BLOCK 1009 BUKIT MERAH LANE 3 #01-90 SINGAPORE 159723 TEL: 6273 0119 FAX: 6270 7065

Email: shufatt@pacific.net.sgsingnet.com.sg Co. Reg. No. 09062400M GST Reg. No. 09-062400-M

Our Ref. SF/002/2025

20 January 2025

without prejudice

China Taiping Insurance (S) Pte. Ltd., 3 Anson Rd, #16-00 Springleaf Tower, Singapore 079909

Attention: Motor Claims Dept

Dear Sirs,

ACCIDENT INVOLVING EB 1133 Z AND SLU 492 K ON 7.12.2024

We refer to the above matter.

We act for the owner of EB 1133 Z whose vehicle was involved in the above accident with your insured driver of SLU 492 K due to his/her gross negligence. Our client holds your insured driver responsible for all the outlay he/she had incurred we now forward the claim as follows:=

Repair cost	\$ 7,521.00	
GIA search fee	\$ 2.18	
LTA search fee	\$	
Loss of use	\$	
Rental	\$ 2,834.00	
Loss of income	\$	
Survey fee	\$	
Towing fee	\$	
GIA report fee for TP report	\$	
Miscellaneous (audatex fee)	\$	
Miscellaneous (Merimen fee)	\$	
Miscellaneous (reinstate sticker)	\$	
Off-peak e-day licence	\$	
Seal for off-peak car	\$	
Photocopies/postages/admin	***********	
	\$10,357.18	
	========	

To facilitate your investigation, we forward repair bill, accident report, certificate of Insurance, Letter of Authorisation, GIA receipt, rental agreement and invoice for your necessary action.

The above pertains to property damage claim only and should not prejudice injury claim, if any.

We thank you for your prompt assistance and we look forward to your early settlement.

Yours faithfully,

SHU FATT AUTO WORKS

Julia Wong (Claims)

Encs.



BLOCK 1009 BUKIT MERAH LANE 3 #01-90 SINGAPORE 159723 TEL: 6273 0119 FAX: 6270 7065

Co. Reg. No. 09062400M GST Reg. No. M 90375389 A

TAX INVOICE NO: SF/002/2025 10th January 2025

China Tai Insurance (Singapore) Pte Ltd (Third Party)

EB 1133 Z HONDA ODYSSEY

The repair costs of the above vehicle has been agreed upon a lump sum figure of S\$6900.00.

S\$ 6900.00

9% GST

621.00

7521.00

S'PORE DOLLARS: SEVEN THOUSAND FIVE HUNDRED TWENTY-ONE ONLY.

樹發汽車修理廠 SHU FATT AUTO WORKS



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 witholding 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.

CONT.

- 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 09/12/2024 17:47 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 07/12/2024 21:30 (SGT) Exact Location of Accident Singapore Additional Location Information PIE TOWARDS TUAS AT BUKIT BATOK EXIT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number EB1133Z

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SOONG ANGELO PETER NRIC No S1585123F Email Address ANGELO.SOONG@GMAIL.COM Mobile Phone No (Phone) +65-96316392 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model **ODYSSEY 2.4 EX-S CVT** Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 2356 Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number MT/01429153

DRIVER

Name of Driver AMELIA CHRISTINE SOONG T0408721D NRIC No Date Of Birth 31/03/2004 Occupation Indoor Driving Pass Date 25/10/2023 Driving License Pass Class **3A** Driving License Validity Valid Driving experience 1 YEAR AND 2 MONTHS Gender Female Mobile Number (Phone) +65-97247784 Alt. Phone Number Email Address AMELIA.SOONG@GMAIL.COM Address 1B OUBE GROE #1208 Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child 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 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) 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 CHRISTOPHER MICHAEL NG Gender Male 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	SLU492K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	_
Vehicle Colour	-
Vehicle Category	NA / Unknown
Name of Driver	BRENDA
Contact Number	*
Address	-
Address complement	-
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJ5117H
Vehicle Manufacturer	-
Vehicle Model	_
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	NA / Unknown
Name of Driver	SEBASTIAN
Contact Number	-
Address	
Address complement	_
Postcode	_
Insurance Company Name	11 <u>2</u>
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	
rio. Or r dooding or (moldaling Driver)	-

SKETCH PLAN

VEHICLE NO: DATE OF ACCIDENT:

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 Policyhelder and/ or the Actual Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance compenies to reputilate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of the policy liability on the part of insurance companies.
- 5. Any false reporting may be raffered to the Traffic Police Department for investigation.
- 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 abd that copies of this report will for a fee be made available upon application by Interested parties.
- By the ladgement 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 shall be collectively reflered to as the "Insurer"), 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 disclose 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.

9 000 2004

Policyholder's Signature / Date & Time

duelia.

9 DEC 2024 1-30 PM

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

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

CHARN'S CUSTOMCRAFT

Sketch Plan (DRAWING-SCENE OF ACCIDENT)

- CA LECELECIA

A. ES 71322 B. SLU 492 F

C. SJL 5117 H

PAT TORGERY

THA

EB 1133 Z VEHICLE NO: DATE OF ACCIDENT: 7 DEC 2024 Describe Circumstances of the Accident innit buits CARTE DUE WAS SION RUADWORKS CON GRESTICAN plemi VEHICLE SHEET STEPPED VEHICLE MIL YEHICLE IMPACTED VEHICLE OF 1 CHAIN COLLISIAN VEHICLE EB 1133 Z 492-K 8 SILL

Declaration

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

NOTE: DO NOTE THAT YOU MAY HAVE 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR POLICY. KINDLY REFER TO YOUR POLICY FOR MORE INFORMATION.

columbia you 201 1 3000

OWN DAMAGE()

THIRD PARTY ()

Pdlicyholder's Signature / Date & Time

REPORTING ONLY()

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ ID card) **CHARN'S CUSTOMCRAFT**

OWN WORKSHOP ()

15

Christinit.





Contact us at

Hotline: (65) 6665 5555

E-mail: customerservice@directasia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.

: MT/01429153

Type of Coverage / Driver Plan

: Car Comprehensive (Flexible Plan)

1) Vehicle Registration No.

EB1133Z

Chassis No.

3HMRC1880KC201955

2) Name of Policy Holder

SOONG ANGELO PETER

3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act

: 17/04/2024 00:00

4) Date/Time of Expiry of Insurance

16/04/2025 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) Any other person who is driving on the Policyholder's permission.

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule.

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured

Market Value

Your Excess

 Own Damage Excess
 : \$\$ 600.00

 YIED Excess
 : \$\$ 2,500.00

Windscreen Excess

: S\$ 100.00

Choice of workshop

: DirectAsia approved workshops

Finance company / Hire Purchase

.

Main driver

SOONG ANGELO PETER

Named driver : None

Important Note: This policy covers any authorised drivers. If you authorise a Young or Inexperienced Driver (YIED) then please note the increased excess above. YIED refers to any driver who is below the age of 30 or has held a driving license for less than 2 years.

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

Issued on:

25/01/2024

Direct Asia Insurance (Singapore) Pte. Ltd.

ALAN TAN_SM

Direct Asia Insurance (Singapore) Pte Ltd 16 Raffles Quay #39-01 Hong Leong Building Singapore 048581 www.DirectAsia.com

Agent Code: VIC20000038DSIA

LETTER OF AUTHORISATION

VEHICLE NO. FB 1133 Z

Name of owner Scory Argelo Peter	NRIC No	34A4 03/F
Address of Blc 1009 Bufart Merch Fare 3 Ho	09-70	8(59723)
Name of driver Awelra chime Soonay	NRIC No	S FRAX 131/D
Address_#S Alcove		
ACCIDENT INVOLVING 88 1133 2 AND SEM		
ON 7-DEC-2024 ALONG PIE towards Twa	se Bo	about Bodok Exc
In consideration of M/S. SHU FATT AUTO WORKS repairing my/our at my/our request, I/we, the abovenamed owner/driver of the instruct and authorize SHU FATT AUTO WORKS to demand/claim/s settled/payable by the insurance company and/or third party insuclaimed and/or settled shall belong to SHU FATT AUTO WORKS to my/our behalf. The settlement cheque should be made in favo directly.	said vehicl settle/recei rance com o give an a our of SHU	e hereby irrevocably ve whatever amount pany and all amount bsolute discharge on FATT AUTO WORKS
Dated this day of DECEME	NOR 2	0 24.
Signature: Name: Score Argelo Peter		
50 1100 2		

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLU492K

Date of Accident

07/12/2024

Reset

% RESULT & RECEIPT

TP Insurer Enquiry Insurance China Taiping Insurance (Sing... Requested By ______ Julia Wong (Shu Fatt Auto Wor...

Payment details

Request Amount: **\$\$2** GST Amount: \$\$0.18

Total Amount Due (GST Inclusive): \$\$2.18

General Insurance Association

Records Management Centre GST Registration No: M400017735

96316392 Mr Soong



A subsidiary of BKW Automobile Pte Ltd

BKW RENT A CAR PTE LTD

UEN/GST No.: 200106276D

120 Lower Delta Road #02-15 Cendex Centre

Singapore 169208

Tel: +65 67387777 Fax: 6738 6666

Website: https://bkw.sg

TAX INVOICE

Invoiced To SHU FATT AUTO WORKS C/O SOONG ANGELO PETER 1B PINE GROVE #12-08 SINGAPORE 591001

Invoice Number Invoice Date Due Date VHA Number Vehicle Number A 15693 30/12/2024 30/12/2024 A 15693 SMR 1122 B

S/N	Description	No. of Days	Rate	Amount
1	RENTAL FROM 10 DECEMBER 2024 TO 23 DECEMBER 2024 YOUR REF: EB 1133 Z	13	200.00	2,600.00
		-	Subtotal	2,600.00
		GS	ST @ 9%	234.00
		Total (in	icl. GST)	2,834.00
		Less: Pa	yments	-
		Amo	unt Due	\$\$2,834.00

Account Name: BKW RENT A CAR PTE LTD

Account No: 118-312-9991 Paynow UEN: 200106276D

Bank: UNITED OVERSEAS BANK LTD (UOB)

Branch: UOB Shaw Centre Branch

Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG

All cheques must be made payable to BKW RENT A CAR PTE LTD.





^{*} Please indicate the invoice number and vehicle number in the reference.



BKW RENT A CAR PTE LTD
120 Lower Delta Road #02-15 Cendex Centre Singapore 169208 Tel: 6738 7777 Fax: 6271 1661
ACRA No: 20-0106276-D GST Reg. No: 20-0106276-D
24 HOURS HELPLINE: 6223 1122

VEHICLE HIRING AGREEMENT

VHA No : 15693

A/BMS/P

VEHICLE	HIRING AGREEMENT Workshop: Workshop:
HIRER'S PARTICULARS	Hirer's Own Vehicle No: EBI133 Z Replace Veh No:
Name (as in I/C) SOONG ANGELD PETER	Loan Vehicle No: STAP HARRIE VR No:
NRIC/Passport No: Date of Birth:	Make & Model: All (Auto/Manual Group:
Address: 18 (IN & GROVE Age:	CHARGES : \$ cts
# 12-08 st 591001	Daily 3 day @\$ 200 Per day \$2600 -
Name & Address of Employer	Weekly/Monthly week @\$ Per week/Monthly
	Others
Occupation Driving Exp: Driving Licence No: Passed Date:	CDW/PAI @\$ Per day/Monthly
Driving Licence No: Passed Date: D/L Type: Local/Int'l/Others:	Delivery/Collection Svc
D/L type: Local/Inti/Others.	GST 9% \$234 -
AUTHORIZED DRIVER'S PARTICULARS	OR No: (A) SUB-TOTAL \$2834
	Petrol Level OUT E 1/4 1/2 3/4 F
Name (as in I/C)	8 7
NRIC/Passport No: Date of Birth:	Surcharge IN
Address: Age:	Firstkm FREE per day
Occupation Driving Exp:	Yrs Excess mileage is chargeable at cents per km TOTAL CHARGES
Driving Licence No: Passed / Expiry Date:	かたさくがん シェディ・シェスト マグ・ストン グ・ストン カ・ストン
D/L Type: Local/Int'l/Others: Contact No:	くだい カステックス ディス・カイス デイス・ス・カース・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・
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	NON WAIVER EXCESS (Subject to GST): \$ ACCESSORIES CHECK
	☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge
	☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre
INDICATE: A - Accidents D - Dents	Hirer's Signature : Additional Driver's Signature :
S - Scratches X - Crack	SINGAPORE Use Only *Please refer to point 5
I have read and agree to the terms and condition on both sides of this	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 infringement	ts may be billed to that account and my signature above will be considered to have been been given BKW Rent A Car Pte Ltd in connection with this agreement is true.
IMPORTANT	legal costs on a full indemnity basis), whatsoever and howsoever brought against,
 The Hirer and the authorized driver by BKW must be over 23 years of ag- under 70 years and be holding valid driving licenses and have a minimum 	m of vehicle. Full excess amount have to be paid immediately in the event of an accident.
 years regular and qualified driving experience. Failure to observe stipu may return all damages costs to be Borne by the Hirer/the Authorised Dr All vehicles are supplied with petrol and should returned with petrol level like 	river. occurred. Any damage to the car will be repair at BKW authorized workshop.
A service charge of \$10 on top of a petrol surcharge is payable by the h should he fail to return the vehicle at the appropriate petrol level.	
No refund for early return of vehicle. The hirer shall be liable for additional of for any late return at the rate shown per hour per day, inclusive of CDW and	charges 9. The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that
where applicable. Any returns after our operation hours will be charged as day rental.	s a full in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$60.00 per trip.
 Use of the vehicle for illegal purpose (For instance: in connection with ti drug peddling or trafficking, smuggling, illegal racing), is strictly prohibit 	ted. report must be made within 24 hours. Failure to comply, the hirer will have to borne
 Vehicle strictly for Singapore use only and may not be driven out of Sing without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable. 	le for a the event of an accident.
penalty fee of minimun \$200 in additional to the appropriate insurance top the case of non-disclosure of Malaysia usage. 6. The hirer and/or driver shall be responsible for all damages or losses hows	in the car is sufficient and do not drive when the vehicle is stall and does not have
caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with it's use or operation.	12. All customers' data will be kept strictly confidential and is solely used for the
 The hirer and/or driver shall be responsible for all claims, damages, losses increased insurance premiums, non-wavier excess and cost expense (included) 	s, 13.1 understand and agree to the personal data collection statement stated on the
Date Out Time Out Mileage Check By	Remarks
17 17 17 17 17 17 17 17 17 17 17 17 17 1	Hirer's/Driver Signature
Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The S	ature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or
Questioned On Any Account Whatsoever. And I had cleared my belonging iter	ms from the rental vehicle (cashcard, parking coupons, etc)"

Remarks

Mileage

Check By

Made

Time In

Date In

Hirer's/Driver Signature

Shu Fatt Auto Works

From:

Daphne Lee (LKK Auto) <daphnelee@lkkauto.com>

Sent:

Friday, December 13, 2024 9:38 AM

To:

Shu Fatt Auto Works

Subject:

RE: Accident involving EB 1133 Z and SLU 492 K on 7 Dec 2024

Without Prejudice

Dear sir/ Madam,

Liability is clear.

Cheers to a Wonderful Christmas and a Happy New Year 2025!

Best Regards,

Daphne Lee (Ms) | Case Handler

Third Party Direct Settlement

LKK Auto Consultants Pte Ltd

Phone: 6841 2157 | Email: DaphneLee@lkkauto.com|

HQ: Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #01-25 | S(408933)

From: Shu Fatt Auto Works <shufatt@singnet.com.sg>

Sent: Friday, 13 December 2024 9:16 AM

To: Daphne Lee (LKK Auto) <daphnelee@lkkauto.com>

Subject: Accident involving EB 1133 Z and SLU 492 K on 7 Dec 2024

Importance: High

WITHOUT PREDUDICE

Dear Ms Lee,

Reference to the above.

Please could you kindly advise liability.

Thanks & regards,

Pat

Shu Fatt Auto Works