

BLOCK 9 SIN MING INDUSTRIAL ESTATE #01-32, SINGAPORE 575644.

TEL: 6456 9830 • FAX: 6458 0128 • EMAIL: weileemotorworks@gmail.com Business Regn No: 269436/00J

30,JUL 2020

China Taiping Insurance (D) PL

Attn: Motor claim dept-3rd party claim

Claiming against your insured vehicle no: SJT5064J

Accident involving vehicle no:GW9031Y/SJT5064J

ON 09/01/2020 AT KJE (PIE) 5.8km

Dear officer incharge

We are the workshop for the owner of vehicle no: GW9031Y

Regarding the claim for the case above, this is a liability clear case considering that your client's vehicle collided into the rear portion of our client's vehicle it caused my client's vehicle swerve to the left and spin to opposition direction. Resulted front ,left and right portion badly damaged.

The claim for vehicle No: GW9031Y as follow:-

Cost of repair to GW9031Y

\$ 4,500.00 finalised with your surveyor

GST 7%

\$ 315.00

Loss of use

\$ 1,120.00 \$80x014d

LTA search fee

\$ 7.45

Medical bill with receipt

\$ 454.04 Owner confirmed NO further claim

\$ 6,396.49

Enclosed with all the necessary document for your reference.

Kindly let us have your early reply as fast as u can.

Thank you.



TRAFFIC POLICE 10, UBI AVENUE 3 SINGAPORE 408865

Tel: 6547 6350 Fax: 6547 4883 www.police.gov.sg

Your Ref

Our Ref

: TP/IP/01385/2020

Date

: 3 February 2020

Mr Ching Soy Thong Blk 606 Senja Road #15-49 Singapore 670606

Dear Sir,

TRAFFIC ACCIDENT ON 09 JANUARY 2020 AT 4.58 AM ALONG KRANJI EXPRESSWAY INVOLVING MOTOR VEHICLES SJT 5064 J & GW 9031 Y.

I refer to the above traffic accident.

- Please be informed that Traffic Police Department will not be taking any further action against the driver of motor vehicle **SJT 5064 J** for the offence of **Drink Driving**, under Section 67(1)(b) of the Road Traffic Act, Chapter 276.
- As for the accident aspect, our investigation shows that the driver had committed the offence of <u>Careless Driving Causing Hurt</u> under Section 65(4)(a) of the Road Traffic Act, Chapter 276.
- 4 Action has been taken against him for the said offence.
- 5 Please also take note that this decision does not preclude insurance and civil claims.
- 6 For further clarification please contact Senior Investigation Officer Nor Faizal Bin Yahya at DID: 6547 6198.

Yours faithfully

NORFAIZAL BIN YAHYA
SENIOR INVESTIGATION OFFICER
INVESTIGATION BRANCH
TRAFFIC POLICE

A FORCE FOR THE NATION



Members of the NUHS

TAX INVOICE (This is not a Final bill)

TO:

MR. CHING SOY THONG BLK 606 #15-49 SENJA ROAD SINGAPORE 670606

MRN/NRIC **BILL NO**

: S0106316B : 14162571C

BILL DATE

: 09.01.2020

GST REG NO

TYPE OF SUPPLY : CASH/CREDIT : 200910555Z

PATIENT NAME: CHING SOY THONG

PLEASE PAY UPON RECEIPT OF THIS INVOICE

| | SERVICES | AMOUNT PAYABLE (\$) |
|---|------------------------------|---------------------------|
| Case No : 9219123481D | Location : NTFGH JWEDTU BC | 05 |
| Admission: 09.01.2020 11:36 | Discharge : 09.01.2020 20:15 | |
| Room Charge | | 222.22 |
| EDTU Short Stay | (1 Day(s)) | 220.00 |
| Daily Treatment Fee EDTU Short Stay | (1 Day(s)) | 133.00 |
| EDTO Short Stay | (1 Day(5)) | 2.80 |
| Consumables | | 2.00 |
| nvestigations | | 400.00 |
| X-ray | | 400.00 |
| Medications Standard | | 3.20 |
| | | |
| Therapy Services Occupational Therapy | | 20.60 |
| Physiotherapy | | 19.50 |
| Total Charges | | 799.10 |
| Less: Government Subsidy | | 465.06 |
| Add: 7% GST Less: GST Absorbed | | 23.39 23.39 |
| Amount Payable | | 334.04 |



TAX INVOICE

Members of the NUHS

TO:

MR. CHING SOY THONG

BLK 606 #15-49 SENJA ROAD

SINGAPORE 670606

MRN/NRIC

: S0106316B

BILL NO

: 14162514D

BILL DATE VISIT DATE : 09.01.2020

: 09.01.2020

GST REG NO

TYPE OF SUPPLY : CASH/CREDIT

: 200910555Z

PATIENT NAME: CHING SOY THONG

PLEASE PAY UPON RECEIPT OF THIS INVOICE

| SERVICES | AMOUNT PAYABLE (\$) |
|---|------------------------------------|
| Case No : 9219123434B Specialty / Class : Accident & Emergency / NA | |
| 1.3&E Attendance Fee | 240.00 |
| Total Charges Less: Government Subsidy Add: 7% GST Less: GST Absorbed | 240.00 120.00- 8.40 8.40- |
| Amount Payable | 120.00 |

| Payer(s) Summary | | | | |
|-----------------------------------|-------------------------|---------------------|--------------------|---------------------------|
| Payable By | Payable Amt (\$) | Payment Amt (\$) | Adjustment (\$) | Amount Due Policy No (\$) |
| Total Bill Amount CHING SOY THONG | 120.00 120.00 | 0.00 | 0.00 | 120.00 |

Amount to be paid: \$120.00