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

: KCR1220202586AIG

Your Ref

: GBJ2403G

Date

4 5 SEP 2021

WITHOUT PREJUDICE

AIG Asia Pacific Insurance Pte Ltd C/O LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Pk Singapore 408933

Attention: Motor Claim Department

Dear Sirs.

Accident involving SKD2586L and GBJ2403G on 16.12.2020 along filter lane of Kaki Bukit Rd 1 twds Ave 1.

We refer to the above accident. On our record showed that you are the insurer of motor vehicle GBJ2403G.

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: SKD2586L, we submit their claim to you:

Cost of repairs (Inclusive of 7% GST) \$ 5,350.00 Loss of use (12 days x \$120.00-Training vehicle) \$ 1,440.00 LTA search by law firm \$ 7.49

\$ 6,797.49

Our claim for loss of use is as follows :-

No of days	<u>Date</u>	<u>Remarks</u>
	16.12.20	Date of Accident
1	17.12.20	Reporting
2	18.12.20	Surveyed by LKK Auto
3	19.12.20	Day 1 of repair
4	20.12.20	Sunday
5	21.12.20	Day 2
6	22.12.20	Day 3
7	23.12.20	Day 4
8	24.12.20	Day 5
9	25.12.20	P.Holiday (Christmas)
10	26.12.20	Day 6

No of days	<u>Date</u>	<u>Remarks</u>
11	27.12.20	Sunday
12	28.12.20	Day 7
12		7 days as recommended

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

- 1) Tax invoice no: KCR-INV2100260
- GIA report and certificate insurance of SKD2586L
 LTA search and invoice from A C Syed & Partners
- 4) Vehicle Registration Details

We hope to receive your early reply soon.

Thank you.	7
Yours faithfully, KANG CAR REPAIRERS F	TE LTD
RANG CAR REPAIRERS F	IE LID



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:

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY #07-16

AIG BUILDING, SINGAPORE 079120

TEL:

64193000

FAX: 68357416

ATTN: Motor Claim Department Your Ref No:

Third Party

Accident Date:

Claim Type:

16/12/2020

TP Veh Reg No: GBJ2403G

GBJ2403G

Final No:

KCR-INV2100260

Claim No:

EST2000295

Date:

14 Sep 2021

Policy No:

D20MFL0000618

Veh Reg No:

SKD2586L

Make/Model: Chassis No:

TOYOTA VIOS E M MR053HY9305281250

Engine No:

1NZY436156

Reg. Date:

14/11/2011

Tax Invoice to Vehicle No :SKD2586L

Description	Quantity List Price	Amount
	<u>\$\$</u>	<u>S\$</u>
A d	ed by surveyor to proceed renair at total cost/lumpsum cost	S\$ 5,000,00

As recommended by surveyor to proceed repair at total cost/lumpsum cost

S\$ 5,000.00

Add GST @ 7%

350.00

Total Amount payable

S\$ 5,350.00

TOTAL: SINGAPORE DOLLAR FIVE THOUSAND THREE HUNDRED FIFTY ONLY

For Kang Car Repairers Pte Ltd

E. & O. E.

AUTHORISED SIGNATURE

SINGAPORE ACCIDENT STATEMENT

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. 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 3. Information provided must be as truthful and accurate as possible. Any wild interepresentation of management of the insurance companies.

 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

Date of Accident

Exact Location of Accident Additional Location Information

Country/State of Loss

17/12/2020 10:00 (SGT) 16/12/2020 13:25 (SGT)

Singapore

FILTER LANE OF KAKI BUKIT RD 1 TWDS AVE 1

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SKD2586L

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No **Email Address**

Mobile Phone No

Alternative Phone No

Yes

COMFORTDELGRO DRIVING CENTRE PTE LTD

1XXXXX882C

DARYLTAN@CDC.COM.SG

(Phone) +65-67401636 (Office) +65-7401636

VEHICLE PARTICULARS

Manufacturer

Model

Variant

accident

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Toyota Vios

Private use

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number Cover Note Number India International Comprehensive

Yes

D20MFL0000618

DRIVER

Name of Driver

NRIC No Date Of Birth Occupation

ERIN QISTINA BINTE KHAIRIL

TXXXX190C 06/06/2002 Indoor



Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number

Email 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

Insurance Company of Other Vehicle Owned by Driver

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Head to Rear

Clear Dry

16/12/2020

(Phone) +65-98633539

DARYLTAN@CDC.COM.SG

BLK 895 TAMPINES ST 81 #02-924

0 MONTH

Female

520895

No

No

Other

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 MOHD JUWAKHIR BIN BASIR

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?

No Nο

CIRCUMSTANCES OF ACCIDENT

ON 16 DEC 2020 t BOUT 1325HRS, I WAS STOPPING AT THE FILTER LANE OF KAKI BUKIT RD 1 TWDS KAKI BUKIT AVE 1 WHEN A 3RD PARTY VEHICLE (GBJ2403G) SUDDENLY COLLIDED INTO THE REAR OF MY VEHICLE (SKD2586L)

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

Yes No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category Name of Driver

GBJ2403G

Commercial vehicle

MUHAMMAD AL-NAJIB BIN SHALLEH

NRIC No

Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage Details of property damaged in accident

No. Of Passenger (Including Driver)

SXXXX377C

(Phone) +65-87885451

WITNESS DETAILS

WITNESS 1

Name

Phone

Email

MOHD JUWAKHIR BIN BASIR

(Phone) +65-85494797

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 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.
- 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.
- 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)

Lunderstand, 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.

DelGro Driving Centre Pte Luc 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		
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DESCRIBE CIRCUMSTANCES OF		
On 16 Dec 2020 0	1 About 15 1325 hrs	I was regging at the le keti Batif Arel when soulded jute 25862).
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ECLARATION		11 T
We declare the foregoing particular	are true in every respect.	Time for the
205 Ubi Ave 4	11~	
Singapore 408805	NYV	
licyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
te & Time:	(If driver is not the policyholder) Date & Time:	Name:
	הפוב מי ווווה:	NRIC/FIN No.:

NRIC/FIN No.:



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 Fax (65) 62244174 Email insure@iii.com.sg Website www.ili.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

: SKD2586L

Chassis No

: MR053HY9305281250

2. Name of Policyholder

: COMFORTDELGRO DRIVING CENTRE PTE. LTD.

3 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

6. Limitations as to use*

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: \$\$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

: 14/01/2020 11:07:26

M.X. 20C – PRIVATE CAR (Company's use)

For India International Insurance Pte Ltd

Authorised Signatory



Enquire Vehicle's Insurance Particulars (As At 16 Dec 2020 / 13:25:01)

Vehicle No.:

Make Description/Model:

GBJ2403G

TOYOTA / HIACE VAN TURBO 5DR MT

Insurance Company Name:

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Business Transaction Reference No.:

20201217102133505723

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

Printed on 17 Dec 2020 10:21:47

Copyright © Land Transport Authority of Singapore 2020



Syed Ahmed Jamal Chishty has successfully logged out.
Your last login date and time was 17 Dec 2020, 10:20:25.
To return to ONE.MOTORING, please click here
For security reasons, please CLEAR YOUR CACHE after each session.

Session Transaction History

5/No.J <u>a</u>	Asset Type‡	Asset ID≎	Asset Owner ID÷	Transaction Type÷	Transaction Am
1	Vehicle	GBJ2403G	127	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49

• Log Date/Time 17 Dec 2020 / 10:21:33

î



Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport

/Company Cert

199601882C

No.:

Owner ID Type:

Company

Owner Name:

COMFORTDELGRO DRIVING CENTRE PTE. LTD.

Registered

Address:

205 BRADDELL ROAD SINGAPORE 579701

Mailing Address:

Birth Date:

Vehicle Particulars

Vehicle No.:

SKD2586L

Previous Vehicle

No.:

Effective Date of

Ownership:

14 Nov 2011

Original Regn Date: 14 Nov 2011

Registration Date:

14 Nov 2011

Year of

Manufacture:

2011

Vehicle Type:

For Instruction (Co) Car With 10 Years Lifespan

Vehicle Scheme:

Vehicle

Attachment 1:

No Attachment

Vehicle

Attachment 2:

Vehicle

Attachment 3:

TOYOTA

Vehicle Make: Vehicle Model:

VIOS E MANUAL

Primary Colour:

Silver

Secondary Colour:

Passenger

Capacity:

4

Chassis No.:

MR053HY9305281250

Engine No.:

1NZY436156

Engine Capacity /Power Rating:

1497 cc/-

Maximum Power

Output:

80.0 kW (107 bhp)

Propellant:

Petrol

Weight: Maximum Laden 1485 kg Weight: Open Market \$10,216.00 Value: PARF Eligibility: Yes PARF Eligibility Expiry Date: 13 Nov 2021 Minimum PARF \$5,108.00 Benefit: No. of Transfers: 1124360552 IU Label No .: 2011080101000142R COE No.: 13 Nov 2021 COE Expiry Date: **COE Category:** A - Car (1600cc & below) **COE** Registration A - Car (1600cc & below) Category: Quota Premium (QP) / Prevailing Quota Premium: \$55,989.00/-Actual QP Paid: \$55,989.00 QP (Regn Cat): \$55,989.00 **OPC Cash Rebate** No Eligibility: QP during COE \$55,989.00 Bidding Exercise: Additional Registration Fee 100.00% Rate: Actual ARF Paid: \$10,216.00 Vehicle Lifespan 13 Nov 2021 Expiry Date: CO2 Emission: CO Emission: HC Emission: **NOx Emission:** PM Emission: Message:

Max Unladen

1075 kg