

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

0 5 JUN 2021

Accident involving my vehicle numberSLQ_	,	
GBE 4392S on06/03/2021 at	19:45	_ HOURS at/along
Junction of Upper Changi Road North	n and Upper	Changi Road Eas
We refer to the above matter.		
Attached pleas find copies of the following for yo	our kind perusal	:
Vehicle Repair Cost / Excess	4	4 100.00
	*	, 1, 100, 00
Rental for 8 days x \$ 150.00 /day	\$	1 200.00
Loss of Use for days x \$/day	\$	-
LTA Search Fee / 3rd Party GIA Report	\$	7.45
Others	\$	-
	Total: d	
	Total: \$	5 307.45
Yours faithfully, REG.NO.		

Michelle

HP: 9856 4815

Michelle



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Email: ishareauto@gmail.com

## **Authorisation To Act**

I, Chua JinLai	("the third party claimant") of
BLK 188A Bedok North Street 4 # 14-66 Si	ingapore 461188
(address), owner of SLQ 1301Z	(vehicle no.)
(address), owner of SLQ 1201Z hereby authorise iShare Auto Pte. Lt	cd("the workshop"
to act for me with respect to my claim for rep	
loss of use ("claim") for my vehicle no	
damaged pursuant to the accident which occurr	
at/along Junction of Upper Changi Road Nort	th and Upper Changi Road East
(location) involving vehicle no/s GBE	4392S ("the accident")
I further hereby authorise the workshop to settle my all they deem it fit and the workshop is further authorised to of my claim with payment cheque/s being made in favour	o receive payment further to settlement
I further authorise the workshop to execute an vouchers/agreements regarding my/our claim/case for m	
I further acknowledge that any settlement the workshop prejudice and without admission of liability basis in so f me and/or the driver/owner/insurers of the other vehic concerned.	ar as any other claim (s) whatsoever by
Dated this $15$ day of $07$ (	month) 20 <u>21</u> (year)
	REG.NO. 170 (201939376R) D
Signed by "the third party claimant"	Signed by "the workshop"



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## **Letter of Authorisation & Indemnity**

Accident	involving motor vehicles no	SLQ 1201Z	andG	BE 43925	on 06	103/2	1021
at/along_	Junction of Upper	Changi Roa	d North	and Upper	Changi	Road	East
1.	1/We, the Owner of mo	ptor vehicle no		1201Z shop") to appoin			d authorise yor on my/our
	behalf to inspect my/our motor v the report of the independent su						
2	you the sum of \$ being	g refundable deposi	of the repair to	my/our said veh	nicle.		
2.	You are further authorised to app made and instructions are given by						
2	his insurers including if necessary						
3.	You have my/our full authorisation the third party and/or his insurers			truct my/our sol	icitors to neg	otiate a se	ttlement with
4.	My/Our solicitors shall also accep party claim directly to you after d	ot this as my/our irre	vocable authori		mpensation m	onies from	n my/our third
5.	Upon resolving my/our claim, you	ou are also hereby	authorised to	agree with my/c			
	professional costs and disburser balance of the settlement sum or				o receive and	d make pa	yment of the
6.	I/We undertake and agree to fu		51 1/5/2		cover my cla	im success	fully and also
	hereby consent and authorise yo	ou to instruct my/or	ir solicitors to c	ommence legal ¡			
7.	steps to recover the claim from the l/we also hereby instruct and au				nies received	from the	third party all
7.	outstanding balances that are stil						
8.	In the event that I/we am/are						· ·
	instructions on the accident matt I/we shall render my/our full co-c			attend Court hea	rings in conne	ection with	my/our claim,
9.	In the event that my/our claim a			surers is not succ	essful at any	stage of th	ne recovery of
	my/our claim procedure including	g court proceedings	, if any, and/or	cannot be procee	eded with and	d/or if any	Judgement or
	settlement is not honoured or sa less than the amount claimed by						
	bill and survey fees and any othe						
90000	costs and disbursements thereby	incurred on my/ou	r behalf or to pa	y you the differe	nce in amoun	t, as the ca	ase may be.
10.	I/we shall keep you informed of pay or receive any monies due to		es and/or sumn	nons that I may	receive due to	o this actio	on agreeing to
	pay or receive any monies due to	this claim.					
	Dated t	his da	y of	20 21	_		
	$\cap$ $\cap$						
	Cit	\			M		
	of vehicle owner						
	Chua JinLai			Witnes	ssed by :		
IC/UEN N	o: S8429511F			Y	nicheme		
(Company stamp, if applicable)							
Address :	BLK 188A Bedok No	orth					
Street	4#14-66 S (461188	)					
Tel:	9386 7121						



"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, Chuci JinLai ("the third party claimant")
of BLK 188A Bedok North Street 4 # 14-66 Singapore 461188 (address),
owner of SLQ 1201Z (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. SLQ 1201Z that was damaged pursuant to the
accident which occurred on
Upper Changi Road North and Upper Changi Road East (location)
involving vehicle no/s GBE 4392S
("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 day of (month) 20 (year)
Signed by "the third party claimant"  Signed by "the workshop"

## 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
05.06.2021	ISA202106-00100	\$LQ1201Z

## AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY #07-12 AIG BUILDING SINGAPORE 079120

Description	Am	nount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding	\$	4,100.00
to supply of spare parts, labour and spray painting charges		
Total	\$	4,100.00

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

# Rapid Rental Pte.Ltd.

8 Kaki Bukit Ave 4, #08-09 Premier@Kaki Bukit Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

ROC No.: 201627936K

TAX INVOICE

Invoice No. : DR2103-0396

Date : 24.03.21

Vehicle No. : **SMM9261G**Vehile Model: : HONDA SHUTTLE

To: CHUA JINLAI BLK 188A BEDOK NORTH STREET 4

#14-66

SINGAPORE 461188

DESCRIPTION	NO. OF DAYS	RATE	Α	MOUNT
RENTAL FROM 15/03/2021 - 23/03/2021 YOUR REF: SLQ1201Z	8 8	150.00	\$	1,200.00
		TOTAL	•	4 200 00
		TOTAL:	\$	1,200.00

Payment by cheque should be crossed and made payable to 'Rapid Rental Pte.Ltd.'

This is computer generated document.

No signature is required.

## RAPID RENTAL PTE. LTD.

8 KAKI BUKIT AVENUE 4 #08-09 PREMIER @ KAKI BUKIT SINGAPORE 415875

ROC:201627936K VRA NO: DR2103 - 0396

**VEHICLE RENTAL AGREEMENT** 

HIRER'S PARTICULARS		Hirer's Own Vehicle No: SLQ 1201Z					
Name (as in I/C):Chu	a JinLai		Loan Vehicle	No: SMA	197619		
NRIC/Passport No: <u>\$84295</u>			Make & Mode	el: Hovd	a Shuttle		
Address: BLK 188A Bec	dok North Age:			CHARGE	S	\$	cts
Street 4 # 14-66	S(	461188)	Daily	8 day @	\$ 15 <i>0</i> Per day	1200	_
Name & Address of Employe	er:		Weekly	day @	\$ Per week		
			Monthly	day @	\$ Per month		
Occupation:	Driving Exp:		Others				
Driving License No:	Passed Date:		CDWS/PAI				
D/L Type: Local/Int'l/Others	:		Delivery/Collect	ion Svc			
Tel: (H/P)	(O)						
DRIVER'	S PARTICULARS				SUB-TOTAL	1200	-
Name (as in I/C):			Petrol Level	OUT	E 1/4 1/2 3/4 F		
NRIC/Passport No:			& -				
Address:	Age:	1	Surcharge	IN	E 1/4 1/2 3/4 F		
Occupation:	Driving Exp:	J			TOTAL	1200	-
Driving License No:							
D/L Type: Local/Int'l/Others				恩			
Tel: (H/P)							
EXCESS : Section			' MO				MP
	(2) \$2,500.00			0			
Hiror's Signature:	– ————————————————————————————————————	r's Signatura:	INDICATE: A - Accidents D - Dents S - Scratches X - Crack				
Hirer's Signature:	Additional Hire	i s signature:				l	

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge voucher. All information I have been given RAPID RENTAL PTE. LTD. in connection with this agreement is true.

#### **IMPORTANT**

- 1. The Hirer and the authorized driver must be over 25 years of age and under 65 years of ages 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 Authorized Driver.
- 2. All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on lop of petrol surcharge is payable by the hirer should he fail to return the vehicle at line appropriate petrol level.
- 3. 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.
- 4. Use of the vehicle for illegal purpose (for instance: in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited.
- 5. Vehicle strictly for Singapore use only and may not driven out of Singapore without prior written consent of RAPID RENTAL PTE. LTD. The hirer is liable for a penalty fee of \$200 in additional to appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- 6. 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 its use or operation.
- 7. The hirer and/or driver shall be responsible for all claims, damages,

- losses, increased insurance premiums, non-waiver excess and cost expenses (including legal costs on full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to pay immediately in the event of an accident. The owner reserve the right not to replace an replacement vehicle if an accident occurred. Any damages to the car will be repair at RAPID RENTAL PTE. LTD. authorized workshop.
- 8. 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.
- 9. The Hirer agrees that a punctured tyre, empty petrol tank, lost of vehicle's key or locked keys inside of vehicle by itself, does not constitute a breakdown and that in event the owner's 24-Hours Emergency Services is called upon to respond to such occurrence, the Hirer shall bear cost of such responses at \$150 per trip.
- 10. In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24hours. 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.
- 11. The hirer and/or 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.
- 12. All customers' data will kept strictly confidential and is solely used for the purpose of completing the sales transaction and other relating matters.
- 13. I understand and agreed to personal data collection statement stated on the Term and Conditions page.

Date / Time OUT	Mileage	Check By	Remark	Λ
15/03/2021 1:45pm	30791			Hirer's/Driver Signature
Date / Time IN	Mileage	Check By	Remark	$\wedge$
23/03/2021 5:40pm	31367			Hirer's/Driver Signature

## > Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

10 Mar 2021 / 13:36:07

Receipt Date/Time: 10 Mar 2021 / 13:36:07

### Tax Invoice/Receipt

Receipt No.: ITNET-00000-210310-001984

Previous Receipt No.:

S/N (tem Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBE4392S As at 06 Mar 2021/19:45:00 Insurance Co: AIG ASIA PACIFIC INSURA	NCE PTE. LTD.	, ,	, ,	, ,
1 Insurance Enquiry - GBE4392S Enquiry Fee 20210310133523418348		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.

SKOK21380001 / KAH MOTOR CO SDN BHD [408610] ENTRY DATE & TIME: 08/03/2021 16:39 (SGT) SUBMITTED BY: YOU PO SOON VERSION: 1 (08/03/2021 16:39 (SGT))



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# 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 witholding 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 Date of Accident **Exact Location of Accident** 

itional Location Information

Country/State of Loss

08/03/2021 16:39 (SGT) 06/03/2021 19:45 (SGT)

Near 8 Upper Changi Rd N, Singapore 506906 JUNCTION OF UPPER CHANGI ROAD NORTH & UPPER

CHANGI ROAD EAST

Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLQ1201Z

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

No

**CHUA JINLAI** SXXXX511F

CHUAJINLAI@REP.GREATEASTERNFA.SG

(Phone) +65-93867121

+65-93867121

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

Honda Civic

Private use

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number Cover Note Number

Name of Driver NRIC No Date Of Birth

DRIVER

No

Liberty Insurance

Comprehensive

**CHUA JINLAI** SXXXX511F 21/09/1984

Occupation Indoor Date Of Driving Pass 18/07/2011 Driving experience 9 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-93867121 Alt. Phone Number +65-93867121 Email Address CHUAJINLAI@REP.GREATEASTERNFA.SG Address BLK 188A BEDOK NORTH STREET 4 Address complement #14-66 Postcode 461188 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 - Change/cross lane Weather Conditions Clear Road Surface Dry HER 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) 5 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name JANE WEE Gender Female PASSENGER 2 Name ABIGAIL CHUA Gender Female SENGER 3 Name ARINI Gender Female PASSENGER 4 Name **BETHANY CHUA** Gender Female 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 ATTACHED STATEMENT - THIRD PARTY DIRECT SETTLEMENT

ATTACHMENT(S)

Are accident photos available for attachment?

Yes

Was there any video captured by Car Camera? Was there any audio recorded?

Yes No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category 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)

GBE4392S

\_

-

Commercial vehicle

-

(Phone) +65-90494533

-

-

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-



Volumber 10017

#### SELECTION

#### BARORIANT NOTEL

All orders perfectly the detention the acceptable specifies the case parties.

- 4. This common the completed by the Policyholder and/or the Authorised Disser-
- 3 Information provided and he as truthful and accurate as possible. You status recorded and donce so to be by each material backs may also, insurance companies to repudiate policy liability.
- 4. The notice and acceptance of this form by evaluance companies is not at address and roday isolary variety spat of the meaning companies.
- Any false reporting may be referred to the Police for investigation
- 6. He report will be trawning a by the inspirer, of the total foreign. Management course establishing by the recensive security association of Singapore PulAl for archiving and that report of the report will be a term and leavent discourse upon a potential to inspire the parties.
- 7. We the lodgment of this report to the insurers, you hereby rememt to the archomig of this report at the centre, and to copies of the report being made available aforeraid.
- 8 Consent under the Personal Data Protection Act (PDPA) Fanderstand, acknowledge, agree and consent that
  - (4) My insure, my windedrop and the General Insurance As occation of segapose (IGIA ) may/fire permitted by each of use, shallow and/or process my personal data/permitted information returns to the lifetim and any other permitted in information provided by me or possessed by my insertion (so letter) the "Personal Information I and declose on the usuality as better shall information to all phase of ) who have immediately the restriction that inserting the permitted in the residence of the insertion of the permitted in the residence of the permitted in the following of Singapore and any relevant povernment agency/authority is consisting police), for the purpose(s) of
    - (ii) processing, handling analor dealing with my claims including the sixth case, fixing chains and my many my investigations relating to the claims.
    - (ii) investigating the academ middle my claims.
    - (hi) carrying out and/or dealing with my instructions or responding to any enquires 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 welf 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 GFA to their third party service providers or agents findling 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 complectams history for the purpose of traud detection, investigation and management in present and all fature claims.
  - (c) 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 povernment agencies as reasonable required to the purposes stated, or

(ii) for complying with requirements sinder any regulations, has see court order.

Logical Christian Logical Annual Communication of the Association of t

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Vehicle Number	(11017	"ALL FEEL DEALY
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Cape Change		A SUCTION
		By THEN Y WAR
DESCRIBE CIRCUM	STANCES OF THE ACCIDENT	

DECARATION

DECLARATION

Lyde declare the following partical means from membray in quan-

Enterplied to a constitution.

For each of the greature (Batherer as any Benefit of the State).

A Property

Consider the state of the second service of

Salar States

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# SLQ 1201 Z (Own & Shiller)







