

# TwinCar AUTOMOTIVE PTE LTD

Company Registration and GST No. 200714616M

2 Kaki Bukit Avenue 2 #01-17/#01-18 /Heavy Vehicle #01-08/Spray Painting #02-27

Kaki Bukit Autohub Singapore 417921

Tel: 67440510

Fax: 67410510

Email: sales@n51.com.sg

15 August 2022

Our Ref : CLM15396 / GBK3611K / DEC-25/2021

**AXA INSURANCE PTE LTD**

ROBINSON ROAD

P.O.BOX 1094

SINGAPORE 902144

**ATTN: MOTOR CLAIMS DEPARTMENT**

Dear Sir @ Madam,

**RE: ACCIDENT INVOLVING GBK3611K & SMA5280R ON 23/12/2021**

**ALONG TPE TWDS SLE EXIT PUNGGOL WAY JUNC SENGKANG EAST RD**

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SMA5280R** whose vehicle was insured with you at the material date of the accident.

We are proposing for a direct settlement on the claims as following EXCLUDE personal injury in respect of claim arising out of the above mentioned accident.

Cost of repairs	\$	2,033.00	(Include 7% GST)
Loss of rental	\$	642.00	(\$160.50 X 4 Days)
Additional 2 days loss of use for pre repair	\$	200.00	(\$100 X 2 Days)
Towing Fee	\$	100.00	
LTA search fee	\$	7.45	
	S	\$	<u>2,982.45</u>

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM15396
- 2) Chiang Kang Enterprises Co (Pte) Ltd - Invoice No: 93879
- 3) Autobay Towing - GBK3611K (receipt attached)
- 4) LTA search
- 5) Letter of Authorisation
- 6) GIA report of GBK3611K

We look forward to your prompt reply.

Yours faithfully,



.....  
**Twincar Automotive Pte Ltd**

S.Y.NEO

Director

P.I.C - Melody Chin

Reply to :huixin@n51.com.sg

# TwinCar AUTOMOTIVE PTE LTD

Kaki Bukit AutoHub  
2 Kaki Bukit Ave 2  
#01-17 / #01-18 / Heavy Vehicle #01-08 / Spray Painting #02-27  
Singapore 417921  
Tel No. : +65 6842 0051 Fax No. : +65 6741 0510  
E-Mail : sales@n51.com.sg  
Company Reg. No. : 200714616M  
GST Registration No. : 200714616M

AXA INSURANCE PTE LTD  
ROBINSON ROAD  
P.O.BOX 1094  
SINGAPORE 902144

## TAX INVOICE

Date : 04/08/2022  
Date in : 27/12/2021  
Vehicle Num. : GBK3611K  
Make/Model : NISSAN NV200 1.6 (A) PETROL-2019  
Chassis/Eng# : JN1YAAM20Z0000522/HR16158295D  
Accident Date : 23/12/2021  
Claim No : CLM15396  
Reference : DEC-25/2021  
Policy No. : DMCVSNW00056692100

LUMPSUM REPAIR BILL  
REF : CLM15396-TWINCAR DATED 28/12/2021  
BY DIRECT

Amount S\$  
1,900.00



E. & O.E.	Sub S\$ :	1,900.00
	Add GST ( 7% ) S\$ :	133.00
	Total Amount S\$ :	2,033.00

for TWINCAR AUTOMOTIVE PTE LTD





# 長江企業(私人)有限公司

## Chiang Kang Enterprises Co. (Pte.) Ltd.



1995 - 2003

### TAX INVOICE

No. 4 Petain Road, Petain Court Singapore 208086 Tel: 6298 1936, 6294 0246 Fax: 6298 3864

### RENTAL OF CARS, VANS, PICK-UPS & LORRIES

出租：汽車、廣告車、必甲與輕重型羅厘

GST Reg. No. 19-8304039-K

I/We

WINNIE MAK SERVICES

### HIRER'S PARTICULARS

If Different From

of

BLK 574 HOUGANG ST 51

#04-01

S 530574

Tel: 9673 2483

hereinafter called "the Hirer" hereby confirm having agreed to hire this day from CHIANG KANG ENTERPRISES CO. (PTE.) LTD. hereinafter called "the Owner" the undermentioned Vehicle at the rental fees as shown below and I further agree that I shall be held responsible for:-

#### a) THIRD PARTY ONLY MOTOR VEHICLE COVERAGE

the Excess which is the maximum amount of \$1500/= to cover for any third party damage or injury claims and also bear the full cost of any damage caused to the hired Vehicle resulting from any single accident including loss from inability to let the same Vehicle out on hire or loss resulting from theft and destruction of the Vehicle.

#### b) COMPREHENSIVE MOTOR VEHICLE COVERAGE

the Excess which is the maximum amount of \$2000/= for any damage caused to the hired Vehicle from any single accident or any loss resulting from third party damage claim, injury claim, theft or destruction of the Vehicle.

c) Only persons above 24 years of age with more than 2 years driving experience, authorised licensed and signing this agreement may drive the vehicle. whether or not such damage or loss is by person/persons known or unknown to me or by negligence or any breach by me of the Terms and Conditions of Hire, hereinafter mentioned and printed at the back hereof:

Vehicle Regn No. 車輛註冊號碼		GBL 5044 D		Rental Agreement 合同號碼 No. A 93879	
Section 1 Hirer's And/Or Driver's Particulars 租車者/駕駛員個人記錄				租出日期及時間	
姓名 Name: MAK SAW LENG				Date & Time OUT 27/12/21 - 1055HRS	
地址 Address: AS ABOVE				交車日期及時間	
				Date & Time IN 31/12/21 - 1030HRS	
				Chargeable	Rates Amount
				4	天 Days @ \$ 8600/-
					星期 Weeks @ \$
					月 Month @ \$
居民證/護照號碼 I/C No./Passport No: S68705254		駕駛執照號碼 Driving Licence No: S 68705254			
居民證/護照種類 Type of I/C/Passport:		Pass 日期 Pass Date: 12/09/1990			
出生日期 Date of Birth: 08/08/1968		發出地 Place of Issue:		ADD 7% GST 842/-	
三號保險底金 \$1500/=		一號保險底金 \$2000/=		送車/費 Delivery Fees	
a) Third Party Only Policy Excess \$1500/=		b) Comprehensive Policy Excess \$2000/=		總計 Total Charge 8642/-	
車輛必須歸還車主於 Vehicle Must Be Returned To Owner's Office By:					
備註與付款記錄 Remarks & Payment Records				按金 Security Deposit	
				總金額 Total Payable 8642/-	
				來銀 Amount Paid	
				收車費用 Collection Fees/Misc.	
				超過/小時 Extra Hours @ \$	
出車油箱 Fuel Tank OUT		出車油箱 Fuel Tank IN		租費不包括汽油 Rates Do Not Include Fuel	
E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F		添油 Refuelling	
車牌號碼 Vehicle No: 1)		起 From:		至 To:	
車牌號碼 Vehicle No: 2)		起 From:		至 To:	
工具 Tools		輪胎 Spare Tyre		裝飾品 Accessories	
車輛發出人 Vehicle Issued By:		車輛接收人 Vehicle Collected By:		加額費用 Total Additional Charges	
NOTE: 註				總計 Grand Total	
租車者或司機必須付所有停車及違反交通法例負起一切的責任。 HIRER AND/OR DRIVER IS LIABLE FOR ALL PARKING AND TRAFFIC VIOLATIONS.					

租車者不准載沙或石灰 HIRER MUST NOT CARRY SAND AND CEMENT ON THE VEHICLE

我/我們同意以上及後頁租車公司所列的條規與條件。 I/We have read and hereby agree to the terms and conditions on both sides of this rental agreement.

WINNIE MAK SERVICES

CO REG NO : B53414140D PAX: 01

日期 Date:

27/12/2021

租車者簽名

Signature of Hirer:

李秀蓮



(TWINCAR)

**AUTOBAY TOWING**

1 Kaki Bukit Avenue 6  
#01-55 AutoBay @ Kaki Bukit  
Singapore 417883  
Tel: 9616 8988 (Ah Boon)

**CASH SALE**

No. \_\_\_\_\_

Date: 24/02/21

Sold to: \_\_\_\_\_

GBK 3611 K

Item	Quantity	Description	Unit Price	Amount
		Auto Hub to Ubi <u>etc</u>		<u>\$100</u>
		Reporting Two Trips		
E. & O. E.			Sub Total :	
			GST Tax :	
			Total :	<u>\$100</u>

Issued by: \_\_\_\_\_

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 24 Dec 2021 / 11:37:56

Receipt Date/Time : 24 Dec 2021 / 11:37:56

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-211224-001146

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SMA5280R

As at 23 Dec 2021/12:00:00

Insurance Co: AXA INSURANCE PTE LTD

1	Insurance Enquiry - SMA5280R Enquiry Fee 20211224113740264778	7.00	0.49	7.49
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<b>Sub-Total</b>	7.00	0.49	7.49
<b>Total Before Rounding</b>	7.00	0.49	7.49
<b>Rounding Difference</b>			-0.04
<b>Total Amount Payable</b>			7.45

<b>Paid By</b>			
6xbavf9c	Credit Card		7.45
<b>Total</b>			7.45
<b>Cash Change</b>			0.00
<b>Tendered Amount</b>			7.45
<b>Excess Refundable Amount</b>			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.

# LETTER OF AUTHORISATION

To: M/s Twincar Automotive Pte Ltd  
Singapore

RE: ACCIDENT INVOLVING VEHICLE NOS:

GBK 3611K

&

SMA 5280R

ALONG

TPE TMS SEE EXM PINGCOL WAY JUNG SENGKANG EAST RD

ON

23/12/2021

I/We

WINNIE MAK SERVICES

NRIC/Passport No:

53414140D

of

BK 574 HOUGANG ST 51 #04-01 S15305741

the owner of vehicle no.

GBK 3611K

hereby authorise you to commence repair to the said vehicle forthwith. In consideration of you repairing my/our vehicle at my/our request.

- a) I/We hereby irrevocably authorise you to demand claim settle receive whatever amount settled/payable by the insurance and/or third party or to commence legal proceeding, if necessary, in my name, for the costs of repair and loss of use, etc and to you appointing any Solicitor to act for me in respect of the accident' claim and all an any amount claimed, received and/or settled shall belong absolutely to you. I/We agree to assign the whole proceeds of my/our third party claim to you and my/our Solicitors (to be appointed by you on my/our behalf) shall accept this as my/our irrevocable authorisation to pay the amount compensated direct to you after deduction of their costs on a Solicitor & Client basis. I/We undertake to co-operate fully with you and my/our Solicitors to see the claim to a successful conclusion.
- b) If the third party claim is unsuccessful or in your discretion inappropriate for any reason, I/we hereby instruct and authorise you to claim direct from my/our insurance company on my/our behalf for all monies due to you. I undertake to pay you for the Excess applicable under my policy and to reimburse you all costs, fees and expenses incurred by you in pursuing the claim on my behalf.
- c) If the own insurers' claim is not applicable and/or the third party claim fails and/or either of the aforesaid is inadequate, I/we underake to pay you for your expenses, costs and fees immediately.

I/We also irrevocably authorise you to sign all discharge vouchers/indemnity forms and all necessary papers in connection with the above claim in my/our absence. I/We irrevocable authorise you to appoint such a firm of Solicitors on my/our behalf as you shall deem fit for the purpose of the third party/own insurer's claim.

I/We undertake to inform you and/or the Solicitors appointed by you on my behalf in the event the third party's insurance company communicate with me/us directly, orally or in writing and I/we further undertake not to accept any monies or offer of settlement from the third party's insurers without first communicating with you and obtaining your consent.

Upon settlement of the third party claim and in case the settlement monies was sent to me/us by the third party's insurers, I/we undertake to pay you and my/our solicitor the cost of repairs settled and related expenses and disbursement incurred.

My/Our insurer is/are

CHINA TAIPING

Policy No.

DMCVSNW00056690100

Expiry Date:

16/06/2022

Date:

Excess:

**WINNIE MAK SERVICES**

CO REG NO: B53414140D PAX: 01

Owner's Signature/Co's stamp (if applicable)

21532

Witness Signature/Name

[Signature]

Provide always that this discharge of my claim for damages relating to the damage to my vehicle shall not prejudice or affect or preclude me from making a further claim for general and special damages for my personal injuries sustained in the same accident.



## 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	24/12/2021 10:00 (SGT)
Date of Accident	23/12/2021 12:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TPE TWDS SLE EXIT PUNGGOL WAY JUNCT OF SENGKANG EAST RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK3611K
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	WINNIE MAK SERVICES
Company Reg No	53414140D
Email Address	winni3mak68@hotmail.com
Mobile Phone No	(Phone) +65-96732483
Alternative Phone No	+65-96732483

### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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	Commercial vehicle
Transmission	Auto
CC	1600

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00056692100
Cover Note Number	-

### DRIVER

Name of Driver	MAK SAW LENG
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NRIC No	S6870525H
Date Of Birth	08/08/1968
Occupation	Outdoor
Date Of Driving Pass	17/09/1990
Driving experience	31 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96732483
Alt. Phone Number	-
Email Address	winni3mak68@hotmail.com
Address	BLK 574 HOUGANG ST 51
Address complement	#04-01
Postcode	530574
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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	Side Swipe
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?	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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH WORKSHOP
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMA5280R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LOW CHER CHAI
Contact Number	-



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	MAK SAW LENG
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	GBK3611K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## 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.
3. Information provided must be as truthful and accurate as possible. Any willful 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 GI& Records Management Centre established by the General Insurance Association of Singapore (GI&A) 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.

### 6 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 (GI&A) may be 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 be 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 GI&A 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.

**WINNIE MAK SERVICES**

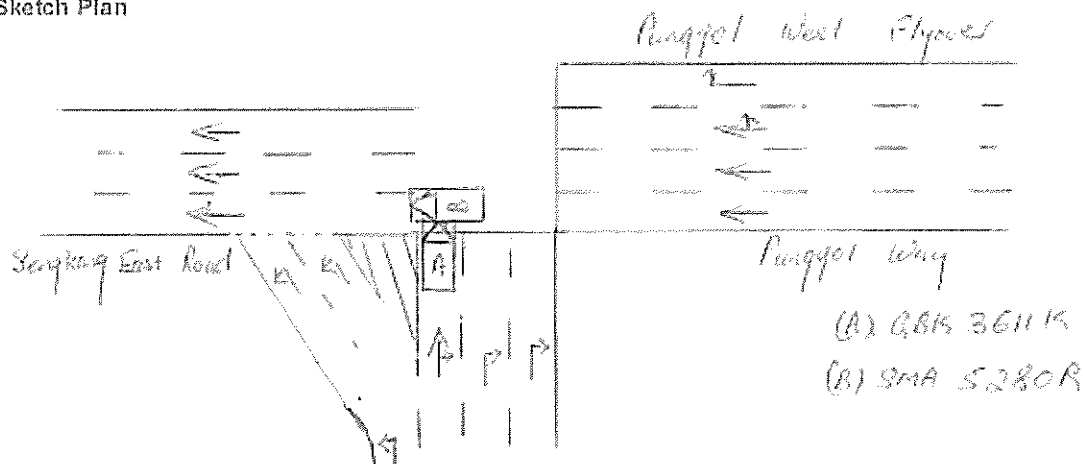
CO REG NO : B53414140D FAX: 01

Policyholder's Signature / Date / Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 23/12/2021 at @ 1200 hrs, I was travelling in my vehicle (GAB 3811K) along TPE towards SAE direction exit into Punggol way on the extreme left lane. While approaching the junction of Punggol way the traffic lights was green on my floor and I proceed to straight and wanted to turn right into Punggol way. Suddenly, a car (SMA 5580R) on my right travelling along Punggol way towards Shinglung East Road beat the red light and collided onto the front portion of my vehicle.

Declaration

We declare the foregoing particulars are true in every respect

WINNIE MAK SERVICES

CO REG NO: B53414140D PAX: 01

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel