CHOO MOTOR SPRAY PAINTER

1 Kaki Bukit Ave 6 #01-39 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

Date: 11.05.2021

India International Insurance Pte Ltd 64 Cecil Street #04-05 IOB Building Singapore 049711

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: SLQ 3535Y / GBB 7087U ON 01.05.2021

We are the authorized repair workshop for the owner of motor vehicle no: SLQ 3535Y , which was involved in the captioned accident with your insured vehicle no: GBB 7087U . The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

		\$ 5,407.45
3)	LTA Search Fee	\$ 7.45
2)	Loss of Rental	\$ 400.00
11.00	Cost of Repair	\$ 5,000.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

c) LTA Search Result

e) GIA Report

g) Insurance Certificate

b) Car Rental Invoice / Agreement

d) Letter of Authorisation, etc...

f) I/C & Driving License

h) Vehicle Registration Log Card

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Jason Tang (jason@fastechauto.com.sg)

For Choo Motor Spray Painter

TAX INVOICE

CHOO MOTOR SPRAY PAINTER

1 Kaki Bukit Ave 6 #01-39 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

India International Insurance Pte Ltd

64 Cecil Street #04-05 IOB Building Singapore 049711

Attn: Motor Claim Department

Tax Invoice: 22383

Date :11.05.2021 Vehicle No :SLQ 3535Y

Make/Model : TOYOTA CHR 1.8S

Chassis/Eng# :

Accident Date : 01.05.2021

Claim No

Reference : 0521 -22383

Policy No

Amount

To proceed on lump sum repair

S\$

5000.00

E. & O. E. Total: S\$ 5000.00

for CHOO MOTOR SPRAY PAINTER

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.
TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 21799

RENTER'S/DRIVER'S SIGNATURE

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Vehicle return during office hour only. No service on Public Holiday and Sunday.			of this Agreement.		DELIVERY FEE	807.10
Driver must be: a) 18 years old and above.		ce with spens perious of	COLLECTION FE			
The vehicle is strictly to be driven by the n	erron to whom it is his at a second	al driver named in the agreement. rered.				ew aut . A
COMPREHENSIVE COVERED EXCESS: *Section I - Used in S'pore Only: SGD 200 *Section II - Used in S'pore Only: SGD 150 *W/screen Excess in S'pore: SGD 100.00 THIRD PARTY COVERED EXCESS: *Hirer must bear all costs to the damages of	0.00 *Section I - Used Outside S'pore : SC	GD 3000.00	AGREES TO PAY ADD	FEE		Harris and
*Hirer must bear all costs to the damages of	of the return vahicle		X			
YOUNG AND INEXPERIENCE DRIVER Hirer or any authorised driver who is age 22		or possess				
COMPREHENSIVE COVERED EXCESS:	PREPAYMENT	16 /101	TOTAL CHARGE	uallaa		
*Section I - Used in S'pore Only: SGD 6000	.00 *Section II - Used Outside S'pore : SG	D 12.000.00	CHECK		DEPOSIT	Bioline Et
THIRD PARTY COVERED EXCESS:		D 100.00	CASH		memeen)	Vaion
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Hirer is responsible for any costs to the THIRD PARTY DAMAGE / INJURY claims.			AMOUNT DUE / REFU	ND.	A Agreement and are as a second of the secon	Alt Io
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DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: SHERMAN CHIN WEE KHEONG

Invoice

: DCR-2021-05-02

Date : 06.05.2021

Agreement No : 21799 Payment Terms: LOD

DESCRIPTION

AMOUNT

Rental charges for vehicle : SKZ 8286Y

(0521-22383)

400.00

Rental Period from 02.05.2021 to

06.05.2021

E. & O. E.

Total

\$

400.00

ASHLEY CHIA

for Dynamic Car Rental

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

03 May 2021 / 12:24:48

Receipt Date/Time: 03 May 2021 / 12:24:48

Tax Invoice/Receipt

Receipt No.: ITNET-00000-210503-001620

Previous Receipt No.:

S/N	Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at Insura 1	It of Insurance Enquiry - GBB7087U 01 May 2021/14:00:00 ance Co: INDIA INT'L INS PTE LTD Insurance Enquiry - GBB7087U Enquiry Fee 20210503122403389392		7.00	0.49	7.49
	20210000122400000002	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			
		20210503122411136	Direct Debit: eNETS Debit (Internet Banking)		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.

DATE : 02.05.2021 : India Inturnational Insurance Pte Ltd TO : ACCIDENT INVOLVING VEHICLE NO. SLQ 3535Y /GBB 7087U RE ALONG Ang Mo Kio Ave 05 Tourds Ang Mo Kio Ave + ON 01.05.2021 I/We, Sherman Chin Wee Kheong of (NRIC No./ROC No.) 87208626J of BIK 422 Pasiv Ris Drive 6 #12-139 S(510422)
owner of vehicle no. SLQ 3535Y in consideration of M/s CHOO MOTOR SPRAY PAINTER repairing my/our vehicle <u>\$10</u> 3535 y at my/our instruction and hereby authorise M/s CHOO MOTOR SPRAY PAINTER to demand claim settlement whatever amount settled/payable by the Insurance Company and/or third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use, etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and all claimed and/or settled shall belong to them absolutely. I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith. Signature of Owner: Sherman Chin Wee Khuong Name of Owner:

SV0L2153000E / VICOM LTD (VAC) - Kaki Bukit [415933] ENTRY DATE & TIME: 03/05/2021 17:38 (SGT) SUBMITTED BY: Siti Fadhlon Abdul Kader VERSION: 1 (03/05/2021 17:38 (SGT))



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 03/05/2021 17:38 (SGT) Date of Accident 01/05/2021 14:45 (SGT) Exact Location of Accident Singapore

Additional Location Information ANG MO KIO AVE 05 TWRDS ANG MO KIO AVE 4 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Private car

5092267989-03

No - Claiming third party

Vehicle Registration Number **SLQ3535Y**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SHERMAN CHIN WEE KHEONG NRIC No SXXXX626J **Email Address** lisa.72.sg@hotmail.com Mobile Phone No (Phone) +65-85222749 Alternative Phone No +65-85222749

VEHICLE PARTICULARS

Manufacturer Toyota Model TOYOTA / C-HR 1.8S HYBRID A 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 Transmission

Auto CC 1800

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number

Cover Note Number

DRIVER

Name of Driver LIM LISA NRIC No SXXXX075J

Date Of Birth 27/08/1972 Occupation Indoor Date Of Driving Pass 04/12/2002 Driving experience 18 YEARS AND 5 MONTHS Gender Female Mobile Number (Phone) +65-98339337 Alt. Phone Number Email Address lisa.72.sg@hotmail.com Address BLK 422 PASIR RIS DRIVE 6 #12-139 Address complement Postcode 510422 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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? Yes Reasons for not uploading a video of the accident WITH OWNER Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number GBB7087U Vehicle Manufacturer Nissan Vehicle Model NISSAN / URVAN PANEL LWB 3.0 5DR 4AT ABS AIRBAG Vehicle Variant Vehicle Colour

Commercial vehicle

Vehicle Category

Contact Number

Name of Driver

Address

Address complement	-
Postcode	-
Insurance Company Name	India International Insurance Pte Ltd
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 Formmust 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 aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that

(a) My insurer , my w orkshop 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.

IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@vicom.com.sq

Policyholder's Signature / Date &

R-6BB 70874

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

Sketch Plan

Witnessed by Reporting Centre Personnel,

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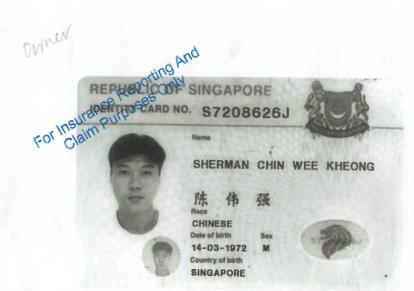
Declaration

We declare the foregoing particulars are true in every respect.

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

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

Witnessed by Reporting Centre Personnel 0.3 MAY 2021





Por Insurance Reporting And Williams Prof. Insurance Reporting Prof. I REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Number: S 7 2 3 0 0 7 5 J. Birth Date: 27 Aug 1972 Issue Date: 06 Dec 2003 LIM LISA 001033631K 14

FOI MENIAM Class 3 Motor Cens and 18

Licence No: S7230075J

JARAS.

NP 428A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7230075J

LIM LISA

Race
CHINESE
Date of Buth
27-08-1972
Country of Buth
SINGAPORE
FOURTH PRUTPOSES

For Insurance Reporting And
Claim Purposes Onth
Neights S7230075J
Address
Address
Address
Apr BLK 422 PASIR RIS DRIVE 6
#12-139
SINGAPORE 510422



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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5092267989-03

Cover: drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SLQ3535Y

Chassis Number

: ZYX102009174

2. Name of Policyholder

: SHERMAN CHIN WEE KHEONG

3. Effective Date of Insurance

4. Expiry Date of Insurance

: 05 Jul 2020

: 04 Jul 2021

5. Persons 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.

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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

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

EXCESS (SECTION 1)

: S\$600

EXCESS (SECTION 2)

: N/A

WINDSCREEN EXCESS ADDITIONAL EXCESS

: S\$100

UNNAMED DRIVER EXCESS

: N/A : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP

: NO

INSURE WITH COE

: YES

NCD PROTECTION

: NO

TRANSPORT ALLOWANCE

EXCESS WAIVER

: NO : NO

PRIMARY DRIVER

: SHERMAN CHIN WEE KHEONG

: LIM LISA

NAMED DRIVER (1)

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: INDEX CREDIT PTE LTD

SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 (Malaysia)

Agency

: INDEX AGENCY PTE LTD (00000572017)

Date of Issue

: 10 Jun 2020 13:06 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	626J	
Vehicle No.:	SLQ3535Y	
Vehicle to be Exported:	No	
Intended Deregistration Date:	03 May 2021	
Vehicle Make:	TOYOTA	
Vehicle Model:	C-HR 1.8S HYBRID A	
Primary Colour:	Silver	
Manufacturing Year:	2017	
Engine No.:	2ZR8024377	
Chassis No.:	ZYX102009174	
Maximum Power Output:	90.0 kW (120 bhp)	
Open Market Value:	\$27,188.00	
Original Registration Date:	05 Jul 2017	
First Registration Date:	05 Jul 2017	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	04 Jul 2027	
PARF Rebate Amount: Intended COE Rebate Details	\$3,750.00	
COE Expiry Date:	04 Jul 2027	
COE Category:	E - Open - all except motorcycle	
COE Period(Years):	10	
QP Paid:	\$50,526.00	
COE Rebate Amount:	\$30,914.00	
Total Rebate Amount:	\$34,664.00	

The information contained herein is correct as at 03 May 2021