



HD PERFECT AUTOWORK PTE LTD

Co. & GST Reg. No.: 202136904Z

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

Tel: +65 6341 6789 | Fax: +65 6341 6778

Email: hdperfectautowork@gmail.com

Date: 27.02.2025

ATTN: Motor Claims Department

INS : **INDIA INTERNATIONAL INSURANCE PTE LTD**

Dear Sir/Madam,

Accident Involving: SKZ7350B & GBL9157K
Date of Accident: 23.10.2024
Location: IN FRONT OF BLK 261 SERANGOON CENTRAL

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 11,663.00</u>
Loss of Rental:	
(\$98.10 X 16 Days):	<u>\$ 1,569.60 (16Repair Days)</u>
LTA Search	<u>\$ 27.25</u>
Grand Total:	<u>\$ 13,259.85</u>

The above-mentioned settlement is in respect for our client of damage pertaining to his/her motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his/her personal injuries.

Thank You,

Joanne
82979787

Authorisation To Act


I, Foo Chee Kuan ("the third party claimant") of
669 Jalan Damai #13-59 S.410669
(address), owner of SKZ7350B (vehicle no.)
hereby authorise HD Perfect Autowork Pte Ltd. ("the workshop")
to act for me with respect to my claim for repair costs and / or rental and / or
loss of use ("claim") for my vehicle no. SKZ7350B that was
damaged pursuant to the accident which occurred on 23/10/2024 (date)
at/along In Front of Blk 261 Serangoon Central
(location) involving vehicle no/s GBL9157K ("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a manner that
they deem it fit and the workshop is further authorised to receive payment further to settlement
of my claim with payment cheque/s being made in favour of the workshop.

I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

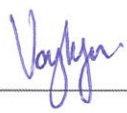
I further acknowledge that any settlement the workshop may reach on my behalf is on a without
prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by
me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident
concerned.

Dated this 23 day of 10 (month) 20 24 (year)



Signed by "the third party claimant"





Signed by "the workshop"

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SKZ7350B and GBL9157K on 23/10/24
at/along In Front of Blk 261 Serangoon Central.

1. I/We, the Owner of motor vehicle no. SKZ7350B hereby instruct and authorise HD Perfect Autowork Pte Ltd ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$_____ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 23 day of 10 20 24

Signature of vehicle owner _____

Name : Foo Chee Kuan

IC/UEN No : 81512135A

(Company stamp, if applicable)

Address : 669 Jalan Damai

#13-59 S-410669.

Tel : 96207085

Witnessed by : _____

Xin

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

8 Kaki Bukit Avenue 4

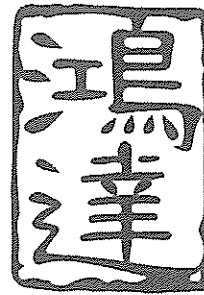
#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com

GST Reg. No. : 202136904Z



**HD PERFECT
AUTOWORK PTE LTD**

Date	Invoice Number	Vehicle Number
27.02.2025	HDP202502-01041	SKZ7350B

INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET

#04/#05 IOB BUILDING

SINGAPORE 049711

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 10,700.00
Total	\$ 10,700.00
Add: 9% GST	\$ 963.00
Total	\$ 11,663.00

Please indicate the invoice number on the reverse side.

HD PERFECT AUTOWORK PTE LTD

AUTO Generated - Signature Not Required

PRIME CAR L I M O

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

NRIC /UEN: 202136904Z

BLK 8 KAKI BUKIT AVE 4 #08-09 PREMIER KAKI BUKIT
SINGAPORE 415875

Attn: HD PERFECT AUTOWORK PTE LTD

Date : 12th November 2024
Tax Invoice # : INV 411-INV24/22857
Our Ref # : 1247
GST No. : 201826883W

Hirer/Driver: FOO CHEE KUAN

Driving License No: SXXXX135A

Driver's Address: APT BLK 669 JALAN DAMAI #13-59 SINGAPORE 410669

Vehicle No.	Rental Term	Rental Rate Before GST	Inv. Start Date	Inv. End Date
SMM5927X	16 Day(s)	\$90.00 Per Day	23 Oct 2024	08 Nov 2024

#	Description (GST is not chargeable)	Amount(\$)
1	Deposit for 1247 REPLACEMENT CAR FOR SKZ7350B	WAIVED

Subtotal

#	Description (Subjected to GST 9%)	Amount(\$)
1	Rental payment for SMM5927X REPLACEMENT CAR FOR SKZ7350B	\$1,440.00

Subtotal \$1,440.00

GST 9% \$129.60

Total \$1,569.60

E. & O.E.

TOTAL PAYABLE AMOUNT \$1,569.60

Kindly make the above rental payment & others (PAYABLE IN ADVANCE/ BEFORE START OF RENTAL PERIOD) of \$1,569.60 for vehicle no. SMM5927X to our account:-

PRIME CAR LIMO PTE LTD

Bank Current Acct No: MBB 04141089936

Paynow : 201826883W

or

Bank Current Acct No: DBS 0720146999

Paynow : 201826883W002

Thank you.

This is a computer generated copy, no signature is required.

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 23 Oct 2024 / 17:50:09

Receipt Date/Time : 23 Oct 2024 / 17:50:09

Tax Invoice/Receipt

Receipt No. : ITNET-00000-241023-003625

Previous Receipt No. :

**S/N Item Description/
Business Transaction Reference
No.**

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - GBL9157K

As at 23 Oct 2024/04:00:00

Insurance Co: INDIA INT'L INS PTE LTD

1 Insurance Enquiry - GBL9157K
Enquiry Fee
20241023174929353340

25.00	2.25	27.25
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Sub-Total	25.00	2.25	27.25
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Total Before Rounding	25.00	2.25	27.25
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Rounding Difference			0.00
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Total Amount Payable			27.25
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Paid By

512972XXXXXX5672	eNETS Credit Card	27.25
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Total		27.25
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Cash Change		0.00
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Tendered Amount		27.25
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Excess Refundable Amount		0.00
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THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

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 First Submission	23/10/2024 13:12 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	23/10/2024 04:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	IN FRONT OF BLK 261 SERANGOON CENTRAL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ7350B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	FOO CHEE KUAN
NRIC No	S1512135A
Email Address	mingkaihoward@gmail.com
Mobile Phone No	(Phone) +65-96207085
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Jazz
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 hire
Transmission	Auto
CC	1500
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5142886534

DRIVER

Name of Driver	FOO CHEE KUAN
NRIC No	S1512135A
Date Of Birth	20/09/1961
Occupation	Outdoor
Driving Pass Date	05/07/1979
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	45 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96207085
Alt. Phone Number	-
Email Address	mingkaihoward@gmail.com
Address	BLK 669 #13-59 JALAN DAMAI
Address complement	-
Postcode	410669
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	0
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

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	GBL9157K
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Tan Chin Wei, Gareth
NRIC No	S8825727H
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMQ9507C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	Shu, Tau Ann (Xu Dao'An)
NRIC No	S7518239B
Contact Number	(Phone) +65-97774535
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

WITNESS DETAILS

WITNESS 1

Name	UNKNOWN MALAY MALE
Phone	(Phone) +65-89109073
Email	-

SKETCH PLAN

INCOME ORANGE FORCE

Report Date & Start Time: 23/10/2024 / 12:07

Report No: MT/

D.O.A: 23/10/2024

Vehicle No: SKZ7350B

Reporting Type:

Time: 04:00 hrs

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.

3. 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.

Signature

Digitally signed by
Foo Chee Kuan

x 23/10/24 / 12:07

23/10/24 / 12:07

Policyholder's Signature / Date & Time

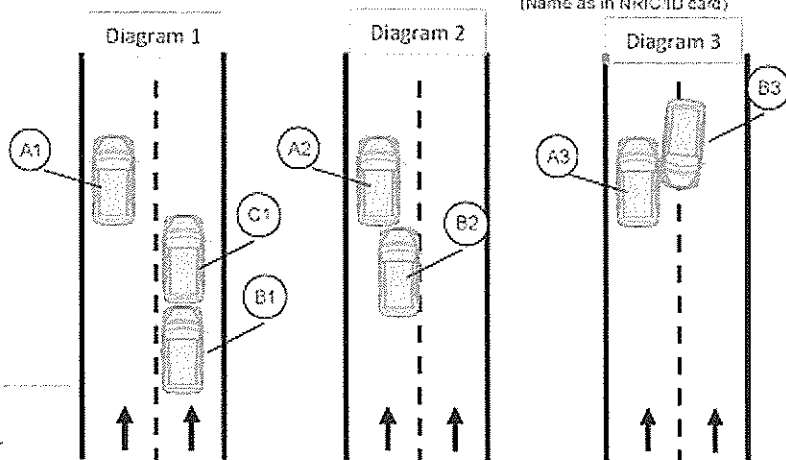
Driver's Signature (if driver is not the policyholder) / Date & Time

Tang Chun Kiet (S098825)
Income Orange Force

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

Sketch Plan

IN FRONT OF
BLK 261 SERANGOON CENTRAL



Vehicle A: SKZ7350B

Vehicle B: GBL9157K

Vehicle C: SMQ9507C

Describe Circumstances of the Accident

My vehicle A was stationary parked along lane 2. When I was returning to my vehicle A, I saw vehicle B hit into the rear of vehicle C. Follow then, vehicle B hit into the rear of my vehicle A. The force spinned vehicle B around to the front and vehicle B hit into the front right side of my vehicle A.
In total, there were 3 vehicles involved in this chain collision.

Declaration

I/We declare the foregoing particulars are true in every respect



Digitally signed by
Foo Chee Kuan

N 23-10-24 / 12:07
Policyholder's Signature / Date & Time

23-10-24 / 12:07
Driver's Signature (if driver is not the policyholder) / Date & Time

Tang Chun Kiet (S098825)
Income Orange Force
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1512135A**

Name: **FOO CHEE KUAN**

Birth Date: **20 Sep 1961**

Issue Date: **12 Feb 2004**

001117678A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1512135A**

Name: **FOO CHEE KUAN**

符儒冠

Race: **CHINESE**

Date of Birth: **20-09-1961**

Country of Birth: **SINGAPORE**

Sex: **M**

S1512135A

Owner +
Driver

Land Transport Authority

VOCATIONAL LICENCE

Licence No.: **S1512135A**

Name: **FOO CHEE KUAN**

Issue Date: **14/7/2005**

Please visit www.lta.gov.sg to check the status of this vocational licence

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	20 Mar 1984
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	05 Jul 1979
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	05 Jan 1983
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	18 Mar 1983

Licence No: **S1512135A**

NP 428A

1425958

NRIC No: **S1512135A**

Blood Group: **O+**

Date of Issue: **14-11-1993**

Address: **APT BLK 669 JALAN DAMAI #13-59 SINGAPORE 410669**

NRIC No: **S1512135A**

Date: **03-12-1985**

No: **1819555**

Address :

BLK 669 Jalan Damai

13-59

Singapore 410669

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	22/03/1996

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5142886534

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SKZ7350B**
 Chassis Number : JHMGK5850GX201590
2. Name of Policyholder : FOO CHEE KUAN
3. Effective Date of Insurance : 01 Feb 2024
4. Expiry Date of Insurance : 31 Jan 2025
5. Persons or Classes of Persons entitled to drive#
 - (a) The Policyholder.
 - (b) Any other person who is driving on the Policyholder's order or with his/her 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.
6. Limitations as to Use#
 - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.
- This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: FOO CHEE KUAN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

Agency : TELESales-DIRECT MARKETING (00000601661)

Date of Issue : 23 Jan 2024 12:45 hrs

For INCOME INSURANCE LIMITED



Chief Executive