

WITHOUT PREJUDICE

Our Ref: SMC 8312C Your Ref: SMQ 5617U

29th August 2020

ATTN:

LKK Auto Consultants Pte Ltd

INSURER:

AIG Asia Pacific Insurance Pte Ltd

Dear Asher,

Accident Involving: SMC 8312C and SMQ 5617U

Date of Accident:

26 July 2020

Location of Accident: 232 Balestier Road

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair as agreed	\$	4,950.00	
TOTAL LOR/U DAYS	10	DAYS	2 Days PRS (27/28 Jul) + 1 Day Resurvey (29 Jul) + 5 Repair Days Agreed (30 Jul, 1/3/4/5 Aug)+ 1 PH (31 Jul) + 1 Sun (2 Aug)
Add Loss of Rental	\$	1,260.00	7 Days - Inv#S2008007
Add Loss of Use	\$	360.00	3 Days
Total	\$	6,570.00	
Add 3rd Party Report Fee	\$	29.00	
Add LTA Search Fee	\$	7.45	
GRAND TOTAL	\$	6,606.45	

Kindly pay the Grand Total Amount of \$6,606.45 to:

Team AutoPro Pte Ltd

160 Sin Ming Drive #02-12

Sin Ming AutoCity

Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

T E A M A U T O

PROFORMA INVOICE AUTO

ATTENTION:

Kwek Chen Siang (Guo Chengxiang)

PI Number	P2008-1029
PI Date	29-Aug-2020
Vehicle No.	SMC 8312C
Accident Date	26-Jul-2020

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SMC 8312C	COR Lum	p Sum	\$ 4,950.00

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount \$ 4,950.00

Authorized Signature

BIZTEK LEASING

Company Reg No.: 53329851B 58, Phillips Avenue Singapore 547005

T-+65 98321500

E - dav.biztekleasing@gmail.com

INVOICE

Attention: KWEK CHEN SIANG 438B Sengkang West Ave #24-343 Singapore 792438

Date: 04/08/2020

Invoice Number: S2008007

Terms: End of Contract

Description	Un	it Price
SMJ4647B - BMW 523i 2.5A rental 27/07/2020 to 03/08/2020 (\$180 x 7 days)	\$	1,260.00
Reference: SMC8312C		
Subtotal	\$	1,260.00
Less Deposit	\$	0.00
Total	\$	1,260.00

SGD: Two Thousand Two Hundred and Sixty Only

BIZTEK LEASING

Company Reg No.: 53329851B 58, Philips Avenue, Singapore 547005

VEHICLE RENTAL AGREEMENT

<u>Hirer Particulars</u>	
Name: KWEK CHEN SIANG	NRIC / DL No. : 58 141584F
Home Address: 4 38B Songkang West Ave #2	t-343 SIPORE 792438
S(792438) Contact No. : 8180 6959 Er	nail: NANKWEK81@GMAIL. (OM
Vehicle Details Make: BYM (A.) Model: 52.3 I	
Make Model	Type: Sedan / Hatch / SUV / MPV
Negistration No.:Colour.	Transmission: Auto / Manual
Rental:\$	107/2020 to 03/08/2020
The agreement entails:	
1. Hirer to return Vehicle in clean & odor-free condition. Liability: Exterior - \$15, Interior	or vacuum - \$15, odour elimination: - \$100.
2. Hirer to return the Vehicle with fuel level equivalent to start of hired date. Penalty for	or fuel shortage: \$2.20/liter
3. Hirer is responsible for flat tires caused by road hazards. Repairs (patching) can be	e done in any tire workshop.
4. Hirer is responsible to maintain engine oil and radiator water levels in Vehicle. Hire of fluid levels and over-rev of engine.	r is liable for any repairs in the event of non-maintenance
5. In the event of engine overheating, Hirer shall park Vehicle at safe location and cor	ntact Company immediately for assistance.
6. Hirer to send the Vehicle to appointed workshop for regular maintenance/ repairs w	rith consent from the Company.
7. Hirer is responsible for ERP charges, parking cost and traffic offence fines/ demerit	points during the hiring period.
9. Hirer to comply with the laws of Singapore/ Malaysia and $\underline{\text{\bf NOT TO}}$ use the Vehicle manner.	for any illegal purpose/race/competition and in a negligent
9. Vehicle must NOT BE used to carry passengers in excess of the capacity according	g to Vehicle log card /insurance coverage.
10. Vehicle is to be used for the carriage of passengers or goods in connection with the purposes.	ne Hirer's business, for social domestic and pleasure
11. Hirer is not to permit the Vehicle to be operated by any other person without the w	ritten consent of the Company.
12. Hirer to comply with all the terms and conditions of the insurance coverage attach	ed to the rented Vehicle.
13. Hirer is liable for <u>ALL</u> collision damage to the Vehicle. Insurance excess amount will refund to Hirer if the other party is at fault).	to be collected by Company immediately (excess amount
 14. Insurance excess in the case of an accident (compulsory insurance report): a) Comprehensive coverage - \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	
15. Company is responsible for the cost of wear & tear maintenance, Vehicle insurance	ce premium and road tax.
16. Company reserves the right to replace a vehicle of equivalent or similar make/mo	del during the course of this agreement.
17. Company is to return the security deposit (if any and subject to liability) within Two	o (02) weeks of agreement completion.
18. Company is entitled to forfeit any security deposit and/ or penalty \$500 in the even	nt of any breach to this agreement.
19. Surcharge of \$20/day applies to Hirer for late rental (weekly/ monthly) payment.	
20. In the event of payment arrant by Hirer, the Company reserves the right to reposs	ess the Vehicle including a fee of \$2,000.
Marin Contract of the Contract	BIZTEK LEASING UEN: 53329851B
Hirer Signature	On behalf of Company
Date:	Name:

Contact No.: Date:



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-20-090039

Date of Request:

04/08/2020

Your Ref No:

PURCHASE BY EMAIL

TEAM AUTOPRO PTE LTD (SIN MING)
160 SIN MING DRIVE, #01-14 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Your Vehicle No:

SMC8312C

Date of Accident:

26/07/2020

Place of Accident:

232 BALESTIER RD

Involving Vehicle No: SMQ5617U

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 [X] 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-20-090040

Date of Request:

04/08/2020

Your Ref No:

PURCHASE BY EMAIL

TEAM AUTOPRO PTE LTD (SIN MING)
160 SIN MING DRIVE, #01-14 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Date of Accident:

26/07/2020

Vehicle No:

SMC8312C

Place of Accident:

232 BALESTIER ROAD

Involving Vehicle No: SMQ5617U

SMQ5617U

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\$)	
SMQ5617U	232 BALESTIER ROAD	14.00	1		13.08
GST Amount					0.92
Total Amount Due	(GST Inclusive)		-2-10		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 [X] Cash [] Cheque

> Back to OneMotoring



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

Print Date/Time :

27 Jul 2020 / 11:30:11

Receipt Date/Time: 27 Jul 2020 / 11:30:11

Tax Invoice/Receipt

Receipt No.: ITNET-00000-200727-001183

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
	t of Insurance Enquiry - SMQ5617U				
	26 Jul 2020/13:15:00				
	ance Co: AIG ASIA PACIFIC INSURAN	ICE PTE. LTD.			
	Insurance Enquiry - SMQ5617U		7.00	0.40	7.40
	Enquiry Fee 20200727112922121081		7.00	0.49	7.49
	20200727112322121001	Sub-Total	7.00	0.49	7.49
		Total Before Rounding	7.00	0.49	7.49
		=	7.00	0.43	
		Rounding Difference			-0.04
		Total Amount Payable			7.45
		Paid By			
		426569XXXXXX8855	eNETS Credit Car	d	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.

To

:

Team AutoPro Pte Ltd

CRN

201811621K

located at

160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722

Letter of Authorization & Undertaking

In	Respect	of	Accident	Involving	my/our	Vehicle	No.:	SMC 8312 C
and			Q 5617 U			and		
and	J.					and		
@ _	232 BAI	_ES	TIER ROA	\D				
dat	ed 26/07	7/202	20					

- I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
- 2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
- 3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you in the form of payment cheque made in favor to **Team AutoPro Pte Ltd**.

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

- 4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
- 5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
- 6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,

Claimant Signature & Co's Stamp (if applicable)

Date:

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 witholding 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.

By the lodgement of this report to the insurers, you hereby consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
建筑在原始的建筑地域是基础的设计。	ACCIDENT STATEMENT
Date Of Report	27/07/2020 16:21
Date Of Accident	26/07/2020 13:15
Exact Location Of Accident	232 BALESTIER ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMC8312C
Insured/Policyholder	
Name Of Registered Owner	KWEK CHEN SIANG (GUO CHENGXIANG)
NRIC No	SXXXX584F
Email Address	IVANKWEK81@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81806959
Alternative Phone No	OTHERS-81806959
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA180-1.6 COUPE URBAN (R18 LED) (A)
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMPCSNW00015982000

Cover Note Number

Driver

Name of Driver KWEK CHEN SIANG (GUO CHENGXIANG)

NRIC No SXXXX584F Date Of Birth 20/12/1981 **INDOOR** Occupation Date Of Driving Pass 04/06/2009

Driving Experience 11 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-81806959

Fax Number

Contact Number OTHERS-81806959

EMail Address IVANKWEK81@GMAIL.COM Address

BLK 438B SENGKANG WEST AVENUE

#24-343

OWNER

Postcode

792438

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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?

NO

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

YES NO

Number of Passengers (Including Driver)

0

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

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH OWNER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMQ5617U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

96245040

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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:

- 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)
 - (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/mall 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
- 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.
- 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:

Sketch Plan #2

		V-A) SMC8312 (
	SHOPS	V-A) SMC8312(V-B) SMG56170
DESCRIBE CIRCUMSTANCE	A SHOPS ES OF THE ACCIDENT	232 Balestier road.
On the Stated	dute and time, I	vehicle "A" SMC8312C WHI
parked Station	vard hilly ourse wi	g shop. I locked my vehicle
and everything w		At around 1815 hrs I
uard a loud	borning and I want or	nd of my shop and notices
volume 8' sme	256174 had collided	against my # stationary
ehicle front led	H portion. Vehicle B'	Was doing a 3 point to
		was doing a 3 point to
and he was		the minor road. I
and he was	reversing out from	the minor road. I
and he was believe he mi	reversing out from	and hence it's vehicle
and he was believe he mi	reversing out from	and protect to report
and he was believe he mi rear left a gortion. We usurance No	reversing out from	and protect to report



CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Private Car

MX1E

SN

AN0498A

Cov. Type:C

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)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00015982000

Engine No.: 27091031670614

Cha. No.:WDD1173422N681563

Index Mark and Registration

SMC8312C

Number of Vehicle 2. Name of Policy Holder

KWEK CHEN SIANG (GUO CHENGXIANG)

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

10/02/2020

Named Drivers Ex Sect. I

\$\$500.00

Additional Ex Other than Named Drivers:

(15:32:44)

4. Date of Expiry of Insurance

09/02/2021

Ex Sect. I - Age <= 25 Ex Sect. I - Age >= 26

\$\$3,000.00 \$\$500.00

* Age as at date of accident EX ON WINDSCREEN .

S\$100.00

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 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.

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test 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 the Motor Trade. Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: RICARDO CARS PTE LTD AS HP OWNER

* 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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: NEO & COMPANY INSURANCE AGENCY Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 希 3 Anson Road #16-00 Springleaf Tower Singapore 079909

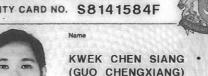
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6222 1033

www.sg.cntaiping.com



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8141584F



CHINESE

(GUO CHENGXIANG)

郭星祥

Date of birth 20-12-1981 Country of birth

SINGAPORE

S8 14 1584F

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

PASS DATE

Class 3A Motor cars without clutch padals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch padals =< 2500kg

NP 428A



4

4880992 RIC No. S8141584F Date of Issue 06-09-2012

APT BLK 438B SENGKANG WEST AVENUE #24-343 SINGAPORE 792438

NRIC No: \$8141584F

Date: 30/11/2018