

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201436361C

Letter of Demand

Re : Accident involving my vehicle no. GBJ2524R and vehicle no. SM5631A on 24/06/20 at 16:55 HRS PM/AM at/along Gambus towards Gishun Lamp Post 100

We refer to the above matter.

Attached please find copies of the following for your kind perusal:

Vehicle Repair cost /-Excess	\$ 3103.00
Vehicle Rental Fee for <u>—</u> days @ \$ <u>—</u> per day	\$ —
Loss of use for <u>4</u> days @ \$ <u>200.00</u> per day	\$ 800.00
Police search fee/police report fee/LTA search fees	\$ —
Others <u>3rd Party Report</u>	\$ 29.00
Total :	\$ 3932.00

Yours faithfully,

ABBY



ABBY
HP : 9856 4815
E-mail: dynamicautowork@gmail.com

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Co. Reg. No. : 201436361C

Authorisation To Act

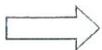
I, Heng Giap General Construction (“the third party claimant”) of 280, Woodlands Industrial Park E5, # 06-17, Harvest@Woodlands, S(757322) (address), owner of GBJ2524R (vehicle no.) hereby authorise Dynamic Autowork Pte. Ltd. (“the workshop”) to act for me with respect to my claim for repair costs and/or rental and/or loss of use (“claim”) for my vehicle no. GBJ2524R that was damaged pursuant to the accident which occurred on 24/06/20 (date) at/along Gambas towards Yishun Lamp post 100 (location) involving vehicle no/s SMS 631A (“the accident”).

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

I further authorise the workshop to execute and/or sign any documents/discharge vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident concerned.

Dated this 01 day of 07 (month) 20 20 (year)



商業綜合工程
HENG GIAP GENERAL CONSTRUCTION

Signed by “the third party claimant”



Signed by “the workshop”

DYNAMIC AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201436361C

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. GBJ2524R and SMS 631A on 24/06/20

at/along Gambas towards Jishun damp Post / CD

1. I/We, the Owner of motor vehicle no. GBJ2524R hereby instruct and authorise Dynamic Autowork Pte Ltd ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$ _____ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 01 day of 07 2020

Signature of vehicle owner



Ar

Name - Heng Giap General Construction

Witnessed by :

IC/UEN No : 52841559W
(Company stamp, if applicable)

Almy

Address : 280, Woodlands Industrial Park ES,
06-17, Harvest Woodlands, S(757322)

興業綜合工程
HENG GIAP GENERAL CONSTRUCTION

Tel : _____



"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

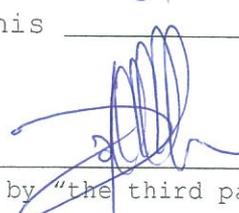
AUTHORIZATION TO ACT
(AIG Asia Pacific - Express Third Party Claim)

I, Heng Giap General Construction ("the third party claimant")
of 280 Woodlands Industrial Park E5, #06-17, Harvest @ Woodlands, S(757322) (address),
owner of GBJ2524R (vehicle no.) hereby authorize
Dynamic Autowork Pte. Ltd.
("the workshop") 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. GBJ2524R that was damaged pursuant to the
accident which occurred on 24/06/20 (date) along Gambas
towards Yishun Lamp Post 100 (location)
involving vehicle no/s Sms 631A
("the accident").

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 01 day of 07 (month) 20 20 (year)


Signed by "the third party claimant"

興業綜合工程
HENG GIAP GENERAL CONSTRUCTION


Signed by "the workshop"
(with chop)





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-20-075309
Date of Request: 26/06/2020

Your Ref No: PURCHASE BY EMAIL

DYNAMIC AUTOWORK PTE. LTD
8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT
SINGAPORE 415875

Dear Sir/Madam,

Your Vehicle No: GBJ2524R
Date of Accident: 24/06/2020
Place of Accident: GAMBAS TWDS YISHUN LAMPOST
Involving Vehicle No: SMS631A

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.

For GIARMC Official use:

Date:

GIRO Cash Cheque



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-20-075311

Date of Request: 26/06/2020

Your Ref No: PURCHASE BY EMAIL

DYNAMIC AUTOWORK PTE. LTD
8 KAKI BUKIT AVE 4, #08-09 PREMIER @ KAKI BUKIT
SINGAPORE 415875

Dear Sir/Madam,

Date of Accident: 24/06/2020

Vehicle No: GBJ2524R

Place of Accident: GAMBAS TOWARDS YISHUN LAMP POST 100

Involving Vehicle No: SMS631A

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\$)
SMS631A	GAMBAS TOWARDS YISHUN LAMP POST 100	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.

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	25/06/2020 17:05
Date Of Accident	24/06/2020 16:55
Exact Location Of Accident	GAMBAS TOWARDS YISHUN LAMP POST 100
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ2524R
Insured/Policyholder	
Name Of Registered Owner	HENG GIAP GENERAL CONSTRUCTION
Co Reg No	5XXXX559W
Email Address	LOUISLYE@LIVE.COM
Mobile Phone No	(LOCAL) +65-96872235
Alternative Phone No	OFFICE-96872235
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORK 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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107738693-01
Cover Note Number	
Driver	
Name of Driver	LYE KAH HIN
NRIC No	SXXXX784G
Date Of Birth	15/06/1970
Occupation	OUTDOOR
Date Of Driving Pass	08/03/1991
Driving Experience	29 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96872235
Fax Number	
Contact Number	
EMail Address	LOUISLYE@LIVE.COM

Address	APT BLK 424 WOODLANDS ST 41 #12-340
Postcode	730424
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	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 ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMS631A
Vehicle Make/Model/Colour	KIA
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	LYE KAH HIN
------	-------------

Approximate Age

Injuries Sustain

Injured person in which vehicle?

GBJ2524R

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

APT BLK 424 WOODLANDS ST 41 #12-340

Postcode

730424

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 **truthful and accurate as possible**. Any willful misrepresentation or withholding of material facts may allow insurance companies to **repeal 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 claimants and/or any other third parties that assist in evaluating or investigating, controlling or managing fraud;
 - (ii) to regulators, law enforcement and government agencies or institutions relevant for the purposes stated in (i);
 - (iii) in complying with requirements, including regulatory, laws or court orders.

興業綜合工程
HENG GIAP GENERAL CONSTRUCTION

Policyholder's Name
(Print Name)

Authorised Driver's Name
(Print Name and Signature)

Insurer's Name
(Print Name)

GBJ 2524R (Driver)

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7019784G



Name: LYE KAH HIN
赖嘉兴

Race: CHINESE
Date of Birth: 15-06-1970
Country of Birth: SINGAPORE

Sex: M

NRIC No: S7019784G

3 1 8 4 4 9 4



Blood Group: O+
Date of issue: 18-08-2000

Address:
APT BLK 424 WOODLANDS STREET 41
#12-340
SINGAPORE 730424

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S7019784G

Name: LYE KAH HIN

Birth Date: 15 Jun 1970
Issue Date: 03 Sep 2014

00233934F




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

CLASS	EFFECTIVE DATE
Class 3 Motor Cars < 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg	08 Mar 1991
Class 4 Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	31 May 1993
Class 5 Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	04 Aug 1993

NP 428A

3 1 8 4 4 9 4

Barcode: S7019784G

License No: S7019784G

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5107738693-01

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle : **GBJ2524R**
Chassis Number : JTFAT35Y90K212578
2. Name of Policyholder : HENG GIAP GENERAL CONSTRUCTION
3. Effective Date of Insurance : 01 Mar 2020
4. Expiry Date of Insurance : 28 Feb 2021
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.
 - (b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD
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)

Agency : BIZFOLIO MOTOR TRADING (00000614894)

Date of Issue : 23 Feb 2020 16:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive