



WEGA ENGINEERING

automotive workshop and beyond

24hrs Towing, Insurance Claims, Car Repairs & Spray Painting

OFFICE : Blk 176, Sin Ming Drive, #04-16, Sin Ming Autocare, Singapore 575721

TEL : 65-6452 1493 FAX : 65-6452 9153

GST REG NO : 1999 00741 Z

AIG ASIA PACIFIC

78 Shenton Way,
#11-16 Singapore 079120

Attn: Claims Department

INVOICE : TP210103

INV DATE : 22/03/2021

VEHICLE NO. : SLV 4761 C

MAKE / MODEL : VOLKSWAGON

TERMS : 2 WEEKS

YOUR REF NO :

S/N Particular	Quantity	Amount SGD
Accident between SLV 4761 C & SLM 4653 D DATED 24/02/2021		
1 SLV 4761 C	Lump Sum Repair	\$ 4,350.00
	GIA Search fees	\$ 6.96
		4,356.96
	GST 7%	304.99
Loss of use for rental for 5 days @\$11.00 per day		550.00
		5,211.95

DOLLARS: FIVE THOUSAND TWO HUNDRED ELEVEN AND CENTS NINETY FIVE ONLY.

GRAND TOTAL

5,211.95

TERMS : 30 DAYS



Wega Enginnering Pte Ltd

Cheques should be made payable to WEGA ENGINEERING PTE LTD



WEGA ENGINEERING

automotive workshop and beyond

24hrs Towing, Insurance Claims, Car Repairs & Spray Painting

Blk 176 Sin Ming Drive, #04-16, 13 Sin Ming Autocare Singapore 575721

Tel: 6452 1493 Fax: 6452 9153 Website: <http://www.wega.com.sg> E-mail: wegaclaim@gmail.com

GST Reg. No: 19-9900741Z

Date : 22/03/2021

Our Ref : TP 210103

Your Ref :

M/S : A14 ASIA PACIFIC

WITHOUT PREJUDICE

78 Shenton way, #11-16 Singapore 079120.

Dear Sir,

Accident involving SLV 4761 C & SLN 4653b dated 24/03/2021

We enclosed the following documents for your perusal:-

- * Original Survey report bill / 1 original copies of photographs -
- * Original Tax Invoice no. 1 * Original Rental Invoice no. 1
- * GIA report / police report of 1 * Police result 1
- * Certificate of insurance 1 * LTA search and receipt of 1
- * Original Medical Bill/Receipt - * Driver's Letter of Authority -
- * Satisfaction Cum Discharge Voucher 1 * Others -
- * Survey under insurance instruction / independent Surveyor

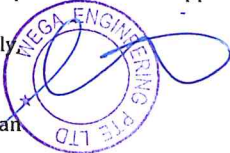
We would like to claim all the following losses on behalf of our client:-

1)	Cost of Repair (Inclusive GST)	\$ 4654.50
2)	Surveyor fees (with/without GST)	\$ -
3)	Rental Fees/Loss of Use for 5 days at \$100 per day	\$ 500
4)	LTA / GIA / Police Fees	\$ 7.45
5)	Medical Fees	\$ -
	Total Claim	\$ 5211.95

If your agree to the above, please forward your full settlement directly to WEGA ENGINEERING PTE LTD
Your prompt action is most appreciated.

Yours truly

Ee Sin Guan





WIN WIN RENT-A-CAR PTE LTD

Invoice

SLV4761C
ANDREW LEE KENG MING

Invoice No : WPLIN0005006
Invoice Date : 5/3/2021
Due Date : 5/3/2021
VHA No : 5577
Referral ID : W025

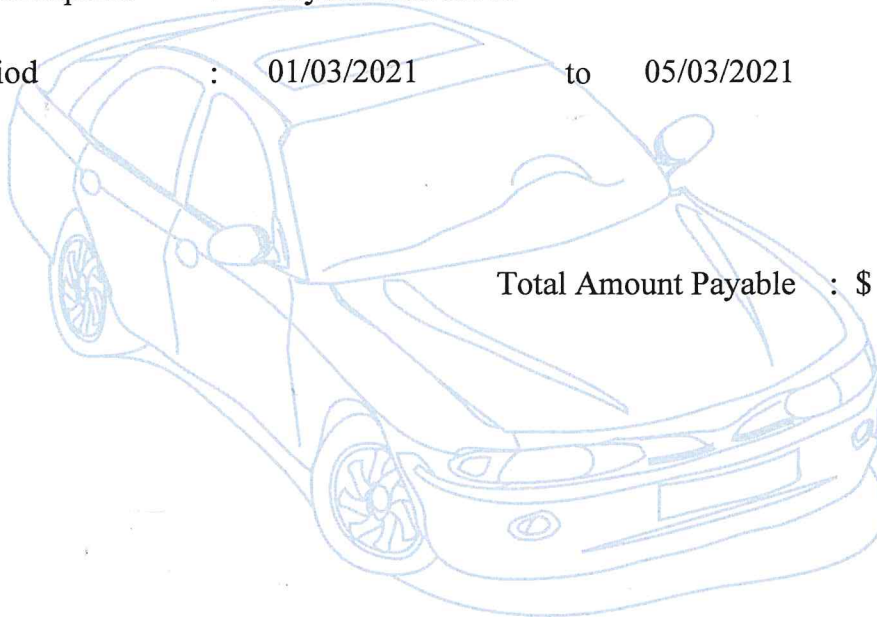
Description :	Amount
Rental for 5 Day/s @ \$110 per Day \$	550.00

Vehicle No : SJY8510S

Vehicle Description : Toyota Altis 1.6 A

Rental Period : 01/03/2021 to 05/03/2021

Total Amount Payable : \$ 550.00



WIN WIN RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875
Tel: 6315 8479 H/P: 9833 0807

VHA No: 5577
Invoice No: WPLIN 5006
Hirer's Vehicle No: SV4761C

UEN: 201505115E

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS

Name: (as in I/C) ANDREW LEE KENG MING

NRIC / FIN No: SXXXX 555 C

Address (Res): 93A TELOCK BANGAH ST 31

#14-155 S (10/093)

Name & Address of Employer:

Occupation: Driving Exp:

Singapore Driving Licence No:

Issue Date: Date of Birth: 27/2/80

Tel: (O) (R) HP: 91847010

ADDITIONAL DRIVER'S PARTICULARS

Name: (as in I/C)

NRIC / FIN No:

Address (Res):

Occupation: Driving Exp:

Singapore Driving Licence No:

Issue Date: Date of Birth:

Tel: (O) (R): H/P:

VEHICLE CHECK LIST

INDICATE: D - DENTS S - SCRATCHES A - ACCIDENTS

RIGHT FRONT TOP LEFT

REAR

MISSING / FAULTY ACCESSORIES / PARTS

REMARKS:

Vehicle No: STY85105 Replace Veh No:

Mileage Out: 135375 Mileage Out:

Make & Model: TOYOTA AL715 Auto / Manual

Out : Date 6/10/21 Time: 09.16

HIRE / PERIOD EXPIRY Time:

NON-WAIVER EXCESS=\$ 2000/-

CHARGES

Daily 5 @\$ 110 per day \$550 -

Weekly @\$ per week

Monthly @\$ per month

Hours @\$ per hour

Extension @\$

Delivery/Collection Service

SUB-TOTAL \$

PETROL LEVEL

Out E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

In E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

Fuel

Traffic / Parking Fines

TOTAL CHARGES \$

Hirer's Signature

Additional Driver's Signature

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card 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/credit card voucher. All information I have given WIN WIN RENT-A-CAR PTE LTD in connection with this agreement is true.

*IMPORTANT

1. VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
2. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
3. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
4. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY. INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
5. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES. A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
6. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY WIN WIN RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN " SIGNATURE OF HIRER / DRIVER " FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO WIN WIN RENT-A-CAR PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
5/3	1645	135539			

Date:

To: Wega Engineering Pte Ltd
Blk 176 Sin Ming Drive
#04-16 Sin Ming Autocare
Singapore 575721.

LETTER OF AUTHORITY & INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. **SLV4761C**

I / We **ANDREW LEE KENG MING UEN** / NRIC No. **SXXXX555C** ,
Owner of Vehicle No. **SLV4761C** , hereby authorise **M/S WEGA ENGINEERING PTE LTD**
To commence repairs to my vehicle and to forward the claim for damages sustained in the above
Accident to the third party driver and / or his employer and / or the vehicle owner and / or the insurer
Concerned. I/ We agree that in consideration of your giving up your repairer's lien I / We agree to
Assign the whole proceeds of my / our third party claim to you and if applicable, our solicitors (to be
Appointed by you on my/ our behalf) shall accept this as my/ our irrevocable authority to pay the
Amount compensated direct to you after deduction of their costs on a solicitor & clients basis. I/We
Undertake to co-operation fully with you and our solicitors to see the claim to a successful conclusion.

If third party driver and/ or his employer and / or the vehicle owner and /or the insurer reject liability,
I / We will fully be responsible for the repair costs and other incidentals.

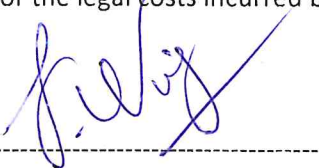
I / We also authorize you to sign all discharge vouchers / Indemnity forms and all necessary paper in
Connection with the above claim in my/ our absence.

I/ We authorise you to appoint such a firm of solicitors on my/ our behalf as you shall deem fit for the
Purpose of the third party/ own insurer's claim.

I/We undertake to inform you and/or the solicitors appointed by you on my /our behalf in the event
of the third party's insurance company communicate with me/ us directly by telephone or in writing
and I/We further undertake not to accept any monies of offer of settlement from the third party's
insurer without first communicating with you.

My/our vehicle is repaired by the repairer on my/our own will without any inducement, threat
and /or promise.

In the event that the repairer is completed to enforce this undertaking, I /We agree that I/We shall
Pay for the legal costs incurred by repairer on a solicitor and client's full indemnity basis.



Owner Signature
(Company Stamp if applicable)

TO :

Dear Sirs,

CLAIMANT :

ACCIDENT INVOLVING SLV4761C AND SLM4653D


ON 24/02/2021 1840 AT EXIT VIVO CITY CARPARK INTO SENTOSA GATEWAY

I/We , **ANDREW LEE KENG MING** , am /are the
registered owner of vehicle No. **SLV4761C** .

Please note that I have assigned all compensation monies due to me/ us in the above said
Accident to **WEGA ENGINEERING PTE LTD**.

I /We, hereby authorize you to release all compensation monies pertaining to the above said
Accident to **WEGA ENGINEERING PTE LTD** and forward you settlement cheque
To **WEGA ENGINEERING PTE LTD** whom I/we had authorized to collect the said
Compensation monies.

Thank you.



Signature of Claimant

(Company Stamp, If applicable)

Name : **ANDREW LEE KENG MING**

NRIC No : **SXXXX555C**

Date: 05.03.2021

TO:

VEHICLE NO: **SLV4761C**

DATE OF ACCIDENT/REPAIR: **24.02.2021 / 01.03.2021**

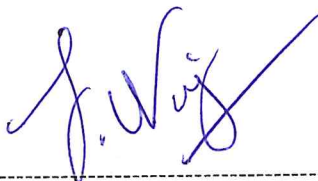
Accident Involving **SLV4761C** and **SLM4653D** along
EXIT VIVO CITY CARPARK INTO SENTOSA GATEWAY

This is to confirm that my/ our vehicle **SLV4761C** is under repair at
WEGA ENGINEERING PTE LTD.

Repairs had been carried out to my satisfaction.

DATED/TIME IN: **01.03.2021**

DATED/TIME OUT: **05.03.2021**



SIGNATURE

(OWNER/AUTHORISED PERSONNEL COLLECTING VEHICLE)

NAME: **ANDREW LEE KENG MING**

I/C NO: **SXXXX555C**



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	25/02/2021 12:22 (SGT)
Date of Accident	24/02/2021 18:40 (SGT)
Exact Location of Accident	1 HarbourFront Walk, Singapore 098585
Additional Location Information	EXIT VIVO CITY CARPARK INTO SENTOSA GATEWAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV4761C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ANDREW LEE KENG MING
NRIC No	SXXXX555C
Email Address	YNA2006SG@GMAIL.COM
Mobile Phone No	(Phone) +65-91847010
Alternative Phone No	(Office) +65-91847010

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Golf
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	AGI
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10472458R00 S
Cover Note Number	29/12/2020 TO 28/12/2021

DRIVER

Name of Driver	ANDREW LEE KENG MING
NRIC No	SXXXX555C
Date Of Birth	27/02/1980
Occupation	Indoor



Date Of Driving Pass	26/06/2007
Driving experience	13 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91847010
Alt. Phone Number	(Office) +65-91847010
Email Address	YNA2006SG@GMAIL.COM
Address	BLK 93A TELOCK BANGAH STREET 31 #14-155
Address complement	-
Postcode	101093
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 - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry

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

REFER TO SKETCH PLAN

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM4653D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SOH KIAT SING ANDREW
Passport No/FIN	SXXXX387G
Contact Number	-
Address	-
Address complement	-
Postcode	-

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

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 lodging 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)

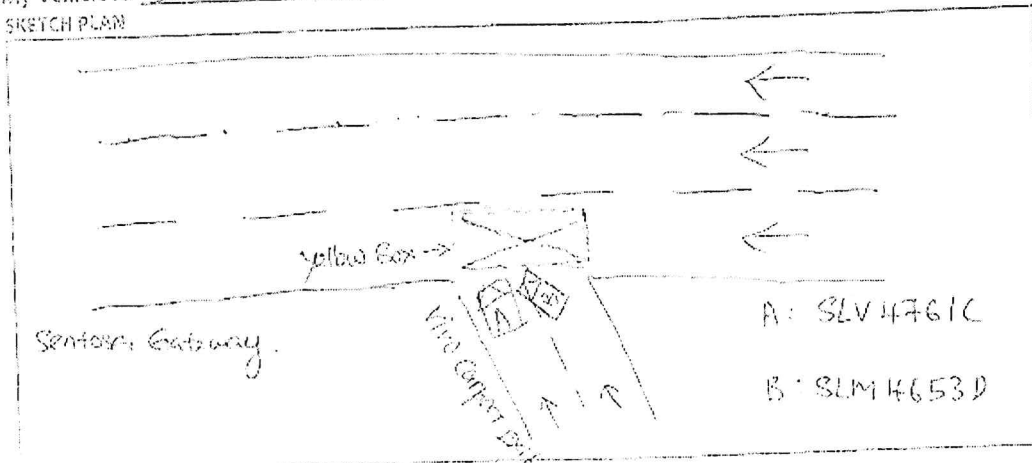
Reporting Centre Personnel's Signature
Name:
NRIC/PR No.:

Budget Direct

Vehicle: SLV 4761 C
25/02/2021



Date of accident: 24.02.21 Time: 6:40 PM Location: Exit VivoCity Carpark into Sentosa Gateway
 My Vehicle A: SLV 4761C Vehicle B: SLM 4653D Vehicle C: _____



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24 Feb 2021 around 6:40 PM
 Location: Exit from VivoCity Carpark.
 SLV 4761C was waiting to turn into Sentosa Gateway. SLM 4653D was at the right side lane of SLV 4761C.
 When SLM 4653D turn into Sentosa Gateway it hit the driver's side front area while SLV 4761C wasn't moving.


☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

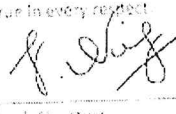
Remarks: Please forward a copy of my efile accident report to:
 My workshop: WEGA ENGINEERING
 Email address: cheekwongweign@gmail.com
 & myself:
 Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.


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/FIN No:

25/02/2021

AH LIM MOTOR COMPANY

