

Focus Auto Pte Ltd  
Business Reg. No. 201004495R  
GST Reg. No. 201004495R  
Tel: 6886 9097 Fax: 6481 9095  
Email : [claims@focusauto.com.sg](mailto:claims@focusauto.com.sg)

Date : 25/04/2020

BY E-MAIL / MAIL

Your ref: SHA3426K  
Our ref: SMK2299E

WITHOUT PREJUDICE

M/S First Capital Insurance Limited  
36 Robinson Road, #16-01 City House  
Singapore 068877

Dear Sir/Madam,

ACCIDENT INVOLVING : ( SMK2299E & SHA3426K ) ALONG SENGKANG EAST NEAR BLK 205  
DOA: 07/04/2020 TIME: 0730 HOURS

We refer to the above matter and write on behalf of HO HUAT KEONG, the registered owner of SMK2299E in respect of the above accident.

We are instructed that the above accident was caused by your insured's negligent driving / or management of your insured vehicle. Your insured's vehicle SHA3426K collided onto the side portion of our client vehicle SMK2299E. As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows:-

1. Cost of Repair	(\$2800 + 7% GST)	\$	2,996.00
2. Loss of Rental	(10 days × \$180)	\$	1,800.00
<b>Total Amount:</b>		<u>\$</u>	<u><b>4,796.00</b></u>


Enclosed are the following documents for your perusal.

- 1) Driver's driving license / Identity card
- 2) Certificate of Insurance
- 3) GIA report
- 4) GIA Search ( SHA3426K )
- 5) Original repair claim
- 6) Car Rental Agreement / Receipt

The demand herein is in respect of our client's for damages pertaining to his motor vehicle and any settlement following or subsequent to this demand shall not prejudice any claim in respect of personal injuries.

Kindly acknowledge receipt of the above said documents within 7 days and your favourable reply is deeply appreciated.

Yours faithfully,

  
\_\_\_\_\_  
Jenny Koh

## **Focus Auto Pte Ltd**

Business Reg. No: 201004495R

GST Reg. No: 201004495R

No 1 Kaki Bukit Ave 6 Autobay

#02-50 Singapore 417883

Date: 25/04/2020

**HO HUAT KEONG**

C/O NO 1 KAKI BUKIT AVENUE 6

AUTOBAY #02-48/50

SINGAPORE 417883

MOTOR VEHICLE NO : SMK2299E

HONDA ACCORD 2.0A

REPAIR CLAIM

\$ 2,800.00

**LUMP SUM**

Sub- total : \$ 2,800.00

7% GST : \$ 196.00

Total : \$ 2,996.00

SINGAPORE DOLLARS : TWO THOUSAND NINE HUNDRED AND NINETY-SIX ONLY.

## 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	07/04/2020 08:42
Date Of Accident	07/04/2020 07:30
Exact Location Of Accident	SENGKANG EAST NEAR BLK 205
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK2299E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HO HUAT KEONG
NRIC No	SXXXX104A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97536082
Alternative Phone No	OTHERS-97536082
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	ACCORD
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108942422 (DRIVO CLASSIC)
Cover Note Number	
<b>Driver</b>	
Name of Driver	HO HUAT KEONG
NRIC No	SXXXX104A
Date Of Birth	30/01/1938
Occupation	INDOOR
Date Of Driving Pass	28/12/1960
Driving Experience	59 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97536082
Fax Number	
Contact Number	OTHERS-97536082
Email Address	NOEMAIL

Address	BLK 533 #03-575 WOODLANDS DRIVE 14
Postcode	730533
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 - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

#### 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

I WAS DRIVING ALONG SENGKANG EAST NEAR BLK 205 ON THE LEFT LANE OF A TWO LANE ROAD. SUDDENLY A TAXI SHA 3426K CAME FROM BEHIND AND COLLIDED INTO THE REAR OF MY VEHICLE.

#### 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	SHA3426K
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	MR LIAN HER YARN
NRIC/Passport Number	
Contact Number	90080470
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.
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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.

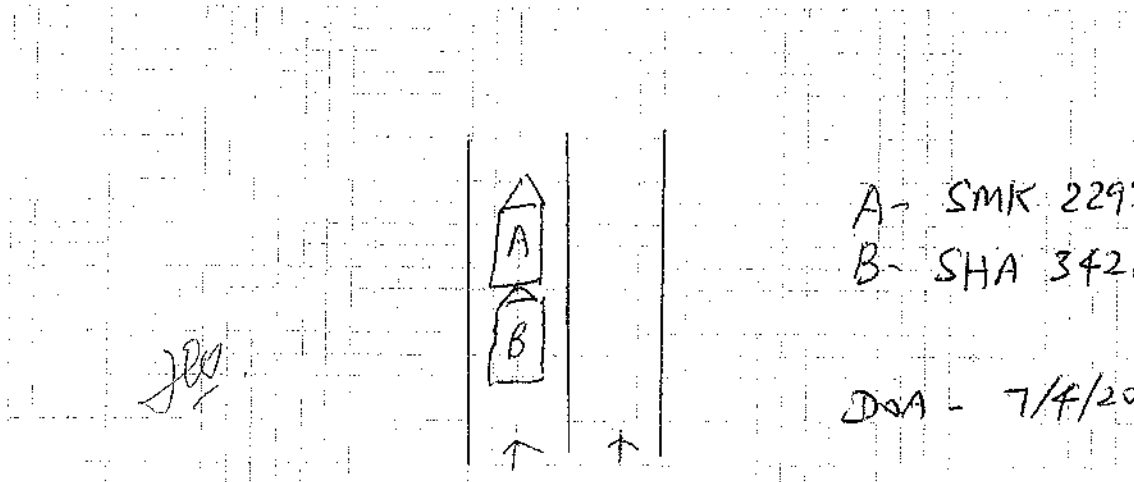
Policyholder's Signature  
Date & Time:

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

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



### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

## 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.:



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0828104A



Name  
HO HUAT KEONG

何發強

Race  
CHINESE

Date of Birth  
30-01-1938

Sex  
M

Country of Birth  
SINGAPORE

2187135

FOR CLAIMS &  
GIA REPORTING ONLY

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S0828104A  
Name: HO HUAT KEONG

Birth Date: 30 Jan 1938  
Issue Date: 13 Nov 2014

002366029C

FOR CLAIMS &  
GIA REPORTING ONLY

2187135



NRIC No: S0828104A



Blood Group: O+ Date of issue: 03-07-1994

Address  
APT BLK 533 WOODLANDS DRIVE 14 #03-575  
SINGAPORE 730533

NPIC No: S0828104A Date: 15-05-1998 No: 2606494

FOR CLAIMS &  
GIA REPORTING ONLY

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver, and other motor vehicles =< 2500kg 28 Dec 1960

NP 428A

Licence No: S0828104A

**Certificate of Insurance**

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1969  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: S108942422

Cover : -drive CLASSIC

1. Index mark and Registration Number of Vehicle : SMK2299E  
Chassis Number : MRHCP163DAP040038
2. Name of Policyholder : HO HUAT KEONG
3. Effective Date of Insurance : 17 Apr 2019
4. Expiry Date of Insurance : 08 May 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 business or profession.

This Policy does not cover

- (a) Use for hire or reward.  
(b) Use for racing, pace-making, reliability trial or speed-testing.  
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.  
(d) 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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: HO HUAT KEONG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/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)

Date of Issue : 17 Apr 2019 16:02 hrs

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive





# ULTIMATE CAR RENTAL

Blk 264 Tampines St 21 #01-106 Singapore 520264

Tel: 6844 4620 Fax: 6844 4625

Co. Reg. No. 53100391D

Top-up Sign  
2 Side Rocker panel 250p

## VEHICLE RENTAL AGREEMENT

No. RA **3690**

### HIRER'S PARTICULARS

Name: **HO HUAT KONG**

Address: **BLK 533 WOODLANDS DRIVE 14**

**#03-575**

**SINGAPORE 730533**

Contact Person:

Tel: **9753 6082**

### DRIVER'S PARTICULARS

Name: **HO HUAT KONG**

Address: **BLK 533 WOODLANDS DRIVE 14**

**#03-575**

**SINGAPORE 730533**

Tel No:

H/P No: **9753 6082**

P.P. / I.C. No.:

D/L. NO:

Date of Birth:

Date of Issue / Expiry:

Nationality:

Pl. Of Issue:

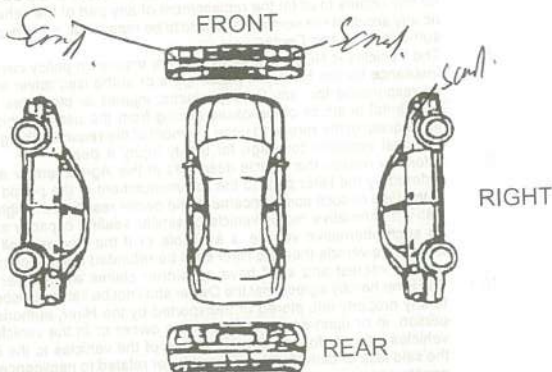
Occupation:

Driving Exp:

Refundable Deposits:

Cash/Nets/Cheque/VISA/MC Cards No.:

(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES



### ACCESSORIES CHECK

☐ Ashtray

☐ Cig Lighter

☐ S / Tyre

☐ STD Tools

☐ Jack

☐ Hub Caps

☐ Radio / Cass

☐ CD / Cartridges

☐ S / RIM

Vehicle No: **SKR 719 J**

Replace Veh No: **smk 2299 Z**

Mileage Out:

Mileage Out:

Make & Model:

Make & Model:

Auto / Manual

Auto / Manual

OUT: Date **07/04/20**

OUT: Time **1040 PM**

HIRE EXPIRY **16/04/20**

TIME EXPIRY **11:35 a.m**

### RENTAL CHARGES

Daily **10** @ \$ **180.00** **1800.00**

Weekly @ \$

Monthly @ \$

Hours @ \$

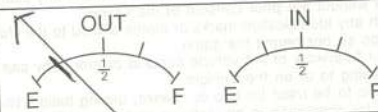
Others @ \$

CDW @ \$

PAI @ \$

Delivery Service

SUB-TOTAL \$



### EXTENSION

Collection Service

Misc.

ESTIMATED TOTAL RENTAL \$ **1800.00**

Sales Person Code:

Hirer is responsible for the first \$ **3500.00** excess for collision / damage to first party. (i.e) ULTIMATE CAR RENTAL Vehicles (including windscreen) and also first \$ **2500.00** excess for collision/damage to third party's vehicles for each and every accident / damage

\* Additional Excess Loading

HIRER's Signature **[Signature]**

Additional Driver's Signature **[Signature]**

I/We agree to the terms and conditions above, overleaf and that all information given is true and correct in all respect. My/Our Driving licence(s) is/are current and not disqualified from driving. You may charge all amount due on the rental to my/our credit card.

### IMPORTANT

- ONLY PERSONS ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- VEHICLES IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY ULTIMATE CAR RENTAL.
- IN THE EVENT OF AN ACCIDENT, THE HIRER OR AUTHORISED DRIVER:
  - shall report all accidents involving the said vehicle to the Owner immediately
  - shall take immediate steps to complete and sign Form Mar 1 (Motor Accident Report form) and do all other acts required in compliance with the "NON-INJURY MOTOR ACCIDENT REPORT SCHEME" (the form will be made available when the accident is reported to the owner)
  - shall report to the police within 24 hours from the occurrence, the following types of accidents:-
    - injury case;
    - non-injury case involving a Government vehicles or damage to Government property;
    - non-injury case involving a foreign vehicle (to obtain their motor insurance, policy, Passport No./Name of the driver, Vehicle number, Log card and Vehicle road tax informational);
    - non-injury case involving a pedestrian or cyclist.

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 BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO ULTIMATE CAR RENTAL 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	DEPOSIT REFUND	SIGNATURE OF HIRER/DRIVER
<b>16/04</b>	<b>1135 AM</b>					<b>[Signature]</b>

# ULTIMATE CAR RENTAL

NO. 1 KAKI BUKIT AVE 6, #02-50 AUTOBAY@KAKI BUKIT

SINGAPORE 417883

Business Reg. No. 53100391D

Tel No. : 6844 4620 Fax No. : 6844 4625

## Bill To #

**FOCUS AUTO PTE LTD**

1 KAKI BUKIT AVE 6

#02-48/50 AUTOBAY @ KAKI BUKIT

SINGAPORE 417883

Tel : 6844 4620 Fax : 6844 4625

## INVOICE

No. : INV004078

Date : 22/04/2020

P/O Ref. : SKZ7119D

Terms : 30 days

Page : 1

**RA3690 RENTAL 07/04/20-16/04/20**

**TP : SMK2299E**

No.	Code	Description	Qty	Price	Discount	Tax	Amount
1	SKZ711 9D	HONDA ACCORD 2.0 A	10	120.00			1,200.00

SINGAPORE ONE THOUSAND TWO HUNDRED ONLY

Subtotal	1,200.00
Discount	0.00
Nett	1,200.00
Tax	0.00
Grand Total	S\$ 1,200.00



FOR ULTIMATE CAR RENTAL

CUSTOMER SIGNATURE & STAMP