

Our Ref: SJQ 8957D Your Ref: SKV 9995Z

13th November 2020

ATTN:

LKK Auto Consultants Pte Ltd

INSURER:

AIG Asia Pacific Insurance Pte Ltd

Dear Cecilia,

Accident Involving: SJQ 8957D and SKV 9995Z

Date of Accident:

31 March 2020

Location of Accident: 229 Pavilion Circle

We refer to the aforementioned accident and hereby submit our claim as below:

GRAND TOTAL	\$ 3,907.45
Add LTA Search Fee	\$ 7.45
Total	\$ 3,900.00
**2 Days PRS	(31 Mar, 1 Apr) + 1 Day Resurvey (2 Apr) + 6 Repair Days Agreed (3/4/6/7/8/9 Apr) + 1 Sunday (5 Apr
Add Loss of Use	\$ 800.00 10 Days
Cost of Repair as agreed	\$ 3,100.00

Kindly pay the Grand Total Amount of \$3,907.45 to:

Team AutoPro Pte Ltd 160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

Thank you.

Regards, Adel (Ms)

Tel: 6258-1955 Fax: 6258-1956 Email: teamautoffice@gmail.com / teamautopl@gmail.com



Ong Automotive	

PI Number	P2011-1143
PI Date	13-Nov-2020
Vehicle No.	SJQ 8957D
Accident Date	31-Mar-2020

S/No	D	escription	Unit Price	Quantity	Amount
1	Spare Parts and Labour fo Vehicle Nos. SJQ 895		COR Lum	p Sum	\$ 3,100.00

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$ 3,100.00



> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

57089570

Print Date/Time:

31 Mar 2020 / 12:19:57

Receipt Date/Time: 31 Mar 2020 / 12:19:57

Tax Invoice/Receipt

Receipt No.: ITNET-00000-200331-001356

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 - SKV9995Z				
As at 31 Mar 2020/09:30:00				
Insurance Co: AIG ASIA PACIFIC INSURAN	ICE PTE. LTD.			
1 Insurance Enquiry - SKV9995Z Enquiry Fee 20200331121910812519		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			
	426569XXXXXX8855	eNETS Credit Card	d	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.

To

.

Team AutoPro Pte Ltd

CRN

: 201811621K

located at

160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722

Letter of Authorization & Undertaking

In	Respect			Involving	my/our	Vehicle	No.:	SJQ 8957 D
and		SK	V 9995 Z			and		
and						and		
@ _	229 PA\	/ILIC	ON CIRCL	.E				
date	ad 31/03	3/202	20					

- I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
- 2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
- 3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you in the form of payment cheque made in favor to **Team AutoPro Pte Ltd**.

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

- 4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
- 5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
- 6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,

ONG AUTOMOTIVE
ROC: 53401601D
81 Tagore Lane #04-19 TAG A
Singapore 787502

Claimant Signature & Co's Stamp (if applicable)

Date: 31-03-22

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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 witholding 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.

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Date Of Report	31/03/2020 15:00
Date Of Accident	31/03/2020 09:30
Exact Location Of Accident	229 PAVILION CIRCLE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJQ8957D
Insured/Policyholder	
Name Of Registered Owner	ONG AUTOMOTIVE
Co Reg No	5XXXX601D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96493017
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	HD AVANTE 1.6A
Exact Purpose for which vehicle was being used at ime of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
/ehicle Category	PRIVATE HIRE
nsurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5114663861
Cover Note Number	
Driver	
lame of Driver	JAMES NG KOK BOON
IRIC No	SXXXX137A
Pate Of Birth	25/02/1991
Occupation	OUTDOOR
Pate Of Driving Pass	19/10/2015
Priving Experience	4 YEARS AND 5 MONTHS
Gender	MALE
flobile Number	(LOCAL) +65-96493017
ax Number	

NOEMAIL

Address

81 TAGORE LANE #04-19 TAG A

Postcode

787502

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 - 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

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)

Passenger 1

ambulance?

2 NAME:

: NA (GRAB HITCH)

GENDER:

: FEMALE

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

REFER 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

SKV9995Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NA

NRIC/Passport Number

Contact Number

NA

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.
- 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.
- 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:
 - 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.

ONG AUTOMOTIVE

ROC: 53401601D

81 Tagore Lane #04-19 TAG A

Singapore 787502

Policyholder's Signature

Date & Time:

Som

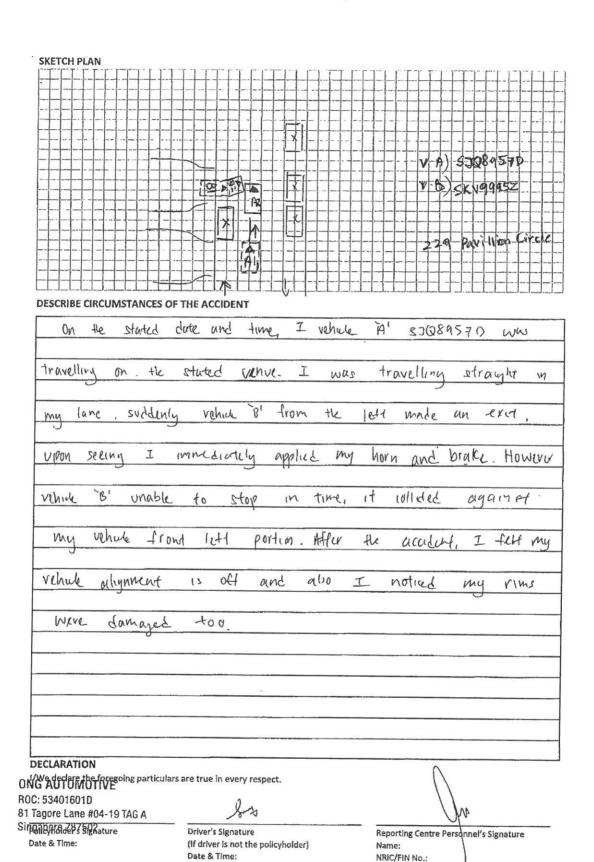
Driver's Signature (if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





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) ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA) MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5114663861-000040

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle

: SJQ8957D

Chassis Number

: KMHDU41BR9U761233

2. Name of Policyholder

: ONG AUTOMOTIVE

3 Effective Date of Insurance

: 09 Dec 2019

4 Expiry Date of Insurance

: 08 Dec 2020

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is 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 for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

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 1)	: N/A
EXCESS (SECTION 2)	: 5\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: TAI THONG LEE TRADING (PRIVATE) LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

: COWELL INSURANCE (AGENCY) PTE LTD (00000610380)

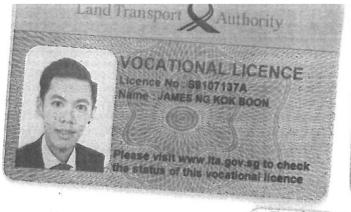
Date of Issue : 05 Dec 2019 15:27 hrs

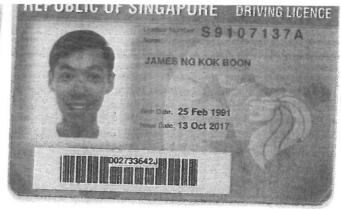
For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

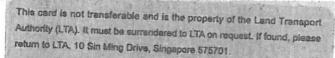
Authorised Officer

Chief Executive









Type 13

Description

PRIVATE HIRE CAR VL

Issue Date

12/02/2019



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

EFFECTIVE DATE

Metartycles =< 200 CC
Metarcycles between 201 CC and 400 CC
Metarcycles > 400 CC
Metarcycles > 400 CC
Metar cars < 2000 kg with << 7 passengers, exch driver, and motor tractors/vehicles =< 2500 kg

S / No.9000304126

S9107137A

NP 428A

Licence No:S9107137A



27-10-2017

APT BLK 488A TAMPINES AVENUE 9 SINGAPORE 520488

5827470