



# 江氏修理汽車私人有限公司

## KANG CAR REPAIRERS PTE LTD

1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883

TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

Our Ref : KCR0720212843QBE

Your Ref : SLK6599A

Date : 31 MAR 2022

WITHOUT PREJUDICE

**QBE Insurance (Singapore) Pte Ltd**

C/O LKK Auto Consultants Pte Ltd

51 Ubi Ave 1

#01-25 Paya Ubi Industrial Pk

Singapore 408913

Attention : Motor Claim Department

Dear Sirs,

**Accident involving SKR2843X and SLK6599A on 15.07.2021 along slip rd of Eunoss Link to Airport Rd.**

We refer to the above accident. On our record showed that you are the insurer of motor vehicle SLK6599A.

We are instructed that the accident was caused by your insured's negligent driving and/or management of his vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense.

On behalf of and as authorized by M/S ComfortDelgro Driving Centre Pte Ltd, the owner of motor-vehicle no: SKR2843X, we submit their claim to you:

Cost of repairs (Inclusive of 7% GST)	\$ 4,494.00
Loss of use (12 days x \$120.00-Training vehicle)	\$ 1,440.00
GIA search	\$ 2.00
	\$ 5,936.00
	=====

Our claim for loss of use is as follows :-

<u>No of days</u>	<u>Date</u>	<u>Remarks</u>
	15.07.21	Date of Accident
1	16.07.21	Reporting
2	17.07.21	Saturday
3	18.07.21	Sunday
4	19.07.21	Surveyed by LKK
5	20.07.21	P.Holiday ( Hari Raya Haji)
6	21.07.21	Day 1 of repair
7	22.07.21	Day 2
8	23.07.21	Day 3
9	24.07.21	Day 4
10	25.07.21	Sunday
11	26.07.21	Day 5
<u>12</u>	<u>27.07.21</u>	<u>Day 6</u>
12		6 days as recommended

Enclosed herewith are copies of the following documents in support of our client's claim:

- 1) Tax invoice no: KCR-INV2200096
- 2) GIA report and certificate insurance of SKR2843X
- 3) GIA search fee & invoice
- 4) Vehicle Registration Details

We hope to receive your early reply soon.

Thank you.

Yours faithfully,

**KANG CAR REPAIRERS PTE LTD**



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Co. Reg. No. 201300201N GST Reg. No. 201300201N

M/S : QBE INSURANCE (SINGAPORE) PTE LTD  
1 RAFFLES QUAY  
#29-10 SOUTH TOWER  
SINGAPORE 048583  
TEL: 62246633 FAX: 65345356  
ATTN: Motor Claim Department

**Final No:** KCR-INV2200096  
**Claim No:** EST2100191  
**Date:** 31 Mar 2022  
**Policy No:** D20MFL0000618\_01  
**Veh Reg No:** SKR2843X  
**Make/Model:** TOYOTA VIOS J  
GRADE MT  
**Chassis No:** MHFBT9F3306029824  
**Engine No:** 1NZZ082869  
**Reg. Date:** 29/01/2015

Your Ref No: SLK6599A  
Claim Type: Third Party  
Accident Date: 15/07/2021  
TP Veh Reg No: SLK6599A

### Tax Invoice to Vehicle No :SKR2843X

			PAGE:1
Description	Quantity	List Price	Amount
		S\$	S\$
As recommended by surveyor to proceed repair at total cost/lumpsum cost			S\$ 4,200.00
Add GST @ 7%			294.00
Total Amount payable			S\$ 4,494.00

TOTAL: SINGAPORE DOLLAR FOUR THOUSAND FOUR HUNDRED NINETY FOUR ONLY

For Kang Car Repairers Pte Ltd

E. & O. E.

AUTHORISED SIGNATURE

## 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	16/07/2021 11:00 (SGT)
Date of Accident	15/07/2021 11:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLIP ROAD OF EUNOS LINK TO AIRPORT ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR2843X
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORTDELGRO DRIVING CENTRE PTE LTD
Company Reg No	1XXXXX882C
Email Address	DARYLTAN@CDC.COM.SG
Mobile Phone No	(Phone) +65-90072819
Alternative Phone No	+65-90072819

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Manual
CC	1497

#### INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	D20MFL0000618_01
Cover Note Number	-

#### DRIVER

Name of Driver	ANG HUI XIN SHERINE
NRIC No	TXXXX552B

Date Of Birth	28/06/2002
Occupation	Indoor
Date Of Driving Pass	15/07/2021
Driving experience	0 MONTH
Gender	Female
Mobile Number	(Phone) +65-82288845
Alt. Phone Number	-
Email Address	DARYLTAN@CDC.COM.SG
Address	29 UPPER SERANGOON VIEW #09-18
Address complement	-
Postcode	534044
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	LEARNER
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	LEONG CHEE KONG
Gender	Male

#### 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 15.7.21, 1115 HRS AT AIRPORT RD, I WAS STOPPING AT THE JUNCTION, SKR2843X, A CAR SLK6599A, COLLIDED INTO MY REAR.

#### 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	SLK6599A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-



Vehicle Category	Private car
Name of Driver	LIM KIM POH
Contact Number	(Phone) +65-97368223
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### WITNESS DETAILS

##### WITNESS 1

Name	LEONG CHEE KONG
Phone	(Phone) +65-96494033
Email	-

SKETCH PLANIMPORTANT 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 issuance 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 lodging 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;
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) 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 government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders



Policyholder's Signature

Date & Time: 16/7/2021  
9:27 AM

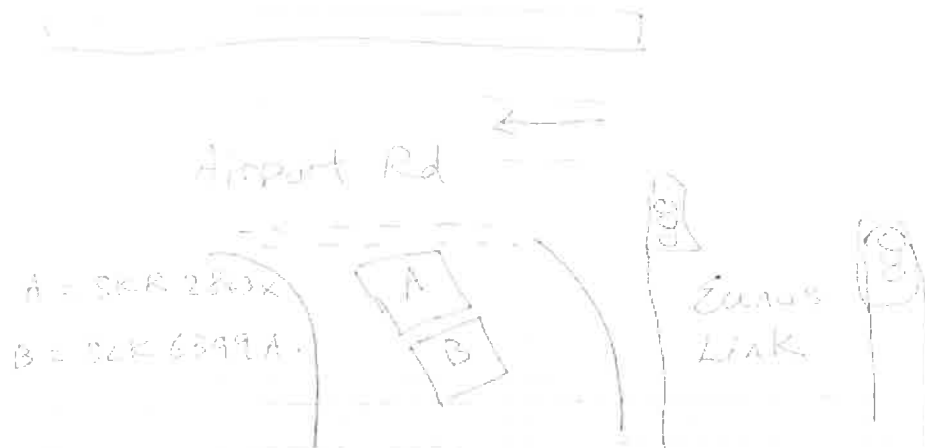
Driver's Signature

(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature

Name:  
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/7/21, 1115hrs at Airport Rd, I was stopping at the junction, SKR 2843X, a car, SLK 6399A, collided into my rear.

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature

Date & Time

15/7/2021  
9:29am

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.




INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SLK6599A

Date of Accident

15/07/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... QBE Insurance (Singapore) Pt...

Period of Insurance ..... 23/01/2021 - 22/01/2022

Requested By ..... ALICE TNG (KANG CAR REPAIR...

Requested Date ..... 16/07/2021 10:34

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

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

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

## Enquire Vehicle Registration Details

### Owner Particulars

NRIC/Passport/Company Cert No. :	199601882C
Owner ID Type :	Company
Owner Name :	COMFORTDELGRO DRIVING CENTRE PTE. LTD.
Registered Address :	205 BRADDELL ROAD SINGAPORE 579701
Mailing Address :	-
Birth Date :	-

### Vehicle Particulars

Vehicle No. :	SKR2843X
Previous Vehicle No. :	-
Effective Date of Ownership :	29 Jan 2015
Original Regn Date :	29 Jan 2015
Registration Date :	29 Jan 2015
Year of Manufacture :	2014
Vehicle Type :	For Instruction (Co) Car With 10 Years Lifespan
Vehicle Scheme :	-
Vehicle Attachment 1 :	No Attachment
Vehicle Attachment 2 :	-
Vehicle Attachment 3 :	-
Vehicle Make :	TOYOTA
Vehicle Model :	VIOS J GRADE MT
Primary Colour :	Silver
Secondary Colour :	-
Passenger Capacity :	4
Chassis No. :	MHFBT9F3306029824
Engine No. :	1NZZ082869
Engine Capacity / Power Rating :	1497 cc / -
Maximum Power Output :	80.0 kW ( 107 bhp )
Propellant :	Petrol
Max Unladen Weight :	1045 kg
Maximum Laden Weight :	1500 kg
Open Market Value :	\$13,432.00
PARF Eligibility :	Yes
PARF Eligibility Expiry Date :	28 Jan 2025
Minimum PARF Benefit :	\$4,216.00
No. of Transfers :	0
IU Label No. :	1125531813
COE No. :	2015020101000389N
COE Expiry Date :	28 Jan 2025
COE Category :	A - Car up to 1600cc & 97kW (130bhp)
COE Registration Category :	A - Car up to 1600cc & 97kW (130bhp)
Quota Premium (QP) / Prevailing Quota Premium :	\$66,010.00 / -
Actual QP Paid :	\$66,010.00
QP (Regn Cat) :	\$66,010.00
OPC Cash Rebate Eligibility :	No
QP during COE Bidding Exercise :	\$66,010.00
Additional Registration Fee Rate :	First \$13,432.00 (100%)
Actual ARF Paid :	\$8,432.00
Vehicle Lifespan Expiry Date :	28 Jan 2025
CO2 Emission:	147.00 (g/km)
CEV/VES Rebate Utilised Amount:	\$5,000.00
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-
Message :	-

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