



INDIA INTERNATIONAL INSURANCE PTE LTD
 Co. Reg. No. 198703792k | GST Reg. No. M2-0078806-X
 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
 Office (65) 63476100 Email insure@iii.com.sg
 Fax (65) 62244174 Website www.iii.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

*** This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further, the settlement terms herein should not be used as an Evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this action.

India Ref: MFL2020D0000924
 Claimant Ref: SLX1470B

We/I, CHOO MOTOR SPRAY PAINTER ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of Surveyor) with respect to the amount claimed for S\$ 27,300.00 (global sum) (~~repair cost~~), ~~cost of use/rental~~, ~~cost~~ (~~search fee~~), vehicle no. SLX1470B that was damaged pursuant to the accident which occurred on 06/05/2020 (date) at CHIN SWEE ROAD (location) involving vehicle no. GBB9223E (insured vehicle). This is pursuant to the inspection conducted on 08/05/2020 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner KAMALA DEWI D/O POOLOGANATHAN ("the third party claimant") of vehicle no. SLX1470B to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SLX1470B (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 27,300.00 to CHOO MOTOR SPRAY PAINTER.

Dated this 12 day of 08 20

CLAIMANT:

Signature: _____

Signed by "the workshop" (with chop)

Name: _____

TANG JUN ZHONG

NRIC: _____

S8704986H

Address: _____

1 Kaki Bukit Avenue 6, #01-46/48/50
 AutoBay, Singapore 417883

Nationality: _____

Tel: 6746 5405 / 6745 2063 Fax: 6745 8520

Occupation: _____

Email: general@fastechauto.com.sg

WITNESS:

Signature: _____



Signed by appointed Surveyor

Name: _____

LKK AUTO CONSULTANTS PTE LTD

NRIC: _____

199607198R

Address: _____

51 UBI AVE 1, PAYA UBI INDUSTRIAL PARK

#02-25 SINGAPORE 408933

Nationality: _____

Occupation: _____

Print Received Message

This mail is associated with :

***SLX1470B (MFL2020D0000924)
[GBB9223E]**

TP

KAMALA DEWI D/O POOLOGANATHAN

May 6 2020 12:00AM

[MILLION AUTO RENTAL PTE LTD]

Choo Motor Spray Painter

From India International Insurance Pte Ltd (HQ) (III_SG), sent on **03/08/2020**
10:47 AM.
To LKK_HQ
Subject Alert - Adj Mandate Approved (S\$27927.45) - SLX1470B - Claim Handler:
Sundari Nagarajan

Approved:27927.45.

CHOO MOTOR SPRAY PAINTER

1 Kaki Bukit Ave 6 #01-39 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

Date : 30.05.2020

India International Insurance Pte Ltd

64 Cecil Street

#04-05 IOB Building

Singapore 049711

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SJX 1470B / GBB 9223E ON.06.05.2020

We are the authorized repair workshop for the owner of motor vehicle no: **SJX 1470B** , which was involved in the captioned accident with your insured vehicle no: **GBB 9223E** . The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1) Cost of Repair	\$	26,000.00
2) Loss of Use (8 days + 1 Public Holiday + 1 Sunday X \$ 250)	\$	2,500.00
3) Towing Fee	\$	120.00
4) LTA Search Fee	\$	7.45
	<u>\$</u>	<u>28,627.45</u>

We enclosed herewith the following documents to support the claims:

- | | |
|--------------------------|----------------------------------|
| a) Final Repair Invoice | b) Towing Bill |
| c) LTA Search Result | d) Letter of Authorisation ,etc |
| e) GIA Report | f) I/C & Driving License |
| g) Insurance Certificate | h) Vehicle Registration Log Card |

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Jason Tang (jason@fastechauto.com.sg)

TAX INVOICE

CHOO MOTOR SPRAY PAINTER

1 Kaki Bukit Ave 6 #01-39 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

India International Insurance Pte Ltd

64 Cecil Street

#04-05 IOB Building

Singapore 049711

Attn : Motor Claim Department

Tax Invoice : 21828

Date : 30.05.2020

Vehicle No : SLX 1470B

Make/Model : Mercedes S320L

Chassis/Eng# :

Accident Date : 06.05.2020

Claim No :

Reference : 0520 -21828

Policy No :

	S\$	Amount
To proceed on lump sum repair	S\$	26000.00

E. & O. E.

Total : S\$

26000.00



for CHOO MOTOR SPRAY PAINTER

> Back to OneMotoring



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

Print Date/Time : 06 May 2020 / 16:14:07

Receipt Date/Time : 06 May 2020 / 16:14:07

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200506-002659

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 - GBB9223E As at 06 May 2020/13:57:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - GBB9223E Enquiry Fee 20200506161312926333	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				
	20200506161319116	Direct Debit: eNETS Debit (Internet Banking)		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.



PEOPLE'S VEHICLE SERVICE PTE LTD

BLK 3023A, UBI ROAD 1 #01-60, SINGAPORE 408717

TEL : 6743 1987 (3 LINES) FAX : 6743 0013

Reg No: 200415052W

Date, 6/5/20

寶號 Messrs: Cash

車號 Vehicle No: SX1470B 車型 Model No: M/B

由 From: ~~SH~~ JIN KUKOH

到 To: Auto bay

其他 Remark: King Dolly

時間 Time : 1400 - / - 1510 AMOUNT: \$ 120/-

注意：本公司對所拖之車輛，在進行中如有任何損失或破壞，一概由車主自行負責。

NOTE: Vehicle is towed at owner's risk. The company accepts no responsibility for damages or other misdemeanour to your vehicle whilst being towed.

經手人 Authorised by: SENG 4363 收貨人 Received by:

DATE : 06.05.2020

TO : India International Insurance Pte Ltd.

RE : ACCIDENT INVOLVING VEHICLE NO. SLX 1470B / GBB 9223E

ALONG Chin Swee Rd (In Front oftram Secondary School)

ON 06.05.2020

I/We, Kamala Dewi D/o Poolaganathan

of (NRIC No./ROC No.) S 7010450 D

of 21 Kim Keat Road # 20-07 Singapore 328805

owner of vehicle no. SLX 1470B in consideration of M/s CHOO MOTOR SPRAY

PAINTER repairing my/our vehicle GBB 9223E at my/our instruction and hereby

authorise M/s CHOO MOTOR SPRAY PAINTER to demand claim settlement whatever amount settled/payable by the Insurance Company and/or third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use, etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and all claimed and/or settled shall belong to them absolutely.

I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.

Signature of Owner : 

Name of Owner : Kamala Dewi D/o Poolaganathan

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	08/05/2020 16:17
Date Of Accident	06/05/2020 14:00
Exact Location Of Accident	CHIN SWEE RD(IN FRONT OUTRAM SECONDARY SCHOOL)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX1470B
Insured/Policyholder	
Name Of Registered Owner	KAMALA DEWI D/O POOLAGANATHAN
NRIC No	SXXXX450D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91891430
Alternative Phone No	OTHERS-91891430

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S320L AUTO
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

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA331410/1
Cover Note Number	

Driver

Name of Driver	KAMALA DEWI D/O POOLAGANATHAN
NRIC No	SXXXX450D
Date Of Birth	01/04/1970
Occupation	INDOOR
Date Of Driving Pass	23/03/1992
Driving Experience	28 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-91891430
Fax Number	
Contact Number	OTHERS-91891430
EMail Address	NOEMAIL

Address 21 KIM KEAT ROAD #20-07 SPORE 328805
 Postcode
 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 - CROSS JUNCTION
 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? YES
 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

REFER TO SKETCH PLAN

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 GBB9223E
 Vehicle Make/Model/Colour NISSAN / NV200 1.5L MT ABS AIRBAG 2WD 6DR
 Details Of Properties
 Vehicle Category GOODS VEHICLE
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name KAMALA DEWI D/O POOLAGANATHAN

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLX1470B

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan

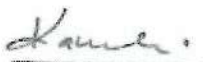
SKETCH PLAN

IMPORTANT NOTICE

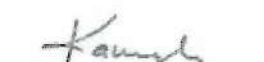
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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:



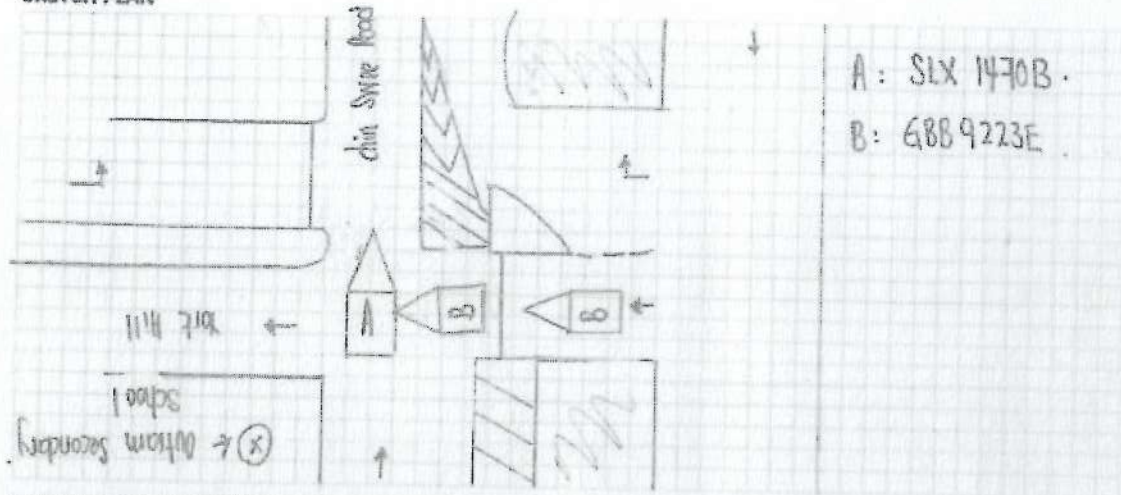
Driver's Signature
(if driver is not the policyholder)
Date & Time:



Reporting Centre (Insurer's) Signature
Name: Shuhing
NIC/FIN No: _____

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 06.05.2020 at about 13.57 pm, I was traveling along Chin Swee Road (In front Outram Secondary School) . I was travelling straight on the main road. Suddenly Vehicle B dashed out the minor road without stopping at the stop line and hit my vehicle.

* Please note : The Driver of Vehicle B did not stop at the stop line to check for an oncoming vehicle.

DECLARATION

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

Kamela
 Policyholder's Signature
 Date & Time:

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

[Signature]
 Reporting Centre Personnel's Signature
 Name: S. Rajah
 RUC/PC No: ...

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7010450D



Name

KAMALA DEWI D/O
POOLOGANATHAN

Race

CEYLONESE

Date of birth

01-04-1970

Sex

F

Country of birth

SINGAPORE



Kamala

For Insurance Reporting And
Claim Purposes Only

3890079



NRIC No. S7010450D



Date of issue

22-05-2006

21 KIM KEAT ROAD #20-07
SINGAPORE 328805

NRIC No: S7010450D

Date: 23/08/2018

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7010450D

Name:

KAMALA DEWI D/O
POOLOGANATHAN

Birth Date: 01 Apr 1970

Issue Date: 11 Dec 2017



For Insurance Reporting And
Claim Purposes Only

Kamala

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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	23 Mar 1992

For Insurance Reporting And
Claim Purposes Only





redefining / insurance

AXA Insurance Pte Ltd
 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

account number
05089

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960-Road Transport Act, 1987 (Malaysia)
 -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	KAMALA DEWI D/O POOLOGANATHAN	Certificate number	GA331410 / 1
Cover	Comprehensive	Chassis number	WDD2221622A349514
Plan name	Essential	Engine number	27682430690829
NCD applicable	0%		
Vehicle registration number	SLX1470B		
Period of Insurance	from 09/03/2020 to 08/03/2021 (both dates inclusive)		
Finance loan company	MAYBANK		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
- (b) Any Named Driver as stated in the Policy:
 - 1. SAINTHAN AMUTHAN S/O RENGANATHAN
- (c) Any person who is driving on the Policyholder's order or with their 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.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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	Basic Own Damage Excess	SGD 900.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	450D
Vehicle Details	
Vehicle No.:	SLX1470B
Vehicle to be Exported:	No
Intended Deregistration Date:	06 May 2020
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	S320L AUTO
Primary Colour:	Black
Manufacturing Year:	2017
Engine No.:	27682430690829
Chassis No.:	WDD2221622A349514
Maximum Power Output:	200.0 kW (268 bhp)
Open Market Value:	\$84,865.00
Original Registration Date:	09 Mar 2018
First Registration Date:	09 Mar 2018
Transfer Count:	0
Actual ARF Paid:	\$124,757.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	08 Mar 2028
PARF Rebate Amount:	\$93,567.00
Intended COE Rebate Details	
COE Expiry Date:	08 Mar 2028
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$48,011.00
COE Rebate Amount:	\$36,843.00
Total Rebate Amount:	\$130,410.00

The information contained herein is correct as at 06 May 2020

OK