



**WITHOUT PREJUDICE**

Our Ref: CB 6707J

Your Ref: SLX 6788C

22<sup>nd</sup> January 2022

**ATTN:** LKK Auto Consultants Pte Ltd  
**INSURER:** AIG Asia Pacific Insurance Pte Ltd

Dear Jaslin,

**Accident Involving:** CB 6707J and SLX 6788C

**Date of Accident:** 27 December 2021

**Location of Accident:** AYE towards City

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

Cost of Repair Inc. GST	\$	8,506.50	\$7950 COR + \$556.50 GST
TOTAL LOR/U DAYS		17 DAYS	2 Days PRS & Resurvey (28/29 Dec) + 12 Repair Days Agreed + 1 PH (1 Jan) + 2 Sunday (2/9 Jan)
Add Loss of Rental	\$	1,750.00	7 Days - Inv#T684/01
Add Loss of Use	\$	1,500.00	10 Days
Total	\$	11,756.50	
Add LTA Search Fee	\$	7.45	
<b>GRAND TOTAL</b>	<b>\$</b>	<b>11,763.95</b>	

Kindly pay the Grand Total Amount of **\$11,763.95** 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.  
  
TEAM AUTO PRO PTE. LTD.  
Reg no: 201811621K

Regards  
Adel (Ms)

# PROFORMA INVOICE

**ATTENTION:**

Tan Ching Shew

PI Number	P2201-2515
PI Date	22-Jan-2022
Vehicle No.	CB 6707J
Accident Date	27-Dec-2021

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. CB 6707J	COR Lump Sum		\$ 7,950.00

**Notes:**

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

Total Amount	\$	7,950.00
GST 7%	\$	556.50
GRAND TOTAL AMOUNT	\$	8,506.50

Authorized Signature



# Theng Lee Meng

160 Sin Ming Drive Sinming Autocity #01-12 Singapore 575722

Tel : 91074212 Fax : 64523936

Email : msmts@singnet.com.sg

Co Reg No. : 07125200B

## Invoice

**Tan Ching Shew**

**Blk 28B Dover Crescent**

**#27-35**

**Singapore 132028**

Inv No. : T684/01

Date : 3-Jan-2022

Amount

Month :

January 21

Being Service renterend Cb6707J

28/12/21-03/01/22

\$250/day

7 days

\$ 1,750.00

Total \$ 1,750.00

CHEQUES SHOULD BE MADE PAYABLE TO;Theng Lee Meng

UOB 3143117691

Paynow :07125200B

JOANN TAN

THENG LEE MENG  
160 01-12  
SIN MING DRIVE  
(575722) 91074212

## RENTAL AGREEMENT

<b>HIRER'S PARTICULAR</b>		<b>Vehicle No / Model</b>		<b>Rental Vehicle No / Model</b>																	
Name: <u>Tan Ching Shew</u>		<u>CB6707J</u>		<u>PA5050C</u>																	
NRIC/Passport No: <u>815411286</u>		Date / Time Out: <u>28/12/21 1400</u>		Date / Time In: <u>03/01/22 1300</u>																	
Driving Licence No: <u>815411286</u> Exp: <u>-</u>		<div style="text-align: center;">Fuel Tank Level</div> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <b>OUT</b>  </div> <div style="text-align: center;"> <b>IN</b>  </div> </div>																			
Address: <u>Blk 28B Dover Crescent</u>																					
Tel: <u>9830789</u>																					
<b>ADDITIONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)</b>		<b>RENTAL CHARGES</b>		<b>TOTAL \$S</b>																	
Name: <u>Tan Chee Kwang</u>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Hour</td> <td>@</td> <td></td> <td>per hour</td> </tr> <tr> <td>7 Days</td> <td>@</td> <td><u>250</u></td> <td>per days</td> </tr> <tr> <td>Weeks</td> <td>@</td> <td></td> <td>per week</td> </tr> <tr> <td>Months</td> <td>@</td> <td></td> <td>per month</td> </tr> </table>		Hour	@		per hour	7 Days	@	<u>250</u>	per days	Weeks	@		per week	Months	@		per month	<u>1750</u>	
Hour	@				per hour																
7 Days	@			<u>250</u>	per days																
Weeks	@				per week																
Months	@				per month																
NRIC/Passport No: <u>814796781</u>																					
Driving Licence No: <u>814796781</u> Exp: <u>-</u>																					
Address: <u>Blk. 103B Depot Rd #16-537</u>																					
Tel: <u>102103</u>																					
<div style="text-align: center;">(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES</div>		Additional Payable: <u>-</u>																			
		SUBTOTAL Payable: <u>1750</u>																			
		<b>DEPOSIT AMOUNT PAID</b>		<b>DEPOSIT AMOUNT REFUNDED / Date</b>																	
		<u>\$ 250</u>		<u>28/12/21</u>																	
		<b>Mode of Payment</b>		<u>Cash.</u>																	
<b>ADDITIONAL REMARKS</b>																					
<b>Physical Damage Excess</b>		<b>Acknowledgement</b>		<b>HIRER'S DECLARATION:</b> I/WE agree to the terms and conditions above and as set overleaf and declare that all information given on this form are true and accurate. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amounts due on the rental to my/our account.																	
Singapore - Own Damage <u>\$2,500</u>				<div style="text-align: center;"> <b>HIRER Signature / Date</b>    <u>THENG LEE MENG</u>  <u>180 01-12</u>  <u>91074212</u>  <u>(575722)</u> </div>																	
Singapore - 3rd Party Damage <u>\$2,500</u>																					
Malaysia ( If applicable) <u></u>																					
For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age <u>\$3,000 ( Additional )</u>																					
<b>IMPORTANT NOTE :</b>																					
<p>1. The person(s) signing this rental Agreement assumes full personal responsibility, jointly and severally with the firm, person or organization, the driver or all authorized driver in whose name he/they might sign.</p> <p>2. Only persons above 23 years of age with more than 2years driving experience,authorised, licensed and signing this agreement may drive the vehicle.</p> <p>3. Vehicle is strictly for use in Singapore only and may not be driven or taken out of Singapore without the prior written consent of Theng Lee Meng.</p> <p>4. Use of vehicle for illegal purposes (e.g. in connection with theft, drug pedalling or trafficking, smuggling), commercial purposes (e.g. taxi, uber, grab car / car pool usage) is strictly prohibited.</p> <p>5. In case of accident, the hirer shall report to Theng Lee Meng immediately. If there are bodily injuries, a police report must be made within 24 hours</p>																					

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 28 Dec 2021 / 10:35:16

Receipt Date/Time : 28 Dec 2021 / 10:35:16

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-211228-001010

Previous Receipt No. :

**S/N Item Description/  
Business Transaction Reference  
No.**

<b>Amount Before GST (S\$)</b>	<b>GST Amount (S\$)</b>	<b>Amount After GST (S\$)</b>
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Result of Insurance Enquiry - SLX6788C

As at 27 Dec 2021/18:03:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1 Insurance Enquiry - SLX6788C  
Enquiry Fee  
20211228103431675355

7.00	0.49	7.49
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**Sub-Total**

7.00	0.49	7.49
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**Total Before Rounding**

7.00	0.49	7.49
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**Rounding Difference**

		0.04
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**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
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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.: CB 6707 J  
and SLX 6788 C and .....  
and ..... and .....  
@ AYE towards City (After Exit 9)  
dated 27/12/2021.

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,

X 

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	28/12/2021 17:50 (SGT)
Date of Accident	27/12/2021 18:03 (SGT)
Exact Location of Accident	AYE, Singapore
Additional Location Information	AYE TOWARDS CITY
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	CB6707J
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN CHING SHEW
NRIC No	S1541128G
Email Address	MSMTS@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-98330789
Alternative Phone No	(Home) +65-98330789

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Coaster
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	0

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5110901057-02
Cover Note Number	-

#### DRIVER

Name of Driver	TAN CHEE KWANG
NRIC No	S1479678I

Date Of Birth	15/11/1961
Occupation	Outdoor
Date Of Driving Pass	14/01/1982
Driving experience	39 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81839766
Alt. Phone Number	-
Email Address	MSMTS@SINGNET.COM.SG
Address	APT BLK 103B DEPOT ROAD #16-537
Address complement	-
Postcode	102103
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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)	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

#### REFER TO ATTACHED

#### 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	SLX6788C
Vehicle Manufacturer	-
Vehicle Model	-
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)	-----	-

### 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 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 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/firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police) for the purpose(s) of :

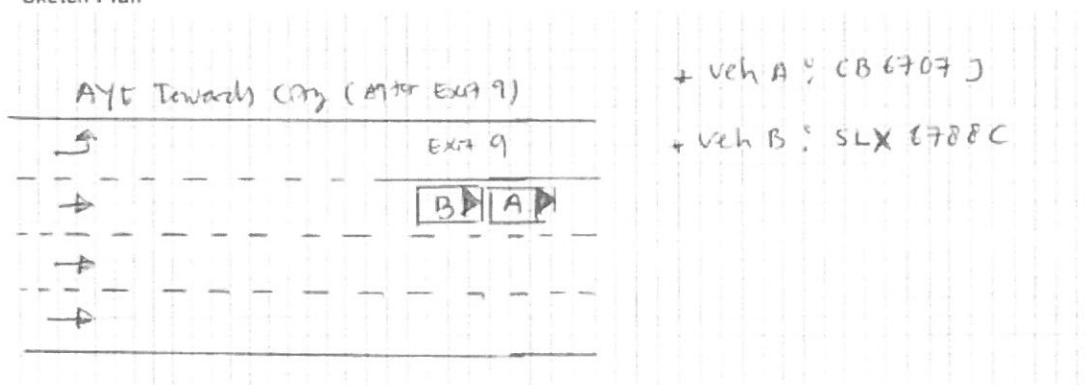
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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' 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 disclosed by any of the insurers, and/or GIA to their third party service providers or agents (including their law yers/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 &amp; Time

Witnessed by Reporting Centre  
Personnel

### Sketch Plan



Describe Circumstances of the Accident




On the stated date and time, I was travelling along the stated venue.

Due to the traffic jam, all vehicles stopped. While I was stationary,

suddenly vehicle B collided onto the rear of my vehicle.

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
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## 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)  
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number** : 5110901057-02-000001

**Cover** : Comprehensive

1. Index mark and Registration Number of Vehicle : **CB6707J**  
 Chassis Number : JTGEF538406000292
2. Name of Policyholder : TAN CHING SHEW
3. Effective Date of Insurance : 18 Jul 2021
4. Expiry Date of Insurance : 17 Jul 2022
5. 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 his/her 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.
6. Limitations as to Use\*
  - (a) Use for the carriage of passengers in connection with the Policyholder's business.
  - (b) Limited to carry 23 passengers

**This Policy does not cover**

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

\* Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: S\$3,000
EXCESS (SECTION II)	: S\$1,500
WINDSCREEN EXCESS	: S\$500
INSURE WITH COE	: NO
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE LESS RESIDUAL COE/ PARF VALUE AT TIME OF LOSS

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)

Agency : NLE INSURANCE AGENCIES PTE LTD (00000614580)

Date of Issue : 12 Jul 2021 16:38 hrs

**For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED**



Chief Executive

5803971



NRIC No. **S1541128G**



Date of issue  
**22-09-2017**

Address

**APT BLK 28B DOVER CRESCENT  
#27-35  
SINGAPORE 132028**

**REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1541128G**



Name

**TAN CHING SHEW**

Race

**CHINESE**

Date of birth

**20-09-1962**

Sex

**M**

Country/Place of birth

**SINGAPORE**





**REPUBLIC OF SINGAPORE DRIVING LICENCE**


Licence Number: **S14796781**

Name: **TAN CHEE KWANG**

Birth Date: **15 Nov 1961**

Issue Date: **07 Feb 2005**

001319837F



**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S14796781**

Name: **TAN CHEE KWANG**

陳 峙 光

Race: **CHINESE**

Date of birth: **15-11-1961**

Sex: **M**

Country of birth: **SINGAPORE**

S14796781




**Land Transport Authority**


**VOCATIONAL LICENCE**

Licence No: **S14796781**

Name: **TAN CHEE KWANG**

Issue Date: **21/1/2012**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

Class	Description	PASS DATE
Class 3	Motor cars ≤ 3000 kg with ≤ 7 passengers, exclusive of the driver; and motor tractors / vehicles ≤ 2500 kg	14 Jan 1982
Class 4	Heavy motor cars and motor tractors > 2500 kg	13 Mar 1986
Class 5	Motor vehicles > 7250 kg not constructed to carry any load	15 Jan 1992

NP 428A



Licence No: **S14796781**

3680215

**NRIC No. S14796781**

Date of issue: **07-02-2005**

Address: **APT BLK 103B DEPOT ROAD  
#16-537  
SINGAPORE 102103**

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	26/03/1991

