

# 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

12 October 2020

Our Ref : CLM16249 / SLW2552Y / MAY-16/2020

**FWD SINGAPORE PTE LTD**  
6 TEMASEK BOULEVARD  
#18-01 SUNTEC TOWER FOUR  
SINGAPORE 038986  
**ATTN: MOTOR CLAIMS DEPARTMENT**

Dear Sir @ Madam,

**Re: Accident involving SLW2552Y & SMC2176T on 21/05/2020**  
**Along Mandai Road**

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SMC2176T** 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	\$	2,782.00	(Include 7% GST)
Loss of rental	\$	307.80	(\$76.95 X 4 Days)
Additional 2 days loss of use for pre repair	\$	153.90	(\$76.95 X 2 Days)
3rd party GIA report	\$	29.00	
LTA Search	\$	7.45	
	S \$	<u>3,280.15</u>	

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM16249
- 2) Grab Rentals Pte Ltd - Letter of Understanding
- 3) Tax Invoice of 3rd party GIA report
- 4) LTA search
- 5) Letter of Authorisation to Act
- 6) GIA report of SLW2552Y

We look forward to your prompt reply.

Yours faithfully,



**N-51 AUTOMOTIVE PTE LTD**  
S.Y.NEO  
Director



P.I.C - Melody Chin  
Reply to :huixin@n51.com.sg



# N-51 AUTOMOTIVE PTE LTD

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2 Kaki Bukit Ave 2  
#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

FWD SINGAPORE PTE LTD  
6 TEMASEK BOULEVARD  
#18-01 SUNTEC TOWER FOUR  
SINGAPORE 038986

GRAB RENTALS PTE LTD  
18 SIN MING LANE #01-08 MIDVIEW CITY  
SINGAPORE 573960

## TAX INVOICE

Date : 04/09/2020  
Date in : 01/06/2020  
Vehicle Num. : SLW2552Y  
Make/Model : HONDA VEZEL HYBRID 1.5 AUTO-2016  
Chassis/Eng# : RU31222435/LEB5922448  
Accident Date : 21/05/2020  
Claim No : CLM16249  
Reference : MAY-16/2020  
Policy No. : A29141713MKF (31/12/2020)

LUMPSUM REPAIR BILL  
REF : CLM16249-N51 DATED 01/06/2020  
BY DIRECT

Amount S\$  
2,600.00

E. & O.E.	Sub S\$ :	2,600.00
	Add GST ( 7% ) S\$ :	182.00
	Total Amount S\$ :	<u>2,782.00</u>



for N-51 AUTOMOTIVE PTE LTD



## CONFIDENTIAL



Grab Rentals Pte Ltd  
201617200G  
18 Sin Ming Lane  
#01-08 Midview City  
Singapore 573960

Date of Accident:	21 / 05 / 2020	Time:	10:45 HRS
Accident Location:	MANDAI ROAD		

## Rental information of the accident vehicle

Registered Owner:	Grab Rentals Pte Ltd
Vehicle Number:	SLW 2552 Y
Hirer Name:	CHUA HOCK LEONG
Hirer NRIC last 4 Digit: (XXXXB)	4141
Rental Rate: (inclusive GST)	\$76.95

## Details of repair

Date in:	01 / 06 / 2020
Date out:	03 / 06 / 2020

We hereby authorize our appoint workshop, N51 Automotive Ptd Ltd to handle any settlement of claims and receiving settlement payments in respect of the said accident.



Grab Rentals – Accident Team



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-20-065956

Date of Request: 27/05/2020

Your Ref No:

ONLINE PURCHASE BY EMAIL

N-51 AUTOMOTIVE PTE LTD (KAKI BUKIT AUTOHUB)  
KAKI BUKIT AUTOHUB 2 KAKI BVUKIT AVE 2 #01-18  
SINGAPORE 417921

Dear Sir/Madam,

Your Vehicle No: SLW2552Y

Date of Accident: 21/05/2020

Place of Accident: MANDAI RD

Involving Vehicle No: SMC2176T

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

## TAX INVOICE

Our Ref No: GR-20-065957

Date of Request: 27/05/2020

Your Ref No:

ONLINE PURCHASE BY EMAIL

N-51 AUTOMOTIVE PTE LTD (KAKI BUKIT AUTOHUB)  
KAKI BUKIT AUTOHUB 2 KAKI BVUKIT AVE 2 #01-18  
SINGAPORE 417921

Dear Sir/Madam,

Date of Accident: 21/05/2020

Vehicle No: SLW2552Y

Place of Accident: ALONG MANDAI ROAD

Involving Vehicle No: SMC2176T

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SMC2176T	ALONG MANDAI ROAD	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

## 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	21/05/2020 13:49
Date Of Accident	21/05/2020 10:50
Exact Location Of Accident	MANDAI ROAD TOWARDS BKE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMC2176T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MUI PAK KEUNG
<b>Vehicle Particulars</b>	
Manufacturer	AUDI
Model	Q3-1.4 TFSI (A)
Vehicle Category	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00009129
Cover Note Number	
<b>Driver</b>	
Name of Driver	YAU YEN NEE
NRIC No	SXXXX375Z
Address	20 HILLVIEW TERRACE #08-09

### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR

### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

### Circumstances of Accident

KINDLY 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	SLW2552Y
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> Back to OneMotoring



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

Print Date/Time : 21 May 2020 / 16:48:10

Receipt Date/Time : 21 May 2020 / 16:48:10

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-200521-002567

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SMC2176T As at 21 May 2020/10:45:00 Insurance Co: FWD SINGAPORE PTE. LTD.				
1	Insurance Enquiry - SMC2176T Enquiry Fee 20200521164704171798	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				
	411911XXXXXX0379	eNETS Credit Card		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.

### AUTHORISATION TO ACT

I, Grab Rentals Pte Ltd of 18 Sin Ming Lane #01-08 Midview City Singapore 573960, owner of SLW2552Y hereby authorize N-51 Automotive Pte Ltd to act for me with respect to my claim for repair costs and / or rental and / or loss of use ('claim') for my vehicle no. SLW2552Y that was damaged pursuant to the accident which occurred on 21/05/2020 along Mandai Road involving vehicle no/s SMC2176T.

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 21 of MAY 2020

  
Signed by 'the third party claimant'  
(with chop if applicable)

  
Signed by 'the workshop'  
(with chop)

## 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	21/05/2020 12:45
Date Of Accident	21/05/2020 10:45
Exact Location Of Accident	ALONG MANDAI ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW2552Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	2XXXXX200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-31388644

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 HYBRID X (A)

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 HIRE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	29141713

Cover Note Number

### Driver

Name of Driver	CHUA HOCK LEONG
NRIC No	SXXXX414I
Date Of Birth	19/12/1970
Occupation	OUTDOOR
Date Of Driving Pass	08/10/1993
Driving Experience	26 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97286866
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 796 YISHUN RING RD #11-2368
Postcode	760796
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LESSEE
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	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)	2
Passenger 1	NAME: : NOT APPLICABLE GENDER: : MALE

#### 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

ON 21/05/2020 AROUND 1045HRS, I WAS TRAVELLING ALONG MANDAI RD TOWARDS BKE AT MANDAI LAKE RD JUNCTION. I WAS ON THE EXTREME RIGHT LANE AND WAS STATIONARY AT A RED LIGHT JUNCTION. SUDDENLY, I FELT AN IMPACT FROM MY VEHICLE'S REAR. VEHICLE B'S FRONT PORTION HIT INTO MY VEHICLE'S REAR PORTION. MY VEHICLE'S REAR PORTION IS SLIGHTLY DAMAGED. THERE WAS NO INJURIES.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD WITH WORKSHOP
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMC2176T
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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.:

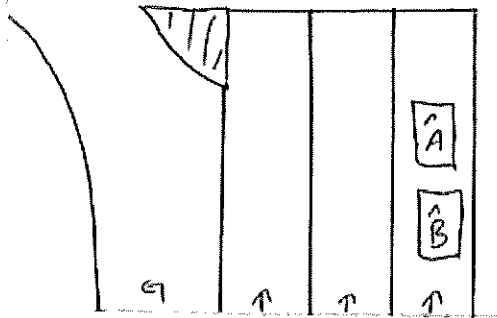
## Sketch Plan #2

### SKETCH PLAN

Along Mandai Rd towards BKE at Mandai Lake Rd Junction

veh A: SLW 2552Y

veh B: SMC 2176T



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 21/5/20 around 1045hrs, I was travelling along Mandai Rd towards BKE at Mandai Lake Rd Junction. I was on the extreme right lane and was stationary at a red light junction. Suddenly, I felt an impact from my vehicle's rear. veh B's front portion hit into my vehicle's rear portion. My vehicle's rear portion is slightly damaged. There was no injuries.

### 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.: