



# 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

21 September 2020

Our Ref : CLM16045 / SFB7372Z / FEB-35/2020

## MS FIRST CAPITAL INSURANCE LIMITED

6 RAFFLES QUAY

#21-00

SINGAPORE 048580

**ATTN: MOTOR CLAIMS DEPARTMENT**

Dear Sir @ Madam,

**Re: Accident involving SFB7372Z & SHB4918X on 12/02/2020**  
**Along North Bridge Road C13 Taxi Stand**

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SHB4918X** 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	\$	3,959.00	(Include 7% GST)
Loss of rental	\$	1,605.00	(\$160.50X 10 Days)
Additional 2 days loss of use for pre repair	\$	300.00	(\$150 X 2 Days)
LTA search fee	\$	7.45	
	S \$	<u>5,871.45</u>	

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM16045
- 2) Darwin-51 Car Rental Pte Ltd - Invoice No: D01864
- 3) LTA search fee
- 4) Letter of Authorisation
- 5) GIA report of SFB7372Z

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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Kaki Bukit AutoHub  
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#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27  
Singapore 417921  
Tel No. : +65 6842 0051 Fax No. : +65 6741 0510  
E-Mail : sales@n51.com.sg  
Company Reg. No. : 200616038C  
GST Registration No. : 200616038C

MS FIRST CAPITAL INSURANCE LIMITED  
6 RAFFLES QUAY  
#21-00  
SINGAPORE 048580

MR. CHONG CHAM WENG  
89 AROOZOO AVENUE  
SINGAPORE 539848

Contact : 86412084

## TAX INVOICE

Date : 22/05/2020  
Date in : 14/02/2020  
Vehicle Num. : SFB7372Z  
Make/Model : HYUNDAI CM SANTA FE 2.7 A S/R-2008  
Chassis/Eng# : KMHSH81DR8U358059/G6EA8A103564  
Accident Date : 12/02/2020  
Claim No : CLM16045  
Reference : FEB-35/2020  
Policy No. : 5115121773 (25/12/2020)

LUMPSUM REPAIR BILL  
REF : CLM16045-N51 DATED 17/02/2020  
BY DIRECT

Amount S\$  
3,700.00



E. & O.E.	Sub S\$ :	3,700.00
	Add GST ( 7% ) S\$ :	259.00
	Total Amount S\$ :	3,959.00

for N-51 AUTOMOTIVE PTE LTD



bizSAFE<sub>3</sub>

# DARWIN-51 CAR RENTAL PTE. LTD.

Company & GST Registration Number : 201407909C  
2 Kaki Bukit Avenue 2 #02-12 Kaki Bukit Autohub Singapore 417921  
Tel: 6842 5151 Fax: 6749 2851 email: darwin51@n51.com.sg

Invoice To

CHONG CHAM WENG  
89 AROOZOO AVE  
SINGAPORE 539848

## TAX INVOICE

Invoice No. : D01864  
Date : 24/02/2020  
Terms : Cash

No. Days	Description	Rate	Amount
10	SLR4567T - Car rental fee for period from 14/02/2020 to 24/02/2020 (ref. Vehicle SFB7372Z) Tax collected on sales	150.00 7.00%	1,500.00 105.00
		7% GST	\$105.00
		<b>Total Amount</b>	<b>\$1,605.00</b>

DARWIN-51 CAR RENTAL PTE. LTD.

  
Authorised Signature



Note : Kindly make payable to " DARWIN-51 CAR RENTAL PTE. LTD." or by Bank-in/transfer to Maybank A/c No. 04211099668 (Bank Code 7302)

Invoice was created on a computer and is valid without the signature and seal



# DARWIN-51 CAR RENTAL PTE. LTD.

Company Registration Number : 201407909C

2 Kaki Bukit Avenue 2 #02-12 Kaki Bukit Autohub, Singapore 417921

Tel: 6842 5151 Fax: 6749 2851 email: darwin51@n51.com.sg

## VEHICLE RENTAL AGREEMENT

VHA NO: 722

### HIRER'S PARTICULAR

Name(as in I/C): CHONG CHAM WENG

NRIC/PASSPORT No: S1387963Z

Address(Res):89 AROOZOO AVE SINGAPORE 539848

Occupation:

Driving Exp:

Driving License No: S1387963Z

D/L Type: Local

Issue Date: 1983-07-04

Date of Birth: 1959-10-06

Tel: (HP) 96412084

Email:

### ADDITIONAL DRIVER'S PARTICULARS

Name(as in I/C):

NRIC/PASSPORT No:

Address(Res):

Occupation:

Driving Exp:

Driving License No:

D/L Type:

Issue Date:

Date of Birth:

Vehicle No: SLR4567T

Make: TOYOTA

Model: PRIUS ALPHA

Auto/Manual Group: Auto

Year: 2017

Colour: WHITE

Mileage Out:

OUT: Date 2020-02-14

Time: 14:42

NON-WAIVER EXCESS:

Section1: 2000

Section2: 2000

### CHARGES

Daily rate 150.00

### PETROL-LEVEL

Out	E	1/4	1/2	3/4	F	E
In	E	1/4	1/2	3/4	F	E

Extension (Accessories) 0.00

Collection Service 0.00

Misc. 0.00

Security Deposit Collected 0.00

Rental Term Cash

Start Date 2020-02-14

End Date 2020-02-28

Rented out by: Joseph Tan

Hirer signature:

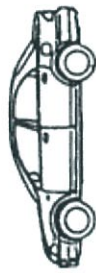
CHONG CHAM WENG  
S1387963Z

Addition Driver's Signature:

### VEHICLE CHECKLIST

D - DENTS  
S - SCRATCHES

INDICATE:  
A - ACCIDENTS



RIGHT

FRONT

TOP

LEFT

### ACCESSORIES CHECK

☒ Camera Recorder ☒ Reverse Camera ☒ CD/ Radio Player  
☒ Remote Control ☒ Reverse Sensor ☐ S/Tyre

I have read and agreed to the terms & conditions on both sides of this agreement. All information I have given DARWIN-51 CAR RENTAL PTE. LTD. in connection with this agreement is true.

### IMPORTANT

- YOU HEREBY EXPRESSLY CONSENT AND AUTHORIZE DARWIN-51 CAR RENTAL PTE LTD AND GRABCAR TO DEDUCT FROM THE FARES GENERATED BY YOU AND/OR GRATUITY GRANTED TO YOU BY GRABCAR (IF ANY) FOR THE CAR RENTAL FEE AND ANY CHARGES PROVIDED HEREIN AND IN THE EVENT THAT THE FARES ARE INSUFFICIENT, ANY BALANCE SHALL BE PAID TO US IMMEDIATELY. THESE CHARGES SHALL INCLUDE BUT ARE NOT LIMITED TO CHARGES FOR 1.CAR RENTAL. 2. COST OF INSURANCE EXCESS, REPAIRS, REPLACEMENT OF PARTS TO THE CAR AND/OR DAMAGE TO THIRD PARTY PROPERTIES WHERE THE DAMAGES ARE DUE TO YOUR ACTIONS OR LACK OF CARE. 3. ANY UNSETTLED SUMMONS, FINES, PARKING CHARGES AND TOLL.
- THE VEHICLE SHALL BE RENTED OUT ON A DAILY BASIS, WITH A MINIMUM RENTAL PERIOD OF SIX MONTH.
- IN THE EVENT THAT THE HIRER RETURN THE VEHICLE PRIOR TO THE END OF THE MINIMUM RENTAL PERIOD, THE HIRER WILL BE REQUIRED TO PAY THE FULL RENTAL FEE APPLICABLE FOR THE REMAINING PERIOD UP TO THE END OF THE MINIMUM RENTAL PERIOD.
- ONLY PERSONS ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, 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 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 SHOULD REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- THE VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY DARWIN-51 CAR RENTAL PTE. LTD..
- AN ADDITIONAL EXCESS OF \$2000 OF ALL CLAIM WILL APPLY FOR VEHICLE USE OUTSIDE SINGAPORE AND \$3000 FOR AGE ABOVE 65.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
24/02/2020	16:25 hrs				

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 14 Feb 2020 / 09:43:56

Receipt Date/Time : 14 Feb 2020 / 09:43:56

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-200214-000572

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 - SHB4918X				
As at 12 Feb 2020/20:20:00				
Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - SHB4918X Enquiry Fee 20200214094319998630	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.



## LETTER OF AUTHORISATION

To: **M/s N-51 Automotive Pte Ltd**  
**Singapore**

RE: ACCIDENT INVOLVING VEHICLE NOS: SFB 7372 Z & SHB 4918 X  
ALONG NORTH BRIDGE ROAD C13 TAXI STAND ON 12/02/2020 @ 20:20 HRS

I/We CHONG CHAM WENG NRIC/Passport No: S XXXX 963 Z  
of 89 AR00800 AVENUE S (539848)  
the owner of vehicle no. SFB 7372 Z hereby authorise you to commence repair to the said vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request.

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident claim and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is inadequate, I/we undertake to pay you for your expenses, costs and fees immediately.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

**I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.**

**Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.**

My/Our insurer is/are \_\_\_\_\_  
Policy No. \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Date: \_\_\_\_\_ Excess: \_\_\_\_\_

Owner's Signature/Co's stamp (if applicable)

Witness Signature/Name

Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident.

## 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	13/02/2020 12:57
Date Of Accident	12/02/2020 20:20
Exact Location Of Accident	NORTH BRIDGE ROAD C13 TAXI STAND
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFB7372Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHONG CHAM WENG
NRIC No	SXXXX963Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86412084
Alternative Phone No	OTHERS-NOPHONE

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	SANTE FE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5115121773
Cover Note Number	

### Driver

Name of Driver	CHONG CHAM WENG
NRIC No	SXXXX963Z
Date Of Birth	06/10/1959
Occupation	OUTDOOR
Date Of Driving Pass	04/07/1983
Driving Experience	36 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86412084
Fax Number	
Contact Number	OTHERS-NOPHONE
EMail Address	NOEMAIL

Address	89 AROOZOO AVENUE
Postcode	539848
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	SIDE SWIPE
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

PLEASE REFER TO SKETCH PLAN

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB4918X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	FU HONG KAI
NRIC/Passport Number	SXXXX372J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



## 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, 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.

**CITY AUTO PTE LTD**  
Blk 8 Sin Ming Road  
#01-58/60/62 Sin Ming Ind Est  
Singapore 575843  
Tel: 6453 1235 Fax: 6453 7944  
(Claims Section)

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.:

# Accident Sketch Plan

## SKETCH PLAN



North Bridge Road

Date: 12 Feb 2020

Time: 8:30 AM

SHB4918X DRIVER FU HONG KAI S8522372J

SFB7372Z DRIVER CHONG CHAM WENG S1387963Z

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along North Bridge Road on 12 February 2020 at about 8:30 pm when I heard a bang on the right side rear area of my car.

## DECLARATION

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

*[Signature]*

Policyholder's Signature

Date & Time: 12/2/2020

*[Signature]*

Driver's Signature

(If driver is not the policyholder)

Date & Time: 12/02/2020

## CITY AUTO PTE LTD

82, 8 Sin Ming Road  
#01-58/60/62 Sin Ming Ind Est  
Singapore 575643  
Tel: 6453 1235 Fax: 6453 7944  
(Claims Section)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: