Kaki Bukit Autohub, 2 Kaki Bukit Ave 2 #01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27 Singapore 417921

Tel No.: +65 6842 0051 / 6744 0510 Fax No.: +65 6741 0510

Company Reg. No.: 200616038C GST Registration No.: 200616038C

10 May 2021

Our Ref:

CLM16570 / SMA6743R / DEC-03/2020

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET #04-00 & #05-00 IOB BUILDING SINGAPORE 049711

ATTN: MOTOR CLAIMS DEPARTMENT

Dear Sir @ Madam,

Re: Accident involving SMA6743R & SHD6502M on 01/12/2020 Along Taxi Drop off point of Tanglin Shopping Center

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SHD6502M** whose vehicle was insured with you at the material date of the accident.

We are prosposing for a direct settlement on the claims as following EXCLUDE personal injury in respect of claim arising out of the above mentioned accident.

 Cost of repairs
 \$ 3,531.00 (Include 7% GST)

 Loss of rental/use
 \$ 231.80 (\$57.95 X 4 Days)

 Additional 2 days loss of use for pre repair
 \$ 115.90 (\$57.95 X 2 Days)

 LTA Search
 \$ 7.45

 S 3,886.15

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM16570
- 2) Grab Rentals Pte Ltd Letter of Understanding
- 3) LTA search
- 4) Letter of Authorisation to Act
- 5) GIA report of SMA6743R

We look forward to your prompt reply.

Yours faithfully,

N-51 AUTOMOTIVE PTE LTD

S.Y.NEO Director







bisATE,

P.I.C - Melody Chin

Reply to :huixin@n51.com.sg



Kaki Bukit AutoHub 2 Kaki Bukit Ave 2

#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27

Singapore 417921

Tel No.: +65 6842 0051 Fax No.: +65 6741 0510

E-Mail: sales@n51.com.sg Company Reg. No.: 200616038C GST Registration No.: 200616038C

INDIA INTERNATIONAL INSURANCE PTE LTD 64 CECIL STREET #04-00 & #05-00 IOB BUILDING SINGAPORE 049711

GRAB RENTALS PTE LTD 18 SIN MING LANE #01-08 MIDVIEW CITY SINGAPORE 573960 **TAX INVOICE**

Date : 29/01/2021 Date in : 01/12/2020 Vehicle Num. : SMA6743R

Make/Model: TOYOTA PRIUS PLUS (AUTO)-2018 Chassis/Eng#: JTDZS3EU90J028095/2ZR0B84114

Accident Date: 01/12/2020 Claim No: CLM16570 Reference: DEC-03/2020

Policy No.: A29141713MKF (31/12/2020)

LUMPSUM REPAIR BILL

REF: CLM16570-N51 DATED 03/12/2020

BY DIRECT

Amount S\$ 3,300.00



E. & O.E. Sub S\$: 3,300.00 Add GST (7%) S\$: 231.00 Total Amount S\$: 3,531.00

for N-51 AUTOMOTIVE PTE LTD







biSATE.

CONFIDENTIAL



Grab Rentals Pte Ltd 201617200G 18 Sin Ming Lane #01-08 Midview City Singapore 573960

Date of Accident: 01/12/2020			Ti	Time: 09:05 HRS			
Accident Location:	TAXI	DROP	OFF	PONT	OF	TANGLIN	SHOPPING

Rental information of the accident vehicle

Registered Owner:	Grab Rentals Pte Ltd		
Vehicle Number:	SMA 6743R		
Hirer Name:	NOORDIN BIN BABOO		
Hirer NRIC last 4 Digit: (XXXXB)	8707		
Rental Rate: (inclusive GST)	\$57.95		

Details of repair

Date in:	01/12/2020
Date out:	04/12/2020

We hereby authorize our appoint workshop, N51 Automotive Ptd Ltd to handle any settlement of claims and receiving settlement payments in respect of the said accident.

Grab Rentals - Accident Team

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 02 Dec 2020 / 09:58:39

Receipt Date/Time: 02 Dec 2020 / 09:58:39

Tax Invoice/Receipt

Receipt No.: ITNET-00000-201202-000697

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHD6502M As at 01 Dec 2020/09:05:00 Insurance Co: INDIA INT'L INS PTE LTD Insurance Enquiry - SHD6502M				
Enquiry Fee 20201202095828108350		7.00	0,49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			-0.04
	Total Amount Payable			7.45
	Paid By			
	0z8fkk9a	Credit Card		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0,00

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.

AUTHORISATION TO ACT

I, <u>Grab Rentals Pte Ltd</u> of <u>18 Sin Ming Lane #01-08 Midview City Singapore 573960</u>, owner of <u>SMA6743R</u> hereby authorize <u>N-51 Automotive Pte Ltd</u> to act for me with respect to my claim for repair costs and / or rental and / or loss of use ('claim') for my vehicle no. <u>SMA6743R</u> that was damaged pursuant to the accident which occurred on <u>01/12/2020</u> along <u>Taxi Drop off point of Tanglin Shopping Center</u> involving vehicle no/s <u>SHD6502M</u>.

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is futher authorized to receive payment futher to settlement of my claim with payment cheque/s being made in favour of the workshop.

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

Dated this

1

of

DEC

2020

Signed by 'the third party claimant'
(with chop if applicable)

Signed by 'the workshop' (with chop)

VERSION: 1 (02/12/2020 09:49 (SGT))



SINGAPORE ACCIDENT STATEMENT

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
- 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 Submission 02/12/2020 09:49 (SGT) Date of Accident 01/12/2020 09:05 (SGT) Exact Location of Accident 19 Tanglin Rd, #02-43B, Singapore 247909 Additional Location Information TAXI DROP OFF POINT OF TANGLIN SHOPPING CENTER Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMA6743R INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner GRAB RENTALS PTE LTD Company Reg No 2XXXXX200G Email Address celyn.lim@grab.com Mobile Phone No (Phone) +65-31388644 Alternative Phone No (Office) +65-31388644 VEHICLE PARTICULARS

Manufacturer Toyota Model **PRIUS PLUS** Variant 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 - Claiming third party Vehicle Category Private hire INSURANCE COMPANY

Name of Insurance Company MSIG Type of Coverage Comprehensive Fleet Policy Yes Policy Number 29141713 Cover Note Number

DRIVER

Name of Driver NOORDIN BIN BABOO NRIC No SXXXX870I Date Of Birth 10/09/1966 Occupation Outdoor



Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver	05/12/1989 31 YEARS Male (Phone) +65-88261027 celyn.lim@grab.com BLK 629 PASIR RIS DR 3 #02-356 - 510629 No Hirer No
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Opening Door of Vehicle Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 No - Yes 2 No
PASSENGER 1	
Name Gender	NOT APPLICABLE Male
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No

CIRCUMSTANCES OF ACCIDENT

ON 01/12/2020 AT AROUND 9:05AM, I WAS DRIVING MY CAR INTO THE TAXI DROP OFF POINT OF TANGLIN SHOPPING CENTER WHEN VEHICLE B WHICH WAS PARKED ON THE RIGHT SIDE OF THE LANE, ITS REAR LEFT PASSENGER DOOR SUDDENLY SWING OPEN AND COLLIDED WITH MY VEHICLE. MY CAR SUSTAINED RIGHT SIDE DAMAGES. NO ONE WAS INJURED.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration NumberSHD6502MVehicle ManufacturerHyundaiVehicle ModelI40Vehicle Variant-Vehicle ColourBlue



Vehicle Category	Taxi
Name of Driver	RAZALI BIN RADI
NRIC No	SXXXX079J
Contact Number	(Phone) +65-91449665
Address	·
Address complement	_
Postcode	-
Insurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	VEH B
No. Of Passenger (Including Driver)	2
PASSENGER 1	
Name Gender	IBRAHIM Male

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.
- Information provided must be as <u>truthful</u> and <u>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
- 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)

l 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, ray 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 postessed 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
- (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
- 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.

B1/12/2020 10.30 am.

Policyholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature KRIC/FIN No.

Date & Time:

SKETCH PLAN

