

Our ref: EF2211D  
Your ref: \_\_\_\_\_

**Direct Settlement**

Date: 21 APR 2021

To: Indic International Insurance

Singapore 049711

Attn: Motor Claims Department

Re: **Accident Involving Motor Vehicle Nos.** EF2211D & SLT49655  
**At/Along** 35D Cambridge Rd **On** 04/03/21 **@** 18:05

I am the owner of vehicle no. EF2211D that was involved in an accident with your insured vehicle no. SLT49655 of the above accident.

As the accident was caused by your insured negligent/inconsiderate driving, thus I am claiming from you for the following: -

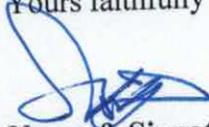
1. Cost of Repairs	\$ <u>5,298.77</u>
2. Loss of Use/ Rental ( <u>7</u> days @ \$ <u>100</u> per day)	\$ <u>749</u>
3. LTA/GIA Search Fee	\$ <u>7.45</u>
4. GIA Report Fee	\$ _____
5. Others	\$ _____
<b>Total:</b>	<b>\$ <u>6,055.22</u></b>

I hereby give you fourteen (14) days to comply with the above, failing which, I shall instruct my solicitor to commence legal action against you. If you have any queries, please contact the representative of **CYCLE & CARRIAGE INDUSTRIES PTE LTD** at Telephone No: **67714377 (Mr Alan Quek) / 67714304 (Ms Amanda Ang)**.

**I hereby give full authority to CYCLE & CARRIAGE INDUSTRIES PTE LTD and their representative to negotiate/comprise settlement of the above claim on my behalf.**

Your co-operation and immediate attention to the above is greatly appreciated. I hereby look forward to hearing from you soon.

Yours faithfully



**Name & Signature**

Address: C/o. 188 Pandan Loop Singapore 128378  
Cc: Mr Alan Quek/ Ms Amanda Ang  
E-mail: [alan.quek@cyclecarriage.com.sg](mailto:alan.quek@cyclecarriage.com.sg) / [amanda.ang@cyclecarriage.com.sg](mailto:amanda.ang@cyclecarriage.com.sg)  
Fax No. 67795383



Mercedes-Benz

Cycle & Carriage  
Industries Pte Limited  
Authorised Dealer  
Company No. 196400367W  
GST Reg No. MR-8500111-X

TAX INVOICE

Invoice Name & Address	Owner Name & Vehicle Info
INDIA INTERNATIONAL INSURANCE P/L	Cust No/Name WCV24970/Yee Poh Hin
ATTN: MOTOR CLAIM DEPARTMENT	Reg No/Reg Date EF2211D / 03/05/2016
64 CECIL STREET	Date In/Mileage 11/03/2021/ 36424
#04/#05 IOB BUILDING	Chassis No WDD2050402R160118
SINGAPORE 049711	Engine No 27491030584371
Contact No 63476100	Make/Model MB/MB C 180 SEDAN (W205) "EXCLUSIVE / EX
	Colour/Trim 021 197 Obsidian Bl/ 041 101 ARTICO Blac



Account No	Terms	Date/Time Printed	CSE	Operator	WIP No	Invoice/Credit Note No
WI000576	Credit	29/03/2021/ 21:57	AQ	305 / Alan Quek Ai Lun	48761	28170784

Description of Goods / Services	Qty	Unit Price S\$	Amount S\$
M BPNSUN POLICY NO/ACC DATE :21004625203 // 04-03-2021 DRIVE IN:05-03-2021 // TP CAR NO:SLT4965S (INDIA INTERNATIONAL INS) DATE IN/DATE SURVEY:11-03-2021 // LKK RASUL BY/AUTHORIZED ON :PRIYA MANIVEL // 10-03-2021			F.O.C.
A BPILAB USE XENTRY TO CHECK CONTROL UNITS & RESET MEMORY TO STANDARD SETTINGS.NETT			380.00
S BPNSUB LABOUR TO REMOVE AND INSTALL 1PC TYRE FROM RIM			60.00
A BPILAB INSPECT & CONDUCT WHEEL ALIGNMENT.NETT			540.00
A BPILAB REMOVE,REPAIR & INSTALL SUPPORT ASSY FROM VEHICLE FRAME.			1440.00
A BPIRES RESPRAY REAR LEFT DOOR, REAR LEFT FENDER, REAR BUMPER & LEFT WING MIRROR HOUSING	1.00	582.12	1950.00
X LH/R DISC WHEEL			582.12

Guarantee Your Warranty, Maintain with Cycle & Carriage!

Parts	582.12		Nett	4,952.12
Labour	4,310.00	7% GST on	4952.12	346.65
Standard Menu	0.00		Total Payable	5,298.77
Specialist Job	60.00		Paid	0.00
Diagnostics Job	0.00		Total Due	5,298.77
Sundry/Others	0.00			
Total(w/o GST)	4,952.12			

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.

Pandan Loop Service Center  
188 Pandan Loop  
Singapore 128378  
Tel: 6777 8388  
Fax: 6779 5383  
www.mercedes-benz.com.sg

# FLEXI-DRIVE ENTERPRISE

EF2211D

Blk 8 Kaki Bukit Avenue 4 Premier@kaki bukit gate 2 #06-33 lobby C Singapore 415875

Tel: (65) 6292 5455 Fax: (65) 6292 2866 e-mail: sales@wellscope.com.sg

H/Phone : 9667 5455 (24 Hrs)

## INVOICE

RA : 09445

ALAN

V. A. No.	Vehicle Regn. No. <b>SMK 7128H</b>	Model Type <b>Mazda 3</b>	Renting Location <b>188 Pandan Loop CCL</b>
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Reference <b>\$ 107 p/day 7 Day</b> per Day \$                      per per Week \$                      per per Month Cts                      per Kilometre	Agreed Return Date	5 Hours = 1 Day Rental (1 Day Rental ÷ 5 = 1 Hour Extension)
	KM In	Time / Date In <b>18 MAR 21 13:45PM</b>
	KM Out	Time / Date Out <b>11/03/21 11:20am</b>
	KM Drvn	Total / Time Chargeable

Hirer's Name <b>Mr Yee Poh Hin</b> Address <b>35D Cambridge Road</b> <b>Suite 219739</b> I/C No. <b>50401860E</b>	Rental Charges Total <b>7</b> Days Rental <b>\$107 p/day 7 Day</b>
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Reference Contact Tel. No. <b>96333600</b>	Driver's Name <b>AS ABOVE</b> Passport / IC No. / Country
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Driving Licence No.                      Expiry                      Issued by	Address
--	---------

Additional Driver Tel. No. (Home)	Petrol Out    E 1/4 1/2 3/4 F                      Petrol In    E 1/4 1/2 3/4 F
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Address Passport / IC No. / Country	Outstanding Petrol will charge in every 1/4, 1/2, 3/4, F @\$ _____ per 1/4
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Driving Licence No.                      Expiry                      Issued by	Sub-Total
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Method of Payment <b>Bill to: CYCLE &amp; CARRIAGE LTD</b> <b>171A PIE LND</b> <b>188 PANDAN LOOP</b>	Grand Total <b>\$749.00</b>
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Prepayment Received \$	By: (Name in Block Letters)                      CASH                      CHEQUE
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Amount Due / Refundable	Refund Received \$ _____ by receiver X
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Out by <b>Dr.</b>	In by <b>Dr.</b>
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Hirer's Signature / Company Stamp <b>X</b>	Remarks
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NB: Please notify our office should there be any accident involving this hired vehicle as soon as possible.

Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 05 Mar 2021 / 13:37:53

Receipt Date/Time : 05 Mar 2021 / 13:37:51

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-210305-001906

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SLT4965S As at 04 Mar 2021/18:05:00 Insurance Co: INDIA INT'L INS PTE LTD Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD				
1	Insurance Enquiry - SLT4965S Enquiry Fee 20210305133625647850	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				0.04
<b>Total Amount Payable</b>				7.45
Paid By				
	542550XXXXXX1699		eNETS Credit Card	7.45
<b>Total</b>				7.45
Cash Change				0.00
<b>Tendered Amount</b>				7.45
<b>Excess Refundable Amount</b>				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 ..... 05/03/2021 13:07 (SGT)  
Date of Accident ..... 04/03/2021 18:05 (SGT)  
Exact Location of Accident ..... 35D Cambridge Rd, Singapore 219739  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... EF2211D

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... Yee Poh Hin  
NRIC No ..... SXXXX860E  
Email Address ..... andrewyee35@gmail.com  
Mobile Phone No ..... (Phone) +65-96333600  
Alternative Phone No ..... (Home) +65-9633360

### VEHICLE PARTICULARS

Manufacturer ..... Mercedes  
Model ..... C180  
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 ..... 21004625203  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... Yee Poh Hin  
NRIC No ..... SXXXX860E  
Date Of Birth ..... 18/10/1949  
Occupation ..... Indoor

Date Of Driving Pass .....	26/12/1969
Driving experience .....	51 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96333600
Alt. Phone Number .....	(Home) +65-9633360
Email Address .....	andrewyee35@gmail.com
Address .....	35D Cambridge Road
Address complement .....	-
Postcode .....	219739
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 .....	Hit and run / Vandalism / Damaged whilst parked
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) .....	0
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 SKETCHPLAN

#### 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 .....	SLT4965S
Vehicle Manufacturer .....	Mazda
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	CHUA BOON TAT
NRIC No .....	SXXXX080D
Contact Number .....	(Phone) +65-91738559
Address .....	-
Address complement .....	-
Postcode .....	-

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

**WITNESS DETAILS**

WITNESS 1

Name ..... MS ELISA  
Phone ..... (Phone) +65-84483730  
Email ..... -

## 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 lodgment 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.

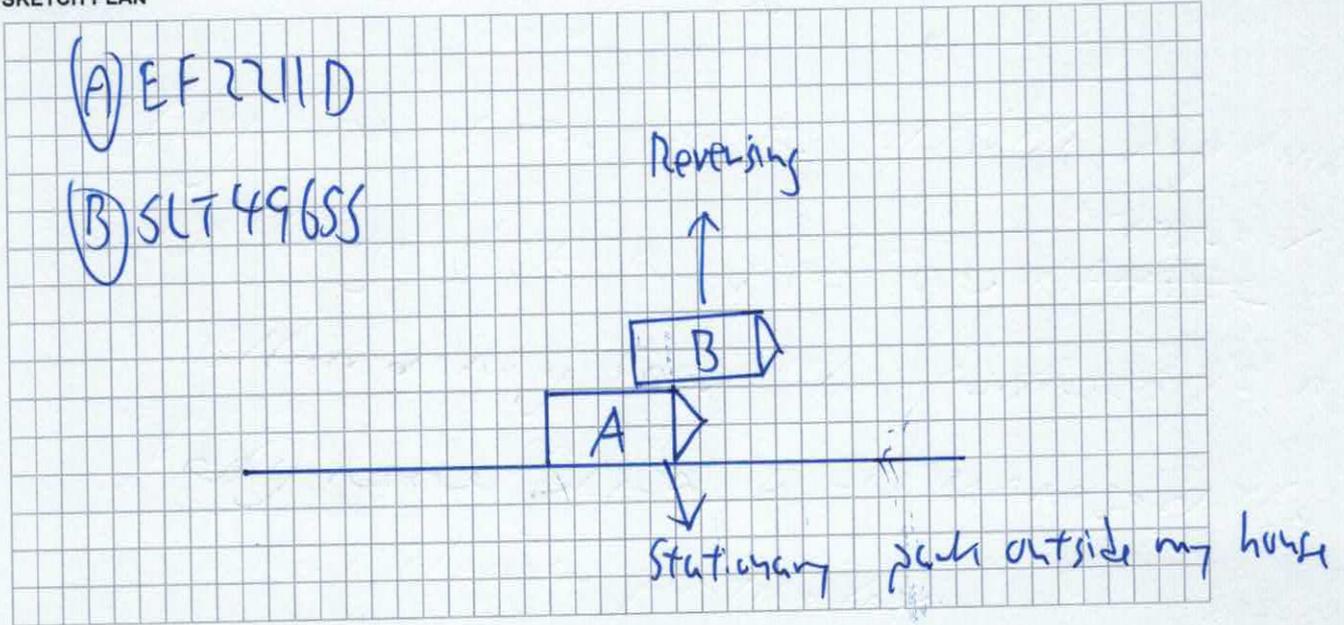


Policyholder's Signature  
Date & Time

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

  
Reporting Centre Personnel's  
Name: Alan Quah

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

my car was park outside my house  
 the lady who book a grab car reverse  
 & collided my car, the witness is  
 a lady name elisa & she managed to  
 get the driver particular & told me  
 to obtain his insurance.  
 I had an in car camera footage.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

  
 Policyholder's Signature  
 Date & Time

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

 05/03/21  
 Reporting Centre Personnel's  
 Name: Alan Quirk

# CERTIFICATE OF INSURANCE

## MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : Yee Poh Hin  
Period of Insurance : 03 May 2020 To 02 May 2021  
Engine No. : 27491030584371  
Chassis No. : WDD2050402R160118

Vehicle No. : EF2211D  
Policy No. : 2100462503-04  
Endorsement No. :  
Issued Date : 13 Apr 2020

### ABOUT THE COVER

Make/Model : MERCEDES BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE  
Engine Capacity/Tonnage : 1,595.00 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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 30 years old and above

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 road-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 2000cc

\* 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 - \$1300 Theft - \$0 Flood Cover - \$1300

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Yee Poh Hin - \$1300 (Own Damage), \$1300 (Flood Cover)

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

Cycle & Carriage Eunoo Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818  
Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

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: Daimler Financial Services Africa & Asia Pacific Ltd

I/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).

0504380210  
CYCLE & CARRIAGE - CHRISL

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

1003192547/AC

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S0401860E**

Name: **YEE POH HIN**

Birth Date: **18 Oct 1949**

Issue Date: **17 Nov 2003**



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

	PASS DATE
Class 2B Motorcycles $\leq$ 200 CC	26 Jan 1970
Class 2A Motorcycles between 201 CC and 400 CC	26 Jan 1970
Class 2 Motorcycles $>$ 400 CC	26 Jan 1970
Class 3 Motor cars $\leq$ 3000 kg with $\leq$ 7 passengers, exclusive of the driver; and motor tractors/vehicles $\leq$ 2500 kg	26 Dec 1969

S0401860E

S/No. 9000195420

NP 428A

