

## TAX INVOICE

Co Reg No : 197701469G

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
Azman Bin Sahari	Cust No/Name KCV05720/Azman Bin Sahari
Blk 602 Choa Chu Kang St 62	Reg No/Reg Date SLF2601D / 19/08/2016
#04-35	Date In/Mileage 08/03/2021/ 75976
Singapore 680602	Chassis/Package JMYXTGF3WJ00080E /DC17RP
Contact No Mobile: 97503643	Engine No 4B12RS2843
08/03/2021	Make/Model MIT/OUTLANDER 2.4 CVT AWD (G43)
	Colour/Trim D01 COSMIC BLUE MIC/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No		
CTP00040	Cash	17/03/2021/ 09:13	TLC	884 / Lauro Songcuan	62945	41471505		
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
E PNT88000								1280.00
RENEW TAILGATE, REPAIR REAR BUMPER, TAILGATE GARNISH								
E PNT98000								1375.00
SPRAY PAINT FOR REAR BUMPER, TAILGATE, TAILGATE GARNISH								
E PNT88000								300.00
REMOVE & INSTALL TAILGATE GLASS								
M SUNDRY								80.00
APPLY SEALANT FOR TAILGATE GLASS								
M SUNDRY								40.00
APPLY SEALANT FOR AFFECTED PORTIONS								
M SUNDRY								20.00
AC SUNDRIES								40.00
M SUNDRY								40.00
SUPPLY C&C LOGO								
E PNT88000								200.00
REMOVE & INSTALL TAILGATE TRIMS								
A 54900099								30.00
CHECK WIRING & CHASSIS ELECTRICAL SYSTEM								
A 10028901								120.00
TO CARRY OUT DIAGNOSTIC CHECK USING HI-SCAN PRO TEST								
USING HI-SCAN PRO TEST								
X PANEL ASSY, TAILGATE					1.00	989.00	00.00	989.00
X DAM, TAILGATE, LWR					1.00	41.00	00.00	41.00
X STOPPER, WINDSHIELD GLASS					2.00	3.00	00.00	6.00
X DAM, TAILGATE SIDE					2.00	27.00	00.00	54.00
X FASTENER, WINDSHIELD					4.00	6.00	00.00	24.00
X DAM, TAILGATE, UPR					1.00	13.00	00.00	13.00
X MARK, OUTLANDER					1.00	95.00	00.00	95.00
X DECAL, 4WD					1.00	18.00	00.00	18.00
X MARK, THREE-DIA					1.00	61.00	00.00	61.00
X FACE, RR BUMPER					1.00	811.00	00.00	811.00
Z TEXT								
TP CLAIM LONPAC - YP1124P								

Payment should be made strictly by cash, NETS or credit cards. Thank you.

Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.



209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



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Description of Goods / Services	Qty	Unit Price	Disc%	Amount
DOA: 15/02/2021 SURVEY: STEVE (LKK) 08/03/2021 05 DAYS				
<p><i>Guarantee Your Warranty, Maintain with Cycle &amp; Carriage!</i></p>				

Parts	2,112.00		Nett	5,597.00
Labour	3,305.00	7% GST on	5597.00	391.79
Standard Menu	0.00			
Specialist Job	0.00		Total Payable	5,988.79
Diagnostics Job	0.00		Paid	0.00
Sundry/Others	180.00		Total Due	5,988.79
Total(w/o GST)	5,597.00			

*Any dispute to the invoice must be made within 3 days. This is a computer generated document, no signature is required.*



# CHAN'S & SONS ENTERPRISE

363 Sembawang Road  
Singapore 758379  
Tel: 67532536 Fax: 67567565  
GST Reg No: 51-936900-M

**chan's**  
www.chans.com.sg

## TAX INVOICE

AZMAN BIN SAHARI

INVOICE : AR2103-0207  
DATE : 19/03/2021  
TERMS : C.O.D  
STAFF ID : AMIRA  
AGREEMENT NO. : HA202103-0040

ATTN : ACCOUNTS PAYABLE

DESCRIPTION	AMOUNT (SGD)
-------------	--------------

Vehicle Reg No : SMP3242K 1,280.00  
Make / Model :  
Rental Dates : Rental Billing From 08/03/2021 To 15/03/2021 (Inclusive)  
Period : 8 days  
Rental Rate : S\$ 171.20 Per Day (Including GST)  
Reference No : SLF2601D

AMOUNT : S\$  
ONE THOUSAND THREE HUNDRED SIXTY-NINE  
DOLLARS AND CENT SIXTY ONLY

NON-TAXABLE VALUE : 0.00  
TAXABLE VALUE : 1,280.00  
GST 7% : 89.60

**TOTAL S\$ : 1,369.60**

Please make your cheques payable to : **CHAN'S & SONS ENTERPRISE**



For Official Use Only

Payment Date :	F / Amt
CS / CC / CH :	
CS / CC / CH :	

**RENTAL AGREEMENT**

202103-0040

Hirer's Name <b>Muham Bin Sathari</b>		Date of Birth <b>03.11.1960</b>	Passport/ Nric No. <b>S1439414A</b>	Nationality
Address <b>602 CHOR CHU KANG ST</b>		Occupation	Driving Licence No.	Date of Expiry
<b>62 #04-35</b>	Postal Code <b>680602</b>	Contact No.	Mobile Phone No. <b>97503643</b>	
Joint Hirer's / Guarantor's Name		Date of Birth	Passport/ Nric No.	Nationality
Address		Occupation	Driving Licence No.	Date of Expiry
	Postal Code	Contact No.	Mobile Phone No.	

**CHECK OUT**

Date <b>8.3.21</b>	Time <b>9.15a</b>	Mileage KM	E 1/4 1/2 3/4 F
Date <b>15.3.21</b>	Time <b>4.20pm</b>	Mileage KM	Remarks <b>LOPPAL</b>

**CHECK IN**

**IMPORTANT NOTES:-**

- Car is restricted to SINGAPORE use. See clause 1(f) for non-compliance.
- No refund will be given for vehicle that returns early.
- Own Damage Liability - First \$1500 for damage to vehicle plus loss of earnings while damaged vehicle is under repair.
- Third Party Liability - First \$2000 for any Third Party Accident Claim.
- Additional Excess of \$3000 for drivers under 24yrs old or above 70yrs and/or less than 2yrs driving experience.
- Hirer is responsible for all parking fines & traffic summons.
- Extension:- One day's advance notice is required otherwise no extension will be allowed.
- Vehicle should be returned at the same time as collection except on Saturday where return time is before 10am.
- Vehicle returned after office hour will be charged to the next working day.
- Hourly extension is charged at 1/5 of the daily rate.
- As preventive maintenance, please check water & engine oil daily.
- Please check that you have not left any of your personal belongings in the vehicle. Our company and staff will not be responsible for any loss of belongings after the vehicle is returned.
- For the comfort of other users, please refrain from smoking, eating or carrying of pets in the car. A cleaning charge of \$200 will be imposed for smoky, smelly or dirty vehicle.
- Carrying of PASSENGERS in commercial vehicle is strictly prohibited. Only WORKERS covered under hirer's workmen compensation are allowed.

	UNIT		RATE (\$)	TOTAL (\$)
RATE	8	@	160 + GST	1280
DISCOUNT				
GST @ 7%				89.60
TOTAL				1369.60
EXTENSION			AR2103-0207	
<div> <div>COCA</div> <div>SLF 2607 D</div> </div>				
DEPOSIT (refundable) S\$			MW	
CHANGED OVER FROM VEH.			DATE	

I/We have read and agree to the terms and conditions of the rental agreement above and as set overleaf.  
I/We declare that all information given on this form is true and accurate.

Hirer's Signature

Joint Hirer's/ Guarantor's Signature

for CHAN'S & SONS ENTERPRISE

VEHICLE NO. <b>Imp 3242 K</b>	MODEL
FROM	RETURN

\*Estimate Date. For actual return see CHECK IN

## INSURER ENQUIRY

**Find  
insurer**

Vehicle reg. no.

YP1124P

Date of Accident

15/02/2021 

Reset

% **RESULT & RECEIPT**

## TP Insurer Enquiry

Insurance ..... **Lonpac**Period of Insurance ..... **19/01/2021 - 18/01/2022**Requested By ..... **LU TING (CYCLE & CARRIAGE A...**Requested Date ..... **16/02/2021 14:58****Payment details**Request Amount: **S\$1.87**GST Amount: **S\$0.13**Total Amount Due (GST Inclusive): **S\$2****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**



## CYCLE &amp; CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Azman Bin Sahari  
 Period of Insurance : 19 Aug 2020 To 18 Aug 2021  
 Engine No. : 4B12RS2843  
 Chassis No. : JMYXTGF3WVGJ000808

Vehicle No. : SLF2601D  
 Policy No. : 2100479254-04  
 Endorsement No. :  
 Issued Date : 12 Aug 2020

## ABOUT THE COVER

Make/Model : MITSUBISHI OUTLANDER 2.4 CVT  
 Engine Capacity/Tonnage : 2,360.00 CC Sum Insured : Market Value First Year of Registration : 2016  
 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes  
 Person or Classes of Persons Entitled to Drive\* :

a) The Policyholder  
 b) Any other person who is driving on the Policyholder's order or with his/her permission.  
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Mileage Condition : Unlimited Mileage

Limitation as to use\* :

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

Loss of Use 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

## EXCESS

## Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

## Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Azman Bin Sahari - \$600 (Own Damage), \$600 (Flood Cover)

## APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
2. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64709688
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.sg](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

## IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500720792

CYCLE & CARRIAGE - ANNAL

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

AIGSGMOBILEAPP



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **414A**

Name: **AZMAN BIN SAHARI**

Birth Date: **03 Nov 1960**

Issue Date: **02 Jan 2003**

000077246A

**FOR C&C USE ONLY**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **414A**

**AZMAN BIN SAHARI**

عزمان بن سہاري

RACE: **MALAY**

Date of Birth: **03-11-1960** Sex: **M**

Country of Birth: **SINGAPORE**

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

CLASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 15 Jan 1981

Licence No: **414A**

NP 428A

**FOR C&C USE ONLY**

2111069

**414A**

Street Group: **O+** Date of issue: **09-06-1994**

AFT ELK 602 CHOA CHU KANG STREET 62 #04-35 SINGAPORE 680602

NRIC No: **414A** Date: **22-07-2003** No: **4753457**



Exceptional Journeys

To:  
Cycle & Carriage Automotive Pte Limited /  
209 Pandan Gardens,  
Singapore 609339

Attention: [Motor Claims Department]

Date: [16/02/2021]

**LETTER OF AUTHORIZATION TO ACT**

Dear Sirs,

1. I/We, the undersigned, am the registered owner of vehicle no. SLF2601D\_ (vehicle no.) (the "**Vehicle**").
2. As a result of a motor incident occurring on \_15/02/2021\_ (date and time of accident) on/along \_ TUAS AVE 2 \_ (location) between the Vehicle and \_\_YP1124P\_\_ (3<sup>rd</sup> party vehicle(s) number, if any) (the "**Accident**"), the Vehicle was damaged and has been sent in for repairs to be conducted at Cycle & Carriage's workshop.
3. I/We hereby authorize Cycle & Carriage to act for and on my/our behalf in respect of the following:
  - (a) to submit, make, settle and/or resolve any claims (the "**Claims**") which I/we may have against third party insurers and/or any other parties ("**Third Parties**") arising out of the Accident, in any manner as it deems fit;
  - (b) to receive payment from any Third Parties as settlement for the Claims (including accepting cheques made out in favour of Cycle & Carriage); and
  - (c) to generally do or cause to be done all acts or things (including signing any forms or documents or giving instructions to any Third Parties) which it deems necessary or expedient for the foregoing purposes.
4. In addition to the above, I/We hereby further authorize Cycle & Carriage, for and on our behalf, to **execute and sign any discharge vouchers, indemnity forms and/or any other forms or documents** in relation to or arising from the Claims.

For the avoidance of doubt, all payments towards settlement of the Claims should be made in favour of Cycle & Carriage.





Exceptional Journeys

5. I/We further acknowledge and recognize that any settlement which Cycle & Carriage may make for and on my/our behalf in respect of any Claims may be on a without prejudice basis and without any admission of liability in so far as any other Third Parties are concerned.

Thank you.

Yours faithfully,

---

Name: Azman Bin Sahari  
NRIC / Passport No. / Company Registration No.:414A

## 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	16/02/2021 13:33 (SGT)
Date of Accident	15/02/2021 17:00 (SGT)
Exact Location of Accident	Tuas Ave 2, Singapore
Additional Location Information	TUAS AVE 2
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF2601D
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AZMAN BIN SAHARI
NRIC No	SXXXX414A
Email Address	mrwiseman03@yahoo.com.sg
Mobile Phone No	(Phone) +65-97503643
Alternative Phone No	+65-97503643

#### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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?	No - Claiming third party
Vehicle Category	Private car

#### INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100479254
Cover Note Number	-

#### DRIVER

Name of Driver	AZMAN BIN SAHARI
NRIC No	SXXXX414A
Date Of Birth	03/11/1960
Occupation	Indoor



Date Of Driving Pass	15/01/1981
Driving experience	40 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97503643
Alt. Phone Number	+65-97503643
Email Address	mrwiseman03@yahoo.com.sg
Address	BLK 602 CHOA CHU KANG STREET 62 #04-35
Address complement	-
Postcode	680602
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	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 ATTACHMENT

#### 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	YP1124P
Vehicle Manufacturer	Mitsubishi
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Goods vehicle
Name of Driver	RAMACHANDRAN YOHARAJA
Contact Number	(Phone) +65-94471720
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.
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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)

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' 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.

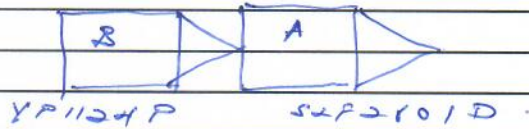
Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel

### Sketch Plan

## Describe Circumstances of the Accident



At 1700 hrs heading to Pass Ave → traffic light from amber to red so i stop at the junction.


All of sudden incoming lorry hit my car rear side (tailgate) stop and out of car to check that there is a dent on rear tail door.


Exchange particulars & capture photos of dent area. Since the lorry is park to side of road to discuss and spread of self settle.

## Declaration

We declare the foregoing particulars are true in every respect.

 16 Feb 21  
Policyholder's Signature / Date & Time

 16/02/2021  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel