



Auto Insure Pte. Ltd.

6 Marsiling Lane
Singapore (739145)
E: claims@autoinsure.com.sg
W: www.autoinsure.com.sg
T: 3157 2626 F: 6368 0081
GST No.: 201437380M

Our Ref: SMD1450C
Your Ref: GBE3025J
Accident Date: 30-Nov-21

WITHOUT PREJUDICE

07-Jul-22

ATTENTION: MOTOR CLAIMS DEPT

Email: mt_claim@lonpac.com

Lonpac Insurance Bhd

300 Beach Road,
#17-04/07 The Concourse,
Singapore 199555

CLAIMANT: ADRIAN LIM CHEE BENG (LIN ZHIMING)

ACCIDENT INVOLVING SMD1450C & GBE3025J ALONG Kian Teck Ave, Singapore ON 30/11/2021

We are instructed by **ADRIAN LIM CHEE BENG (LIN ZHIMING)** to claim damages against your insured in connection with a road accident ON 30 NOV 21 involving our client's motor registration number and motor vehicle registration number driven by you or your authorised driver at the material time.

We are instructed that your negligent driving and/or management of your vehicle caused the accident. As a result of the accident, our client's vehicle was damaged and our client was put to loss and expense, particulars of which are as follows;

1) Cost of Repair (with GST) after surveyor final esti.	\$	23,540.00
2) Rental (Includes loss of PRS and loss of Sun & PHs) (30 days X \$120)	\$	3,600.00
3) LTA/GIA Search Fees	\$	2.00
4) Other incidentals	\$	200.00
5) Towing Fee	\$	45.00
TOTAL:	\$	<u>27,387.00</u>

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

- 1) GIA report of our Insured
- 2) Repairer's Invoice
- 3) Letter of Authorization
- 4) LTA/GIA Search Receipt
- 5) Rental Invoice

Please note that if you are insured and wish to claim under your insurance policy, you should immediately pass this letter to your insurer.

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within **14 days** of your receipt of this letter, failing which our client will have no alternative but to commence claims against you without further notice to you or your insurer.

Please note that if you have a counterclaim against our client arising out of accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within **8 weeks** of your receipt of this letter.

For any further enquiry, kindly contact us via email to claims01@autoinsure.com.sg or call 3157 2628 directly.

Yours Faithfully,

Jason Heng
Auto Insure Pte Ltd
Claims Director

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 30/11/2021 16:35 (SGT)
Date of Accident 30/11/2021 11:40 (SGT)
Exact Location of Accident Kian Teck Ave, Singapore
Additional Location Information JUNCTION OF KIAN TECK AVE & INTERNATIONAL RD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMD1450C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ADRIAN LIM CHEE BENG (LIN ZHIMING)
NRIC No SXXXX903J
Email Address adrian78@singnet.com.sg
Mobile Phone No (Phone) +65-97620642
Alternative Phone No +65-97620642

VEHICLE PARTICULARS

Manufacturer Volkswagen
Model Cc
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1984

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D-21098146MVPC
Cover Note Number -

DRIVER

Name of Driver ADRIAN LIM CHEE BENG (LIN ZHIMING)
NRIC No SXXXX903J

Date Of Birth	12/09/1978
Occupation	Outdoor
Date Of Driving Pass	15/07/1997
Driving experience	24 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97620642
Alt. Phone Number	+65-97620642
Email Address	adrian78@singnet.com.sg
Address	444 JURONG WEST AVE 1 #12-774
Address complement	-
Postcode	640444
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	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle 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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 30/11/2021 AT ABOUT 1140HRS.I WAS TRAVELLING ALONG KIAN TECK AVE.MY VEHICLE WAS STATIONARY AT THE JUNCTION TO CHECK FOR THE ON COMING TRAFFIC. WHEN SUDDENLY VEHICLE C COLLIDED ONTO VEHICLE B AND DUE TO THE HUGE IMPACT CAUSE VEHICLE B COLLIDED ONTO MY VEHICLE.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBE3025J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LU YONGNAN
NRIC No	SXXXX777G
Contact Number	(Phone) +65-92260201
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	GBJ2361T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	ALEX
Contact Number	(Phone) +65-96310470
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	ADRIAN LIM CHEE BENG
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

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 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 lodgment 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:

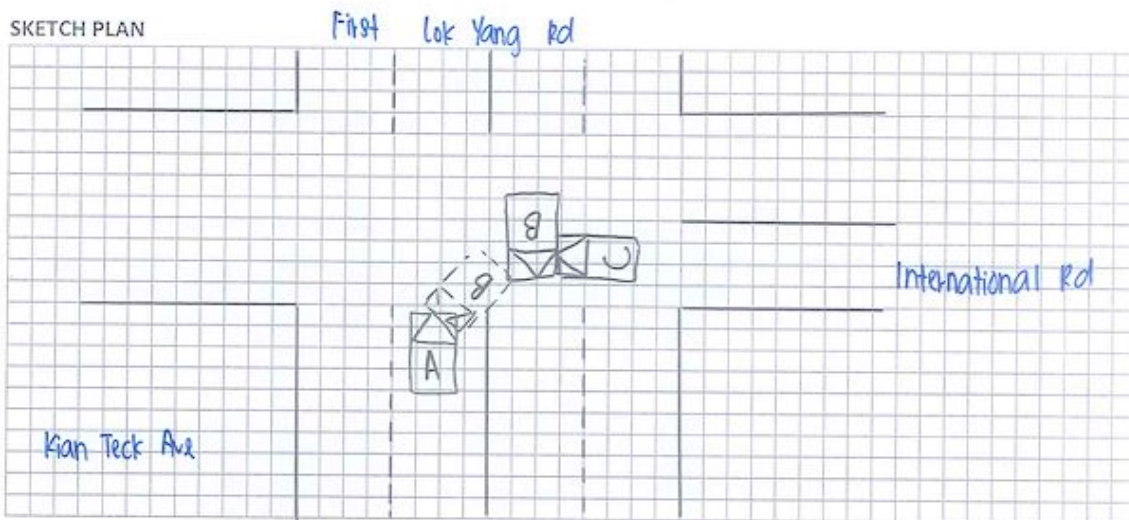
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

 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 20/11/2021 at about 11:40hrs. I was travelling along Kian Teck Ave. My vehicle was stationary at the junction to check for the on coming traffic. When suddenly vehicle C collided onto vehicle B and due to the huge impact cause vehicle B collided onto my vehicle.

DECLARATION

I/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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GIARMC SketchPlanForm_V3

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MS First Capital Insurance Limited Co. Reg. No. 195000106C GST Reg. No. M2-0001676-9
 6 Raffles Quay #21-00 Singapore 048580
 Tel: (65) 6222 2311 Fax: (65) 6222 3547
 Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877
 Tel: (65) 6507 3848 Fax: (65) 6507 3849
www.msfirstcapital.com.sg

CERTIFICATE OF INSURANCE**ORIGINAL**

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)

Type of Policy. : PRIVATE MOTOR CAR INSURANCE
 Type of Cover. : Comprehensive
 Certificate No. : D-21098146MVPC
 Vehicle No / Chassis No : SMD1450C / VVWZZZ3CZGE513148
 Name of Insured : ADRIAN LIM CHEE BENG
 Period Of Insurance : 18.09.2021 To 17.09.2022
 Insured Estimated Value : Market Value At Time Of Loss
 Financial Institution : KENSO LEASING PTE LTD

Excess :

SGD500.00 SECTION I FOR NAMED DRIVER
 SGD700.00 SECTION I FOR UNNAMED DRIVER
 SGD3,500.00 SECTION I & II SEPARATELY IS IMPOSED ON THOSE DRIVERS WHO ARE
 BELOW 22 YEARS OLD AND/OR WHO HAVE LESS THAN 2 YEARS OF DRIVING EXPERIENCE
 ALL EXCESS AMOUNTS ARE SUBJECT TO GST

Authorised Driver*

ADRIAN LIM CHEE BENG, LIM YEN PENG AND LIANG LIP CHIENG

Persons or classes of persons entitled to drive***1) The Insured.**

The Insured may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him or his employer or his partner.

2) Any other person who is driving on the Insured'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 Insured's business.

The Policy does not cover use for hire or reward, racing, pacemaking, 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 the Motor Trade.

* 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.

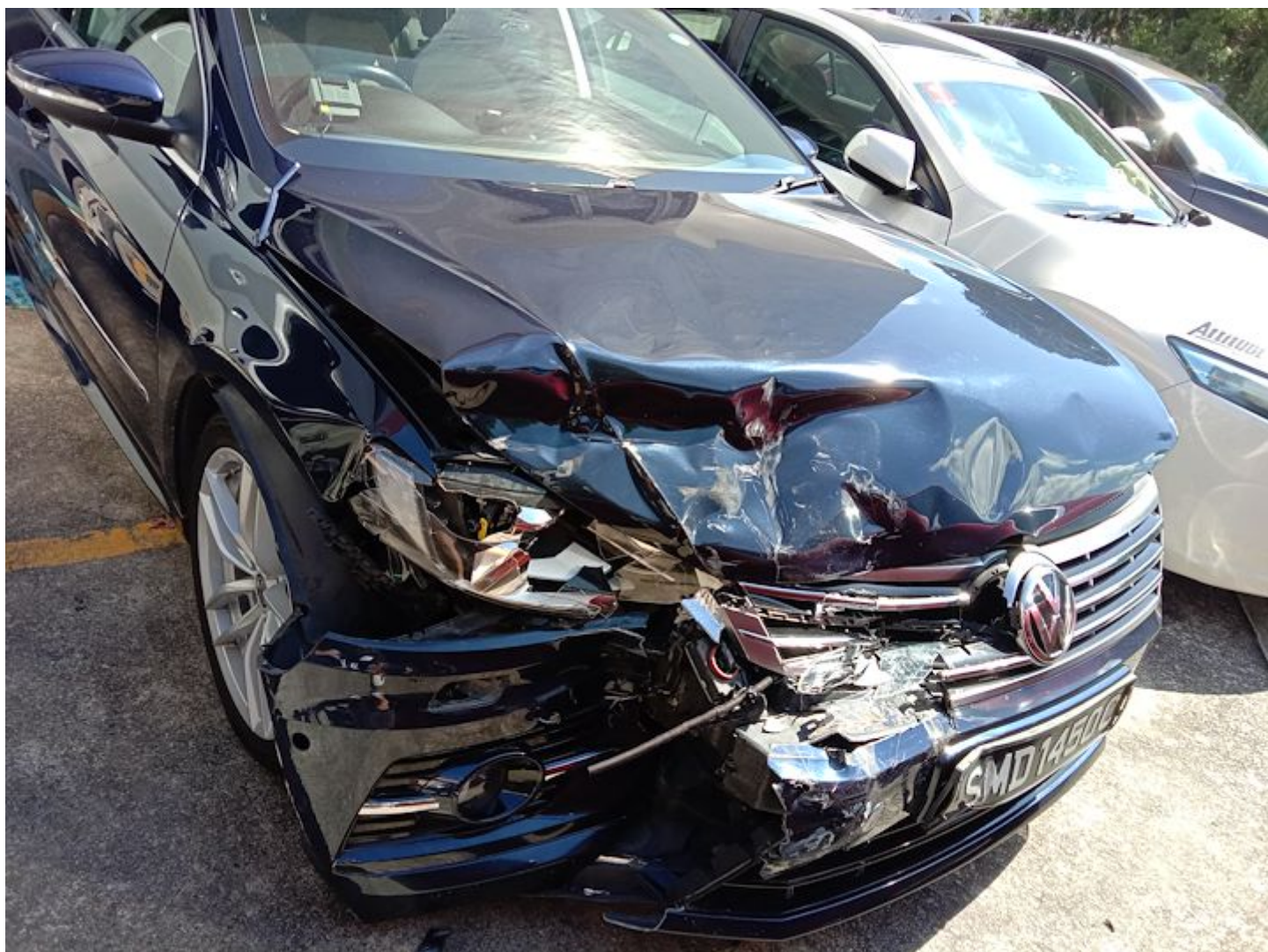
I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

MS First Capital Insurance Limited
 (Approved Insurers)

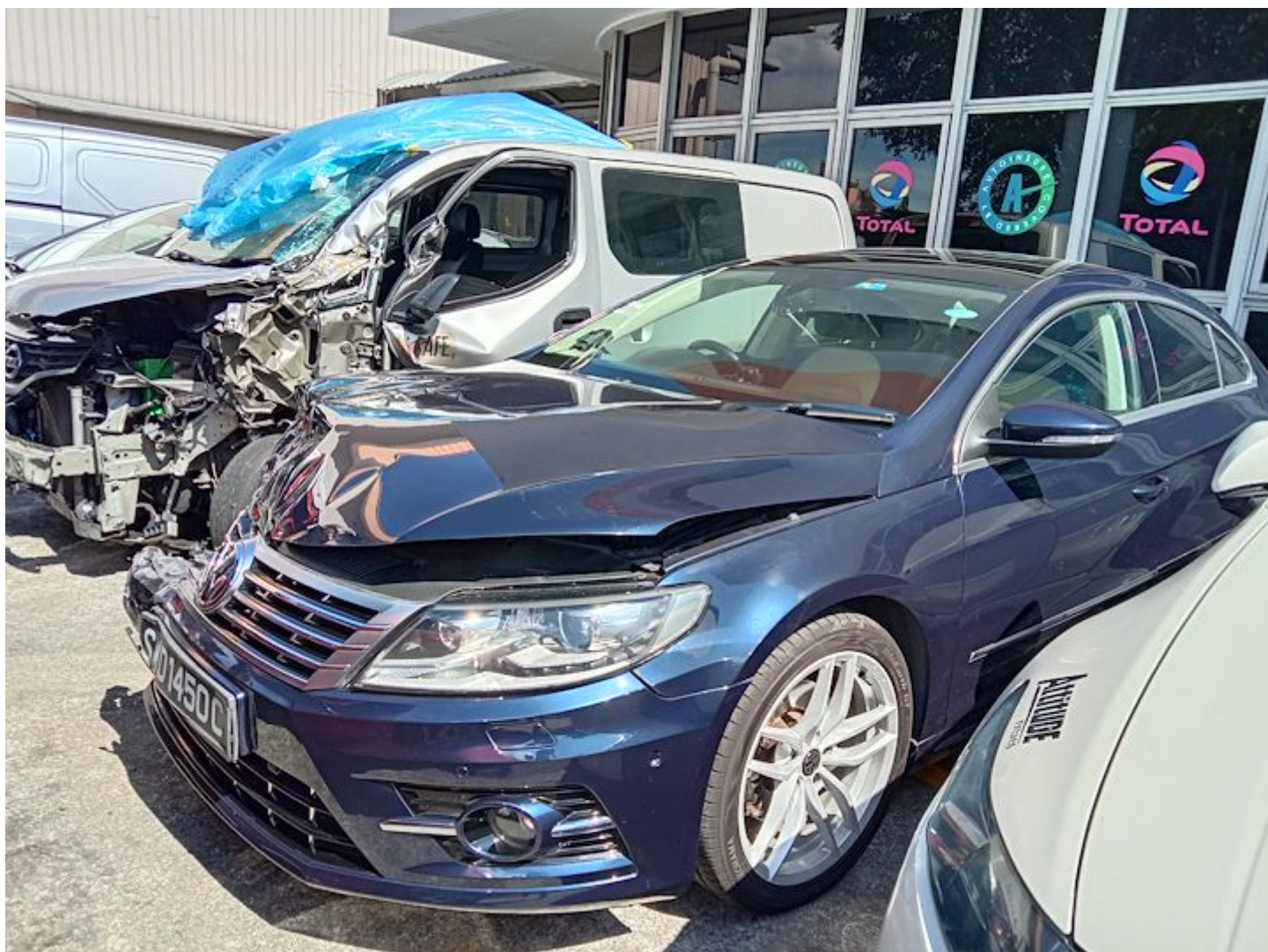
ITHMINAH/D0004/MX1F

Issued at Singapore on 23.08.2021

Authorised Signature



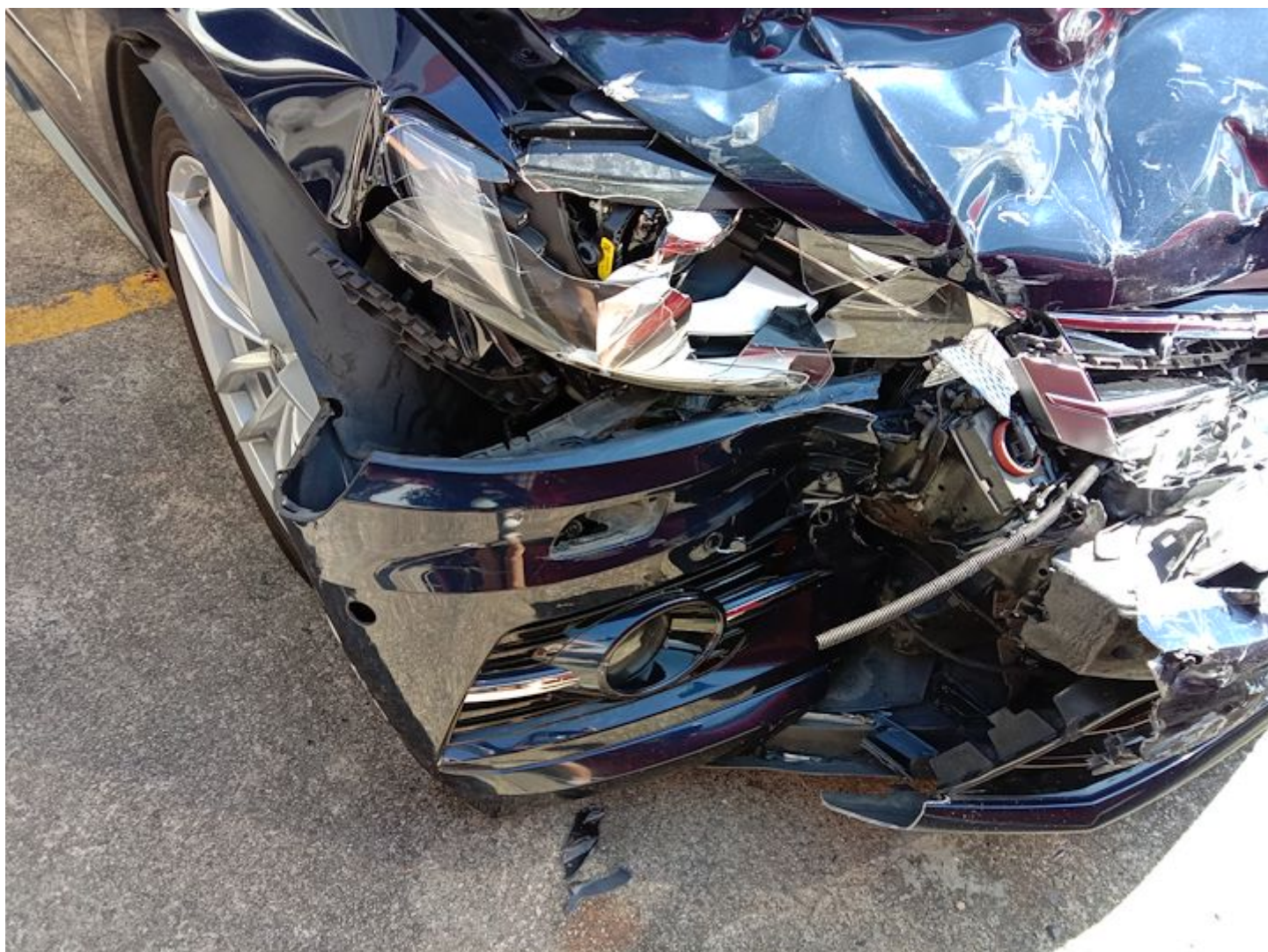




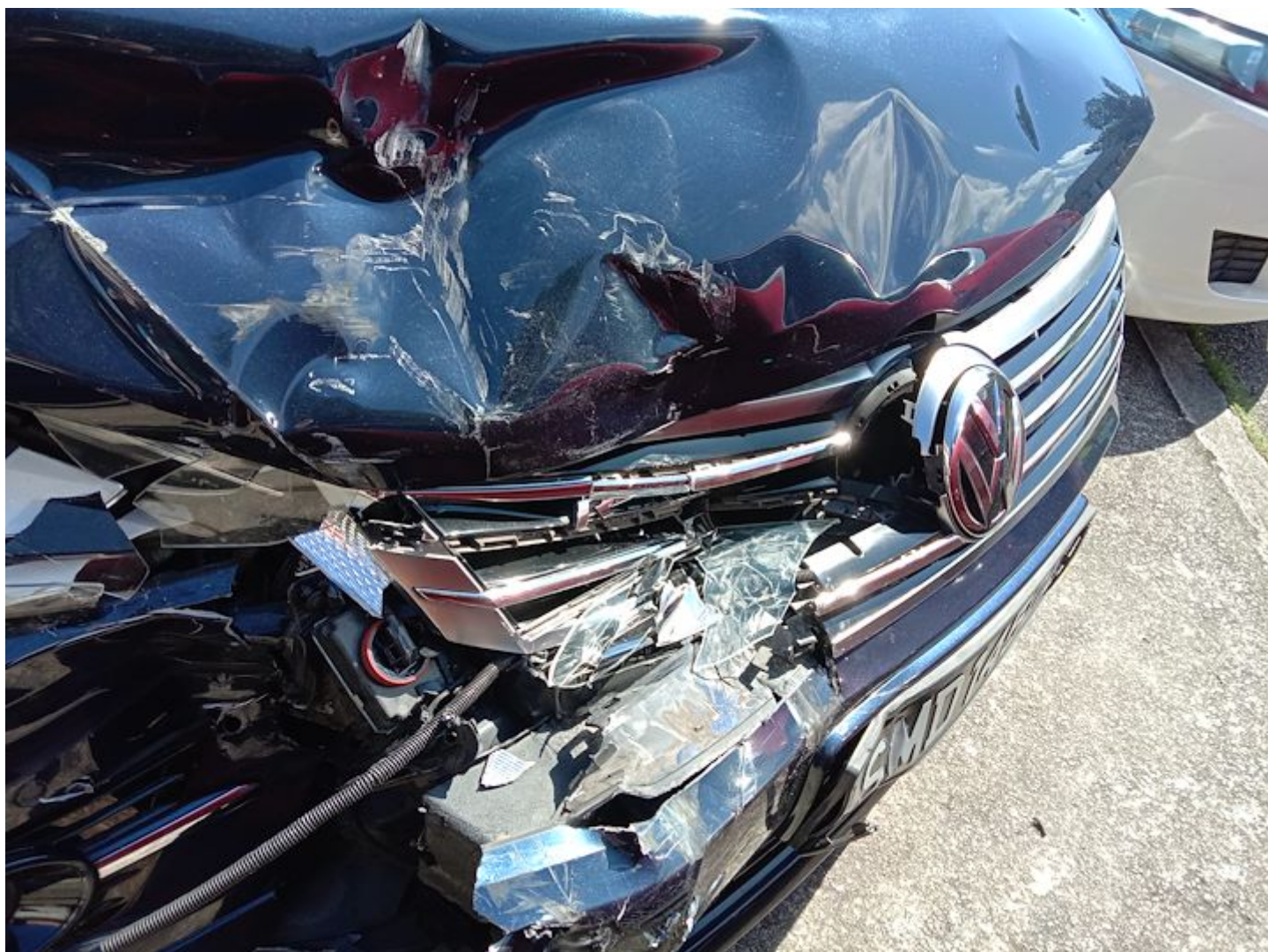


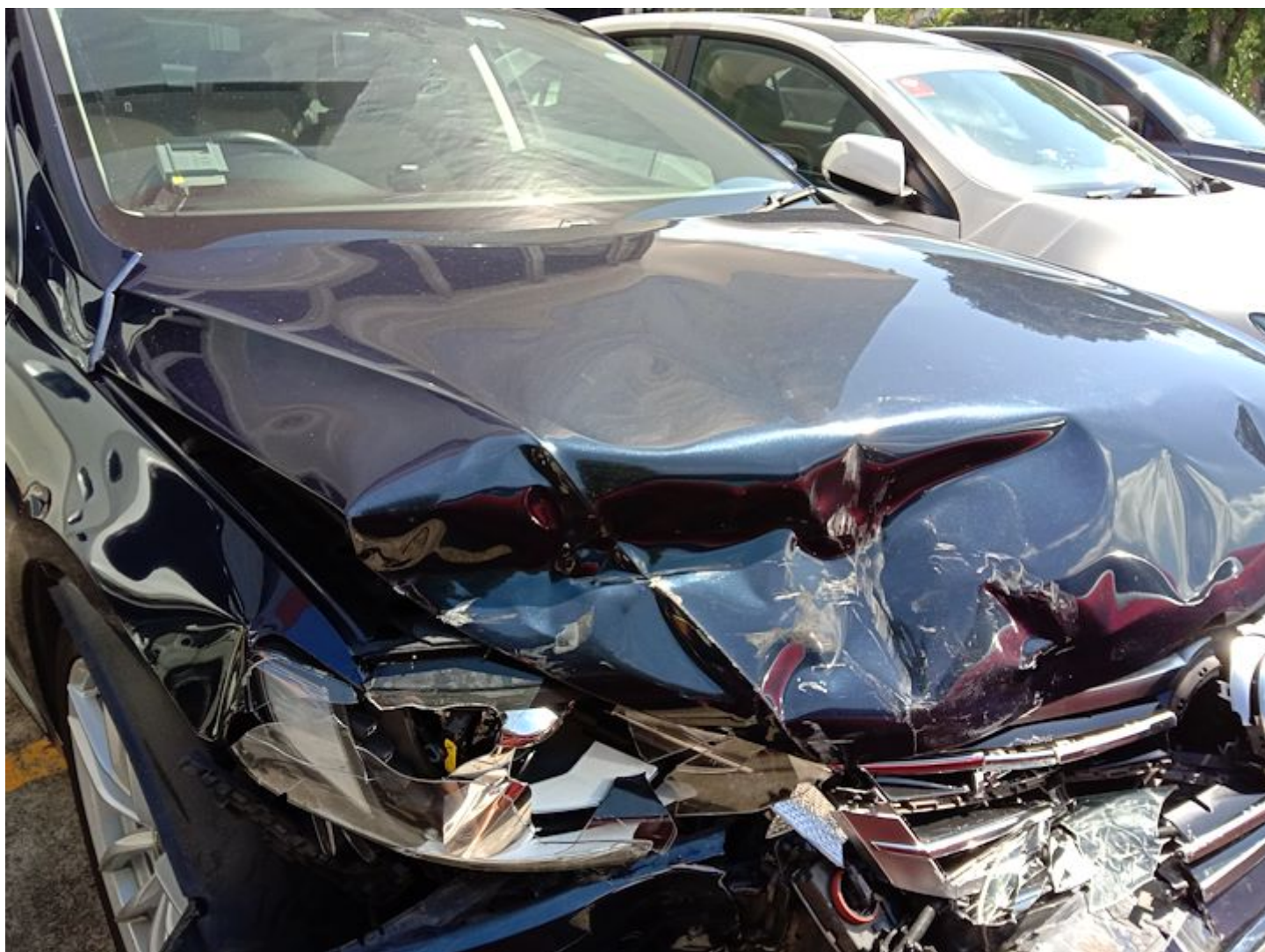


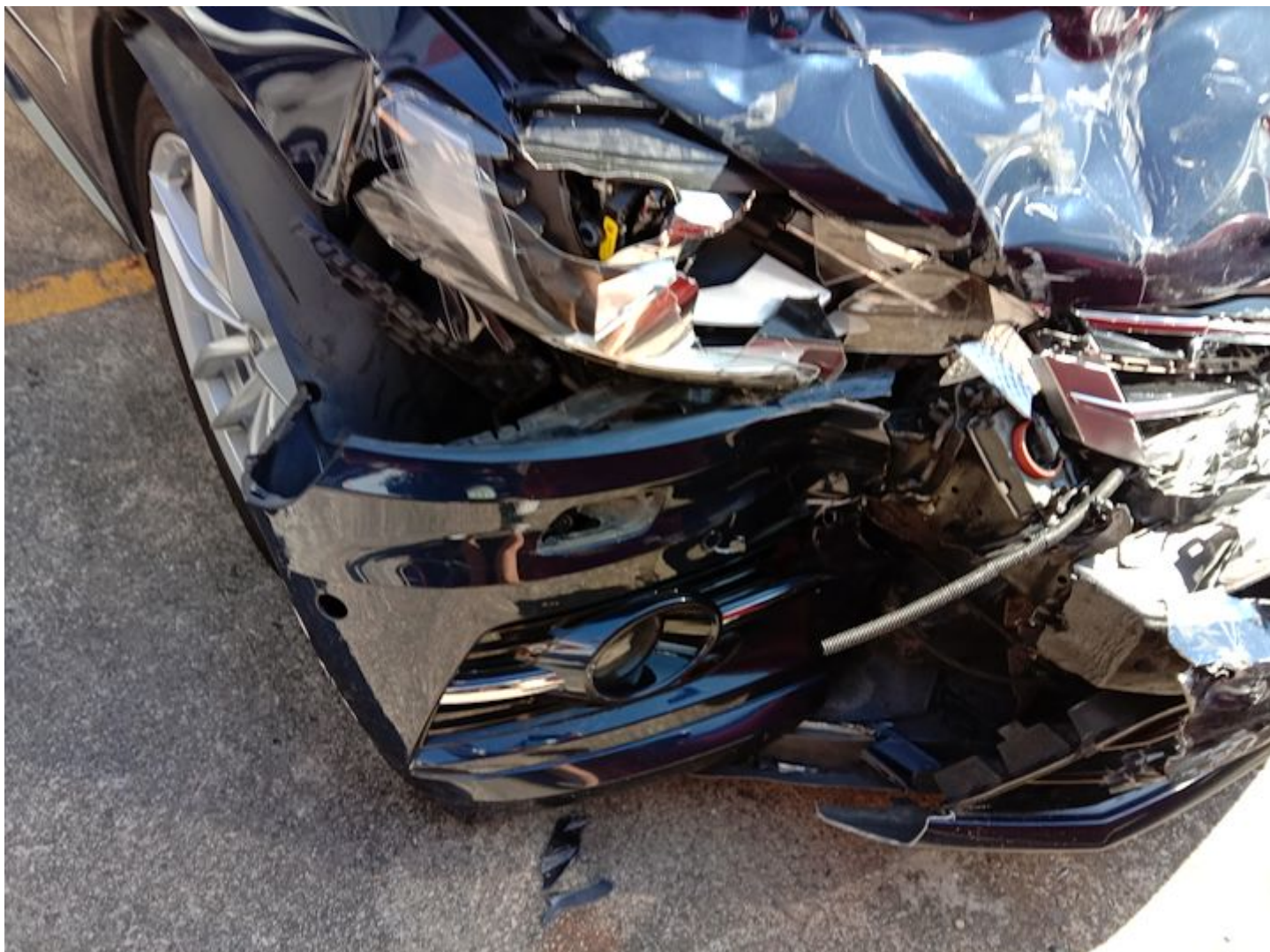


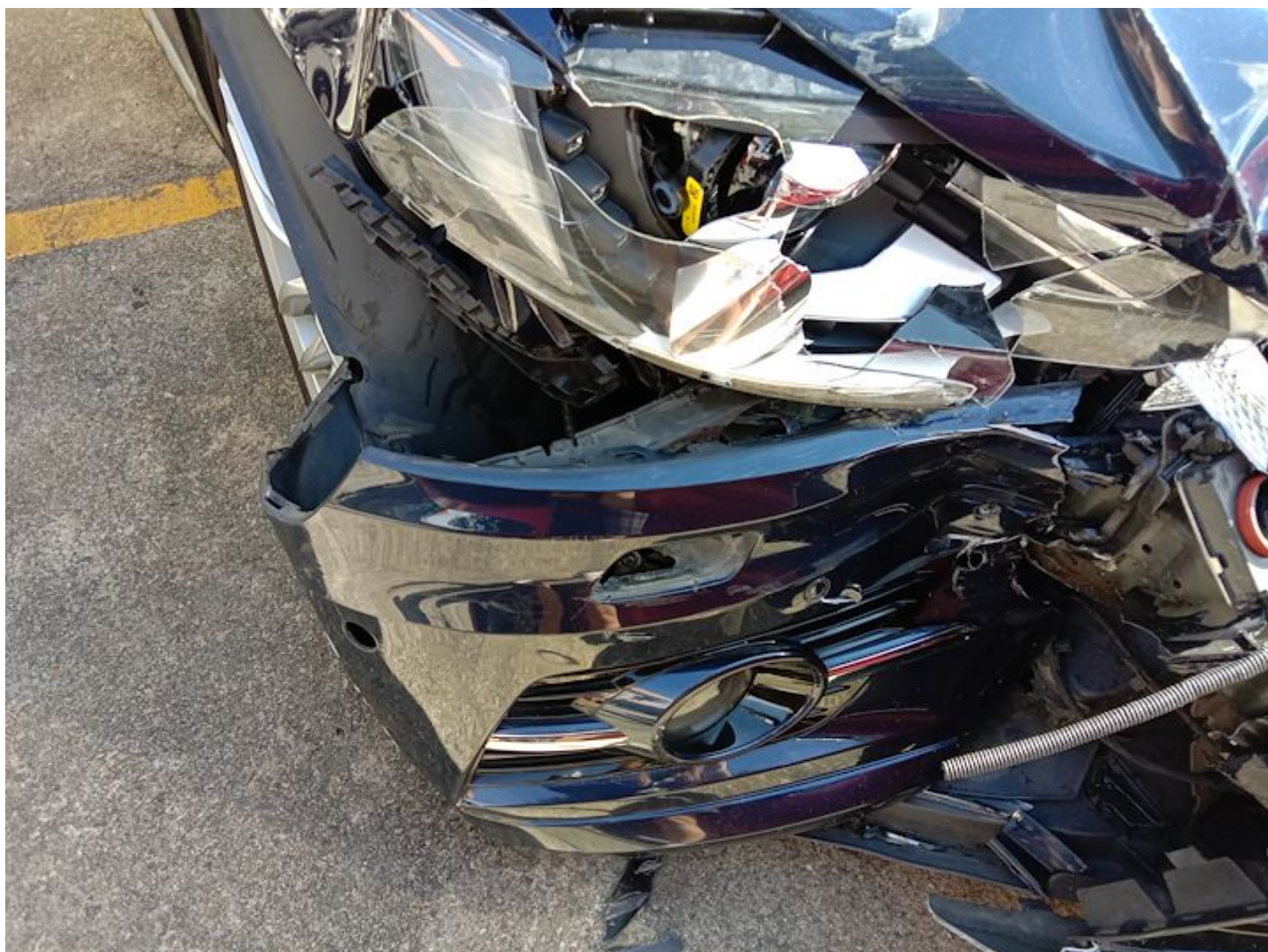






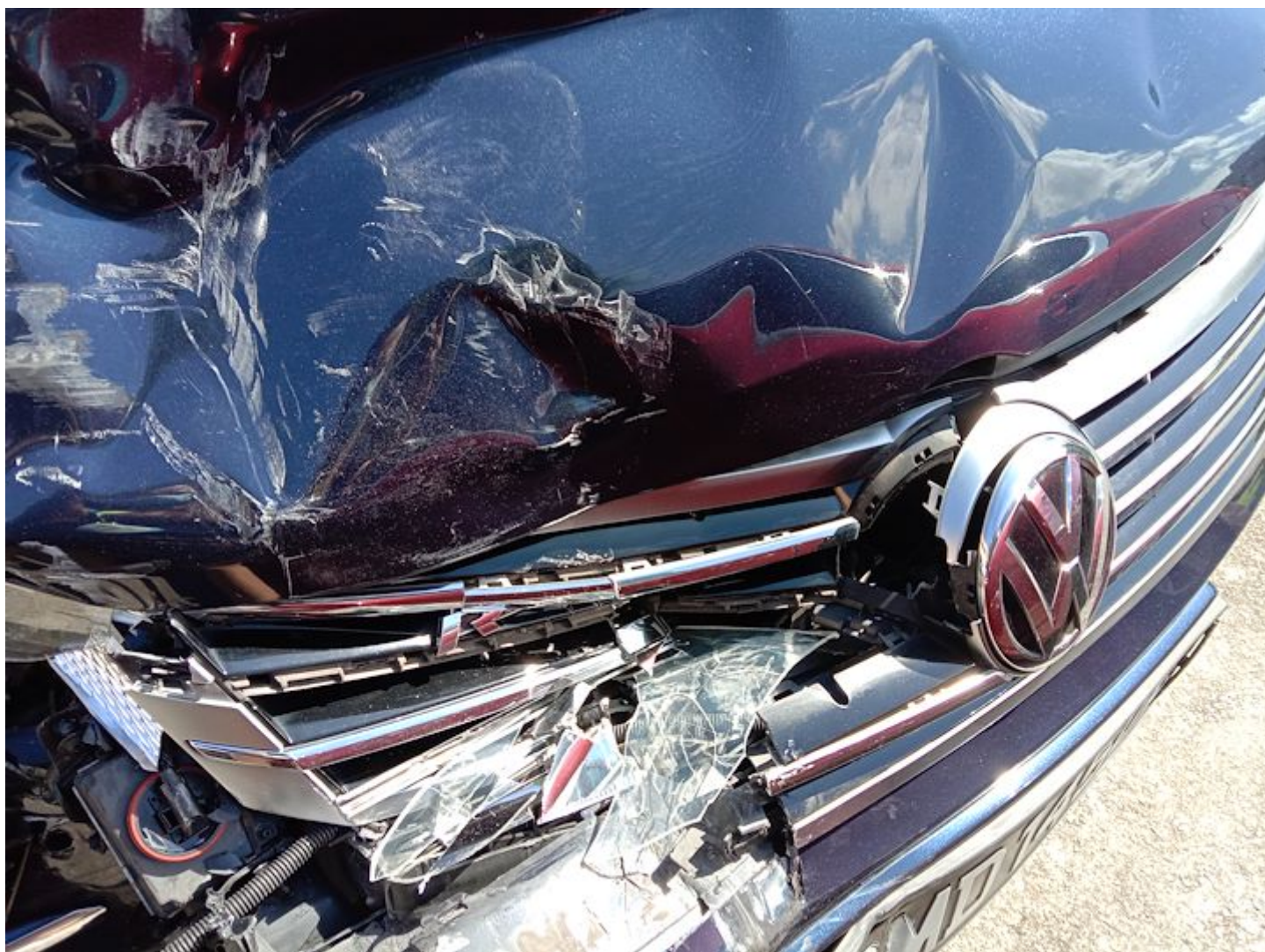
























**SINGAPORE
POLICE FORCE**



T/20211202/7037

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

1 of 4

Report No. T/20211202/7037

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/12/2021 22:29		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ADRIAN LIM CHEE BENG			Address: 444 JURONG WEST AVENUE 1 #12-774 SINGAPORE 640444		
ID Type / ID No.: NRIC NO / S7826903J			Contact No.: Home/Office: Mobile: 97620642		
Nationality: SINGAPORE CITIZEN			Email: ADRIAN78@SINGNET.COM.SG		
Sex: Male	Age: 43	Date of Birth: 12/09/1978	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Sales and related associate professional nec			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/11/2021 11:40	Type of Location: X-Junction
Location: KIAN TECK AVENUE				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Vehicle Stationery at stop line hit by TP from opposite direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBE3025J	Lorry			Silver	Seriously Damaged	1
GBJ2361T	Van					0
SMD1450C	Car	VOLKSWAGO N	CC 2.0 TSI 3584P6	Blue		0



**SINGAPORE
POLICE FORCE**



T/20211202/7037

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

2 of 4

Report No. T/20211202/7037

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD1450C	FIRST CAPITAL INSURANCE LIMITED	D-21098146MVPC	18/09/2021	17/09/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LU YONGNAN		ID No.	SXXXX777G
Related Vehicle	GBE3025J (Lorry)		Contact No.	92260201
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL	
Driver				
Name	ALEX		ID No.	NIL
Related Vehicle	GBJ2361T (Van)		Contact No.	96310470
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL	
Driver				
Name	ADRIAN LIM CHEE BENG		ID No.	S7826903J
Related Vehicle	SMD1450C (Car)		Contact No.	97620642
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	02/12/2021		Date	02/12/2021
No. of Days granted Medical Leave	03	Degree of	Slight	



**SINGAPORE
POLICE FORCE**



T/20211202/7037

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

3 of 4

Report No. T/20211202/7037

CONTINUATION OF REPORT

Brief Details.

ON 30/11/2021 AT ABOUT 1140 HOURS. I WAS TRAVELLING ALONG KIAN TECK AVENUE. MY VEHICLE WAS STATIONARY AT THE JUNCTION TO CHECK FOR THE ON COMING TRAFFIC. WHEN SUDDENLY VEHICLE C COLLIDED ONTO VEHICLE B AND DUE TO THE HUGE IMPACT CAUSE VEHICLE B COLLIDED ONTO MY VEHICLE.



**SINGAPORE
POLICE FORCE**



T/20211202/7037

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

4 of 4

Report No. T/20211202/7037

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
MOHAMMAD ABDILLAH BIN PALIL
Contact No.: 65476246

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
02/12/2021 22:29

Classification Of Case:



m3639

IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SA1A21BU0004 Vehicle Registration No: SMD1450C

Name (as shown in NRIC): ADRIAN LIM CHEE BENG NRIC/FIN/Passport No: 903J

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: _____ Singapore ()

Contact (Tel): _____ Mobile No.: 97620642

Email Address: _____

Date of Accident: 30/11/2021 Time of Accident: 1140HRS


Place of Accident: JUNCTION OF KIAN TECK AVE & INTERNATIONAL RD


Insurance Company: _____

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

TO ATTACH POLICE REPORT


Policyholder / Driver's Signature
Date:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

TAX INVOICE

INV/2022/1567

Date 07/07/2022

Term Net 30

Due On 06/08/2022

Ref No SMD1450C (M3639)

Auto Insure Pte Ltd

UEN 201437380M

GST Reg. No: 201437380M



TO

LONPAC INSURANCE BHD

Tel : +65 62507388

300 BEACH ROAD #17-04/07, THE
CONCOURSE SINGAPORE 199555



6 Marsiling Lane Singapore 739145

#	ITEM	TAX	QTY	UNIT	RATE (S\$)	TOTAL (S\$)
1	Date of Accident 30-Nov-2021	-	1	Unit	0.00	0.00
2	A2. Date of Accident VOLKSWAGEN CC 2.0 TSI 3584P6	-	1	Unit	0.00	0.00
3	Lump sum repair cost: To supply and replace parts, labour charges for repair, panel beating, welding, and spray painting	SR	1	Unit	22,000.00	22,000.00
SUB TOTAL						S\$ 22,000.00
SR @ 7 %						S\$1,540.00
GRAND TOTAL						S\$ 23,540.00

Notes

Payment Details

Payable to : Auto Insure Pte Ltd

Account no.: 617-867569-001(SGD)

Bank Name: Overseas Chinese Banking Corporation (OCBC)

Bank Swift Code: OCBCSGSG

PayNow UEN: 201437380M

Please note that Bank Charges are to be borne by Remitter.

Terms and Conditions are as per <http://www.autoinsure.com.sg/dataprivacy/>

<http://www.autoinsure.com.sg/>

This is a computer-generated invoice and no signature is required.



6 MARSILING LANE
SINGAPORE 739145
T: (65) 3157 2626
F: (65) 8783 2626
AUTOCNLSG@GMAIL.COM
AUTO CREDIT LEASING (53375986B)

INVOICE

DATE	31-Dec-21
INVOICE NUM	ACL11526
REF NUM	RA11526
PAYMENT TERMS	COD

CUSTOMER INFO

AUTO INSURE PTE LTD
6 MARSILING LANE
SINGAPORE 739145
ATTN: ACCOUNTS DEPARTMENT

REMARKS

DRIVEN BY : ADRIAN LIM CHEE BENG
YOUR REF : SMD1450C

DESCRIPTION	DAYS	UNIT PRICE	AMOUNT
RENTAL CHARGES HYUNDAI AVANTE -SML5101S RENTAL FROM : 30 NOV 2021 - 30 DEC 2021	30	\$120	\$ 3,600.00
			SUBTOTAL \$ 3,600.00
			TOTAL DUE \$ 3,600.00

Please make all cheques payable to:

AUTO CREDIT AND LEASING

AUTO CREDIT AND LEASING ACCOUNT NUM:
712-59327-6001 - OCBC CURRENT OR
PAYNOW TO UEN 53380847B

THANK YOU FOR YOUR BUSINESS

This is a computer generated document.

No signature is required.


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

GBE3025J

Date of Accident

30/11/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **Lonpac Insurance Bhd**

Period of Insurance **29/06/2021 - 28/06/2022**

Requested By **NGIAW JIE LING (Auto Insure P...**

Requested Date **30/11/2021 16:38**

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**



PRINCE TOWING SERVICES

CO REG NO: 53405980E

PRINCETOWING.SERVICES@GMAIL.COM / +65 9232 7993



NO. 4763

DATE: 30/11/21



M/S

VEHICLE NO

FROM

TO

REMARKS

Autoinsure M669

SMD 1450 C

International Rd

6 Marsiling Lane

96331475

MODEL

CALL TIME

TIME ARRIVAL

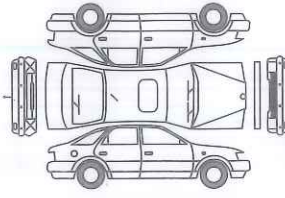
ARRIVAL WORKSHOP

VW

1205

1240

1345



☐ CHANGE TYRES/PATCH TYRES ☒ ACCIDENT

☐ BASEMENT/MULTI CARPARK

☐ USING KING DOLLEY

☐ USE CAR CARRIER

☐ LOW BODY KIT/LOW SPOILER

☐ DISMANTLE BRAKE/SHAFT

☐ LOADED

☐ JUMP START

☐ CRANE UP/WINCH OUT

AMOUNT S\$

50.1

△

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