



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

31 MAY 2021

Accident involving my vehicle number GBJ 7542E and vehicle number
SMM 4373A on 28/02/2021 at 12:25 HOURS at/along
TPE towards Changi (Before Tampines Avenue 10 Exit 5)

We refer to the above matter.

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

Vehicle Repair Cost/ Excess	\$ 7 500.00
Rental for <u>-</u> days x \$ <u>-</u> /day	\$ -
Loss of Use for <u>9</u> days x \$ <u>200.00</u> /day	\$ 1 800.00
LTA Search Fee / 3rd Party GIA Report	\$ 7.45
Others	\$ -

Total: \$ 9 307.45

Yours faithfully,

Michelle



Michelle

HP: 9856 4815



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Authorisation To Act

I, Spice Village Catering Pte. Ltd. ("the third party claimant") of
3015, Bedok North Street 5, #02-03, Shimei East Kitchen, Singapore 486350
(address), owner of GBJ 7542E (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. GBJ 7542E that was
damaged pursuant to the accident which occurred on 28/02/2021 (date)
at/along TPE towards Changi (Before Tampines Avenue 10 Exit 5)
(location) involving vehicle no/s SMM 4373A ("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 01 day of 03 (month) 20 21 (year)



Signed by "the third party claimant"





Signed by "the workshop"





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 Authorisation & Indemnity

Accident involving motor vehicles no. GBJ 7542E and SMM 4373A on 28/02/2021
at/along TPE towards Changi (Before Tampines Avenue 10 Exit 5)

1. I/We, the Owner of motor vehicle no. GBJ 7542E 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 01 day of 03 2021

Signature of vehicle owner C. Tan

Name: Spice Village Catering Pte. Ltd.

IC/UEN No: 201308383D

(Company stamp, if applicable)

Address: 3015, Bedok North Street 5,
#02-03, Shimei East Kitchen, S(486350)

Tel: 6345 5542



M

Witnessed by:

Michelle



"My execution of this Discharge
Voucher is only for my claim
for property damage and not
prejudicial to any other claims"

AUTHORIZATION TO ACT

(AIG Asia Pacific - Express Third Party Claim)

I, Spice Village Catering Pte. Ltd ("the third party claimant")
of 3015, Bedok North Street 5, #02-03, Shimei East Kitchen, S(486350) (address),
owner of GBJ 7542E (vehicle no.) hereby authorize
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. GBJ 7542E that was damaged pursuant to the
accident which occurred on 28/02/2021 (date) along TPE towards
Changi (Before Tampines Avenue 10 Exit 5) (location)
involving vehicle no/s SMM 4373A
("the accident").

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

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

Dated this 01 day of 03 (month) 20 21 (year)

Signed by "the third party claimant"

G. Juy.



Signed by "the workshop"
(with chop)

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
31.05.2021	ISA202105-00091	GBJ7542E

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-12 AIG BUILDING

SINGAPORE 079120

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 7,500.00
Total	\$ 7,500.00

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

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

Print Date/Time : 01 Mar 2021 / 11:53:07

Receipt Date/Time : 01 Mar 2021 / 11:53:07

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210301-001654

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SMM4373A				
As at 28 Feb 2021/12:25:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SMM4373A Enquiry Fee 20210301115134795998	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.



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	01/03/2021 13:38 (SGT)
Date of Accident	28/02/2021 12:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TPE TWRDS CHANGI(BEFORE AVENUE 10 EXIT 5)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ7542E
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SPICE VILLAGE CATERING PTE LTD
Company Reg No	2XXXXX383D
Email Address	ishareauto@gmail.com
Mobile Phone No	(Phone) +65-63455542
Alternative Phone No	+65-63455542

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	TOYOTA / DYNA 150 5MT
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SI20V09648/VCV/R01
Cover Note Number	-

DRIVER

Name of Driver	GANESAN IYYAPPAN
Work Permit No	GXXXX586N
Date Of Birth	10/05/1992
Occupation	Outdoor



Date Of Driving Pass	20/11/2017
Driving experience	3 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90829147
Alt. Phone Number	-
Email Address	ishareauto@gmail.com
Address	3015 BEDOK NORTH STREET 5 #02-03 SHIMEI EAST KITCHEN
Address complement	-
Postcode	486350
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
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 ATTACHED;

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	SMM4373A
Vehicle Manufacturer	Kia
Vehicle Model	KIA / CERATO 1.6(A) SX
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 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 of 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.



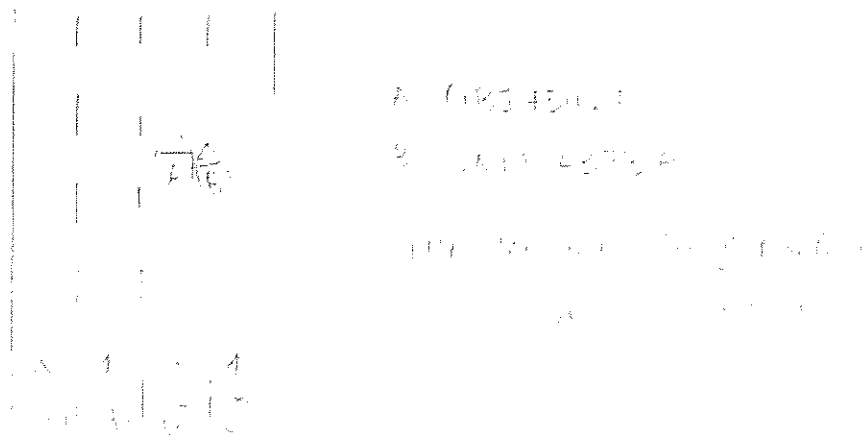
Policyholder's Signature + Date & Time

Driver's Signature (if driver is not the policyholder) + Date & Time

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vac@idac.com.sg

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Refer to attached

Declaration

I/We declare the foregoing particulars are true & correct to the best of my/our knowledge.



Event Organizer's Signature, Date & Time

Driver's Signature (to be filled in by the driver) Date & Time

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vacom.com.sg

Witnesses by Reporting Centre
Personnel

On 28.02.2021 at about 12:25 hours along TPE towards Changi (Before Tampines Avenue 10 Exit 5). I was travelling straight on lane 2 along the above mentioned location and suddenly, I heard a loud bang and felt an impact. When I alighted, I realised it was vehicle (B) from lane 1 cut into my lane hence collided onto the right hand side portion of my vehicle (A).

Vehicle (A): GBJ 7542E

Vehicle (B): SMM 4373A



C. Lee



S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
HIS CATERING SERVICES PTE. LTD.



Name
GANESAN IYYAPPAN

Identification
636575253

Employment
MANUFACTURING



K2038544

G3J7542E

Driver

VISIT PASS
Immigration Regulations

08-01-2020

Name
GANESAN IYYAPPAN

FIN
G2493586N

Date of Birth
10-05-1992

Sex
M

Nationality
INDIAN

MULTIPLE JOURNEY VISA ISSUED

Download SGWorkPass
App to check status





G3J7542E

Driver

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

Class	Description	Effective Date
Class 3	Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	20 Nov 2017

NP 428A



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	SI20V09648 /VCV /R01
Form	MZ300A
Date of Issue:	28-Jul-2020
1. Index Mark and Registration No. of Vehicle:	GBJ7542E
2. Chassis number of Vehicle:	JTFAT35Y70K213681
3. Name of Policyholder:	SPICE VILLAGE CATERING PTE LTD
4. Effective date of Commencement of Insurance for the purposes of the Act:	14-AUG-2020 00:00
5. Date of Expiry of Insurance:	13-AUG-2021 23:59
6. Persons or Classes of Persons entitled to drive*:	any person who is driving on the Policyholder's order or with their permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. 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.
7. Limitations as to use*:	A) Use in connection with the Policyholder's business. B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. C) Use for social, domestic and pleasure purposes.
8. The Policy does not cover:	A) Use for hire or reward or for racing, pace-making, reliability trials or speed-testing. B) Use whilst drawing a trailer except the towing or any one disabled mechanically propelled vehicle.

*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.

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.

VIRTUAL INSURANCE AGENCIES PTE LTD
192 Waterloo Street #02-02
Skyline Building, Singapore 187991
(Tel: (65) 83380083 Fax: (65) 83381001)

For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers



Authorised Signature

For Information only:

COVERAGE:	Comprehensive, Unlimited Windscreen
SUM INSURED (\$\$):	MARKET VALUE AT THE TIME OF LOSS
EXCESS (\$\$):	Section I \$600.00, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers \$3,000.00, Windscreen Excess \$100.00
FINANCE COMPANY:	UNITED OVERSEAS BANK LIMITED
PRODUCER NAME:	VIRTUAL INSURANCE AGENCIES PTE LTD