

T K LEE AUTOMOTIVE PTE.LTD.

NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY
SINGAPORE 417883 Co.Reg. No. : 201210266Z
TEL: 6509 5521 / 6509 5524 FAX: 6509 5523

Attn: The Motor Claims Department
CHINA TAIPING INSURANCE (S) PTE LTD
3 ANSON ROAD #16-00
SPRINGLEAF TOWER
SINGAPORE 079909

Yrs Ref.: SJH2897E
Our Ref.: TKL1020-2871
Date.: 30.10.2020

Accident involving PC8721U And SJH2897E On 29.09.2020 At 2020hrs Along
JALAN BUROH TOWARDS PIONEER ROAD

We refer to the above matter. We are instructed that above accident was caused solely and completely by the negligence of your insured, as a result of which, our client have suffered loss and expenses.

We are instructed by our client to make a property damages claims as:-

	<u>Amount</u>
1. Repair Cost	S\$ 3,900.00
2. Loss of Use (3days @ S\$180Per day)	S\$ 540.00
3. Towing	S\$ -
4. LTA Search Fee	S\$ 7.45
5. E-File Search Fee	S\$ 29.00
Claim Amount	S\$ 4,476.45

Enclosed are the following documents for your perusal.

<input checked="" type="checkbox"/> Original Final repair Bill	<input checked="" type="checkbox"/> Letter of Authority
<input type="checkbox"/> Original Survey Report & Inv	<input type="checkbox"/> Rental Agreement / Receipt
<input type="checkbox"/> Original Photographs of [PC8721U]	<input checked="" type="checkbox"/> E-File Search Fee/ LTA Receipt
<input checked="" type="checkbox"/> GIAS Reports of [PC8721U]	<input checked="" type="checkbox"/> Vehicle Registration Card
<input checked="" type="checkbox"/> Certificate of Insurance	<input checked="" type="checkbox"/> Driver's Driving License / Identity Card
<input type="checkbox"/> Report Of A Traffic Accident	

Your prompt action will be greatly appreciated.

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Yours faithfully,
T K Lee Automotive Pte. Ltd.


tklee0247@gmail.com

T K LEE AUTOMOTIVE PTE LTD

1 Kaki Bukit Avenue 6, #02-47 Autobay, Singapore 417883

Tel : (65) 6509 5521 Fax : (65) 6509 5523

Co. Reg. : 201200623R

INVOICE

0848

Messrs : **CHINA TAIPING INSURANCE (S) PTE LTD**
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909

Claim No. : TKL1020-2871

Acc. Date : 29/09/2020

Veh. No./Model : PC 8721U TOYOTA HIACE

Date : 30/10/2020

QTY	DESCRIPTIONS	AMOUNT
	Repair Cost : Inclusive of supply parts, panel beating, spray painting and labour.	3,900.00
		3,900.00

E. & O.E.

* Please make all payments to " T K Lee Automotive Pte Ltd "

* All service and repairing are in good order & conditions.



Customer Sign & Chop

T K Lee Automotive Pte Ltd

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 01 Oct 2020 / 11:02:14

Receipt Date/Time : 01 Oct 2020 / 11:02:14

Tax Invoice/Receipt

Receipt No. : ITNET-00000-201001-001028

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SJH2897E

As at 29 Sep 2020/20:20:00

Insurance Co: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

1	Insurance Enquiry - SJH2897E Enquiry Fee 20201001110025840233	7.00	0.49	7.49
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Sub-Total	7.00	0.49	7.49
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Total Before Rounding	7.00	0.49	7.49
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Rounding Difference			0.04
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Total Amount Payable			7.45
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Paid By

20201001110040198	Direct Debit: eNETS Debit (Internet Banking)	7.45
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Total	7.45
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Cash Change	0.00
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Tendered Amount	7.45
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Excess Refundable Amount	0.00
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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.

TAX INVOICE

Our Ref No: GR-20-118667
Date of Request: 01/10/2020

Your Ref No: PURCHASE BY EMAIL

T K LEE AUTOMOTIVE PTE LTD
NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY
SINGAPORE 417883

Dear Sir/Madam,

Your Vehicle No: PC8721U
Date of Accident: 29/09/2020
Place of Accident: JALAN BUROH TOWARDS PIONEER ROAD
Involving Vehicle No: SJH2897E

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-20-118669
Date of Request: 01/10/2020

Your Ref No: PURCHASE BY EMAIL

T K LEE AUTOMOTIVE PTE LTD
NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY
SINGAPORE 417883

Dear Sir/Madam,

Date of Accident: 29/09/2020
Vehicle No: PC8721U
Place of Accident: JALAN BUROH TWDS PIONEER ROAD
Involving Vehicle No: SJH2897E

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\$)
SJH2897E	JALAN BUROH TWDS PIONEER ROAD	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

Date:

To: CHINA TAIPING INSURANCE (S) PTE LTD

RE: ACCIDENT INVOLVING VEHICLE NO.: PC 8721U AND SJH2897E
AT/ALONG JALAN BUKIT TOWARDS PIONEER ROAD.
ON 29/09/2020.

I/We, Kim TRANSPORT SOLUTIONS PTE LTD of (NRIC No./ROC NO.)
201300057N of 48 TOH GUAN ROAD EAST #05-97 S(608586)
owner of vehicle no. PC 8721U in consideration of M/S T K Lee Automotive Pte. Ltd
repairing my/our vehicle PC 8721U at my/our instruction and hereby authorise
M/S T K Lee Automotive Pte. Ltd to demand claim settle receive whatever
amount settled / payable by the Insurance Company and/or third party or to commence legal
proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and
all claimed and/or settled shall belong to them absolutely.

I further agree and undertake to indemnify them against the above mentioned claim costs
which may arise therewith.



Signature of Owner: _____

Date: _____

MSME20085340 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 30/09/2020 16:55
 SUBMITTED BY: Chia Pei Ying

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	30/09/2020 16:55
Date Of Accident	29/09/2020 20:20
Exact Location Of Accident	JALAN BUROH TWDS PIONEER ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC8721U
Insured/Policyholder	
Name Of Registered Owner	KIM TRANSPORT SOLUTION PTE LTD
Co Reg No	2XXXXX057N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98731138

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE

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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P2379688
Cover Note Number	

Driver

Name of Driver	ANG SENG KOON
NRIC No	SXXXX891G
Date Of Birth	03/06/1954
Occupation	OUTDOOR
Date Of Driving Pass	02/02/1993
Driving Experience	27 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97504354
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address BLK 17 DOVER CRESCENT #13-46
 Postcode 130017
 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 -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

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) 2
 Passenger 1
 NAME: : RUZALNI
 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

I WAS DRIVING ALONG JALAN BUROH TOWARDS PIONEER ROAD. SUDDENLY, VEHICLE B CUT INTO MY LANE AND HIT ONTO MY LEFT FRONT PORTION. VEHICLE B THEN TURNED INTO BUROH STREET. I AM THE EMPLOYEE OF KIM TRANSPORT SOLUTIONS PTE LTD AND WAS DRIVING THE VEHICLE FOR WORK PURPOSE.

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 SJH2897E
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category PRIVATE CAR
 Name of Driver SHAWN TAN WEI XUAN
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name

Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLANIMPORTANT NOTICE

- 1 Please report correctly the details of the accident to speed up the claims process.
- 2 The form must be completed by the Policyholder and/or the Authorised Driver.
- 3 Information provided must be as truthful and accurate as possible. Any willful 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.

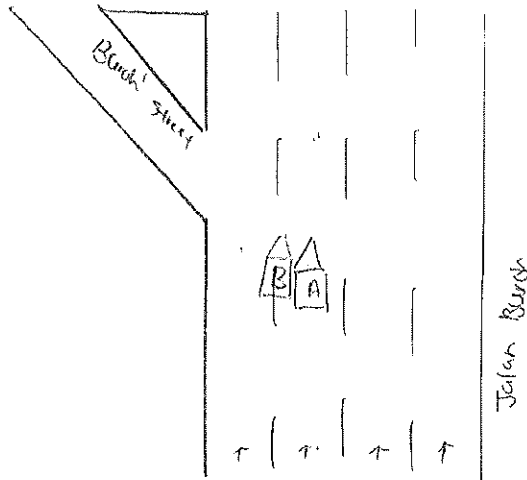
Policyholder's Signature
Date & Time.

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Jalan Burah towards Pioneer Road.

Suddenly vehicle B cut into my lane and hit onto my left front portion. vehicle B then turn into Burah Street.

I AM THE EMPLOYEE OF KIM TRANSPORT SOLUTIONS PTE LTD AND WAS DRIVING VEHICLE FOR WORKING PURPOSE.

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

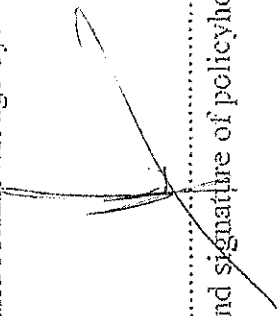
LETTER OF UNDERTAKING

I/We, KIM TRANSPORT SOLUTION PTE LTD, the owner of vehicle no. PC8721U
involving in an accident with vehicle no. (TP) SJH2897E on 29/09/2020 along
JALAN BUROH TOWARDS PIONNER ROAD

My/Our insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether
to claim under my/our Policy or against the Third Party and if the former shall submit such a
claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within
14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop. LEE BROTHERS
LEE BROTHERS AUTOMOTIVE PTE LTD

Signed and Acknowledge by:


..... Date 30/09/20
Name and signature of policyholder Company Stamp

AXA INSURANCE PTE LTD
8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Centre #01-21
Tel: 1800 8804888 Fax:-
Website www.axa.com.sg
GST Registration Number: 190903512M
customer.care@axa.com.sg



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, 1961 (Malaysia) ■ Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO. : VFX/P2379688 Account No. : 94123
Coverage : Comprehensive
Sum Insured : Market Value At The Time Of Loss
Name of Policy Holder : KIM TRANSPORT SOLUTIONS PTE LTD
Vehicle Registration No. : PC8721U
Period of Insurance : From 08/01/2020 to 07/01/2021 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person provided he is in the Policyholder's employ and/or is driving on their order or with their 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.

LIMITATIONS AS TO USE*

- (a) Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Policy.
 - (b) Use only in the Republic of Singapore.
- The Policy does not cover:
- (a) Use for racing, pace-making, reliability trial or speed-testing
 - (b) Use whilst drawing a trailer except one towing no more than two (2) wheels of any one disabled mechanically propelled vehicle.

EXCESS :

Sect I - Any Authorised Driver : SGD 2,000.00
Sect II-Any Authorised Driver : SGD 1,500.00
Windscreen Excess : SGD 100.00

* Limitations rendered inoperative by provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 23 of the Road Transport Act, 1961 (Malaysia) are not to be included under these headings.

I 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 II of the Road Transport Act, 1961 (Malaysia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by SGOOWT on 14/02/2020

IMPORTANT

Policyholders are warned that, as the date of a claim nears they must surrender the Certificate of Insurance and the policy to the Insurance Company or the Certificate of Insurance must be returned together with a statutory declaration in the event that no claim follows in compliance with this obligation or an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act, 1961.

FOR INDIVIDUAL CUSTOMERS

Under the company's rules, the policyholder must pay the premium stated on the policy.

FOR NON-INDIVIDUAL CUSTOMERS

Please refer to the General Conditions attached to the policy.

Licence Number: **S0129891G**
 Name: **ANG SENG KOON**
 Birth Date: **03 Jun 1954**
 Issue Date: **11 Jan 2003**

0001030575

IDENTITY CARD NO. **S0129891G**



Name: **ANG SENG KOON**
 洪成坤
 Race: **CHINESE**
 Date of birth: **03-06-1954** Sex: **M**
 Country/Place of birth: **SINGAPORE**

S0129891G

Land Transport Authority

VOCATIONAL LICENCE

Licence No.: **S0129891G**
 Name: **ANG SENG KOON**
 Issue Date: **10/8/2017**
 Please visit www.lta.gov.sg to check the status of this vocational licence

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)
 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms
 PASS DATE: **02 Feb 1993**
 Licence No: **S0129891G**

6271938

NRIC No: **S0129891G**
 Date of issue: **26-08-2019**
 Address: **APT BLK 17 DOVER CRESCENT #13-46 SINGAPORE 130017**

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

Type	Description	Issue Date
03	BUS VL	26/08/2011
04	BUS ATTENDANT	26/08/2011



[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	057N

Vehicle Details

Vehicle No.:	PC8721U
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Oct 2020
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE COMMUTER GL 2.8 AUTO
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	1GD8460173
Chassis No.:	GDH2232002403
Maximum Power Output:	-
Open Market Value:	\$46,146.00
Original Registration Date:	08 Jan 2020
First Registration Date:	08 Jan 2020
Transfer Count:	0
Actual ARF Paid:	\$2,308.00

Intended PARF Rebate Details

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

Intended COE Rebate Details

COE Expiry Date:	07 Jan 2030
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$23,200.00
COE Rebate Amount:	\$21,466.00
Total Rebate Amount:	\$21,466.00

The information contained herein is correct as at 06 Oct 2020

OK