



iShare Auto Pte. Ltd.
Co. Reg No: 201939376R
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: ishareauto@gmail.com

LETTER OF DEMAND

08 MAR 2021

Accident involving my vehicle number SLG 6804D and vehicle number SLR 7906D on 23/01/2021 at 19:00 HOURS at/along T-Junction of Tampines Street 83 towards Car Park No. TMT47

We refer to the above matter.

Attached please find copies of the following for your kind perusal:

Vehicle Repair Cost/ Excess	\$ 9600.00
Rental for <u>8</u> days x \$ <u>150.00</u> /day	\$ 1200.00
Loss of Use for <u>-</u> days x \$ <u>-</u> /day	\$ -
LTA Search Fee / 3 rd Party GIA Report	\$ 36.45
Others <u>Towing Fee</u>	\$ 120.00
Total:	\$ 10956.45

Yours faithfully,

Michelle



Michelle

HP: 9856 4815



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Email: ishareauto@gmail.com

Authorisation To Act

I, Lim Taw Nong ("the third party claimant") of BLK 859 Tampines Avenue 5 # 12-617 Singapore 520859 (address), owner of SLG 6804D (vehicle no.) hereby authorise iShare Auto Pte. Ltd. ("the workshop") 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. SLG 6804D that was damaged pursuant to the accident which occurred on 23/01/2021 (date) at/along T-Junction of Tampines Street 83 towards Car Park No. TMT47 (location) involving vehicle no/s SLR 7906D ("the accident").

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

I further authorise the workshop to execute and/or sign any documents/discharge vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident concerned.

Dated this 25 day of 01 (month) 20 21 (year)

Signed by "the third party claimant"



Signed by "the workshop"



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Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: ishareauto@gmail.com

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SLG 6804D and SLR 7906D on 23/01/2021
at/along T-Junction of Tampines Street 83 towards Car Park No. TMT47

1. I/We, the Owner of motor vehicle no. SLG 6804D hereby instruct and authorise iShare Auto Pte. Ltd. ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$_____ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 25 day of 01 20 21

Signature of vehicle owner _____

Name : Lim Tow Nong

IC/UEN No : S1234979C

(Company stamp, if applicable)

Address : BLK 859 Tampines Avenue

5 # 12 - 617 Singapore 520859

Tel: 9661 3063



Am

Witnessed by :

M. J. M. M. M.

TAX INVOICE

iShare Auto Pte. Ltd.

Co. Reg No: 201939376R

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: ishareauto@gmail.com



Date	Invoice Number	Vehicle Number
08.03.2021	ISA202103-00062	SLG6804D

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET

#04/#05 IOB BUILDING

SINGAPORE 049711

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 9,600.00
Total	\$ 9,600.00

Cross cheques and pay: iShare Auto Pte. Ltd.

Please indicate the invoice number on the reverse side.

iShare Auto Pte. Ltd.

AUTO Generated - Signature Not Required

Rapid Rental Pte.Ltd.

8 Kaki Bukit Ave 4, #08-09 Premier@Kaki Bukit
Singapore 415875
Tel : 6341 6789 Fax: 6341 6778
ROC No.: 201627936K

TAX INVOICE

To: LIM TOW NONG
BLK 859 TAMPINES AVENUE 5
#12-617
SINGAPORE 520859

Invoice No. : DR2102-0371
Date : 02.02.21
Vehicle No. : **SMM9247Z**
Vehile Model: : HONDA SHUTTLE

DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 24/01/2021 - 01/02/2021 YOUR REF: SLG6804D	8	150.00	\$ 1,200.00
TOTAL:			\$ 1,200.00

Payment by cheque should be crossed and made payable to 'Rapid Rental Pte.Ltd.'

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No signature is required.

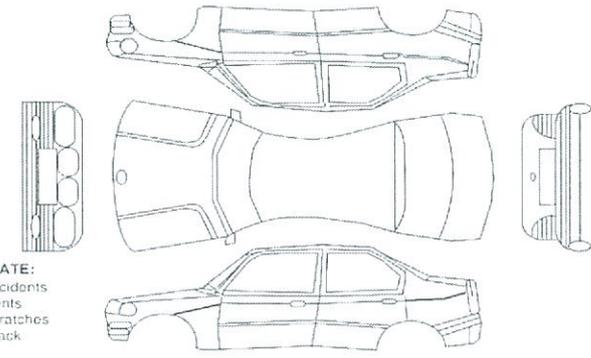
RAPID RENTAL PTE. LTD.

8 KAKI BUKIT AVENUE 4 #08-09 PREMIER @ KAKI BUKIT SINGAPORE 415875

ROC:201627936K

VRA NO: DR2102-0371

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS				Hirer's Own Vehicle No: <u>J2G6804D</u>																																	
Name (as in I/C): <u>Lim Taw Nong</u>				Loan Vehicle No: <u>JMM9J47Z</u>																																	
NRIC/Passport No: <u>S1234979C</u>		Date of Birth: <u>29/03/1957</u>		Make & Model: <u>Honda Shuttle</u>																																	
Address: <u>BLK 859 Tampines Avenue 5 # 12-617</u>				<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left;">CHARGES</th> <th style="text-align: center;">\$</th> <th style="text-align: center;">cts</th> </tr> </thead> <tbody> <tr> <td>Daily</td> <td><u>8</u> day @ \$ <u>150</u> Per day</td> <td style="text-align: center;"><u>1200</u></td> <td></td> </tr> <tr> <td>Weekly</td> <td>day @ \$ Per week</td> <td></td> <td></td> </tr> <tr> <td>Monthly</td> <td>day @ \$ Per month</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Others</td> <td></td> <td></td> </tr> <tr> <td colspan="2">CDWS/PAI</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Delivery/Collection Svc</td> <td></td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">SUB-TOTAL</td> <td style="text-align: center;"><u>1200</u></td> <td></td> </tr> </tbody> </table>		CHARGES		\$	cts	Daily	<u>8</u> day @ \$ <u>150</u> Per day	<u>1200</u>		Weekly	day @ \$ Per week			Monthly	day @ \$ Per month			Others				CDWS/PAI				Delivery/Collection Svc				SUB-TOTAL		<u>1200</u>	
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S(<u>520859</u>)																																					
Name & Address of Employer: _____																																					
Occupation: _____ Driving Exp: _____																																					
Driving License No: _____ Passed Date: _____																																					
D/L Type: Local/Int'l/Others: _____																																					
Tel: (H/P) _____ (O) _____																																					
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Name (as in I/C): _____				<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="text-align: left;">Petrol Level & Surchage</th> <th style="text-align: center;">OUT</th> <td style="text-align: center;">E</td> <td style="text-align: center;">1/4</td> <td style="text-align: center;">1/2</td> <td style="text-align: center;">3/4</td> <td style="text-align: center;">F</td> </tr> </thead> <tbody> <tr> <td style="text-align: center;">IN</td> <td style="text-align: center;">E</td> <td style="text-align: center;">1/4</td> <td style="text-align: center;">1/2</td> <td style="text-align: center;">3/4</td> <td style="text-align: center;">F</td> </tr> </tbody> </table>		Petrol Level & Surchage	OUT	E	1/4	1/2	3/4	F	IN	E	1/4	1/2	3/4	F																			
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Address: _____ Age: _____																																					
S(_____)																																					
Occupation: _____ Driving Exp: _____																																					
Driving License No: _____ Passed Date: _____																																					
D/L Type: Local/Int'l/Others: _____																																					
Tel: (H/P) _____ (O) _____																																					
<p>EXCESS : Section (1) \$2,500.00</p> <p>Section (2) \$2,500.00</p>				 <p>INDICATE: A - Accidents D - Dents S - Scratches X - Crack</p>																																	
<p><i>[Signature]</i></p>																																					
Hirer's Signature: _____		Additional Hirer's Signature: _____																																			
<p>I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge voucher. All information I have been given RAPID RENTAL PTE. LTD. in connection with this agreement is true.</p>																																					
IMPORTANT																																					
<p>1. The Hirer and the authorized driver must be over 25 years of age and under 65 years of ages and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be borne by the Hirer/the Authorized Driver.</p> <p>2. All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of petrol surcharge is payable by the hirer should he fail to return the vehicle at line appropriate petrol level.</p> <p>3. No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.</p> <p>4. Use of the vehicle for illegal purpose (for instance: in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited.</p> <p>5. Vehicle strictly for Singapore use only and may not driven out of Singapore without prior written consent of RAPID RENTAL PTE. LTD. The hirer is liable for a penalty fee of \$200 in additional to appropriate insurance top up in the case of non-disclosure of Malaysia usage.</p> <p>6. The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.</p> <p>7. The hirer and/or driver shall be responsible for all claims, damages,</p>																																					
<p>losses, increased insurance premiums, non-waiver excess and cost expenses (including legal costs on full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to pay immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damages to the car will be repair at RAPID RENTAL PTE. LTD. authorized workshop.</p> <p>8. Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 - \$400.</p> <p>9. The Hirer agrees that a punctured tyre, empty petrol tank, lost of vehicle's key or locked keys inside of vehicle by itself, does not constitute a breakdown and that in event the owner's 24-Hours Emergency Services is called upon to respond to such occurrence, the Hirer shall bear cost of such responses at \$150 per trip.</p> <p>10. In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.</p> <p>11. The hirer and/or driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.</p> <p>12. All customers' data will kept strictly confidential and is solely used for the purpose of completing the sales transaction and other relating matters.</p> <p>13. I understand and agreed to personal data collection statement stated on the Term and Conditions page.</p>																																					
Date / Time OUT	Mileage	Check By	Remark																																		
<u>24/01/21 10:50am</u>	<u>32759</u>		<i>[Signature]</i> Hirer's/Driver Signature																																		
Date / Time IN	Mileage	Check By	Remark																																		
<u>01/02/21 5:45pm</u>	<u>33021</u>		<i>[Signature]</i> Hirer's/Driver Signature																																		

> Back to OneMotoring



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

Print Date/Time : 25 Jan 2021 / 11:33:25

Receipt Date/Time : 25 Jan 2021 / 11:33:25

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210125-001247

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 - SLR7906D As at 23 Jan 2021/19:00:00 Insurance Co: INDIA INTL INS PTE LTD Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD				
1	Insurance Enquiry - SLR7906D Enquiry Fee 20210125113233681521	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				
	526471XXXXXX1359		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.



TAX INVOICE

iShare Auto Pte. Ltd. - Lim Tow Nong

Invoice Number
GR_2021_000273

Invoice Issue Date
26 Jan 2021

Invoice Due Date
02 Feb 2021

Total Amount (S\$)	27.10
Total GST 7.00%(S\$)	1.90
Total Amount Incl. of GST (S\$)	29.00

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	25/01/2021.23/01/2021,SLG6804D,SLR7906D	27.10	1.90	29.00
Total Amount (S\$)				27.10
Total GST 7.00 % (S\$)				1.90
Total Amount Incl. of GST (S\$)				<u>29.00</u>

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No signature is required.*



24 HOUR RECOVERY SERVICES Co.Reg No: 53333929D

24 HRS HOTLINE: 8455 5669 Fax: 6741 1981

8 Kaki Bukit Road 2 #02-04 Ruby Warehouse Complex Singapore 417841

Email: 24hoursrecovery@gmail.com

No. 26994

Date : 24/11/21



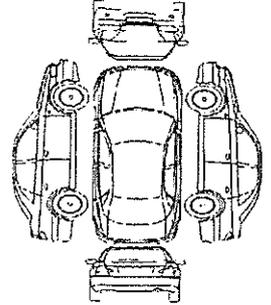
M/S : CASH

Vehicle No : SLG6804 D Model : vezei

From : 859 Tampines st 86 Call Time : _____

To : Premier 08-09 Time Arrival : _____

Remarks : _____ Arrival Workshop : _____



- | | | | |
|-------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------|-------------------------------------|
| <input type="checkbox"/> Change Tyres / Patch Tyre | <input checked="" type="checkbox"/> Accident | <input type="checkbox"/> Use Car Carrier | <input type="checkbox"/> Loaded |
| <input type="checkbox"/> Basement / Multi Carpark | <input type="checkbox"/> Low Body Kit / Low Spoiler | <input type="checkbox"/> Open Door | <input type="checkbox"/> Jump Start |
| <input checked="" type="checkbox"/> Using King Dolley | <input type="checkbox"/> Dismantle Brake / Shaft | <input type="checkbox"/> Crane Up / Winch Out | |

AMOUNT S\$ 120

Received By _____

Cheriman

for 24 hour Recovery Services

Vehicle is transported at owner's risk. The company accepts no responsibility for damaged or other misdemeanour to your vehicle whilst being transported.

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	25/01/2021 14:56 (SGT)
Date of Accident	23/01/2021 19:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	t-junction of tampines st 83 twds cp no: TMT47
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG6804D
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM TOW NONG
NRIC No	SXXXX979C
Email Address	SMARTONEAUTO@GMAIL.COM
Mobile Phone No	(Phone) +65-96613063
Alternative Phone No	+65-96613063

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
Variant	-
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 - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Sompo
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D19MTPV01016934
Cover Note Number	-

DRIVER

Name of Driver	LIM TOW NONG
NRIC No	SXXXX979C
Date Of Birth	29/03/1957
Occupation	Indoor

Date Of Driving Pass	09/12/2002
Driving experience	18 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96613063
Alt. Phone Number	+65-96613063
Email Address	SMARTONEAUTO@GMAIL.COM
Address	BLK 859 TAMPINES AVE 5 #12-617
Address complement	-
Postcode	520859
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 - Head to Rear
Weather Conditions	LIGHT RAIN
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	YEW KEK HONG
Gender	Female

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

REFER TO SKETCH PLAN

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	SLR7906D
Vehicle Manufacturer	-
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) -

SKETCH PLAN

IMPORTANT NOTICE

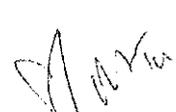
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 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:

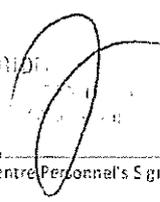
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

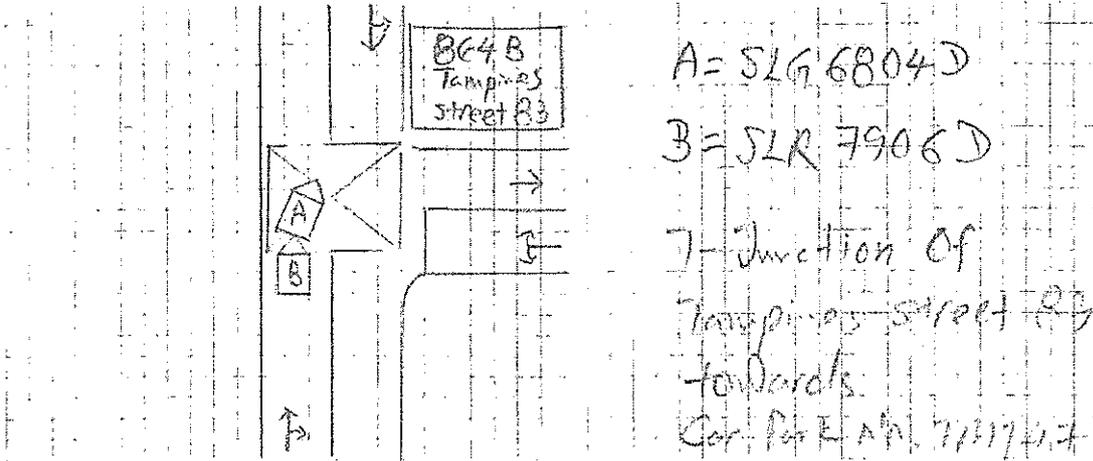


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:



 Reporting Centre Personnel's Signature
 Name:
 NR C/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached

DECLARATION

I/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:

Reporting Centre Personnel's Signature
Name:
NRIC/F N No:

On 23.01.2021 at about 19:00 hours at T-Junction of Tampines Street 83 towards Car Park No. TMT47. I was travelling straight along Tampines Street 83 and wished to make a right turn into Car Park No. TMT47. When I had approached the above mentioned T-Junction, I stopped my vehicle (A) to wait for the traffic condition to clear.

Suddenly, I heard a loud bang and felt an impact from behind. When I alighted, I realised it was vehicle (B) that collided onto the rear portion of my vehicle (A).

I wish to state that I have 1 passenger in my vehicle (A).

Vehicle (A): SLG 6804D

Vehicle (B): SLR 7906D



REPUBLIC OF SINGAPORE
IDENTITY CARD NO S1234979C



 Name
LIM TOW NONG

Race
CHINESE

Date of birth
29-03-1957

Sex
M

Country/Place of birth
SINGAPORE

34979C

SLG6804D

Owner & driver

5671734

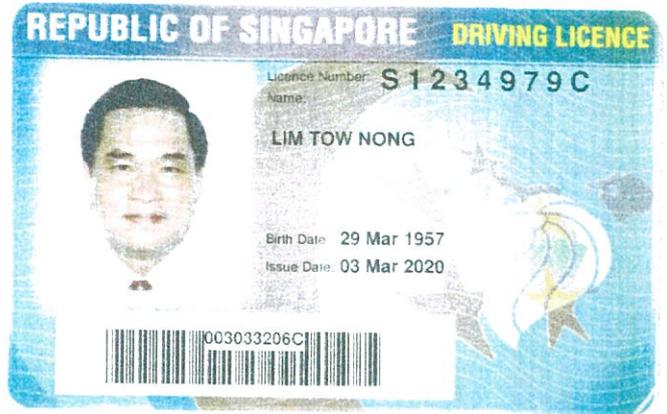


NRIC No. S1234979C



Date of issue
16-11-2016

Address
APT BLK 859 TAMPINES AVENUE 5
#12-617
SINGAPORE 520859



SLG 6804 J

Owner & driver

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

	EFFECTIVE DATE
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	09 Dec 2002

NP 428A





Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
ROAD TRANSPORT ACT 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No. D19MTPV01016934
Insured LIM TOW NONG
Motor Vehicle (Registration No.) SLG6804D
Coverage Comprehensive - ExcelDrive GOLD
Policy Commencement Date 03 DECEMBER 2019 00:00
Policy Expiry Date 09 APRIL 2021 23:59
Maximum Liability (Section I) Market value at time of loss
Excess* \$500 - Section I
(Waived up to S\$1,000 if accident repair is done at ExcelDrive Workshops for the first claim per policy year)
Voluntary Excess* Buy Up : \$1300 - Section I
Windscreen Excess* S\$100.00 for each and every applicable claim.
* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured,
 - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
 - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323

WE HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia), and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP 26

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

Date/Time of Issue : 03 DECEMBER 2019 11 07

IMPORTANT NOTICE

- o Keep the Certificate in your Motor Vehicle.
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle without a valid policy of insurance under the Act.
- o On the sale of the Motor Vehicle or if for any reason the insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.