



江氏修理汽車私人有限公司
KANG CAR REPAIRERS PTE LTD

1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883

TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

Our Ref : KCR0720207952AIG

Your Ref : SKK1472B

Date : 20 NOV 2020

WITHOUT PREJUDICE

AIG Asia Pacific Insurance Pte Ltd

C/O LKK Auto Consultants Pte Ltd

51 Ubi Ave 1

#01-25 Paya Ubi Industrial Pk

Singapore 408933

Attention : Motor Claim Department

Dear Sirs,

**Accident involving GBH7952R and SKK1472B on 26.07.2020 along Central Boulevard
twds Marina Gardens Dr.**

We refer to the above accident. On our record showed that you are the insurer of motor vehicle SKK1472B.

We are instructed that the accident was caused by your insured's negligent driving and/or management of his vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense.

On behalf of and as authorized by M/S Esco Pte Ltd, the owner of motor-vehicle no: SKK1472B, we submit their claim to you:

Cost of repairs (w/gst)	\$ 4,815.00
Loss of rental (w/gst)(6 days x \$150.00)	\$ 963.00
GIA search	\$ 2.00
	<u>\$ 5,780.00</u>
	=====

Enclosed herewith are copies of the following documents in support of our client's claim:

- 1) Tax invoice no: KCR-INV2000383
- 2) GIA report of GBH7952R
- 3) GIA search fee and invoice
- 4) Rental agreement and rental invoice

We hope to receive your early reply soon.

Thank you.

Yours faithfully,

KANG CAR REPAIRERS PTE LTD



江氏修理汽車私人有限公司

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TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

M/S : AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY #07-16
AIG BUILDING, SINGAPORE 079120

TEL: 64193000 FAX: 68357416
ATTN: Motor Claim Department

Your Ref No: SKK1472B
Claim Type: Third Party
Accident Date: 26/07/2020
TP Veh Reg No: SKK1472B

Final No: KCR-INV2000383
Claim No: EST2000143
Date: 12 Nov 2020
Policy No: 5112569593
Veh Reg No: GBH7952R
Make/Model: TOYOTA HIACE VAN
TURBO 5DR MT
Chassis No: JTFHT02P100245269
Engine No: 1KD2827109
Reg. Date: 28/09/2018

Tax Invoice to Vehicle No :GBH7952R

Description	Quantity	List Price	PAGE:1
			Amount
		S\$	S\$

As recommended by surveyor to proceed repair at total cost/lumpsum cost	S\$ 4,500.00
Add GST @ 7%	315.00
Total Amount payable	S\$ 4,815.00

TOTAL: SINGAPORE DOLLAR FOUR THOUSAND EIGHT HUNDRED FIFTEEN ONLY

For Kang Car Repairers Pte Ltd

E. & O. E.

AUTHORISED SIGNATURE

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	27/07/2020 12:44
Date Of Accident	26/07/2020 09:30
Exact Location Of Accident	CENTRAL BOULEVARD TWDS MARINA GARDENS DR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH7952R
Insured/Policyholder	
Name Of Registered Owner	ESCO PTE LTD
Co Reg No	1XXXXX778C
Email Address	ACCOUNTS@ESCO.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67443100

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D TURBO 5 DR (M)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL 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	5112569593
Cover Note Number	

Driver

Name of Driver	MUHAMMAD HAIKAL BIN MOHAMED ALI
NRIC No	SXXXX928D
Date Of Birth	23/05/1990
Occupation	OUTDOOR
Date Of Driving Pass	27/03/2013
Driving Experience	7 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91829674
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 398 YISHUN RING RD #03-1735
Postcode	760398
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	FBB792C
Insurance Company of Driver's Own Vehicle	NTUC INCOME INSURANCE CO-OPERATIVE LTD

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : FATIMAH ZULAIKHA BTE HIMBAL GENDER: : FEMALE
Passenger 2	NAME: : MUHAMMAD IBRAHIM BIN MUHAMMAD HAIKAL 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

I WAS TRAVELLING ALONG CENTRAL BOULEVARD ON LANE 2 FROM THE RIGHT WHICH CAN GO STRAIGHT OR TURNING RIGHT. IN THE MIDST OF TURNING RIGHT TO MARINA GARDENS DR, VEHICLE B (SKK1472B) WAS DRIVING ON THE EXTREME RIGHT LANE WHICH ONLY CAN TURN RIGHT , WENT STRAIGHT INSTEAD OF TURNING RIGHT COLLIDED TO MY RIGHT PORTION OF THE VEHICLE CAUSING DAMAGE.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	ADVISE TO EMAIL TO NTUC INCOME
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKK1472B
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	ALDRIC TAN JEE WEI
NRIC/Passport Number	SXXXX520C

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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: 27/07/2020

12.15 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 27/07/2020

12.15 pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN

See attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Central Boulevard on lane 2 from the right which can go straight or turn right. In the midst of turning right to Marina Gardens Dr, Veh B (SKK1472B) was driving on the extreme right lane which only can turn right, went straight instead of turn right, collided to my right portion of the vehicle causing damage.

DECLARATION

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

Policyholder's Signature

Date & Time: 27/07/2020
12.15pm

Driver's Signature

(If driver is not the policyholder)

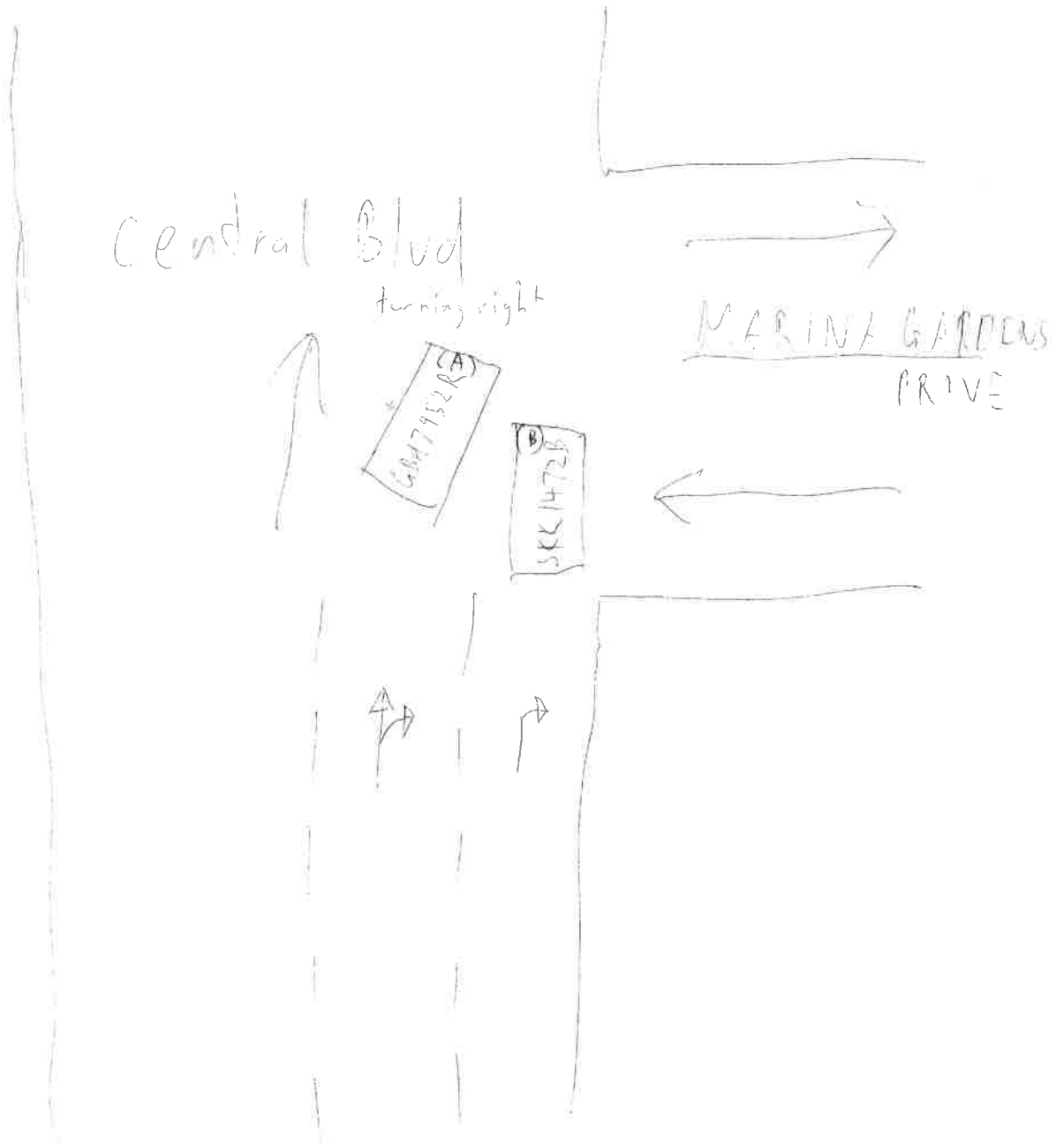
Date & Time: 27/07/2020
12.15pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan Pg. 3





長江企業(私人)有限公司

Chiang Kang Enterprises Co. (Pte.) Ltd.



1995 - 2003

TOTAL DEFENCE

TAX INVOICE

No. 4 Petain Road, Petain Court Singapore 208086 Tel: 6298 1936, 6294 0246 Fax: 6298 3864

RENTAL OF CARS, VANS, PICK-UPS & LORRIES

出租：汽車、廣告車、必甲與輕重型羅厘

GST Reg.No. 19-8304039-K

HIRER'S PARTICULARS

If Different From

Section 1

I/We

Esco Pte Ltd
of G Harper Rd #06-08

S 369674

Tel: 67443100

hereinafter called "the Hirer" hereby confirm having agreed to hire this day from CHIANG KANG ENTERPRISES CO. (PTE.) LTD. hereinafter called "the Owner" the undermentioned Vehicle at the rental fees as shown below and I further agree that I shall be held responsible for:-

a) THIRD PARTY ONLY MOTOR VEHICLE COVERAGE

the Excess which is the maximum amount of \$1500/= to cover for any third party damage or injury claims and also bear the full cost of any damage caused to the hired Vehicle resulting from any single accident including loss from inability to let the same Vehicle out on hire or loss resulting from theft and destruction of the Vehicle.

b) COMPREHENSIVE MOTOR VEHICLE COVERAGE

the Excess which is the maximum amount of \$2000/= for any damage caused to the hired Vehicle from any single accident or any loss resulting from third party damage claim, injury claim, theft or destruction of the Vehicle.

c) Only persons above 24 years of age with more than 2 years driving experience, authorised licensed and signing this agreement may drive the vehicle. whether or not such damage or loss is by person/persons known or unknown to me or by negligence or any breach by me or the terms and Conditions of Hire, hereinafter mentioned and printed at the back hereof:

Vehicle Regn No. 車輛註冊號碼		ABC 3205 R		Rental Agreement 合同號碼 No. A 92737	
Section 1 Hirer's And/Or Driver's Particulars 租車者/駕駛員個人記錄				租出日期及時間 Date & Time OUT	
姓名 Name: Mohd Haikal Bin Mohd Ali				28/7/2020 @ 3:20pm	
地址 Address: Blk 190 Boon Lay Drive				交車日期及時間 Date & Time IN	
#10-224 S 640190				3/8/20 1545pm	
居民證/護照號碼 I/C No./Passport No:		駕駛執照號碼 Driving Licence No:		Chargeable Rates Amount	
S9017928D		S9017928D		天 Days @ \$ 8900/-	
居民證/護照種類 Type of I/C/Passport:		Pass 日期 Pass Date:		星期 Weeks @ \$	
2		27/3/2013		月 Month @ \$	
出生日期 Date of Birth:		發出地 Place of Issue:		ADD 7% GST 863/-	
23/5/1990					
三號保險底金 \$1500/=		一號保險底金 \$2000/=		送車/費 Delivery Fees	
a) Third Party Only Policy Excess \$1500/=		b) Comprehensive Policy Excess \$2000/=		總計 Total Charge	
車輛必須歸還車主於 Vehicle Must Be Returned To Owner's Office By:				8963/-	
備註與付款記錄 Remarks & Payment Records				按金 Security Deposit	
				總金額 Total Payable	
				來銀 Amount Paid	
				收車費用 Collection Fees/Misc.	
				超過/小時 Extra Hours @ \$	
出車油箱 Fuel Tank OUT				租費不包括汽油 Rates Do Not Include Fuel	
E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F				添油 Refuelling	
車牌號碼 Vehicle No:		1)		至 To:	
車牌號碼 Vehicle No:		2)		至 To:	
工具 Tools		輪胎 Spare Tyre		加額費用 Total Additional Charges	
		裝飾品 Accessories			
車輛發出人 Vehicle Issued By:		車輛接收人 Vehicle Collected By:			
NOTE: 註				總計 Grand Total	
租車者或司機必須付所有停車及違反交通法例負起一切的責任。 HIRER AND/OR DRIVER IS LIABLE FOR ALL PARKING AND TRAFFIC VIOLATIONS.					

租車者不准載沙或石灰
HIRER MUST NOT CARRY SAND AND CEMENT ON THE VEHICLE

我/我們同意以上及後頁租車公司所列的條規與條件。

I/We have read and hereby agree to the terms and conditions on both sides of this rental agreement.

日期 Date: 28/7/2020

租車者簽名
Signature of Hirer:

Signature of Hirer

**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

Third Party Insurer Enquiry

Our Ref No: GR-20-086791
Date of Request: 27/07/2020

Your Ref No: Online Purchase

Kang Car Repairers Pte Ltd
No 1 Kaki Bukit Ave 6
#02-06 AutoBay@Kaki Bukit
Singapore 417883

Dear Sir/Madam,

Enquiry Date 27/07/2020
Enquiry By Yee Mei Cheng
TP Vehicle No. SKK1472B
Accident Date 26/07/2020

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKK1472B	AIG Asia Pacific Insurance Pte. Ltd.	11/09/2019-10/09/2020	65-6419-3000

Thank You.

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.

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**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-20-086791

Date of Request: 27/07/2020

Your Ref No:

Online Purchase

Kang Car Repairers Pte Ltd
No 1 Kaki Bukit Ave 6
#02-06 AutoBay@Kaki Bukit
Singapore 417883

Dear Sir/Madam,

Enquiry Date 27/07/2020
Enquiry By Yee Mei Cheng
Vehicle No. SKK1472B
Accident Date 26/07/2020

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque