

WITHOUT PREJUDICE

Our Ref: SKT 4029G Your Ref: GBF 6110X

22nd July 2021

ATTN:

LKK Auto Consultants Pte Ltd

INSURER:

LonPac Insurance Bhd

Dear Hsiao Tong,

Accident Involving: SKT 4029G and GBF 6110X

Date of Accident:

18 June 2021

Location of Accident: Yio Chu Kang before Serangoon North Ave 1

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

GRAND TOTAL	\$ 7,667.95	
Add LTA Search Fee	\$ 7.45	
Total	\$ 7,660.50	
Add Loss of Use	\$ 1,080.00	9 Days: 2+1 Days PRS (19-Sat/20-Sun/21 Jun) +1 Day Resurvey (22 Jun) +5 Repair Days Agreed +1 Sunday
ost of Repair Inc. GST	\$ 6,580.50	\$6150 COR Agreed + \$430.50 GST

Kindly pay the Grand Total Amount of \$7,667.95 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: teamautoffice@gmail.com

Thank you,

Regards Adel (Ms)



PROFORMA INVOICE AUT

Ow Xing Yee

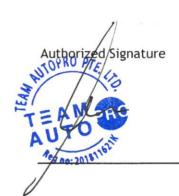
PI Number	P2107-2299
PI Date	22-Jul-2021
Vehicle No.	SKT 4029G
Accident Date	18-Jun-2021

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SKT 4029G	COR Lum	p Sum	\$ 6,150.00

Notes:

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

Total Amount	\$ 6,150.00
GST 7%	\$ 430.50
GRAND TOTAL AMOUNT	\$ 6,580.50



> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

19 Jun 2021 / 12:19:14

Receipt Date/Time: 19 Jun 2021 / 12:19:14

Tax Invoice/Receipt

Receipt No.: ITNET-00000-210619-000924

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 - GBF6110X As at 18 Jun 2021/18:30:00 Insurance Co: LONPAC INSURANCE BHD Insurance Enquiry - GBF6110X				
Enquiry Fee 20210619121313725306		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			
	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.:	SKT 4029 G
and		GB	F6110X (В)		and		SBS8681H (C)
and						and		
@ _	YIO CH	U KA	ANG BEF	ORE SER	ANGOO	N NORT	'H AVE	<u> </u>
date	ed 18/06	6/202	21					

- 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,

Chen The Comment of t
Claimant Signature & Co's Stamp (if applicable)
Date:

SC1R216J0002 / City Auto Pte Ltd ENTRY DATE & TIME: 19/06/2021 12:10 (SGT) SUBMITTED BY: Jason Quak VERSION: 1 (19/06/2021 12:10 (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 19/06/2021 12:10 (SGT) Date of Accident 18/06/2021 18:30 (SGT) **Exact Location of Accident** Singapore Additional Location Information YIO CHU KANG BEFORE SERANGOON NORTH AVE 1 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKT4029G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner OW XING YEE (OU XINYI) NRIC No SXXXX563A **Email Address** xingyee@yahoo.com.sg Mobile Phone No (Phone) +65-98267781 Alternative Phone No +65-98267781

VEHICLE PARTICULARS

Manufacturer Mercedes Model A180 Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to your vehicle?

No - Claiming third party Vehicle Category Private car Transmission Auto CC 1595

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number SP2000332718-01 Cover Note Number

DRIVER

Name of Driver OW XING YEE (OU XINYI) NRIC No SXXXX563A



Date Of Birth 26/11/1982 Occupation Indoor Date Of Driving Pass 15/05/2008 Driving experience 13 YEARS AND 1 MONTH

Gender

Female Mobile Number (Phone) +65-98267781

Alt. Phone Number +65-98267781 **Email Address** xingvee@vahoo.com.sq

Address APT BLK 130 BEDOK NORTH STREET 2 #11-63

Address complement Postcode

460130 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 Chain Collision

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

PLEASE REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? No Was there any video captured by Car Camera? No Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **GBF6110X** Vehicle Manufacturer Vehicle Model

Vehicle Variant Vehicle Colour

Vehicle Category Commercial vehicle Name of Driver TAN KAY WEE NRIC No SXXXX488D

Contact Number (Phone) +65-96612797 Address



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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SBS8681H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	WANG YAHONG
Passport No/FIN	GXXXX065K
Contact Number	(Phone) +65-81552647
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 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
- 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

Policyholder's Signature / Date & Time

Driver's Signat driver is not the policyholder) / Date & Time

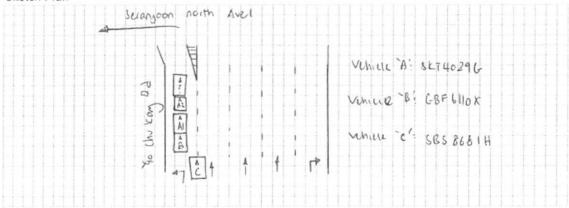
(Claims Section) Witnessed by Reporting Centre

Tel: 6453 1235

CITY AUTO PTE LTD Blk 8 Sin Ning Road -58/60/62 Sur Ving Ind Est Singapore 575643

Fax: 6453 7944

Sketch Plan



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Declaration

IWe 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

CITY AUTO PTE LTD
Bik 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapara 2643
Tel: 6453 1235 0 x:6453 7944
(Claims Sedion)

Witnessed by Reporting Centre Personnel Allianz Insurance Singapore Pte. Ltd.

Company Registration No.: 201903913C GST Registration No.: 201903913C

Address: 79 Robinson Road #09-01 Singapore 068897

Tel: +65 6714 3369 Website: www.allianz.sg Allianz Contact Centre Tel: 1800 222 1818 (Local)

+65 6222 1919 (Overseas)

Email: customerservice@allianz.com.sg



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CERTIFICATE OF INSURANCE

FORM

ROAD TRANSPORT ACT 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number

: SP2000332718-01

Coverage

: COMPREHENSIVE

Policyholder Name Registration No.

: Xing Yee OW : SKT4029G

Period of Insurance

: 05 JUNE 2021 to 04 JUNE 2022

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 the his/her permission

*Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

Limitation as to Use*:

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

The Policy does not cover:

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

*Limitation rendered inoperative by Section 8 of 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.

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) or Amendment, Act or Acts passed in substitution thereof.

Allianz Insurance Singapore Pte. Ltd.

14 MAY 2021

Issued Date

Hicham Raissi
Chief Executive Officer
Allianz Insurance Singapore Pte. Ltd.

Account Code: 0000156

Excess:

Own Damage Excess Windscreen Excess

SGD

600

SGD

100

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S8240563A





Name

OW XING YEE (OU XINYI)

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CHINESE Date of birth

Say

26-11-1982

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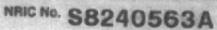
Country of birth

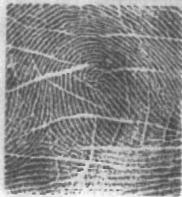
SINGAPORE .



4351561







Date of leave 04-04-2009

Address

APT BLK 130 BEDOK NORTH STREET 2 #11-63 SINGAPORE 460130

REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Number S 8 2 4 0 5 6 3 A Number OW XING YEE (OU XINYI) Birth Date: 26 Nov 1982 Issue Date: 22 May 2009



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

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 15 May 2008 of the driver; and other motor vehicles =< 2500kg

