

Teamwork Garage Pte Ltd

53 Ubi Avenue 1 #01-23/24 Singapore 408934

Paya Ubi Industrial Park

Tel: 6844 2475 Fax: 6844 2474

Email: claims@teamworkgarage.com

GST Register No: 201015366H

03RD August 2022

Our reference: 2205-34 Your reference: SHA6278B

**AXA Insurance Singapore Pte Ltd** 

BY EMAIL

Robinson Road P.O. Box 1094 Singapore 902144

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant

TRUST MOTOR LEASING PTE LTD

Address

53 UBI AVENUE 1 #01-43 PAYA UBI INDUSTRIAL PARK SINGAPORE(408934)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on 19/05/2022 along PIE TO PAYA LEBAR EXIT involving our client's vehicle registration number SLC7093C and vehicle registrations number SHA6278B driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair : \$4,012.50

Loss of Rental : \$1,260.00

LTA search : \$7.49

Total : \$5,279.99

### A copy of each of the following supporting documents is enclosed:-

- a) Our client's Accident Report / Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) Letter Of Authorization;
- e) Tax Invoice;
- f) LTA Search Invoice;
- g) Certificate of Insurance;
- h) Satisfaction of repaired vehicle;
- i) Rental Form & Rental Receipt;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,

Teamwork Garage Pte Ltd

Encl.

SN07225K000Q / NTUC Income Insurance Co-operative Ltd ENTRY DATE & TIME: 20/05/2022 14:18 (SGT) SUBMITTED BY: Ganesh Sinathambi VERSION: 1 (20/05/2022 14:18 (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.

4. The issue and acceptance of this 1 of the 1 of the Police for investigation.

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 Date of Accident

**Exact Location of Accident** 

^dditional Location Information

ountry/State of Loss

20/05/2022 14:18 (SGT) 19/05/2022 17:06 (SGT)

Singapore

PIE TO PAYA LEBAR EXIT

Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLC7093C

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

**Email Address** 

Mobile Phone No

Alternative Phone No

VEHICLE PARTICULARS

**1anufacturer** 

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission

CC

Yes

TRUST MOTOR LEASING PTE. LTD.

201431935M

peilin.trustmotor@gmail.com

(Phone) +65-87989519

(Office) +65-63384472

Private use

**COROLLA ALTIS** 

Toyota

No - Claiming third party

Private hire

Auto

1600

#### **INSURANCE COMPANY**

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

NTUC Income Insurance Co-operative Ltd

Comprehensive

Yes

5109360791-03

drivo CLASSIC

DRIVER

Name of Driver

NRIC No

MUHAMMAD FIRMAN BIN BAKTIAR S88363321



Accident report SN07225K000Q

Date Of Birth Occupation

Date Of Driving Pass Driving experience

Gender

Mobile Number Alt. Phone Number **Email 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Side Swipe Raining Road Surface Wet

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?

PASSENGER 1

Name Gender

PASSENGER 2

Name

Gender

**FATHER** Male

27/09/1988

24/02/2011

11 YEARS AND 3 MONTHS

BLK 324 UBI AVE 1 #11-549

MDFIRMANBAKTIAR@GMAIL.COM

(Phone) +65-87977742

Outdoor

Male

400324

No

No

No

No

Yes

3

No

Hirer

**MOTHER** 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** 

Vehicle Registration Number Vehicle Manufacturer

**SHA6278B** 



Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Taxi Name of Driver **TONG TUCK WONG** NRIC No S1627168C **Contact Number** (Phone) +65-96553430 Address Address complement Postcode **Insurance Company Name Nature Of Damage** Details of property damaged in accident No. Of Passenger (Including Driver) 1

INCOME MOTOR SERVICE CENTRE		Report Date & Start Time.	20/05/2022 / 13:34
Report No: MT'	D.O.A: <u>19/05/2022</u> Time: <u>17:06</u> <u>hrs</u>	Vehicle No St.C7093C	Reporting Type:

#### **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.
- 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 lodgment 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

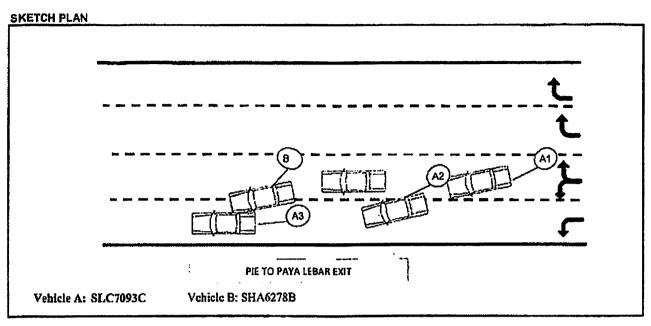
20/05/22 / 13:34

Time Di

20/05/22 / 13:34 ar's Signature (if criver is not the policyholder) / Date & Timo Ganesh (S993561)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Perennel

Policyholder's Signature / Date & Time



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was on lane 3, I change to lane 4 as the traffic was heavy. After I changed and going straight there was no vehicle at that point of time on lane 4. Suddenly vehicle B swerved into my lane without signalling and collided to my right side. After which both of us drivers alighted to assess the damage and took photos. We went to sheltered area and exchange particulars. No one was injured in this accident.

Declaration

X

I/We declare the torong particulars are true in every respect.

20/05/22 / 13:34 Policyholder's Signature / Date & Time

20/05/22 / 13:34

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

**Customer Care Executive** 

Motor Service Centre

Ganesh (\$993561)

Wilnessed by Reporting Centre Personnel

#### > Back to OneMotoring

<b>Enquire PARF/COE Rebate for Registered Veh</b>	icle
Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	935M
Vehicle Details	
Vehicle No.:	SLC7093C
Vehicle to be Exported:	Yes
Intended Deregistration Date:	12 May 2022
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS CLASSIC 1.6 CVT
Primary Colour:	Grey
Manufacturing Year:	2015
Engine No.:	1ZRX534544
Chassis No.:	MR053REH104540171
Maximum Power Output:	90.0 kW (120 bhp)
the state of the s	and the control of th
Open Market Value:	\$17,804.00
Original Registration Date:	24 May 2016
First Registration Date:	24 May 2016
Transfer Count:	<u> </u>
Actual ARF Paid:	\$17,804.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 May 2026
PARF Rebate Amount:	\$12,462.00
Intended COE Rebate Details	
COE Expiry Date:	23 May 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$47,889.00
COE Rebate Amount:	\$19,297.00
Total Rebate Amount:	\$31,759.00
in the there alleges	

The information contained herein is correct as at 12 May 2022





Race



### LETTER OF AUTHORIZATION

To AXA & TEAMWORK GARAGE PTE LTD (Third party insurance & Workshop)
Claimant : TRUST MOTOR LEASING PTE LTD
Dear Sirs,
I/We, TRUST MOTOR LEASING PTE LTD owner of vehicle no. SLC 7093C
hereby authorize my/our repairer, TEAMWORK GAR AGE PTE LTD
act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or
loss of use ("claim") for my/our vehicle no. SLC 7093 ( that was damage pursuant to the
accident which occurred at/along  PIE TO PAYA LEBAR EXIT
C114 C2 - 0.2
involving vehicle nos. SHA 6278B
I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies pertaining the above mentioned accident due to me/us to my/our repairer/solicitors
TEAMWORK GARAGE PTE LTD . I/We hereby authorize you to forward and release all
compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors
TEAMWORK GARAGE PTE LTD pertaining to above said accident whom I/we
authorized and assigned to collect the said compensation monies.
I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without prejudice
and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s concerned.
I/We acknowledge that the Discharge Voucher applies only to my/our applies on my/our applies only to my/our applies only to my/our applies only to my/our applies on my/our applies only to my/our applies only to my/our applies only to my/our applies on my/ou
I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein
should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured
losses claim arising of the subject matter in the action.
Thank you.
Dated this 25 day of 05 (month) 20 27 (year)
Signature of owner vehicle (claimant):
Name of owner of vehicle (claimant): TRUST MOTOR LEASING PIE LTD
NRIC Number (claimant): 201431935M



#### TEAMWORK GARAGE PTE LTD

BLK 53 UBI AVE 1 #01-24/34 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934 TEL:

90119989 / 83389989

(TEL) (65) 6844 2475

(FAX) (65) 6844 2474

(E-MAIL) claims@teamworkgarage.com

UEN No. 201015366H

GST Reg No: 201015366H

#### Bill To:

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

### Tax Invoice

Invoice number:

TI-9848

Date:

3/8/2022

Terms:

C.O.D.

Vehicle number:

SLC7093C

Make / Model:

**TOYOTA ALTIS** 

Description		Amount (S\$)
ACCIDENT INVOLVING SLC7093C / SHA6278B ON 19/05/2022 @ PIE TO PAYA LEBA	IR EXIT	
NCLUSIVE OF SUPPLYING PARTS , LABOUR , PANEL BEATING AND SPRAY PAINTING	i i	
UMP SUM REPAIR		\$3,750.00
Thank you for your business and have a nice day !		
Reference: 2205-34	Subtotal	\$3,750.0
Cheque payment should be issued in favour to TEAMWORK GARAGE PTE LTD	Add: GST 7%	\$262.5
AYNOW UEN: 201015366H	Total Inc GST 7%	\$4,012.5
* Please ensure that your vehicle is of good condition upon the point of collection.	Less: Deposit	\$0.0
. & O. E	Balance Due	\$4,012.50







#### > Back to OneMotoring

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

20 May 2022 / 16:45:45

Receipt Date/Time: 20 May 2022 / 16:45:45

#### Tax Invoice/Receipt

Receipt No.: ITNET-00000-220520-003210

Previous Receipt No.:

Insurance Co: AXA INSURANCE PTE LTD  1	S/N Item Description/ Business Transaction Referen	nce	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Insurance Co: AXA INSURANCE PTE LTD   Insurance Enquiry - SHA6278B	Result of Insurance Enquiry - SHA627	8B)			
Insurance Enquiry - SHA6278B   Enquiry Fee   20220520164447591088   Sub-Total   7.00   0.49   7.49	As at 19 May 2022/17:06:00				
Enquiry Fee 20220520164447591088  Sub-Total 7.00 0.49 7.49  Result of Insurance Enquiry - SKX3065L As at 20 May 2022/14:00:00 Insurance Co: SOMPO INSURANCE SINGAPORE PTE. LTD.  Insurance Enquiry - SKX3065L Enquiry Fee 7.00 0.49 7.49 20220520164447648631  Sub-Total Protal 7.00 0.49 7.49  Total Before Rounding 14.00 0.98 14.98  Rounding Difference 0.03  Total Amount Payable 14.95  Paid By 540191XXXXXX6572 eNETS Credit Card 14.95  Total Cash Change 0.00  Tendered Amount 14.95	Insurance Co: AXA INSURANCE PTE	LTD			
Result of Insurance Enquiry - SKX3065L  As at 20 May 2022/14:00:00  Insurance Co: SOMPO INSURANCE SINGAPORE PTE. LTD.  2	Enquiry Fee		7.00	0.49	7.49
As at 20 May 2022/14:00:00 Insurance Co: SOMPO INSURANCE SINGAPORE PTE. LTD.  Insurance Enquiry - SKX3065L Enquiry Fee		Sub-Total	7.00	0.49	7.49
Insurance Enquiry - SKX3065L   Enquiry Fee   7.00   0.49   7.49   20220520164447648631   Sub-Total   7.00   0.49   7.49   Total Before Rounding   14.00   0.98   14.98   Rounding Difference   0.03   Total Amount Payable   14.95   Paid By   540191XXXXXX6572   eNETS Credit Card   14.95   Cash Change   0.00   Tendered Amount   14.95   Total   14.95   Cash Change   0.00   Tendered Amount   14.95   Total   14.95   Total   14.95   Cash Change   0.00   Tendered Amount   14.95   Total   14.95   Total   14.95   Total   14.95   Total   Tendered Amount   14.95   Total   Tendered Amount   14.95   Total   Tendered Amount   14.95   Total   Tendered Amount   14.95   Tendere	Result of Insurance Enquiry - SKX306 As at 20 May 2022/14:00:00	5L			
Enquiry Fee 20220520164447648631  Sub-Total 7.00 0.49 7.49  Total Before Rounding 14.00 0.98 14.98  Rounding Difference 0.03  Total Amount Payable 14.95  Paid By 540191XXXXXXX6572 eNETS Credit Card 14.95  Total Cash Change 0.000  Tendered Amount 14.95	Insurance Co: SOMPO INSURANCE S	SINGAPORE PTE. LTD.			
Sub-Total   7.00   0.49   7.49     Total Before Rounding   14.00   0.98   14.98     Rounding Difference   0.03     Total Amount Payable   14.95     Paid By   540191XXXXXXX6572   eNETS Credit Card   14.95     Total   14.95     Cash Change   0.00     Tendered Amount   14.95     Tendered Amount   14.95     Total   14.95     Tendered Amount   14.95     Tendered Amount   14.95     Total   14.95     Tendered Amount   14.95     Tendered Amount   14.95     Total   14.95     Tendered Amount   14.95     Tende	2 Insurance Enquiry - SKX3065L				
Total Before Rounding         14.00         0.98         14.98           Rounding Difference         0.03           Total Amount Payable         14.95           Paid By         540191XXXXXXX6572         eNETS Credit Card         14.95           Total         14.95           Cash Change         0.00           Tendered Amount         14.95			7.00	0.49	7.49
Rounding Difference         0.03           Total Amount Payable         14.95           Paid By         540191XXXXXXX6572         eNETS Credit Card         14.95           Total         14.95           Cash Change         0.00           Tendered Amount         14.95		Sub-Total	7.00	0.49	7.49
Total Amount Payable       14.95         Paid By         540191XXXXXXX6572       eNETS Credit Card       14.95         Total       14.95         Cash Change       0.00         Tendered Amount       14.95		<b>Total Before Rounding</b>	14.00	0.98	14.98
Paid By         540191XXXXXXX6572       eNETS Credit Card       14.95         Total       14.95         Cash Change       0.00         Tendered Amount       14.95		Rounding Difference			0.03
540191XXXXXX6572       eNETS Credit Card       14.95         Total       14.95         Cash Change       0.00         Tendered Amount       14.95		Total Amount Payable			14.95
Total 14.95 Cash Change 0.00 Tendered Amount 14.95		Paid By			
Cash Change 0.00 Tendered Amount 14.95		540191XXXXXX6572	eNETS	Credit Card	14.95
Tendered Amount 14.95		Total			14.95
		Cash Change			0.00
Excess Refundable Amount 0.00		Tendered Amount			14.95
		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.



#### **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: 5109360791-02-000072

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SLC7093C

Chassis Number

: MR053REH104540171

2. Name of Policyholder

: TRUST MOTOR LEASING PTE. LTD.

3. Effective Date of Insurance

: 18 Apr 2022

4. Expiry Date of Insurance

: 17 Apr 2023

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 social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

#### This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

# 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.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: \$\$1,500
WINDSCREEN EXCESS	: \$\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE 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

: HUANG GUOQING TERRY (00000573375)

Date of Issue

: 01 Apr 2021 19:00 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

**Chief Executive** 

# SATISFACTION OF REPAIRED VEHICLE

I/We, Muhammad Firman Bin Bakthar, ow	ner/driver of
vehicle No. SLC 70 93 C declare that the repairs of my/our vehicle	icle has been
completed and to my/our satisfaction.	
I/We agree that I/we hereby irrevocable absolutely accept the settlement am liability from the third party on the repair costs and/or rental and/or loss of usefinal and that the sum of amount are to be released and payment to the work repairs in respect of the damages caused in the accident.	use which are
I/We further acknowledge that any settlement the workshop may reach on my on a without prejudice and without admission of liability basis ins driver/owner/insurers of the other vehicle/s concerned.	
I/We acknowledge that the Discharge Voucher applies only to my/our property will not affect any of the personal injuries claim(s) involved and/or uninsured to a later date. Further the settlement terms herein should not be used as an prejudice to any personal injuries claim(s) involved and/or other uninsured arising of the subject matter in the action.	osses claim in evidence to
Dated this 3   day of 5 (month) 20 22  @ 17 hrs 12 mins	_ (year)
Firman Baktiar Tuy	
Name and Signature	

# K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934 Tel: 6844 5938 Fax: 6285 5228 Email : kntcars@gmail.com

Biz Reg. No.: 53208965X

No.: 4507

Authorised Signature

OFFICIAL RECEIPT	0 2 AUG 2022 Date:
The Sum of Dollars ONE thousand & two mind	Ired and Sixty Pollars only
Being payment of SLN7714A 25/05/2	072 - 31/05/2022
\$ 1260	K & t Cars

# K&tC

VEHICLE RENTAL AGREEMENT

NO.: KT-05644

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934 Tel: 6844 5938 Fax: 6285 5228 Email: kntcars@gmail.com

Replace Veh. No.: < 1117714A Veh. No.: Replace Veh. M / M: Honda vezel Veh. M'/M:

Biz Reg. No.: 53208965X	454	
HIRER'S P.	ARTICULAR	SAME AS HIRER DRIVER'S PARTICULAR
Name: Trust Motor	Leasing PTE LTD	Name: Muhammad Firman Bin Baktiar
Address:		Address: Blk 324 Vbi AVR 1 #11-549
, houseast land	. u war	5(400324)
1/C: 201431935M	D.O.B:	1/C: 588363327 D.O.B: 27/09/1988
Contact: 63384472	Pass Date:	Contact: 87977742 Pass Date: 24/02/2011

	Left ®	A – ACCIDENT	Hirer's acceptance
The		C – CRACKED	
Rear		D – DENTS	Driver's acceptance
	(a) Right	S – SCRATCHES	

		RENT	TAL DETAILS		No.
Mileage Out		REMARKS	Mileage In	brandburg, Jean Das	REMARKS
Date Out	25/05/22		Date In	31/05/2012	
Time Out	1100		Time In	1712	
ASSIGNED BY	April 1 No Silver		CHECKED BY	New York Control of the Party	

		RENTAL	CHARGES			PE	TROL / DI	ESEL LEV	/EL	
Daily	@\$	180	Days @	\$ 1260	OUT	E	1/4	1/2	3/4	F
Weekly	@\$		Wks @	\$					19 11	
Monthly	@\$		Mth @	\$	IN	E	1/4	1/2	3/4	F
Hours	@\$		Hrs @	\$	fun debuet	tel, year	- Payme			frir
*Inclusive of additional charges (if any)  Amt payable* \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Petrol Ch	arges	YES	NO	AMT:				
		Amt payable*	\$ 1)60 CDW			YES	NO	AMT:		
		Security	Deposit	YES	NO	AMT:				
Bank / Cheque No.:		Advance	Payment	YES	NO	AMT:				

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tender accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true

#### IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)

- Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
   Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- In view of all accident, the hirer will bear the full responsibility for the SGD\$3,500-/ excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT		* * * * * * * * * * * * * * * * * * * *	
Signature of hirer / driver (company stamp if any)	For and on behalf	of K & t CARS (authorised signature only)	