



Kah Motor Co. Sdn. Bhd.

(A Member of Oriental Holdings Berhad)

Body Repair & Paint Centre

6A Mandai Estate

Singapore 729903

Tel : +65 6841 3838

Fax : +65 6362 5015

www.honda.com.sg

M/s: MS First Capital Insurance Ltd

30 Robinson Road

#16-01 City House

Singapore 068877

Date : 2/11/2020

Attn: Motor Claims Department / Chris Lim

Your ref : SHC1456B

Our ref : SLK2027K

Dear Sir / Madam,

THIRD PARTY DIRECT SETTLEMENT

ACCIDENT INVOLVING SLK2027K & SHC1456B DOA: 26/08/2020.

We refer to the item(s) marked (✓) below:

- (✓) We refer to your email dated 27/08/2020.
- (✓) We enclosed herewith the repair invoice / Third Party Direct Settlement Agreement.
- (✓) Kindly forward the discharge voucher for our client's signature within **2 weeks** via email to : **desmondtoh@honda.com.sg**
- () We return your discharge voucher duly completed.
- (✓) Kindly expedite settlement the following :-
 - Repair Cost **S\$ 20,330.03 payable to Kah Motor Co. Sdn. Bhd.**
 - Loss of Rental: **S\$ 107.00 x 23 days : \$ 2461.00 payable to Kah Motor Co. Sdn. Bhd.**
(19 working days + 3 Sun + 1 PRI)
- (✓) Kindly let us have your cheque made in favour of the above mentioned name(s) for our transmission as soon as possible.
- (✓) Letter of Authority, Rental Invoice

Thank you.

Yours faithfully,

Anikka Lai

LETTER OF AUTHORITY

TO WHOM IT MAY CONCERN

ACCIDENT INVOLVING (OWNER VEHICLE NO.) SLK2027K &
(THIR PARTY'S VEHICLE NO.) SHC1456B ON 26/8/2020
ALONG PIE (TUAS) B4 EXIT 41

I hereby authorize Kah Motor Co. Sdn Bhd (Kah Motor) and its agents or any person authorized by Kah Motor to do all or any of the following:

- To submit, resolve and make any claim(s) which I may have against the 3rd party insurers.
- To execute, sign discharge voucher/indemnity forms and all necessary documents in connection with and arising out of the above claim.
- Any payment should be made in favour of my name / Kah Motor Co. Sdn Bhd.



Owner Signature

(Co stamp & authorized signature if is Co registered vehicle)

Name : GOH CHIN CHAI

Nric No : SXXXX799E

Veh No: SLK2027K

Date : 27/8/2020



Service Tax Invoice

Kah Motor Co. Sdn. Bhd.

(A Member of Oriental Holdings Berhad)

6A Mandai Estate, SINGAPORE 729903

Mandai Parts Centre

Phone No. : +65 6841 3838 Fax No. :

GST Reg No. M200050223

Company Ref. No. S60FC1380G

MS FIRST CAPITAL INSURANCE LIMITED

MOTOR CLAIMS DEPT

36 ROBINSON ROAD

#16-01 CITY HOUSE

SINGAPORE, 068877

Customer Code : CU0129743

Payment Term : 30 Days

Invoice No. : SINV-BM20001228
 Invoice Date : 26/10/20
 Order No. : SVO20043251
 Reference :
 Job Card No. : 11932
 Date/Time Received : 26/08/20 / 10:57:25 AM
 Licence No. : SLK2027K
 Model : CIVIC 1.6 VTI YM2016
 Car Chassis No. : MRHFC5650GT000702
 Car Engine No. : R16B21600952
 Mileage : 85444
 Service Advisor : ANIKKA LAI SWEE KAM 1821
 Served By : ANIKKALAI
 Page : 1

No.	Description	Qty.	UoM	U. Price	Disc %	Amount	7% GST Amount incld	
							Amount	GST
	TP DIRECT SETTLEMENT (J/NO:)							
	OWNER: GOH CHIN CHAI							
	OWNER INSURER: TOKIO MARINE							
	ACC DATE: 26/08/2020							
	SURVEYED BY: SUN PIN / LKK							
	DATE: 27/08/2020 & 28/08/2020							
	REF NO:							
	TP INSURER: FIRST CAPITAL							
	TP VEH: SHC1456B							
68500-TEA-N00ZZ	LID COMP TRUNK	1	Each	531.20	35	345.28	24.17	369.45
68610-TEA-T10ZZ	HINGE COMPR.TRUNK	1	Each	48.90	35	31.78	2.22	34.00
68660-TEA-T10ZZ	HINGE COMPL.TRUNK	1	Each	48.90	35	31.78	2.22	34.00
74865-TEA-T01	WEATHERSTRIPTRUNK LID	1	Each	70.00	35	45.50	3.19	48.69
74851-TEA-003	LOCK ASSYTRUNK	1	Each	81.20	35	52.78	3.69	56.47
74890-TEA-T112B	GARNISH ASSYRR.LICENSE	1	Each	109.90	35	71.43	5.00	76.43
75701-TBA-A10	EMBLEM,H-MARK	1	Each	13.30	35	8.64	0.60	9.24
90301-ST0-003	NUTPUSH 3MM	2	Each	2.10	35	2.73	0.19	2.92
34100-TEA-T11	LIGHT ASSYLICENSE	1	Each	68.70	35	44.65	3.13	47.78
84620-TEA-Z11ZA	LINING ASSYTRUNK LID	1	Each	36.00	35	23.40	1.64	25.04
75722-TBA-A00	EMBLEM SETRR.	1	Each	12.90	35	8.38	0.59	8.97
75725-TEA-T01	EMBLEMRR.	1	Each	12.00	35	7.80	0.55	8.35
71500-TEC-Q00ZZ	FACE ASSY,RR.BUMPER	1	Each	617.20	35	401.18	28.08	429.26
71593-TEA-T01	SPACERR.RR.BUMPER SIDE	1	Each	11.50	35	7.47	0.52	7.99
71598-TEA-T01	SPACERL.RR.BUMPER SIDE	1	Each	11.50	35	7.47	0.52	7.99
91505-TM8-003	CLIP,BUMPER	22	Each	2.30	35	32.89	2.30	35.19
71505-TBA-A00	BRACKETR.RR.BUMPER SIDE	1	Each	2.50	35	1.62	0.11	1.73
71555-TBA-A00	BRACKETL.RR.BUMPER SIDE	1	Each	2.50	35	1.62	0.11	1.73
71502-TEX-Y00	GARNISH,RR.BUMPER LOWER	1	Each	39.80	35	25.87	1.81	27.68
71503-TEA-T00	GARNISH,R.RR.BUMPER SIDE	1	Each	8.50	35	5.52	0.39	5.91
71508-TEA-T00	GARNISH,L.RR.BUMPER SIDE	1	Each	8.50	35	5.52	0.39	5.91
71530-TEA-T00ZZ	BEAM COMPRR.BUMPER	1	Each	180.00	35	117.00	8.19	125.19
65550-TEA-T00ZZ	PAN COMPSPARE TIRE	1	Each	236.70	35	153.85	10.77	164.62
66100-TEC-307ZZ	PANEL SETRR.	1	Each	265.70	35	172.70	12.09	184.79
84640-TEA-Z01ZA	LINING ASSYRR.PANEL	1	Each	50.30	35	32.69	2.29	34.98
84521-TEA-Q01ZA	LID ASSYSPARE TIRE	1	Each	65.70	35	42.70	2.99	45.69
84542-TET-H00	BOX COMPTOOL	1	Each	41.50	35	26.97	1.89	28.86
04636-TEA-T00ZZ	PANEL SETR.RR.OUTSIDE	1	Each	777.50	35	505.37	35.38	540.75
04646-TEA-T00ZZ	PANEL SETL.RR.OUTSIDE	1	Each	777.50	35	505.37	35.38	540.75
75450-TEA-T02	OUTLET ASSY,RR.AIR	1	Each	8.80	35	5.72	0.40	6.12
66154-TBA-A00ZZ	STIFFENERL.RR.PANEL SIDE	1	Each	29.20	35	18.98	1.33	20.31

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Mandai Parts Centre

Phone No. : +65 6841 3838 Fax No. :

GST Reg No. M200050223
Company Ref. No. S60FC1380G

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MOTOR CLAIMS DEPT

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#16-01 CITY HOUSE

SINGAPORE, 068877

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Car Chassis No. : MRHFC5650GT000702
Car Engine No. : R16B21600952
Mileage : 85444
Service Advisor : ANIKKA LAI SWEE KAM 1821
Served By : ANIKKALAI
Page : 2

No.	Description	Qty.	UoM	U. Price	Disc %	Amount	7% GST Amount incld	GST
65660-TEA-T10ZZ	FRAME COMP.,L.RR.FLOOR	1	Each	703.10	35	457.01	31.99	489.00
64701-TEA-T00ZZ	PANELL.RR.INSIDE	1	Each	231.50	35	150.47	10.53	161.00
33500-TEA-T01	TAILLIGHT ASSYR.	1	Each	285.50	35	185.57	12.99	198.56
33550-TEA-T01	TAILLIGHT ASSYL.	1	Each	307.40	35	199.81	13.99	213.80
34150-TEX-Y01	LIGHT ASSYR.LID	1	Each	133.60	35	86.84	6.08	92.92
34155-TEX-Y01	LIGHT ASSYL.LID	1	Each	133.60	35	86.84	6.08	92.92
38387-TZ5-A01	ANTENNA ASSYL.F.	1	Each	60.80	35	39.52	2.77	42.29
74940-SZW-003	BUZZER ASSYSMART	1	Each	62.90	35	40.88	2.86	43.74
BG02R	1438 REPLACE RR. WINDSCREEN.(N)	1	Hours	650.00		650.00	45.50	695.50
73227-TEA-003	RUBBER C WINDSHIELD DAM	1	Each	18.80	35	12.22	0.86	13.08
73525-SYY-000	RUBBERRR QTR W/SHIELD	3	Each	9.90	35	19.30	1.35	20.65
91501-S70-003	FASTENER BW/SHIELD	2	Each	5.30	35	6.89	0.48	7.37
91536-SS0-J01	FASTENER AW/SHIELD	2	Each	3.80	35	4.94	0.35	5.29
91568-TF0-003	CLIP,WINDSHIELD UPPER	2	Each	3.20	35	4.16	0.29	4.45
73125-SR3-000	RUBBER, W/SHIELD	1	Each	12.90	35	8.38	0.59	8.97
73126-SR3-000	RUBBER, W/SHIELD	1	Each	14.70	35	9.55	0.67	10.22
BO-WS-SEALANT	WINDSCREEN SEALANT (N)	2	Each	60.00		120.00	8.40	128.40
BO-R-COOL-RRQ	SUPPLY & INSTALL SOLAR FILM ON REAR QTR GLASS.	1	Each	80.00		80.00	5.60	85.60
BOSUN	1466 SUNDRIES	1	Hours	50.00		50.00	3.50	53.50
BML02I	1438 INSPECT RR LIGHTING MECHANISMS. PERFORM WATER TEST.(N)	1	Hours	70.27		70.27	4.92	75.19
BA02R	1438 REMOVE & RENEW REVERSE SENSORS-4 PCS (N)	1	Hours	40.00		40.00	2.80	42.80
BMI03D	1438 REMOVE & INSTALL REAR COMPARTMENT LININGS GARNISHES.(N)	1	Hours	650.00		650.00	45.50	695.50
BC012R	1438 RESET VEHICLE SMART ENTRY SYSTEM	1	Hours	350.00		350.00	24.50	374.50
BC011R	1729 REMOVE INSTALL & CALIBRATE REAR VIEW CAMERA	1	Hours	350.00		350.00	24.50	374.50
BMF00D	1729 RREMOVE & INSTALL FUEL TANK FUEL PIPES.(N)	1	Hours	450.00		450.00	31.50	481.50
BKRP02B	1729 CUT & RENEW RR FLOOR PANEL. FENDERS & DAMAGE PARTS RR CHASSIS INCLUDING FIITTING ON ATTACHMENT ITEMS.	1	Hours	6,500.00		6,500.00	455.00	6,955.00
BP06R	1718 SPRAY PAINTING ON REPAIRED OR REPLACED AREAS. (6P)	1	Hours	3,900.00		3,900.00	273.00	4,173.00

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Served By	:	ANIKKALAI
Page	:	3

No.	Description	Qty.	UoM	U. Price	Disc %	Amount	7% GST Amount	incl GST
73550-TEA-T01	GLASS ASSYL.QUARTER WINDSHIEL	1	Each	149.20	35	96.98	6.79	103.77
73500-TEA-T01	GLASS ASSYR.QUARTER WINDSHIEL	1	Each	149.20	35	96.98	6.79	103.77
BO-R-COOL-RRQ	SUPPLY & INSTALL SOLAR FILM ON REAR QTR GLASS.	1	Each	80.00		80.00	5.60	85.60
BO-TOW	1466 TOWING SERVICES (MBBS) SUPPLEMENTARY PART	1	Hours	80.00		80.00	5.60	85.60
BO-NUM-COMP-L	NUMBER PLATE WITH CASING-L(N)	1	Each	45.00		45.00	3.15	48.15
74552-TEA-T00	FENDERR.RR.INNER	1	Each	68.80	35	44.72	3.13	47.85
74592-TEA-T00	FENDER L.RR.INNER	1	Each	68.80	35	44.72	3.13	47.85
90601-S30-003	GROMMETCOWL TOP	3	Each	2.10	35	4.09	0.29	4.38
90682-SEA-003	CLIP ABUMPER	2	Each	2.60	35	3.38	0.24	3.62
91501-TR0-003	CLIP,INNER FENDER	14	Each	2.80	35	25.48	1.78	27.26
91512-SED-003	CLIPINNER FENDER	8	Each	2.30	35	11.96	0.84	12.80
32108-TEA-N20	WIRE HARNESS REAR	1	Each	127.70	35	83.00	5.81	88.81
74654-TX6-A00	BOLTANCHOR	1	Each	14.10	35	9.16	0.64	9.80
39680-TEX-Y41ZT	SENSOR ASSY,PARKING	2	Each	148.40	35	192.92	13.50	206.42
90661-SC7-003	GROMMET SCREW	2	Each	2.40	35	3.12	0.22	3.34
90001-S10-A00	BOLT WASHER	4	Each	5.20	35	13.52	0.95	14.47
91626-STK-A01	GROMMETTAILLIGHT	4	Each	0.50	35	1.30	0.09	1.39
63322-TEA-T00ZZ	ADAPTERR.RR.COMBINATION LIGHT	1	Each	66.30	35	43.09	3.02	46.11
63722-TEA-T00ZZ	ADAPTERL.RR.COMBINATION LIGHT	1	Each	66.30	35	43.09	3.02	46.11
66114-TBA-A00ZZ	STIFFENER,R.RR.PANEL SIDE	1	Each	29.20	35	18.98	1.33	20.31
84601-TEA-Q01ZA	LINING ASSYR.TRUNK SIDE	1	Each	53.40	35	34.71	2.43	37.14
84651-TEA-Q01ZA	LINING ASSYL.TRUNK SIDE	1	Each	53.40	35	34.71	2.43	37.14
90667-SWZ-003ZV	CLIP, TRIM, 7MM NH900L	3	Each	2.90	35	5.65	0.40	6.05
90667-TC0-U01ZA	CLIP ASSY,TRIM	10	Each	2.50	35	16.25	1.14	17.39
65610-TEA-T00ZZ	FRAME COMP,R.RR.FLOOR	1	Each	703.10	35	457.01	31.99	489.00
71506-TEX-Y00	COVERRR.TOWING HOOK	1	Each	8.90	35	5.78	0.40	6.18
90103-TA0-000	SCREW TAPPING 5 X 20	2	Each	4.10	3	7.99	0.56	8.55
93903-25320	SCREW TAPPING 5X16	3	Each	0.40	35	0.78	0.05	0.83
74655-TEA-T00	PLATER.SILENCER BAFFLE	1	Each	60.90	35	39.58	2.77	42.35
91560-SLJ-003	CLIPPILLAR GARNISH	2	Each	2.10	35	2.73	0.19	2.92
BO-WHEEL ALIGN X4	WHEEL ALIGNMENT X4	1	Labor	80.00		80.00	5.60	85.60
35070	TRIM COVER,L.RR.BACK	1		163.10	35	106.01	7.42	113.43
	82521-TEA-N41ZA							

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Sum Labor	13,090.27	916.32	14,006.59
Sum Item	5,563.72	389.49	5,953.21
Sum External Services	240.00	16.80	256.80
Sum Other	106.01	7.42	113.43
Total SGD	19,000.00	1,330.03	20,330.03
Total Payable (SGD)			20,330.03

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FIRST CAPITAL INSURANCE LTD

36 ROBINSON ROAD
#16-01 CITY HOUSE
SINGAPORE 068877

Tax Invoice

Invoice No. : CRINV/20/01314
Invoice Date : 21 Sep 2020
Customer No. : **Z001
Ref : UNDERTAKING
Currency : SGD
Terms : 30 Days
RA No. : 08381

Customer Information

Customer Name : GOH CHIN CHAI
Customer Ref No. : SLK2027K (AL)

Rental Information

Date/Time Out : 27/08/2020 12:30
Date/Time Return : 19/09/2020 11:30

Car Information

Registration No. : SJF5150S
Car Model : CRV 2.4L 5AT
Car Color : GREY

Starting Mileage : 93160
Ending Mileage : 94583
Mileage Travelled : 1423

Billing Detail

#	Description	Amt
1	23 DAYS @ 100.00	2,300.00

Remarks:

MD/BS - SA: ANIKKA LAI

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Subtotal : S\$ 2,300.00
GST 7.0% : S\$ 161.00
Total : S\$ 2,461.00

Printed by mdbdysa01 at 02/11/2020 17:41

RENTAL AGREEMENT

No. 08381

Date: 27 Aug 2020

VEHICLE PARTICULAR		PAYMENT	AMOUNT
Vehicle No.	: SJF5150S	Day: 15 days x 100.00	1,500.00
Make	: HONDA	Week <i>23 days x \$100</i>	0.00
Model	: CRV 2.4L 5AT	Month <i>= \$2300 x 1.07</i>	0.00
Out (Date & Time)	: 27 Aug 2020 1230	Add HRS	0.00
In (Date & Time)	: <i>19/9/2020 @ 11:30</i>	SUB TOTAL <i>= \$2461.00</i>	1,500.00
HIRER PARTICULAR		GST	105.00
Name	: GOH CHIN CHAI	NETT AMOUNT	<i>1,605.00</i>
Address (Res)	: BLK 543 CHOA CHU KANG ST 52 #07-70 SINGAPORE 680543	SECURITY DEPOSIT	0.00
Tel	: 96271760	REMARKS	
Name on Credit Card	:	SLK2027K SA: ANIKKA TP CLAIMS > FCL	
Credit Card No.	:	TERMS & CONDITIONS	
Payment Mode	: Cash	<ul style="list-style-type: none"> ● Malaysia Drive Surcharge <ul style="list-style-type: none"> ○ Normal days \$20/day + 7% GST ○ Blackout dates, Eve of PH & PH \$40/day + 7% GST ● Insurance Excess <ul style="list-style-type: none"> ● S'pore Drive Excess - \$1500 + 7% GST ○ Malaysia Drive Excess - \$2500 + 7% GST (Excluding towing & custome fees) ● Vehicle is rented to hirer upon terms and conditions on the front and back of this agreement. ● Vehicle is to be driven only by hirer and any additional hirer listed above. ● Hirer is responsible for all parking, fines and ERP charges. ● Hirer must report all accidents to Kah Motor within 24 hours of occurrence. ● Violation of the terms of this agreement makes the hirer responsible for the full loss or damage to the vehicle whether insurance is accepted or not. ● Vehicle is strictly for Singapore use, unless covered by insurance for Malaysia use. ● Return of rental car beyond the stated duration will incur the following charges: <ol style="list-style-type: none"> 1. Less than or equal to 5 hours, a 0.5 day charge will apply 2. More than 5 hours, a FULL DAY charge will apply ● Unpaid rental bookings will not be confirmed, and will subsequently be released after 10 mins. ● Rental Deposit <ul style="list-style-type: none"> ○ A rental deposit will be collected upon confirmation of rental booking. ○ Rental deposit & rental fees will be forfeited if cancellation of rental booking is made less than 7 working days from intended start date of rental. ○ Rental deposit will be refunded after the end of the rental period. ○ Refund process will take approx 2-3 weeks via respective payment mode used at point of initial payment. 	
MAIN DRIVER PARTICULAR		<p>**Kindly top up the petrol before you return us the rental car. Otherwise, there will be charges added to your final bill. **</p>	
Name	: GOH CHIN CHAI		
Address (Res)	: BLK 543 CHOA CHU KANG ST 52 #07-70 SINGAPORE 680543		
Driving License No.	: S1830799E		
Passing Date	: 21/04/1995		
Date of Birth	: 16/09/1967		
NRIC/FIN/Passport No	: S1830799E		
ADDITIONAL DRIVER PARTICULAR			
Name	:		
Address (Res)	:		
Driving License No.	:		
Passing Date	:		
Date of Birth	:		
NRIC/FIN/Passport No	:		

84583/100%
19/9 @ 11:30



Hirer's Signature

Main Driver's Signature
(if not hirer)

Credit Card Holder's
Signature (if not hirer)


Rented out by

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	26/08/2020 10:14
Date Of Accident	26/08/2020 06:45
Exact Location Of Accident	PIE (TUAS) B4 EXIT 41
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK2027K
Insured/Policyholder	
Name Of Registered Owner	GOH CHIN CHAI
NRIC No	SXXXX799E
Email Address	JOSEPHGOH517@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96271760
Alternative Phone No	OFFICE-96271760

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.6 L VTI (A)

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO

Policy Number
Cover Note Number

Driver

Name of Driver	GOH CHIN CHAI
NRIC No	SXXXX799E
Date Of Birth	16/09/1967
Occupation	INDOOR
Date Of Driving Pass	21/04/1995
Driving Experience	25 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96271760
Fax Number	
Contact Number	OFFICE-96271760
Email Address	JOSEPHGOH517@HOTMAIL.COM

Address	BLK 543 CHOA CHU KANG SR 52 #07-70
Postcode	S680543
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	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	20 CHAO CHU KANG STREET 52 #01-02 SINGAPORE 689286
Police Station Address	ROAD: 20 CHAO CHU KANG STREET 52 #01-02 SINGAPORE 689286 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS ANNEX D&E POLICE REPORT NO. T/20200826/2061

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC1456B
Vehicle Make/Model/Colour	BLUE
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN TING FENG
NRIC/Passport Number	SXXXX061E
Contact Number	
Address	
Postcode	
Insurance Company Name	

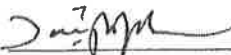
Sketch Plan Pg. 1

Vehicle Number: _____

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 as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)** I understand, acknowledge, agree and consent that:
 - (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all Insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
 - (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 - (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
 - (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
 - (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature

Date & Time: 26/8/2010

@ 09:50h

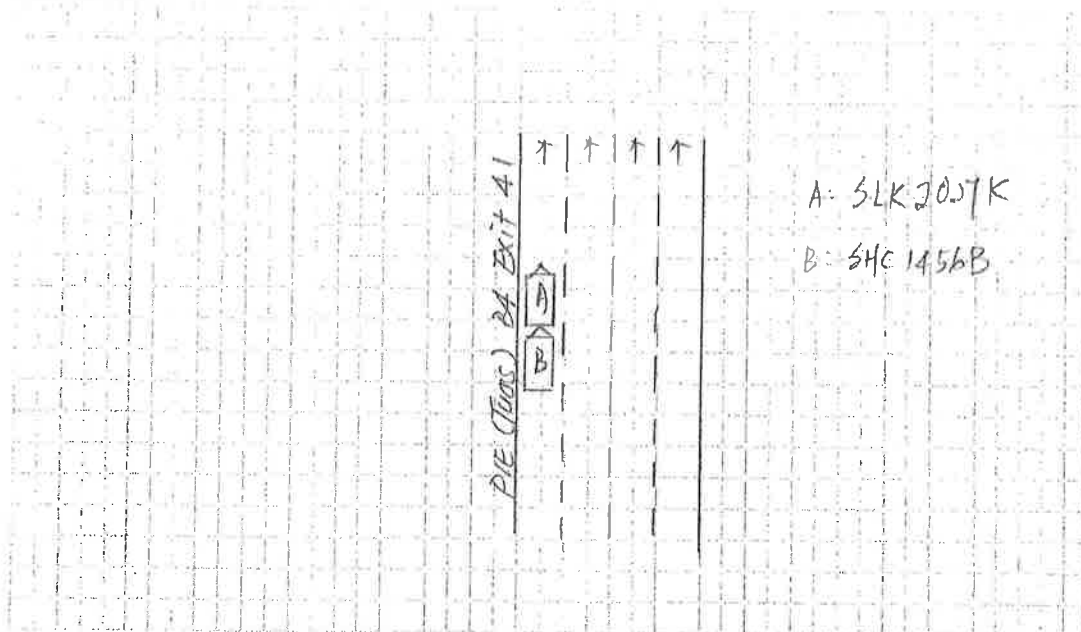
Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

Vehicle Number: _____

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/8/2020 @ about 06:45am, my vehicle (A) was travelling along PIE (Tuas) at the extreme left lane. As the front vehicle slowed down, as my vehicle followed suit. While my vehicle (A) came to a dead slow position. Veh B suddenly hit to my vehicle rear portion with a great impact, caused my vehicle swerved to the right and Veh B ended at the road shoulder before me.

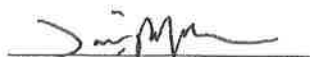
I was shock by the impact, I will consult my family doctor later if needed.

*Statement recorded in _____ language by driver.


*Own Damage (OD) Claim submission must be proceeded within 14 Days from Date of Accident.

DECLARATION

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


Policyholder's Signature
Date & Time: _____

Driver's Signature
(If driver is not the policyholder)
Date & Time: _____


Reporting Centre Personnel's Signature
Name: _____
NRIC/FIN No.: _____



**SINGAPORE
POLICE FORCE**



T/20200826/2061

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

1 of 4

Report No. T/20200826/2061

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/08/2020 14:53	Vide Report No.:	Station Diary No.: 99
--------------------------------------------	------------------	--------------------------

Informant's Particulars			
Name of Informant: GOH CHIN CHAI		Address: APT BLK 543 CHOA CHU KANG STREET 52 #07-70 SINGAPORE 680543	
ID Type / ID No.: NRIC NO / S1830799E		Contact No.: Home/Office: Mobile: 96271760	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 52	Date of Birth: 16/09/1967	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: OPERATION MANAGER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 26/08/2020 06:45	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
SHC1456B	Car				Seriously Damaged	0
SLK2027K	Car	HONDA	CIVIC 1.6 VTI CVT	Red	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLK2027K	TOKIO MARINE INSURANCE SINGAPORE LTD.	MU000372	09/01/2019	08/01/2021



**SINGAPORE
POLICE FORCE**



T/20200826/2061

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

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Report No. T/20200826/2061

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	GOH CHIN CHAI	ID No.	S1830799E
Related Vehicle	SLK2027K (Car)	Contact No.	96271760
Hospital/Clinic	CLOVER MEDICAL CLINIC PTE LTD	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	26/08/2020	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	NIL
Driver			
Name	TAN TING FENG	ID No.	S8233061E
Related Vehicle	NIL	Contact No.	82885877
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	NIL

Brief Details.

On 26/08/2020, at about 0645hrs, I was driving my vehicle (SLK2027K) on PIE towards Tuas, approaching exit 41. The traffic lane to use exit 41 was heavy so I was on the extreme left lane going at a very slow speed. I suddenly felt a hard impact from behind and my vehicle proceeded to swerve to the right. I came out to make a check when I realised that the back of my car was completely crushed and I saw a taxi stopping near the road shoulder on the left. (SHC1456B) The front of the taxi was crushed as well.

No one was injured but I was still feeling the trauma and the impact. We exchanged our particulars and my vehicle was towed away.

I then proceeded to seek medical help from Clover Medical Clinic and got 3 days of MC. (#19283) The doctor said that my heart rate was still high and my back, neck and shoulders were very tight.

I am making this report to claim insurance.



**SINGAPORE
POLICE FORCE**



T/20200826/2061

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

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Report No. T/20200826/2061

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20200826/2061

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

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Report No. T/20200826/2061

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J/ SC2 LAW JUN WEI, DARYL <i>Ce</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 26/08/2020 14:53
Officer In Charge Of Case: TP / AET / SINGAPORE SS/2 YEO CEAKENG CECILIA Contact No.: 65476404	Classification Of Case:
Authentication Stamp NP158 <i>Ce</i> SIGNATURE	