

• Advocates & Solicitors •

237 Alexandra Road #04-11  
The Alexcier, Singapore 159929  
Telephone: 6538 6250 Facsimile: 6538 1860

Our Reference : SB/PO/Acc/2022-9859  
Date : 5<sup>th</sup> December 2022

**China Taiping Insurance (Singapore) Pte Ltd**  
3 Anson Road  
#15-00 Springleaf Tower  
Singapore 079909  
Attention: Motor Claims Department

**\*\* BY EMAIL ONLY \*\***  
[claimsdept@sg.cntaiping.com]

**Mr Lim Teck Hoe**  
Block 376B Hougang Street 32  
#10-18  
Singapore 532376

**\*\* BY POST ONLY \*\***

Dear Sirs

**ACCIDENT INVOLVING SMD 8672H & SJM 9664M ALONG BRADDELL ROAD ON 19.7.2022**

We act for My Family Vet Clinic And Surgery Pte Ltd, the owner of vehicle registration no. SMD 8672H which was involved in the above captioned accident.

We are instructed by our client to claim damages against your insured in connection with the above captioned accident.

We are instructed that the accident was caused by your insured's negligent driving and management of his vehicle registration no. SJM 9664M. As a result of the above captioned accident, our client's said vehicle was damaged and our client has been put to loss and expenses, particulars of which are as follows:-

		<u>PARTICULARS</u>	
	<u>Description</u>		<u>Amount</u>
1.	Cost of repair		S\$ 8,500.00
2.	Rental fees (14 days @ S\$100.00 per day – including PRI & weekend)		S\$ 1,400.00
3.	Costs contribution		S\$ 1,500.00
4.	Disbursements:-		
a.	Survey report fees	S\$830.00	
b.	GIA reports fees & LTA fees	S\$ 38.49	
c.	Xerox, transport & postage charges	S\$120.00	
			<u>S\$ 988.49</u>
			<b><u>S\$12,388.49</u></b>

We enclose herewith a copy each of the following supporting documents for your kind attention:-

- a. Singapore Accident Statements of vehicles registration nos. SM 8672H & SJM 9664M;
- b. LTA search result on vehicle registration no. SJM 9664M;
- c. Hiap Lek Automobile Trading's Final Repair Bill dated 4 November 2022 for the sum of S\$8,500.00;
- d. Win Win Rent-A-Car Pte Ltd's Vehicle Rental Agreement No. 6929 and Invoice No. WPLIN0006485 dated 2 August 2022 for the sum of S\$1,400.00;

.../2

• Advocates & Solicitors

237 Alexandra Road #04-11  
The Alexcier, Singapore 159929  
Telephone: 6538 6250 Facsimile: 6538 1860  
Email: mail@oraclelaw.sg

Our Reference : SB/PO/Acc/2022-9859  
Date : 5<sup>th</sup> December 2022

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- 
- e. PAR Automotive Consultancy's Invoice No. 0087-22-HL dated 4<sup>th</sup> November 2022 for the sum of S\$830.00;
  - f. PAR Automotive Consultancy's Accident Vehicle Survey Report No. 0087-22-HL dated 4 November 2022 together with colored photographs showing the damages sustained by our client's said vehicle; and
  - g. Certificate of Insurance of our client's said vehicle.

We have on 20<sup>th</sup> July 2022 notified you of the above captioned accident and requested for a pre-repair inspection to be conducted.

Please note further that you should send to our firm an acknowledgement of receipt of this letter **within fourteen (14) days from the receipt of this letter**, failing which our client will have no alternative but to commence proceedings without further notice to you and/or your insured.

Yours faithfully



**Mr Stanley Bay & Miss Pauline Ong**  
Encl (for China Taiping Insurance (Singapore) Pte Ltd only)

# 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 ..... 20/07/2022 13:23 (SGT)  
Reported by ..... Both  
Date of Accident ..... 19/07/2022 15:05 (SGT)  
Exact Location of Accident ..... Braddell Rd, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMD8672H

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... My Family Vet Clinic and Surgery Pte Ltd  
Company Reg No ..... 201218156D  
Email Address ..... mfvclinic@gmail.com  
Mobile Phone No ..... (Phone) +65-94510184  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Mitsubishi  
Model ..... Outlander  
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 ..... 2400

### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Policy Number / Cover Note Number ..... GA550906/1

### DRIVER

Name of Driver ..... Lin Huijun Vanessa  
NRIC No ..... S8437457A  
Date Of Birth ..... 30/11/1984  
Occupation ..... Indoor

Date Of Driving Pass .....	14/08/2003
Driving experience .....	18 YEARS AND 11 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-94510184
Alt. Phone Number .....	-
Email Address .....	mfvclinic@gmail.com
Address .....	BLk 265 Bukit Batok East Ave 4 #01-403
Address complement .....	-
Postcode .....	650265
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	owner
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 .....	Side Swipe
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
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### PASSENGER 1

Name .....	unknown
Gender .....	Female

#### 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 attached report.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	video with owner.

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJM9664M
Vehicle Manufacturer .....	Honda
Vehicle Model .....	Stream

Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	Lim Teck Hoe
NRIC No .....	S1188238B
Contact Number .....	(Phone) +65-96706577
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-



**POLICYHOLDER ACKNOWLEDGEMENT FORM**

Date: 2017/12

To: Owner of Vehicle Number: SM08672H

The following has been advised to you via your workshop, S & H Motor through their staff, Mike Wong. Please tick the applicable box if you had been advised on any of the following:

- You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
  - You had been advised by the workshop on the liability and merits of the case accordingly.
  - You had been advised by the workshop of the claims procedure as follows.
    - > if fire damage and you claim under your own insurance, any applicable excess will be waived. However, there will be no recovery prospect and NCD will be affected.
    - > if fire damage and you are claiming against the Third Party, your NCD will not be affected. However, the recovery is not guaranteed, and AXA will not be held responsible.
  - If you had been involved in an accident with a foreign registered vehicle and wished to attempt recovery with AXA help, please forward the photos of the front and back of the NRIC and driving license to motor.doc@axa.com.sg
  - You have agreed to let AXA assign a workshop for your vehicle repairs. In the process, your vehicle might be towed out to another workshop assigned by AXA. In return, you will get:
    - > \$200 off on your Basic Own Damage Excess or
    - > \$200 as a benefit if your policy has \$0 excess and no Loss of Use benefit or
    - > Additional \$200 on top of existing Loss of Use Benefit if your policy has \$0 excess and existing Loss of Use benefit
  - There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas. The estimated waiting time for the spare parts to arrive is \_\_\_\_\_ . The estimated arrival time does not include the repair period.
  - There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
  - You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.
  - For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
  - For Vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.
- For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using any combination of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.
- You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.

Signed and acknowledged by: MY FAMILY VET CLINIC AND SURGERY PTE LTD  
 Bix 265 Bukit Batok East Avenue 4  
 #01-403 Singapore 650265  
 UEN 201218156D

Name and signature of policyholder/ authorized driver\* and company stamp (where applicable)  
 \*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, drivers who are permitted to drive the Insured Vehicle.

Name and signature of workshop personnel including company stamp

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M)  
 8 Shenton Way #24-01 AXA Tower Singapore 068811  
 AXA Customer Centre #01-21/22

**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 Actual 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 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.
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.

**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

MY FAMILY VET CLINIC AND SURGERY PTE LTD  
 Blk 265 Bukit Batok East Avenue 4  
 #01-403 Singapore 650265  
 UEN 201218156D  
 T: 65660448, 81026966 E: mvclinic@gmail.com

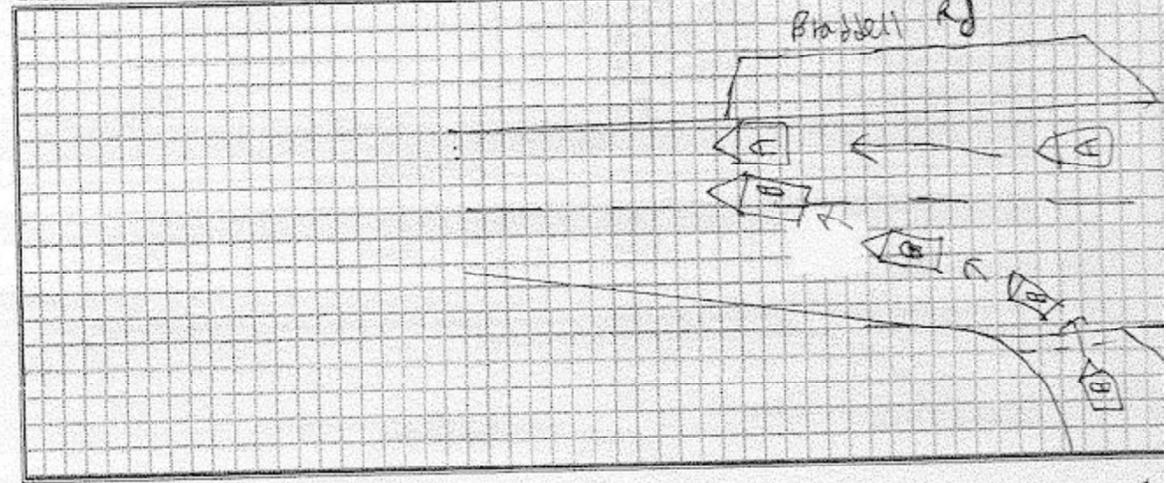
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 Blk 265 Bukit Batok East Avenue 4  
 #01-403 Singapore 650265  
 UEN 201218156D  
 T: 65660448, 81026966 E: mvclinic@gmail.com

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

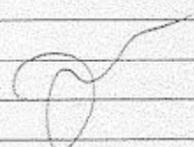
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

**Sketch Plan**



**Describe Circumstance of the Accident**

on 19/7/2022, @ 03-05pm, I am travelling along Braddell Road,  
 I am travelling on my own lane going straight, when I  
 passed the slip Road, a vehicle dash out out from the  
 slip Road without stopping and hitted the vehicle change  
 lane abruptly and hit into my vehicle and cause my vehicle  
 right to mount and hit the kerb on my right before coming  
 to stopped.

The video is with owner 

**Declaration**  
 I hereby declare that the information provided above is true in every respect.  
 MY FAMILY MEDICAL CENTRE  
 Blk 265 Bukit Batok East Avenue 4  
 #01-403 Singapore 650265  
 UEN 201218156D  
 T: 65660448, 81026966 E: mfvclinic@gmail.com

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel  
 (Name as in NRIC/ID card)

























**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SS2E 227K0004 Vehicle Registration No: SMD8672H

Name (as shown in NRIC): Lim Hai Jun Vanessa NRIC/FIN/Passport No: SF43747A

(\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate

Address: \_\_\_\_\_ Singapore ( )

Contact (Tel): \_\_\_\_\_ Mobile No.: 945 10184

Email Address: \_\_\_\_\_

Date of Accident: 19/7/22 Time of Accident: 15:56

Place of Accident: Braddell Rd

Insurance Company: AxA

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

- 1) Vehicle Category: Commercial
- 2) driver name: Lim Hai Jun Vanessa
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date:



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

## TAX INVOICE

Date of Request: 18/08/2022

**Your Ref No: SB/PO/ACC/2022-9859**

Dear Sir/Madam,

Date of Accident: 19/07/2022 00:00 (SGT)

Vehicle No: SMD8672H

Place of Accident: Braddell Rd, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
<b>SJM9664M</b>	Braddell Rd, Singapore	(31.00 )	1	(28.97 )
GST Amount				(2.03 )
Total Amount Due (GST Inclusive)				(31.00 )

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no 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 Actual 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 .....	26/07/2022 16:57 (SGT)
Reported by .....	Both
Date of Accident .....	19/07/2022 15:05 (SGT)
Exact Location of Accident .....	Braddell Rd, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SJM9664M
-----------------------------------	----------

### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LIM TECK HOE

### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Stream
Variant .....	-
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1799

### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMPCSNNW00002752202

### DRIVER

Name of Driver .....	LIM TECK HOE
NRIC No .....	S1188238B
Address .....	BLK 376B HOUGANG STREET 32
Address complement .....	#10-18
Postcode .....	532376
Does Driver Own Other Vehicles? .....	No

### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....	No Collision
------------------------	--------------

Weather Conditions ..... Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? ..... No  
Was anybody injured in the Accident? ..... No  
Was any other vehicle or property damaged? ..... Yes  
Number of Passengers (Including Driver) ..... 2  
Translator's name ..... -  
Translator's ID ..... -  
Translator's phone number ..... -  
Translator's email ..... -  
Original language used in the statement ..... -

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? ..... Yes  
Was there any video captured by Car Camera? ..... No

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number ..... SMD8672H  
Vehicle Manufacturer ..... -  
Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
Vehicle Category ..... Private car  
Name of Driver ..... -  
Insurance Company Name ..... -

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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.

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

I understand, acknowledge, agree and consent that:

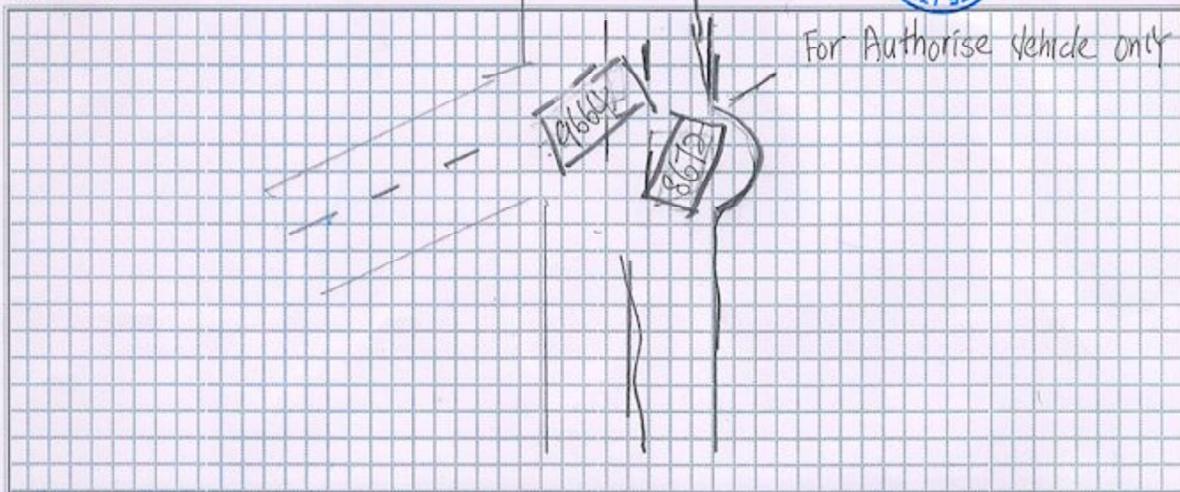
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

  
 \_\_\_\_\_  
 Policyholder's Signature / Date & Time

  
 \_\_\_\_\_  
 Driver's Signature (if driver is not the policyholder) / Date & Time

  
 \_\_\_\_\_  
 Witnessed by Reporting Centre Personnel  
 (Name as in NRIC Card)

Sketch Plan



Describe Circumstance of the Accident

I upper serangoon Road turn to BRADDELL Rd  
and SMD8672H on right side and Hit to For Authorise  
vehicle only

I (Owner/In-charge/Driver) \_\_\_\_\_, NRIC NO: \_\_\_\_\_, Vehicle No: \_\_\_\_\_

will be sending my above stated damaged vehicle to Company name: \_\_\_\_\_

for my vehicle damaged repairs and insurance claims.

GBE had clearly informed me on new GIA rules. I accepted all liabilities and discharge Goldbell Engineering Pte Ltd.

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



Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)



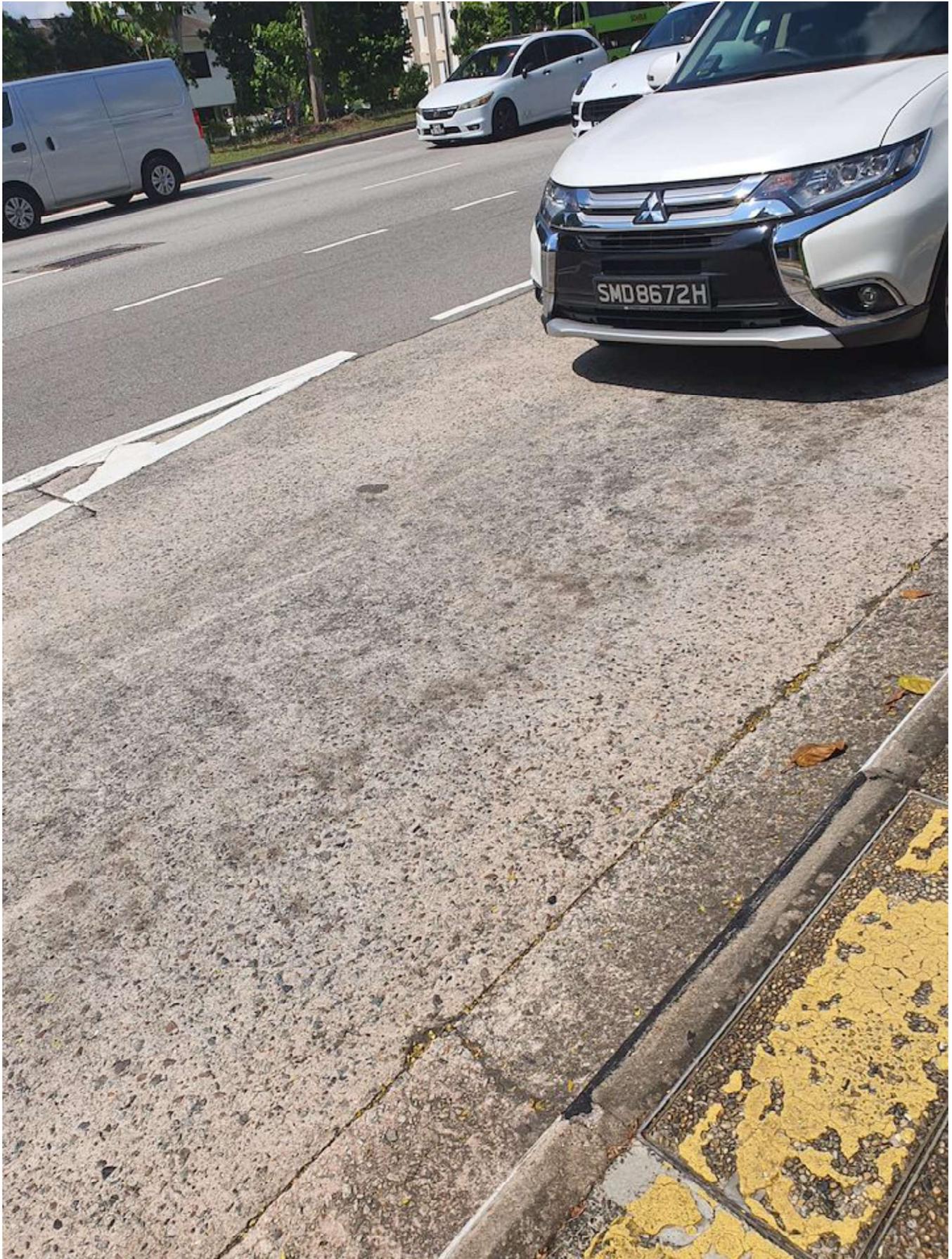


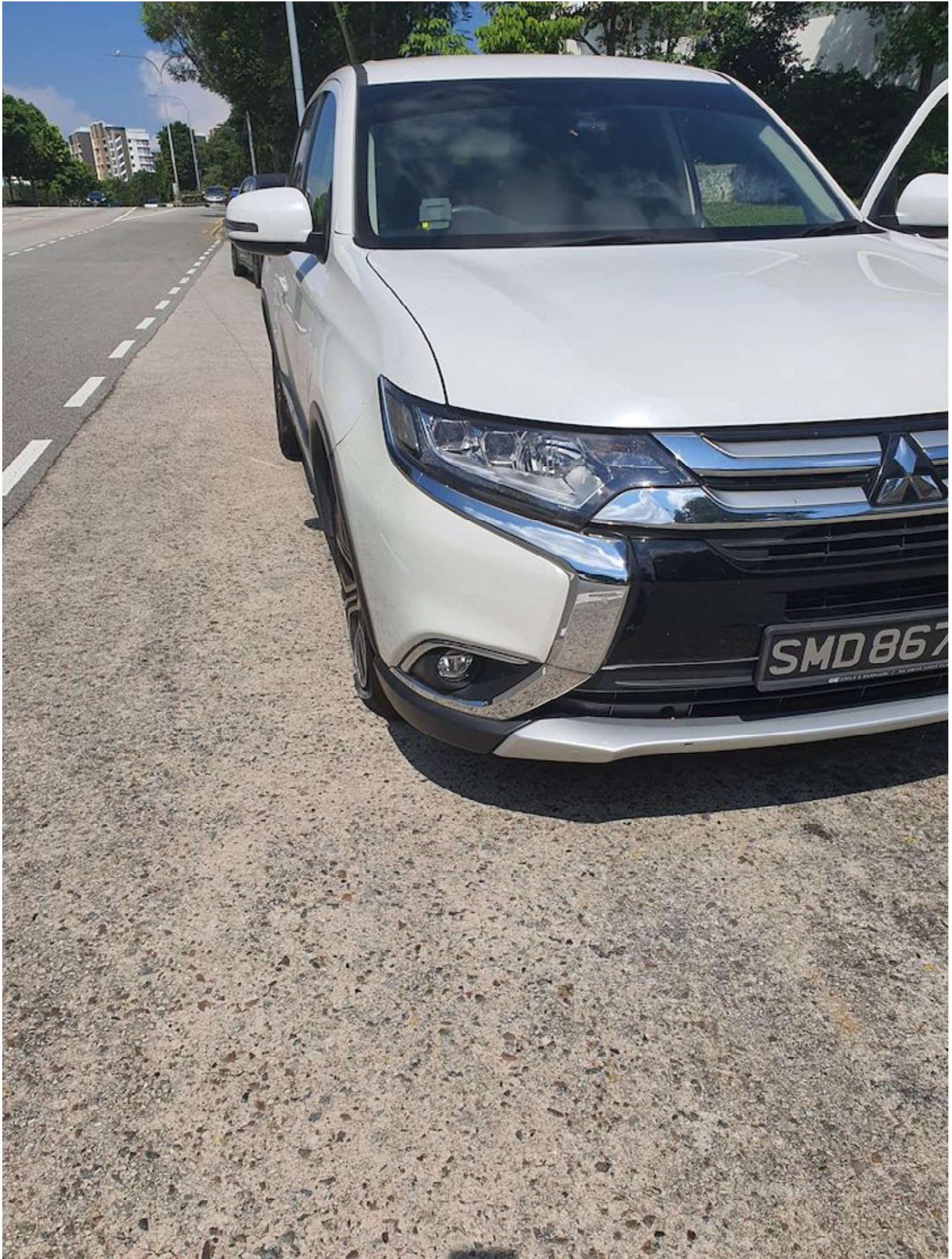












## Enquire Vehicle Owner Details ( As At 19 Jul 2022 / 15:05:00 )

### Vehicle Owner Details

Owner ID Type:  
**Singapore NRIC**

Owner ID:  
**S1188238B**

Owner Name:  
**LIM TECK HOE**

Registered Address Type:  
**HDB / HUDC**

Registered Block/House No.:  
**376B**

Registered Street Name:  
**HOUGANG STREET 32**

Registered Unit No.:  
**# 10 - 18**

Registered Building Name:  
**-**

Registered Postal Code:  
**532376**

### Vehicle Insurance Details

Vehicle No.:  
**SJM9664M**

Make Description/Model:  
**HONDA / STREAM 1.8X A**

Insurance Company Name:  
**CHINA TAIPING INSURANCE (SINGAPORE)  
PTE LTD**



Thank you

Oracle Law Corporation has successfully logged out.  
Your last login date and time was 20 Jul 2022, 12:51:33.  
To return to ONE.MOTORING, please click here  
For security reasons, please CLEAR YOUR CACHE after each session.

Session Transaction History

S/Ns	Asset Type	Asset ID	Transaction Type	Transaction Amount(US)	Log Date/Time
1	Vehicle	SJM9664M	1B 19 Enquire Veh Owner Info (Others) by Law Firm	7.49	20 Jul 2022 / 12:52:19

# HIAP LEK AUTOMOBILE TRADING

160 Sin Ming Drive  
Sin Ming Autocity  
#05-17  
Singapore 575722

Tel : 6453 1743      Fax: 6266 8605  
E-Mail : [hiaplek@hotmail.com](mailto:hiaplek@hotmail.com)

Date: 04<sup>th</sup> NOVEMBER 2022

Vehicle No : SMD 8672H  
Make/ Model : MITSUBISHI OUTLANDER  
Year of Manufacture : 10 SEPTEMBER 2018  
Chassis No. : 6F7W0402267  
Colour : WHITE  
Name : MY FAMILY VET CLINIC AND SURGREY PTE LTD  
Address : BLK 265 BUKIT BATOK EAST AVE 4  
#01-403  
Singapore 650265

QTY	ITEM/PARTICULARS	AMOUNT (S\$)
-----	------------------	--------------

1. Third Party Accident Claim for Motor Vehicle No. SMD 8672H  
Date of Accident: 19<sup>th</sup> JULY 2022

..... **S\$8,500.00**  
(Lump Sum)

Singapore Dollars: **EIGHT Thousand FIFTY Hundred Only**

## Invoice

SMD8672H  
MY FAMILY VET CLINIC AND SURGERY PTE LTD

Invoice No : WPLIN0006485  
Invoice Date : 2/8/2022  
Due Date : 2/8/2022  
VHA No : 6929  
Referral ID : H002

Description :	Amount
Rental for 14 Day/s @ \$100 per Day \$	1,400.00

Vehicle No : SKA 7765 U

Vehicle Description : Toyota Altis 1.6 A

Rental Period : 19/07/2022 to 02/08/2022

Total Amount Payable : \$ 1,400.00

# WIN WIN RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875  
Tel: 6315 8479 H/P: 9833 0807

VHA No: **6929**  
Invoice No: **WPLIN 6485**  
Hirer's Vehicle No: **SMD 86724**

UEN: 201505115E

## VEHICLE RENTAL AGREEMENT

<p><b>HIRER'S PARTICULARS</b></p> <p>Name: (as in I/C) <u>My family vet clinic and surgery</u></p> <p>NRIC / FIN No: <u>20112156D</u></p> <p>Address (Res): <u>Blk 265 Bukit Batok East Ave 4</u> <u>#01-403(S) 650 265</u></p> <p>Name &amp; Address of Employer: _____</p> <p>Occupation: _____ Driving Exp: _____</p> <p>Singapore Driving Licence No: _____</p> <p>Issue Date: _____ Date of Birth: _____</p> <p>Tel: (O) _____ (R) _____ HP: _____</p> <p><b>ADDITIONAL DRIVER'S PARTICULARS</b></p> <p>Name: (as in I/C) <u>Lim Hu. Jiah, V&amp;A P&amp;S</u></p> <p>NRIC / FIN No: <u>S8737457A</u></p> <p>Address (Res): <u>21 Dunstons Drive (S) 319 383</u></p> <p>Occupation: _____ Driving Exp: _____</p> <p>Singapore Driving Licence No: _____</p> <p>Issue Date: _____ Date of Birth: <u>70/11/1980</u></p> <p>Tel: (O) _____ (R): _____ H/P: <u>94510180</u></p>	<p>Vehicle No: <u>SKA77654</u> Replace Veh No: _____</p> <p>Mileage Out: <u>284282</u> Mileage In: _____</p> <p>Make &amp; Model: <u>TOYOTA ALTIS</u> Auto / Manual</p> <p>Out : Date <u>19/7/22</u> Time: <u>1740</u></p> <p>HIRE / PERIOD EXPIRY Time: _____</p> <p>NON-WAIVER EXCESS=\$ <u>2000</u></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="4">CHARGES</th> </tr> <tr> <td>Daily</td> <td><u>14</u></td> <td>@\$ <u>100</u></td> <td>per day <u>\$1400</u></td> </tr> <tr> <td>Weekly</td> <td></td> <td>@\$ _____</td> <td>per week _____</td> </tr> <tr> <td>Monthly</td> <td></td> <td>@\$ _____</td> <td>per month _____</td> </tr> <tr> <td>Hours</td> <td></td> <td>@\$ _____</td> <td>per hour _____</td> </tr> <tr> <td>Extension</td> <td></td> <td>@\$ _____</td> <td>_____</td> </tr> <tr> <td colspan="4">Delivery/Collection Service</td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUB-TOTAL \$</b></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="10">PETROL LEVEL</th> </tr> <tr> <td>Out</td> <td>E</td> <td>1/8</td> <td>1/4</td> <td>3/8</td> <td>1/2</td> <td>5/8</td> <td>3/4</td> <td>7/8</td> <td>F</td> </tr> <tr> <td>In</td> <td>E</td> <td>1/8</td> <td>1/4</td> <td>3/8</td> <td>1/2</td> <td>5/8</td> <td>3/4</td> <td>7/8</td> <td>F</td> </tr> <tr> <td colspan="10">Fuel</td> </tr> <tr> <td colspan="10">Traffic / Parking Fines</td> </tr> <tr> <td colspan="10" style="text-align: right;"><b>TOTAL CHARGES \$</b></td> </tr> </table> <p style="text-align: right;"><b>MY FAMILY VET CLINIC AND SURGERY PTE LTD</b> Blk 265 Bukit Batok East Avenue 4 #01-403 Singapore 650265 UEN 201218156D T: 63660448, 81026966 E: mfvcclinic@gmail.com</p> <p>Hirer's Signature _____</p> <p>Additional Driver's Signature _____</p>	CHARGES				Daily	<u>14</u>	@\$ <u>100</u>	per day <u>\$1400</u>	Weekly		@\$ _____	per week _____	Monthly		@\$ _____	per month _____	Hours		@\$ _____	per hour _____	Extension		@\$ _____	_____	Delivery/Collection Service				<b>SUB-TOTAL \$</b>				PETROL LEVEL										Out	E	1/8	1/4	3/8	1/2	5/8	3/4	7/8	F	In	E	1/8	1/4	3/8	1/2	5/8	3/4	7/8	F	Fuel										Traffic / Parking Fines										<b>TOTAL CHARGES \$</b>									
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<p><b>VEHICLE CHECK LIST</b></p> <p>INDICATE: D - DENTS, S - SCRATCHES, A - ACCIDENTS</p> <table style="width:100%; text-align: center;"> <tr> <td style="width:25%;">RIGHT</td> <td style="width:25%;">REAR</td> <td style="width:25%;">TOP</td> <td style="width:25%;">LEFT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="width:25%;">FRONT</td> <td colspan="3"></td> </tr> <tr> <td></td> <td colspan="3"></td> </tr> </table> <p><b>MISSING / FAULTY ACCESSORIES / PARTS</b></p> <p>REMARKS: _____</p>																																																		RIGHT	REAR	TOP	LEFT					FRONT																																			
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I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given WIN WIN RENT-A-CAR PTE LTD in connection with this agreement is true.

**\*IMPORTANT**

- VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
- ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY. INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES. A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY WIN WIN RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN " SIGNATURE OF HIRER / DRIVER " FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO WIN WIN RENT-A-CAR PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS
<u>02/08/22</u>	<u>6Am</u>			

SIGNATURE OF HIRER/DRIVER

# PAR Automotive Consultancy

Regn. No: 52986974L

Mailing Address : Blk 310 Shunfu Road #07-213, Singapore 570310. Tel : 645 31173

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Report No: 0087-22-HL

04 November 2022

My Family Vet Clinic and Surgery Pte Ltd  
c/o Hiap Lek Automobile Trading  
160 Sin Ming Drive #05-17  
Sin Ming Autocity  
Singapore 575722

**INVOICE No. 0087-22-HL**

**Vehicle No. SMD8672H**

<u>S/NO.</u>	<u>SERVICES RENDERED</u>	<u>Amount due</u>
1	Being accident vehicle appraisal services, transport, photographs and re-inspection (work in progress and post repair inspection).	\$830.00
	<b>Total amount payable</b>	<b><u>\$830.00</u></b>

Kindly cross your cheque in favour of "PAR Automotive Consultancy"

We thank you in anticipation for your prompt payment.

**PAR Automotive Consultancy**



Report No: 0087-22-HL

04 November 2022

## ACCIDENT VEHICLE SURVEY REPORT

My Family Vet Clinic and Surgery Pte Ltd  
c/o Hiap Lek Automobile Trading  
160 Sin Ming Drive #05-17  
Sin Ming Autocity  
Singapore 575722

### VEHICLE INFORMATION:

<i>Vehicle Reg No.:</i>	SMD8672H	<i>Odometer:</i>	047739km
<i>Make &amp; Model:</i>	Mitsubishi Outlander	<i>Colour:</i>	White
<i>Chassis number:</i>	6F7W0402267	<i>Date of accident:</i>	19/07/2022
<i>Year of Regn.:</i>	10/09/2018	<i>Date inspected:</i>	20/07/2022
<i>Repairer at:</i>	Hiap Lek Automobile Trading 160 Sin Ming Drive #05-17 Sin Ming Autocity Singapore 575722	<i>Date inspected (After Repair):</i>	02/08/2022

### STATIC CHECKS, where applicable:

<i>Steering :</i>	serviceable
<i>Footbrake :</i>	serviceable
<i>Handbrake :</i>	serviceable
<i>Paintwork :</i>	Good
<i>General condition :</i>	Good

### TIRE CONDITION:

	<u>LH / Make</u>	<u>RH / Make</u>	<u>Size</u>
<i>Front:</i>	5mm/Hankook	5mm/Hankook	225/45R18
<i>Rear:</i>	6mm/Yokohama	6mm/Yokohama	225/55/R18

### POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the rear and front portion.  
Please see details as described in the Annex for parts and labour.

### REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

## Parts and Labour Assessment

Report No: 0087-22-HL

Vehicle No: SMD8672H

Description of part	Qty	Condition as inspected	Repairer's estimate	Our adjustment
Front knuckle arm RH	1	distorted	320.00	320.00
Front knuckle arm hub bearing RH	1	dislodged	134.00	134.00
Front lower arm RH	1	bent	239.00	239.00
Front link arm RH	1	bent	23.00	23.00
Front shock absorber RH	1	bent	389.00	389.00
Front shock absorber top mounting RH	1	necessary/deformed	106.00	106.00
Tie rod end RH	1	dislodged	169.00	169.00
Front fender LH	1	repair	630.00	0.00
Front fender outer protector LH	1	abraded/fractured	179.00	179.00
Front door LH	1	buckled	881.00	881.00
Front door black sticker	1	necessary	38.00	38.00
Front door outer protector	1	deformed	171.00	171.00
Front door glass outer moulding LH	1	necessary	129.00	129.00
Front door mechanism lock LH	1	bent	290.00	290.00
Front door outer handle	1	distorted	84.00	84.00
Front door outer handle cover LH	1	distorted	25.00	25.00
Front door weatherstrip LH	1	deformed	184.00	184.00
Front door lower weatherstrip LH	1	deformed	48.00	48.00
Rear door LH	1	buckled	860.00	860.00
Rear door black frame LH	2	necessary	76.00	76.00
Rear door outer protector LH	1	deformed	148.00	148.00
Rear door lock striker LH	1	repair	28.00	0.00
Rear door mechanism lock LH	1	bent	290.00	290.00
Rear door weatherstrip LH	1	deformed	157.00	157.00
Rear fender inner shield LH	1	fractured	85.00	85.00
Rear fender protector LH	1	abraded/fractured	148.00	148.00
Rear tail lamp LH	1	fractured	563.00	563.00
Rear bumper	1	abraded	872.00	872.00
Rear bumper side retainer RH/LH	2	necessary	48.00	48.00
Rear bumper clip	10	necessary	35.00	35.00
<i>Subtotal before discount</i>			7,349.00	6,691.00
<i>Percentage discount</i>	<i>0% and 10%</i>		0.00	669.10
<b>Sub-total 1</b>			<b>7,349.00</b>	<b>6,021.90</b>

Front tyre sport rim RH	1	abraded	650.00	650.00
Rear tyre sport rim LH	1	abraded	650.00	650.00
		<i>Subtotal before discount</i>	1,300.00	1,300.00
		<i>Percentage discount 0% and 0%</i>	0.00	0.00
		<b>Sub-total 2</b>	1,300.00	1,300.00
		<b>Parts-total</b>	<b>8,649.00</b>	<b>7,321.90</b>

## LABOUR

1. To straighten and panel beating front fender LH, rear and front frame members. To remove and refit above parts.			1,500.00	1,250.00
2. To putty, re-spray painting and polish affected areas.			1,680.00	1,500.00
3. To check and rectify wiring system.			80.00	50.00
4. To remove, refit and transfer rear and front door LH components.			250.00	200.00
5. To remove and refit front suspension.			400.00	350.00
6. To rust proof affected areas.			120.00	60.00
		<b>Labour total</b>	<b>4,030.00</b>	<b>3,410.00</b>
		<b>Parts &amp; Labour total</b>	<b>12,679.00</b>	<b>10,731.90</b>

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

**Hence, the recommended cost of repairs based on LUMP SUM repairs is : \$8,500.00**  
**and the recommended number of working days for the repairs is : 12**

  
**B J Loi** (1 Eng. MIMI, AIRTE)  
 Automotive Appraiser

























































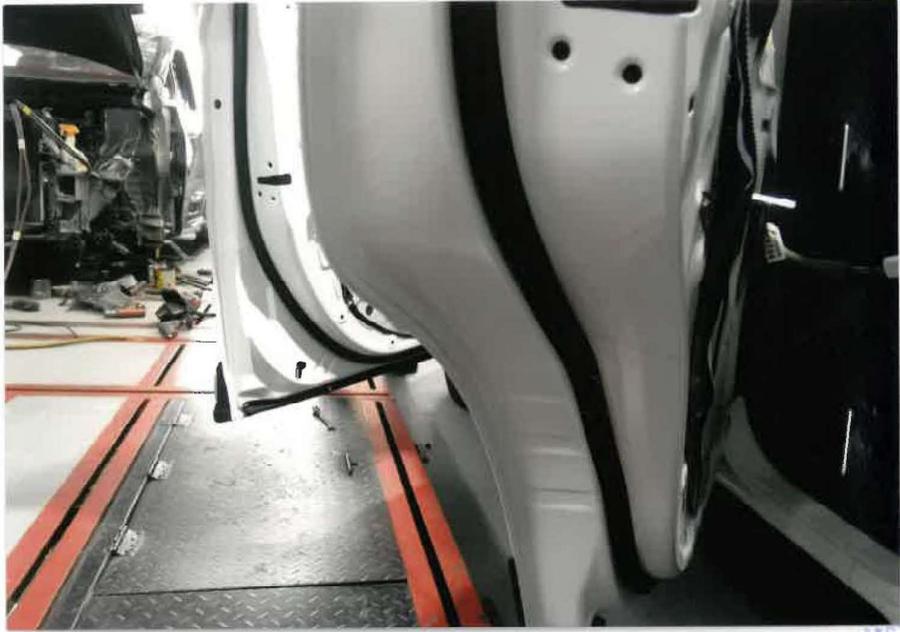














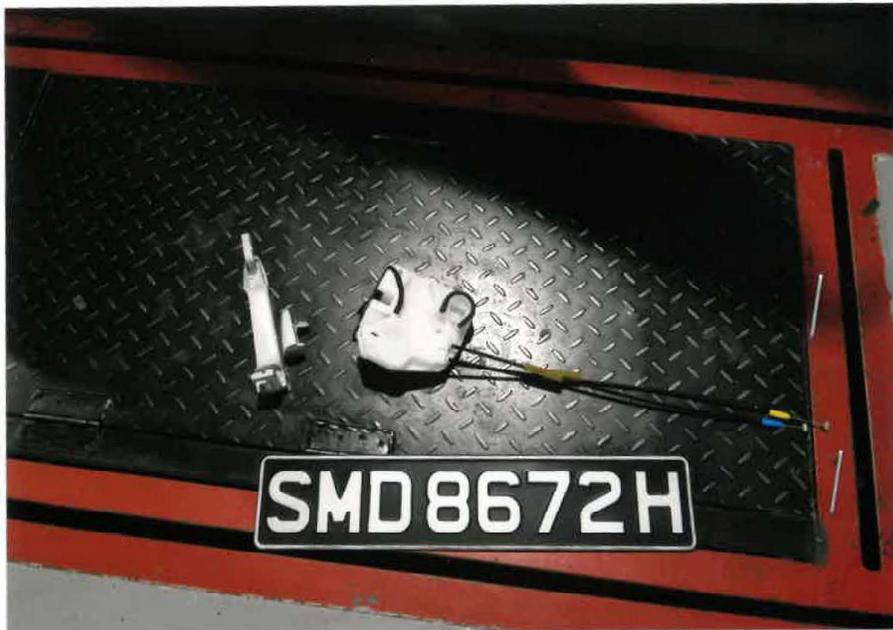








































redefining / insurance

AXA Insurance Pte Ltd  
 1800 880 4888 (Within Singapore)  
 (65) 6880 4888 (International)  
 (65) 6880 4740  
 customer.care@axa.com.sg  
 www.axa.com.sg

# Certificate of Insurance

account number  
**04041**

-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)

## Policy details

<b>Policyholder name</b>	<b>MY FAMILY VET CLINIC AND SURGERY PTE LTD</b>	<b>Certificate number</b>	<b>GA550906 / 1</b>
<b>Cover</b>	<b>Comprehensive</b>	<b>Chassis number</b>	<b>GF7W0402267</b>
<b>Plan name</b>	<b>Flexi</b>	<b>Engine number</b>	<b>4J11YT5839</b>
<b>NCD applicable</b>	<b>30%</b>		
<b>Vehicle registration number</b>	<b>SMD8672H</b>		
<b>Period of Insurance</b>	from <b>10/09/2021</b> to <b>09/09/2022</b> (both dates inclusive)		
<b>Finance loan company</b>	Nil		

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

- (a) Any Named Driver as stated in the Policy:  
 1. LIN HUIJUN VANESSA
- (b) Any person who is driving on the Policyholder'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.

## Limitation as to use\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.  
 The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

\* 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.

<b>EXCESS</b>	Basic Own Damage Excess	SGD 400.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

- S\$500 for unnamed *Authorised Driver*
- S\$500 for declared *Young and Inexperienced Driver*
- S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

## Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

**AXA Insurance Pte Ltd**

Authorised signature

## Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.