

# **PREMIER AUTOMOTIVE SERVICES PTE LTD**

23 CHANGI SOUTH AVE 2 #01-02  
SINGAPORE 486443  
TEL:65446671 FAX:62141511  
CO. REG:200707743D GST REG:200707743D

Our Ref: **SHD1137S/VC**  
Your Ref: **SHA4859M**

**WITHOUT PREJUDICE**

10 November 2020

**(Via Email)**

**Attn: The Motor Claims Department**  
MS First Capital Insurance Limited  
36 Robinson Road  
#16-01  
City House  
Singapore 068877

Dear Sir/Madam

## **ACCIDENT INVOLVING SHD1137S AND SHA4859M ALONG JALAN ANAK BUKIT // PIE / CHANGI ON 29.09.2020**

We have been authorized by Premier Taxis Pte Ltd, the owner of Taxi vehicle number: **SHD1137S**, to claim against the party/parties responsible for the damages arising from the above-mentioned accident.

Our records show that you are the insurers of vehicle number: **SHA4859M** at the material time of the accident with the driver of our client's vehicle, **Mr. GOH POH KUAN**.

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: **SHD1137S**, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of Repairs	\$ 1,926.00 (Incl. GST)
(2) Loss of Rental – (7 Days @ \$67.41 per day)	\$ 471.87
(3) Loss of Income – (7 Days @ 100.00 per day)	\$ 700.00
	<b><u>\$ 3097.87</u></b>

A copy of each of the following supporting documents is enclosed:

- (1) GIA report & sketch plan of SHD1137S**
- (2) Driver's I/C and Driving License**
- (3) Vehicle Registration card, Certificate of Insurance, Certification Letter**
- (4) Check In/Out Voucher**

## **PREMIER AUTOMOTIVE SERVICES PTE LTD**

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SINGAPORE 486443  
TEL:65446671 FAX:62141511  
CO. REG:200707743D GST REG:200707743D

Our Ref: **SHD1137S/VC**

We would appreciate if you could look into the subject matter and let us have your favorable offer within 14 days. If you are agreeable to the settlement of the above said claims, please forward us your discharge voucher as for our client's signature and payment made to "Premier Automotive Services Pte Ltd".

Please note that if we do not hear from you within the stipulated 14 days, we will have no alternative but to appoint our solicitor to act on our behalf to commence proceedings against you without further notice to you.

Yours faithfully,

This is a computer generated letter and no signature is required.

Claims Department – Vincent Chua

Email: [vincent.chua@premierauto.com.sg](mailto:vincent.chua@premierauto.com.sg)

DID: 65446689

NB: We encourage all parties to liaise with us via email to expedite all matters

PS: Please quote our reference no when replying

c.c. Client – Premier Taxis Pte Ltd



PREMIER AUTOMOTIVE SERVICES PTE LTD  
OFFICE: 23 Changi South Avenue 2 #01-02 S(486443)  
TEL: 65436676 / 65436689 FAX: 62141511  
CO. REG NO.: 200707743D GST. REG. NO.: 200707743D

MS FIRST CAPITAL INSURANCE LIMITED  
36 ROBINSON ROAD, #16-01, CITY HOUSE  
SINGAPORE 068877

### TAX INVOICE

DATE 10-Nov-2020  
PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	AMOUNT
	FINAL REPAIR BILL FOR KIA OPTIMA REGN NO: SHD 1137 S			\$ 1,800.00
TOTAL LUMP SUM REPAIR COSTS AS RECOMMENDED BY SURVEYOR				\$ 1,800.00
GST @ 7%				\$ 126.00
GRAND TOTAL				\$ 1,926.00



for Premier Automotive Services Pte Ltd

This is a computer generated invoice. No signature is required.

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

## 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	29/09/2020 10:41
Date Of Accident	29/09/2020 03:30
Exact Location Of Accident	JALAN ANAK BUKIT // PIE/CHANGI
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD1137S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	2XXXXX975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

### Vehicle Particulars

Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5107202885-01
Cover Note Number	

### Driver

Name of Driver	GOH POH KUAN
NRIC No	SXXXX042G
Date Of Birth	29/11/1962
Occupation	OUTDOOR
Date Of Driving Pass	28/02/1981
Driving Experience	39 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91504082
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 146 #12-361 BT BATOK WEST AVE 6
Postcode	650146
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
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: : PAX IN THE REAR SEAT - CHINESE GENDER: : MALE
Passenger 2	NAME: : PAX IN THE REAR SEAT - CHINESE GENDER: : FEMALE

#### 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

VEH. A - 2 PAX VEH. B - NO PAX

#### 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	SHA4859M
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	VEH. B
Vehicle Category	TAXI
Name of Driver	MR HENG
NRIC/Passport Number	
Contact Number	90020888
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

## Sketch Plan Pg. 1

### 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:

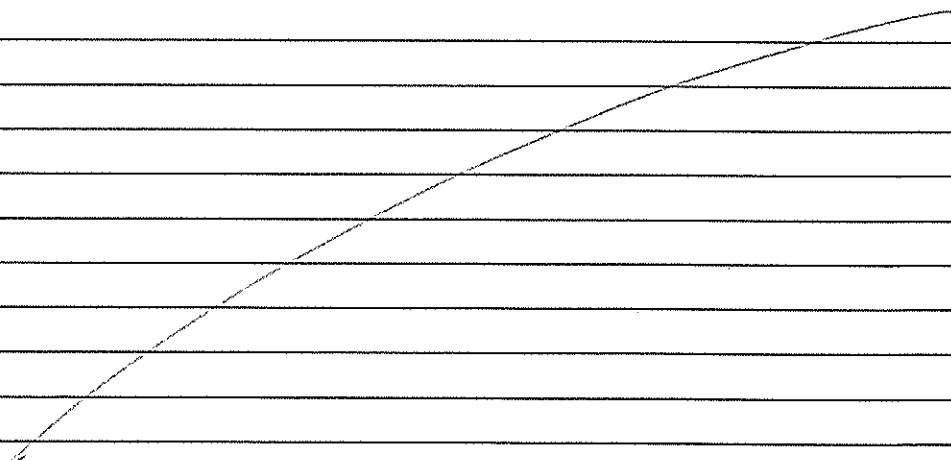
*Pic 64*  
*S1554042G*  
Driver's Signature  
(if driver is not the policyholder)  
Date & Time:

29 SEP 2020

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

A: VID 1137-S

B: STA 4559W1



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

29 SEP 2020



X ALCOH  
515540426  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

Describe Circumstance of the Accident.

ON 29/09/2020 @ 0330HRS, I WAS DRIVING MY TAXI ( SHD 1137 S ) TRAVELLING ALONG THE SLIP ROAD OF JALAN ANAK BUKIT INTO PIE/CHANGI WITH 2 PASSENGERS ONBOARD – ON THE LEFT LANE.

WHILE MANOUEVERING THE BEND HEADING INTO PIE/CHANGI – SUDDENLY I FELT AN IMPACT FROM MY RIGHT.

WHEN INSPECTED, I DISCOVERED THAT VEHICLE B; ( SHA 4859 M – COMFORT TAXI ) WHICH WAS ON MY RIGHT – HAD COLLIDED ONTO THE RIGHT REAR OF MY TAXI.

DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE RIGHT REAR PORTION & VEHICLE B HAD DAMAGES ON THE FRONT LEFT PORTION.

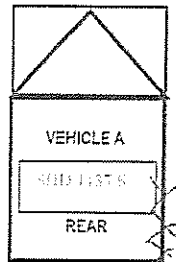
NO INJURY INVOLVED.

NO AMBULANCE AT SCENE.

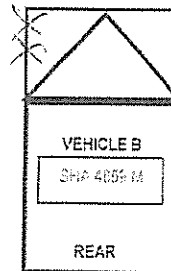
NO PASSENGERS ONBOARD VEHICLE B.

\*VIDEO FOOTAGE CAPTURED.

DAMAGES FOUND ON VEHICLE A & VEHICLE B



PREMIER  
TAXI



THIRD PARTY  
VEHICLE



5155404267

Driver's Signature & NRIC Number

Tuesday, September 29, 2020 @ 10:51:58 AM

(attended by

A handwritten signature in black ink, appearing to be 'D.'.

VEHICLE NO.

SHD 1137.5

CONTACT NO.

9150 4082

NEW MAILING  
ADDRESS  
(if any)

✓

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1554042G**



Name

GOH POH KUAN

Race

CHINESE

Date of birth

29-11-1962

Sex

M

Country/Place of birth

SINGAPORE



S1554042G

Licence Number: **S1554042G**

Name:

GOH POH KUAN

Birth Date: **29 Nov 1962**

Issue Date: **18 Dec 2003**



001054134D

Land Transport Authority

**VOCATIONAL LICENCE**

Licence No : S1554042G

Name : GOH POH KUAN

Issue Date : 16/8/2010

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

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

PASS DATE

Class 2B	Motorcycles not exceeding 200 cc	23 Jan 1985
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	28 Feb 1981
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	08 May 1984

5851417



NRIC No. **S1554042G**

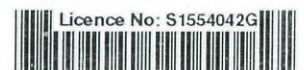


Date of issue

12-01-2018

Address

APT BLK 146 BUKIT BATOK WEST AVENUE 6  
#12-361  
SINGAPORE 650146



Licence No: S1554042G

NP 428A

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	16/08/2010



Text size + -

**Enquire Transaction History****Transaction History Details**

Log Date/Time:	29 Jan 2016 / 09:26:42	Receipt No.:	AACCK001-AX239-160129-000001
Asset Type:	Vehicle	Transaction Amount:	\$68,670.00
Asset ID:	SHD1137S	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20160129092642074592		
Vehicle No.:	SHD1137S		
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)		
Vehicle Attachment 1:	Air-Con (Taxi)		
Vehicle Attachment 2:	-		
Vehicle Attachment 3:	-		
Vehicle Scheme:	Taxi (Company)		
First Registration Date:	29 Jan 2016		
Original Registration Date:	29 Jan 2016		
Vehicle Make:	KIA		
Vehicle Model:	OPTIMA 1.7(A) DIESEL		
Chassis No.:	KNAGM414MF5659281		
Engine No.:	D4FDFH314420		
Motor No.:	-		
Trailer Chassis No.:	-		
Propellant:	Diesel		
Passenger Capacity:	4		
Engine Capacity:	1685		
Power Rating:	-		
Unladen Weight:	1584		
Maximum Laden Weight:	2050		
Primary Color:	Silver		
Secondary Color:	-		
Manufacturing Year:	2015		
Open Market Value:	\$22,302.00		
Minimum PARF Benefit:	\$13,933.00		
PARF Eligibility:	Y		
No. of Transfer:	0		
Effective Ownership Date/Time:	29 Jan 2016 09:26:42		
COE No.:	2016012901003596G		
COE Expiry Date:	28 Jan 2024		
COE Bid Category:	-		
Actual QP/PQP Paid Amount:	\$45,307.00		
Lifespan Expiry Date:	28 Jan 2024		

## 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 :** 5107202885-01-001142

**Cover :** Third Party

1. Index mark and Registration Number of Vehicle : **SHD1137S**  
Chassis Number : KNAGM414MF5659281
2. Name of Policyholder : PREMIER TAXIS PTE. LTD.
3. Effective Date of Insurance : 01 Apr 2020
4. Expiry Date of Insurance : 31 Mar 2021
5. Persons or Classes of Persons entitled to drive\*  
(a) The Policyholder.  
(b) Any licensed taxi driver 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 as a Taxi.  
(b) Use for social domestic and pleasure purposes.

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) 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 I)	: N/A
EXCESS (SECTION II)	: S\$3,500
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: UNITED OVERSEAS BANK LIMITED
SUM INSURED	: N/A

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 : HL SUNTEK INSURANCE BROKERS PTE LTD (00000690672)  
Date of Issue : 02 Apr 2020 14:55 hrs

**For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED**



**Chief Executive**



21 October 2020

To Whom It May Concern

Dear Sir/Madam

**CERTIFICATION LETTER**

This letter serves to inform that Chua Keng Han of NRIC Number S1214682E is a registered driver of SHD1137S. Chua Keng Han is paying a discounted daily rental rate of \$67.41 (Inclusive of GST) on 29 Sep 2020.

Should you require further information, please contact us at 6214 8880.

Thank you.

Yours sincerely

A handwritten signature in black ink, appearing to be "Chin Bee Lian".



Chin Bee Lian (Ms)  
Assistant Vice President  
Taxis Administration

Prepared by: Hasnah

PREMIER TAXIS PTE LTD  
23 Changi South Avenue 2  
#03-02  
Singapore 486443  
Telephone: +65 6214 8880 Fax: +65 6214 0330  
[www.premiertaxi.com.sg](http://www.premiertaxi.com.sg)  
Co. Reg. No. 200304975H

