

# 振明摩托 CHIN MENG MOTORS

1 Kaki Bukit Ave 6, #01-40 Autobay@Kaki Bukit, Singapore 417883  
Tel: 6747-4810 Fax: 6745-5018  
cmmotors@singnet.com.sg

Our Ref: CMM057/23/TP  
Your Ref: TP claim against YQ5426L

20-May-23

**AIG Asia Pacific Insurance Pte Ltd**  
78 Shenton Way  
#07-16  
Singapore 079120

**Attn: Motor Claims Department**

Dear Sir/Ms,

**Accident Involving GBJ1862X and YQ5426L on 14-06-2022 at 13 Woodlands Link**

We refer to the above matter. The accident was caused solely by the negligence of your insured and as a result, our client had incurred the following cost and losses:-

Cost of Repair (Surveyed by your surveyor): S\$	2,950.00
Loss of use 06 days (04 days + 1 Sunday) @\$150.00 :	720.00
GIA search fee:	7.45
S\$	<u>3,677.45</u>

Enclosed are copies of following documents for your perusal:

- (X) Repair bill
- (X) Letter of authorisation
- (X) GIA report
- (X) Photocopy of driver's IC & DL
- (X) GIA search fee

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**AIG Asia Pacific Insurance Pte Ltd**  
78 Shenton Way  
#07-16  
Singapore 079120

**Attn: Motor Claims Department**

Dear Sir/Ms,

**Re: Final cost of repair to Toyota Dyan no: GBJ1862X**

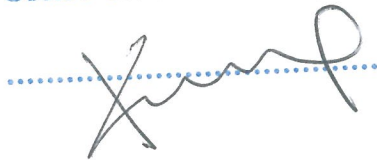
Date of accident: 14-06-2022

Total cost of repair and labour charge incurred for dismantling and replacement for parts of the above mentioned vehicle etc as recommended in nett as lump sum by surveyor.

Total lump sum: S\$ 2,950.00

Dollars: Two thousand nine hundred and fifty only.

振明摩托  
CHIN MENG MOTORS





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

"We/I, Chin Meng Motors ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte. Ltd. \_\_\_\_\_ ("name of surveyor") with respect to the amount claimed for S\$ \_\_\_\_\_ (repair costs), S\$ \_\_\_\_\_ (loss of use/rental) S\$ \_\_\_\_\_ (search fees) for vehicle no. GBJ1862X that was damaged pursuant to the accident which occurred on 14-06-2022 (date) along 13 Woodlands Link Loading Bay (location) involving vehicle no/s YQ5426L.

This is pursuant to the inspection conducted on \_\_\_\_\_ (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner Certis CISCO Auxiliary Police Force Pte Ltd ("third party claimant") of vehicle no. GBJ1862X to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner 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 any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to GBJ1862X (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ (month) 20\_\_\_\_ (year)

\_\_\_\_\_  
Signed by AIG appointed surveyor

**振 明 摩 哆**  
**CHIN MENG MOTORS**  
\_\_\_\_\_  
Chopped & Signed by "the workshop"

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 18 Jun 2022 / 08:48:07

Receipt Date/Time : 18 Jun 2022 / 08:48:07

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-220618-000265

Previous Receipt No. :

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

<b>Amount Before GST (S\$)</b>	<b>GST Amount (S\$)</b>	<b>Amount After GST (S\$)</b>
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Result of Insurance Enquiry - YQ5426L

As at 14 Jun 2022/11:17:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1 Insurance Enquiry - YQ5426L

Enquiry Fee

20220618084702594963

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

426588XXXXXX0994

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.



## 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	15/06/2022 15:07 (SGT)
Date of Accident	14/06/2022 11:17 (SGT)
Exact Location of Accident	Woodlands, Singapore
Additional Location Information	13 WOODLANDS LINK LOADING BAY
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ1862X
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	CERTIS CISCO AUXILIARY POLICE FORCE PTE LTD
Company Reg No	2XXXXX882K
Email Address	JEREMYC_QUEK@CERTISGROUP.COM
Mobile Phone No	(Phone) +65-68428849
Alternative Phone No	(Office) +65-68428849

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	3000

### INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	D-22099102MFCV/38
Cover Note Number	-

### DRIVER

Name of Driver	FAM KAI CHIN
NRIC No	SXXXX507A

Date Of Birth	29/03/1983
Occupation	Outdoor
Date Of Driving Pass	02/09/2013
Driving experience	8 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84047754
Alt. Phone Number	-
Email Address	JEREMYC_QUEK@CERTISGROUP.COM
Address	BLK 124C RIVERVALE DRIVE #14-219
Address complement	-
Postcode	543124
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collided into Parked Vehicle
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	STAFF
Gender	Male

#### PASSENGER 2

Name	STAFF
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO INCIDENT REPORT.

#### 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	YQ5426L
Vehicle Manufacturer	-

Vehicle Model	-----	-
Vehicle Variant	-----	-
Vehicle Colour	-----	-
Vehicle Category	-----	-
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)	-----	-

Commercial vehicle

# SKETCH PLAN

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please read and correctly fill details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder or the Policyowner or the Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to reject its policy liability.
4. The make 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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 long time be made available upon application by interested parties.
7. By the completion of this report to the insurers, you hereby consent to the archiving with its result of the entire and this copy of the report being made available aforesaid.

### 8. Consent under the Personal Data Protection Act (PDPA)

I, the insured, do hereby 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 to 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 purposes of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claim;
  - (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 envelops, parcels, 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 my Personal Information may 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 situated outside of Singapore, for one or more of the above Purposes.



*[Signature]*

16/10/2022

16/10/22

Policyholder's Signature (Driver & Third Party)

Driver's Signature (Driver) and the policyholder Date

Witnessed by Reporting Centre Personnel

### Sketch Plan

<p>Vehicle 1 (Insured)</p> <p>WV 74262</p>	<p>Vehicle 2 (Involved)</p> <p>WV 74262</p>	<p>Vehicle 3 (Involved)</p> <p>WV 74262</p>
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Witnesses' Description of the Accident



Refer to attached incident report.

**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

14/6/2022

1820 hrs.



Witnessed by Reporting Centre Personnel



# OPS STORE INCIDENT REPORT

S/N	0404 7754
Item / vehicle Description	
GBJ 1862 X	

Location of Incident	Department	Date of Incident	Time of Incident	Weather Condition
13 Woodlands Link	CB2/BNR	14/6/2022	1117	Wet

Person(s) Involved	Particulars of Witness(es)			
HENG YAN HAI	LHL Driver	14/6/2022	1117	Wet.

## Details of Incident

(Who, What, When, How, Why and Other Essential Details)

At the time of 1117 hrs on 14 June 2022, I parked vehicle GBJ 1862 X at 13 Woodlands Link loading bay, to help my team to load the things into the vehicles. At moment Mr Heng Yan Hai was drive the vehicle YQ 5426J Toyota and reversed his vehicle to the same parking lot and hit my vehicle. Damage found in front of my vehicle. ~~after the incident happened and the other party's vehicle is fine.~~ ~~and the other party's vehicle is fine. In this~~ In this accident incident, no one was injured.

Reported by :	FRAN KAI CHIU Ext 1152 09	Signature:	Date: 14/6/2022	Time: 1830
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**CERTIFICATE OF INSURANCE**

ORIGINAL

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Type of Policy. : COMMERCIAL VEHICLE - FLEET  
Type of Cover. : Comprehensive  
Certificate No. : D-22099102MFCV/38  
Vehicle No / Chassis No : GBJ1862X / JTFAT35Y90K212130  
Name of Insured : CERTIS CISCO AUXILIARY POLICE FORCE PTE LTD  
Period Of Insurance : 01.04.2022 To 31.03.2023  
Insured Estimated Value : Market Value At Time Of Loss  
Financial Institution : N.A

**Excess :**

AUTHORISED/ANY WORKSHOP (EXCLUDING MANUFACTURER/DEALER WORKSHOP) - OD

- SGD1,000.00 FOR RISK 1 TO 38

- SGD1,500.00 FOR RISK 39 TO 89

- SGD2,400.00 FOR RISK 90 AND 91

MANUFACTURER/DEALER WORKSHOP - OD

- SGD2,000.00 FOR RISK 1 TO 38

- SGD3,000.00 FOR RISK 39 TO 89

- SGD4,800.00 FOR RISK 90 AND 91

ALL EXCESS AMOUNTS ARE SUBJECT TO GST

**Authorised Driver\***

ANY AUTHORISED DRIVERS

**Persons or classes of persons entitled to drive\***

Any person who is driving on the insured's order or with their 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.

**Limitations as to use\***

(1) Use in connection with the insured's business.

(2) Use for the carriage of passengers (other than for hire or reward) in connection with the insured's business.

(3) Use for social, domestic or pleasure purposes.

The Policy does not cover:-

(1) Use for hire or reward or for racing, pacemaking, reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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

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)

MS First Capital Insurance Limited  
(Approved Insurers)


STELLAL/B0029/MZ300C

Issued at Singapore on 25.03.2022


  
Authorised Signature



9432094



NRIC No. **S8367507A**



Nationality  
**MALAYSIAN**

**APT BLK 124C RIVERVALE DRIVE #14-219**  
**SINGAPORE 543124**

**S8367507A** Date: **05/05/2017**

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S8367507A**



Name  
**FAM KAI CHIN**  
**范 凯 钦**

Race  
**CHINESE**

Date of birth  
**29-03-1983**

Country/Place of birth  
**MALAYSIA**

Sex  
**M**



**S8367507A**

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**


 Licence Number: **S8367507A**  
 Name: **FAM KAI CHIN**  
 Birth Date: **29 Mar 1983**  
 Issue Date: **04 Jan 2019**

002888906F

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)		
		EFFECTIVE DATE
Class 2B	Motorcycles $\leq 200$ cc	12 Feb 2009
Class 3	Motor cars with unladen weight $\leq 3000$ kg with $\leq 7$ passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500$ kg	12 Feb 2009
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight $> 2500$ kg	02 Sep 2013
	Motor vehicles which are not constructed to carry load or passengers and the unladen weight $\leq 7250$ kg	

