1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883 TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg Co. Reg. No. 201300201N GST Reg. No. 201300201N

Our Ref : KCR1120209205CTI

Your Ref: GBB7345A

Date : \_ 4 MAR 2021

WITHOUT PREJUDICE

China Taiping Insurance (Singapore) Pte Ltd

C/O LKK Auto Consultant Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Pk

Singapore 408913

Attention: Motor Claim Department

Dear Sirs.

## Accident involving SMQ9205Z and GBB7345A on 05.11.2020 along Airport Rd.

We refer to the above accident. On our record showed that you are the insurer of motor vehicle GBB7345A.

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

On behalf of and as authorized by M/S ComfortDelgro Driving Centre Pte Ltd, the owner of motor-vehicle no: SMQ9205Z, we submit their claim to you:

Cost of repairs (Inclusive of 7% GST) \$ 3,370.50
Loss of use (7 days x \$120.00-Training vehicle) \$ 840.00
GIA search fee \$ 2.00
\$ 4,212.50

Our claim for the loss of use is as follows:

No of days	<u>Date</u>	<u>Remarks</u>
	05.11.20	Date of Accident / Reporting
1	06.11.20	surveyed by LKK Auto
2	07.11.20	Day 1 repair
3	08.11.20	Sunday
4	09.11.20	Day 2
5	10.11.20	Day 3
6	11.11.20	Day 4
	12.11.20	Day 5
7 days		5 recommended repair days

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

- 1) Tax invoice no: KCR-INV2100069
- 2) GIA report and insurance certificate of SMQ9205Z3) GIA search fee and invoice
- 4) Vehicle registration card

We hope to receive your early reply soon.

Thank you.

Yours faithfully,

KANG CAR REPAIRERS PTE LTD



1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883 TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sq Co. Reg. No. 201300201N GST Reg. No. 201300201N

M/S: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

FAX: 62247175

3 ANSON ROAD

**#16-00 SPRINGLEAF TOWER** 

SINGAPORE 079909

TEL:

63896111

ATTN: Motor Claim Department \ Motor Claim Dept

Your Ref No: Claim Type:

Third Party

05/11/2020 Accident Date:

**GBB7345A** 

TP Veh Reg No: GBB7345A

Final No:

KCR-INV2100069

Claim No:

EST2000249

Date:

25 Feb 2021

Policy No:

D20MFL0000618

Veh Reg No:

**SMQ9205Z** 

Make/Model:

**TOYOTA VIOS 1.5E** 

**AUTO** 

Chassis No:

MR2B23F3601182182

S\$ 3.370.50

Engine No:

2NR5375057

Reg. Date:

10/12/2019

## Tax Invoice to Vehicle No :SMQ9205Z

		PAGE:1
Description	Quantity  List Price	Amount
	<u>\$\$</u>	<u>S\$</u>
	As recommended by surveyor to proceed repair at total cost/lumpsum cost	S\$ 3,150.00
	Add GST @ 7%	220.50

TOTAL: SINGAPORE DOLLAR THREE THOUSAND THREE HUNDRED SEVENTY AND CENTS FIFTY ONLY

For Kang Car Repairers Pte Ltd

Total Amount payable

E. & O. E.

**AUTHORISED SIGNATURE** 

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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	05/11/2020 15:07	
Date Of Accident	05/11/2020 11:35	
Exact Location Of Accident	AIRPORT RD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMQ9205Z	
Insured/Policyholder		
ame Of Registered Owner COMFORTDELGRO DRIVING CENTRE PTE LTD		
Co Reg No	1XXXXX882C	
Email Address	DARYLTAN@CDC.COM.SG	

OFFICE-67401636

Alternative Phone No

Mobile Phone No

**Vehicle Particulars** 

Manufacturer TOYOTA Model VIOS-1.5 E (A) Exact Purpose for which vehicle was being used at

time of accident

ON TEST

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

**Insurance Company** 

Name of Insurance Company INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number D20MFL0000618

Cover Note Number

**Driver** 

Name of Driver GEORGIA LOU SHUN YI

NRIC No TXXXX405E Date Of Birth 07/06/2001 Occupation **INDOOR** Date Of Driving Pass 05/11/2020

**Driving Experience** 0 YEAR AND 0 MONTH

Gender **FEMALE** 

Mobile Number (LOCAL) +65-91558567

Fax Number

Contact Number

**EMail Address** NOEMAIL Address 8A PATERSON HILL #15-03

Postcode 238568

Was driver an employee of the Insured's Company NC

If No, Relationship of the Driver with the Insured O

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - LEARNER

.

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?

NO

Was any injured conveyed to hospital by

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

YES NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

ambulance?

NAME:

: FADLI

GENDER:

: MALE

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

#### **Circumstances of Accident**

ON 5 NOV 2020 AT 1134HRS, AS I WAS DRIVING AT AIRPORT RD WHEN A 3RD PARTY VEHICLE (GBB7345A) SUDDENLY COLLIDED ONTO THE REAR OF MY VEHICLE (SMQ9205Z).

#### 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 Witness 1** 

Name

FADLI - TESTER

Phone Number

**Email Address** 

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

GBB7345A

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver GANESON S/0 PALANISAMY

NRIC/Passport Number SXXXX301G

Contact Number 83147687 / 97542121(BOEY)

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

#### 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 .
  - 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.

DelGro Driving Centre Pte Un

205 Ubi Ave 4 Singapore 408805

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 Pg. 2

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declare the foregoing particu DelGro Driving Centre P  205 Ubi Ave 4		
declare the foregoing particu DelGro Driving Centre P  205 Ubi Ave 4		
LARATION  declare the foregoing particu  DelGro Driving Centre  205 Ubi Ave 4  Singangre +0880  Arboider's Signature  & Time:		Reporting Centre Personnel's Signature Name:



#### INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Office (65) 63476100 (65) 62244174

Email insure@iii.com.sg Website www.lil.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, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

#### CERTIFICATE NO.: D20MFL0000618

**COVER:** Comprehensive

1. Index Mark and Registration Number of Vehicle

SMQ9205Z

Chassis No

MR2823F3601182182

Name of Policyholder

COMFORTDELGRO DRIVING CENTRE PTE, LTD.

Effective date of Insurance

01 Jan 2020

4. Expiry date of Insurance

31 Dec 2020

5. Persons or Classes of Persons entitled to drive\*

Any 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

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

#### The Policy does not cover

Use for hire or reward other than for the purposes of driving tuition or test, racing, pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

\*Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

#### **Hire Purchase Company**

: N.A

EXCESS: NIL (FOR EMPLOYEES)

EXCESS: S\$500/- SECTION I (AUTHORISED DRIVERS INCLUDING LEARNER DRIVERS) & ADDITIONAL EXCESS OF \$2000/- ON SECTION I FOR AGED BELOW 21 YEARS &/OR THE HOLDER OF A PROVISIONAL DRIVING LICENCE (EXCL. LEARNER DRIVERS OF CDC)

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).

Agent/Broker

: B000018/COMFORTDELGRO INSURANCE BROKERS PTE LTD

Date of Issue M.X. 20C - PRIVATE CAR (Company's use)

: 14/01/2020 11:07:26

For India International Insurance Pte Ltd

14/01/2020 11:13:06

**Authorised Signatory** 

hueywen/14/01/2020 11:07:26



## GENERAL INSURANCE ASSOCIATION OF SINGAPORE **RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

## Third Party Insurer Enquiry

Our Ref No:

GR-20-136448

Date of Request:

05/11/2020

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

**Enquiry Date** 

05/11/2020

Enquiry By

Yee Mei Cheng

Vehicle No.

**GBB7345A** 

**Accident Date** 

05/11/2020

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GBB7345A	China Taiping Insurance (Singapore) Pte. Ltd.	31/12/2019-30/12/2020	6389 6111

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

11/5/2020 Invoice



## 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-20-136448

Date of Request:

05/11/2020

Your Ref No.

Online Purchase

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

Singapore 417883

Dear Sir/Madam,

**Enquiry Date** 

05/11/2020

Enquiry By

Yee Mei Cheng

Yehicle No.

GBB7345A

Accident Date

05/11/2020

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

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

[X] GIRO [] Cash [] Cheque



# **Vehicle Registration Details**

Vehicle No. SMQ9205Z	Make/ Model TOYOTA/VIOS 1.5 E (AUTO)	Vehicle Scheme -
Current Propellant Petrol	Chassis No. MR2B23F3601182182	Vehicle Type For Instruction (Co) Car With 10 Years Lifespan

**Owner's Details** 

Owner Name:

COMFORTDELGRO DRIVING CENTRE PTE.

LID.

NRIC/Passport/Company Cert No.:

199601882C

Mailing Address:

T.

Owner ID Type:

Company

Registered Address

205 BRADDELL ROAD SINGAPORE 579701

Birth Date

**Registration Details** 

Previous Vehicle No.:

rievious veriicie (40.)

Original Registration Date:

10 Dec 2019

No. of Transfers:

0

Effective Date of Ownership:

10 Dec 2019

Registration Date:

10 Dec 2019

IU Label No.:

1129656162

**Vehicle Specifications** 

Engine No.:

2NR5375057

ZINK33/303/

Year of Manufacture:

2019

Chassis No.:

MR2B23F3601182182

Primary Colour:

Silver

Secondary Colour:

-

Passenger Capacity:

4

Engine Capacity / Power Rating:

1496 cc/-

79.0 kW ( 105 bhp )

Max Unladen Weight:

1085 kg

Maximum Laden Weight:

Maximum Power Output:

0 kg

Vehicle Attachment 1:

No Attachment

Vehicle Attachment 2:

\*

Vehicle Attachment 3:

## Additional Registration Fee (ARF) and COE Information

Open Market Value:

\$13,788.00

Additional Registration Fee Rate:

First \$13,788.00 (100%)

Actual ARF Paid:

\$13,788.00

Vehicle Lifespan Expiry Date:

09 Dec 2029

OPC Cash Rebate Eligibility:

No

QP during COE Bidding Exercise:

\$26,667.00

COE No.:

2019080101002096K

**COE Expiry Date:** 

09 Dec 2029

COE Category:

A - Car up to 1600cc & 97kW (130bhp)

**COE Registration Category:** 

A - Car up to 1600cc & 97kW (130bhp)

Quota Premium (QP) / Prevailing Quota

Premium:

\$26,667.00/-

Actual QP Paid

\$26,667.00

QP (Regn Cat):

\$26,667.00

**PARF Rebate Details** 

PARF Eligibility:

PARF Eligibility Expiry Date:

Yes

09 Dec 2029

Minimum PARF Benefit:

\$6,894.00

**Vehicle Emissions Details** 

CO2 Emission:

CEV/VES Rebate Utilised Amount

131.00 (g/km)

-

CO Emission:

HC Emission:

0.200620 (g/km)

0.019860 (g/km)

NOx Emission:

PM Emission:

0.022360 (g/km)

0.199000 (mg/km)

Message:

Printed on 05 Nov 2020 12:42:18

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