

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Attn: Motor Claims Department

Dear Sir / Madam,

ACCIDENT INVOLVING VEHICLE NO SKS 9683 P & SFL 8797 Y at 102 Hougang Ave 1 , Singapore on 20/01/2023

We understand that you are the insurer of SFL 8797 Y vehicle.

I/We wish to inform you that my/our vehicle SKS 9683 P have been completed repairs to my/our satisfaction by M/s GUAN MOTOR WORKS. I/We therefore propose to claim from your as follow:

1.	Cost of Repairs (Part by part)	S\$	4,017.52
2.	Cost of Rental (S\$ <u>150.00</u> x <u>07</u> days)	S\$	1,050.00
3.	LTA Search Fee	S\$	26.75
	TOTAL	S\$	5,094.27

Please let us have your reply soonest possible.

Thank you.

Yours faithfully,

Chiann Koun

源摩哆廠

GUAN MOTOR WORKS

Business Regn. No: 081026-00E

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 H/P: 9742 6003

Messrs: Teh Shi Yun

Invoice No: **5343**

13-02-2023

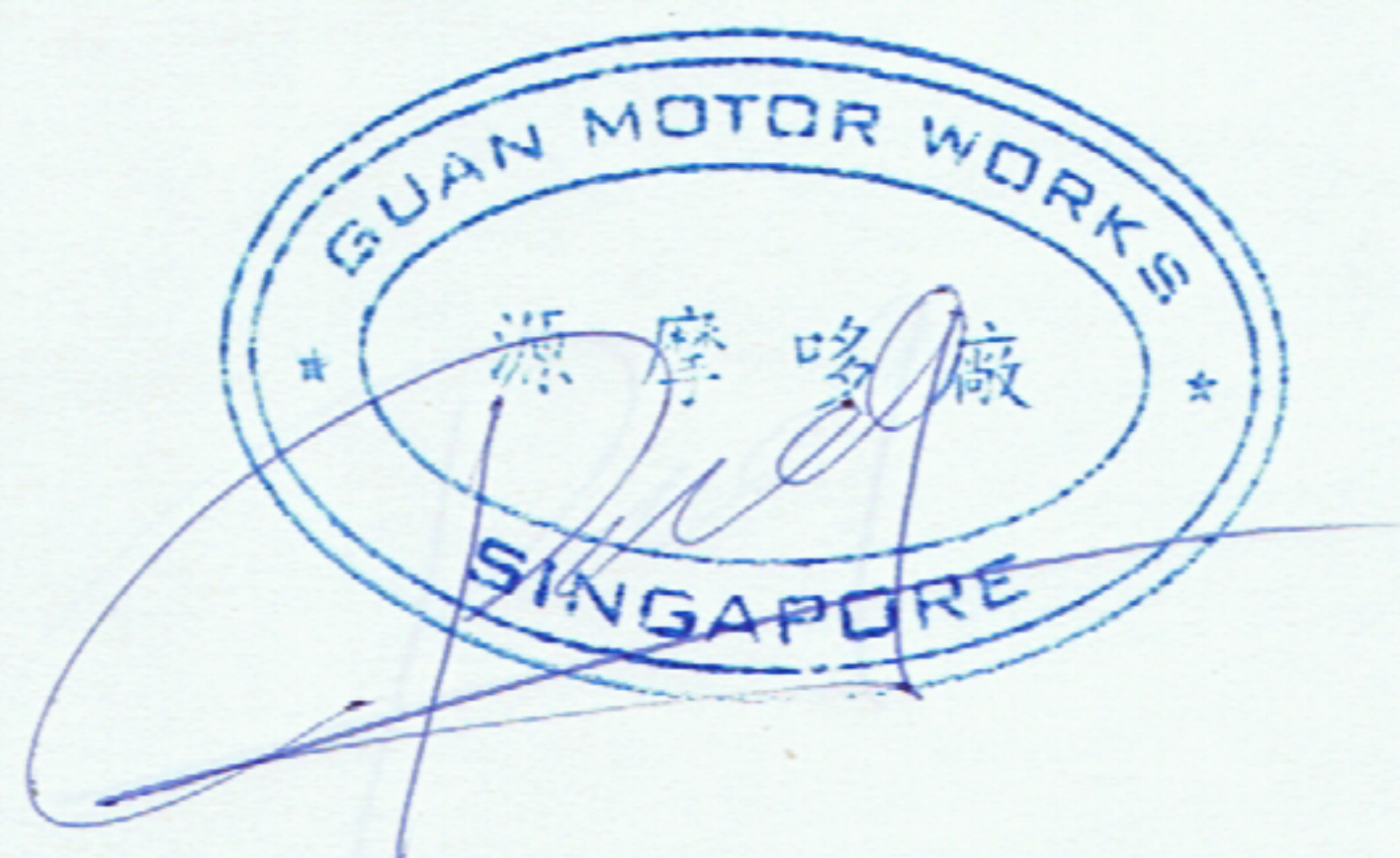
Date : _____

Toyota Corolla – SKS 9683 P
=====

Part by part repair cost inclusive spare parts and
labour charges.

\$ 4,017.52

Dollars Four thousand Seventeen
And Cents Fifty-two only.



E.&O.E.

长彭 LONG PANG LEASING

Company Regn. No: 53255773E

Block 324 Ang Mo Kio Avenue 3 #02-1886 Singapore 560324

Email: longpang53@gmail.com

HP: 9047 2789

VEHICLE RENTAL AGREEMENT

Nº: 0896

HIRER'S PARTICULAR Name: (as in I/C) <u>TEH SHI YUN</u> NRIC / PASSPORT No: <u>S 8945472 - G</u> Address (Res): _____ Name & Address of Employer: _____ Occupation: _____ Driving Exp: _____ D/L No: _____ D/L Type: Local/International Pass Date: <u>18-3-1976</u> Date of Birth: <u>28-9-1956</u> Tel: (O) _____ (R) _____ HP: <u>96635472</u>		Veh No: <u>SGG 9138 H</u> Replace Veh No: _____ Mileage Out: _____ Mileage Out: _____ Make & Model <u>HONDA</u> Make & Model _____ Auto / Manual <u>C/V</u> Auto / Manual _____ OUT : Date <u>6/2/23</u> OUT : Date _____ OUT : Time <u>1.10 PM</u> OUT : Time _____	
ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C) <u>TEH YU SIN</u> NRIC / PASSPORT No: <u>S 2530268 - J</u> D/L No: <u>S 2530268 - J</u> D/L Type: Local/International Address (Res): <u>BIK 616 HOUGANG AVE 8</u> <u>#07-376 S 1953</u> Tel/Hp: <u>96635472</u>		RENTAL CHARGES Daily <u>7</u> @\$ <u>150/-</u> <u>1,050</u> <u>00</u> Weekly @\$ _____ Monthly @\$ _____ Hours @\$ _____ Others @\$ _____ CDW @\$ _____ PAI @\$ _____ Delivery Service _____ SUB-TOTAL \$ <u>1,050</u> <u>00</u>	
Refundable Deposit: _____ Cash/Nets/Cheque/VISA/MC Cards No: _____ (A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>FRONT</p> </div> <div style="text-align: center;"> <p>LEFT</p> </div> <div style="text-align: center;"> <p>RIGHT</p> </div> <div style="text-align: center;"> <p>REAR</p> </div> </div>		<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>OUT</p> </div> <div style="text-align: center;"> <p>IN</p> </div> </div> EXTENSION _____ Collection Service _____ Misc. _____ ESTIMATED TOTAL RENTAL \$ _____	
ACCESSORIES CHECK <input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S / Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio / Cass <input type="checkbox"/> CD/Cartridges <input type="checkbox"/> S / RIM		Sales Person Code: _____ Hirer is responsible for the first \$ _____ excess for collision / damage to first part. (i.e) LONG PANG LEASING Vehicle (including windscreen) and also first \$ <u>1,500</u> excess for collision / damage to third party's vehicle for each and every accident / damage. Hirer's Signature _____ Addition Driver's Signature _____	

I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amount due on rental to my/our credit card.

* IMPORTANT

- ONLY PERSONS ABOVE 25 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY LONG PANG LEASING.
- IN THE EVENT OF AN ACCIDENT, THE HIRER OR AUTHORIZED DRIVER:
 - shall report all accidents involving the said vehicle to the Owner immediately;
 - shall take immediate steps to complete and sign Form MAR 1 (Motor Accident Report Form) and do all other acts required in compliance with the "NON-INJURY MOTOR ACCIDENT REPORT SCHEME" (the form will be made available when the accident is report to the Owner);
 - shall report to the police within 24 hours from the occurrence, the following types of accidents:-
 - injury case;
 - non-injury case involving a Government vehicle, or damage to Government property;
 - non-injury case involving a foreign vehicle (to obtain their motor insurance policy. Passport No./Name of the driver, Vehicle number, Log card and Vehicle road tax information);
 - non-injury case involving a pedestrian or cyclist.

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 BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO LONG PANG LEASING 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	DEPOSIT REFUND	SIGNATURE OF HIRER/DRIVER
<u>13/02</u> <u>2023</u>	<u>12.30 PM</u>					

THE HIRE SHALL BE SOLELY RESPONSIBLE FOR THE RENT OF THE CAR AND ALL OTHER CHARGES INCURRED BY THE HIRER. THE HIRER SHALL BE RESPONSIBLE FOR THE CAR AND ALL OTHER CHARGES INCURRED BY THE HIRER. THE HIRER SHALL BE RESPONSIBLE FOR THE CAR AND ALL OTHER CHARGES INCURRED BY THE HIRER.

长彭 LONG PANG LEASING

OFFICIAL RECEIPT

Company Regn. No: 53255773E
Block 324 Ang Mo Kio Avenue 3 #02-1886 Singapore 560324
Email: longpang53@gmail.com
HP: 9047 2789

Nº 0760

Date: 13-2-23

Received from

TEL SHI YAN

The sum of Dollars

One Thousand Fifty Only

Being payment for

SGA9138H 6-2-23 to 13-2-23 Ref# 0896

for LONG PANG LEASING

\$ 1,050/12

Cash / Cheque No.:



Authorised Signature

Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars (As At 20 Jan 2023 / 09:15:00)

Vehicle Insurance Details

Vehicle No.:

SFL8797Y

Make Description/Model:

AUDI / Q2 1.0 TFSI S TRONIC

Insurance Company Name:

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Business Transaction Reference No.:

20230120113843678435

**Please retain the business transaction reference number for Enquire Vehicle Owner
Details (if required).**

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OK →

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