

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

P.I.C - Melody Chin

Reply to :huixin@n51.com.sq

05 April 2023

Our Ref:

CLM17401 / SNG4915G / OCT-04/2022

ALLIANZ INSURANCE SINGAPORE PTE LTD

79 ROBINSON ROAD #09-01 SINGAPORE 068897

ATTN: MOTOR CLAIMS DEPARTMENT

Dear Sir @ Madam,

RE: ACCIDENT INVOLVING SNG4915G & SNF2653E ON 02/10/2022 ALONG CTE(SLE) BEFORE ENTERING SLE(BKE)

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **SNF2653E** 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
 \$ 5,292.00 (Include 8% GST)

 Loss of rental
 \$ 1,800.00 (\$150 X 12 Days)

 Additional 2 days loss of use for pre repair
 \$ 160.00 (\$80 X 2 Days)

 LTA search fee
 \$ 7.45

 S \$ 7,259.45

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM17401
- 2) Hock Chuan Heng Car Rental & Trading Pte Ltd Invoice No: 16030
- 3) LTA search fee
- 4) Letter of Authorisation
- 5) GIA report of SNG4915G

We look forward to your prompt reply.

Yours faithfully,



N-51 AUTOMOTIVE PTE LTD

S.Y.NEO Director











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

ALLIANZ INSURANCE SINGAPORE PTE LTD

79 ROBINSON ROAD

#09-01

SINGAPORE 068897

TAX INVOICE

Date : 04/04/2023 Date in : 05/10/2022 Vehicle Num. : SNG4915G

Make/Model: TOYOTA SIENTA HYBRID 1.5X CVT-2022

Chassis/Eng#: NHP1707271516/1NZ9410115

Accident Date: 02/10/2022 Claim No: CLM17401 Reference: OCT-04/2022

Policy No.: 5113617409-02-000032 (09/08/2023)

LUMPSUM REPAIR BILL

REF: CLM17401-N51 DATED 06/10/2022

BY DIRECT

Amount S\$ 4,900.00

ONIONO DE LA COMPANIONE DE LA COMPANIONE

E. & O.E. Sub S\$: 4,900.00 Add GST (8%) S\$: 392.00

Total Amount S\$: 5,292.00

for N-51 AUTOMOTIVE PTE LTD



9534 0546 0216 5629 :131

If Different From

Section (1)



HOCK CHUAN HENG CAR RENTAL & TRADING PTE LTD.

No. 4 Petain Road, Petain Court Singapore 208086 Tel: 6298 1936, 6294 0246, 6294 9170 Fax: 6298 3864

leasing MAN THER'S PARTICULARS 0435 8742

hereinafter called "the Hirer" hereby confirm having agreed to hire this day from HOCK CHUAN HENG CAR RENTAL & TRADING PTE LTE hereinafter called "the Owner" the undermentioned Vehicle at the rental fees as shown below and I further agree that I shall be held responsible for:-

a) THIRD PARTY ONLY MOTOR VEHICLE COVERAGE the Excess which is the maximum amount of \$1500 to cover for any third party damage or injury claims and also bear the full cost of any damage caused to the hired Vehicle resulting from any single accident including loss from inability to let the same Vehicle out on hire or loss resulting from theft and destruction of the Vehicle.

b) COMPREHENSIVE MOTOR VEHICLE COVERAGE the Excess which is the maximum amount of \$2000 for any damage caused to the hired Vehicle from any single accident or any loss resulting from third party damage claim, injury claim, theft or destruction of the Vehicle.

Only persons above 24 years of age with more than 2 years driving experience, authorised licensed and signing this agreement may drive the vehicle.

whether or not such damage or loss is by person/persons known or unknown to me or by negligence or any breach by me of the Terms and Conditions o Hire, hereinafter mentioned and printed at the back hereof:

Vehicle Regn No. 車輛注冊號码	SLT	1547K			Rental Agreem	nent 合同號碼	No. H16030	Danis collins Co.
Section ①Hirer's And/Or Drive	r's Particul	ars 租車者/駕馬	使員個人言	已錄	租出日期及時 Date & Time	間 05/10	15072-1.	705UPS
性名 Name: Ho Wen-(chieh		7	950.0	交車日期及時 Date & Time	間 /1//	12022 -1	4254RS
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租車者不准載沙或石灰 HIRER MUST NOT CARRY SAND AND CEMENT ON THE VEHICLE PLS CHECK ENGINE OIL AND RADIATOR WATER EVERY MORNING. 我/我們同意以上及後頁租車公司所列的條規與條件/ I/We have read and hereby agree to the terms and conditions on both sit

20162900 租車者簽名 日期 Date Signature of Hi

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time : 03 Oct 2022 / 13:14:16

Receipt Date/Time : 03 Oct 2022 / 13:14:16

Tax Invoice/Receipt

Receipt No.: ITNET-00000-221003-001977

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.	ce	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SNF2653	E			
As at 02 Oct 2022/04:10:00 Insurance Co: ALLIANZ INSURANCE S	SINGAPORE PTE. LTD.			
1 Insurance Enquiry - SNF2653E				
Enquiry Fee		7.00	0.49	7.49
20221003131358595801				
	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			
	kqxknppt		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

Owner Signature (Note Hammy Applicable)

RE:	ACCI	DENT INVOLVING VEHICLE NOS:	SNG 4915 G	_	SNF 2653 E
ALC	NG	CTE(SLE) B4 ENTERING SLE(BKE)		ON	02/10/2022
I/We of the		CAPITAL CAR LEASING PTE LTD 171 CHIN SWEE ROAD #04-08/09 CES C of vehicle no. SNG 4915 G hereby a	NRIC/Passpor ENTRE S(169877) uthorise you to comr		201629008R
vehi	cle fo	thwith. In consideration of you repairing my/our	vehicle at my/our re-	quest.	
a)	by the	hereby irrevocably authorise you to demand claim	gal proceeding, if ne	cessary, in m	ny name, for
	the a you. (to be the a I/We	osts of repair and loss of use, etc and to you approcident' claim and all an any amount claimed, red I/We agree to assign the whole proceeds of my/or appointed by you on my/our behalf) shall accep mount compensated direct to you after deduction undertake to co-operate fully with you and my/ou usion.	ceived and/or settled our third party claim at this as my/our irrev a of their costs on a S	shall belong to you and m ocable autho Solicitor & Cli	absolutely to ny/our Solicitors orisation to pay ient basis.
b)	instru moni	third party claim is unsuccessful or in your discredict and authorise you to claim direct from my/our es due to you. I undertake to pay you for the Excell costs, fees and expenses incurred by you in page 1	insurance company cess applicable unde	on my/our be er my policy a	ehalf for all
c)		own insurers' claim is not applicable and/or the lequate, I/we underake to pay you for your exper			
in c	onne	o irrevocably authorise you to sign all discharge vection with the above claim in my/our absence. I/N ors on my/our behalf as you shall deem fit for the	Ne irrevocable autho	orise you to a	ppoint such a firm
pai un	rty's i dertal	lertake to inform you and/or the Solicitors ap nsurance company communicate with me/us se not to accept any monies or offer of settler nicating with you and obtaining your consent	directly, orally or in ment from the third	writing and	d I/we further
thi	rd pa	ttlement of the third party claim and in case to ty's insurers, I/we undertake to pay you and expenses and disbursement incurred.			
		nsurer is/are D	Expiry Date:		
Da	ite:	Y	Excess:		

Witness Signature/Name

SS2X22A3000V / SME MOTOR PTE LTD ENTRY DATE & TIME: 03/10/2022 17:54 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (03/10/2022 17:54 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Actual 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

03/10/2022 17:54 (SGT) Date of Submission Reported by Driver Date of Accident 02/10/2022 04:10 (SGT) Exact Location of Accident CTE, Singapore Additional Location Information SLE BEFORE ENTERING SLE (BKE) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

1500

Vehicle Registration Number SNG4915G INSURED/POLICYHOLDER Is company? Name Of Registered Owner CAPITAL CAR LEASING PTE LTD Company Reg No 20169008R CAPITALCARLEASING008@GMAIL.COM Email Address Mobile Phone No (Phone) +65-87420435 Alternative Phone No VEHICLE PARTICULARS

Manufacturer Toyota Model Sienta Variant

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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5113617409-02-000032

DRIVER

HO WEN-CHIEH NRIC No S9390240H 14/08/1993 Date Of Birth Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number	17/12/2015 6 YEARS AND 10 MONTHS Female (Phone) +65-93634351
Email Address Address	CAPITALCARLEASING008@GMAIL.COM BLK 642 YISHUN STREET 61 #05-252
Address complement Postcode	- 760642
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 Weather Conditions	Collision - Change/cross lane Raining
Road Surface	Wet
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? Was any injured conveyed to hospital by ambulance?	No -
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s)	Nia
soliciting/offering accident claims assistance? Translator's name	No -
Translator's ID	-
Translator's phone number	-
Translator's email	
Original language used in the statement	•
PASSENGER 1	
Name	UNKNOWN
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	
AS PER ABOVE DATE AND TIME, I WAS DRIVING (SNG49150 ENTERING SLE BKE, VEHICLE B SNF2653E FROM LANE 3 F VEHICLE B FRONT PORTION COLLIDED ONTO MY VEHICLE	ILTERED INTO LANE 2 WITHOUT CHECKING. AS A RESULT,
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes Yes
DETAILS OF OTHE	R VEHICLE PROPERTY 1

SNF2653E

Vehicle Registration Number
Vehicle Manufacturer

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM GHIM WEE
Contact Number	(Phone) +65-91775537
Address	-
Address complement	-
Postcode	-
Insurance Company Name	•
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	3

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please 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 Oriver.
- 3. Information provided must be as truthful and accurate as nossible. Any willful misroprosentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Ferm 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 asurers 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 ladgement 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 aforesoid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lungerstand, acknowledge, agree and consent that :

- (a) My insurer, my w orkshop and the General Insurance Association of Singapore ("GIA") mayrare parmitted 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
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by mo;
- (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 ma 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 insurerist who have insured vehicle(s) involved in this accident and the Insurers' law yers/law fams, may/are permitted to collect. use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Persental Viscosition may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (motodigs, but for the above Purposes,



Policyholder's Signature / Date &

Oriver's Signature (If driver is not the policyholder) / Date & Tene

Winessed by Reporting Centre Personnel

Sketch Plan

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B - SNF 2653 B	- 	<u> </u>		Properties and George		opportune des
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