



WITHOUT PREJUDICE

Our Ref: SMN 9069R

Your Ref: SMF 3028R

10th July 2021

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AIG Asia Pacific Insurance Pte Ltd

Dear Hsiao Tong,

Accident Involving: SMN 9069R and SMF 3028R

Date of Accident: 4 Jun 2021

Location of Accident: Along Woodlands Ave 1

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair Inc. GST	\$ 5,530.17	\$5168.38 COR + \$361.79 GST 7%
Add Loss of Rental	\$ 1,540.80	12 Days : Inv#A43187 ACTUAL: 13 DAYS - 2+2 Days PRS (4/5-Sat/6-Sun/7 Jun) + 8 Repair Days Agreed (8/9/10/11/12/14/15/16 Jun) + 1 Sunday (13 Jun)
Total	\$ 7,070.97	
Add LTA Search Fee	\$ 7.45	
GRAND TOTAL	\$ 7,078.42	

Kindly pay the Grand Total Amount of **\$7,078.42** to:

Team AutoPro Pte Ltd
160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautooffice@gmail.com

Thank you.



Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

Tel: 6258-1955 Fax: 6258-1956 Email: teamautooffice@gmail.com / teamautopl@gmail.com

PROFORMA INVOICE

**ATTENTION:**

Quek Keng Chuang

PI Number	P2107-2275
PI Date	10-Jul-2021
Vehicle No.	SMN 9069R
Accident Date	4-Jun-2021

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SMN 9069R	COR Lump Sum		\$ 5,168.38

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$	5,168.38
GST 7%	\$	361.79
GRAND TOTAL AMOUNT	\$	5,530.17

Authorized Signature



TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO.
C/O TEAM AUTOPRO PTE LTD QUEK KENG CHUANG BLK 156 RIVERVALE CRESCENT #09-152 SINGAPORE 540156

DATE	INVOICE NO.
21/6/2021	A 43187

	VHA NO.	DUE DATE	VEH NO.
	A 43187	21/6/2021	SLQ 5934 R
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 04 JUNE 2021 TO 16 JUNE 2021 (T. ALTIS) YOUR REF: SMN 9069 R	12	120.00	1,440.00
Account Name: BKW RENT A CAR PTE LTD Account No: 118-312-9991 Paynow UEN: 200106276D Bank: UNITED OVERSEAS BANK LTD (UOB) Branch: UOB Shaw Centre Branch Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG All cheques must be made payable to BKW RENT A CAR PTE LTD. *Please indicate the invoice number and vehicle number in the reference.	Subtotal	\$1,440.00	
	GST @ 7%	\$100.80	
	TOTAL	\$1,540.80	

VEHICLE HIRING AGREEMENT

Workshop: Team pro

HIRER'S PARTICULARS

Name (as in I/C) QUEK KENG CHUAN
NRIC/Passport No: [REDACTED] Date of Birth: 15/7/1952
Address: BLK 156 RIVERVALE Age: 54
CRESCENT #09-152 S(540156)

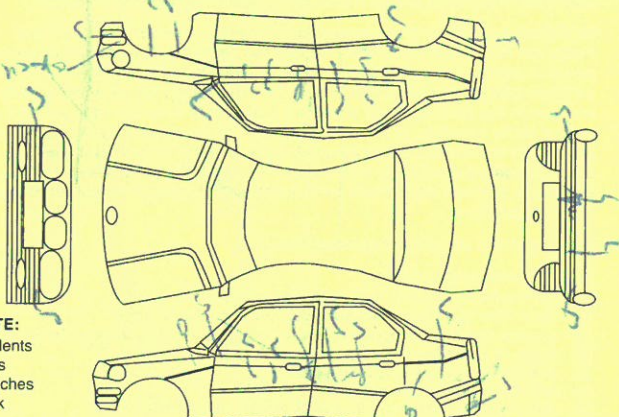
Name & Address of Employer

Occupation [REDACTED] Driving Exp: [REDACTED]
Driving Licence No: [REDACTED] Passed Date: [REDACTED]
D/L Type: Local/Int'l/Others:

DRIVER'S PARTICULARS

Name (as in I/C) QUEK WEI LIANG BENJAMIN
NRIC/Passport No: [REDACTED] Date of Birth: 15/11/1990
Address: BLK 156 RIVERVALE Age: 28
CRESCENT #09-152 S(540156)

Occupation [REDACTED] Driving Exp: [REDACTED] Yrs 14/8/2019
Driving Licence No: [REDACTED] Passed / Expiry Date: 14/8/2019
D/L Type: Local/Int'l/Others: [REDACTED] Contact No: [REDACTED]



I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card 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/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 70 years 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.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$10 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- 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.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- 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.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

Hirer's Own Vehicle No: <u>SMN9069R</u> Replace Veh No:	
Loan Vehicle No: <u>SLQ 5834R</u>	VR No:
Make & Model: <u>T. Altis</u>	Auto/Manual Group:
CHARGES : \$ cts	
Daily <u>12</u> day @ \$ <u>120</u>	Per day <u>\$1440</u>
Weekly/Monthly week @ \$	Per week/Monthly
Others	
CDW/PAI @ \$	Per day/Monthly
Delivery/Collection Svc	
GST <u>7%</u> <u>\$100</u> <u>80</u>	
OR No: <u>1/4</u>	(A) SUB-TOTAL <u>\$1540</u> <u>80</u>
Petrol Level & Surcharge	OUT IN
First <u>100</u> km FREE per day	GST
Excess mileage is chargeable at <u>10</u> cents per km	TOTAL CHARGES

NON WAIVER EXCESS (Subject to GST): \$ 5000

ACCESSORIES CHECK

- ☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge
☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre

Hirer's Signature : [Signature] Additional Driver's Signature : [Signature]

SINGAPORE Use Only

Date Out	Time Out	Mileage	Check By	Remarks
<u>4/6/21</u>	<u>19:00</u>	<u>71906</u>	<u>[Signature]</u>	

Hirer's/Driver Signature

Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"

Date In	Time In	Mileage	Check By	Remarks
<u>16/06/21</u>	<u>18:15</u>	<u>72228</u>	<u>[Signature]</u>	

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 : 04 Jun 2021 / 11:36:50

Receipt Date/Time : 04 Jun 2021 / 11:36:50

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210604-001242

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 - SMF3028R				
As at 04 Jun 2021/08:35:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SMF3028R			
	Enquiry Fee	7.00	0.49	7.49
	20210604113610803287			
	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				
	426569XXXXXX8100	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.

To : **Team AutoPro Pte Ltd**
CRN : **201811621K**
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

Letter of Authorization & Undertaking

In Respect of Accident Involving my/our Vehicle No.: SMN 9069 R
and SMF 3028 R and
and and
@ Along Woodlands Avenue 1
dated 04/06/2021

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and/or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,

Owner x 

Claimant Signature & Co's Stamp (if applicable)

Date: 4/6/21

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	05/06/2021 12:40 (SGT)
Date of Accident	04/06/2021 08:35 (SGT)
Exact Location of Accident	Woodlands Ave 1, Singapore
Additional Location Information	along Woodlands Ave 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN9069R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Quek Keng Chuang
NRIC No	SXXXX938I
Email Address	benjaminquek90@gmail.com
Mobile Phone No	(Phone) +65-91171083
Alternative Phone No	(Home) +65-91171083

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1317

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA494726/1
Cover Note Number	-

DRIVER

Name of Driver	Quek Wei Liang Benjamin
NRIC No	SXXXX953A

Date Of Birth	15/11/1990
Occupation	Indoor
Date Of Driving Pass	14/08/2019
Driving experience	1 YEAR AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91171083
Alt. Phone Number	-
Email Address	benjaminquek90@gmail.com
Address	Blk 156 Rivervale Crescent #09-152
Address complement	-
Postcode	540156
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	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 report.

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	SMF3028R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Liang Xiu hao
NRIC No	SXXXX622H
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 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")

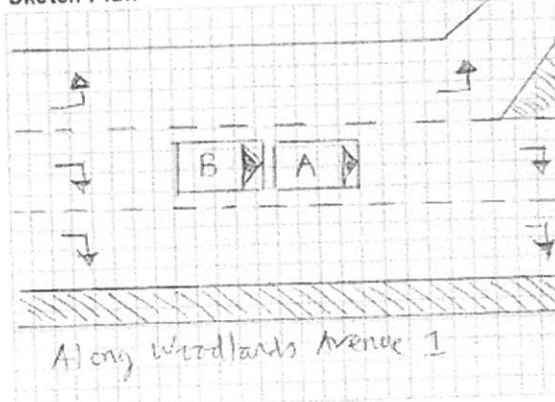
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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

Witnessed by Reporting Centre Personnel

Sketch Plan



+ Vehicle A -> SMN 9069 R
+ Vehicle B -> SMF 3028 R

Describe Circumstances of the Accident

On the stated date and time, I was travelling along the stated
 Venue. While I was stationary when waiting for the traffic light to
 turn 'green', suddenly vehicle B collided to the rear of my vehicle.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
 Time

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

Witnessed by Reporting Centre
 Personnel



redefining / insurance

AXA Insurance Pte Ltd
 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

account number
 14278

-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)

Policy details

Policyholder name	QUEK KENG CHUANG	Certificate number	GA494726 / 1
Cover	Comprehensive	Chassis number	GK31343757
Plan name	Flexi	Engine number	L13B1452071
NCD applicable	10%		
Vehicle registration number	SMN9069R		
Period of Insurance	from 30/08/2020 to 29/08/2021 (both dates inclusive)		
Finance loan company	MAYBANK		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) 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.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, 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; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* 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 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 700.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd


Authorised signature

Important note


Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

0250246



NRIC No. **S00969381**




Blood Group **B+** Date of issue **13-02-1992**


APT BLK 156 RIVERVALE CRESCENT #09-152
SINGAPORE 540156

NRIC No: **S00969381** Date: **13-12-2005** No: **5215514**

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S00969381




Name
QUEK KENG CHUANG



Race
CHINESE

Date of Birth **15-07-1952** Sex **M**

Country of Birth
SINGAPORE



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

Class 3A Motor cars without clutch pedals (Auto) with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight \leq 2500kg

EFFECTIVE DATE

14 Aug 2019



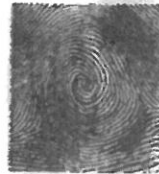
Licence No: S9042953A

NP 428A



3797410

NRIC No. S9042953A



Date of issue
17-11-2005

Address

APT BLK 156 RIVERVALE CRESCENT
#09-152
SINGAPORE 540156

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S9042953A

Name: QUEK WEI LIANG, BENJAMIN

Birth Date: 15 Nov 1990

Issue Date: 14 Aug 2019

002965667E

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9042953A



Name

QUEK WEI LIANG, BENJAMIN

郭威良

Race
CHINESE

Date of birth
15-11-1990

Sex
M

Country of birth
SINGAPORE

S9042953A