# TwinCar AUTOMOTIVE PTE LTD

Company Registration and GST No. 200714616M

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

Kaki Bukit Autohub Singapore 417921

Tel: 67440510

Fax: 67410510

P.I.C - Melody Chin

Reply to :huixin@n51.com.sg

03 March 2023

Our Ref:

CLM15722 / SMF5700U / NOV-07/2022

#### ALLIANZ INSURANCE SINGAPORE PTE LTD

79 ROBINSON ROAD #09-01 SINGAPORE 068897

ATTN: MOTOR CLAIMS DEPARTMENT

Dear Sir @ Madam,

## RE: ACCIDENT INVOLVING SMF5700U & GBC9572S ON 16/11/2022 ALONG PIE TOWARDS CHANGI BEFORE KIM KEAT LINK

We refer to the above accident which was caused due to the negligence of your insured driver of vehicle No: **GBC9572S** 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	,	\$ 5,616.00	(Include 8% GST)
Loss of rental		\$ 840.00	(\$120 X 7 Days)
Additional 2 days loss of use for pre repair		\$ 160.00	(\$80 X 2 Days)
Towing fee	8	\$ 100.00	
LTA search fee		\$ 7.45	
	S	\$ 6,723.45	-

We enclosed herein the following documents for your necessary attention.

- 1) Our Final Bill No: CLM15722
- 2) Hock Chuan Heng Car rental & Trading Pte Ltd Invoice No: 16058
- 3) Autobay Towing SMF5700U (receipt attached)
- 4) LTA search
- 5) Letter of Authorisation
- 6) GIA report of SMF5700U

We look forward to your prompt reply.

Yours faithfully,



**Twincar Automotive Pte Ltd** 

S.Y.NEO Director

# TwinCar AUTOMOTIVE PTE LTD

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.: 200714616M GST Registration No.: 200714616M

ALLIANZ INSURANCE SINGAPORE PTE LTD 79 ROBINSON ROAD

#09-01

SINGAPORE 068897

#### TAX INVOICE

Date : 29/12/2022 Date in : 16/11/2022 Vehicle Num. : SMF5700U

Make/Model: HONDA CIVIC 1.5 TURBO VTIS SR-2018 Chassis/Eng#: MRHFC1660JT000012/L15B73621181

Accident Date: 16/11/2022 Claim No: CLM15722 Reference: NOV-07/2022

Policy No.: 5128094838 (17/06/2023)

LUMPSUM REPAIR BILL

REF: CLM15722-TWINCAR DATED 17/11/2022

BY DIRECT

Amount S\$ 5,200.00

E. & O.E.

Sub SS:

5,200.00

Add GST (8%) S\$:

416.00

Total Amount S\$:

5,616.00



for TWINCAR AUTOMOTIVE PTE LTD



HIRER'S PARTICULARS If Different From Section (1)

HOCK CHUAN HENG CAR RENTAL & TRADING PTE I

T-1, 0000 4000 0004 0046 0004 0170 Eavy 6200 2064

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f	BLK 622 BUKIT	BANOK	CENTRAL CONTRACTOR	City Streams off cruder of but it	of the owner. If the latter sala	2.5

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.

c) 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	碼 SKN	1 6597 8	S Storage Co.	Rental Agreem	ent 合同號碼	No. H 1605	8.7. 49.4
Section OHirer's And/Or Driv	er's Particu	lars 租車者/駕馬	驶員個人記錄	租出日期及時	間 (1,711	Design of the second second	priest states
姓名 Name:	C K	NOK SENC	y an	Date & Time ( 交車日期及時 Date & Time )	間 っっし	It's to the state of	ours
地址 Address: BLK 62	22 BU	KIT BATO	K CENTRAL	Chargeable	IN 29 1.	Rates	Amount
#18-5	02	reference despris	s 65062	THE PASS OF THE	天 Days	@\$	B840  -
居民證/護照號碼 I/C No:/Passport No: S/S/E	7642	駕駛執照號碼 Driving Licence	e No: 5/5/28442	ATTRICTOR STATE	星期 Weeks	@\$	BRIGHT I BRIGHT I C. Talkari II
居民證/護照種類 Type of I/C:/Passport:	edan contra	Pass 日期 Pass Date: /	4/05/1984	The state of the s	月 Months	@\$	REFICIAL ESPERAN
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HIRER MUST NOT CARRY SAND AND CEMENT ON THE VEHICLE PLS CHECK ENGINE OIL AND RADIATOR WATER EVERY MORNING.

I/We have read and hereby agree to the terms and conditions on both sides of this rental agreeme

日期 Date:

租車者簽名 Signature of Hirer:

			AUTOBAY TOWING  1 Kaki Bukit Avenue 6 #01-55 AutoBay @ Kaki Bukit	CASH SA	LE	
	Sold to:		Singapore 417883	No		
	Item	Quantity	Description	Unit Price	Amount	
			Auto Kub to Auto Bay		\$ 100	
CROWN			Reporting Two Trips  E. & O. E.	Sub Total : GST Tax :		
	Issue	ed by:		Total :	\$100	

#### > Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time : 16 Nov 2022 / 11:32:42

Receipt Date/Time : 16 Nov 2022 / 11:32:42

#### Tax Invoice/Receipt

Receipt No.: ITNET-00000-221116-001401

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBC9572S				
As at 16 Nov 2022/09:08:00				
Insurance Co: ALLIANZ INSURANCE SING	APORE PTE. LTD.			
1 Insurance Enquiry - GBC9572S Enquiry Fee		7.00	0.49	7.49
20221116113226624733				
	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			
	•		المحمدة المحمدة	7.46
	gqrf073z		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 Twincar Automotive Pte Ltd Singapore

Owner's Signature/Co's stamp (if applicable)

RE: ACCIDENT INVOLVING VEHICLE NOS:	Smf 5700 U	_&	GBC 95725
ALONG PIETWDS MANGI B4 KIM	KEAT LINK	ON	16/11/2022
of BUK 622 BUK 11 BAT 01 the owner of vehicle no. SMP 5700 Y her vehicle forthwith. In consideration of you repairing n	reby authorise you to con	#18-502 nmence repair	\$ 153 7866 B = \$ (650622) to the said
a) I/We hereby irrevocably authorise you to demand by the insurance and/or third party or to comment the costs of repair and loss of use, etc and to you the accident' claim and all an any amount claim you. I/We agree to assign the whole proceeds (to be appointed by you on my/our behalf) shall the amount compensated direct to you after de I/We undertake to co-operate fully with you and conclusion.	ence legal proceeding, if rou appointing any Solicitored, received and/or settle of my/our third party clair accept this as my/our irreduction of their costs on a	necessary, in r or to act for me ed shall belong in to you and n evocable auth a Solicitor & C	ny name, for e in respect of g absolutely to ny/our Solicitors orisation to pay lient basis.
b) If the third party claim is unsuccessful or in you instruct and authorise you to claim direct from monies due to you. I undertake to pay you for you all costs, fees and expenses incurred by you	my/our insurance compar the Excess applicable un	ny on my/our b der my policy	behalf for all
c) If the own insurers' claim is not applicable and is indequate, I/we underake to pay you for you			
I/We also irrevocably authorise you to sign all disci in connection with the above claim in my/our abser of Solicitors on my/our behalf as you shall deem fit	nce. I/We irrevocable aut	thorise you to	appoint such a firm
I/We undertake to inform you and/or the Solicit party's insurance company communicate with undertake not to accept any monies or offer of communicating with you and obtaining your co	me/us directly, orally or settlement from the thi	in writing an	nd I/we further
Upon settlement of the third party claim and in third party's insurers, I/we undertake to pay yo related expenses and disbursement incurred.			
My/Our insurer is/are	The same of the sa		
Policy No.	Expiry Date:		
Date:	Excess:		
,			

Witness Signature/Name

SS2X22BG0002 / SME MOTOR PTE LTD ENTRY DATE & TIME: 16/11/2022 12:52 (SGT)
SUBMITTED BY: Chia Pei Ying VERSION: 1 (16/11/2022 12:52 (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 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
- 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 Point by instraince companies is not all admission of policy liability of the part of the instraince 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 16/11/2022 12:52 (SGT) Reported by Date of Accident 16/11/2022 09:08 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information TWDS CHANGI BEFORE KIM KEAT LINK Country/State of Loss Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number SMF5700U INSURED/POLICYHOLDER Is company? Name Of Registered Owner SEOW MEI FONG S1537866B Email Address JN57@ALPHABUILDERS2015.COM Mobile Phone No (Phone) +65-97548818 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer Honda Model Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission ..... Auto CC 1500

#### INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5128094838

#### DRIVER

NG KWOK SENG NRIC No S1512864Z Date Of Birth 10/11/1961 Occupation Indoor

Date Of Driving Pass	14/05/1984
Driving experience	38 YEARS AND 6 MONTHS
Gender	Male
Mobile Number Alt. Phone Number	(Phone) +65-98178818
Email Address	- JN57@ALPHABUILDERS2015.COM
Address	BLK 622 BUKIT BATOK CENTRAL #18-502
Address complement	-
Postcode	650622
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?  Number of Passengers (Including Driver)	Yes
Has the driver been approached by unknown person(s)	1
soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	
Translator's phone number	
Translator's email Original language used in the statement	
Original language used in the statement	-
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	
LINK ON THE SECOND LANE OF A 4 LANES EXPRESSWAY.	E (SMF5700U) ALONG PIE TOWARDS CHANGI BEFORE KIM KEAT THE VEHICLE OF MY VEHICLE BRAKE AND I FOLLOWED COLLIDED ONTO THE REAR PORTION OF MY VEHICLE. VIDEO
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
Vehicle Registration Number	GBC9572S

Commercial vehicle

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	VEHICLE B
No. Of Passenger (Including Driver)	_

### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person Gender	NG KWOK SENG Male
Phone No	-
Address	-
Address Complement	-
Post Code	44
Approximate Age Years Old	
Injuries Sustained	<u></u>
Injured person in which vehicle?	SMF5700U
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1 Please report correctly the details of the decident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and for the Actual Driver.
- Information provided must be as truthly and accurate as possible. Any wiful misropresentation or withholding of material facts may allow insurance companies to reputible policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy fability 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 fee be made available upon application by interested parties.
- By the todgement of this report to the instrers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

Tunderstand, acknowledge, agree and consent that.

- (a) My insurer, my workshop and the General insurance Association of Singapore ("GM") maying parmitted to collect, use, disclose and/or process my personal detailpersonal information set out in this ([cmn] and any other personal information provided by me or possessed by my insurer (collectively the "Porsonal Information") and disclose and transfer such Personal Information to adjusticity who have insured vehicle(s) involved in this accident (all insurers) 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:
- (f) processing, sandling and/or denting with my claims including the selflement of the claims and any necessary investigations relating to the claims:
- (ii) investigating the accident andler my claims:
- (iii) carrying out firstor dealing with my instructions or responding to any anatomic by mo-
- (iv) administering my claims (including the making of correspondence, statements, involces, reports or notices to mu, which could involve cladesure of contain personal data about me to bring about delivery of the same do well as on the external cover of savelaps shall mackages in author
- (v) complying with applicable law in administering, processing, handling under dealing with my claims.
- (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this posident and the insurers' lawyershow hims, maylore permitted to echect, use, disclose enclor process my Personal Information for one or more of the above Personals; and
- (c) my Personal Information maylcan be disclosed by any of the kisurers antifer GIA to their third-party service previous or openis (including their towyershow firms), which may be sited outside of Singapore, for one or many of the above Persoses.

Polloyledder's Signature ( Date & Time Disver's Signature ( if dayer is not the percylinider) / Date Witnessed by Reporting Centra Personne (Name ee in NRIC/ID card)

Skotch Plan

Skotch Plan

Vietnicle 10: SNF 5700 U

A

Proteinards Changi
Refore Kim Kear Lank

Verticle 18: GRC 95725

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