Ltd





PREMIER AUTOMOTIVE SERVICES PTE LTD
OFFICE: 23 Changi South Avenue 2 #01-02 S(486443)
TEL: 65436676 / 65436689 FAX: 62141511
CO. REG NO.: 200707743D GST. REG. NO.: 200707743D

PREMIER TAXIS PTE LTD
23 CHANGI SOUTH AVENUE 2 #03-02
SINGAPORE 486443

TAX INVOICE

DATE 22-Feb-2020
PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	AMOUNT
	FINAL REPAIR BILL FOR KIA OPTIMA REGN NO: SHC6856Y			\$ 4,750.00
TOTAL LUMP SUM REPAIR COSTS AS RECOMMENDED BY SURVEYOR				\$ 4,750.00
GST @ 7%				\$ 332.50
GRAND TOTAL				\$ 5,082.50



for Premier Automotive Services Pte Ltd

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

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	29/01/2020 09:02
Date Of Accident	27/01/2020 06:45
Exact Location Of Accident	TANAH MERAH COAST ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC6856Y
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	2XXXXX975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

Vehicle Particulars

Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS

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 TAXI

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5107202885

Cover Note Number

Driver

Name of Driver	LUI CHUNG SIN
NRIC No	SXXXX601A
Date Of Birth	01/05/1982
Occupation	OUTDOOR
Date Of Driving Pass	05/05/2003
Driving Experience	16 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81816607
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 96B #08-72 HENDERSON ROAD
Postcode	152096
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	NO
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

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

BOTH VEHICLES - NO PAX *REFER TO ATTACH POLICE REPORT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH7706J
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	VEH. B
Vehicle Category	TAXI
Name of Driver	MR WONG
NRIC/Passport Number	
Contact Number	96669763
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

1

SKETCH PLAN

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature
Date & Time:

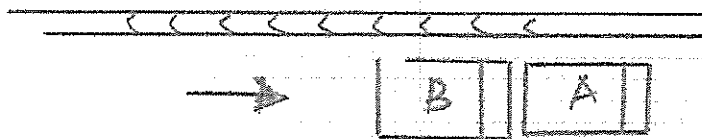


Driver's Signature
(If driver is not the policyholder)
Date & Time:

29 JAN 2020
S 8270601A
SHC 68567

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

SKETCH PLAN



→ Tanah Merah Coast Road.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SHC 6856y

B: SH 7706.J.

* Refer to attach police report.

* Video footage captured.

DECLARATION

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

29 JAN 2020

Policyholder's
Date & Time:



Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Annex D

NOTICE OF REPORTING

This is to confirm that Lui Chung Sin, NRIC: S8270601A, HP: 81816607 has reported to the Police a non-injury traffic accident which occurred outside Tanah Merah Coast Rd towards ECP on 27/01/2020 at about 0640hrs involving the following vehicles:

- 1) SHC6856Y
- 2) SH7706J

On 27/01/2020 at about 0640hrs, I was driving my vehicle SHC6856Y along Tanah Merah Coast Rd and was turning left. I slowed down my vehicle and came to a stop before I on my hazard light. I then noticed that there was a vehicle behind SH7706J approaching myself and was not slowing down. The vehicle then could not stop in time and knocked onto my rear. No visible injuries on all parties. My rear bumper was damaged and could not close my boot. The other vehicle's front bumper was badly damaged and all his air bag was deployed. There is in-car camera install in my vehicle.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT(3)T140415 Nurjannah

Date: 28/01/2020

Time: 1138hrs


S/D Ref:

Police Post/Unit : Bukit Merah West NPC

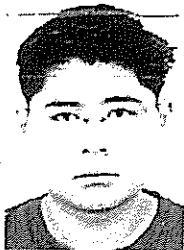
Original - to be issued to informant

Duplicate - to be submitted to Traffic Police

Bukit Merah West
Neighbourhood Police Centre
No 500 Bukit Merah View #01-01
Singapore 159682
Tel : 1800-3779999

 PREMIER TAXIS	HIRER / RELIEF / SUPER RELIEF
VEHICLE NO.	SHC 6856Y
CONTACT NO.	8181 6607
NEW MAILING ADDRESS (if any)	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8270601A



NAME
LUI CHUNG SIN

刘 忠 成

Race
CHINESE
Date of Birth: 01-05-1982 Sex: M
Country of Birth
MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8270601A
Name: LUI CHUNG SIN
Birth Date: 01 May 1982
Issue Date: 05 May 2003

000441086H



3384758



NRIC No: S8270601A

Blood Group: - Date of issue: 15-05-2003

APT 814 986 HENDERSON ROAD #08-72
SINGAPORE 162096
NRIC No: S8270601A Date: 28/04/2019

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE
05 May 2003

NP 428A



Text size + -

Enquire Transaction History**Transaction History Details**

Log Date/Time:	02 Sep 2015 / 08:05:01	Receipt No.:	AACCK001-AX239-150902-000021
Asset Type:	Vehicle	Transaction Amount:	\$69,132.00
Asset ID:	SHC6856Y	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20150902080501867408		

Vehicle No.:	SHC6856Y
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)
Vehicle Attachment 1:	Air-Con (Taxi)
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Scheme:	Taxi (Company)
First Registration Date:	02 Sep 2015
Original Registration Date:	02 Sep 2015
Vehicle Make:	KIA
Vehicle Model:	OPTIMA 1.7(A) DIESEL
Chassis No.:	KNAGM414MF5619948
Engine No.:	D4FDEH313527
Motor No.:	-
Trailer Chassis No.:	-
Propellant:	Diesel
Passenger Capacity:	4
Engine Capacity:	1685
Power Rating:	-
Unladen Weight:	1584
Maximum Laden Weight:	2050
Primary Color:	Silver
Secondary Color:	-
Manufacturing Year:	2015
Open Market Value:	\$21,156.00
Minimum PARF Benefit:	\$12,971.00
PARF Eligibility:	Y
No of Transfer:	0
Effective Ownership Date/Time:	02 Sep 2015 08:05:01
COE No :	2015090201003474G
COE Expiry Date:	01 Sep 2023
COE Bid Category:	-
Actual QP/PQP Paid Amount:	\$47,373.00
Lifespan Expiry Date:	01 Sep 2023

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 : 5107202885-001102

Cover : Third Party

1. Index mark and Registration Number of Vehicle : **SHC6856Y**
Chassis Number : KNAGM414MF5619948
2. Name of Policyholder : PREMIER TAXIS PTE. LTD.
3. Effective Date of Insurance : 01 Feb 2019
4. Expiry Date of Insurance : 31 Jan 2020
5. Persons or Classes of Persons entitled to drive*
 - (a) The Policyholder.
 - (b) Any licensed taxi driver 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 as a Taxi.
 - (b) Use for social domestic and pleasure purposes.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

* 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 I)	: N/A
EXCESS (SECTION II)	: S\$3,500
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : HL SUNTEK INSURANCE BROKERS PTE LTD (00000690672)

Date of Issue : 01 Feb 2019 09:37 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive



06 February 2020

To Whom It May Concern

Dear Sir/Madam

CERTIFICATION LETTER

This letter serves to inform that Lui Chung Sin of NRIC Number S8270601A is a registered driver of SHC6856Y. Lui Chung Sin is paying daily rental rate of \$99.51 (Inclusive of GST).

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to be "Chin Bee Lian", written over a faint circular stamp.

Chin Bee Lian (Ms)

Assistant Vice President

Taxis Administration

Prepared By: Hasnah

PREMIER TAXIS PTE LTD
23 Changi South Avenue 2
#03-02
Singapore 486443
Telephone: +65 6214 8880 Fax: +65 6214 0330
www.premiertaxi.com.sg
Co. Reg. No. 200304975H

~~CASH SALE/WORK ORDER~~

No: AM 0786



PEOPLE'S VEHICLE SERVICE PTE LTD

BLK 3023A, UBI ROAD 1 #01-60, SINGAPORE 408717

TEL : 6743 1987 (3 LINES) FAX : 6743 0013

Reg No: 200415052W

Date, 27/1/20

寶號

Messrs:

Premier

車號

Vehicle No:

SHC6856Y

車型

Model No:

K14

由

From:

Tanah merak Rd

到

To:

Omega level 1

其他

Remark:

時間

Time:

07:15-08:15-08:45

AMOUNT:

\$

注意：本公司對所拖之車輛，在進行中如有任何損失或破壞，一概由車主自行負責。

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

經手人

Authorised by:

Sally/4363

收貨人

Received by:

Lee

CHECK IN / OUT VOUCHER

DRIVER'S NAME <u>Lui chung sin</u>	
NRIC <u>S 8270601A</u>	HANDPHONE <u>81816607</u>
TAXI REGN NO. <u>S HC 6856Y</u>	MAKE / MODEL <u>K02</u>
DATE IN <u>27/01/20</u> TIME IN <u>0845</u>	DATE OUT <u>06/02/20</u> TIME OUT <u>0900</u>
KILOMETRES IN _____ FUEL IN <u>E 1/4 1/2 3/4 F</u>	KILOMETRES OUT _____ FUEL OUT <u>E 1/4 1/2 3/4 F</u>

TAXI METER DOWNLOADED

YES

NO

DATE / TIME TOWED IN TO WORKSHOP

DD MM YY HH MM

DATE / TIME CALL TO DRIVER FOR VEHICLE COLLECTION

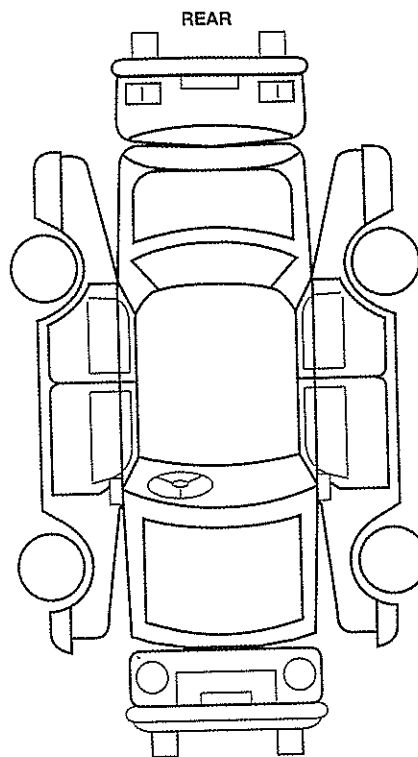
DD MM YY HH MM

I ACKNOWLEDGE AND CONFIRM THAT I HAVE EXAMINED THE ABOVE SAID VEHICLE AND THAT THE SAME IS IN GOOD CONDITION AND TO MY SATISFACTION IN EVERY RESPECT TOGETHER WITH THE ACCESSORIES / ITEMS LIST ABOVE. THIS VOUCHER IS USED IN CONJUNCTION WITH THE TERM RENTAL AGREEMENT.

CHECK IN

CHECK OUT

INDICATE AREA OF DAMAGE HERE:



FRONT

BODY MARKINGS

- | | |
|---------------------|-------------|
| 1 - Light Dent | 5 - Damaged |
| 2 - Serious Dent | 6 - Chip |
| 3 - Light Scratch | 7 - Crack |
| 4 - Serious Scratch | 8 - Peeling |

DRIVER'S NAME

DRIVER'S SIGNATURE / DATE / TIME

CHECKED IN BY
(PREMIER'S AUTHORISED WORKSHOP)

DRIVER'S NAME

DRIVER'S SIGNATURE / DATE / TIME

CHECKED OUT BY
(PREMIER'S AUTHORISED WORKSHOP)

SERVICE / REPAIRS DONE

☐ SERVICING ☐ OTHERS:

☐ T / BELT

☐ AIRCON SYSTEM

☐ TURBO

☐ BRAKE SYSTEM

☐ CLUTCH SYSTEM

☐ BULB

☐ UNDER CARRIAGE

☐ CPF

☐ BATTERY

☐ ACCIDENT: DATE / TIME of ACCIDENT:

27/01/200645

TP / L

DRIVER'S REMARKS

Camera working -

[Signature]