

L.H.Express Motor Trading

Blk 5038 Ang Mo Kio Industrial Park 2 #01-405 Singapore 569541.

Tel : 64817221 Fax: 64816131 Email : dyeo.lhmotortrading@gmail.com

Date 27-Jan-21

Our Ref TP/9718/2021

Your Ref SMM4804Z

WITHOUT PREJUDICE

Asia Pacific Insurance

Pte Ltd

78 Shenton Way #07-16

AIG Building

Singapore 079120.

ACCIDENT INVOLVING GBB 9718 U AND SMM 4804Z ON 12 /1/2021.

We refer to the above accident matter.

Our client's vehicle GBB 9718U was involved in the above accident. We are instructed that the above accident was caused by SMM 4804 Z negligent driving. As such, we are proceeding a third party claim loss and expense, particulars of which are as follows : -

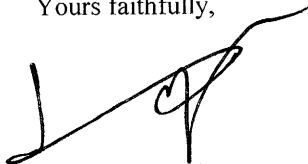
Cost of repairs	\$3,700.00
Loss Of Use 8days X \$80/-	\$640.00
LTA Search	\$7.49
Total	<u>\$4,347.49</u>

Enclosed the supporting documents for your perusal : -

- a) Repair bill
- b) Owner's Particulars
- c) GIA report/s
- d) Certificate of Insurance
- e)
- f) LTA Search

Kindly proceed our client's claim as soon as possible. In the meantime, if you have any queries, please feel free to contact me at 90089959 and I'll be most happy to assist you.

Yours faithfully,



Dick Yeo

.....

LH Express Motor Trading.

Blk 5038 Ang Mo Kio Industrial Park 2 #01-405 Singapore 569541.

Email : dyeo.lhmotortrading@gmail.com Fax: 64816131 Tel: 64817221.

Business Registration No: 52972012D.

Asia Pacific Insurance

Pte Ltd

78 Shenton Way #07-16

AIG Building

Singapore 079120.

27/1/2021

Invoice No: 9718/2021

Qty	Description	Unit Price	Amount
-----	-------------	------------	--------

Vehicle No: GBB9718U

Repair Cost

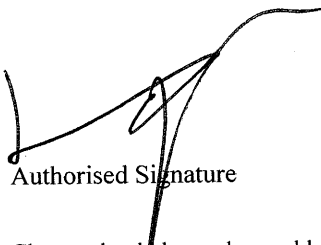
\$3,700.00

Dollars: Three Thousaand Seven Hundred
Only.....

Grand Total

\$3,700.00

LH Express Motor Trading



Authorised Signature

Cheque should be made payable to LH Express Motor Trading.

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 : 5117686188

Cover : Comprehensive

- | | |
|---|-------------------------------------|
| 1. Index mark and Registration Number of Vehicle | : GBB9718U |
| Chassis Number | : JTFHT02PX00065188 |
| 2. Name of Policyholder | : LEE HONG AIRCONDITIONING SERVICES |
| 3. Effective Date of Insurance | : 02 Jun 2020 |
| 4. Expiry Date of Insurance | : 01 Jun 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. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: THIAM HENG AUTO (S) PTE 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 : THIAM HENG AUTO (S) PTE LTD (00000613992)
Date of Issue : 02 Jun 2020 12:57 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

LETTER OF AUTHORISATION

To : LH EXPRESS MOTOR TRADING

Re : ACCIDENT ON 12/1/21 INVOLVING GBB 9718U AND SMM 4804Z

ALONG / AT Holland Road-

W/E Lee Hong Airconditioning Service (NRIC NO. 52942081C)

OF 37A Hong Kong Street Singapore 059676.

The owner of motor vehicle no. GBB 9718U hereby authorize **LH EXPRESS MOTOR TRADING** to commence repairs of the said vehicle forthwith. I/We agree to assign the whole proceeds of my/our third party claim to **LH EXPRESS MOTOR TRADING** including any Loss Of Use if vehicle had been provided by **LH EXPRESS MOTOR TRADING** during the period of repairs to my/our vehicle if applicable, my/our solicitors (To be appointed by **LH MOTOR TRADING** on my/our behalf) shall accept this as my/our irrevocable authority to pay the amount compensated direct to **LH EXPRESS MOTOR TRADING** after solicitor & client basis. I/We undertake to cooperate fully with **LH EXPRESS MOTOR TRADING** and/or my/our solicitors and also with a true Motor Accident Report / Police Report untill the claim to a successful conclusion including writing to court, failing which, I/We undertake to bear the repair costs, rental, legal costs and any other incidentals incurred.

2. If for any reason my/our insurer's are not willing to settle the repair costs either in part or in whole then I/We undertake to pay **LH EXPRESS MOTOR TRADING** the repair costs.
3. In alternative to serial number 2 above the third party claims fails or is only partly successful then I/We undertake to pay to **LH EXPRESS MOTOR TRADING** the repair cost.
4. I/We authorise **LH EXPRESS MOTOR TRADING** to sign all discharge vouchers/indemnity forms and necessary papers on my/our behalf in connection with the above claim.
5. I/We authorise **LH EXPRESS MOTOR TRADING** to appoint such firm of solicitors on my behalf as **LH EXPRESS MOTOR TRADING** deem fit for the purpose of the third party/own insurance claims.
6. I/We undertake to inform **LH EXPRES MOTOR TRADING** and / or the solicitors appointed by **LH EXPRES MOTOR TRADING** on my/our behalf in the event the third party's insurance company communicat with me/us directly by telephone or in writing and I/We further undertake not to accept any monies or offer or settlement from the third party's insurers without first communicating with you.

DATE/THIS

12

DAY OF

JANUARY 2021

Signature of owner
(Company's stamp-if any)



Signature of Witness

Name of witness

Payumbee

REPUBLIC OF SINGAPORE DRIVING LICENCE


LEE CHUAN THYE

Date of Birth: 17 Apr 1962

Valid Until: 27 Dec 2018

120112024

002886043G



WORK PERMIT

Employment of Foreign Manpower Act (Chapter 91A)

Republic of Singapore





Employer: K1 CONSTRUCTION

Name: LEE CHUAN THYE

Work Permit No.: 3 67561114

Sector: CONSTRUCTION

EXPIRY = 26/12/2022



K2141253

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES


CLASS	VEHICLE CLASS	EFFECTIVE DATE
C	Class 3 Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg	22 Feb 2019

F0264953P

S / No.9000320189

NP 428A

Licence No: F0264953P



VISIT PASS

Immigration Regulations

03-03-2020

Name: LEE CHUAN THYE

FIN: F0264953P

Date of Birth: 17-04-1962

Sex: M

Nationality: MALAYSIAN

Download SGWPrkPass App to check status



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 Submission	12/01/2021 15:59 (SGT)
Date of Accident	12/01/2021 10:00 (SGT)
Exact Location of Accident	Holland Rd, Singapore
Additional Location Information	HOLLAND ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB9718U
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LEE HONG AIRCONDITIONING SERVICES
Company Reg No	5XXXX081C
Email Address	chuanthye1962@gmail.com
Mobile Phone No	(Phone) +65-98341478
Alternative Phone No	+65-96425669

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5117686188
Cover Note Number	5117686188

DRIVER

Name of Driver	LEE CHUAN THYE
Passport No/FIN	FXXXX953P
Date Of Birth	17/04/1962
Occupation	Outdoor

Date Of Driving Pass	22/02/2019
Driving experience	1 YEAR AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96425669
Alt. Phone Number	-
Email Address	chuanthye1962@gmail.com
Address	BLK 212 MARSLING CRESCENT
Address complement	#04-17
Postcode	730212
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
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	Collision - Change/cross lane
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I HAVE COMPLETED A U-TURN ALONG HOLLAND ROAD , SUDDENLY CAR B EXIT FROM THE FILTER LANE FROM NORTH BUONA VISTA ROAD AND HIT THE FRONT OF MY VAN.

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	SMM4804Z
Vehicle Manufacturer	Mazda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-



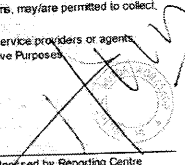
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

-
FRONT PORTION
FRONT PORTION
-

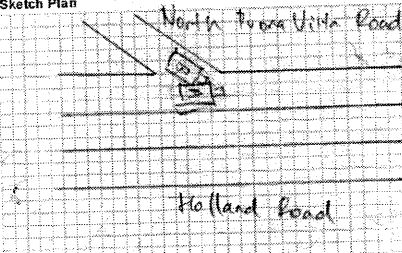
SKETCH PLAN

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 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 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' law firms/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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 Policyholder's Signature / Date & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
---	---	---

Sketch Plan



Car A = GBB 918U
 Car B = SMV 4809Z

Describe Circumstances of the Accident

I have completed a U-turn along Holland road, suddenly car B cut in the five lane from North Buona Vista Road and hit the front of my van.

Declaration

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

Witnessed by Reporting Centre Personnel

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 2 Jan 2021 / 13:58:41
Receipt Date/Time : 2 Jan 2021 / 13:58:41

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210112-002206

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 - SMM4804Z
As at 12 Jan 2021/10:00:00
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1	Insurance Enquiry - SMM4804Z Enquiry Fee 20210112135525231717	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			
430092XXXXXX0842	eNETS 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.

J7F14T02P80-0065188

LH Express Motor Trading

Blk 5038 Ang Mo Kio Industrial Park 2 #01-405 Singapore 569541.

Email: dyeo.lhmotortrading@gmail.com Fax: 64816131 Tel: 64817221

PLEASE QUOTE OUR FILE REFERENCE WHEN RPLYING

Your Ref: CMM 48042

Our Ref: TP1971814

BY FAX.....ONLY.

claims.doc management@a.g.com

Date: 13/1/21 Time: 0925 hrs.

M/s: Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16

Alu Building (S) 079,20

Dear Sir,

*NOTICE TO INSURER TO CONDUCT A PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAH 6.2 OF THE PRE-ACTION PROTOCOL FOR NIMA CASES.

*PROPERTY DANMAGED CLAIM ARISING FROM A ROAD TRAFFIC ACCIDENT ON 12/11/20 INVOLVING MOTOR VEHICLE NO. GBB 97184 & SMM 48042 ALONG North Bona Vista Blip Road towards Holland Road.

We act for the owner of GBB 97184 and are instructed that our workshop M/s LH Express Motor Trading has been appointed to repair his motor vehicle.

Please note that the said vehicle can be inspect at:-

Blk 5038 Ang Mo Kio Industrial Park 2 #01-405
Singapore 569541. Please to contact Dick 90089959.

KINDLY FAX YOUR RESPONSE TO US AT 64816131

Please note that if you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday, our workshop will commence repair thereafter without further notice or reference to you. Alternately, kindly inform us within 2 working days hereof if you are waiving your right to a pre-repair inspection.

Yours faithfully,

LH Express Motor Trading.

Jasper Chua
Jasper Chua
Jasper Chua @ 1kk auto.com