



江氏修理汽車私人有限公司

KANG CAR REPAIRERS PTE LTD

1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883

TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg

Co. Reg. No. 201300201N GST Reg. No. 201300201N

Our Ref : KCR0620228212AIG

Your Ref : SLL3373Z

Date : 30 MAR 2023

WITHOUT PREJUDICE

AIG Asia Pacific Insurance Pte Ltd

C/O LKK Auto Consultants Pte Ltd

51 Ubi Ave 1

#01-25 Paya Ubi Industrial Pk

Singapore 408933

Attention : Motor Claim Department

Dear Sirs,

Accident involving GBH8212L and SLL3373Z on 16.06.2022 along Ubi Ave 3 / Ubi Rd 1.

We refer to the above accident. On our record showed that you are the insurer of motor vehicle SLL3373Z.

We are instructed that the accident was caused by your insured's negligent driving and/or management of his vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense.

On behalf of and as authorized by M/S The Fun Empire Pte Ltd, the owner of motor-vehicle no: GBH8212L, we submit their claim to you:

Cost of repairs (Inclusive of GST)	\$ 5,076.00
Loss of rental w/gst (6 days x \$120.00)	\$ 770.40
GIA search fee	\$ 2.00
	\$ 5,848.40
	=====

Enclosed herewith are copies of the following documents in support of our client's claim:

- 1) Tax invoice no: KCR-INV2300171
- 2) GIA report of GBH8212L
- 3) Rental agreement and rental invoice
- 4) GIA search fee and invoice

We hope to receive your early reply soon.

Thank you.

Yours faithfully
KANG CAR REPAIRERS PTE LTD

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M/S : AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY #07-16
AIG BUILDING, SINGAPORE 079120

TEL: 64193000 FAX: 68357416
ATTN: Motor Claim Department

Your Ref No: SLL3373Z
Claim Type: Third Party
Accident Date: 16/06/2022
TP Veh Reg No: SLL3373Z

Final No: KCR-INV2300171
Claim No: EST2200194
Date: 30 Mar 2023
Policy No: 5104260107-03
Veh Reg No: GBH8212L
Make/Model: TOYOTA HIACE VAN
TURBO 4DR AT
Chassis No: JTFHT02P000245263
Engine No: 1KD2827103
Reg. Date: 02/10/2018

Tax Invoice to Vehicle No :GBH8212L

PAGE:1

Description	Quantity	List Price	Amount
		S\$	S\$
As recommended by surveyor to proceed repair at total cost/lumpsum cost			S\$ 4,700.00
Add GST @ 8%			376.00
Total Amount payable			<u>S\$ 5,076.00</u>

TOTAL: SINGAPORE DOLLAR FIVE THOUSAND SEVENTY SIX ONLY
SY

For Kang Car Repairers Pte Ltd

E. & O. E.

AUTHORISED SIGNATURE

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	17/06/2022 11:13 (SGT)
Date of Accident	16/06/2022 09:39 (SGT)
Accident Location of Accident	Singapore
Additional Location Information	UBI AVENUE 3 & UBI ROAD 1 JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH8212L

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	THE FUN EMPIRE PTE. LTD.
Company Reg No	201508657Z
Email Address	RYAN@THEFUNEMPIRE.COM
Mobile Phone No	(Phone) +65-90930846
Alternative Phone No	+65-90930846

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	3000

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5104260107-03
Cover Note Number	-

DRIVER

Name of Driver	LIU JIAHUI, ANDY
NRIC No	S9112435A

Date Of Birth	12/04/1991
Occupation	Outdoor
Date Of Driving Pass	06/06/2011
Driving experience	11 YEARS
Gender	Male
Mobile Number	(Phone) +65-81139558
Alt. Phone Number	-
Email Address	LOGISTICS@THEFUNEMPIRE.COM
Address	BLK 121 BEDOK RESERVOIR ROAD #09-210
Address complement	-
Postcode	470121
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	Collision - Head to Rear
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	LUKMAN
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

AT 16 JUNE 2022, 0939HOURS, I WAS DRIVING THE VEHICLE GBH8212L TRAVELLING ALONG UBI AVENUE 3 TOWARDS UBI ROAD 1 AND WAS HIT BY VEHICLE SLL3373Z FROM THE REAR AT THE TRAFFIC LIGHT JUNCTION. MY VEHICLE WAS IN A STATIONARY POSITION WHEN SLL3373Z MOVED FORWARD & HIT MY VEHICLE. I DID NOT MANAGE TO EXCHANGE PARTICULARS WITH THE OTHER PARTY AS IT WAS MY FIRST TIME INVOLVED IN AN ACCIDENT HOWEVER I MANAGE TO TAKE SOME PHOTOS OF THE ACCIDENT.

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	SLL3373Z
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	UNKNOWN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

IMPORTANT NOTICE

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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 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)

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' 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.



Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 17/06/2022

Reporting Centre Personnel's Signature
Name: DAICAF1
NRIC/FIN No.: S793941

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLL3373Z

Date of Accident

16/06/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **AIG Asia Pacific Insurance Pte....**

Period of Insurance **31/03/2022 - 30/03/2023**

Requested By **SHARON YEE (KANG CAR REPA...**

Requested Date **17/06/2022 16:43**

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

RECEIVED
31 AUG 2022

BY:

TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO.
THE FUN EMPIRE PTE LTD 5, CHESTNUT CRESCENT SINGAPORE 679415

DATE	INVOICE NO.
24/8/2022	A 45064

	VHA NO.	DUE DATE	VEH NO.
	A 45064	24/8/2022	GBG 1402 G
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 10 AUGUST 2022 TO 16 AUGUST 2022 YOUR REF: GBH 8212 L	6	120.00	720.00
Account Name: BKW RENT A CAR PTE LTD Account No: 118-312-9991 Paynow UEN: 200106276D Bank: UNITED OVERSEAS BANK LTD (UOB) Branch: UOB Shaw Centre Branch Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG All cheques must be made payable to BKW RENT A CAR PTE LTD. *Please indicate the invoice number and vehicle number in the reference.	Subtotal	\$720.00	
	GST @ 7%	\$50.40	
	TOTAL	\$770.40	

BKW Rent-A-Car Pte Ltd

120 Lower Delta Road #02-15 Cendex Centre (S) 169208 Tel: 6738 7777 Fax: 6738 6666

ACRA No: 200106276D GST Reg. No: 20-0106276-D Website: www.bkw.sg
A subsidiary of **BKW Automobile Pte Ltd**



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