

# 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. SKE548E and vehicle no. SMH5644M on 03/02/2020 at 20:35 HRS PM/AM at/along Pioneer Road North towards Jurong West Street 63

We refer to the above matter.

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

Vehicle Repair cost / Excess	\$ 16906.00
Vehicle Rental Fee for <u>10</u> days @ \$ <u>192.60</u> per day	\$ 1926.00
Loss of use for <u>—</u> days @ \$ <u>—</u> per day	\$ —
<del>Police search fee/police report fee/LTA search fees</del>	\$ 7.45
Others <u>Towing Fee</u>	\$ 60.00
Total :	\$ 18899.45

Yours faithfully,

*ABBY*



ABBY

HP : 9856 4815

E-mail: visionautowork@gmail.com

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Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201500371E

## Authorisation To Act

I, Tham Chee Kin ("the third party claimant") of  
Blk 639 Jurong West Street 61, #12-28, S(640639)  
(address), owner of 5KE548E (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. 5KE548E that was damaged pursuant to the accident which  
occurred on 03/02/20 (date) at/along Pioneer Road North  
towards Jurong West ST 63 (location) involving  
vehicle no/s SMH5644M  
("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 04 day of 02 (month) 20 20 (year)



Signed by "the third party claimant"



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. SKES48E and SMH5644M on 03/02/20  
at/along Pioneer Road North towards Jurong West S163

1. I/We, the Owner of motor vehicle no. SKES48E 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 04 day of 02 2020

Signature of vehicle owner

Name - Tham Chee Kin

IC/UEN No : S7426646 J

(Company stamp, if applicable)

Address : B/K 639 Jurong West Street 61,

# 12-28, S(640639)

Tel : 9790 7248

Witnessed by :

Phby

# 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 V17144**

Date : 25.03.20

Vehicle Number : **SKE548E**

### Bill To:

### AXA INSURANCE SINGAPORE PTE LTD

8 SHENTON WAY  
#27-01 AXA TOWER  
SINGAPORE 068811

	DESCRIPTION	AMOUNT
	Carry out lump sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 15,800.00
Sub Total		\$ 15,800.00
Add GST 7%		\$ 1,106.00
Total Amount		\$ 16,906.00

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 :

*Abby*



Co's stamp & Authorised Signature

# CARS FOR RENT (2016) PTE LTD

**Mailing Address:**

10 Kaki Bukit Ave 4 #09-60 Premier@Kaki Bukit, Singapore 415874

Tel Nos.: +65 6970 9119 / 6789 5155

Co. Reg'n No.: 201609732N

GST Reg'n No.: 201609732N

Tax Invoice #: E2002051

Date: 14-02-20

**Bill To:**

Vision Autowork Pte Ltd

For the account of:

Tham Chee Kin

Blk 639 Jurong West Street 61

#12-28

640639

**Ship To:**

Vision Autowork Pte Ltd

For the account of:

Tham Chee Kin

Blk 639 Jurong West Street 61

#12-28

640639

1

**Description****Amount****Job No.**

Vehicle Rental for period 04.02.2020 to 14.02.2020  
(Billing for days 10 X \$180.00/per day)  
(Vehicle No.: SKE548E)

\$1,926.00

SLM94T

SR

Your Order #: E16304

Terms: Net 30th after

GST:

\$126.00

COMMENT

CODE

RATE

GST

SALE AMOUNT

Total Inv Amt:

\$1,926.00

SR

7%

\$126.00

\$1,800.00

Amount Applied:

\$0.00

Balance Due:

\$1,926.00



# CARS FOR RENT (2016) PTE LTD

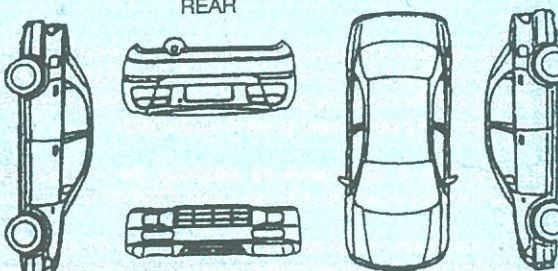
5 Tanah Merah Kechil Road #17-05 S 46665  
Tel: 6789 5155 Fax: 67835155

No: E 16304

SKES48E (vibur)

ROC No: 201609732N

## VEHICLE RENTAL AGREEMENT

<b>HIRER'S PARTICULAR</b> Name: (as in I/C) <u>THAM CHEE KIN</u> NRIC/PASSPORT No: <u>57426646J</u> Address (Res) <u>APT BIK639 JURONG WEST STREET 61 #12-26 S1640639</u> Name & Address of Employer _____ Occupation: _____ Driving Exp: _____ Driving Licence No: _____ D/L Type: Local / International Issue Date: _____ Date of Birth: _____ Tel: (O) _____ (R) _____ HP/PG _____		Vehicle No: <u>SLM941</u> Replace Veh No: _____ Mileage Out: <u>35064</u> Mileage Out _____ Make & Model: <u>Hyundai Tucson</u> <input checked="" type="radio"/> Auto <input type="radio"/> Manual Group: _____ OUT : Date <u>04/02/20</u> Time: <u>4.00pm</u> HIRE/PERIOD EXPIRY: _____ COLLISION DAMAGE WAIVER Excess YES / NO PERSONAL ACCIDENT INSURANCE YES / NO																																									
<b>ADDITIONAL DRIVER'S PARTICULARS</b> Name: (as in I/C) _____ NRIC/PASSPORT No: _____ Address (Res): _____ Driving Licence No: _____ D/L Type: Local / International Issue Date: _____ Date of Birth: _____ Occupation: _____ Driving Exp: _____		<table border="1"> <thead> <tr> <th colspan="4">CHARGES</th> </tr> </thead> <tbody> <tr> <td>Daily</td> <td>10 @ \$ 180</td> <td>per day</td> <td>\$ 1800 00</td> </tr> <tr> <td>Weekly</td> <td>@ \$</td> <td>per week</td> <td></td> </tr> <tr> <td>Monthly</td> <td>@ \$</td> <td>per month</td> <td></td> </tr> <tr> <td>Hours</td> <td>@ \$</td> <td>per hour</td> <td></td> </tr> <tr> <td>Others</td> <td>@ \$</td> <td></td> <td></td> </tr> <tr> <td>CDW</td> <td>@ \$</td> <td>per day/month</td> <td></td> </tr> <tr> <td>PAI</td> <td>@ \$</td> <td>per day/month</td> <td></td> </tr> <tr> <td>Delivery Service</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">SUB-TOTAL \$</td> <td></td> </tr> </tbody> </table>		CHARGES				Daily	10 @ \$ 180	per day	\$ 1800 00	Weekly	@ \$	per week		Monthly	@ \$	per month		Hours	@ \$	per hour		Others	@ \$			CDW	@ \$	per day/month		PAI	@ \$	per day/month		Delivery Service				SUB-TOTAL \$			
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<b>VEHICLE CHECK LIST</b> D - DENTS S - SCRATCHES A - ACCIDENTS RIGHT FRONT TOP LEFT 		<table border="1"> <thead> <tr> <th colspan="7">PETROL LEVEL</th> </tr> </thead> <tbody> <tr> <td>Out</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> <td></td> </tr> <tr> <td>In</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> <td></td> </tr> </tbody> </table>		PETROL LEVEL							Out	E	1/4	1/2	3/4	F		In	E	1/4	1/2	3/4	F																				
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<b>ACCESSORIES CHECK</b> <input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S/Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio / Cass <input type="checkbox"/> CD <input type="checkbox"/> Catridges		EXTENSION Collection Service _____ Misc. <u>CS771</u> <u>126</u> <u>00</u> <b>TOTAL CHARGES \$ 1926 00</b> Rented out by : _____ Hirer's Signature _____ Addition Driver's Signature _____																																									

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 amount 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 given CARS FOR RENT (2016) PTE LTD in connection with this agreement is true.

### \* IMPORTANT

- ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CARS FOR RENT (2016) PTE LTD

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 DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CARS FOR RENT (2016) 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.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
14/02/20	3:05pm				





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

Print Date/Time : 04 Feb 2020 / 18:09:13

Receipt Date/Time : 04 Feb 2020 / 18:09:13

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-200204-002926

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SMH5644M				
As at 03 Feb 2020/20:35:00				
Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SMH5644M Enquiry Fee 20200204180828422612	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.



TEL: 97297337

## T ZONE TOWING PTE LTD

8 Kaki Bukit Ave 4 #06-32 Premier@Kaki Bukit

Singapore 415875

Email: t-zonetowing@live.com.sg

GST Reg No. 201500018C

### WORK ORDER

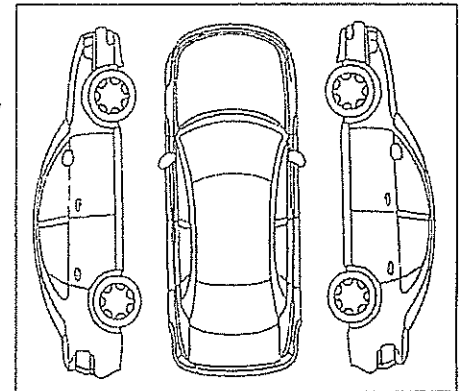
No. P 23524

Svc Date	04-02-2020	Time Received	1540
Member's Name	Goh	Time Arrived	1600
M'ship / NRIC No.		Time Completed	1645
Member's Contact No.	8123 9016	From	17 Tuas Ave 20
Car Regr. No.	SKB 548 E	To	08-09 Premier
Car Make / Model	Bmw 520	Tow Truck No.	G1R 5566 Z
Remarks (if any)	Accident	Amount	Got

### ADDITIONAL CHARGES

- |   |  |
|---|--|
| <input type="checkbox"/> Dolly Wheels /Flat bed | <input type="checkbox"/> Patch Tyre        |
| <input type="checkbox"/> Basement /Multi-storey | <input type="checkbox"/> Change Spare Tyre |
| <input type="checkbox"/> Crane up /Bogged       | <input type="checkbox"/> Change Battery    |
| <input type="checkbox"/> Causeway /2nd Link     | Size : _____                               |
| <input type="checkbox"/> Jump Start             |  |
| <input type="checkbox"/> Collection of key      |  |
| <input type="checkbox"/> ERP /Carpark           |  |

### BODY & PAINT CONDITION RECORD



\*please remove any valuables or personal belongings in the car

  
Tow Driver's Name & Signature

bizSAFE<sub>3</sub>

Member's Signature

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



## 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	05/02/2020 15:59
Date Of Accident	03/02/2020 20:35
Exact Location Of Accident	ALONG PIONEER RD NORTH TWDS JURONG WEST ST 63
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKE548E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	THAM CHEE KIN
NRIC No	SXXXX646J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97907248
Alternative Phone No	OFFICE-97907248

### Vehicle Particulars

Manufacturer	BMW
Model	520I-2.0 (A)

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? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

### Insurance Company

Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPG20000443
Cover Note Number	

### Driver

Name of Driver	THAM CHEE KIN
NRIC No	SXXXX646J
Date Of Birth	01/08/1974
Occupation	INDOOR
Date Of Driving Pass	18/04/1996
Driving Experience	23 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97907248
Fax Number	
Contact Number	OFFICE-97907248
EMail Address	NOEMAIL

Address	BLK 639 JURONG WEST ST 61 #12-28
Postcode	640639
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

Type Of Accident	COLLISION - MAJOR/MINOR RD
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

AS PER ATTACHED

#### 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	SMH5644M
Vehicle Make/Model/Colour	
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)	



SKETCH PLAN


IMPORTANT NOTICE

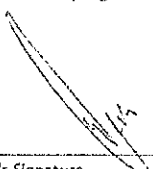
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. 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:

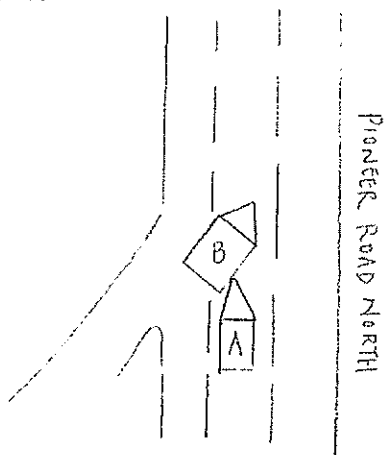
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

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

### SKETCH PLAN



Veh A SKE 548E  
Veh B SMH 5644M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 03/03/2020 at about 2035 HRS, I was driving at the centre lane along Pioneer Road North towards Jurong West St 63. At that time, I was going straight

Suddenly, vehicle (B) cut into my lane and as a result, I hit onto the right side of vehicle (B). There were damages at my front and left portions.

## DECLARATION

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

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

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



SKE548E (owner & driver)

4044680

NRIC No. S7426646J

Date of Issue  
18-05-2007

APT BLK 639 JURONG WEST STREET 61 #12-28  
SINGAPORE 640639

NRIC No: S7426646J No: 6834000



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7426646J

Name  
THAM CHEE KIN  
(TAN ZIJIAN)  
譚子健

Race  
CHINESE

Date of birth  
01-08-1974

Sex  
M

Country of birth  
SINGAPORE





SFE548E (car & drive)

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

Class 2B	Motorcycles not exceeding 200 cc
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: 29 Aug 1996  
18 Apr 1995

Licence No: S7426646J

NP 428A

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7426646J

Name: THAM CHEE KIN (TAN ZIJIAN)

Birth Date: 01 Aug 1974  
Issue Date: 03 Apr 2003

000361317E



## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1980  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate/Policy Number : DMPG20000443

Vehicle Registration Number : SKE548E

Cover Type : Enhanced Comprehensive

Policy Type : Private Car

Name of Policyholder/Insured : THAM CHEE KIN

Commencement Date of Insurance : 31/01/2020

Expiry Date of Insurance : 30/01/2021

Excess	:	EXCESS: (SECTION I).....	S\$	700.00
		ADD'L EXCESS: UNNAMED DRIVERS (SECTION I)...	S\$	500.00
		YOUNG & INEXP DRIVERS (SECTION I)	S\$	3,000.00

Finance Company/Hire Purchase Owner : HONG LEONG FINANCE LTD

\*Persons or Classes of Persons entitled to drive:

1. The Policyholder
2. Any Person who is driving on the Policyholder's order or 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. 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 cancelled at the time of the accident loss or damage.

\* Limitations as to Use:

- 1) Use only for social domestic and pleasure purposes
- 2) Use for Policyholder's business

This Policy does not cover

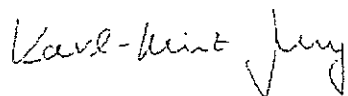
- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing and on race track
- 2) Use for the carriage of goods other than samples in connection with any trade or business
- 3) Use for any purpose in connection with the Motor Trade

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 (\*).

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)

For and on behalf of ERGO Insurance Pte. Ltd.

Approved Insurer



Authorized Signature



B000126	SIME DARBY INSURANCE BROKERS (SINGAPORE) PTE LTD	Contact Number: 62222244
Vehicle Chassis Number : WBAXG12060DW34142, Vehicle Engine Number : A0390068N20B20B		PC1, 23/12/2019 16:04