PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02 SINGAPORE 486443 TEL:65446671 FAX:62141511 CO. REG:200707743D GST REG:200707743D

Our Ref: SMJ1422C/SR

WITHOUT PREJUDICE

12 August 2021

(By Email)

Attn: The Motor Claims Department
AIG Asia Pacific Insurance Pte Ltd
78 Shenton Way
#08-16
Singapore 079120

Dear Sir/Madam

ACCIDENT INVOLVING SMJ1422C AND SLA6291P ALONG SLIP ROAD OF UPPER CHANGI ROAD – INTO SIMEI AVENUE ON 05/07/2021

We have been authorized by Ms. Cheng Lai Yin, the owner of vehicle number: SMJ1422C, to claim against the party/parties responsible for the damages arising from the above-mentioned accident.

Our records show that you are the insurers of vehicle number: **SLA6291P** at the material time of the accident with the driver of our client's vehicle, **Ms. Cheng Lai Yin**.

As a result of the accident caused by your Insured Driver's negligent driving and/or management of your insured's Vehicle Number: **SLA6291P**, our client's vehicle was damaged and we have been put to loss and damage as follows:

(1) Cost of Repairs (Incl. GST)	\$ 2,002.53
(2) Loss of Use – 7 Days @\$80.00 per day	\$ 560.00
(3) GIA Search	\$ 2.00
	<u>\$ 2,564.53</u>

A copy of each of the following supporting documents is enclosed:

- (1) GIA report & sketch plan of SMJ1422C
- (2) Final repair bill
- (3) Vehicle Registration card, Certificate of Insurance
- (4) GIA search

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVE 2 #01-02 SINGAPORE 486443 TEL:65446671 FAX:62141511 CO. REG:200707743D GST REG:200707743D

Our Ref: SMJ1422C/SR

We would appreciate if you could look into the subject matter and let us have your favorable offer within 14 days. If you are agreeable to the settlement of the above said claims, please forward us your discharge voucher as for our client's signature and payment made to "Premier Automotive Services Pte Ltd".

Please note that if we do not hear from you within the stipulated 14 days, we will have no alternative but to appoint our solicitor to act on our behalf to commence proceedings against you without further notice to you.

Yours faithfully,

Claims Department - Shafawati Md Rabu

Email: shafawati.rabu@premierauto.com.sg

DID: 64100946

NB: We encourage all parties to liaise with us via email to expedite all matters

PS: Please quote our reference no when replying

c.c. Client - Ms. Cheng Lai Yin

This is a computer-generated letter. No signature is required.

SP0I21760001 / PREMIER AUTOMOTIVE SERVICES PTE LTD ENTRY DATE & TIME: 06/07/2021 11:02 (SGT)
SUBMITTED BY: VINCENT CHUA WEE AN VERSION: 1 (06/07/2021 11:02 (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.

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 06/07/2021 11:02 (SGT) Date of Accident 05/07/2021 19:00 (SGT) Exact Location of Accident Near 96C Jln Angin Laut, Singapore 489295 Additional Location Information Along slip road of Upper Changi Road - into Simei Avenue Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Hyundai

Vehicle Registration Number SMJ1422C INSURED/POLICYHOLDER Is company? Nο Name Of Registered Owner CHENG LAI YIN NRIC No SXXXX725I Email Address mail_angela@yahoo.com.sg Mobile Phone No (Phone) +65-81862226 Alternative Phone No +65-98516688 VEHICLE PARTICULARS

Vlodel Avante Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1591

INSURANCE COMPANY

Manufacturer

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number VPA/P2252525 Cover Note Number

DRIVER

Name of Driver CHENG LAI YIN NRIC No SXXXX725I

Date Of Birth	08/07/1967	
Occupation	Outdoor	
Date Of Driving Pass	01/08/2001	
Driving experience	19 YEARS AND 11 MONTHS	
Gender	Female	
Mobile Number	(Phone) +65-81862226	
Alt. Phone Number	+65-98516688	
Email Address	mail_angela@yahoo.com.sg	
Address	105 TANAH MERAH KECHIL AVENUE	
Address complement	-	
Postcode	465680	
Is the driver the policyholder?	Yes	
If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?	- N.	
	No	
Vehicle Registration Number of Other Vehicle Owned by Driver		
Insurance Company of Other Vehicle Owned by Driver		
industrial Sompany of Salist Validae Similar Systems	•	
GENERAL INFORMATION OF THE ACCIDENT		
Type of Accident	Collision - Head to Rear	
Weather Conditions	Clear	
Road Surface	Dry	
	•	i
OTHER INFORMATION		
Was any foreign vehicle involved in the accident?	Ne	
Number of vehicles involved in the accident	No 2	
Was anybody injured in the Accident?	No	
Was any injured conveyed to hospital by ambulance?	-	
Was any other vehicle or property damaged?	Yes	
Number of Passengers (Including Driver)	1	
Has the driver been approached by unknown person(s)	<u>'</u>	
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		
ON OUR OF THOO EAT		Service of the servic
	•	Ť.
REFER TO THE ATTACHED STATEMENT		
\		
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	SLA6291P
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	HO SEOW PHENG
NRIC No	SXXXX004I
Contact Number	_
Address	



Address complement	 -
Postcode	 -
nsurance Company Name	 -
Nature Of Damage	 FRONT RIGHT PORTION
Details of property damaged in accident	
No. Of Passenger (Including Driver)	 1

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 will shirt-opresentation or withholding of material facts may allow insurance companies to regulate 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 GA 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)

funderstand, acknowledge, agree and consent that

- (a) My insurer , my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to colect, 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 haurers' taw yers/law time, 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;
- (a) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the making of correspondence, statements, invoices, reports or nesides 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/makings.); and/or
- (v) complying with applicable law in administering, processing, handing 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 discused by any of the hauters and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Shgapare, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Winessed by Repo Personnel

Sketch Plan

A: SM3 1922 C LAND MARCHAN CB)

Accident report SP0I21760001

8. SLA6291P

On 5 Jul (Men) at Tpm, I was chiving along the slip read from Upper Change Road thereads Inner. Buttered from Upper Change Road thereads Inner. While I was at the give way they fine the vehicle pepind me SLA 62 91 P bit my car's rear left. The weather lift fine and sley was clear Without with the with the with the spend for the spend for filly aut. The also truned on the spend for filly aut. The dimen Mr. the seem then a large of missinged to the period of the period o	Describe Circumstances of the Accident
Albited 123 SLA 62 GIP BY	an 5 Jul (Mon) et 7000 land driver along the
Albis 1 123 SLA 62 GIP BY BY BY BY BOWN SON MANDEN SONT	Wi- rand An Il man Physis Broth John all D. 3
Albist 123 SLA 62 31 P BY By Was Show Lead Miles out The weare with the state of t	- And I go of the first of the second of the
The Clear College of the first of the Charles of th	3
The Clear College of the first of the Charles of th	till till at till till at till till till
The Clear College of the first of the Charles of th	- While I was at the give way stop the The vehicle
The Classical All States of the States of th	blbishme SLA6291P BIT was continued as Comment
The Clear College of the first of the Charles of th	10ft
manamana da kamaraka ka 384 da 8 manaha ka imaman ka	
manamana da kamaraka ka 384 da 8 manaha ka imaman ka	The weather like fine and the bute chear withthere
manaman de de la faction de la	10011 10th The 100 later
manaman de de la faction de la	rationers and with the first and the common of the control of the
The diver Mr. HS Seen Phone Solbos 45 Part of the part only by Jack. The diver Mr. HS Seen Phone Solbos 45 Part only by Jack. The diver Mr. HS Seen Phone Solbos 45 Part only by Jack. The diver Mr. HS Seen Phone Solbos 45 Part only by Jack. The diver Mr. HS Seen Phone Solbos 45 Part only by Jack. The diver Mr. HS Seen Phone Solbos 45 Part only by Jack.	
Deby Miller and Berger and Aller and	<u>manimum and a 1998 and Andrew Tarred States and States and Andrew and Andrew and Andrew Andr</u>
De William Selection of the selection of	annamananan kalan keranakah mkadi dalah kanamada kala kanin manan kanaman kanamada kalan kalan kalan kanamada
	american anno Deidroft ha Balandadh ann an Balanda ann an Francis an Salann ann ann an Albana ann an Air an Air ann ann an Air ann ann an Air ann an Air ann an Air ann an Air ann ann ann ann ann ann an Air ann ann ann an Air ann ann ann an Air ann ann ann ann ann ann ann ann ann an
	amusanan amanan kangangahik da kahalimida da kinanan (likita kinika anan interkahik kahalimidan kangan kang
	warmen was the De De State of the state of t
	The second secon
The state of the s	

Declaration

We declare the foregoing particulars are true in every respect,

Posity holder's Signature / Date & Driver's Signature (if driver is not the policyholder) / Date Witnessed by Reporting Time 6/3/3034





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 4 Report No. T/20210707/7018

REPORT OF A TRAFFIC ACCIDENT

Vide Report No.:	Station Diary No.:			
Address: 105 TANAH MERAH KECHII	Address: 105 TANAH MERAH KECHIL AVENUE SINGAPORE 465680			
Contact No.: Home/Office:				
Email: mail_angela@yahoo.com.sg	Email: mail_angela@yahoo.com.sg			
7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Language: English	Institution / School Name:			
Driving Licence Information: Class: 3	Date of Expiry:			
	Address: 105 TANAH MERAH KECHII Contact No.: Home/Office: Email: mail_angela@yahoo.com.sg Birth: Type of Informant: Driver Language: English Driving Licence Information:			

General Infor				
Type of	Injury	Drink	Date/Time of	Type of Location
Accident:	Others	Drive:	Accident: 05/07/2021 19:00	Slip Road
Location:		No	100/01/2021 19.00	
UPPER CHA	NGI ROAD			
Weather:		Road Surface:		Road Speed Limit:
Clear		Dry		50 Km/h
Traffic Flow:		Traffic Control:		Traffic Volume:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
	sion:			
One Way Type of Collis	sion: ring Vehicles - Head	Not Controlled		Moderate

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLA6291P	Car	MERCEDES BENZ		Grey	Slightly Damaged	0
SMJ1422C	Car	HYUNDAI	AD AVANTE 1.6 GLS (A) S	White	Slightly Damaged	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 4 Report No. T/20210707/7018

CONTINUATION OF REPORT

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLA6291P	AIG ASIA PACIFIC INSURANCE PTE. LTD.			
SMJ1422C	AXA INSURANCE SINGAPORE PTE	P2252525	25/02/2021	24/02/2022

Details of Perso	n Involved					
Any Pedestrian I						
No. of Pedestriar	o. of Pedestrians Injured: NIL Use of Pedestrian Crossing: NA					
Driver						
Name	HO SEOW PHENG			ID No		S01810041
Related Vehicle	ted Vehicle SLA6291P (Car) Contact No.		SLA6291P (Car)		ct No.	NIL
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date	NIL Date		NIL			
No. of Days gran	ted Medical Leave	NIL	Degree of	of NIL		
Driver				2 6 6		
Name	CHENG LAI YIN			ID No.		S2600725I
Related Vehicle	SMJ1422C (Car)			Contact No.		81862226
Hospital/Clinic	THAI SHEN FAMILY	FAMILY CLINIC		Class Driving Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date	07/07/2021	*	Date	07/07/2021		/2021
No. of Days grant	ted Medical Leave	03	Degree of		Slight	

Brief Details.

On 5 Jul at 7pm, I Cheng Lai Yin was driving vehicle A car plate no SMJ1422C along the slip road from Upper Changi Road towards Simei Avenue. I turned on the signal to filter out to Simei Avenue. While I was at the give way stop line, the car behind me vehicle B with car plate no. SLA6291P hit my car's rear left. The weather was fine and sky was clear. There was no issue with the visibility. The driver of vehicle B Mr Ho Seow Pheng with driving license no. S0180041 apologized and admitted that he had misjudged the situation and "thought my car was moving out". The driver of vehicle B mentioned that he did not have any injury at the point in time. Both vehicle A and B did not have any passenger. Vehicle C driver Mr Shen Xing Chen, who I did not know him, shared that he witnessed the incident while he was driving along Simei Avenue and stopped his car to see if he could offer help.

I have pictures relating to the accident to submit.





3 of 4

Report No. T/20210707/7018

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

I reported the accident at the AXA authorized workshop Premier Automotive Services Pte Ltd the next day on 6 Jul at 9am. I verbally shared that I felt dizzy, nausea and mild neck pain shortly within an hour after the accident on 5 Jul, but would like to monitor if I could get better. Nevertheless, I still felt unwell after the injury and I went to the Thai Shen Family Clinic P.L. to consult the doctor and collected the medication on 7 Jul at 9am. I was given 3-days medical leave from 7 Jul to 9 Jul 2021.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 4 of 4 Report No. T/20210707/7018

CONTINUATION OF REPORT

Sketch Plan

Authentication Stamp

NP168

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/07/2021 12:50
Officer In Charge Of Case: TP / TPIB / TAY CHUN KEEN Contact No.: 65476436	Classification Of Case:



PREMIER AUTOMOTIVE SERVICES PTE LTD

OFFICE: 23 Changi South Avenue 2 #01-02 S(486443)
TEL: 65436676 / 65436689 FAX: 62141511
CO. REG NO.: 200707743D GST. REG. NO.: 200707743D

TAX INVOICE

Ms. Cheng Lai Yin C/O Premier Automotive Services Pte Ltd 23 Changi South Ave 2 #01-02 Singapore 486443

DATE 12-Aug-2021 PAGE 1 OF 1

ITEM	Description	QTY	U.PRICE	l l	AMOUNT
	FINAL REPAIR BILL FOR HYUNDAI AVANTE			\$	1,871.52
	REGN NO: SMJ1422C				
	*				2
	TOTAL REPAIR COSTS AS RECOM	/IMENDED	BY SURVEYOR	\$	1,871.52
2			GST @ 7%		131.01
			GRAND TOTAL		2,002.53



for Premier Automotive Services Pte Ltd

(ALL THE REPAIR COSTS ARE SUBJECTED TO GST)

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company Cert No.: S26007251

Owner ID Type: Singapore NRIC

Owner Name: CHENG LAI YIN

Registered Address: 105 TANAH MERAH KECHIL AVENUE SINGAPORE 465680

Mailing Address:

Birth Date: 08 Jul 1967

Vehicle Particulars

Vehicle No.: SMJ1422C

Previous Vehicle No.:

Effective Date of Ownership: 25 Feb 2019
Original Regn Date: 25 Feb 2019
Registration Date: 25 Feb 2019
Year of Manufacture: 2019

Vehicle Type: Passenger Motor Car

Vehicle Scheme: -

Vehicle Attachment 1: No Attachment

Vehicle Attachment 2 : Vehicle Attachment 3 : -

/ehicle Make : HYUNDAI

Vehicle Model: AD AVANTE 1.6 GLS (A) S

Primary Colour: White Secondary Colour: Passenger Capacity: 4

Chassis No.: KMHD841CMKU866441

Engine No.: G4FGKU094990

Engine Capacity / Power Rating: 1591 cc/-

Maximum Power Output: 93.8 kW (125 bhp)

Propellant: Petrol

Max Unladen Weight: 1345 kg

Maximum Laden Weight: 1800 kg

Open Market Value: \$14,528.00

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 24 Feb 2029 Minimum PARF Benefit: \$7,264.00

o. of Transfers: 0

IU Label No.: 1129149571

COE No.: 2019030101000578Z

COE Expiry Date: 24 Feb 2029

COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Registration Category: A - Car up to 1600cc & 97kW (130bhp)

Quota Premium (QP) / Prevailing Quota \$25,689.00 / -

Premium:

Actual QP Paid: \$25,689.00 QP (Regn Cat): \$25,689.00

OPC Cash Rebate Eligibility: No

QP during COE Bidding Exercise: \$25,689,00

Additional Registration Fee Rate: First \$14,528,00 (100%)

Actual ARF Paid: \$14,528.00

Vehicle Lifespan Expiry Date: No Lifespan

CO2 Emission: 152.00 (g/km)

CEVIVES Rebate Utilised Amount:

 CO Emission:
 0.268410 (g/km)

 HC Emission:
 0.023310 (g/km)

 NOx Emission:
 0.008170 (g/km)

 PM Emission:
 0.390000 (mg/km)

AXA INSURANCE PTE LTD 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Centre #01-21 Tel:1800 8804888 Fax:-Website:www.axa.com.sg GST Registration Number: 199903512M customer.care@axa.com.sg



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) ■ Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO.

: VPA/P2252525

Account No.: 08260

Coverage

: Comprehensive

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: CHENG LAI YIN

Vehicle Registration No. : SMJ1422C Period of Insurance

: From 25/02/2021 To 24/02/2022 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

(a) The Policyholder

The Policyholder may also drive a Motor Car not belonging to or not hired (under a

hire purchase agreement or otherwise) to him or his employer or his partner (b) Any other person who is driving on the Policyholder's order or with his 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.

LIMITATIONS 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, speedtesting, 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.

(01)

Basic Own Damage Excess

An Additional Excess is applicable as follows: S\$500.00 for Unnamed Authorized Driver S\$2,500.00 for Undeclared Young and Inexperienced Driver. (Please refer to your policy on the terms & conditions)

* 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.

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).

N.B:

Your authorised workshop is Komoco Motors Pte Ltd.

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOASH

on 03/12/2020

IMPORTANT :

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, covernote and endorsement etc.

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLA6291P

Date of Accident

05/07/2021 苗

Reset

% RESULT & RECEIPT

TP Insurer Enquiry	
Insurance	AIG Asia Pacific Insurance Pte
Period of Insurance	
Requested By	VINCENT CHUA WEE AN (PREM
Requested Date	06/07/2021 12:31

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): **\$\$2**

General Insurance Association

Records Management Centre GST Registration No: **M400017735**



PVVEHICLE

Work Order No:

Vehicle Reg No : Date/Time In: 06607	SMJ 1422 C 12.21@ 0900 hs		12/07/2021 @ 1800 hrs	Next Svc Date:
Mileage in: 1550		Date, Time Out.	15509	
Fuel In: 7/8 Bar		Mileage Out:		called for collection.
-	S		7/8 Bars	e
For Official Use		ris mey:	81862226.	
S/N	SVC / REPAIR		DONE (Y / N)	REMARKS / FEEDBACK FROM WORKSHOP
1 ACCIDENT	REPAIRS			
2				
3				5
4				
5				
6				
7				
8				
9				
10				
11				
12	Check In			Check Out
1.Minor Dent	2.Serious Dent 3.Minor	r Scratch 4.Serio	us Scratch 5.Damaged 6.	.Chip 7.Crack 8.Peeling
TP/				
eck In By Customer:	Takeover By Wor	kshop (PAUTO)	Quality Check By Workshop	Check Out To Customer:
me: Chery Lai Yin	Name:		Name:	
nature: Ka La /	Signature: Date / Time:		Signature: Date / Time:	Name: Chengla, F.
ved By Service Advisor (PAUTO)	Assigned Mechani	ic:	Takeover By Service Advisor (PAUTO)	
ne:	Name:		Name:	Date / Time: 12/4/21 @ 1800 hs
nature: le / Time:	Signature: Date / Time:		Signature: Date / Time:	@ 1800 hs

Date :	06/07/2021
To:P	REMIER AUTOMOTIVE SERVICES PTE LTD
From	: CHENG LAI YIN
	(Name of Owner & Policyholder/Authorising Party**)
CLAI	M VEHICLE NO.: SMJ 1422C
ACCI	DENT DATE : 05/07/2021
LOCA	ATION : SLIP ROAD OF UPPER CHANGI ROAD - INTO SIME! AVENUE
OTHI (IF Al	ER VEHICLE (S):
1.	I ¹ hereby authorise PREMIER AUTOMOTIVE SERVICES PTE LTD ("PREMIER") to: -
a.	proceed with the repairs (the "Repair") to the above accident (the "Accident") damaged vehicle (the "Vehicle"); and
* b.	act as sole and principal agent to claim (the "Claim") on my behalf for the damage to the Vehicle (the "Damage") from my insurer in question (the "Insurer") until the Claim is wholly completed, settled and/or resolved. [Claim against own insurer(s)].
* b.	act as sole and principal agent to claim (the "Claim") on my behalf for the damage to the Vehicle and/or** bodily injury sustained as a result of the Accident (collectively known hereinafter as the "Damage") from the Third Party and/or Third Party Insurer in question (collectively known as the "Third Party") until the Claim is wholly completed, settled and/or resolved. [Claim against Third Party].
2.	I confirm that PREMIER's authorisation shall include without limitation paying for all relevant reports/documents, corresponding and negotiating with the Insurer/Third Party** and any other relevant parties, correspondence of any nature with solicitors, appointing solicitors to act in connection with the Claim and, any or all such other tasks concerning the settlement, resolution and/or completion of the Claim;

Page 1 of 3
*Tick where applicable.
** Delete as appropriate.

Chapter you

¹ Where authorising party is not vehicle owner and policyholder.

^{*} I am duly authorised by the owner and policyholder of the Vehicle to enter into this Agreement with PREMIER on his behalf. Unless the context otherwise requires, any references to "me", "my", "I" and the like in this Agreement shall be taken to mean the vehicle owner and policyholder.

EXCEPT: -

- a. such matters or tasks that the Insurer/Third Party** and/or the law requires me to personally attend to; and
- b. the due submission of the Claim to the Insurer (where applicable).
- 3. I understand if I submit a claim of whatever nature to my own insurer(s) **FOURTEEN (14)**<u>days</u> after the Accident (<u>or such other time stipulated by my own insurer(s) and/or the law</u>), such claim will not or may not be accepted by my own insurer.
- 4. I further confirm and accept that:
 - a. To the extent permitted by law:
 - i. I will indemnify and keep PREMIER indemnified in connection with or arising from the Claim; and
 - ii. That notwithstanding this Agreement or otherwise, under no circumstances will I (jointly or severally) in any manner hold PREMIER liable for losses/damages of whatever nature arising from or in connection with the Claim.
 - b. PREMIER does not guarantee and never represented that the Insurer/Third Party** will fully indemnify me for the Damage and/or the Repair's costs **AND**, that I shall be and continue to be liable to PREMIER for the whole of the Repair's costs.
- 5. As the extent to which the Insurer/Third Party** will indemnify me or be liable is not conclusive, I agree to place a deposit of \$\sspace{S}______ (excluding GST) for the Repair's costs (the "Deposit").
- 6. I agree and accept "PREMIER's Deposit refund policy". If the final successful percentage of indemnity/contribution/liability from or of the Insurer/Third Party** in respect of the Repair's costs to me is:
 - a. 50% and below NO REFUND
 - b. 100% FULL REFUND
 - I shall inform and forward to PREMIER all correspondence and letters received by me from the Insurer/Third Party**, any other insurer, solicitors, governmental authorities and/or, any other relevant party.
- 8. I shall fully co-operate with and act expeditiously on any requests by PREMIER, particularly the signing/endorsement/execution of any "Discharge Voucher", failing which I shall be liable to PREMIER for the full repair costs and the expenses incurred (directly or indirectly) by PREMIER in connection with the Claim.
- 9.1 / I shall not:
 - a. respond to correspondence and letters; and
 - b. negotiate agree or accept any offer from the Insurer/Third Party** or any other relevant party; without consultation of and expressed approval from PREMIER.

Page 2 of 3
*Tick where applicable.
** Delete as appropriate.

Shy 2 2

10. In consideration hereof (including without limitation PREMIER's agreeing to repair the Vehicle and defer demanding payment of the Repair's cost), I wholly assign to PREMIER all proceeds of the Claim for: -

the Repair's costs; and

- b. damage, compensation, interest, costs (including party-to-party legal costs on a full indemnity basis) and expenses in connection with the Accident, Repair and/or Claim; which PREMIER shall be further entitled to apportion in its absolute discretion with any excess being paid by PREMIER to me as it deems fit in its absolute discretion.
- 11. I confirm that payment to PREMIER or to any person (which shall include a body corporate) authorised by you to receive payment in lieu shall constitute a good and effective discharge of the payment obligations by any party of the aforesaid proceeds of my Claim And that I shall not be authorised in law to receive payment.
- 12. I further consent to the collection, use and disclosure of my personal data for the purposes of processing any insurance claim and repairing of my vehicle. And for purposes of receiving survey forms, receiving information on special promotions, receiving marketing messages, via SMS, telephone call, email and post from Premier's Group of Companies.

X

Owner & Policyholder's Signature/Company Stamp (if applicable); or**

Authorising Party's Signature/Company Stamp (if applicable)

Cheng Lai yin

NRIC No.:

Designation:

Address:

105 Tantah Merah Kechil Avenue, S(465680)

Witness' Signature

Name:

VINCENT

NRIC No.:

5 x x x x x 1536

Designation:

OPERATIONS OFFICER

Address:

23 CHANGI AUENUE 2,401-02, SC486443) SOUTH