MG SOLUTION PTE LTD



23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #04-01 Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
(GST Reg. No. 201427944N)

Date

: 24/08/2022

Your Ref

: SGN5290P

To

: AIG ASIA PACIFIC INSURANCE PTE LTD

Attn

: Motor Claims Department

Dear Sir/Mdm,

RE: ACCIDENT INVOLVING VEHICLE SMK3006C & SGN5290P ON 28/03/2022 AT SLIP ROAD OF CTE TOWARDS PIE (CHANGI) BEFORE UPPER SERANGOON ROAD.

We refer to the above matter.

Attached copies of the following for your kind perusal:

- 1) Proforma Bill No.228095 @ S\$11,449.00 (Inclusive Of 7% GST)
- 2) Loss of Use @ S\$3,000.00 (15 Days x S\$200)
- 3) LTA Search @ \$\$7.45
- 4) Authorisation to Act
- 5) GIA Report

Hope the above is in order and kindly let us have your confirmation soon.

Tax invoice will be issue upon amount finalized.

The Minister for Finance announced that the **GST rate will be increased from 7% to 8%** with effect from 1st January 2023. Our Company's invoices issued will be with **GST 8% from 1st January 2023**.

Thank You.

Yours faithfully,



Sharon Chia

HP: 8121 1373

E-mail: mg3solution@gmail.com

MG SOLUTION PTE LTD



23 Kaki Bukit Ave 4, AAS Kaki Bukit Centre #04-01 Singapore 415933
Tel: 6243 1373 Fax: 6243 1376
(GST Reg. No. 20-1427944-N)

PROFORMA BILL

Bill To:

Bill No: 228095

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY #07-12 AIG BUILDING SINGAPORE 079120 Date: 24-August-2022

Vehicle Number: SMK 3006C

ATTN: MOTOR CLAIMS DEPARTMENT

QTY	CLAIM	AMOUNT
1	To carried out accident repair as per surveyor's recommendation (Lump Sum)	\$ 10,700.00
	BEFORE GST	10,700.00
	7% GST	
	TOTAL	\$ 11,449.00

Tax Invoice will be issue upon amount finalised.

The Minister for Finance announced that the **GST rate will be increased from 7% to 8%** with effect from 1st January 2023. Our Company's invoices issued will be with **GST 8% from 1st January 2023**.

Please note that our above offer and any settlement arising from the above offer are made on a without prejudice basis with sole intention of resolving the matter amicably without parties resorting to legal proceeding. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

Co's stamp & Authorised Signature

MG SOLUTION PTE LTD

23 Kaki Bukit Ave 4 (South Wing) #04-01 Vicom Inspection Centre, Singapore 415933 Tel: 6243 1373 Fax: 6243 1376 GST Reg. No. : 201427944N

MOTOR CLAIM DISCHARGE

INSURED: lee kan Hoe
CAR / LORRY / CYCLE: REG NO:
ACCIDENT CLAIM NO:
I / We confirm that I / we have taken delivery of Car / Lorry / Motor Cycle
Registered No from the repairers,
Messrs MG solution Pte (td
And that all repairs necessary as a result of an accident in which the said vehicle was involved on or
about the day of 20 20 have been completed to my / our satisfaction,
and that I / we have no further claim on the above company in Respect thereof.
Date : Signature :
Date : Signature :
Co's Stamp : NRIC No :
10 151
-# 3,000



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

28 Mar 2022 / 14:35:02

Receipt Date/Time :

28 Mar 2022 / 14:35:00

Tax Invoice/Receipt

Receipt No.: ITNET-00000-220328-002546

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.	Amoun Befor GST (S	e Amount	Amount After GST (S\$)
Result of Insurance Enquiry - SGN5290P As at 28 Mar 2022/13:30:00 Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD. 1 Insurance Enquiry - SGN5290P Enquiry Fee	7.0		7.49
20220328143407569133		0.10	, . 10
Sub-Total	7.0	0.49	7.49
Total Befo	ore Rounding 7.0	0.49	7.49
Rounding	Difference		0.04
Total Amo	ount Payable		7.45
Paid By			
20220328	143418179	eNETS Debit ernet Banking)	7.45
Total			7.45
Cash Char	nge		0.00
Tendered	Amount		7.45
Excess Re	fundable 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.

LETTER OF AUTHORITY

Name : lel kah Hoe
Address: BK 22 Ghim Moli Link 405-204 S (271072)
Contact No :
TO: Alla ASIA Pacific insurance Pte Utd.
Dear Sirs,
ACCIDENT INVOLVING SMK 3006C AND SGN 5290P ON 28/03/2022
ACCIDENT INVOLVING SMK 3006C AND SGN 5290P ON 28/03/2022 AT/ALONG Slip Road of CTE towards PIE (Changi) before Upper Serangoon Rd.
I/We,, am/are the
registered owner of motor car no. <u>SMK 3006C</u>
Please note that I have assigned all compensations monies due to me/us in the above said accident to M/S MG SOLUTION PTE LTD.
I/We, hereby authorize you to release all compensation monies pertaining to the above-mentioned accident to M/S MG SOLUTION PTE LTD and forward your settlement cheque to M/S MG SOLUTION PTE LTD whom I had authorized to collect the said compensation monies.
Thank you.
Jellen
Signature of Claimant Witness By



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

AUTHORIZATION TO ACT (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

I. Lee Kah Hoe ("the third party claimant") of Bik >> Ghim Moh Link Hot -204 S(2710>>>) (address), owner of SMK 2006C (vehicle no.) hereby authorize MG Sourtion Pte Ltd ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SMK 3006C that was damaged pursuant to the accident which occurred on 28/03/20>>> (date) along Slip food of CTE forwards PIE (Changi) before Upper Serangeon Road (location) involving vehicle no/s SGN 5290P ("the accident").
owner of SMK 3006C (vehicle no.) hereby authorize MG Sourtion Pte Ltd ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SMK 3006C that was damaged pursuant to the accident which occurred on 38/03/2022 (date) along Slip Road of CTE forwards PIE (Changi) before Upper Serangon Road (location) involving vehicle no/s SGN 5290f ("the accident").
("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SMK 3006C that was damaged pursuant to the accident which occurred on 38/03/2022 (date) along Slip Road of CTE towards PIE (Changi) before Upper Strangon Road (location) involving vehicle no/s SGN 5290P ("the accident").
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Slip Road of CTE forwards PIE (Changi) before Upper Serangeon Road (location) involving vehicle no/s ("the accident").
involving vehicle no/s("the accident").
(and addition).
I further authorize the workshop to pottle the up-
further authorize the workshop to notice the state of the
I further authorize the workshop to settle the above mentioned claim in a
manner that they deem fit and the workshop is further authorized to receive
payment furtherto settlement of my claim with payment cheque/s being made in
favour of the workshop.
I further acknowledge that any settlement the workshop may reach on my
hehalf is on a without projudice and without and workshop may reach on my
behalf is on a without prejudice and without admission of liability basis insofa
as the driver/owner/insurers of the other vehicle/s is concerned.
Date thisday of(month) 20 (year)
· /
Jedur (Sala)
(S(NG)*)
Signed by "the third party claimant" Signed by "the workshop"

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



RELEASE VOUCHER (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

We/1,	("the workshop") hereby confirm that we/l
have reached an agreement with the appointed	surveyor of AIG Asia Pacific Insurance Pte. Ltd.
("na	me of surveyor") with respect to the amount claimed for
5\$(repair costs), S\$_	(loss of use/rental) S\$ (coareh fore)
ioi venicie no that was dam	naged pursuant to the accident which occurred
on(date) along	(location) involving
vehicle no/s	-· (100811011) IITVOIVIII
This is pursuant to the inspection conducted on	(date) at "the workshop".
We/I confirm that we/I are/am authorized by the owner	("third party claimant")
of vehicle no to make the claim a	as set out in the above paragraph and we/l have full
authority to settle the matter on his/her behalf in a mar	nner that we/I deem fit. We/I enclose herein the letter of
authority given by "the third party claimant".	
We/I further confirm that we/I will indemnify AIG Asia	Pacific Insurance Pte. Ltd for all damages, loss and/or
expense that they will or have already incurred in the	event that "the third party claimant" after the above said
agreement lodges a further claim against the former for	or any loss and expenses suffered pertaining to costs of
repairs and/or rental and/or loss of use pursuant to the	e damage to(vehicle no.) as a result
of the accident.	
Well confirm that the sareement market in	
claimant" nursuant to the accident and that first and	full and final settlement of any claim of "the third party
admission of liability basis.	settlement is reached on a without prejudice and without
January Basis.	
This agreement is subject to the application of Sin	agapore law and the Singapore Courts have exclusive
jurisdication over any dispute arising out of the same.	gapore law and the Singapore Courts have exclusive
, , , , , , , , , , , , , , , , , , ,	
Dated thisday of	(month) 20(year)
	NON PIE
	3.6
	(S) (M)
	* 2014279
Signed by AIG appointed surveyor	Chopped & Signed by "the workshop"

SN09223S000F / National Assessment Centre Services [408933] ENTRY DATE & TIME: 28/03/2022 19:37 (SGT) SUBMITTED BY: Renee VERSION: 1 (28/03/2022 19:37 (SGT))



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 witholding of material facts may allow insurance companies to repudiate
- 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 28/03/2022 19:37 (SGT) Date of Accident 28/03/2022 13:30 (SGT) **Exact Location of Accident** Singapore Additional Location Information SLIP ROAD OF CTE TOWARDS PIE (CHANGI) BEFORE UPPER SERANGOON ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Private car

No - Claiming third party

SMK3006C INSURED/POLICYHOLDER Is company? No

Name Of Registered Owner LEE KAH HOE NRIC No S7317649B **Email Address** leek63@hotmail.com Mobile Phone No (Phone) +65-97688733 Alternative Phone No +65-97688733

VEHICLE PARTICULARS

Manufacturer

Vehicle Registration Number

Model Vios Variant Exact purpose for which vehicle was being used at time of

Private use Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number DMPPHQ21-002100 Cover Note Number

DRIVER

Name of Driver LEE KAH HOE

Accident report SN09223S000F

NRIC No S7317649B Date Of Birth 20/05/1973 Occupation Outdoor Date Of Driving Pass 19/06/1996 Driving experience 25 YEARS AND 9 MONTHS Gender Male Mobile Number (Phone) +65-97688733 Alt. Phone Number +65-97688733 Email Address leek63@hotmail.com Address **BLK 22 GHIM MOH LINK** Address complement #05-204 Postcode 271022 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? 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 Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SGN5290P Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Private car

Vehicle Category

Name of Driver Contact Number Address

Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	2
No. Of Passenger (Including Driver)	_

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMR2018M 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)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LEE KAH HOE
Gender	Male
Phone No	(Phone) +65-97688733
Address	-
Address Complement	-
Post Code	:=
Approximate Age Years Old	-
Injuries Sustained	BACK AND NECK
Injured person in which vehicle?	SMK3006C
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 Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The report will be forwarded by the insurers of the GA 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.
- 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)

l 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 law yers/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' law yers/law firms, may/are permitted to collectuse, 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 & Time					Witne	Witnessed by Reporting Centre Personnel			
Sketch Plan	Stir K	coad o	F CTE	towards	PIE ((ha	MgI)	hetere	Upper	Perangon	Rosa
\rightarrow										-rathe
		Na	TKA							
							(A)	SWK	(3006C	
,							(B)	San	132908C	

(C) SMR 2018M

Describe Circumstances of the Accident

Shift Suddenly. I heard a loud bang frim the rear and the ment forled my venicle (A) to move forward and hit auto the car partism of venicle (C). When I alignt, I realised it was sensited by the little my rear portion of my reinfle (A) causing lamages to my reinfle (A) front and rear. If was a Chain collision of 3 rengues involves. (A) SMK 3006 c (B) SCN 52008 M	on 28/03/2022 at about 1330 hrs at along slip Road of
Food and my from vertice slow down and stop, hence I follow Shift. Suddenly. I heard a loud being from the rear and the mean part formed and but onto the ear particle (A) to move forward and but onto the ear particle (C). When I alignt, I realised it was sent (B) Lyno but time my near partion of my repulse(A) calling lamnages to my repulse(A) from and rear. Hava a Chain (billing) of 3 remples involved. (A) SMK3006c (B) SGNV5200P (C) SMR 2018 PM	(TE HUNGA) PIE ((Mangi) betore upper seranguan Ruad. I wai
Shift Suddenly. I heard a loud borng from the rear and the ment forled my vertice (A) to move forward and hit auto the car partism of vertice (C). When I alignt, I realised it was sensited by the little my rear portion of my rehille (A) carry parties to my rehicle (A) front and rear. I was a Chain solition of a rehiple converse. (A) SMK 3006 c (B) SCHN 52008	travilling on the extreme right lane of the above mentioned
mpatt fulled my vericle (A) to move forward and hit out the ear parton of vericle (C). When I alight, I realised it was senicle(B) who hit who my near portion of my reinfle(A) caning lamages to my reinfle(A) front and near. I was a Chain collision of 3 reinfle(Involved. (A) SMK 3006 C (B) SAN 5200P (C) SMR 2018M	road and my front vericle SION down and Stop, hence I follow
ear parton of vervice ((). When I alignt, I realized it was semicially been been prear protein of my remaile(a) causing camages to my rear protein of my remaile(a) causing camages to my rear protein of my remaile(a) causing that a chain (billiable of 3 remaile (involved) (A) Smk 3006 c (B) Sank 3008 M (C) Smk 2018 M	Suit Suddenly. I heard a loud being from the rear and the
Tem(I(B) luno hit who my rear portion of my remine(A) causing lamages to my remine(A) front and rear: t wan a chain continuon of 3 remine(involved. (A) Smk3006c (B) Sans2008 (C) Smk2018M	impalt forled my vericle (A) to move forward and hit outs the
Amages to my reporte (A) front and rear. Has a Chain (billinia) of 3 rempres involved. (A) SMK3006c (B) SGN 5200P (C) SMR 2018M	rear portron of vehicle ((). When I alight, I realised it was
t War a Chain (billine) of 3 veryles (invelved. (B) Sanszarp (C) Smr Jors M	VPM(18(B) who hit who my rear portion of my vehille(A) caning
t War a Chain (billine) of 3 veryles (invelved. (B) Sanszarp (C) Smr Jors M	armages to my replace (A) front and rear.
(B) SUNS 2006 (B) SUNS 2010 (C) SMR 2010 (C) SMR (D) SINC 2010 (C) SMR	
(B) S(M) S200P	it that of entitle (author) of a setting interview.
(B) S(M) S200P	(A) SMK3006C
(C) SMR 2018M	
	(B) San 23 aug
Vote: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your	(C) SMR 2018/11
Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your	
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	Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your your own comprehensive policy. Please check your policy for more information.

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

Witnessed by Reporting Centre Personnel