

# N-51 AUTOMOTIVE PTE LTD

Kaki Bukit Autohub,  
2 Kaki Bukit Ave 2  
#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27  
Singapore 417921  
Tel No. : +65 6842 0051 / 6744 0510 Fax No. : +65 6741 0510  
Company Reg. No. : 200616038C  
GST Registration No. : 200616038C

12 October 2020

Our Ref : CLM16027 / SLD7294J / FEB-15/2020

**FWD SINGAPORE PTE LTD**  
6 TEMASEK BOULEVARD  
#18-01 SUNTEC TOWER FOUR  
SINGAPORE 038986  
**ATTN: MOTOR CLAIMS DEPARTMENT**

Dear Sir @ Madam,

**Re: Accident involving SLD7294J & SLZ8076A on 05/02/2020**  
**Along Cross St**

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SLZ8076A** whose vehicle was insured with you at the material date of the accident.

We are proposing for a direct settlement on the claims as following EXCLUDE personal injury in respect of claim arising out of the above mentioned accident.

Cost of repairs	\$	4,601.00	(Include 7% GST)
Loss of rental	\$	365.70	(\$82.95 X 6 Days)
Additional 2 days loss of use for pre repair	\$	121.90	(\$82.95 X 2 Days)
LTA Search	\$	7.45	
	S \$	<u>5,096.05</u>	

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM16027
- 2) Grab Rentals Pte Ltd - Letter of Understanding
- 3) LTA search
- 4) Letter of Authorisation to Act
- 5) GIA report of SLD7294J

We look forward to your prompt reply.

Yours faithfully,



**N-51 AUTOMOTIVE PTE LTD**  
S.Y.NEO  
Director



*bizSAFE<sub>3</sub>*

P.I.C - Melody Chin  
Reply to :huixin@n51.com.sg

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Singapore 417921  
Tel No. : +65 6842 0051 Fax No. : +65 6741 0510  
E-Mail : sales@n51.com.sg  
Company Reg. No. : 200616038C  
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FWD SINGAPORE PTE LTD  
6 TEMASEK BOULEVARD  
#18-01 SUNTEC TOWER FOUR  
SINGAPORE 038986

GRAB RENTALS PTE LTD  
18 SIN MING LANE #01-08 MIDVIEW CITY  
SINGAPORE 573960

## TAX INVOICE

Date : 05/05/2020  
Date in : 24/02/2020  
Vehicle Num. : SLD7294J  
Make/Model : TOYOTA COROLLA ALTIS CLASSIC 1.6 CVT-2016  
Chassis/Eng# : MR053REH104553095/1ZRX581383  
Accident Date : 05/02/2020  
Claim No : CLM16027  
Reference : FEB-15/2020  
Policy No. : A29141713MKF (31/12/2020)

LUMPSUM REPAIR BILL  
REF : CLM16027-N51 DATED 24/02/2020  
BY DIRECT

Amount S\$  
4,300.00



E. & O.E.	Sub S\$ :	4,300.00
	Add GST ( 7% ) S\$ :	301.00
	Total Amount S\$ :	4,601.00

for N-51 AUTOMOTIVE PTE LTD



bizSAFE<sub>3</sub>

CONFIDENTIAL



Grab Rentals Pte Ltd  
201617200G  
18 Sin Ming Lane  
#01-08 Midview City  
Singapore 573960

Date of Accident:	05/02/2020	Time:	09:15 HRS
Accident Location:	CROSS ST		

Rental information of the accident vehicle

Registered Owner:	Grab Rentals Pte Ltd
Vehicle Number:	SLD 7294 J
Hirer Name:	CHENG PUAY BOON
Hirer NRIC last 4 Digit: (XXXXB)	925E
Rental Rate: (inclusive GST)	\$60.95

Details of repair

Date in:	24/02/2020
Date out:	26/02/2020

We hereby authorize our appoint workshop, N51 Automotive Ptd Ltd to handle any settlement of claims and receiving settlement payments in respect of the said accident.

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Grab Rentals – Accident Team



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

Print Date/Time : 06 Feb 2020 / 10:44:40

Receipt Date/Time : 06 Feb 2020 / 10:44:40

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-200206-000776

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SLZ8076A				
As at 05 Feb 2020/09:15:00				
Insurance Co: FWD SINGAPORE PTE. LTD.				
1	Insurance Enquiry - SLZ8076A Enquiry Fee 20200206104407586920	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				
	xxxxxxxxxxxx0379	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.

### AUTHORISATION TO ACT

I, Grab Rentals Pte Ltd of 18 Sin Ming Lane #01-08 Midview City Singapore 573960, owner of SLD7294J hereby authorize N-51 Automotive Pte Ltd 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. SLD7294J that was damaged pursuant to the accident which occurred on 05/02/2020 along Cross St involving vehicle no/s SLZ8076A.

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                      5                      of                      FEB                      2020



Signed by 'the third party claimant'  
(with chop if applicable)



Signed by 'the workshop'  
(with chop)



## 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 13:59  
 Date Of Accident 05/02/2020 09:15  
 Exact Location Of Accident ALONG CROSS ST  
 Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SLD7294J  
**Insured/Policyholder**  
 Name Of Registered Owner GRAB RENTALS PTE LTD  
 Co Reg No 2XXXXX200G  
 Email Address NOEMAIL  
 Mobile Phone No  
 Alternative Phone No OFFICE-31388644  
**Vehicle Particulars**  
 Manufacturer TOYOTA  
 Model COROLLA ALTIS-1.6 CLASSIC CVT (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 HIRE

### Insurance Company

Name of Insurance Company MSIG INSURANCE (SINGAPORE) PTE. LTD.  
 Type Of Coverage COMPREHENSIVE  
 Fleet Policy YES  
 Policy Number 29141713  
 Cover Note Number

### Driver

Name of Driver CHENG PUAY BOON  
 NRIC No SXXXX925E  
 Date Of Birth 12/06/1960  
 Occupation OUTDOOR  
 Date Of Driving Pass 22/02/1979  
 Driving Experience 40 YEARS AND 11 MONTHS  
 Gender MALE  
 Mobile Number (LOCAL) +65-98176547  
 Fax Number  
 Contact Number  
 Email Address NOEMAIL

Address	BLK 105 BEDOK RESERVOIR ROAD #11-392
Postcode	470105
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LESSEE
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?	
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

ON 05/02/2020 AT 9:14AM, I WAS AT THE JUNCTION OF CROSS ST AND CECIL ST. THE TRAFFIC LIGHT HAD JUST TURNED GREEN AND MY CAR HAD JUST TO MOVE OFF. SUDDENLY I FELT AN IMPACT AT THE REAR. I STOPPED MY CAR AND ALIGHTED TO CHECK. I REALIZED THAT VEHICLE B HAD KNOCKED INTO MY CAR, CAUSING DAMAGES AT THE REAR PORTION.

#### 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	SLZ8076A
Vehicle Make/Model/Colour	VOLKSWAGEN
Details Of Properties	VEH B
Vehicle Category	PRIVATE CAR
Name of Driver	SHIZUKA TAKANO
NRIC/Passport Number	GXXXX556Q
Contact Number	96218615
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 revoke 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/con 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.

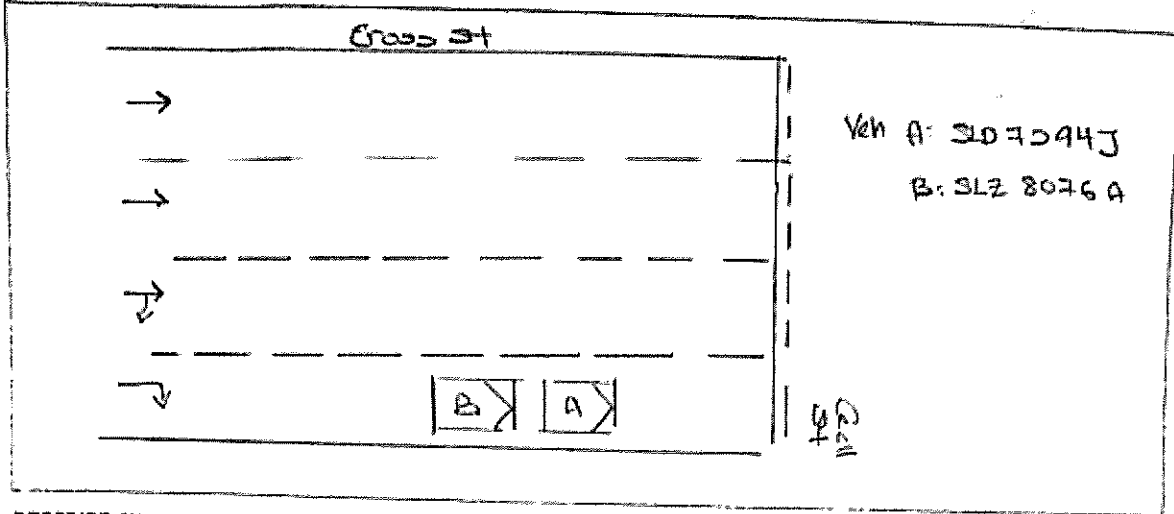
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 5/2/2020 at 9:14am, I was at the junction of Cross St and Cecil St. The traffic light had just turned green and my car had just moved off. Suddenly I felt an impact at the rear. I stopped my car & alighted to check. I realized that veh B had knocked into my car, causing damages at the rear portion.

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.: