



Teamwork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Singapore 408934
Paya Ubi Industrial Park
Tel: 6844 2475 Fax: 6844 2474
Email: claims@teamworkgarage.com
GST Register No: 201015366H

12th May 2021

Our reference: 2010-26
Your reference: SLF3915S

AXA Insurance Singapore Pte Ltd

BY HAND

8 Shenton Way
#27-01 AXA Tower
Singapore 068811

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant : AN LE
Address : 33 BISHAN STREET 11 #32-11 SINGAPORE 579820

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **19/10/2020** along **BISHAN ROAD** involving our client's vehicle registration number **SMR5801Z** and vehicle registrations number **SLF3915S** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair	:	\$ 23,326.00
Loss of Rental	:	\$ 2,700.00
Purchase 3P Report	:	\$29.00
Total	:	\$ 26,055.00

A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) Tax Invoice;
- e) Letter of Authorization;
- f) Purchase 3rd Party Report Invoice;
- g) Certificate of Insurance;
- h) Rental Agreement & Official Receipt;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,



A handwritten signature in blue ink, appearing to be "R. H. H.", written over a horizontal line.

Teamwork Garage Pte Ltd

Encl

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	20/10/2020 18:40
Date Of Accident	19/10/2020 20:40
Exact Location Of Accident	BISHAN RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR5801Z
Insured/Policyholder	
Name Of Registered Owner	AN LE
NRIC No	SXXXX302G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98982102
Alternative Phone No	OFFICE-98982102

Vehicle Particulars

Manufacturer	BMW
Model	X3 XDRIVE35I A/T 4WD S/R DSC NAV LED HUD
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5119350485
Cover Note Number	

Driver

Name of Driver	DUAN NI JUN
NRIC No	SXXXX031F
Date Of Birth	15/11/1979
Occupation	INDOOR
Date Of Driving Pass	09/11/2019
Driving Experience	0 YEAR AND 11 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-98369578
Fax Number	
Contact Number	OFFICE-98369578
EMail Address	NOEMAIL

Address	33 BISHAN STREET 11 #32-11
Postcode	579820
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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?	YES
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	BISHAN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5529999 - FAX NO: 65561905
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20201020/2035.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLF3915S
Vehicle Make/Model/Colour	VOLSWAGEN GOLF
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name DUAN NI JUN

Approximate Age

Injuries Sustain HEADACHE

Injured person in which vehicle? SMR5801Z

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

Accident Sketch Plan


SKETCH PLAN


IMPORTANT NOTICE

- 1) Please report correctly on the details of the accident to speed up the claims process.
- 2) This form must be completed by the policy holder 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 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.
- 8) **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

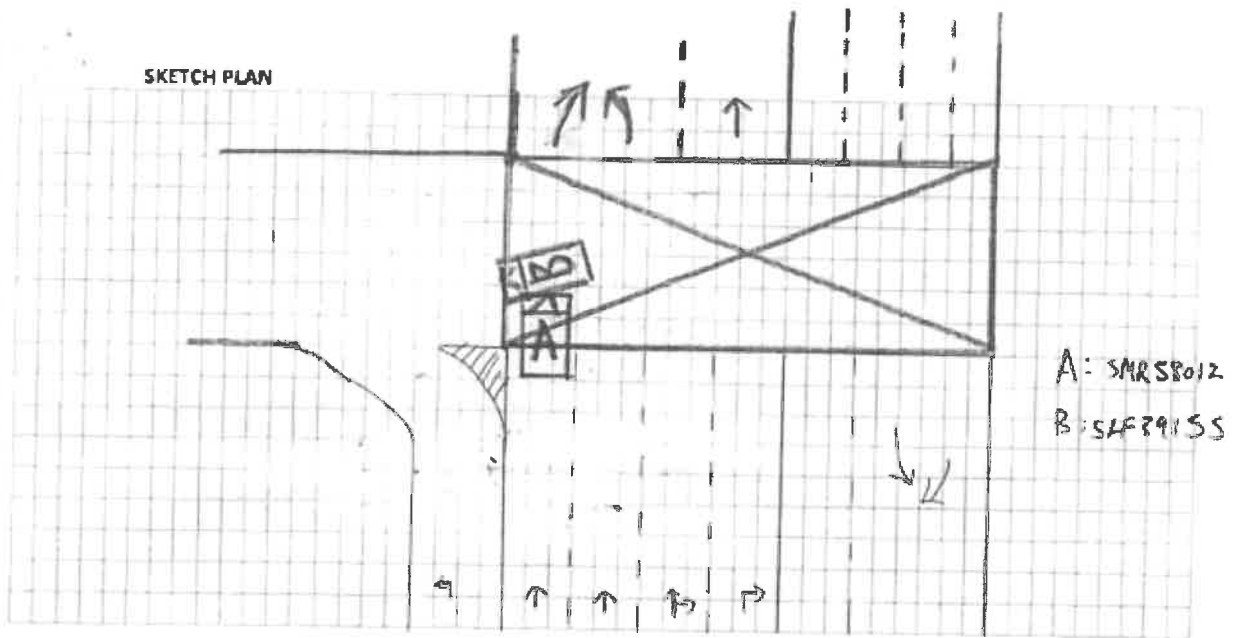
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in the (form) and any other personal information provided by me or possessed by my insurer (collectively the "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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposed stated, or
 - (ii) For complying with requirements under my regulations, laws or court orders.


Policy holder's signature
Date / time:


Driver's signature
(If driver is not policy holder)
Date / time:


reporting centre personnel's Signature
Date / time:

Accident Sketch Plan



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report
T/20201020/2035

DECLARATION

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

LSA
Policy holder's signature
Date & time:

Driver's signature
(if driver is not policy holder)
Date & time:

reporting centre personnel's Signature
NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20201020/2035

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

1 of 3

Report No T/20201020/2035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/10/2020 11:42		Vide Report No: E/20201019/0142		Station Diary No: 38	
Informant's Particulars					
Name of Informant: DUAN NI JUN			Address: 33 BISHAN STREET 11 #32-11 SINGAPORE 579820		
ID Type / ID No.: NRIC NO / 57956031F			Contact No.: Home/Office: Mobile: 98369578		
Nationality: CANADIAN			Email:		
Sex: Female	Age: 40	Date of Birth: 15/11/1979	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: FINANCIAL ADVISOR			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: 19/10/2020 20:40	Type of Location: X-Junction
Location: BISHAN STREET 14				
Weather: Clear		Road Surface: Dry	Road Speed Limit	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLF3915S	Car	VOLKSWAGO N	GOLF GTI 2.0 TSI 5G18TY	Red	Seriously Damaged	0
SMR5801Z	Car	BMW	X3 XDRIVE35i A/T 4WD S/R DSC NAV LED HUD	Black	Seriously Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20201020/2035

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

2 of 3
Report No: T/20201020/2035

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Ouyang Yan	ID No.	NIL
Related Vehicle	SLF3915S (Car)	Contact No.	92970252
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
Driver			
Name	DUAN NI JUN	ID No.	S7956031F
Related Vehicle	SMR5801Z (Car)	Contact No.	98369578
Hospital/Clinic	PRUDENCE FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	20/10/2020	Date Discharge	20/10/2020
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 19/10/2020 at about 8.40pm, I was driving my vehicle SMR5801Z (BMW/ Black) along Bishan Road towards the direction of Braddell Road. When I was crossing the junction of Bishan St 14, the traffic light was in my favor and I proceeded straight. Just as I crossed the stop line, I noticed that a vehicle SLF3915S (Volkswagen/ Red) does not seems to be stopping. I tried to stop to avoid the accident but to no avail. Due to the accident, my vehicle was badly damaged. I was conveyed to the hospital and traffic police attended to the accident scene. I rejected the MC from the hospital as I am working from home. However, I sought treatment again on 20/10/2020 at Prudence Family Clinic. I was then given 5 days of medical leave. I also checked the footage from my in car recording subsequently and confirmed that the red Volkswagen had failed to give way to on coming traffic at a discretionary turning junction and caused the accident.

Police Report



**SINGAPORE
POLICE FORCE**



T/20201020/2035

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

3 of 3

Report No: T/20201020/2035

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:

E/

Staff Sgt ONG KIAN KENG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

20/10/2020 11:42

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt ONG YONG HOCK

Contact No: 65478438

Classification Of Case:

Authentication Stamp
NP100



SINGAPORE
POLICE FORCE

SW 061

SIGNATURE

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 302G

Vehicle Details

Vehicle No.: SMR5801Z
Vehicle to be Exported: No
Intended Deregistration Date: 21 Oct 2020
Vehicle Make: B.M.W.
Vehicle Model: X3 XDRIVE35I A/T 4WD 5/R DSC NAV LED HUD
Primary Colour: Black
Manufacturing Year: 2014
Engine No.: 00168925N55B30A
Chassis No.: WBAWX720600C21825
Maximum Power Output: 225.0 kW (301 bhp)
Open Market Value: \$59,376.00
Original Registration Date: 25 Feb 2015
First Registration Date: 25 Feb 2015
Transfer Count: 2
Actual ARF Paid: \$78,877.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 24 Feb 2025
PARF Rebate Amount: \$55,213.00

Intended COE Rebate Details

COE Expiry Date: 24 Feb 2025
COE Category: E - Open Category
COE Period(Years): 10
QP Paid: \$71,921.00
COE Rebate Amount: \$30,782.00
Total Rebate Amount: \$85,995.00

The information contained herein is correct as at 21 Oct 2020

OK

9528499



NRIC No. **S8089302G**





Nationality
CANADIAN
Date of issue
22-05-2019

33 BISHAN STREET 11 #32-11
SINGAPORE 579820

NRIC No: **S8089302G** Date: **04/02/2020**

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8089302G





Name
AN LE

Race
CHINESE

Date of birth
08-01-1980

Sex
M

Country/Place of birth
CHINA



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7956031F**

Name: **DUAN NI JUN**

Birth Date: **15 Nov 1979**

Issue Date: **09 Nov 2019**

002995876C




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

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg

EFFECTIVE DATE: **09 Nov 2019**

NP 428A

Licence No: **S7956031F**



9528496



NRIC No. **S7956031F**

Nationality: **CANADIAN**

Date of issue: **22-05-2019**

33 BISHAN STREET 11 #32-11 SINGAPORE 578820

NRIC No. **S7956031F** Date: **04/02/2020**



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7956031F**




Name: **DUAN NI JUN**

Place: **CHINESE**

Date of birth: **15-11-1979**

Country/Place of birth: **CHINA**

Sex: **F**



CUSTOMER'S SIGNATURE

LETTER OF AUTHORIZATION

To AXA & Teamwork Garage Pte Ltd (Third party insurance & Workshop)
Claimant An Le

Dear Sirs,

I/We, An Le owner of vehicle no. SMR5801Z
hereby authorize my/our repairer, Teamwork Garage Pte Ltd
act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or
loss of use ("claim") for my/our vehicle no. SMR5801Z that was damage pursuant to the
accident which occurred at/along
BISHAN ROAD

involving vehicle nos. SLF3915S

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies
pertaining the above mentioned accident due to me/us to my/our repairer/solicitors
Teamwork Garage Pte Ltd. I/We hereby authorize you to forward and release all
compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors
Teamwork Garage Pte Ltd pertaining to above said accident whom I/we
authorized and assigned to collect the said compensation monies.

I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without prejudice
and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s concerned.

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the
personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein
should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured
losses claim arising of the subject matter in the action.

Thank you.

Dated this _____ day of _____ (month) 20____ (year)

Signature of owner vehicle (claimant): 

Name of owner of vehicle (claimant): AN LE

NRIC Number (claimant): S8089302 G



RECORDS MANAGEMENT CENTRE

**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-20-128047

Date of Request: 21/10/2020

Your Ref No:

PURCHASE BY EMAIL

TEAMWORK GARAGE PTE LTD
53 UBI AVE 1 #01-24, PAYA UBI INDUSTRIAL PARK
SINGAPORE 408934

Dear Sir/Madam,

Your Vehicle No: SMR5801Z

Date of Accident: 19/10/2020

Place of Accident: BISHAN RD

Involving Vehicle No: SLF3915S

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-20-128049

Date of Request: 21/10/2020

Your Ref No: PURCHASE BY EMAIL

TEAMWORK GARAGE PTE LTD
53 UBI AVE 1 #01-24, PAYA UBI INDUSTRIAL PARK
SINGAPORE 408934

Dear Sir/Madam,

Date of Accident: 19/10/2020
Vehicle No: SMR5801Z
Place of Accident: BISHAN RD
Involving Vehicle No: SLF3915S

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\$)
SLF3915S	BISHAN RD	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 [X] Cash [] Cheque

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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	20/10/2020 11:55
Date Of Accident	19/10/2020 20:35
Exact Location Of Accident	BISHAN ST 14
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF3915S
Insured/Policyholder	
Name Of Registered Owner	ZHANG ZI KAI, MARK
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	GOLF 2.0 GTIBM 162TSI D6F
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VA1/GA162395
Cover Note Number	
Driver	
Name of Driver	OUYANG YAN
NRIC No	SXXXX948A
Address	68 JALAN KERUING

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

Circumstances of Accident

refer police report

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

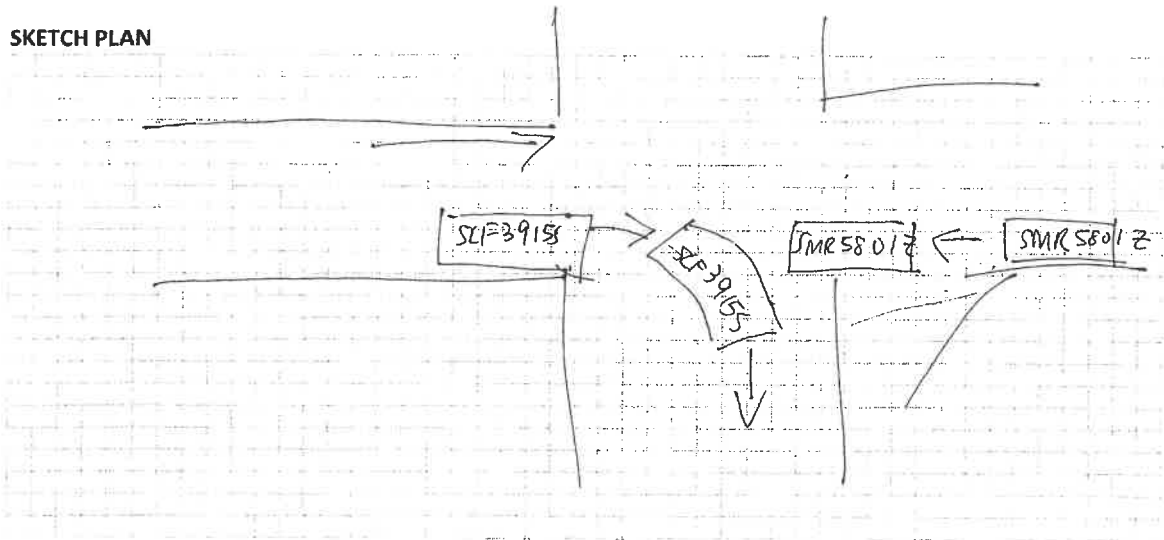
Vehicle Registration Number	SMR5801Z
-----------------------------	----------

Vehicle Make/Model/Colour	BMW X3 BLACK
Name of Driver	MICHELLE DUAN
Insurance Company Name	

DETAILS OF INJURED PERSON 1

Name	MICHELLE DUAN
Injured person in which vehicle?	SMR5801Z

SKETCH PLAN

[illegible]

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

Date & Time: 20/10/20 1203

Date & Time: 20/10/2020 12:03

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

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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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**.
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5. **Any false reporting may be referred to the Police for investigation.**
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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:

20/10/20 1203



Driver's Signature

(If driver is not the policyholder)

Date & Time:

20/10/2020 1203



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

20 OCT 2020

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20201019/2145

1 of 4

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20201019/2145

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/10/2020 22:18	Vide Report No.: E/20201019/0142	Station Diary No.: 116
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Informant's Particulars

Name of Informant: OUYANG YAN			Address: 68 JALAN KERUING SINGAPORE 808983		
ID Type / ID No.: NRIC NO / S8317948A			Contact No.: Home/Office: Mobile: 92970252		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 37	Date of Birth: 17/06/1983	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: MARKETING MANAGER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/10/2020 20:35	Type of Location:
Location: BISHAN STREET 14				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLF3915S	Car	VOLKSWAGO N	GOLF GTI 2.0 TSI 5G19TY	Red	Seriously Damaged	0
SMR5801Z	Car	BMW	X3 XDRIVE35I A/T 4WD S/R DSC NAV LED HUD	Black	Seriously Damaged	0

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20201019/2145

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20201019/2145

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	OUYANG YAN	ID No.	S8317948A
Related Vehicle	SLF3915S (Car)	Contact No.	92970252
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Michelle Duan	ID No.	NIL
Related Vehicle	SMR5801Z (Car)	Contact No.	98369578
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 the 19/10/2020 at 2035hrs, my vehicle (SLF3915S) was travelling along Bishan st 22 turning right towards Bishan road. The weather was clear and traffic volume was moderate. As my vehicle was on the most right lane, I spotted one black vehicle (SMR5801Z) from the opposite direction with the left signal on and the vehicle seem to be proceeding to turn left onto bishan road. I started moving off. Suddenly, I felt an impact from the left side of my vehicle. I hit the brakes and vehicle came to a stop. I alighted from my vehicle and spotted the black vehicle had collided into my vehicle.

Shortly, there was one police car who came to scene. Traffic Police, Ambulance and Fire truck had arrived. The damages to my vehicle is the left portion and the damages to the black vehicle is the front portion. The other driver was conveyed to the hospital. Both vehicles were towed away. There is no in-car camera installed in my vehicle. However, there is a camera inside the black vehicle. TP had issued me a case card vide E/20201019/0142.

I wish to inform that I am currently still shocked from the accident and I am not injured. I am lodging this report for insurance claim.



**SINGAPORE
POLICE FORCE**



T/20201019/2145

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20201019/2145

CONTINUATION OF REPORT

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20201019/2145

4 of 4

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999




Report No. T/20201019/2145

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 E / Sgt 2 CASSIDY TAN GIA LOK	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 19/10/2020 22:18
Officer In Charge Of Case: TP / GIT / SI THABAGESH JEYATHESH Contact No.: 65476232	Classification Of Case: <div style="border: 1px solid black; padding: 2px; display: inline-block;">SN 061</div>
Authentication Stamp NP168 	

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: 5119350485

Cover : drivo CLASSIC

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : SMR5801Z |
| Chassis Number | : WBAWX720600C21825 |
| 2. Name of Policyholder | : AN LE |
| 3. Effective Date of Insurance | : 09 Oct 2020 |
| 4. Expiry Date of Insurance | : 08 Oct 2021 |
| 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/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 for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

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 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: YES
EXCESS WAIVER	: NO
PRIMARY DRIVER	: AN LE
NAMED DRIVER (1)	: DUAN NI JUN
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: OCBC BANK LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 : SECURANCE SOLUTIONS (00000573359)
 Date of Issue : 08 Oct 2020 15:14 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934
Tel: 6844 5938 Fax: 6285 5228 Email : kntcars@gmail.com
Biz Reg. No.: 53208965X

No.: 3971

OFFICIAL RECEIPT

Date: 12/05/2021

Received from An Le

The Sum of Dollars Two Thousand and Seven Hundred Dollars

Being payment of SMQ8107E (20/10/2021 to 4/11/2021)

\$ 2700

K & t Cars

Cheque No.:

Authorised Signature



K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park
Singapore 408934
Tel: 6844 5938 Fax: 6285 5228
Email: kntcars@gmail.com
Biz Reg. No.: 53208965X

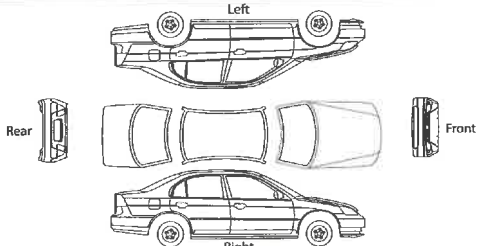
VEHICLE RENTAL AGREEMENT

NO.: KT-05022

Veh. No.: <u>SMQ 8107E</u>	Replace Veh. No.: <u>8MR5801Z</u>
Veh. M / M: <u>Bmw 316 I</u>	Replace Veh. M / M: <u>Bmw X3</u>

B12 Reg. No.: 53208953A

HIRER'S PARTICULAR		<input type="checkbox"/> SAME AS HIRER	DRIVER'S PARTICULAR	
Name: An Le			Name: Quan Ni Jun	
Address: 33 Bishan street 11 # 32-11 S(579820)			Address: 33 Bishan street 11 # 32-11 S(579820)	
I/C: 580893026	D.O.B: 08/01/1980		I/C: 57956031F	D.O.B: 15/11/1979
Contact: 98982102	Pass Date:		Contact: 98369578	Pass Date: 09/11/2019

	A - ACCIDENT	Hirer's acceptance
	C - CRACKED	
	D - DENTS	Driver's acceptance
	S - SCRATCHES	



RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	<u>20/10/2020</u>		Date In	<u>4/11/2020</u>	
Time Out	<u>1915</u>		Time In	<u>1100</u>	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES					PETROL / DIESEL LEVEL					
Daily	@ \$	180	15 Days @	\$ 2700	OUT	E	¼	½	¾	F
Weekly	@ \$		_____ Wks @	\$						
Monthly	@ \$		_____ Mth @	\$	IN	E	¼	½	¾	F
Hours	@ \$		_____ Hrs @	\$						
Inclusive of additional charges (if any)			Amt payable	\$ 2700	Petrol Charges		YES	NO	AMT: _____	
					CDW		YES	NO	AMT: _____	
Payment: <input type="checkbox"/> CASH <input type="checkbox"/> NETS <input type="checkbox"/> CHQ <input type="checkbox"/> VISA <input type="checkbox"/> MAST					Security Deposit		YES	NO	AMT: _____	
Bank / Cheque No.:					Advance Payment		YES	NO	AMT: _____	

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tender accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true and accurate.

IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)

- ❖ Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- ❖ Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- ❖ Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- ❖ Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- ❖ The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- ❖ In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- ❖ In view of all accident, the hirer will bear the full responsibility for the SGD\$3,500/- excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT	
	
Signature of hirer / driver (company stamp if any)	For and on behalf of K & t CARS (authorised signature only)