

DAVID NAYAR AND ASSOCIATES

Advocates & Solicitors
Notary Public & Commissioner for Oaths

David Nayar
Josephine Costan
Jade Wu

Writer's Name: Jade Wu
DID: +65 94789110
Email: jadewu@dna-legal.com

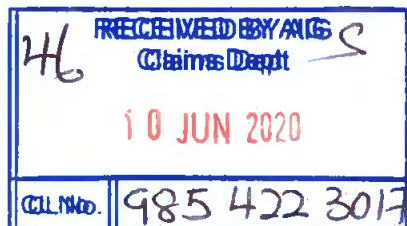
Our Ref: JW.10571.19 (032)
Your Ref: *To be advised*

8 June 2020

**ATTN: MOTOR CLAIMS DEPARTMENT
AIG ASIA PACIFIC INSURANCE PTE. LTD**

78 Shenton Way
#07-16
Singapore 079120

BY AIR REGISTERED MAIL



MR YIP SOON FATT
32 Highland Close
Singapore 549245

BY CERTIFICATE OF POSTING

Dear Sirs

SG 003

NAME OF CLAIMANT: **MR CHAN HUA ENG**
C/O M/S TEAMWORK GARAGE PTE LTD
53 UBI AVENUE 1
#01-23/24
PAYA UBI INDUSTRIAL PARK
SINGAPORE 408934

Accident involving SLX1002U (our client's vehicle) and SKM9605Y on 15 March 2020 at 4:25pm at Eunos Link Towards Hougang Avenue 3

1. We are instructed by the abovenamed to claim damages against you in connection with a road traffic accident on 15 March 2020 at Eunos Link Towards Hougang Avenue 3 involving our client's vehicle registration number SLX1002U and vehicle registration number SKM9605Y owned and/or driven by you or driven by your authorized driver at the material time.
2. We are instructed that the accident was caused by you or your authorised driver's negligent driving and/or management of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:

	Particulars	S\$
a)	Costs of Repair	7,704.00
b)	Loss of use (10 days x \$120.00)	1,200.00
c)	LTA Search Fee – Vehicle & Owner Information	7.49
d)	Costs	800.00
	Total	9,711.49

3. A copy of each of the following supporting documents is enclosed:
 - a) Our client's full Singapore Accident Statement;
 - b) Our client's Traffic Police Report;
 - c) The repairer's invoice;
 - d) Surveyor report and invoice; and
 - e) LTA search.
4. Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

5. Please note that you or your insurer should send to us an acknowledgement of receipt within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.*
6. Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully,

DNEA.

David Nayar and Associates

Encs

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	16/03/2020 19:41
Date Of Accident	15/03/2020 16:25
Exact Location Of Accident	EUNOS LINK TWDS HOUGANG AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX1002U
Insured/Policyholder	
Name Of Registered Owner	CHAN HUA ENG
NRIC No	SXXXX439Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91993968
Alternative Phone No	OFFICE-91993968

Vehicle Particulars

Manufacturer	KIA
Model	CERATO K3 1.6A SUNROOF
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800023811
Cover Note Number	

Driver

Name of Driver	CHAN YI QIN TIFFANY
NRIC No	SXXXX472A
Date Of Birth	28/09/1995
Occupation	INDOOR
Date Of Driving Pass	17/05/2017
Driving Experience	2 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93390318
Fax Number	
Contact Number	OFFICE-93390318
Email Address	NOEMAIL

Address	6 HOUGANG STREET 92
	#02-01
Postcode	538685
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408665 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200315/7012.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKM9605Y
Vehicle Make/Model/Colour	AUDI
Details Of Properties	
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)

DETAILS OF INJURED PERSON 1

Name CHAN YI QIN TIFFANY

Approximate Age

Injuries Sustain NECK & BACK

Injured person in which vehicle? SLX1002U

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN


IMPORTANT NOTICE

- 1) Please report correctly on the details of the accident to speed up the claims process.
- 2) This form must be completed by the policy holder and/or the authorised driver.
- 3) Information provided must be as truthful and accurate as possible. Any willful 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 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.
- 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 the (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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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 envelope/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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) For complying with requirements under my regulations, laws or court orders.

Policy holder's signature
Date / time:



Driver's signature
(if driver is not policy holder)
Date / time:



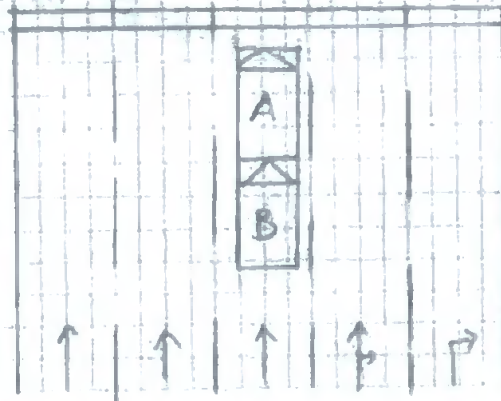
reporting centre personnel's Signature
Date / time:

Accident Sketch Plan

SKETCH PLAN

VEN A: SLX10024

VEN B: SEM 16054



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police Report

DECLARATION

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

Policy holder's signature
Date & time:

Driver's signature
(If driver is not policy holder)
Date & time:

reporting centre personnel's Signature
NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20200315/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3
Report No. T/20200315/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/03/2020 18:45		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: CHAN YI QIN TIFFANY			Address: 6 HOUGANG STREET 92 #02-01 SINGAPORE 538685		
ID Type / ID No.: NRIC NO / S9536472A			Contact No.: Home/Office:		Mobile: 93390318
Nationality: SINGAPORE CITIZEN			Email: find.tiffanychan@gmail.com		
Sex: Female	Age: 24	Date of Birth: 28/09/1995	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Marketing and sales representative (technical)			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident					
Type of Accident:	Injury Others:	Drink Drive: No	Date/Time of Accident: 15/03/2020 18:30	Type of Location: X-Junction	
Location: EUNOS LINK					
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLX1002U	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**



T/20200315/7012

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20200315/7012

CONTINUATION OF REPORT

Driver			
Name	CHAN YI QIN TIFFANY		ID No: S9536472A
Related Vehicle	SLX1002U (Car)		Contact No: 93390318
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

Brief Details:

At 15/03/2020 at about 1630hrs, I was traveling straight on Eunos link towards Hougang in my car (SLX1002U). The traffic light turned amber and I stepped on my brakes. Suddenly I felt a very huge impact from my rear. My car propelled 1 meter forward. Then I realised I was hit by (SKM9805Y). I went to mount Alvernia to see a doctor and was awarded 5 days of medical leave.

Police Report



**SINGAPORE
POLICE FORCE**



T720200315/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470001

3 of 3

Report No: T720200315/7012

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Signature Of Interpreter:
Not applicable

Date/Time:
15/03/2020 18:45

Officer In Charge Of Case:
TP / TPHQ /
JUREMAH BINTE AHMAD
Contact No.: 65476219

Classification Of Case:

Authentication Stamp
HP158

Accident Photo



Accident Photo



Accident Photo



Accident Photo



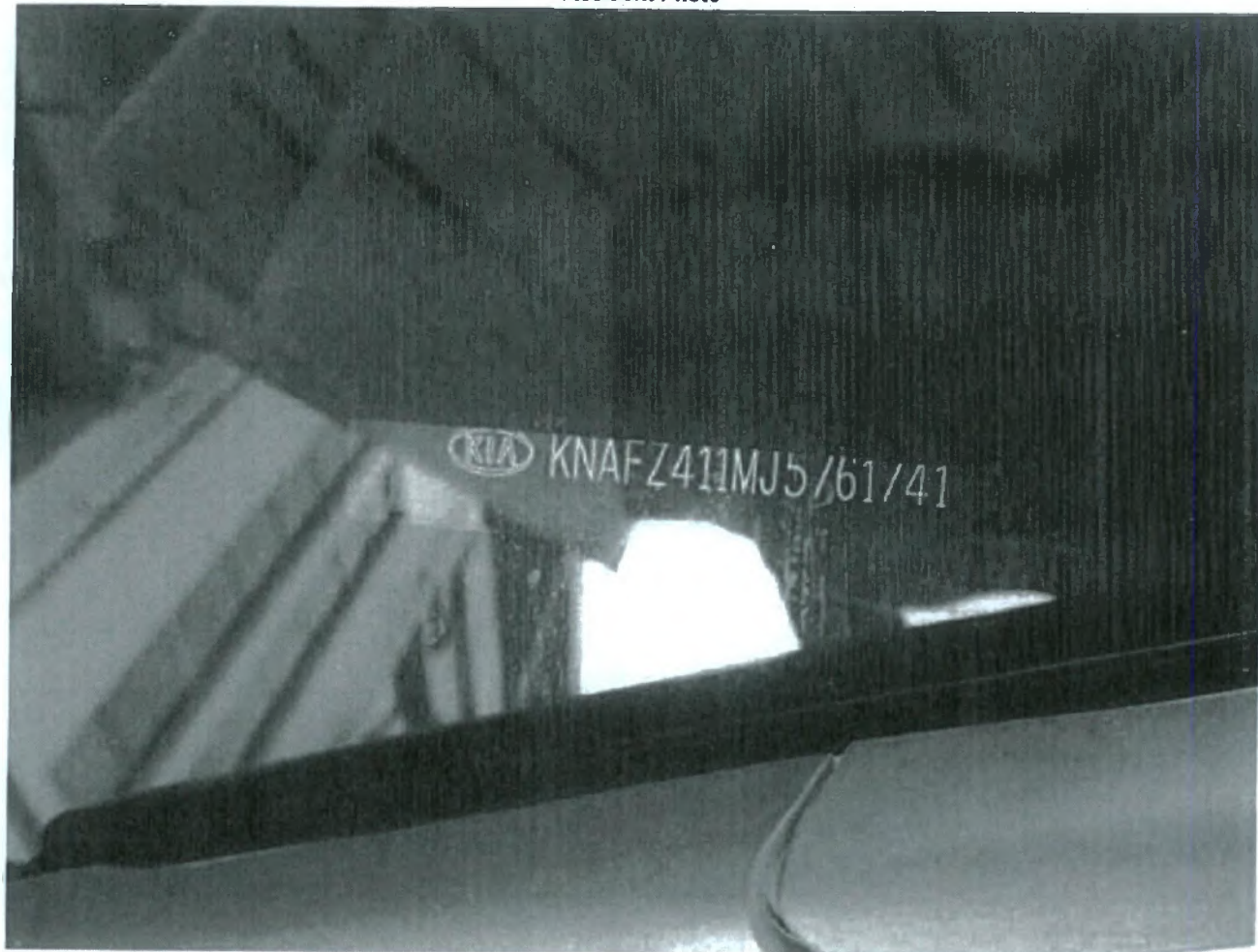
Accident Photo



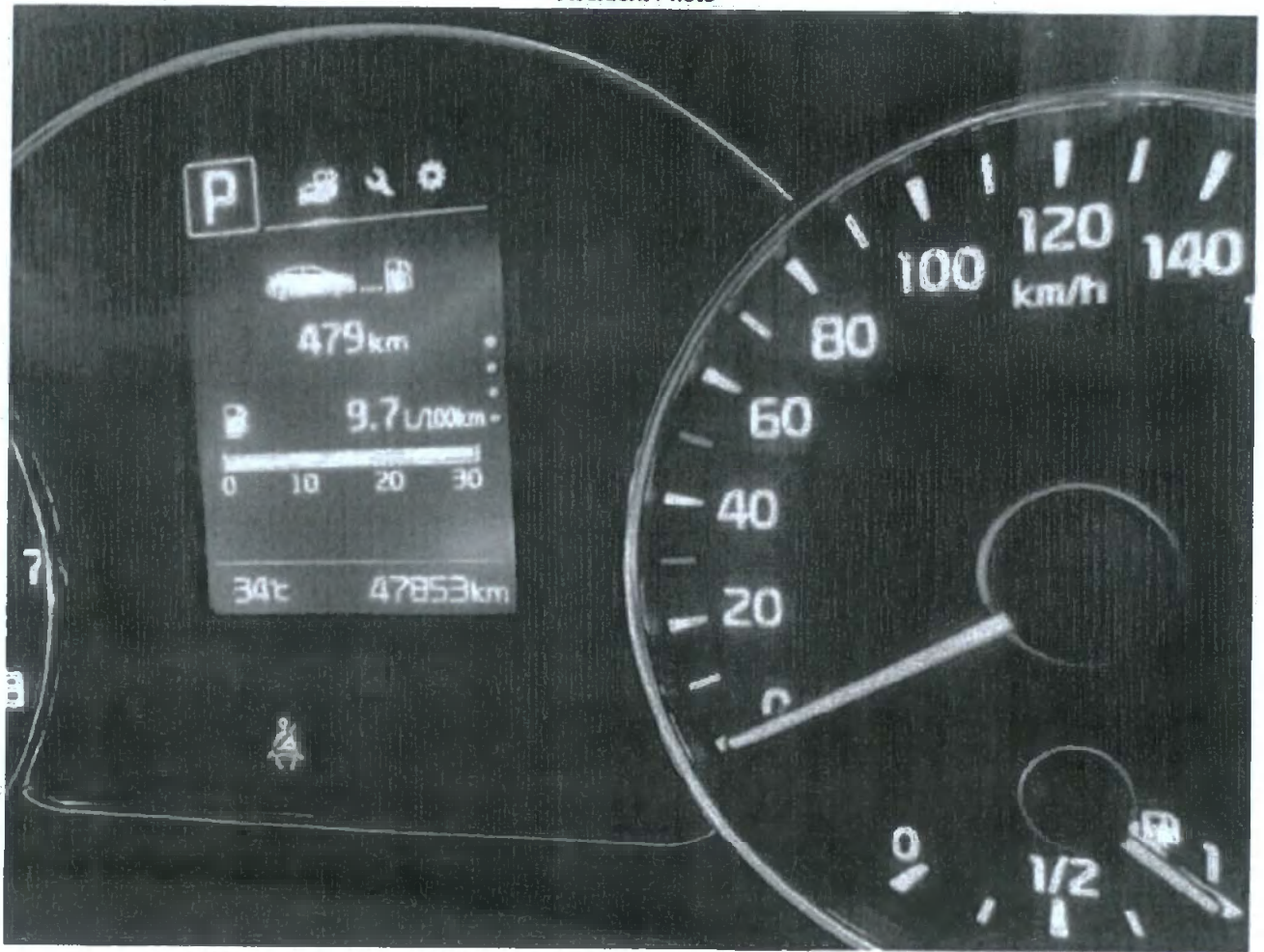
Accident Photo



Accident Photo



Accident Photo



PHOTOCOPY

WG APPRAISAL SERVICES

Blk 224B, Compassvale Walk, #07-647, Singapore 542224

Email: Winsongkk@hotmail.com Contact: 9747 0063

Company Register No. 53326249J

Our Ref: WG/TP/2020-109
Invoice No: TP/TWG/2020-109
Vehicle No: SLX1002U
Attn: CHAN HUA ENG
Company: TEAMWORK GARAGE PTE LTD
Address: 53 Ubi Ave 1, #01-24, Paya Ubi Industrial Park . Singapore 408934

Date 30 March 2020

Invoice

Surveyor Fee: S\$290
Re-inspection Fee: S\$50
Transport: S\$50
Photographs: S\$89/- (@ \$1 per photo, total 89 photos)
Total: S\$479

Surveyor:
Signature:
Date:



WG APPRAISAL SERVICES

Blk 224B, Compassvale Walk, #07-647, Singapore 542224
Email: winsongkk@hotmail.com Contact: 9747 0063
Company Register No. 53326249J

ACCIDENT DAMAGED VEHICLE INSPECTION REPORT

M/S : CHAN HUA ENG
C/O TEAMWORK GARAGE PTE LTD
53 Ubi Ave 1, #01-24, Paya Ubi Industrial Park
Singapore 408934

HUA ENG : 30 March 2020
Our Ref : WG/TP/2020-109

REFERENCE PARTICULARS

Date of Accident : 15 March 2020
Date of Inspection : 18 March 2020

Type of Inspection : Third Party Claim
Date of Re-Inspn : 19 March 2020

VEHICLE PARTICULARS

Registration No : SLX1002U
Make : KIA
Model : CERATO K3 1.6A SUNROOF
Year : 2017

Engine No : G4FGHH691700
Chassis No : KNAFZ411MJ5761741
Odometer : 47857km
Colour : Blue

CONDITION OF VEHICLE (STATIC CHECKS AT TIME OF INSPECTION ONLY)

Engine condition : Good
Foot Brake : Serviceable
Hand Brake : Serviceable

General Body Work : Good
Steering : Serviceable
Lightings : Serviceable

TYRE CONDITION (Remaining estimated life of tyre in mm)

	<u>Make</u>	<u>Size</u>	<u>Thread Balance</u>
Front Near side	: Yokohama	215/45ZR17	5 mm
Front Off Side	: Yokohama	215/45ZR17	5 mm
Rear Near Side	: Yokohama	215/45ZR17	5 mm
Rear off Side	: Yokohama	215/45ZR17	5 mm

GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained damage at the rear right portion.
For details, refer to assessment for repairs and photographs attached.

ASSESSMENT SUMMARY

Our assessment of the repair costs to pre-accident condition was **S\$7,200.00 net** at lump sum basis. (Subject to GST if applicable)

Under normal circumstances, estimated period required for repairs : Nine (09) working days.

Enclosed Fifty-seven (57) photographs depicting damage to the vehicle.

Inspection conducted at : TEAMWORK GARAGE PTE LTD
53 Ubi Ave 1, #01-24, Paya Ubi Industrial Park, Singapore 408934

In accordance to your instruction, we have **not** authorise repairs and inspection
was conducted strictly on a **"WITHOUT PREJUDICE BASIS"**.

VEHICLE : SLX1002U
MODEL : CERATO K3 1.6A SUNROOF

Our Ref : WG/TP/2020-109

ASSESSMENT OF REPAIRS AND SPARE PARTS COSTS

DESCRIPTION OF PARTS AND NATURE OF REPAIRS

	QTY	ASSESSED	ORIGINAL	REVISED
SPARE PARTS	PC/SET	CONDITION	QUOTATION	QUOTATION
1 REAR BUMPER	1	CRACKED	\$ 810.00	\$ 810.00
2 REAR BUMPER RETAINER	2	NECESSARY	\$ 130.00	\$ 130.00
3 REAR BUMPER REINFORCEMENT	1	DENTED	\$ 419.00	\$ 419.00
4 REAR BUMPER LOWER GARNISH	1	GRAZED	\$ 583.00	\$ 583.00
5 REAR BUMPER REFLECTOR RH	1	GRAZED	\$ 83.00	\$ 83.00
6 REAR RH FENDER	1	DENTED	\$ 1,289.00	\$ 1,289.00
7 REAR RH FENDER INNER SHIELD	1	DEFORMED	\$ 118.00	\$ 118.00
8 REAR RH TAILLAMP	1	GRAZED	\$ 419.00	\$ 419.00
9 REAR AXLE BEAM	1	BENT	\$ 1,592.00	\$ 1,592.00
10 REAR RH SHOCK ABSORBER	1	BENT	\$ 331.00	\$ 331.00
11 REAR RH WHEEL HUB AND BEARING	1	JAMMED	\$ 337.00	\$ 337.00
12 REAR WINDSCREEN MOULDING	1	NECESSARY	\$ 192.00	\$ 192.00
13 REAR END PANEL	1	REPAIR	\$ 640.00	\$ -
14 END PANEL TOP GARNISH	1	DEFORMED	\$ 153.00	\$ 153.00
			\$ 7,096.00	\$ 6,456.00
		Less 10%	\$ 709.60	\$ 645.60
			\$ 6,386.40	\$ 5,810.40

B) S/NETT ITEM

15 REAR BUMPER CLIP	1 SET	\$ 30.00	\$ 20.00
16 REAR FENDER INNER SHIELD CLIP	1 SET	\$ 20.00	\$ 10.00
17 RIM	1	\$ 600.00	\$ 500.00
18 BRAKE FULD	1 BOT	\$ 60.00	\$ 50.00
19 JOINT SEALANT	1	\$ 120.00	\$ 100.00
20 WINDSCREEN SEALANT	1	\$ 120.00	\$ 100.00
		\$ 950.00	\$ 780.00

Parts Total :

\$ 7,336.40	\$ 6,590.40
--------------------	--------------------

C) LABOUR CHARGES & MISC

21 CHECK REAR WIRING AND LIGHTNING SYSTEM	\$ 70.00	\$ 60.00
22 REMOVE, REFIT REAR LINING, TRIM AND GARNISH	\$ 200.00	\$ 180.00
23 REMOVE AND RENEW REAR REVERSE SENSOR	\$ 150.00	\$ 120.00
24 REMOVE AND REFIT REAR WINDSCREEN	\$ 120.00	\$ 100.00
25 COMPUTERISED AND CHECK REAR WHEEL ALIGNMENT	\$ 150.00	\$ 120.00
26 REMOVE AND REPLACE FRONT UNDERCARRIAGE PARTS	\$ 200.00	\$ 180.00
27 PANEL BEATING ON AFFECTED AREAS	\$ 1,400.00	\$ 1,200.00
28 SPRAY PAINTING ON AFFECTED AREAS	\$ 1,200.00	\$ 1,000.00
29 APPLY ANTI RUST ON AFFECTED AREAS	\$ 120.00	\$ 100.00
	\$ 3,610.00	\$ 3,060.00

Total Parts and Labour :

\$ 10,946.40	\$ 9,650.40
---------------------	--------------------

FINAL LUMP SUM ADJUSTMENT

\$ 7,700.00

POINT OF IMPACT

The impact was confined to the rear right portion of the vehicle.
The damages appeared to be consistent as per the accident report statement.
Please refer the attached schedule and photographs for details.

ADJUSTMENT/RECOMMENDATIONS

We have thoroughly inspected each and every item on the repairer's estimates against the actual damaged found on the vehicle. We have listed the breakdown of our findings and recommendations as per assessment above.

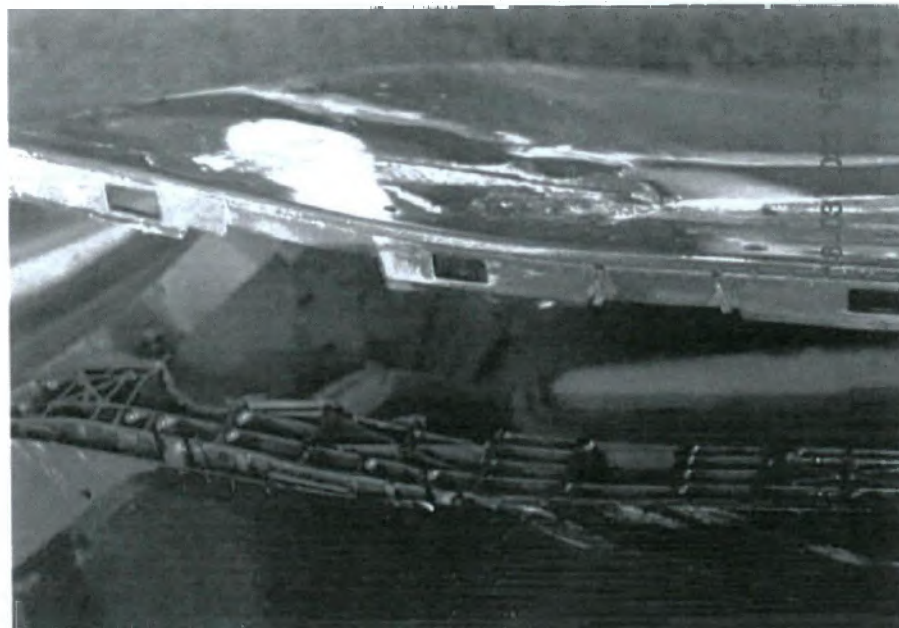
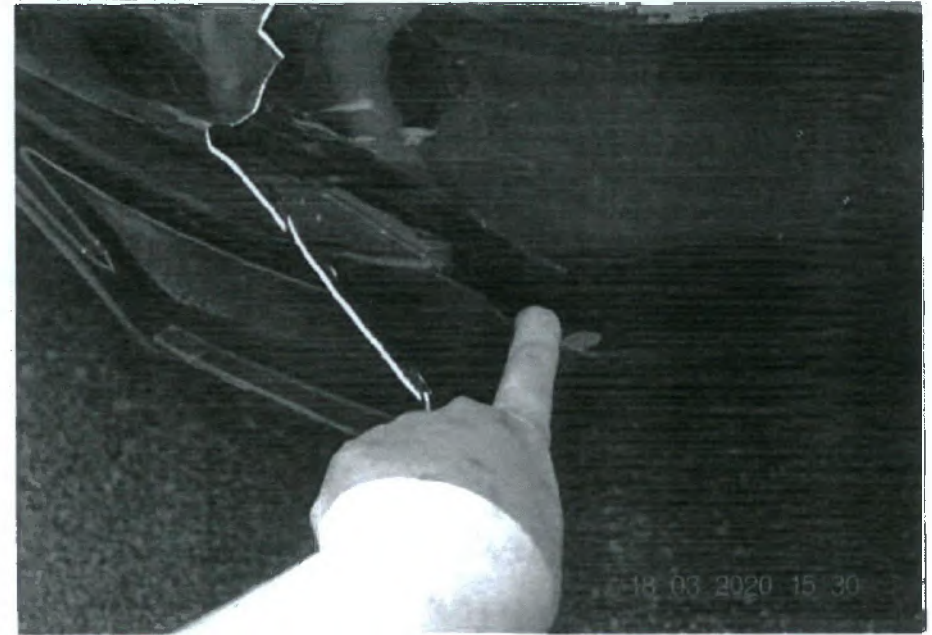
CONCLUSION

The repairer has agreed to undertake repair the vehicle at a lump sum basis of ~~SS7,700.00~~ net corresponding to replacement of parts, spray painting and labour charges. We now revert for your decision on the above claim.

Yours faithfully
WG APPRAISAL SERVICES







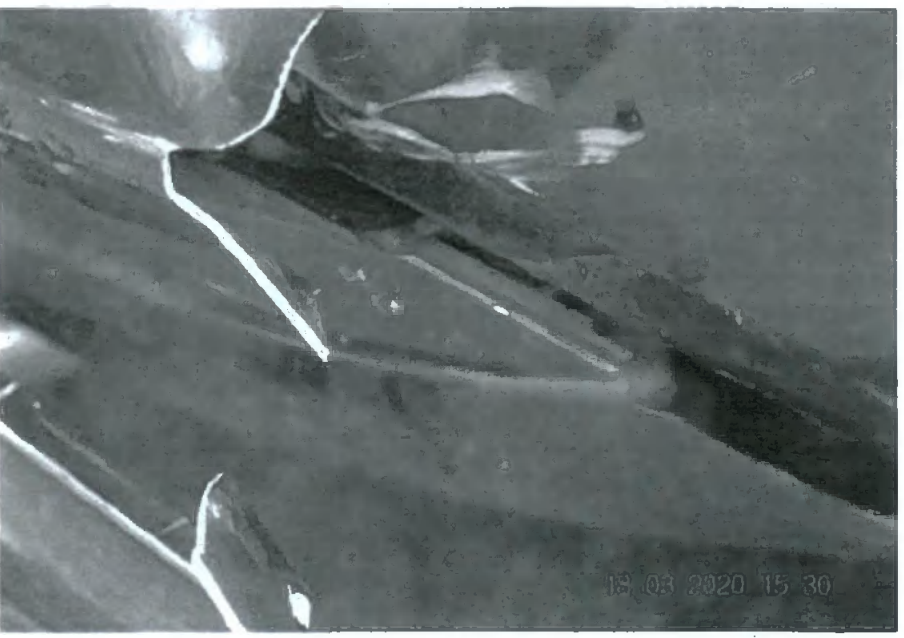
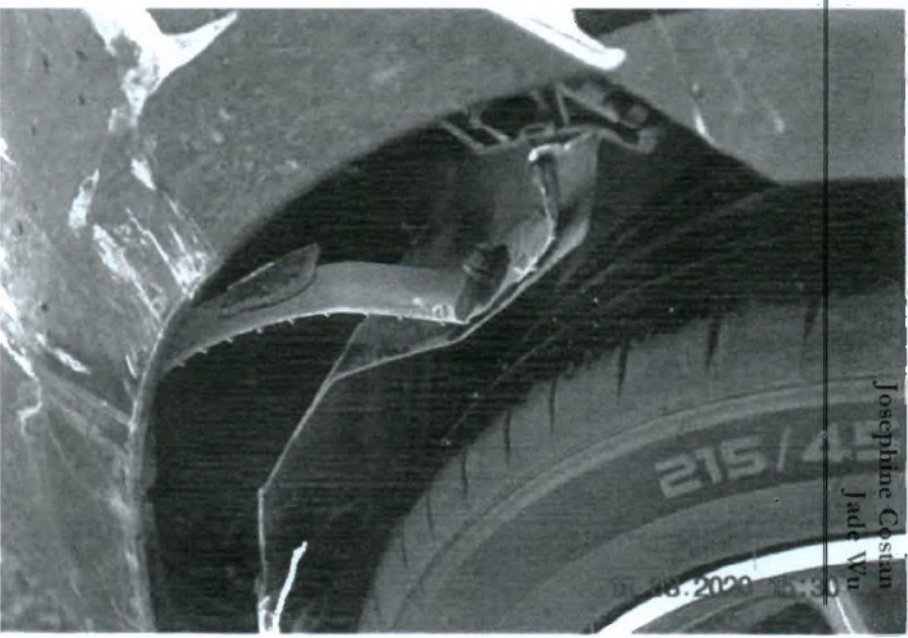
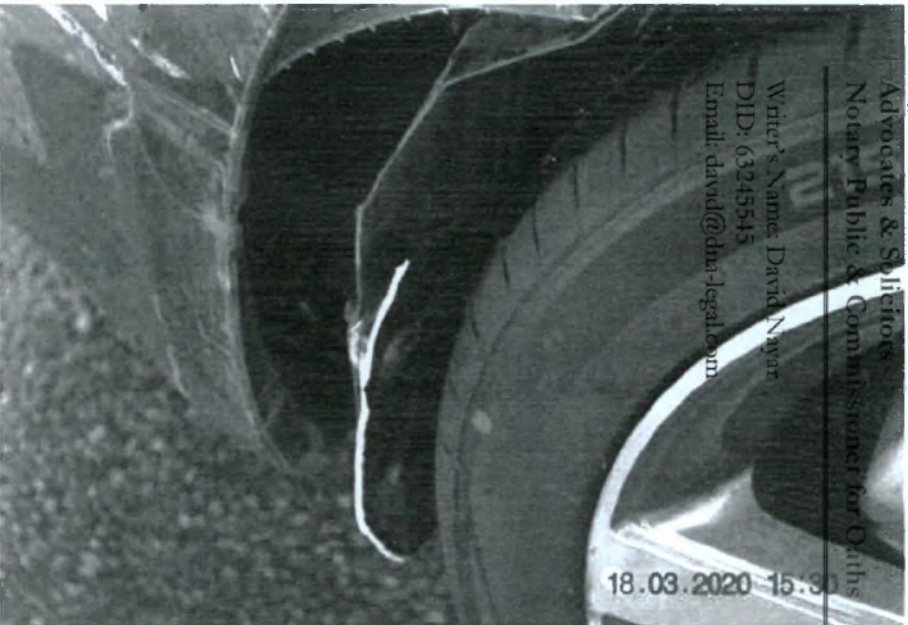
DAVID NAYAR AND ASSOCIATES

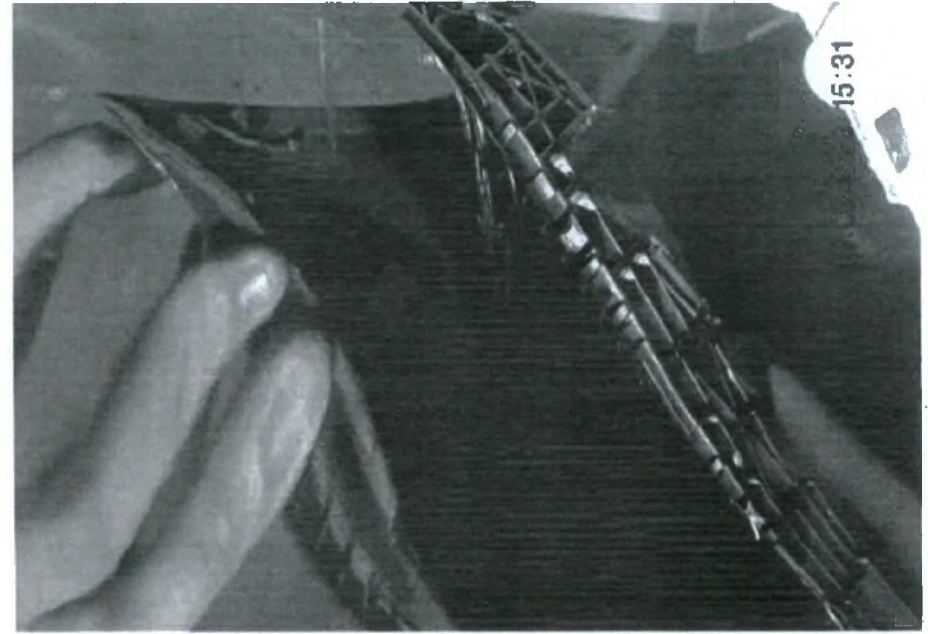
David Nayar

Advocates & Solicitors
Notary Public & Commissioner for Oaths

Writer's Name: David Nayar
DID: 63245545
Email: david@dna-legal.com

Josephine Coiran
Jade Yu





DAVID NAYAR AND ASSOCIATES

Advocates & Solicitors
Notary Public & Commissioner for Oaths

David Nayar
Josephine Costan
Jade Wu

Writer's Name: David Nayar
DID: 63245545
Email: david@dna-legal.com





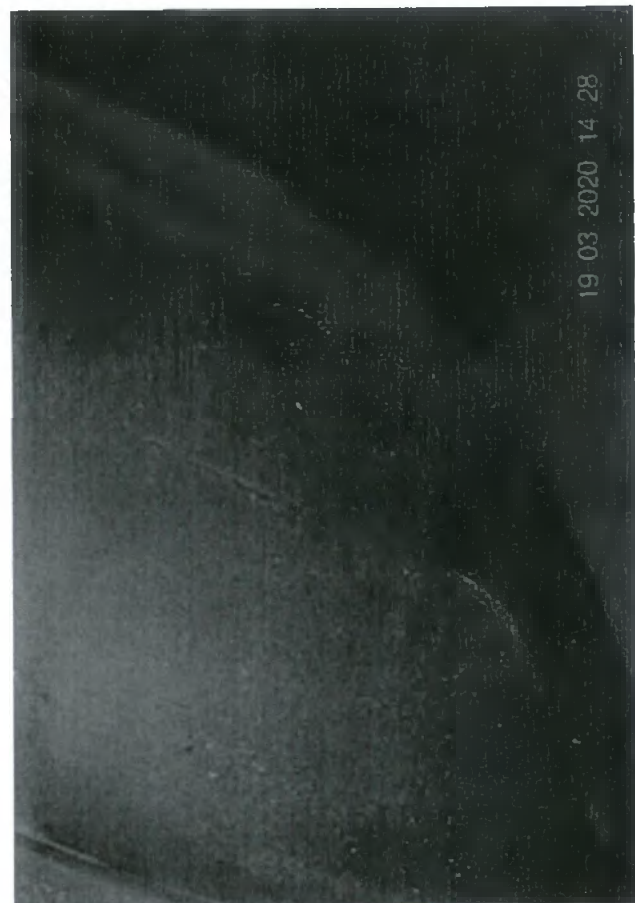
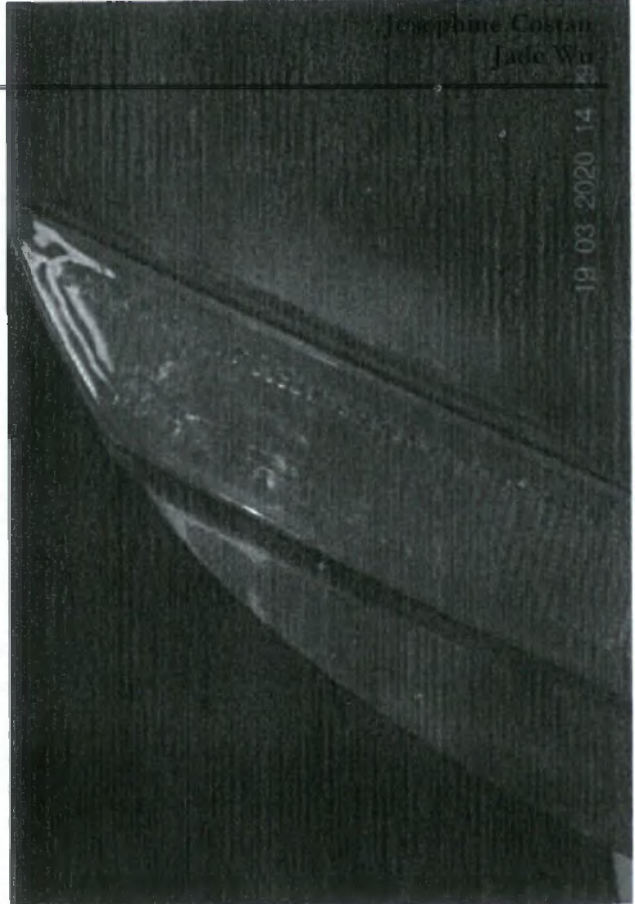
DAVID NAYAR AND ASSOCIATES

Advocates & Solicitors
Notary Public & Commissioner for Oaths

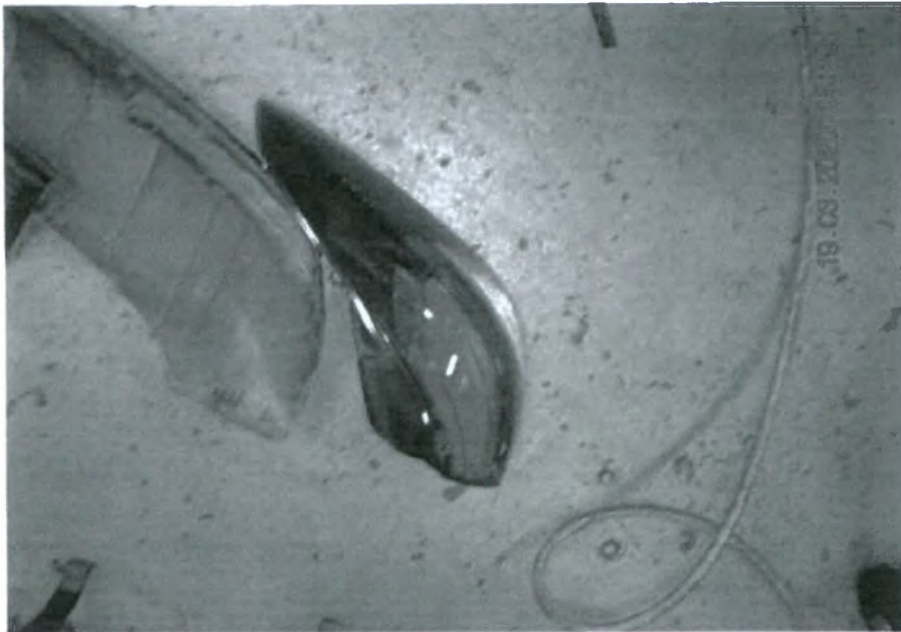
Writer's Name: David Nayar
DID: 63245545
Email: david@dna-legal.com

David Nayar
Josephine Costan
Jade Wu

19 03 2020 14 29



19 03 2020 14 28

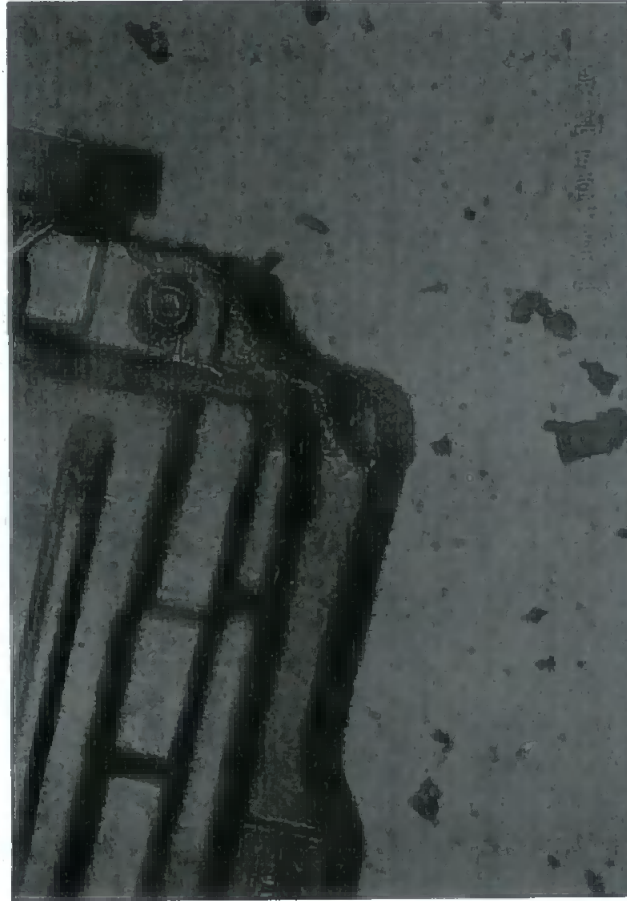
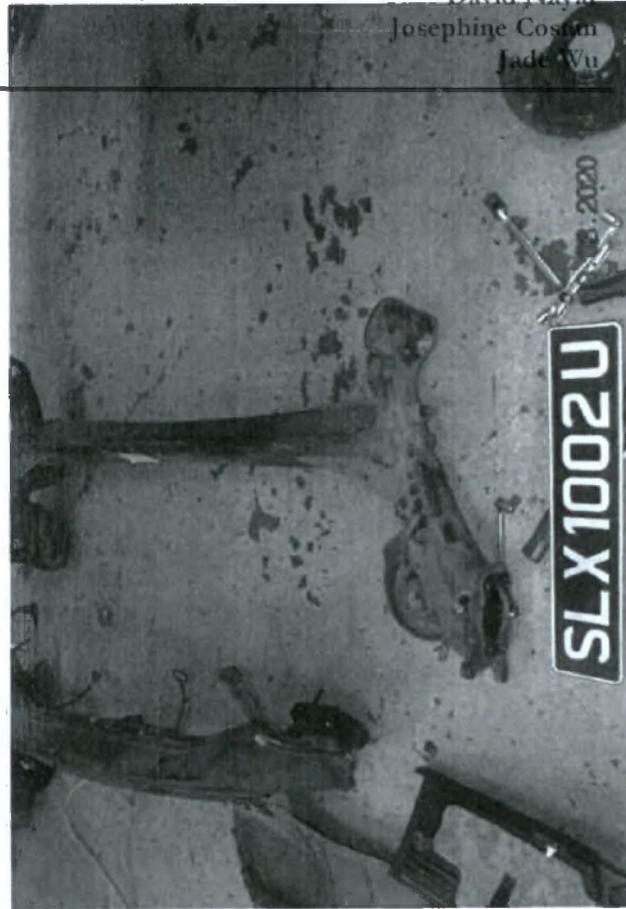
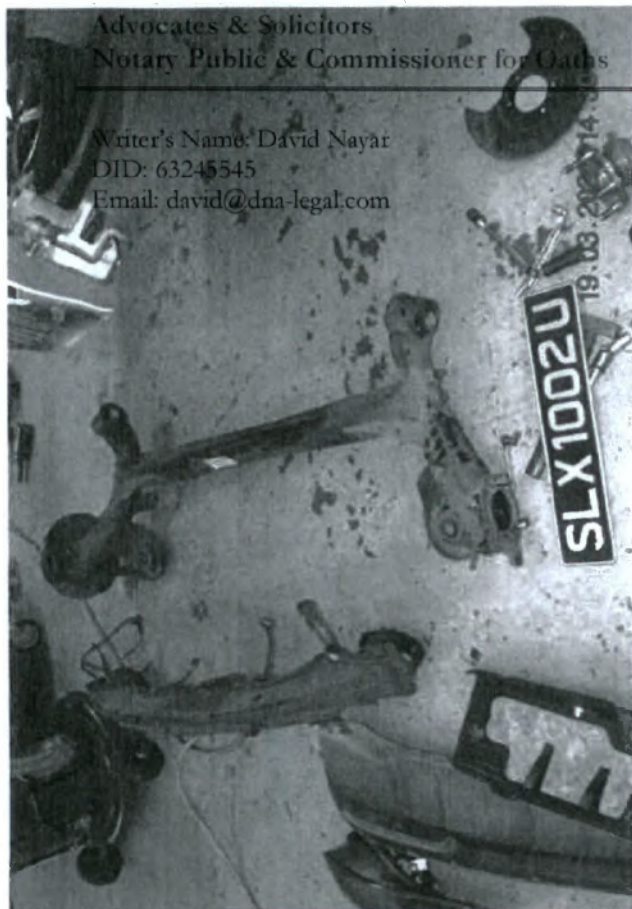


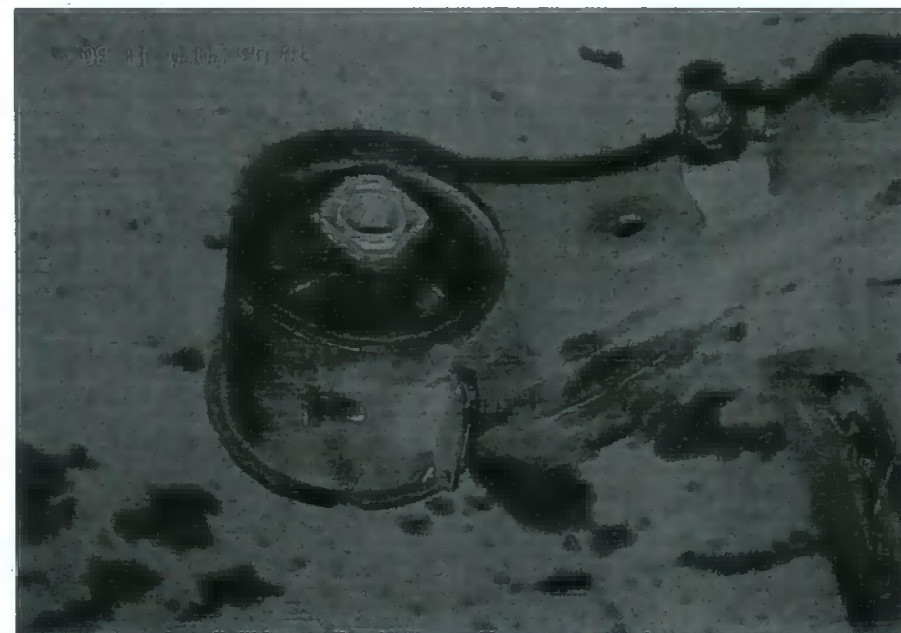
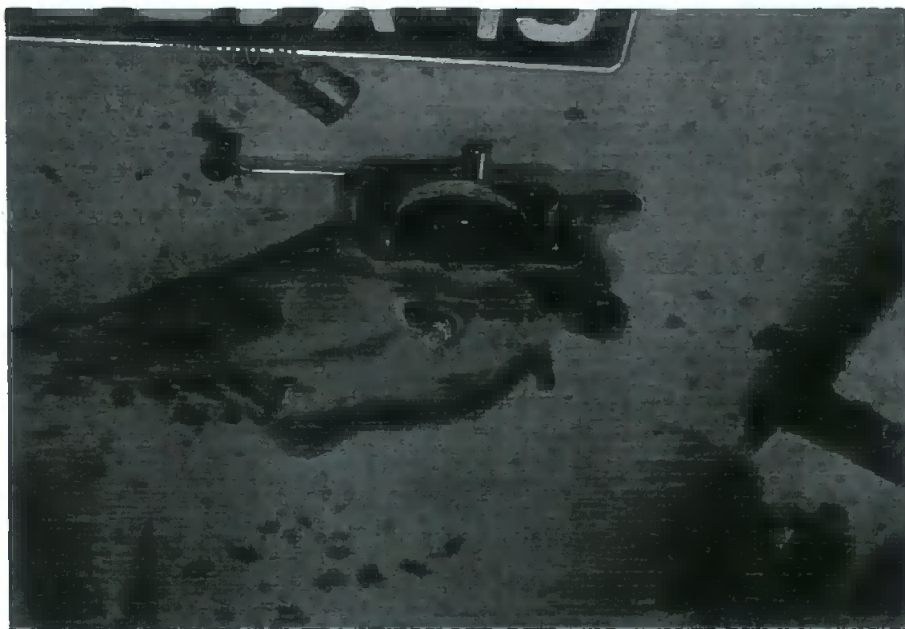
DAVID NAYAR AND ASSOCIATES

Advocates & Solicitors
Notary Public & Commissioner for Oaths

Writer's Name: David Nayar
DID: 63245545
Email: david@dna-legal.com

David Nayar
Josephine Costin
Jade Wu



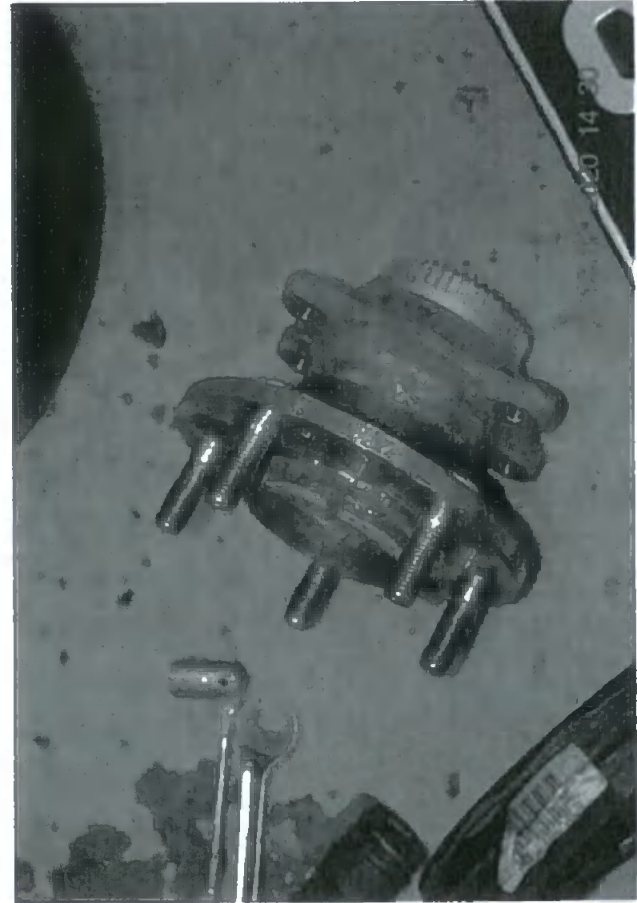
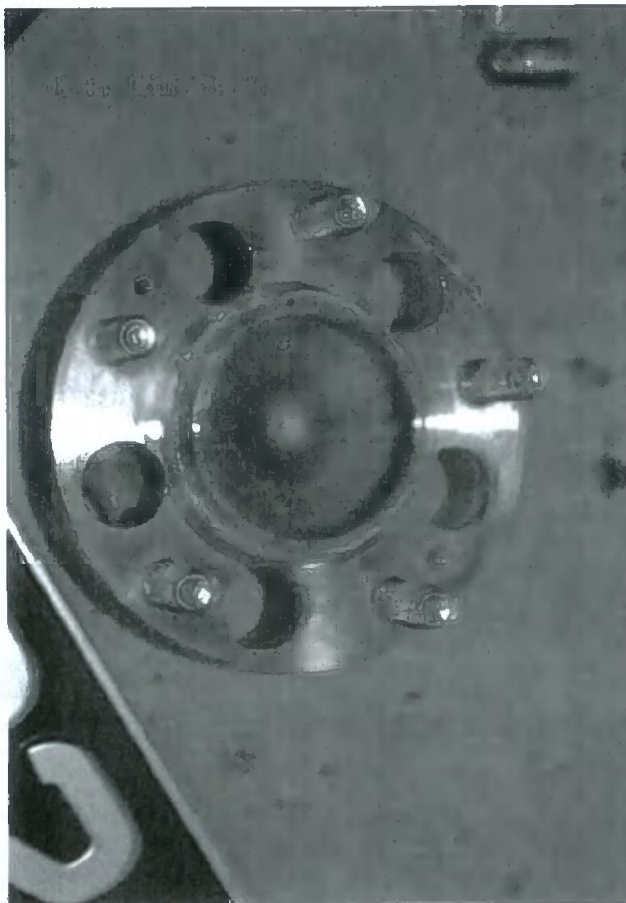
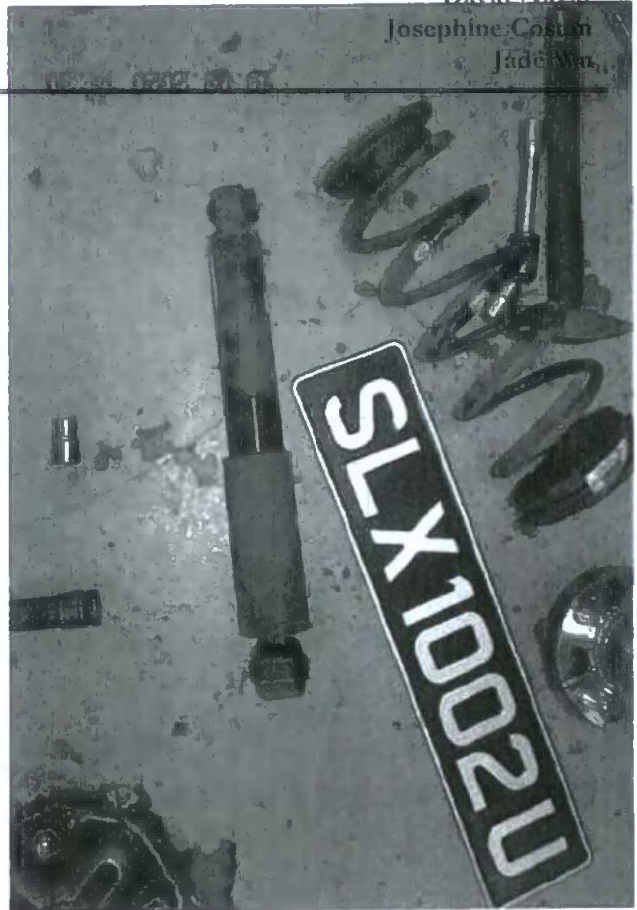
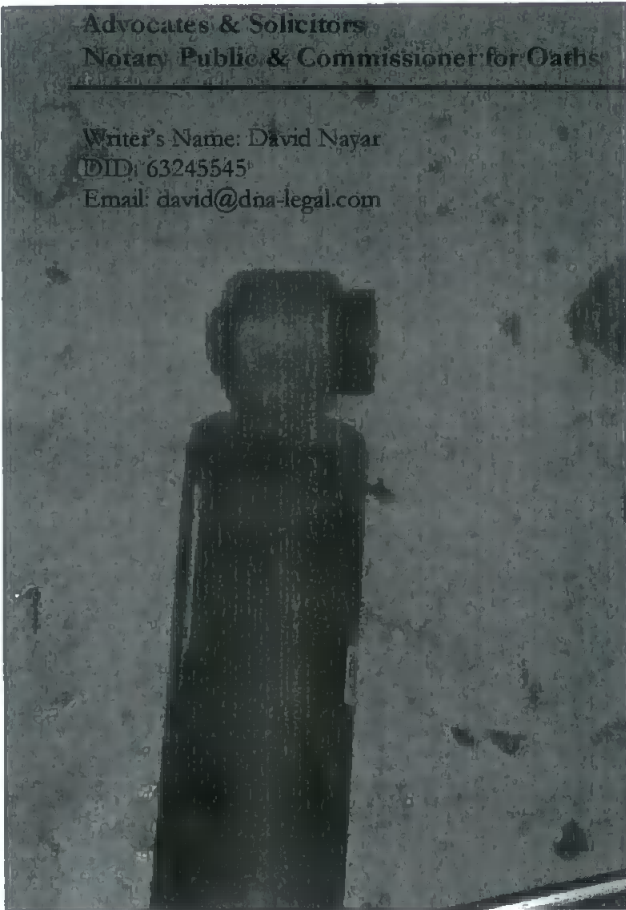


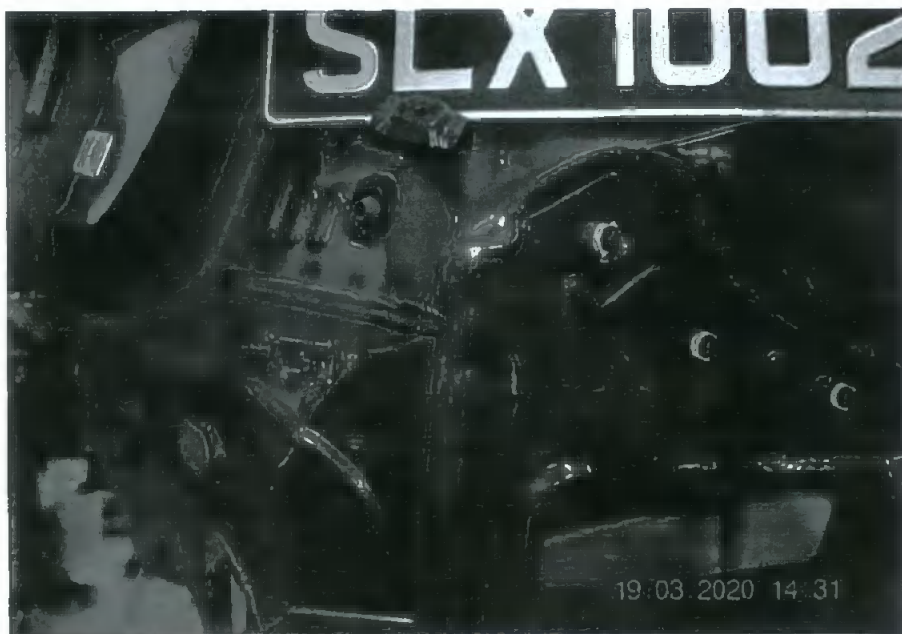
DAVID NAYAR AND ASSOCIATES

Advocates & Solicitors
Notary Public & Commissioner for Oaths

Writer's Name: David Nayar
DID: 63245545
Email: david@dna-legal.com

David Nayar
Josephine Costin
Jade Wu



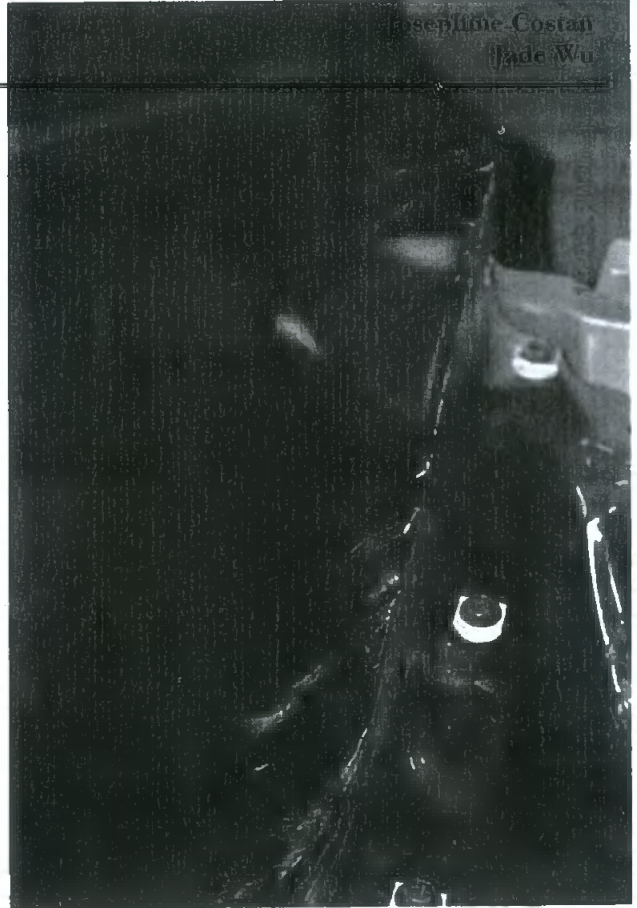


DAVID NAYAR AND ASSOCIATES

David Nayar

Josephine Costan

Jade Wu



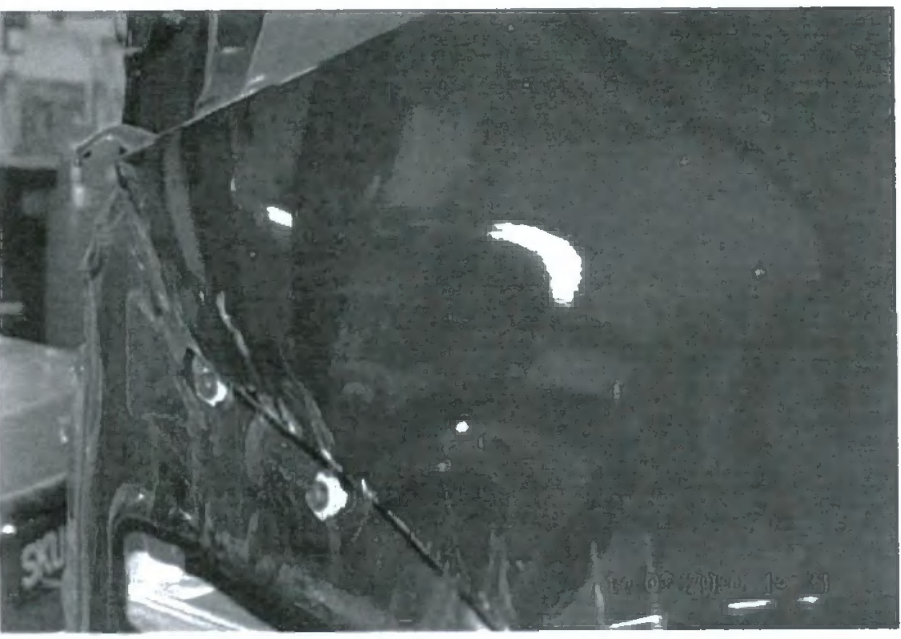
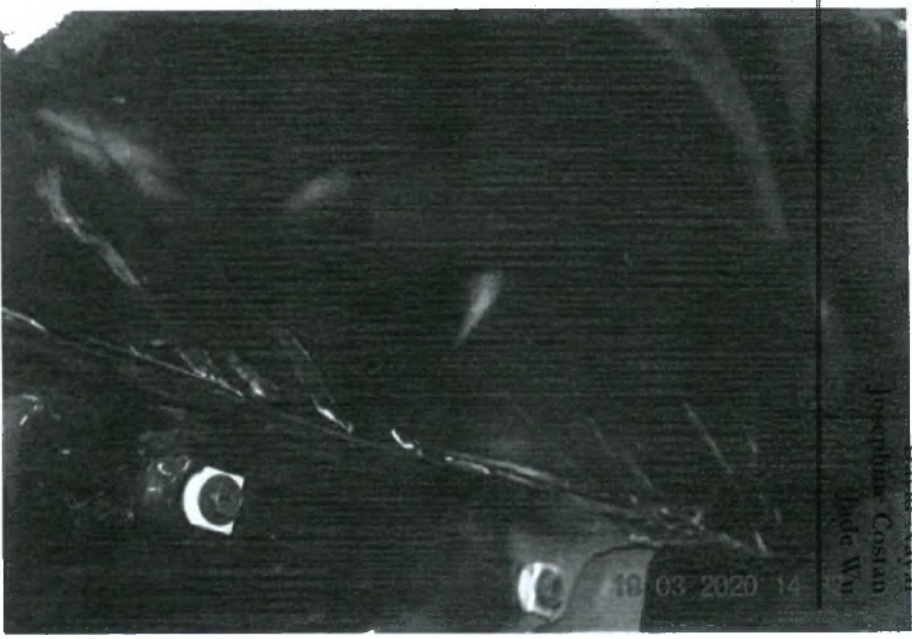
DAVID NAYAR AND ASSOCIATES

Advocates & Solicitors
Notary Public & Commissioner for Oaths

Writer's Name: David Nayar
DID: 63245545
Email: david@dnp.legal.com

David Nayar

Josephine Costan
Dade Wu





TeamWork Garage Pte Ltd

53 Ubi Avenue 1 #01-23/24 Spore 408934

Paya Ubi Industrial Park

Tel : 6844 2475 Fax : 6844 2474

E-mail : claims@teamworkgarage.com

GST registered number : 201015366H

PROFOMA INVOICE - PI-2157

CHAN HUA ENG
C/O 53 Ubi Avenue 1 #01-24
Paya Ubi Industrial Park
Singapore 408934

Date : 11-Apr-20
Vehicle number : SLX1002U
Make Model : KIA CERATO K3
Accident date : 15-Mar-20
Reference number : 2003-38

Description		Amount SGD\$
Inclusive of supplying parts, labour, panel beating and spray painting		
Lump sum repair	:	7200.00
7% GST	:	504.00
Grand total	:	7704.00
Singdollars: SEVEN THOUSAND SEVEN HUNDRED AND FOUR DOLLARS ONLY		



Teamwork Garage Pte Ltd

K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park

Singapore 408934

Tel: 6844 5938 Fax: 6285 5228

Email: kntcars@gmail.com

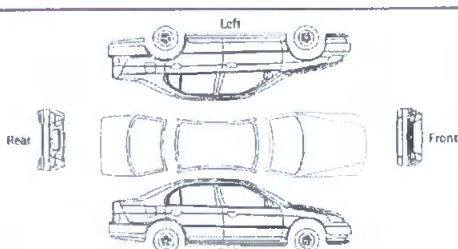
Biz Reg. No.: 53208965X

VEHICLE RENTAL AGREEMENT

NO.: KT-04637

Veh. No.: SLH 2016H	Replace Veh. No.: SLX 1002H
Veh. M/M: Toyota AHIS	Replace Veh. M/M: Kia Cervo K3

HIRER'S PARTICULAR		<input type="checkbox"/> SAME AS HIRER	DRIVER'S PARTICULAR
Name: Chan Hua Eng 92			Name: Chan Yi Qin Tiffany
Address: 6 Hongang Street #02-01 S(538 685)			Address: 6 Hongang Street 92 #02-01 S(538 685)
I/C:	D.O.B:	I/C: S9536472A	D.O.B: 28/09/1995
Contact: 91993968	Pass Date:	Contact: 93390318	Pass Date: 17/05/2017

	A - ACCIDENT	Hirer's acceptance
	C - CRACKED	
	D - DENTS	Driver's acceptance
	S - SCRATCHES	

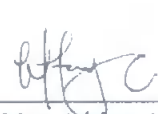

RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	16/3/2020		Date In	25/03/2020	
Time Out	1800		Time In	1740	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES				PETROL / DIESEL LEVEL					
Daily	@ \$	120	<u>10</u> Days @ \$ 1200	OUT	E	¼	½	¾	F
Weekly	@ \$		_____ Wks @ \$						
Monthly	@ \$		_____ Mth @ \$	IN	E	¼	½	¾	F
Hours	@ \$		_____ Hrs @ \$						
Inclusive of additional charges (if any)		Amt payable	\$ 1200	Petrol Charges		YES	NO	AMT: _____	
				CDW		YES	NO	AMT: _____	
Payment: <input type="checkbox"/> CASH <input type="checkbox"/> NETS <input type="checkbox"/> CHQ <input type="checkbox"/> VISA <input type="checkbox"/> MAST				Security Deposit		YES	NO	AMT: _____	
Bank / Cheque No.:				Advance Payment		YES	NO	AMT: _____	

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tendered accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true and accurate.

IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)

- Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- In view of all accident, the hirer will bear the full responsibility for the SGDS\$3,500 / excess payable to K & t CARS and also the first SGDS\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT	
 Signature of hirer / driver (company stamp if any)	 For and on behalf of K & t CARS (authorised signature only)

PHOTOCOPY

K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934
Tel: 6844 5938 Fax: 6285 5228 Email : knrcars@gmail.com
Biz Reg. No.: 53208965X

No.: 3572

OFFICIAL RECEIPT

Date: 11 APR 2020

Received from Chan Hua Eng

The Sum of Dollars One Thousand and Two Hundred dollars

Being payment of SLH 2016H 16/3 - 25/03

\$ 1200



Cheque No.: _____

Authorised Signature

Enquire Vehicle Owner Details

Enquire Vehicle Owner Details (As At 15 Mar 2020 / 16:25:00)

Vehicle Owner Details

Owner ID Type:

Singapore NRIC

Owner ID:

S0000567C

Owner Name:

YIP SOON FATT

Registered Address Type:

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.:

32

Registered Street Name:

HIGHLAND CLOSE

Registered Unit No.:

-

Registered Building Name:

-

Registered Postal Code:

549245

Vehicle Insurance Details

Vehicle No.:

SKM9605Y

Make Description/Model:

AUDI / A4 1.8 TFSI MU (EU6)

Insurance Company Name:

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Save as PDF

OK →

Print