

## DISCHARGE VOUCHER AND INDEMNITY

Claimant Ref: **SLM932A**

IOD No: **CY22/MID46357-GBF8459C/210323/0053**

I / We, the undersigned **CHONG TECK WEI** DO HEREBY AGREE that payment by the Government of the Republic of Singapore as represented by the Ministry of Defence (hereinafter referred to as the "Government") of the sum of **SGD THREE THOUSAND ONE HUNDRED NINETY AND CENTS NINETY SIX ONLY (S\$3,190.96)** shall be the full and final settlement of all claims (other than Personal Injury Claims) howsoever arising out of or in connection with the damages caused to my/our vehicle no. **SLM932A**, in an accident involving Government vehicle no. **MID46357/GBF8459C** on **21/03/2023** at/ along **CHOA CHU KANG DRIVE**.

I/ We hereby authorize you to make payment in favour of **TAN CHONG MOTOR SALES PTE LTD**.

I/ We agree that the payment is made without any admission of liability on the part of the Government or any agent or servant of the Government, I/We declare that I/We have no further claim whatsoever against the Government or any agent or servant of the Government in respect of the abovementioned incident and hereby give the Government a full and final discharge in respect of any liability or liabilities (Excluding Personal Injury Claims) which may arise out of the aforesaid accident.

I/We also declare that I am/We are the person entitled to receive the above compensation and hereby undertake to indemnify the Government against any claim made or which may be made by any person in connection with this matter.

Date: x 20/7/2023

Signature of Claimant (with company stamp if applicable): x

Name of Claimant: x CHONG TECK WEI

If the Claimant is a Company or Firm, Name and Designation

Of the person signing on behalf of the Company or Firm.

Tan Chong Motor Sales Pte Ltd

Signature of Witness: [Signature]

Name and Designation of Witness: Lawrence Tan

**TAN CHONG MOTOR SALES PTE LTD**  
913 Bukit Timah Road  
Singapore 589623  
Tel: 6466 7711 Fax: 6469 7472

## Letter Of Claim For Uninsured Loss

Insurance Company: MINISTRY OF DEFENCE Date: 18/05/2023  
Address: \_\_\_\_\_

Attention: Claims Department – Motor Claims Manager

Dear Sir/Madam,

Subject: Accident involving vehicle number SLM932A & GBF8459C  
at CHUA CHU KANG DRIVE on 21/03/2023

I am the owner of Vehicle Number SLM932A which was involved with the accident as mentioned above.

As the accident was solely caused by your insured vehicle, bearing registration number GBF8459C, I hereby submit my claim against your company for the uninsured loss which are as follows:

Excess payment for OD claim	\$	_____
Loss of usage (S\$/day) for <u>02</u> days x \$50	\$	<u>100.00</u>
Car rental as per invoice attached	\$	_____
Search fee	\$	_____
Others <u>car</u>	\$	<u>3090.96</u>
Total claim amount	\$	<u>3190.96</u>

Enclosed please find copies of GIA report, invoices and certificate of insurance for your necessary review.

Kindly reply me within 14 days from the date hereof, or alternatively let me have the full and final settlement for all uninsured loss which amounted to \$ 3190.96, failing which I will have to recover all losses via legal action. Please also note your prompt action will help to reduce the claim cost.

Yours sincerely

(Owner of motor vehicle)

Name: CHONG TEOW JEE  
Address: BLK 201, #16-689 DEIR RD  
S'PORE 670201 S(670201)  
Telephone: 97934137

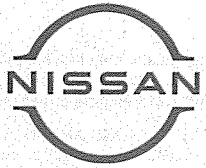




www.tanchong.com

## Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622  
SERVICE CENTRES  
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92  
19 LORONG 8, TOA PAYOH, SINGAPORE 319255. TEL: 63570753/4/5



**GST Regn No: 19-9106231-D**

**Co. Regn No : 199106231D**

TAX INVOICE

GST REG: 19-9106231-D

NAME : MINISTRY OF DEFENCE

ADDRESS : HQ-TRANSPORT COMMAND

TELEPHONE : KRANJI CAMP 3, 151 CHO A CHU KANG WAY S (638248)

MODEL : 62563561

ENGINE NO : DRLARDZC13UEAB-F-E

CHASSIS NO : HKA2398983A

VEHICLE NO : VSKDDAC13U0098503

SLM932A

INVOICE NO :

INVOICE DATE : W12143983

TERMS : 18-MAY-2023

DATE REC'D : CREDIT

27-APR-2023

JOB NO : LAW

MILEAGE : BG1132515

YOUR REFERENCE : 053549

INS/IC/LAW/0112/2

ITEMS

JOB DESCRIPTION

Credit terms 30 days

DOA.....: 21-MAR-2023

Our Ref.....: INS/IC/LAW/0112/2023

Surveyor.....: M/S LKK ENGINEERING & MANAGEMENT SERVICES

LABOUR	:	1743.00
PARTS	:	1119.00
SUBTOTAL	:	2862.00
TOTAL	:	2862.00
GST(8%)	:	228.96
AMOUNT DUE	:	3090.96

(NB : NC=No Charge;P=Included in Package;W=Warranty;G=Goodwill)  
DOLLARS: THREE THOUSAND NINETY AND CENTS  
NINETY SIX ONLY.

WORKSHOP MANAGER

The General Terms and Conditions of Service (the "Conditions") printed overleaf or attached to this Invoice shall apply to all Services set out above. Any claims relating the Services shall be subject to the Conditions. Any objections to the charges in this Invoice must be made within seven (7) days from the date of this Invoice, otherwise it shall be assumed that this Invoice has been accepted as correct and conclusive.

CUSTOMER



www.tanchong.com

## Tan Chong Motor Sales Pte Ltd

911 Bukit Timah Road Tan Chong Motor Centre Singapore 589622  
SERVICE CENTRES  
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92  
19 LORONG 8, TOA PAYOH, SINGAPORE 319255. TEL: 63570753/4/5

GST Regn No: 19-9106231-D

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GST REG: 19-9106231-D

NAME : MINISTRY OF DEFENCE

ADDRESS : HQ-TRANSPORT COMMAND

TELEPHONE : KRANJI CAMP 3, 151 CHO A CHU KANG WAY S (635248)

MODEL : 62563561

ENGINE NO : DRLARDZC13UEAB-F-E

CHASSIS NO : HRA2398983A

VEHICLE NO : VSKDDAC13U0098503

SLM932A

INVOICE NO :

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TERMS : 18-MAY-2023

DATE REC'D : CREDIT

27-APR-2023

JOB NO : LAW

MILEAGE : BG1132515

YOUR REFERENCE : 053549

INS/IC/LAW/0112/2

ITEMS	JOB DESCRIPTION	Credit terms	Amount
5	ALUMINIUM WHEEL RH REAR		903.20
	Qty:1 @ \$903.20 each (Special Nett Item)		
6	SUNDRIES		20.00
	Qty:1 @ \$20.00 each (Special Nett Item)		
	SUBTOTAL	:	1119.00

### REMARKS

1 AIG CLAIM AGAINST MINISTRY OF DEFENCE

DOA:21.03.2023

2 TOC:DIRECT SETTLEMENT

OUR REF:INS/IC/LAW/0112/2023

3 SATISFACTION NOTE ATTACHED

T/P VEHICLE NO:GBF8459C

4 SURVEY BY LKK RASUL ON 26.04.2023

RECOMMEND 4 DAYS REPAIR

5 AUTHORISE BY LKK HSIAO TONG ON 27.04.2023 @ 0859HR

REPAIR FROM 02.05.2023 - 04.05.2023

6 \*\*\* OWNER CLAIM LOSS OF USE

Insurance Co : MINISTRY OF DEFENCE

Policy No....: TP-GBF8459C

Claim Type ...: DIRECT SETTLEMENT / THIRD PARTY CLAIM

DOLLARS:

WORKSHOP MANAGER

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CUSTOMER





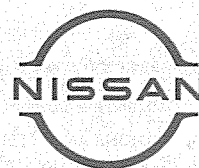
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## Tan Chong Motor Sales Pte Ltd

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SERVICE CENTRES  
913, BUKIT TIMAH ROAD, SINGAPORE 589623. TEL: 64694091/92  
19 LORONG 8, TOA PAYOH, SINGAPORE 319255. TEL: 63570753/4/5

GST Regn No: 19-9106231-D

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TAX INVOICE

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NAME : MINISTRY OF DEFENCE

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TELEPHONE : KRANJI CAMP3, 151 CHO A CHU KANG WAY S(688248)

MODEL : 62563561

ENGINE NO : DRLARDZC13UEAB-F-E

CHASSIS NO : HRA2398983A

VEHICLE NO : VSKDDAC13U0098503

SLM932A

INVOICE NO : W12143983

INVOICE DATE : 18-MAY-2023

TERMS : CREDIT

DATE REC'D : 27-APR-2023

SALE : LAW

JOB NO : BG1132515

MILEAGE : 053549

YOUR REFERENCE : INS/IC/LAW/0112/2

ITEMS	JOB DESCRIPTION	Credit terms	Amount
	LABOUR		
1	PERFORM VEHICLE ELECTRONIC SYSTEM DIAGNOSIS, INTERROGATION & REPROGRAM MODULE WITH CONSULT		240.00
2	PERFORM RUST PROOFING & TREATMENT FOR AFFECTED PANEL		120.00
3	CHECK WHEEL ALIGNMENT, ADJUST WHERE NECESSARY AND TEST DRIVE VEHICLE		108.00
4	REPAIR REAR BUMPER, RH REAR FENDER		585.00
5	S/PAINT REAR BUMPER AND RH REAR FENDER		500.00
6	RENEW RH REAR S/RIM AND CONDUCT WHEEL BALANCING		15.00
7	RENEW RH REAR S/RIM TPS SENSOR		120.00
8	R/I REVERSE SENSOR TO ASSIST REPAIR		55.00
	SUBTOTAL	:	1743.00
	PARTS		
1	CLIP BUMPER \$1.50 EA X 04 Qty:4 @ \$1.50 each (Disc:20.00% After Disc:\$4.80each)		4.80
2	CLIP C/LAMP Qty:1 @ \$7.30 each (Special Nett Item)		7.30
3	SEN UNIT-TIRE P Qty:1 @ \$178.90 each (Special Nett Item)		178.90
4	GROMMET BUMPER \$3.00 EA X 02 Qty:2 @ \$3.00 each (Disc:20.00% After Disc:\$4.80each)		4.80

DOLLARS:

WORKSHOP MANAGER

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CUSTOMER

# SATISFACTORY NOTE

TAN CHONG MOTOR SALES PTE LTD (TCMS)

☒

AUTOLUTION INDUSTRIAL PTE LTD (AIPL)

☐

TC AUTOCLINIC PTE LTD (TCAC)

☐

Lee

## TYPE OF CLAIM:

DATE:

☐

OWN DAMAGE (OD)

OWNER NAME:

CHONG TECK WEI

☐

OWN DAMAGE (OD) & UNINSURED LOSS  
(EXCESS & LOSS OF USAGE) VIA  
TCMS / AIPL / TCAC

NRIC NO.:

ADDRESS:

☐

THIRD PARTY THROUGH  
TCMS / AIPL / TCAC

☒

THIRD PARTY - OWNER  
DIRECT CLAIM AGAINST  
THIRD PARTY INSURANCE

☐

WINDSCREEN / GLASS (W/S)

VEHICLE MODEL:

PULSAR

INSURANCE CO.:

AIG - MINISTRY

REGN. NO.:

SLM 932A

CLAIM NO.:

OF DEFENCE

CHASSIS NO.:

POLICY NO.:

DATE OF ACCIDENT:

21/03/2023

DATE RECEIVED:

02/05/2023

DATE COMPLETED:

04/05/2023

We / I hereby confirmed that the accident repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd and that all necessary repairs as resulted of the accident of the above vehicle have been completed to our / my satisfaction and that We / I have no futher claim whatsoever against the above Company in repect thereof. Terms and Conditions as stipulated in the overleaf applies.

We / I have taken delivery of my car after all necessary repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd on\*

Note: In the event of an Own Damage Claim, your Insurance Company may under policy terms & conditions, or as standard Industrial Practice, increase the loading on your premium during Insurance Policy renewal. Your NCD [Non Claim Discount] may also be affected, subject to business policy of respective Insurance Company.

X

(NAME / SIGNATURE OF INSURED)

## FOOTNOTE:

☐

TCMS / AIPL / TCAC\* WILL CLAIM ON BEHALF  
OF OWNER  
THROUGH TCMS'S LEGAL AID

☐

DEPOSIT PAID BY OWNER

☐

OWNER WILL MAKE CLAIM AGAINST  
THIRD PARTY INSURANCE COMPANY

☐

DOCUMENTS RETURNED TO  
OWNER

☐

TCMS / AIPL / TCAC\* WILL CLAIM ON BEHALF  
OF OWNER UNINSURED LOSS. (EXCESS  
PAYMENT & LOSS OF USAGE)



## LETTER OF AUTHORITY AND INDEMNITY


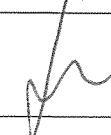
- ☒ Tan Chong Motor Sales Pte Ltd, 913, Bukit Timah Road, Singapore 589623  
☐ Tan Chong Motor Sales Pte Ltd, 17, Lorong 8, Toa Payoh, Singapore 319254  
☐ Autolution Industrial Pte Ltd, 19, Ubi Road 4, Singapore 408623  
☐ TC Autoclinic Pte Ltd, 25, Leng Kee Road, Singapore 159097  
☐ TC Autoclinic Pte Ltd, 1, Sixth Lok Yang Road, Singapore 628099

**Type of Claim:**

- ☒ Third Party (Direct Settlement)  
☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SLM 932A AND GBF8459C  
 ON 21/03/2023 AT CHOA CHU KANG AVE

1. I, the owner of vehicle no. SLM 932A hereby instruct you and authorise you to act for me with respect to the following: -
  - (a) To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
  - (b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
  - (c) To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
  - (d) To sign discharge voucher on my behalf.
2. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
4. In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
5. If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
7. I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
8. I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
  - a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
  - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

<b>Claimant's Particulars</b>		<b>Authorized Workshop</b>	
Name <u>CHONG TEER WEI</u>		Company Name <u>TAN CHONG MOTOR SALES PTE LTD</u>	
Address <u>BLK 201, #16-689 PRTR RD</u>		Claim Officer's Name <u>TAN CHONG MOTOR SALES PTE LTD</u>	
S'PORE <u>670201</u>		913 Bukit Timah Road	
Telephone No <u>97984137</u>		Singapore 589623	
Date <u>19.04.23</u>		Tel: 6466 7711 Fax: 6469 7472	
Email <u>twcscg15@sigmet.com.sg</u>		Date <u>19/04/23</u>	
Company Stamp [For Co Regn Vehicle]		Authorized Signature	
		Claim Officer 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 .....	22/03/2023 10:43 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	21/03/2023 13:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	CHOA CHU KANG DRIVE
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLM932A
-----------------------------------	---------

### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	CHONG TECK WEI
NRIC No .....	SXXXX442I
Email Address .....	twcscg15@singnet.com.sg
Mobile Phone No .....	(Phone) +65-97934137
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Nissan
Model .....	Pulsar
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Private use
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1200

### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	2100504518

### DRIVER

Name of Driver .....	CHONG TECK WEI
NRIC No .....	SXXXX442I
Date Of Birth .....	08/11/1962
Occupation .....	Indoor



Date Of Driving Pass .....	03/06/1989
Driving experience .....	33 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97934137
Alt. Phone Number .....	-
Email Address .....	twcscg15@singnet.com.sg
Address .....	201 PETIR ROAD #16-689
Address complement .....	-
Postcode .....	670201
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
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 .....	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

SEE ATTACHED POLICE REPORT

#### 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 .....	GBF8459C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	LEONG EE HAN DANIEL
NRIC No .....	TXXXX835Z
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	4

#### WITNESS DETAILS

##### WITNESS 1

Name .....	MICHAEL NEO
Phone .....	(Phone) +65-94889981
Email .....	-



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 willful 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 (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

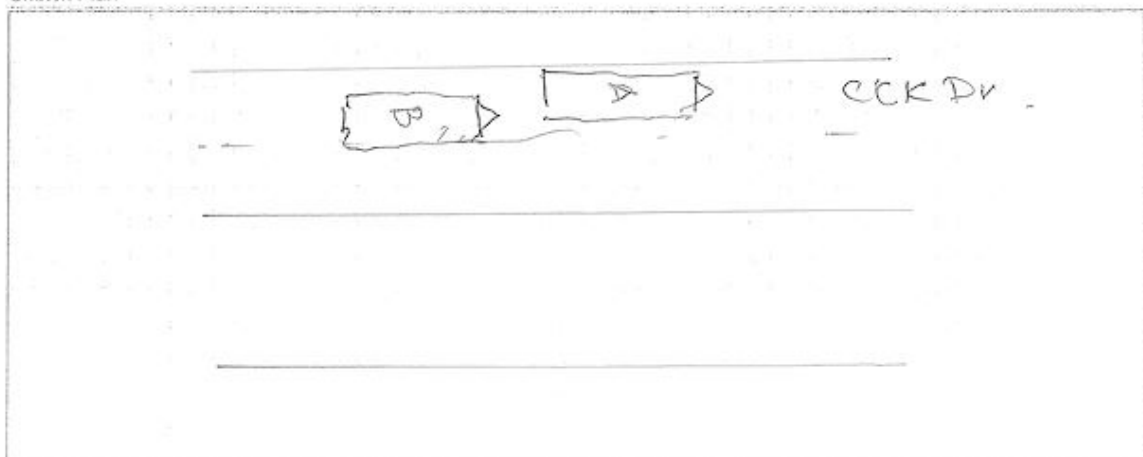


Policyholder's Signature / Date & Time

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

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

Sketch Plan



v. Jun 2022

Accident Location:  
Accident Date: Time: am/pm  
Owner Email: Driver Email:  
See Attached police report -

B	Veh No:	Hp:	Total Pax:	Driver Name:
C	Veh No:	Hp:	Total Pax:	Driver Name:

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  
3. Time

Witnessed by Reporting Centre Personnel



























































**SINGAPORE  
POLICE FORCE**



T/20230321/7072

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 4

Report No. T/20230321/7072

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/03/2023 19:23		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHONG TECK WEI			Address: 201 PETIR ROAD #16-689 SINGAPORE 670201		
ID Type / ID No.: NRIC NO / S25504421			Contact No.: Home/Office: Mobile: 97934137		
Nationality: MALAYSIAN			Email: TWCSCG15@SINGNET.COM.SG		
Sex: Male	Age: 60	Date of Birth: 08/11/1962	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B,3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 21/03/2023 13:30	Type of Location: Straight Road
Location:  CHOA CHU KANG DRIVE				
Lamp Post Number: 5				
Weather: Sunny		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBF8459C	Van	MERCEDES BENZ	Vito	White	Slightly Damaged	3
SLM932A	Car	NISSAN	Pulsa	Grey	Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20230321/7072

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20230321/7072

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLM932A	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100504518-06	21/03/2023	20/03/2024

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Officer				
Name	Unknown Officer		ID No.	NIL
Related Vehicle	GBF8459C (Van)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Driver				
Name	CHONG TECK WEI		ID No.	S2550442I
Related Vehicle	SLM932A (Car)		Contact No.	97934137
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 2B,3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Driver				
Name	LEONG EE HAN DANIEL		ID No.	T0215835Z
Related Vehicle	NIL		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL



SINGAPORE  
POLICE FORCE



T/20230321/7072

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 4  
Report No. T/20230321/7072

CONTINUATION OF REPORT

Brief Details.

I was travelling towards Choa Chu Kang direction on Choa Chu Kang Drive; to pick up my friend for a badminton session. After passing the traffic junction (opposite Masjid AL-Khair)" I slowed down and put up a side signal and then a hazard light signal to pull over to pick up my friend; when my car come to a complete stop, the vehicle at the back then try to overtake from the right but not manage to make it and then hit head on to my car real bumper. My car right side real bumper was scratch damaged while the third party vehicle left front bumper was dented and its front left tire was punctured. The third party vehicle was an army van and the driver was from Singapore Armed Forces.





SINGAPORE  
POLICE FORCE



T/20230321/7072

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

4 of 4

Report No. T/20230321/7072

## CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPiB /  
FAHKRUL RAZI BIN SUHAIME  
Contact No.: 65470000

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
21/03/2023 19:23

Classification Of Case:

This report is lodged at Bukit Panjang South NPP Kiosk 1  
NP168



**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: STOS 233M0002 Vehicle Registration No: SLM932A  
 Name (as shown in NRIC): CHONG TECK WEI NRIC/FIN/Passport No: S2504427  
 (\*Vehicle Driver/Policyholder) (\*) Please delete as appropriate  
 Address: BLK201, 16-689 SINGAPORE 670201 Singapore (670201)  
 Contact (Tel): 97934137 Mobile No.: 97934137  
 Email Address: twrcsg15@singnet.com.sg  
 Date of Accident: 21.03.2023 Time of Accident: 1.20pm  
 Place of Accident: OCK DRIVE  
 Insurance Company: AIG

**(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:

I would like to claim against third party.

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[Signature] 19.04.2023  
 Policyholder / Actual Driver's Signature  
 Date:

[Signature]  
 Reporting Centre Personnel's Signature  
 Name (as in NRIC/ID card):

## Hsiao Tong (LKKAUTO)

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**From:** Lawrence Teo <lawrenceteo@tanchong.com>  
**Sent:** Friday, 21 July 2023 8:52 AM  
**To:** Hsiao Tong (LKKAUTO)  
**Cc:** Olivia Lau (LKKAUTO); Chan Nguan Boo; Howard Lee; Tricia Goh; Felice Ng; Eric Koh  
**Subject:** RE: ACCIDENT INVOLVING SLM932A & GBF8459C ON 21.03.2023  
INS/IC/LAW/0112/2023 DIRECT SETTLEMENT  
**Attachments:** 20230720\_184135.jpg

Dear Mdm,

See attached.

Account Name	Tan Chong Motor Sales Pte Ltd
Account Number	501-570667-002
Bank Name	Oversea-Chinese Banking Corporation Ltd
Bank & Branch Code	7339/501

Best Regards,

Lawrence Teo

Tan Chong Motor Sales Pte Ltd  
913 Bukit Timah Road  
Singapore 589623  
Tel: +65-64694091 :: DID: +65-67038914 :: Fax: +65-64697472  
Email: [lawrenceteo@tanchong.com](mailto:lawrenceteo@tanchong.com)  
Website: [www.tanchong.com](http://www.tanchong.com) :: [www.nissan.com.sg](http://www.nissan.com.sg)

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**From:** Hsiao Tong (LKKAUTO) <[chewht@lkkauto.com](mailto:chewht@lkkauto.com)>  
**Sent:** Friday, July 14, 2023 10:27 AM  
**To:** Lawrence Teo <[lawrenceteo@tanchong.com](mailto:lawrenceteo@tanchong.com)>  
**Cc:** Olivia Lau (LKKAUTO) <[olivialau@lkkauto.com](mailto:olivialau@lkkauto.com)>  
**Subject:** RE: ACCIDENT INVOLVING SLM932A & GBF8459C ON 21.03.2023 INS/IC/LAW/0112/2023 DIRECT SETTLEMENT

### Without Prejudice

Dear Sirs/Mdm,

We confirm settlement at **\$3,190.96(all-in)**.

Please duly sign the **DV** enclosed and return to us (LKK) for our necessary action.

Please let us have your company bank details for payment processing.

Account Name	
Account Number	
Bank Name	
Bank & Branch Code	

Thank you.

Best Regards,

**Hsiao Tong, Chew (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6742-3197 | Email: [chewht@lkkauto.com](mailto:chewht@lkkauto.com) |

HQ : Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 |  
S(408933)

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**From:** Lawrence Teo <[lawrenceteo@tanchong.com](mailto:lawrenceteo@tanchong.com)>

**Sent:** Thursday, May 18, 2023 3:11 PM

**To:** Hsiao Tong (LKKAuto) <[chewht@lkkauto.com](mailto:chewht@lkkauto.com)>

**Cc:** Rasul (LKKAuto) <[Rasul@lkkauto.com](mailto:Rasul@lkkauto.com)>

**Subject:** RE: ACCIDENT INVOLVING SLM932A & GBF8459C ON 21.03.2023 INS/IC/LAW/0112/2023 DIRECT SETTLEMENT

Dear Mdm,

See attached.

Best Regards,

Lawrence Teo

Tan Chong Motor Sales Pte Ltd

913 Bukit Timah Road

Singapore 589623

Tel: +65-64694091 :: DID: +65-67038914 :: Fax: +65-64697472

Email: [lawrenceteo@tanchong.com](mailto:lawrenceteo@tanchong.com)

Website: [www.tanchong.com](http://www.tanchong.com) :: [www.nissan.com.sg](http://www.nissan.com.sg)





## Hsiao Tong (LKKAuto)

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**From:** CHAN BO WEN, MARCUS (MINDEF) <Chan\_Bo\_Wen\_Marcus@defence.gov.sg>  
**Sent:** Tuesday, 4 July 2023 8:35 PM  
**To:** HO AIK SENG, DENNIS (MINDEF)  
**Cc:** SHETH AADIT SACHIN (MINDEF); KURT RAPHAEL KOH JIN (MINDEF); Olivia Lau (LKKAuto); Hsiao Tong (LKKAuto)  
**Subject:** Re: [SEEK MANDATE] - Your Ref: CY22/MID46357-GBF8459C/210323/0053 // LKK Ref: CC2/MIDA23003325/Rp

Message Classification: Official Closed  
Hi Ms Chew,  
Please proceed to nego and follow up.

Sent from [Outlook for Android](#)

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**From:** HO AIK SENG, DENNIS (MINDEF) <HO\_Aik\_Seng\_Dennis@defence.gov.sg>  
**Sent:** Tuesday, July 4, 2023 7:46:57 PM  
**To:** CHAN BO WEN, MARCUS (MINDEF) <Chan\_Bo\_Wen\_Marcus@defence.gov.sg>  
**Cc:** SHETH AADIT SACHIN (MINDEF) <Sheth\_Aadit\_Sachin@defence.gov.sg>; KURT RAPHAEL KOH JIN (MINDEF) <Kurt\_Raphael\_Koh\_Jin@defence.gov.sg>; Olivia Lau (LKKAuto) <olivialau@lkkauto.com>; Hsiao Tong (LKKAuto) <chewht@lkkauto.com>  
**Subject:** RE: [SEEK MANDATE] - Your Ref: CY22/MID46357-GBF8459C/210323/0053 // LKK Ref: CC2/MIDA23003325/Rp

Message Classification: Official Closed  
Dear CPT Marcus Sir,

1. Below I email from LKK seeking mandate approval to carry out the claims based on our FCOR and the search fees. Last Maj Edwin did not approve.
2. For your necessary approval in formal before LKK can proceed.
3. Thank you.

Regards,

DENNIS HO  
TA INVESTIGATION WO  
HQ TPT/ SAFETY BR

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**From:** Hsiao Tong (LKKAuto) <chewht@lkkauto.com>  
**Sent:** 7 June, 2023 9:31 AM  
**To:** EDWIN KANG WEE HUAT (MINDEF) <KANG\_Wee\_Huat\_Edwin@defence.gov.sg>  
**Cc:** HO AIK SENG, DENNIS (MINDEF) <HO\_Aik\_Seng\_Dennis@defence.gov.sg>; SHETH AADIT SACHIN (MINDEF) <Sheth\_Aadit\_Sachin@defence.gov.sg>; KURT RAPHAEL KOH JIN (MINDEF) <Kurt\_Raphael\_Koh\_Jin@defence.gov.sg>; Olivia Lau (LKKAuto) <olivialau@lkkauto.com>  
**Subject:** [SEEK MANDATE] - Your Ref: CY22/MID46357-GBF8459C/210323/0053 // LKK Ref: CC2/MIDA23003325/Rp

Message Classification: Official Closed  
Your ref: **CY22/MID46357-GBF8459C/210323/0053**

Dear Sirs,

**ACCIDENT INVOLVING MID46357(GBF8459C) AND SLM932A ON 21/03/2023**

We refer to the above matter.

We are of the view our SAF driver is at fault as he collided onto civilian vehicle right rear portion.

We would like to seek your approval to negotiate and settle with civilian repairer.

The summary is as follows: -

	Pre-Repair Estimated Amount (by workshop)	Claimed Amount	Mandate Amount
1. Cost of Repair (WITH GST)	\$ 4,490.94	\$ 3,090.96	\$ 3,090.96 (\$2,862.00 + 8%GST)
2. Loss of Use (2days x \$50.00)	\$ 100.00	\$ 100.00	\$ 100.00 (2days x \$50.00)
<b>Total</b>	<b>\$ 4,590.94</b>	<b>\$ 3,190.96</b>	<b>\$ 3,190.96</b>

Enclosed herewith : -

- LKK Survey Report & Photos – SLM932A.
- LOD – SLM 932A
- SAF Report & Photos - MID46357

**Kindly let us have your approval / instruction.**

Best Regards,

**Hsiao Tong, Chew (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6742-3197 | Email: [chewht@lkkauto.com](mailto:chewht@lkkauto.com) |

HQ : Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 |

S(408933)

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**From:** Hsiao Tong (LKKAuto)

**Sent:** Friday, April 28, 2023 11:02 AM

**To:** EDWIN KANG WEE HUAT <[KANG\\_Wee\\_Huat\\_Edwin@defence.gov.sg](mailto:KANG_Wee_Huat_Edwin@defence.gov.sg)>; HO AIK SENG, DENNIS <[HO\\_Aik\\_Seng\\_Dennis@defence.gov.sg](mailto:HO_Aik_Seng_Dennis@defence.gov.sg)>; SHETH AADIT SACHIN (MINDEF) <[sheth\\_aadit\\_sachin@defence.gov.sg](mailto:sheth_aadit_sachin@defence.gov.sg)>

**Subject:** Your Ref: CY22/MID46357-GBF8459C/210323/0053 // LKK Ref: CC2/MIDA23003325/Rp

Your Ref: **CY22/MID46357-GBF8459C/210323/0053**

LKK Ref: CC2/MIDA23003325/Rp

Dear Sirs,

We have conducted inspection for SLM932A.

Please refer to the attached appraisal of damaged vehicle before repair and photos for your perusal.

Our further advice will follow in due course.

Thank you.

Best Regards,

**Hsiao Tong, Chew (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6742-3197 | Email: [chewht@lkkauto.com](mailto:chewht@lkkauto.com) |

HQ : Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 |

S(408933)

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**From:** SHETH AADIT SACHIN (MINDEF) <[Sheth\\_Aadit\\_Sachin@defence.gov.sg](mailto:Sheth_Aadit_Sachin@defence.gov.sg)>

**Sent:** Wednesday, March 29, 2023 3:35 PM

**To:** Hsiao Tong (LKKAuto) <[chewht@lkkauto.com](mailto:chewht@lkkauto.com)>

**Cc:** HO AIK SENG, DENNIS (MINDEF) <[HO\\_Aik\\_Seng\\_Dennis@defence.gov.sg](mailto:HO_Aik_Seng_Dennis@defence.gov.sg)>

**Subject:** Case File and IOD for MID 46357

Message Classification: Official Closed

Hi Hsiao Tong,

Please find attached the IOD and case file for MID 46357\_GBF8459C.

Thanks

**Best Regards,**

CPL Aadit Sheth

Safety Branch ASA

HQ TPT

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