Company & GST Registration No. 200616038C

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

Kaki Bukit Autohub Singapore 417921

Tel: 68420051

Fax: 67410510

Email: sales@n51.com.sg

13 September 2022

Our Ref:

CLM17165 / SMZ3780X / APR-30/2022

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET #04-00 & #05-00 IOB BUILDING SINGAPORE 049711

ATTN: MOTOR CLAIMS DEPARTMENT

Dear Sir @ Madam,

RE: ACCIDENT INVOLVING SMZ3780X & SLG4107X ON 26/04/2022 ALONG PIE TWDS CHANGI B4 EUNOS FLYOVER

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SLG4107X** whose vehicle was insured with you at the material date of the accident.

We are prosposing 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
 \$ 4,922.00 (Include 7% GST)

 Loss of rental
 \$ 802.50 (\$160.50 X 5 Days)

 Additional 2 days loss of use for pre repair
 \$ 200.00 (\$100 X 2 Days)

 LTA search fee
 \$ 7.45

 S \$ 5,931.95

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM17165
- 2) Twinbiz Rental Pte Ltd Invoice No: D04743
- 3) LTA search fee
- 4) Letter of Authorisation
- 5) GIA report of SMZ3780X

We look forward to your prompt reply.

Yours faithfully,

N-51 AUTOMOTIVE PTE LTD

S.Y.NEO Director









P.I.C - Melody Chin Reply to :huixin@n51.com.sg



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.: 200616038C GST Registration No.: 200616038C

INDIA INTERNATIONAL INSURANCE PTE LTD 64 CECIL STREET #04-00 & #05-00 IOB BUILDING SINGAPORE 049711 **TAX INVOICE**

Date : 08/09/2022 Date in : 26/04/2022 Vehicle Num. : SMZ3780X

Make/Model: RENAULT GRAND SCENIC IV 1.5 DCI AT EU6-2019

Chassis/Eng#: VF1RFA00864500323/K9KF649D060168

Accident Date : 26/04/2022 Claim No : CLM17165 Reference : APR-30/2022

Policy No.: SPMF1000000518 (24/03/2023)

LUMPSUM REPAIR BILL

REF: CLM17165-N51 DATED 09/05/2022

BY DIRECT

Amount S\$ 4,600.00

E. & O.E.

Sub S\$:

4,600.00

Add GST (7%) S\$:

322.00

Total Amount S\$:

4,922.00



for N-51 AUTOMOTIVE PTE LTD





TWINBIZ RENTAL PTE. LTD.

Company & GST Registration Number: 201407909C 2 Kaki Bukit Avenue 2 #01-18 Kaki Bukit Autohub Singapore 417921 Tel: 6842 5151 Fax: 6749 2851 email: darwin51@n51.com.sg

Invoice To

JY AUTO PTE LTD 60 JALAN LAM HUAT #05-57 CARROS CENTRE SINGAPORE 737869 TAX INVOICE

Invoice No.

D04743

Date

19/5/2022

Terms

Cash

| No. Days | Description | Rate | Amount |
|----------|---|-----------------|-----------------|
| 5 | SLR9286X- Car Rental For The Period 09/05/2022 to 14/05/2022 (ref. Vehicle SMZ3780X) Tax collected on sales | 150.00 7.00% | 750.00 52.50 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | 7% GST | \$52.5 |
| | | Total Amount | \$802.5 |

TWINBIZ RENTAL PTEATE

Authorised Signature

Note: Kindly make payable to "TWINBIZ RENTAL PTE. LTD." I Bank transfer to Maybank A/c No. 04211099668 (Bank Code 7302) I Paynow UEN :201407909C

Sm2 3780 x

TWINBIZ RENTAL PTE. LTD.

Company Registration Number: 201407909C 2 Kaki Bukit Avenue 2 #01-18 Kaki Bukit Autohub, Singapore 417921 Tel: 6842 5151 Fax: 6749 2851 email: twinbiz@n51.com.sq



VEHICLE RENTAL AGREEMENT

Vehicle No: SLR9286X HIRER'S PARTICULAR Make: TOYOTA Name(as in I/C): JY AUTO PTE LTD Model: PRIUS ALPHA Auto/Manual Group: Auto NRIC/PASSPORT No: 202103194N Colour: WHITE Year: 2017 Address(Res):60 JALAN LAM HUAT, CARROS CENTRE #05-57 SINGAPORE Mileage Out: 737869 Time: 14:40 OUT: Date 2022-05-09 Occupation: Driving Exp: NON-WAIVER EXCESS: D/L Type: Local Driving License No: 202103194N Section1: 2000 Section 2: 2000 Date of Birth: 1973-09-11 Issue Date: 1995-07-12 Tel: (HP) 65131820 CHARGES Email: 150.00 Daily rate ADDITIONAL DRIVER'S PARTICULARS Name(as in I/C): MUHAMMAD NURHISHAM BIN MOHAMED SIDEK PETROL-LEVEL NRIC/PASSPORT No: S8022862G E 1/2 Address(Res):BLK 139 SIMEI STREET 1 #03-20 SINGAPORE 520139 1/4 1/2 3/4 F Occupation: Driving Exp: 0.00 Extension (Accessories) Driving License No: S8022862G D/L Type: Local Collection Service 0.00 Issue Date: 2007-09-13 Date of Birth: 1980-08-02 Misc. 0.00 VEHICLE CHECKLIST Security Deposit Collected 0.00 DENTS SCRATCHES Rental Term Cash Start Date 2022-05-09 2022-05-23 End Date o-S Joseph Tan Rented out by: Hirer sign RIGHT FRONT TOP LEFT Signature: ACCESSORIES CHECK MUHAMMAD NURHISHAM BIN **✓** Camera Recorder Reverse Camera CD/ Radio Player MOHAMED SIDEK Reverse Sensor Remote Control S/Tyre S8022862/G

I have read and agreed to the terms & conditions on both sides of this agreement. All information I have given TWINBIZ RENTAL PTE. LTD. in connection with this agreement is true.

IMPORTANT

- THE VEHICLE SHALL BE RENTED OUT ON A DAILY BASIS, WITH A MINIMUM RENTAL PERIOD OF SIX MONTH.
- IN THE EVENT THAT THE HIRER RETURN THE VEHICLE PRIOR TO THE END OF THE MINIMUM RENTAL PERIOD, THE HIRER WILL BE REQUIRED TO PAY THE FULL RENTAL FEE APPLICABLE FOR THE REMAINING PERIOD UP TO THE END OF THE MINIMUM RENTAL PERIOD.
- ONLY PERSONS ABOVE 22 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.

 NAME OF THE PERSON OF THE
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN, AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE
- IN CASE OF ACCIDENT THE HIRER SHOULD REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
 THE VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY TWINBIZ RENTAL PTE.
- THE VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY TWINBIZ RENTAL PTE.

 LTD..
- AN ADDITIONAL EXCESS OF \$2000 OF ALL CLAIM WILL APPLY FOR VEHICLE USE OUTSIDE SINGAPORE AND \$3000 FOR AGE ABOVE 65.

| DATE IN | TIME IN | MILEAGE | CHECKED BY | REMARKS | | 00.111 | |
|------------|---------|---------|------------|---------|---------------------------|--------|--|
| 14/05/2022 | 9:55UPS | | | | SIGNATURE OF HIRER/DRIVER | lhit- | |
| | | | | | | | |

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 27 Apr 2022 / 16:41:00

Receipt Date/Time: 27 Apr 2022 / 16:41:00

Tax Invoice/Receipt

Receipt No.: ITNET-00000-220427-003613

Previous Receipt No.:

| S/N Item Description/ Business Transaction Reference | | Amount Before | GST Amount | Amount After GST |
|---|--------------------------|------------------|---------------|---------------------|
| No. Result of Insurance Enquiry - SLG4107X As at 26 Apr 2022/19:30:00 Insurance Co: INDIA INT'L INS PTE LTD Insurance Enquiry - SLG4107X | | GST (S\$) | (S\$) | (S\$) |
| Enquiry Fee 20220427164039780805 | | 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 | | | |
| | cp7yn2af | | 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.

LETTER OF AUTHORISATION

To: M/s N-51 Automotive Pte Ltd Singapore

| LONG | PIE TWDS CHANGI BY TUNOS PLYORER | ON | 26/04/20n |
|-----------|--|---------------------|-----------------|
| We | JY ANTO PIE CID NRIC/P | assport No: | 202103194N |
| of | 60 JUN LAM MUAT #05-57 CARRO | is comple st | 7378691 |
| ne owner | r of vehicle no. SM2 377 DX hereby authorise | you to commence rep | air to the said |
| ehicle fo | orthwith. 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 indequate, 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 | | |
|---|--------------------------|--|
| Policy No. | Expiry Date: | |
| Pate TE | Excess: | |
| S DOWN TO | Mile Complete Management | |
| Owner's Signature/Co's stamp (if applicable) | Witness Signature/Name | |
| , at the second | | |

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 witholding 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 27/04/2022 18:22 (SGT) Date of Accident 26/04/2022 19:30 (SGT) Exact Location of Accident Near 22 Euros Cres, Singapore 400022 Additional Location Information PIE Towards Changi Before Eunos Flyover Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

SMZ3780X

INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner JY Auto Pte Ltd Company Reg No 202103194N Email Address eugeneyapyl@gmail.com Mobile Phone No (Phone) +65-86089649 Alternative Phone No +65-86089649

VEHICLE PARTICULARS

Vehicle Registration Number

Manufacturer Renault Model Scenic Variant IV 1.5 DCI AT EU6

Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to

your vehicle? **y** No - Claiming third party Vehicle Category Private hire Transmission Auto CC 1461

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Yes Policy Number SPMF1000000518 Cover Note Number

DRIVER

Name of Driver Muhammad Nurhisham Bin Mohamed Sidek NRIC No S8022862G

| Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver | 02/08/1980 Outdoor 13/09/2007 14 YEARS AND 7 MONTHS Male (Phone) +65-98483580 - shazsham2008@gmail.com Blk 139 Simei 1 #03-20 Singapore 520139 No Hirer No |
|--|--|
| GENERAL INFORMATION OF THE ACCIDENT | |
| Type of Accident Weather Conditions Road Surface | Collision - Head to Rear Clear Dry |
| OTHER INFORMATION | |
| Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No 2 Yes No Yes 3 |
| PASSENGER 1 | |
| Name Gender | Unknown Male |
| PASSENGER 2 | |
| Name Gender | Unknown Female |
| DETAILS OF POLICE ACTION | |
| Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom? | No No |
| CIRCUMSTANCES OF ACCIDENT | |
| Refer to Sketch Plan | |
| ATTACHMENT(S) | |
| Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded? | Yes No No |
| DETAILS OF OTHER | VEHICLE PROPERTY 1 |

SLG4107X

Vehicle Registration Number
Vehicle Manufacturer

| Vehicle Model | <u></u> |
|---|----------------------|
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | William |
| Contact Number | (Phone) +65-98449132 |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | 3 |

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Gender
Male
Phone No
(Phone) +65-98483580
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Was this injured conveyed to hospital by ambulance?

Muhammad Nurhisham Bin Mohamed Sidek
Male
(Phone) +65-98483580
Blk 139 Simei Street 1 #03-20
Singapore
520139
INZ3780X

SKETCH PLAN

IMPORTANT NOTICE

- 1. Rease 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,
- 3. Information provided must be as truthful and accurate as possible. Any willul misrepresentation or withholding of motorial facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Formby 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 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)

lunderstand, 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 yersilaw 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 clains;
- (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/few 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

Winessed by Reporting Centre

Sketch Plan

| PZE Towneds | Change before | Rows Floorer |
|--|---------------|---|
| المستعدد الم | | |
| \$400 0-2400-2400-2400-24 | | @Linch/folialitions/inconfooraribation) |
| رئيس | | |
| | 四洋科 | e former and a second a second and a second |

A - Smz 3780x B - SLG 4107 x

| Describe Circumstances of the Accident |
|---|
| As per above dute and time, I was driving Smz 3780x along Pre towards Changi on the extreme right land. Somewhere before Euros Flyover, valuitus in trind it are jam broke and stopped due to accident. As Such , I applied broke and stop accordingly. Dut at sudden, I fell an impact from the rem. I aligned and clies wered vet (B) SLG 4107x from gordin Collided only My Vehicle Per portion. We exchanged particular and left the scene. |
| along Pre towards Change on the extreme right land. Somewhere |
| before Euros Plyonery Which's Ir front of me jam broke and |
| Stopped due to accided. As Such a 2 applied broke and stop |
| accordingly. Out of sudden, I fell an impact from the rear. |
| I alignmed and discovered vel (B) SLG 4107x front gordion |
| Collised onto my vehicle rem portion. We exchanged particular |
| and left the scene, |
| |
| Veh (A) - Smz 3780x Veh(B) - SLG 4107x. |
| 1 12h(B) - SLG 4107x. |
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Declaration

We declare the foregoing particulars are true is every respect.

Policyholder's Signature / Date &

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

Winessed by Meporting Central Personner