

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Attn: Motor Claims Department

Dear Sir / Madam,

**ACCIDENT INVOLVING VEHICLE NO SLV 2040 M & SCJ 168 L at along SIGLAP
LINK (TURNING ONTO ECP TOWARDS CHANGI , Singapore on 22/02/2023**

We understand that you are the insurer of SCJ 168 L vehicle.

I/We wish to inform you that my/our vehicle SLV 2040 M 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	S\$	1,950.00
2.	Cost of Rental (S\$ <u>120.00</u> x <u>04</u> days)	S\$	480.00
3.	LTA Search Fee	S\$	26.75
	TOTAL	S\$	2,456.75

Please let us have your reply soonest possible.

Thank you.

Yours faithfully,

Chiam 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

SHAH HITESH CHANDRAKANT

Messrs: _____

Invoice No: 5346

09-03-2023

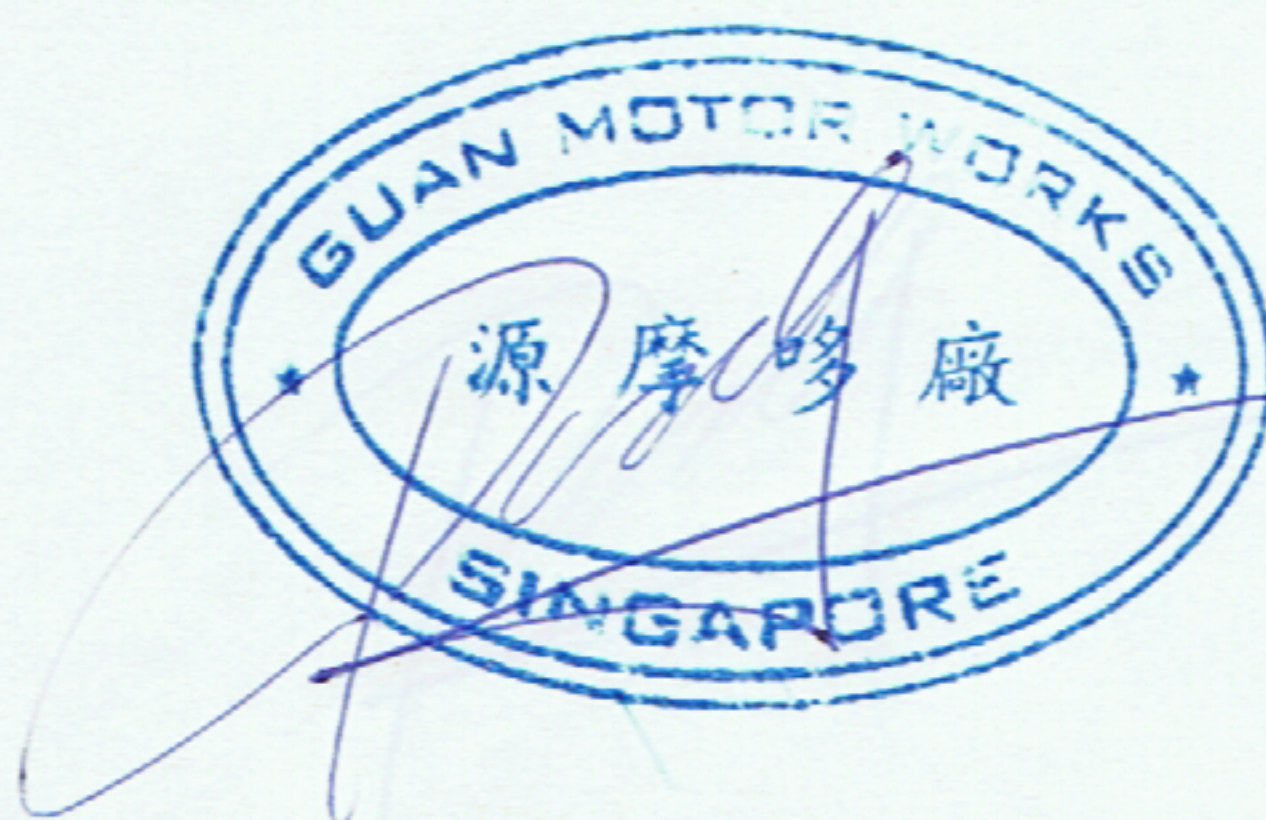
Date : _____

Nissan Qashqai - SLV 2040 M
=====

Lump sum repair cost inclusive of spare parts and
labour charges.

\$ 1,950.00

Dollars One thousand Nine hundred Fifty only.



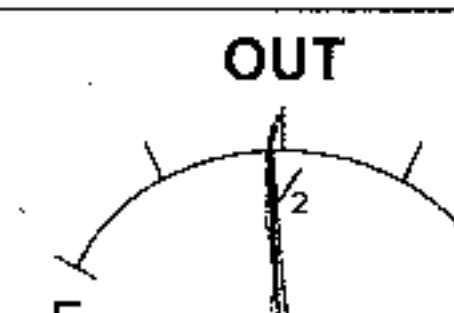
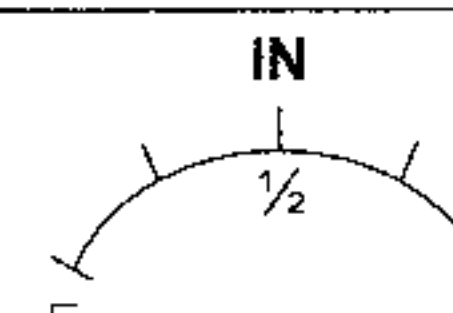

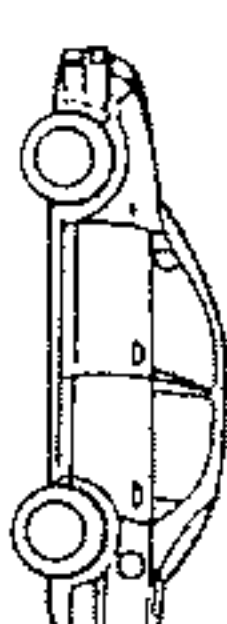
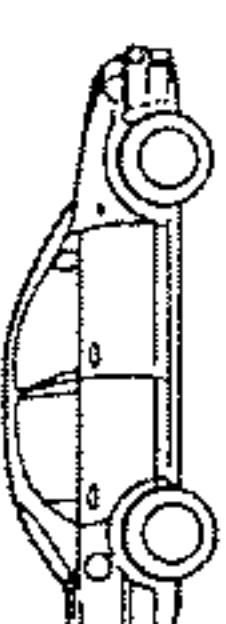
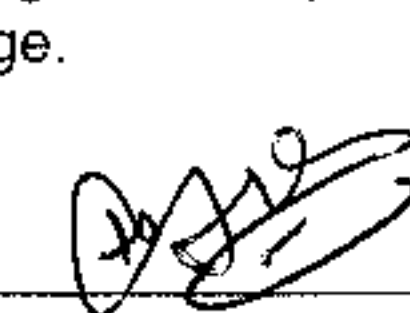
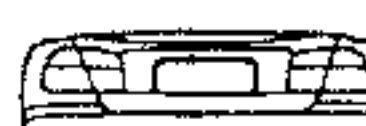
E.&O.E.

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: 0902

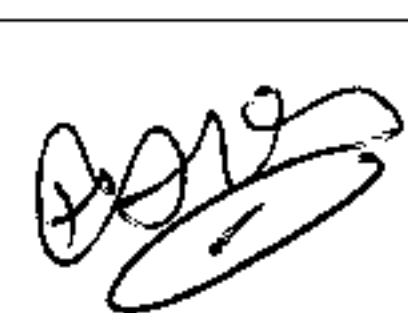
HIRER'S PARTICULAR		Veh No: <u>SLC 2587 C</u>		Replace Veh No:	
Name: (as in I/C) <u>SHAN HITTESH CHANDRAKANT</u>		Mileage Out:		Mileage Out:	
NRIC / PASSPORT No: <u>S7583736 D</u>		Make & Model <u>HONDA</u>		Make & Model	
Address (Res): <u>5000 E Marine Parade Rd #04-17 S(449288)</u>		Auto / Manual <u>VEZEL</u>		Auto / Manual	
Name & Address of Employer:		OUT : Date <u>27/2/2023</u>		OUT : Date	
		OUT : Time <u>9.10 AM</u>		OUT : Time	
RENTAL CHARGES					
Occupation: _____ Driving Exp: _____		Daily <u>4</u> @ \$ <u>120/-</u>		<u>480</u> / <u>00</u>	
D/L No: _____ D/L Type: Local/International		Weekly @ \$ _____			
Pass Date: <u>12 Apr 2007</u> Date of Birth: <u>10-7-1975</u>		Monthly @ \$ _____			
Tel: (O) _____ (R) _____ HP: _____		Hours @ \$ _____			
ADDITIONAL DRIVER'S PARTICULARS		Others @ \$ _____			
Name: (as in I/C) _____		CDW @ \$ _____			
NRIC / PASSPORT No: _____		PAI @ \$ _____			
D/L No: _____ D/L Type: Local/International		Delivery Service			
Address (Res): _____		SUB-TOTAL \$		<u>480</u> <u>00</u>	
Tel/Hp: _____					
Refundable Deposit:		OUT		IN	
Cash/Nets/Cheque/VISA/MC Cards No:					
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		EXTENSION			
FRONT		Collection Service			
		Misc.			
LEFT		ESTIMATED TOTAL RENTAL \$			
		Sales Person Code:			
RIGHT		Hirer is responsible for the first \$ <u>1500</u> excess for collision / damage to first part. (i.e) LONG PANG LEASING Vehicle (including windscreen) and also first \$ <u>1500</u> excess for collision / damage to third party's vehicle for each and every accident / damage.			
		Hirer's Signature  27/02 10:15 AM			
REAR		Addition Driver's Signature _____			
					
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			

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
02/03 2023	4.30 pm					

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

OFFICIAL RECEIPT

No 0758

Received from

SHAH HITESH CHANDRAKANT

Date: 2-3-23

The sum of Dollars

Four Hundred Eighty Only

Being payment for

SLE 2587C 27-2-23 to 2-3-23 Ref# 0902

Cash / Cheque No.:

\$ 480 / ~~XX~~

for LONG PANG LEASING



Authorised Signature

Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars (As At 22 Feb 2023 / 11:20:00)

Vehicle Insurance Details

Vehicle No.:

SCJ168L

Make Description/Model:

B.M.W. / 216I GRAN TOURER

Insurance Company Name:

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Business Transaction Reference No.:

20230223110556370572

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

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OK →

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