



Teamwork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Singapore 408934
Paya Ubi Industrial Park
Tel: 6844 2475 Fax: 6844 2474
Email: claims@teamworkgarage.com
GST Register No: 201015366H

21ST Apr 2021

Our reference: 2102-18

Your reference: SLF3903B

AIG Asia Pacific Insurance Pte Ltd

BY HAND

78 Shenton Way

#08-16

Singapore 079120

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant : ROSET LIMOUSINE SERVICES PTE LTD

Address : BLK 53 UBI AVENUE 1 #03-47 PAYA UBI INDUSTRIAL PARK S(408934)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **06/02/2021** along **BRADDELL ROAD** involving our client's vehicle registration number **SLF3903B** and vehicle registrations number **SJS2255A** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair	:	\$ 8,346.00
Loss of Rental	:	\$ 2,160.00
LTA Search	:	\$ 7.45
Total	:	\$ 10,513.45

A copy of each of the following supporting documents is enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Driver's IC & Driving License;
- d) Letter Of Authorisation;
- e) Tax Invoice;
- f) LTA Search Invoice;
- g) Certificate Insurance;
- h) Satisfaction Form;
- i) Rental Agreement & Official Receipt;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,



Teamwork Garage Pte Ltd

Encl.



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	06/02/2021 16:25 (SGT)
Date of Accident	06/02/2021 13:45 (SGT)
Exact Location of Accident	Braddell Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF3903B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ROSET LIMOUSINE SERVICES PTE LTD
Company Reg No	2XXXXX722Z
Email Address	LIMGEKKEOW81@GMAIL.COM
Mobile Phone No	(Phone) +65-68445225
Alternative Phone No	+65-68445225

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Wish
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 hire

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD20V13100/VPZ/R02
Cover Note Number	-

DRIVER

Name of Driver	LIM GEK KEOW
NRIC No	SXXXX747G
Date Of Birth	24/10/1964
Occupation	Outdoor

Date Of Driving Pass	05/02/1993
Driving experience	28 YEARS
Gender	Male
Mobile Number	(Phone) +65-97539489
Alt. Phone Number	-
Email Address	LIMGEKKEOW81@GMAIL.COM
Address	BLK 316A YISHUN AVE 9 #02-250
Address complement	-
Postcode	761316
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	COOPER MORGAN
Gender	Male

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 STATEMENT.

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	SJS2255A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	JEBSEN KO
Contact Number	(Phone) +65-90027030

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLQ8423D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LAWRENCE LEE
Contact Number	(Phone) +65-92779940
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LIM GEK KEOW
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	SLF3903B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 willful 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.

6. Consent under the Personal Data Protection Act (PDPA)

I understand, declare and 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 yers/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 yers/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 yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

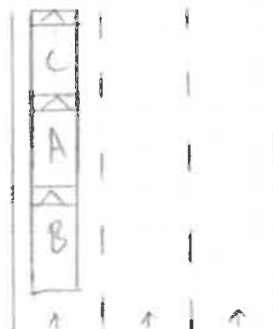
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Braddell Rd



A: SLF 3403B

B: SSS 2255A

C: SLQ 8423D

Describe Circumstances of the Accident

I was travelling along Biddell Road towards CTE (SLE/TPE)
 on the most left lane. As the vehicle in front of me
 stop. I follow to stop as well with a safe distance
 all of a sudden, I felt an huge impact from my
 vehicle rear section, and the impact caused to thrust forward
 and collided onto front car.
 Total 2 cars involved.

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

Witnessed by Reporting Centre Personnel

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	722Z

Vehicle Details

Vehicle No.:	SLF3903B
Vehicle to be Exported:	No
Intended Deregistration Date:	08 Feb 2021
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 CVT
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	2ZR1823973
Chassis No.:	JTDGG20W30J004936
Maximum Power Output:	105.0 kW (140 bhp)
Open Market Value:	\$19,955.00
Original Registration Date:	25 Aug 2016
First Registration Date:	25 Aug 2016
Transfer Count:	1
Actual ARF Paid:	\$19,955.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Aug 2026
PARF Rebate Amount:	\$14,966.00

Intended COE Rebate Details

COE Expiry Date:	24 Aug 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,089.00
COE Rebate Amount:	\$31,090.00
Total Rebate Amount:	\$46,056.00

The information contained herein is correct as at 08 Feb 2021

OK

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of LIM GEK KEOW

Licence Number: **S1656747G**

Name: **LIM GEK KEOW**

Birth Date: **24 Oct 1964**

Issue Date: **12 Jul 2012**

Barcode: 00208735241

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1656747G**

Portrait of LIM GEK KEOW

Name: **LIM GEK KEOW**

Race: **CHINESE**

Date of birth: **24-10-1964** Sex: **M**

Country/Place of birth: **SINGAPORE**

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

		EFFECTIVE DATE
Class 3	Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =<2500kg	05 Feb 1993
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	27 Feb 1998

NP 428A

Barcode: Licence No. **S1656747G**

5186572

Barcode

Portrait of LIM GEK KEOW

NRIC No. **S1656747G**

Date of issue: **27-06-2013**

APT BLK 318A YISHUN AVENUE 9 #02-250
SINGAPORE 761316

NRIC No: **S1656747G** Date: **26/11/2019**

LETTER OF AUTHORIZATION

To : AIG & Teamwork Garage Pte Ltd (Third party insurance & Workshop)
Claimant : Roset Limousine Services Pte Ltd

Dear Sirs,

I/We, Roset Limousine Services Pte Ltd owner of vehicle no. SLF3903B
hereby authorize my/our repairer, Teamwork Garage Pte Ltd
act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or
loss of use ("claim") for my/our vehicle no. SLF3903B that was damage pursuant to the
accident _____ which _____ occurred _____ at/along
Bradell Road
_____ involving vehicle nos. SJS 2255A

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies
pertaining the above mentioned accident due to me/us to my/our repairer/solicitors
Teamwork Garage Pte Ltd. I/We hereby authorize you to forward and release all
compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors
Teamwork Garage Pte Ltd pertaining to above said accident whom I/we
authorized and assigned to collect the said compensation monies.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the
personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein
should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured
losses claim arising of the subject matter in the action.

Thank you.

Dated this _____ day of _____ (month) 20 _____ (year)

Signature of owner vehicle (claimant): _____

Name of owner of vehicle (claimant): Roset Limousine Services Pte Ltd

NRIC Number (claimant): 200406722Z



[Signature]

CUSTOMER'S SIGNATURE

> Back to OneMotoring



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

Print Date/Time : 08 Feb 2021 / 09:10:31

Receipt Date/Time : 08 Feb 2021 / 09:10:31

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210208-000332

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 - SJS2255A				
As at 06 Feb 2021/13:45:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SJS2255A Enquiry Fee 20210208090943990633	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				
512972XXXXXX5903		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.

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)

Certificate No	SD20V13100 /VPZ /R02										
Form	MZ406C										
Date Of Issue	20-OCT-2020										
1.Index Mark and Registration No. of Vehicle:	SLA4730C										
2.Chassis number of Vehicle:	JTDGG20W20J003759										
3.Name of Policyholder:	ROSET LIMOUSINE SERVICES PTE LTD										
4.Effective date of Commencement of Insurance for the purpose of the Act:	01-NOV-2020 00:00 AM										
5.Date of Expiry of Insurance:	31-OCT-2021 23:59 PM										
6.Persons or Classes of Persons entitled to drive*:	<p>Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.</p> <p>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.</p> <p>And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.</p>										
7.Limitations as to use*:	<p>A) Use for carriage of passengers or goods in connection with the Policyholder's business.</p> <p>B) Use for social, domestic, pleasure and business purposes of any person to whom the vehicle is hired.</p> <p>C) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by the person to whom the vehicle is hired.</p>										
8.Policy does not cover:	<p>A) Use for racing, pace-making, reliability trial or speed-testing.</p> <p>B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.</p> <p>*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 are not to be included under these headings.</p>										
<p>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.</p>											
<p>For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers</p>  _____ Authorised Signature											
<p>For Information only:</p> <table style="width: 100%;"> <tr> <td style="width: 30%;">COVERAGE :</td> <td>Comprehensive, Unlimited Windscreen, Geographical Area - refer memorandum</td> </tr> <tr> <td>SUM INSURED:</td> <td>MARKET VALUE AT THE TIME OF LOSS</td> </tr> <tr> <td>EXCESS:</td> <td>Refer Memorandum - Section I S\$2000, Refer Memorandum - Section II S\$2000, Windscreen Excess S\$100</td> </tr> <tr> <td>FINANCE COMPANY:</td> <td>DBS BANK LTD</td> </tr> <tr> <td>PRODUCER NAME:</td> <td>NEWSTATE STENHOUSE (S) PTE LTD</td> </tr> </table>		COVERAGE :	Comprehensive, Unlimited Windscreen, Geographical Area - refer memorandum	SUM INSURED:	MARKET VALUE AT THE TIME OF LOSS	EXCESS:	Refer Memorandum - Section I S\$2000, Refer Memorandum - Section II S\$2000, Windscreen Excess S\$100	FINANCE COMPANY:	DBS BANK LTD	PRODUCER NAME:	NEWSTATE STENHOUSE (S) PTE LTD
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PRODUCER NAME:	NEWSTATE STENHOUSE (S) PTE LTD										

PLSL/-20-OCT-20

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20-OCT-20

SATISFACTION OF REPAIRED VEHICLE

I/We, _____, owner/driver of vehicle No. 5LF 39038 declare that the repairs of my/our vehicle has been completed and to my/our satisfaction.

I/We agree that I/we hereby irrevocable absolutely accept the settlement amount and the liability from the third party on the repair costs and/or rental and/or loss of use which are final and that the sum of amount are to be released and payment to the workshop for such repairs in respect of the damages caused in the accident.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Dated this 17 day of 02 (month) 2021 (year)

@ 11 hrs 50 mins



Name and Signature

K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934
Tel: 6844 5938 Fax: 6285 5228 Email : kntcars@gmail.com
Biz Reg. No.: 53208965X

No.: 3928

OFFICIAL RECEIPT

Date: 21/04/2021

Received from Roset Limousine Services Pte Ltd

The Sum of Dollars Two Thousand One Hundred and Sixty dollars

Being payment of

SLA4730C (06/02/2021 to 17/02/2021)

\$ 2160

K & t Cars

Cheque No.:

Authorised Signature



K & t Cars

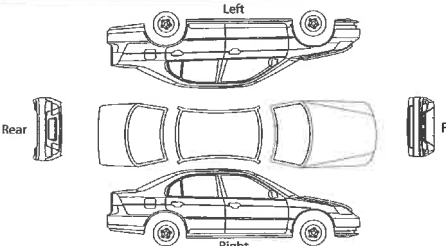
53 Ubi Ave 1 #01-23 Paya Ubi Ind Park
Singapore 408934
Tel: 6844 5938 Fax: 6285 5228
Email: kntcars@gmail.com
Biz Reg. No.: 53208965X

VEHICLE RENTAL AGREEMENT

NO.: KT-05181

Veh. No.: SLA4730C	Replace Veh. No.: SLF3903B
Veh. M / M: Toyota wish	Replace Veh. M / M: Toyota wish

HIRER'S PARTICULAR		<input type="checkbox"/> SAME AS HIRER DRIVER'S PARTICULAR	
Name: Roset Limousine Services PTE LTD		Name: Lim Gek Keow	
Address: Blk S3 paya ubi Industrial Park		Address: Blk 316A Yishun Ave 9	
Ubi Ave 1 #03-47 S(408934)		#02-250 S(761316)	
I/C: 2004067222	D.O.B:	I/C: S1656747G	D.O.B: 24/10/1964
Contact: 68445225	Pass Date:	Contact: 97539489	Pass Date: 05/02/1993

	A - ACCIDENT	Hirer's acceptance
	C - CRACKED	
	D - DENTS	Driver's acceptance
	S - SCRATCHES	




RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	06/02/2021		Date In	17/02/2021	
Time Out	1520		Time In	1150	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES				PETROL / DIESEL LEVEL					
Daily	@ \$	180	12 Days @ \$ 2160	OUT	E	1/4	1/2	3/4	F
Weekly	@ \$		Wks @ \$						
Monthly	@ \$		Mth @ \$	IN	E	1/4	1/2	3/4	F
Hours	@ \$		Hrs @ \$						
*Inclusive of additional charges (if any)				Petrol Charges		YES	NO	AMT: _____	
Amt payable* \$ 2160				CDW		YES	NO	AMT: _____	
Payment: <input type="checkbox"/> CASH <input type="checkbox"/> NETS <input type="checkbox"/> CHQ <input type="checkbox"/> VISA <input type="checkbox"/> MAST				Security Deposit		YES	NO	AMT: _____	
Bank / Cheque No.:				Advance Payment		YES	NO	AMT: _____	

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tender accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true and accurate.

IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)

- ❖ Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- ❖ Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- ❖ Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- ❖ Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- ❖ The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- ❖ In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- ❖ In view of all accident, the hirer will bear the full responsibility for the SGD\$3,500/- excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT	
 Signature of hirer / driver (company stamp if any)	  For and on behalf of K & t CARS (authorised signature only)