

Borneo Motors (Singapore) Pte Ltd Inchcape Bodycare Centre Level 4, Inchcape Centre 2 Pandan Crescent Singapore 128462

Tel: +65 6631 1855/1500 Fax: +65 6872 7260 www.borneomotors.com.sg

Our Ref: BMS2021/07/PD1268/DS(SM)

Your Ref: CC4/11121002668/ps3

02 Jul 2021 BY HAND (INS COPY)

M/S. INDIA INTERNATIONAL INSURANCE PTE LTD C/O LKK AUTO CONSULTANTS PTE LTD

Attn : Officer In-Charge Dept : Motor Claims

RE: ACCIDENT INVOLVING SMG7596K AND GBJ9955J ON 24 Feb 2021

Dear Officer,

We refer to the above captioned.

The accident was caused by the negligence of your insured and as a result, our client has incurred the following losses:

-Undertake By Claimant	Total Claim - \$13,648.80
G. Medical Claims -	
E. Loss of Rental - \$700.00 (\$100X7days)	F. Others -
C. Excess -	D. Loss of Use -
A. Repair Cost - \$12,948.80	B. LTA Search -

We would appreciate if you could revert to us with an offer to settlement within $\underline{\mathbf{8}\ \mathbf{working}\ \mathbf{weeks}}$ as required under NIMA Protocol.

Enclosed are the following documents for your kind perusal:

(✓) Original Tax Invoice
 (X) Discharge Voucher
 (✓) Car Rental Invoice/Agreement
 (✓) GIAS/Police Report/s
 (X) Original Photograph X ______
 (X) Original/Photocopy Survey
 (✓) Certificate of Insurance
 (X) LTA Search Fees
 (✓) Letter of Authority
 (X) Medical Receipt

Cheque is to be made payable to <u>BORNEO MOTORS (SINGAPORE) PTE LTD</u> & mail it to, Inchcape Bodycare Centre Level 4, Inchcape Centre, 2 Pandan Crescent, Singapore 128462, Attn: TPR Department

Yours faithfully,

TPR Team

Claims Service Department

F:68727260 E: claimstatusenquiry@borneomotors.com.sg



Borneo Motors



Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9

17 UBI ROAD 4 SINGAPORE 408611, Tel no.: 6631 1188

TAX INVOICE

Account Details			Account No	0.			Customer	Details			
India International Insurance P L 64 Cecil Street #06-02 IOB Building Singapore 049711 Attn: Motor Claims Dept		Document 3901167	S1000006 / ICIII1 Document No. 39011673 Document Date		Mr Low Jin Hui 807A Chai Chee Road #14-16 Singapore 461807				10.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4		
				22/04/20	21	Mobi	le: 9479082	7			
Ye	ar ——	Model	Variant	Reg. Date	Reg. No.	Kilome	eters V	Vip No.	Order N	o. / Rer	marks
20	18	NSP170R MV	VYQKT E3	31/12/2018	SMG7596K	507	01 2	20759	67/DS/	SMG75	596K
	C	Chassis No.	Engine No.	Terms	SA / Counter		Ve	hicle In	Co	ollected	l On
MI	HFZ	28H3000059827	2NRX396910	60	Sam San Joi		25/02/20	21 14.19	22/04/	/2021	7.59
L	Cd		Job/Parts Desc	ription			Qty	Unit Price	Disc %		Amount
11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27	B 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5	ILM BP-ECU2 TO RESET S52159-0U919 COVE S52161-0K040 PIECI S52151-0D010 EXTE S58307-0D320 PANE S67005-0D360 PANE S67881-0D130 WEA' S68105-0D261 GLAS T90975-02086 EMBL S75442-0D290 PLAT S75441-0D070 PLAT T89997-30100 ANTE SPC507-0D014 70 BAG T04562-12010 DAM I T21000-20 SIKA 21	REAR WINDSCRECU AND REPRER, RR BUMPERE, RR BUMPERENSION, RR BUMERENSION, RR BUMERENSENSON, BACK SUB-ASSY, BACK DOOR NA, ELECTRIC CK SENSOR (4RK SENSOR (4RK SENSOR (4RK O002-2 G+P 207	ROGRAMME T, L MPER ACK CK D ACK2 NAM NAM AL B, ORANGE ME ASS D! (BLACK) SG)	0741	1.00 10.00 1.00 1.00 1.00 1.00 1.00 1.0	316.10 4.10 190.00 433.60 1131.90 372.30 1029.30 72.20 35.50 53.20 72.00 172.40 121.00 108.00 200.00			290.00 180.00 316.10 41.00 190.00 433.60 1131.90 372.30 72.20 35.50 53.20 72.00 172.40 121.00 200.00
		oehalf of Motors (Singapore) Pte Lto	 		Charge Su	mmary		Total		1	12,101.68
			Please acknowledge	receipt of vehicle	Parts Labour Sublet		4,456.50 7,172.00 473.18	Less	0%		847.12 0.00
		V			Lubrication/Fluid Others		0.00	1)ue	1	12,948.80



Borneo Motors



Co. Reg No. : 196700086Z GST Reg No. : MR-8500000-9

17 UBI ROAD 4 SINGAPORE 408611, Tel no.: 6631 1188

TAX INVOICE

	Account Detail	ls	Account No	Account No.		Customer Details				
Attn: Motor Claims Dept		Document 3901167	S1000006 / ICIII1 Document No. 39011673 Document Date		Mr Low Jin Hui 807A Chai Chee Road #14-16 Singapore 461807 Mobile: 94790827					
Year	Model	Variant		WHITTER AND WAS A 1						
ı caı	iviodei	vananı	Reg. Date	Reg. No.	Kilome	eters	Wip No.	Order No	. / Remarks	
2018	NSP170R MV	VYQKT E3	31/12/2018	SMG7596K	507	01	20759	67/DS/S	MG7596K	
1	Chassis No.	Engine No.	Terms	SA / Counter		Ve	ehicle In	Col	Collected On	
MHF	Z28H3000059827	2NRX396910	60	Sam San Joi		25/02/20	021 14.19	9 22/04/2	021 7.59	
L Co		Job/Parts Desci	ription			Qty	Unit Price	Disc %	Amount	
2 S B B B B B B B B B B B B B B B B B B	DRIVE IN:25/02/2021 DATE-IN:09/03/2021 D NO OF REPAIR DAYS:: BY:GUO QIANG(LKK) PSP PER PANE LABOU PER PANEL APPLICAT BP-LAB2 DRILL HOL BP-LAB2 REMOVE & , GARNISH AND TRIMM BP-LAB2 REPLACE & BP-LAB2 REMOVE & BP-LAB2 REPLACE & BP-LAB2 REPLACE F STRAIGHTEN & ALIGN BP-RES2 RESPRAY EAS	CC DATE:24/02/2 DATE SURVEY:09 T DAYS IR FOR PLATINUITION ON REAR AT E & INSTALL REAR MING TO ASSIST & INSTALL REAR AT E & INSTALL REAR & INSTALL REAR & INSTALL COM	M SHINEPRO & CCIDENT ARE AR REVERSE SUCT WATER LE COMPARTMEN REPAIR WINDSCREEN REVERSE CAMPONENTS TO TAFFECTED A	& SHINE AS SENSOR EAK TEST NT CARPET N GLASS MERA NEW TAI ARTS AREAS	0619				30.00 183.18 180.00 180.00 360.00 462.00 180.00 360.00 2880.00	
	behalf of Motors (Singapore) Pte Lto	Customer's Please acknowledge		Charge Sur Parts Labour Sublet Lubrication/Fluid Others	mmary		Less Amount E	Due		



TAX INVOICE

GST REG. NO.: 200106276D

DATE	INVOICE NO.
12/3/2021	BMS 4640

INVOICE TO. LOW JIN HUI 46 EASTWOOD ROAD #03-18 SINGAPORE 486356

	VHA NO.	DUE DATE	VEH NO.	
	BMS 4640	12/3/2021	SMP 6693 Y	
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT	
RENTAL FROM 09 MARCH 2021 (0835 HRS) TO 15 MARCH 2021 (1655 HRS) YOUR REF: SMG 7596 K	7	93.45857	654.21	
1 5 MAR 2021				
Account Name: BKW RENT A CAR PTE LTD Account No: 118-312-9991 Bank: UNITED OVERSEAS BANK LTD (UOB)	Subtotal	,	\$654.21	
Branch: UOB Shaw Centre Branch Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG	GST @ 7%	\$45.79		
All cheques must be made payable to BKW RENT A CAR PTE LTD. *Please indicate the invoice number and vehicle number in the reference.			\$700.00	







BKW RENT PTE LTD

120 Lower Delta Road #02-15 Cendex Centre Singapore 169208 Tel: 6738 7777 Fax: 6738 6666
ACRA No: 20-0106276-D GST Reg. No: 20-0106276-D
24 HOURS HELPLINE: 6223 1122

Workshop: BMS 116

VHA No: **BMS** 4640

VEHICLE HIRING AGREEMENT

VEHIOLE TIME	MUNICIPIE IN
HIRER'S PARTICULARS	Hirer's Own Vehicle No: MG /3 /6 Replace Veh No:
Name (as in I/C) LOW JIN HU	Loan Vehicle No: SMP6693 VR No:
NRIC/Passport No. S& SS 47.5 Toate of Birth DEC 1988	Make & Model: Aff (Auto/Manual Group:
Address: 48 FASTWOOD ROAD Age:	CHARGES : \$ cts
\$(186350)	Daily 7 day @\$ 93.45857Per day 654 21
Name & Address of Employer	Weekly/Monthly week @\$ Per week/Monthly
Occupation Driving Exp:	Others
Driving Licence No: Passed Date: 06 Aug 2010	CDW/PAI @\$ Per day/Monthly
D/L Type: Local/Int'l/Others:	Delivery/Collection Svc
Tel(O)(R)HP 479827	GST
DRIVER'S PARTICULARS	OR No: (A) SUB-TOTAL
Name (as in I/C)	Petrol Level OUT E 1/4 1/2 3/4 F
NRIC/Passport No:Date of Birth:	& Surcharge IN
Address: Age:	Firstkm FREE per day GST 7% 45 79
s()	Excess mileage is chargeable
Occupation Driving Exp: Yrs	at cents per km TOTAL CHARGES 4700 88
Driving Licence No:Passed / Expiry Date:	Security Deposit : \$ Bank: POSB
D/L Type: Local/Int'l/Others: Contact No:	CASH/NETS/VISA/MC/AMEX/CHQ NOS520 380 D 5482352
Front a TT	Expiry Date: 12/26 Card ID No: 944
Camera 6	Name as in Card: LOW JIN HU
	NON WAIVER EXCESS (Subject to GST): \$ 500/-
	ACCESSORIES CHECK
	☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge ☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre
	Tack Liftyre Opener Lifteriol Cap Liftyre
	A R D I A SEE
INDICATE:	x / SINU
A - Accidents D - Denis	Hiror's Signature : Additional Driver's Signature :
S - Scratches X - Crack	SINGAPORE Use Only
I have read and agree to the terms and condition on both sides of this agreement	nt. 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 ven BKW Rent A Car Pte Ltd in connection with this agreement is true.
IMPORTANT	legal costs on a full indemnity basis), whatsoever and howsoever brought against,
1. The Hirer and the authorized driver must be over 23 years of age and under 65	suffered or incurred by you in respect of the vehicle or the use or the operation of the

years 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 Authorised Driver.

All vehicles are supplied with petrol and should returned with petrol level likewise.

All verticles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.

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

Use of the vehicle for illegal purpose (For instance; in connection with theft, drug

Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in additional to the appropriate insurance top up in the case

penalty tee of \$200 in additional to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.

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 it's use or operation. The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-wavier excess and cost expense (including

vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.

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.

The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.

report must be made within 24 hours. 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.
The hirer/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

 All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
 I understand and agree to the personal data collection bidlement stated on the nt stated on the

 understand and agree to the personal data Terms and Conditions Page. Date Out Time Out Mileage Check By Remarks 69/03 Hirer's/Driver Signature

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 Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challegged Or Questioned On Arry Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)*

Date In Time In Mileage Check By Remarks 3 6 Airer's/Driver Signature SP0U212P0004 / PROGRESSIVE CAR CARE PTE LTD ENTRY DATE & TIME: 25/02/2021 12:11 (SGT) SUBMITTED BY: Ng Pei Wen VERSION: 1 (25/02/2021 12:11 (SGT))



SINGAPORE ACCIDENT STATEMENT

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate 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 12:11 (SGT) Date of Accident 24/02/2021 18:00 (SGT) Exact Location of Accident AYE, Singapore Additional Location Information **TOWARDS CHANGI** Country/State of Loss Singapore

DETAILS O	F OWN VEHICLE
Vehicle Registration Number	SMG7596K
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No	No LOW JIN HUI SXXXX475F JINHUILOW@GMAIL.COM (Phone) +65-94790827 +65-94790827
VEHICLE PARTICULARS	
Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category INSURANCE COMPANY	Toyota Sienta No - Claiming third party Private car
Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number	AGI Comprehensive No P10487685R00
Name of Driver	LOW JIN HUI

SXXXX475F

30/12/1988 Indoor

NRIC No

Date Of Birth

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	06/08/2010 10 YEARS AND 6 MONTHS Male (Phone) +65-94790827 +65-94790827 JINHUILOW@GMAIL.COM 46 EASTWOOD ROAD #03-18 - 486356 Yes - No
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Raining Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 Yes No Yes 1
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
CIRCUMSTANCES OF ACCIDENT	
REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR (ATTACHMENT(S)	CARE PTE LTD TEL 6741 5336
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?	Yes No No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver	GBJ9955J Commercial vehicle

Contact Number
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	LOW JIN HUI
Address	_
Address Complement	-
Post Code	_
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMG7596K
Were seat belts worn?	_
Was this injured conveyed to hospital by ambulance?	

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 4. The issue and acceptance of this Formby 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)

Lunderstand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

ATA Alexandra

(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 GN 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 &

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

Witnessed by Report

Sketch Plan

W-3

The Interlace Econdo J

Describe Circumstances of the Accident

Traffic was su	low	
Slight drizzlin	0	
	novmally, keeping a constant o	distance with the
	ging when the car in front stopp	
Suddenly, the a	ar behind impacted and hot	the back of my car.
Immodiately after	r the impact, I felt lower ba	ick pain due to the
Collision at ap	proximate 6 pm	
Turned on my ho	reard lights, per put to park	gear and test plate
and a video of the	re accedent, cars' condition au	nd dur took a photo
of the driver's driv	ing break house	
At approximately	8:15pm, I went to SGH A.	RE due to the
buer back pain Roll	fired during the Our accordant in	naut.
Given 7 days M	4	
MONTH has been been as well as the second of		
Declaration		
We declare the foregoing particular	s are true in every respect.	Λ
	policy, please be advised that your insurer may have a foun meframe from the day of occurrence. Kindly check with your	
Lilli	,	NW -
Policyholder's Signature / Date &	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



Date of Expiry:

1 of 3 Report No. T/20210225/2029

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/02/2021 11:59			Vide Report No.:	Station Diary No.:			
	nt's Partic						
Name of Informant: LOW JIN HUI		Address: 46 EASTWOOD ROAD #03-18 LAGUNA 88 SINGAPORE 486356					
ID Type NRIC N	/ ID No : 0 / \$88524	76F	Contact No.:				
	Nationality; SINGAPORE CITIZEN		Email: Mobile: 94790827				
Sex: Age: Date of Birth: Male 32 30/12/1988			Type of Informant:				
Race: Chinese		Language:	Institution / School Name:				

Driving Licence Information:

		rma				

Type of Accident:	Injury Others	Drink Drive:	Date/Time of Accident:	Type of Location:
Location:	900	No	24/02/2021 18:00	

Class 3

AYER RAJAH EXPRESSWAY

Occupation:

ENGINEER

Weather: Clear	Road Surface: Dry	Road Speed Limit: Traffic Volume:	
Traffic Flow:	Traffic Control:		
Type of Collision:	Anyone conveyed by ambulance:		

Details of V	ehicle Invo	olved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBJ9955J	Van					0
SMG7596K	Car	тоуота	SIENTA ELEGANCE (AUTO)	Orange		0

1	Details of V	ehicle Insurar	100			
	Account to	Insurance Co		Insurance N	lo Effective	Expiry Date



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No. 65470000



2 of 3

Report No. T/20210225/2029

CONTINUATION OF REPORT

Details of Vehic	ele Insurance			1 - 0-4
/ehicle No. In	surance Company	Insurance No	Effective	Expiry Date
MG7596K A	JTO & GENERAL INSURANCE	P10487685R00	31/12/2020	31/12/2021

Details of Perso	n Involved			
Any Pedestrian I	nvolved: No			
No. of Pedestrian	s Injured: NIL	Use of Pedestrian Crossing: NA		
Driver				
Name	LOW JIN HUI	ID No.	S8852475F	
Related Vehicle	SMG7596K (Car)	Contact No.	94790827	
Hospital/Clinic	al/Clinic NIL		Class: 3 Date of Expiry: NIL	
Date Treatment NIL		Expiry Date Date Discharge NIL		
No. of Days gran	ted Medical Leave NIL	Degree of Injury NIL		

Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION.

THE TRAFFIC FLOW AT AYE TOWARDS CHANGI WAS SLOW AS THERE WERE MANY VEHICLES. AS I WAS ON THE ROAD, A CAR SUDDENLY COLLIDED WITH ME FROM BEHIND. THE BACK PORTION OF MY VEHICLE WAS BADLY DAMAGED. THE COLLISION WAS SO IMPACTFUL THAT MY LOWER BACK BODY WAS HURTING SO MUCH. I CAME OUT OF MY VEHICLE AND EXCHANGED PARTICULARS AND CAR PLATE NUMBER. I ALSO TOOK PHOTOS OF THE DAMAGES OF MY VEHICLE. AFTER SETTLING THIS MATTER, I WENT TO SINGAPORE GENERAL HOSPITAL BY MY OWN TO SEEK MEDICAL ATTENTION. I AM ON MEDICAL LEAVE FOR 7 DAYS, FROM (24/02/2021 - 02/03/2021). THAT IS ALL.



SINGAPORE POLICE FORCE

Police Station Of Origin Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



Report No. 1/20210225/2029

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

SC SAIFUL ILHAM BIN ZAHARI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt SYED ZAYID MUHAMMAD BIN SYED ABOUL WAHID ALHINDUAN

Contact No : 65476404

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

25/02/2021 11:59

Classification Of Case:

Sionature:



Certificate of Insurance

Comprehensive Car Policy Policy Number: P10487685R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10487685R00 s(Comprehensive / Named Driver Plan)

1) Vehicle Registration Number

SMG7596K

Chassis Number

.

-

2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act

31/12/2020 (00:00)

3) Date / Time of Expiry of Insurance

30/12/2021 (23:59)

4) Excess (i) Policy

S\$ 600.00

(ii) Windscreen

S\$ 100.00

5) Policyholder

Low Jin Hui

6) Persons or Classes of Persons Entitled to Drive*

Drivers named as a Main / Named Driver in this Certificate of Insurance only.

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 any 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 and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.

Main Driver / Date of Birth

: Low Jin Hui(30/12/1988)

Named Driver(s) / Date of Birth

No driver is named.

7) Limitation as to use*

Use only for social, domestic and pleasure purposes and for the occasional business purposes of the drivers listed above. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speedtesting or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.

8) Finance Company

DBS Bank Ltd

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) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on 30/11/2020

Auto & General Insurance (Singapore) Pte. Limited
Trading as Budget Direct Insurance

Simon Birch Chief Executive Officer

LETTER OF AUTHORITY

ACCIDENT INVOLVING SMG 7546K and GRJ 9955J on 24. 21000 Own vehicle's number Other vehicle's number Date of accident
along AYIZ.
Accident location
BY THE LETTER OF AUTHORITY, I/we, Name of Policy Holder & (IC/Passport/Company Registration) number
of Name of Policy Holder & (IC/Passport/Company Registration) number 46 East-word R.J. # >3-19 Laguna 84 5 46356 Address of Policy Holder
owner of Vehicle Registration No. ING 7566 hereby appoint BORNEO MOTORS (SINGAPORE) PTE LTD (hereinafter refers to BMS), a company incorporated in Singapore and having its registered office at 33 Leng Kee Road, Singapore 159102, to do all or any of the following:
1. To submit, resolve and make any claims which *I/we may have against the other *party/parties to the Accident and under the insurance *policy/policies taken up by such *party/parties or alternatively under Insurance Policy number taken up by *me/us and pay the compulsory excess in respect of the cost of repairs suffered by *me/us arising from the Accident (loss and damage).
 To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of Cheque in favour of <u>BORNEO MOTORS (SINGAPORE) PTE LTD</u> and give a valid receipt and discharge therefore.
 For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever in relation thereto.
4. Generally do all such acts as it shall deem necessary for the purpose of settling such claim.
*I/We hereby declare that all acts, instruments and documents done by virtue of this letter of authority on *my/our behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by *me/us in *my/our own proper person(s) and *I/we hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.
*I/We hereby further declare that the letter of authority hereby conferred shall remain irrevocable.
*I/We further confirm that the acceptance by BMS of the settlement amount in respect of such constitute the full discharge of *my/our claim(s) in respect of such loss and damage.
IN WITNESS WHEREOF, *I/we have hereunto to set *my/our hand and sign this of the month Year 20
Signed & Pelivered By: (To be sign by the policy holder only) **Please stamp the company chop for vehicle registered under a company's name

*delete as appropriate