

**HD PERFECT AUTOWORK PTE LTD**

Co. & GST Reg. No.: 202136904Z

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

Tel: +65 6341 6789 | Fax: +65 6341 6778

Email: hdperfectautowork@gmail.comOur Ref.: SMH7003AYour Ref.: SGB3121XDate: 28.09.2022

ATTN: Motor Claims Department

INS: AIG ASIA PACIFIC INSURANCE PTE LTD

Dear Sir/Madam,

Accident Involving: SMH7003A & SGB3121XDate of Accident: 13.04.2022 @ 19:20HRSLocation: PIE(Changi) Before Toa Payoh Exit

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair: \$ 24,000.00Loss of Rental:
(18 Days x \$120/Day): \$ 2,160.00LTA Search: \$ 7.453rd Party Report: \$ 31.00Grand Total: \$ 26,198.45

The above-mentioned settlement is in respect for our client of damage pertaining to his/her motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his/her personal injuries.

For any further queries, please kindly contact Shanelle Lim @ 8297 9787, or email to hdperfectautowork@gmail.com

Thank You,

Shanelle Lim





HD PERFECT
AUTOWORK PTE LTD

HD Perfect Autowork Pte. Ltd.
Co. Reg No: 202136904Z
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: hdperfectautowork@gmail.com

Authorisation To Act

I, Lim Kim (Lin Xin) ("the third party claimant") of
81 ROSEWOOD DRIVE #05-53 S(737788)
(address), owner of SMH7003A (vehicle no.)
hereby authorise HD Perfect Autowork 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. SMH7003A that was
damaged pursuant to the accident which occurred on 13/4/22 (date)
at/along PIE (Changi) Before Toa Payoh Exit
(location) involving vehicle no/s SGB3121X ("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a manner that
they deem it fit and the workshop is further authorised to receive payment further to settlement
of my claim with payment cheque/s being made in favour of the workshop.

I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without
prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by
me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident
concerned.

Dated this 13 day of 04 (month) 20 22 (year)

Signed by "the third party claimant"



HD PERFECT
AUTOWORK PTE LTD
UEN: 202136904Z

Signed by "the workshop"



HD PERFECT
AUTOWORK PTE LTD

HD Perfect Autowork Pte. Ltd.
Co. Reg No: 202136904Z
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: hdperfectautowork@gmail.com

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SMH 7003A and SGB 3121X on 13/4/22
at/along PIE (Changi) Before Toa Payoh Exit

1. I/We, the Owner of motor vehicle no. SMH 7003A hereby instruct and authorise HD Perfect Autowork Pte Ltd ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$_____ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 13 day of 04 2022

Signature of vehicle owner [Signature]

Name: Lim Kim (Lin Xin)

IC/UEN No: S8909252C

(Company stamp, if applicable)

Address: 81 Rosewood Drive
#05-53 S(737788)

Tel: _____

Witnessed by:

[Signature]
Shanell Lim



"My execution of this Discharge
Voucher is only for my claim
for property damage and not
prejudicial to any other claims"

AUTHORIZATION TO ACT
(AIG Asia Pacific - Express Third Party Claim)

I, Lim Kim (Lin Xin) ("the third party claimant")
of 81 Rosewood Drive #05-53 S(737788) (address),
owner of SMH 7003A (vehicle no.) hereby authorize
HD Perfect Autowork 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. SMH 7003A that was damaged pursuant to the
accident which occurred on 13/04/22 (date) along PIE (Changi)
before Toa Payoh Exit (location)
involving vehicle no/s SGB3121X

("the accident").

I further authorize the workshop to settle my above mentioned
claim in a manner that they deem fit and the workshop is further
authorized to receive payment further to 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 behalf is on a without prejudice and without admission of
liability basis insofar as the driver/owner/insurers of the other
vehicle/s is concerned.

Dated this 13 day of 04 (month) 20 22 (year)

Signed by "the third party claimant"

Signed by "the workshop"
(with chop)

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com



**HD PERFECT
AUTOWORK PTE LTD**

Date	Invoice Number	Vehicle Number
28.09.2022	HDP202209-00145	SMH7003A

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-12 AIG BUILDING

SINGAPORE 079120

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 24,000.00
Total	\$ 24,000.00

Cross cheques and pay: HD PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

HD PERFECT AUTOWORK PTE LTD

AUTO Generated - Signature Not Required

CARS FOR RENT (2016) PTE LTD

Mailing Address:

10 Kaki Bukit Ave 4 #09-60 Premier@Kaki Bukit, Singapore 415874

Tel Nos.: +65 6970 9119 / 6789 5155

Co. Reg'n No.: 201609732N

GST Reg'n No.: 201609732N

Tax Invoice #: E2205086

Date: 12-05-22

Bill To:

HD Perfect Autowork Pte Ltd

For the account of:

Lim Kim (Lin Xin)

S8909252C

81 Rosewood Drive

#05-53

Ship To:

1

HD Perfect Autowork Pte Ltd

For the account of:

Lim Kim (Lin Xin)

S8909252C

81 Rosewood Drive

#05-53

Description	Amount	Job No.
Vehicle Rental for Period 13.04.2022 to 01.05.2022 (Billing for days 18 X \$120.00/per day) (Vehicle No.: SMH7003A)	\$2,160.00	SMM2103B SR

Your Order #: 19835

Terms: Net 30th after

GST: \$141.31

COMMENT	CODE	RATE	GST	SALE AMOUNT	Total Inv Amt:	\$2,160.00
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SR	7%	\$141.31	\$2,018.69	Amount Applied:	\$0.00
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Balance Due:	\$2,160.00
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CARS FOR RENT (2016) PTE LTD

10 Kaki Bukit Ave 4 #09-60 Premier @ Kaki Bukit Singapore 415874

Tel: 6970 9119 Fax: 6970 9961

Website: www.carsforrent2016.com

No: 19835

ROC/GST No: 201609732N

VEHICLE RENTAL AGREEMENT

HD Perfect

HIRER'S PARTICULAR

Name: (as in I/C) Lim Kim (Lin Xin)

Email: 8890955C

NRIC/PASSPORT No: 1531989

Date of Birth: 8 Rosewood Drive

Address (Res): #05-53 8737788

Driving Licence No: 8890955C D/L Type: Local / International

Issue Date: 27 Jul 2010

Tel: (O) HP

Company Name: HP

Company UEN: 8890955C

Company Address: HP

Vehicle No: SMH2103B Replace Veh No: SMH7003A

Mileage out: 63806

Make & Model: Honda Vezel Auto / Manual

OUT : Date 13/04/2022 Time: 9:30 PM

HIRE PERIOD

OWN DAMAGE CLAIM Excess S\$ 2000

THIRD PARTY CLAIM Excess S\$ 1500

ADDITIONAL DRIVER'S PARTICULARS

Name: (as in I/C) HP

NRIC/PASSPORT No: HP

Date of Birth: HP

Address (Res): HP

Driving Licence No: HP D/L Type: Local / International

Issue Date: HP

Tel: (O) HP

CHARGES

Daily 18 @ \$ 120.00 per day 2,160.00

Weekly @ \$ per week

Monthly @ \$ per month

Others @ \$

Delivery Service

GST

SUB-TOTAL \$ 2,160.00

PETROL LEVEL

Out	E	1/4	1/2	3/4	F
In	E	1/4	1/2	3/4	F

EXTENSION

Misc. Ind 70

GST

TOTAL CHARGES 2,160.00

Rented out by :

Hirer's Signature [Signature]

Addition Driver's Signature

VEHICLE CHECK LIST

BACK

RIGHT FRONT TOP LEFT

INDICATE : DENTS S - SCRATCHES A - ACCIDENTS

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/ credit card for payment, I agree that all amount payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given CARS FOR RENT (2016) PTE LTD in connection with this agreement is true.

* IMPORTANT

- ONLY PERSON ABOVE 22 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN ABOVE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY AND BE RESPONSIBLE FOR THE INSURANCE EXCESS. IF THERE IS BODILY INJURIES, POLICE REPORT MUST BE MADE.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CARS FOR RENT (2016) PTE LTD

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVE" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CARDS FOR RENT (2016) PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	HIRER'S SIGNATURE
<u>1/5/22</u>	<u>6pm</u>				<u>[Signature]</u>



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 13 Apr 2022 / 23:19:24

Receipt Date/Time : 13 Apr 2022 / 23:19:24

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220413-004138

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 - SGB3121X				
As at 13 Apr 2022/19:25:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SGB3121X Enquiry Fee 20220413231843009252	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				
421808XXXXXX9928		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.

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD -
Lim Kim

Invoice Number
GR-2022-001481

Invoice Issue Date
21 Apr 2022

Invoice Due Date
28 Apr 2022

Total Amount (S\$)	28.97
Total GST 7.00% (S\$)	2.03
Total Amount Incl. of GST (S\$)	31.00

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	20/04/2022,13/04/2022,SMH7003A,SGB3121X	28.97	2.03	31.00
		Total Amount (S\$)		28.97
		Total GST 7.00% (S\$)		2.03
		Total Amount Incl. of GST (S\$)		31.00

*This is a computer generated document.
No signature is required.*

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	14/04/2022 16:37 (SGT)
Date of Accident	13/04/2022 19:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE(CHANGI) B4 TOA PAYOH EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH7003A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM KIM(LIN XIN)
NRIC No	S8909252C
Email Address	abc8627e@gmail.com
Mobile Phone No	(Phone) +65-96310792
Alternative Phone No	+65-96310792

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Note
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1198

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	7210044799
Cover Note Number	-

DRIVER

Name of Driver	LIM KIM(LIN XIN)
NRIC No	S8909252C

Date Of Birth	15/03/1989
Occupation	Indoor
Date Of Driving Pass	27/07/2010
Driving experience	11 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96310792
Alt. Phone Number	+65-96310792
Email Address	abc8627e@gmail.com
Address	81 ROSEWOOD DRIVE
Address complement	#05-53
Postcode	737788
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	5
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?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGB3121X
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLR3789B
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SJF6168K
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SMP8702S
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	LIM KIM(LIN XIN)
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SMH7003A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

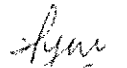
SKETCH PLAN

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 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' 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 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

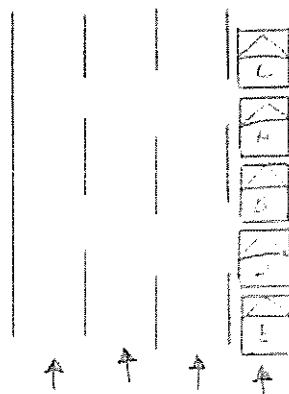

Driver's Signature (If driver is not the policyholder) / Date & Time

 14/04/22
Witnessed by Reporting Centre Personnel

Sketch Plan

Veh A: SMH7003R
Veh B: SGB3121X
Veh C: SLR2789B
Veh D: STFG168K
Veh E: SMH8741S

DIE (CHANGI) R4 TOA PAYEH EXIT



Describe Circumstances of the Accident


Handwritten notes on lined paper:

- At the top right, the word "Hill" is written diagonally.
- Below it, the word "The" is written.
- Further down, the word "to" is written.
- At the bottom left, the word "was" is written.

Declaration

We declare the foregoing particulars are true in every respect

Policyholder's Signature / Date & Time


Driver's Signature (if driver is not the policy holder) / Date & Time

Witnessed by Reporting Centre Personnel

ON THE STATED DATE AND TIME. I, VEHICLE A (SMH7003A) WAS TRAVELLING STRAIGHT ON LANE 1 OF PIE(CHANGI) BEFORE TOA PAYOH EXIT. WHEN THE FRONT VEHICLE C (SLR3789B) SLOWED DOWN AND STOP, I FOLLOWED SUIT WITHOUT HAVING ANY COLLISION WITH THE FRONT VEHICLE C (SLR3789B). SUDDENLY I FELT A HUGE IMPACT FROM THE REAR PORTION OF MY STATIONARY VEHICLE, THE HUGE IMPACT CAUSE MY VEHICLE TO PROPEL FORWARD AND HIT ONTO VEHICLE C (SLR3789B) REAR PORTION. AFTER A FEW SECOND I FELT ONE MORE IMPACT AND THE HUGE IMPACT CAUSE MY VEHICLE TO PROPEL FORWARD AGAIN AND COLLIDED ONTO VEHICLE C (SLR3789B) REAR PORTION.

AFTER I ALIGHTED I THEN REALISE THAT IS VEHICLE B (SGB3121X) THAT HAD COLLIDED ONTO MY VEHICLE.

I WISH TO STATE THAT THIS IS A 5CARS CHAIN COLLISION.

VEHICLE A : SMH7003A

VEHICLE B : SLR3789B

VEHICLE C : SGB3121X

VEHICLE D : SJF6168K

VEHICLE E : SMP8702S



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8909252C



Name

LIM KIM
(LIN XIN)

林 鑫

Race

CHINESE

Date of birth

15-03-1989

Country/Place of birth

SINGAPORE

Sex

M

S8909252C

SMH 7003A

owner & driver

6406980



NRIC No. S8909252C



Date of issue

12-03-2020

81 ROSEWOOD DRIVE #05-53
SINGAPORE 737788

NRIC No: S8909252C

Date: 08/06/2020

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8909252C
Name: LIM KIM (LIN XIN)

Birth Date: 15 Mar 1989
Issue Date: 27 Jul 2010

001878274K



SMH7003A

owner & driver


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

EFFECTIVE DATE

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg 27 Jul 2010

NP 428A

Licence No: S8909252C





CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lim Kim (Lin Xin)
Period of Insurance : 30 Apr 2021 To 29 Apr 2023
Engine No. : HR12264077K
Chassis No. : JN1FAAE13Z0900039

Vehicle No. : SMH7003A
Policy No. : 7210044799
Endorsement No. :
Issued Date : 18 May 2021

ABOUT THE COVER

Make/Model : NISSAN Note e-POWER
Engine Capacity/Tonnage : 1,198.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2021
Insuring with COE/PAFF : Yes

a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Mileage Condition : Unlimited Mileage

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2

Property Damage - \$0

Windscreens : \$100

Named Driver and Excess (where applicable)

Lim Kim (Lin Xin) - \$800 (Own Damage), \$800 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. C AutoClinic Add: 25 Leng Kee Road Singapore : 59097 67038511 67038512 67038513
2. TC AutoClinic Add: No 1, Sixth Lok Yang Road Singapore 626059 62622212
3. Autolution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5. Tan Chong Motor Sales Add: *7 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 8200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank Ltd

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500610479

TAN CHONG CREDIT PTE LTD - GYZ

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSCHMD

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