

TEAM AUTO PRO

WITHOUT PREJUDICE

Our Ref: SLR 7845X

Your Ref: SMQ 2718G

2nd November 2021

ATTN: LKK Auto Consultants Pte Ltd
INSURER: India International Insurance Pte Ltd

Dear Hsiao Tong,

Accident Involving: SLR 7845X and SMQ 2718G

Date of Accident: 30 September 2021

Location of Accident: Eber Road Traffic to Exeter Road

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

Cost of Repair Inc. GST	\$ 6,473.50	\$6050 COR Agreed + \$423.50 GST
Add Loss of Rental	\$ 2,118.60	11 Days - Inv#GINV21100252 ***2 Days PRS + 8 Repair Days Agreed + 1 Sunday (17 Oct)
Total	\$ 8,592.10	
Add LTA Search Fee	\$ 7.45	
GRAND TOTAL	\$ 8,599.55	

Kindly pay the Grand Total Amount of **\$8,599.55** 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.



Regards,
Adel (Ms)

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:**

MKM Car Leasing Pte Ltd

PI Number	P2111-2416
PI Date	2-Nov-2021
Vehicle No.	SLR 7845X
Accident Date	30-Sep-2021

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SLR 7845X	COR Lump Sum		\$ 6,050.00

Notes:

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

Total Amount	\$	6,050.00
GST 7%	\$	423.50
GRAND TOTAL AMOUNT	\$	6,473.50

Authorized Signature





176 Sin Ming Drive # 04-08,
Sin Ming AutoCare, Singapore 575721
Tel: 6747-6880 Fax: 6352-0443
Co. Reg. No./ GST Reg No.: 201224734R
Website: www.mkmcarleasing.com.sg
Email: enquiries@mkmcarleasing.com.sg

**BILL TO:****Mr KAMAL BIN MOHAMMAD NOR**

Blk 856D Tampines Street 82

#04-184

Singapore 524856

Tel: 97587496

Tax Invoice**Inv No. :** GINV21100252**Date :** 18 Oct 2021**Ref :****Currency :** SGD**Terms :** COD**RA No. :** GR21100004**Veh No. :** SLV3550B

#	Description	Qty	UOM	Unit Price	Tax Amt	Tax Type	Taxable Amt
1	Rental (07/10/2021 to 18/10/2021)	1.00		1,980.00	138.60	GST (SR) (7%)	1,980.00

Remark: SLV3550B - Replacement Car SLR7845X for Accident Repair**Notes:**

Please pay within 7 days hereof, time is of the essence.
Late Payment Charges on all overdue sums accruing at the rate of
1.5% per month until full payment.
Please refer to our terms & conditions.

Subtotal : S\$ 1,980.00
Total Tax : S\$ 138.60
Total : S\$ 2,118.60

For **MKM Car Leasing Pte Ltd**

(Authorised Signature)





176 Sin Ming Drive # 04-08,
Sin Ming AutoCare, Singapore 575721
Tel: 6747-6880 Fax: 6352-0443
Co. Reg. No./ GST Reg No.: 201224734R
Website: www.mkmcarleasing.com.sg
Email: enquiries@mkmcarleasing.com.sg



LEASE AGREEMENT

No. GR21100004

Date: 09 Oct 2020

VEHICLE DESCRIPTION

Vehicle No. : SLV3550B
Make : TOYOTA
Model : PRIUS ALPHA HYBRID 1.8S
AT ABS AIRBAGS
Chassis No. : ZVW400027555
Engine No. : 2ZR0A37838

HIRER PARTICULARS

Name : KAMAL BIN MOHAMMAD
NOR
NRIC/Passport No : S1801961B
Address : Blk 856D Tampines Street
82 #04-184 Singapore
524856
Contact No. : 97587496
Email : MOHAMMADKAMAL1967@
GMAIL.COM
Driving License No. : S1801961B
Passing Date : 29/04/2009
Date of Birth : 14/06/1967
Next of Kin : SAIDAH HASSAN
Contact No. : 91994776

REMARKS

2nd accident occurs, \$3000. advance rental.

INSURANCE

- (a) Own Excess Damage fee per claim is S\$ 2,000.00;
(b) Third Party Damage Excess fee per claim is S\$ 2,000.00;
(c) Outside Singapore Damage Excess fee per claim is S\$ 4,000.00;
(d) Addition Own Damage Excess fee per claim S\$ 3,000.00;
is applicable for any of the drivers below:
(i) Aged 24 years old or below;
(ii) Aged 66 years or above; or
(iii) Driving experience in Singapore of less than 2 years under the relevant class of driving license.
(e) Windscreen Damage Excess fee per claim is S\$ 200.00;

The Agreement herein comprises the Schedule above and the Terms and Conditions annexed hereto. The Hirer confirms that he has read, understood and agreed to the terms of this Agreement.

IN WITNESS whereof the Parties hereto have set their hands the day and the year first above written.

Hirer's Signature
KAMAL BIN MOHAMMAD NOR



Rented out by
Leasing Consultant
MKM Car Leasing



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 30 Sep 2021 / 16:09:23

Receipt Date/Time : 30 Sep 2021 / 16:09:23

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210930-002841

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 - SMQ2718G				
As at 30 Sep 2021/08:14:00				
Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SMQ2718G Enquiry Fee 20210930160757825917	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.: SLR7845X
and SMQ2718G and
and and
@ EBER ROAD TRAFFIC TO EXETER ROAD
dated 30/09/2021.

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,




Claimant Signature & Co's Stamp (if applicable)

Date:

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	30/09/2021 15:51 (SGT)
Date of Accident	30/09/2021 08:14 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	EBER ROAD TRAFFIC TO EXETER ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR7845X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MKM CAR LEASING PTE LTD
Company Reg No	2XXXXX734R
Email Address	RINA@MKMCARLEASING.COM.SG
Mobile Phone No	(Phone) +65-67476880
Alternative Phone No	(Office) +65-67476880

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	C-hr
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 hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	SPMF1000000476
Cover Note Number	SPMF1000000476

DRIVER

Name of Driver	KAMAL BIN MOHAMMAD NOR
NRIC No	SXXXX961B

Date Of Birth	14/06/1967
Occupation	Outdoor
Date Of Driving Pass	20/07/1989
Driving experience	32 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97587496
Alt. Phone Number	-
Email Address	RINA@MKMCARLEASING.COM.SG
Address	APT BLK 856D TAMPINES STREET 82
Address complement	#04-184
Postcode	524856
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Raining
Road Surface	Wet

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	GOJEK PASSENGER
Gender	Female

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 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	SMQ2718G
Vehicle Manufacturer	Toyota
Vehicle Model	Noah
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car


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

Describe Circumstances of the Accident


On the stated date and time, I vehicle 'A' travelling straight to Exeter road, when i saw traffic light yellow so i slow and stop, suddenly i felt an impact on my rear, shortly i got out of my vehicle and realized it was vehicle 'B' hit against my rear portion.

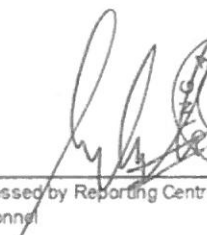
Declaration

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

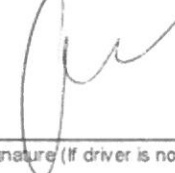


SKETCH PLAN

IMPORTANT NOTICE

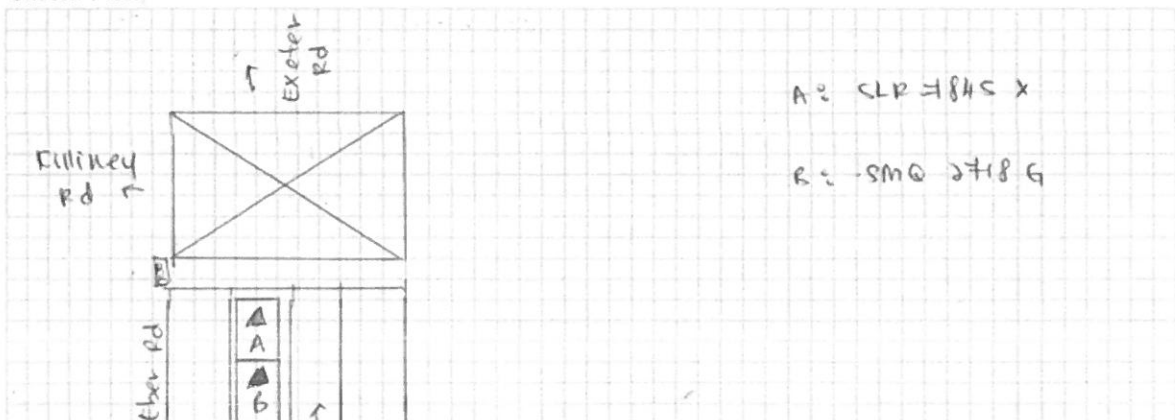
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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4. The issue and acceptance of this Form by insurance companies is not an admission 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



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

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)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SPMF1000000476
Date of Issue : 04 August 2021
Coverage : COMPREHENSIVE
Policyholder : MKM CAR LEASING PTE LTD
Finance Company :
Period of Insurance : 17 August 2021 To 16 August 2022 (both dates inclusive)
Registration Number : SLR7845X
Chassis Number of Vehicle : ZYX102056855

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 or to whom the vehicle is hired.

* 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 (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

Limitation as to Use*:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
(b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
(c) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by any person to whom the vehicle is hired and for use within Singapore only.

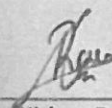
* Limitation rendered inoperative by Section 8 of Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Policy does not cover:

- (a) Use for racing, pace-making, reliability trials or speed-testing.
(b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

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).

04 August 2021
Issue Date


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

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S1801961B

Blood Group Date of Issue
B+ 24-07-1994

NRIC No.: S1801961B

APT BLK 856D TAMPINES STREET 82 #04 - 18A
SINGAPORE 524856

No: 3884716

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.		Issue Date
Type	Description	
02	TAXI VL	29/04/2009
03	BUS VL	22/09/2005




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES)

Class 2B	Motorcycles not exceeding 700 cc
Class 2A	Motorcycles between 201 cc and 400 cc
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

14 Oct 1986
14 Oct 1986
20 Jul 1989

Licence No: S1801961B



NP 428A