

**YEW TEE AUTOMOBILE TECH PTE LTD**

HQ: BLK 6 WOODLANDS ROAD 399-F YEW TEE IND EST S(678006)

BR: SYNERGY@KB, 25 KAKI BUKIT ROAD 4 #01-61 S(417800)

BR: MEGA@WOODLANDS, 39 WOODLANDS CLOSE #01-12 S(737856)

GST Reg No. 200311009C

Singapore

67653373 / 67023113

INFO@YEWTEEGROUP.COM

WWW.YEWTEEGROUP.COM

Company Registration No. 200311009C

ADDRESS

AXA INSURANCE SINGAPORE

PTE LTD

AXA INSURANCE SINGAPORE

PTE LTD

TP TAX INVOICE MC1801002**DATE 24/01/2018****VEHICLE NO.**

SKX1784H

CONTACT**ATTN**

ACTIVITY	QTY	RATE	TAX	AMOUNT
Lump Sum Repair	1	4,250.00	7% SR	4,250.00
TP Search fee	1	27.10	7% SR	27.10
GIA Search fee	1	1.87	7% SR	1.87
Rental of Vehicle	12	110.00	7% SR	1,320.00

Cheque should be crossed & made payable to "YEW TEE AUTOMOBILE TECH PTE LTD" and strictly send to our HQ address.

SUBTOTAL

5,598.97

GST TOTAL

391.93

TOTAL**SGD 5,990.90**

Accepted By

Accepted Date

RECEIVED BY

ISSUED BY

E. & O.E.

Yew Tee Automobile Tech Pte Ltd

Blk 6 Woodlands Road 399F Yew Tee Ind. Est.

Singapore 678006

Tel: 67653373 Fax: 67604895

23-01-18

AXA Insurance Singapore
8 Shenton Way
#27-01/02 Axa Tower
Singapore 068811

Attn: Motor Claims Department

Dear Sirs,

ACCIDENT INVOLVING VEHICLE: SKX1784H &GBD1728H on 02.01.2018

We are the authorized repair workshop for the owner of motor vehicle no: SJH3825G which was involved in the captioned accident with your insured vehicle: SKC6821L. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

01) Lump Sum Repair	\$ 4,250.00
02) TP search fee	\$ 27.10
03) GIA Search Fee	\$ 1.87
04) Rental @ 12 days at \$110 per day	\$ 1,320.00
	<u>\$ 5,598.97</u>
GST 7%	\$ 391.93
Grand Total	<u><u>\$ 5,990.90</u></u>

We enclosed herewith the following documents to support the claims:-


- a) Tax Invoice/ Letter of authorisation
- b) GIA report
- c) Discharge voucher

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you

Yours faithfully,


Shaun Toh - 97432262



LETTER OF AUTHORITY

To whom it may concern,

ACCIDENT INVOLVING : SKX1784H and GBD1728H on 02/01/2018

I/We FORMULA SERVICES Reg No.:200407094E

Owner of motor vehicle no : SKX1784H do hereby appoint M/S YEW TEE AUTOMOBILE TECH PTE LTD as my/our authorized representative to write,negotiate and settle my/our claims against the other party involved in the abovementioned accident. M/S YEW TEE AUTOMOBILE TECH PTE LTD shall have absolute discracion to settele the matter at the best terms.

I/WE also confirm and instruct that any agreed settlement sum in respect of my/our claims be paid to M/S YEW TEE AUTOMOBILE TECH PTE LTD and such payment will consititute a full and final discharge of my/our claims.

I/WE further authorize M/S YEW TEE AUTOMOBILE TECH PTE LTD to execute the discharge voucher on my/our behalf.



Signature of Owner,



YEW TEE AUTOMOBILE TECH PTE LTD

HQ: BLK 6 WOODLANDS ROAD 399F YEW TEE IND EST S(678006)

TEL: 6765 3373 / 6762 2081 / 6764 9042 FAX: 6760 4895

EMAIL: utauto@singnet.com.sg

Branch: Synergy@KB, 25 Kaki Bukit Road 4 #01-61 S(417800)

Tel: 6702 3113 (3Lines) Fax: 6702 3773

EMAIL: utauto2@singnet.com.sg

ROC: 200311009C GST: 200311009C

Website: www.ytauto.com.sg

HDB Carpark (1800-2255432)

A)

I, Chee Yee Pern

(NRIC NO.) S7671050C hereby confirm

that on (DATE) 3/1/18. at (TIME) 1:06pm

I left my vehicle bearing Vehicle No. SKX1784H at

YEW TEE AUTOMOBILE TECH PTE LTD for repair.



Signature

B)

The repair(s) have been completed to my satisfaction and I,

Chee Yee Pern

(NRIC NO.) S7671050C have collected my vehicle

bearing Vehicle No. SKX1784H on (DATE) 15/01/2018

at (TIME) 12:00pm. from YEW TEE AUTOMOBILE TECH PTE LTD . .



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 Authorised 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 ability.
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 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 Report	03/01/2018 15:37
Date Of Accident	02/01/2018 16:50
Exact Location Of Accident	KAKI BUKIT AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX1784H
Insured/Policyholder	
Name Of Registered Owner	FORMULA SERVICES PTE LTD
Co Reg No	200407094E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY
Exact Purpose for which vehicle was being used at time of accident	

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA288572
Cover Note Number	

Driver

Name of Driver	CHEE YEE PERN
NRIC No	S7671050C
Date Of Birth	25/10/1976
Occupation	INDOOR
Date Of Driving Pass	15/05/1998
Driving Experience	19 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91058061
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 121 PENDING ROAD #13-166
Postcode	670121
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON THE ABOVE MENTIONED DATE AND TIME, I STOPPED MY VEHICLE. HOWEVER, VEHICLE BEHIND ME BANG INTO MY REAR PORTION.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD1728H
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHOW AH KHEONG
NRIC/Passport Number	S1121183F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorised 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.
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6. The 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 lodging 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

X

che



che

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above mentioned date and time, I stopped my vehicle however vehicle behind me bang into my rear of vehicle.

DECLARATION

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

X

che.
Policyholder's Signature
Date & Time:



che.
Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7671050C

Name
CHEE YEE PERN
徐 艺 鵬

Race
CHINESE

Date of Birth
25-10-1976

Sex
M

Country of Birth
MALAYSIA

Licence Number: S7671050C
Name: CHEE YEE PERN

Birth Date: 25 Oct 1976
Issue Date: 24 Aug 2016

002602352D

3052003

NRIC No. S7671050C

Blood Group: B+
Date of issue: 09-11-1998

APT BLK 121 PENDING ROAD #13-166
SINGAPORE 670121

NRIC No: S7671050C
Date: 02/05/2012 (R) No: 6953501

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 15 May 1998

NP 428A

Licence No: S7671050C



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-001756

Date of Request: 04/01/2018

Your Ref No:

Online Purchase

Yew Tee Automobile Tech Pte Ltd
Blk 6 Woodlands Road 399F,
Yew Tee Ind Estate
Singapore 678006

Dear Sir/Madam,

Enquiry Date 04/01/2018
Enquiry By Toh Lei Ming
TP Vehicle No. GBD1728H
Accident Date 02/01/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-001992

Date of Request: 04/01/2018

Your Ref No:

Online Purchase

Yew Tee Automobile Tech Pte Ltd
Blk 6 Woodlands Road 399F,
Yew Tee Ind Estate
Singapore 678006

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 02/01/2018

Place of Accident: KAKI BUKIT AVE 3

Client Vehicle No: SKX1784H

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-001999

Date of Request: 04/01/2018

Your Ref No:

Online Purchase

Yew Tee Automobile Tech Pte Ltd
Blk 6 Woodlands Road 399F,
Yew Tee Ind Estate
Singapore 678006

Dear Sir/Madam,

Date of Accident: 02/01/2018

Vehicle No: SKX1784H

Place of Accident: KAKI BUKIT AVE 3

Involving Vehicle No: GBD1728H

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
GBD1728H	KAKI BUKIT AVE 3	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



友立旅遊服務私人有限公司
UNIQUE TOURIST SERVICE (PTE) LTD

1, Rochor Road, #02-574,
Rochor Centre Singapore 180001
Tel: 6292 7656 Fax: (65) 6293 9720
E-mail: uniqtour@singnet.com.sg
STB LIC TA/00076

Co. Reg. No.: 197401067R
GST Reg. No.: M2-0019671-6

Mr Chee Yee Pern
Blk 121 Pending Road
13-166
Singapore 670121

20, Sin Ming Lane,
#08-51, Midview City
Singapore 573968
Tel: 6292 7656

TAX INVOICE

NO. **WP2017286**

16.01.2018

Singapore, _____ 20

DATE	PARTICULARS	@	\$	cts
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Rental of one unit Toyota Corolla Altis 1.6 Auto
Registration no. SKF 6171 M self driven
as from 03.01.2018 to 15.01.2018.

12 days at \$110.00 per day

\$ 1320.00

Add GST at 7%
Amount Due

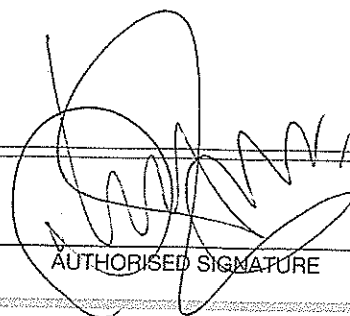
\$ 1320.00

\$ 92.40

\$ 1412.40

(SIN DOLLARS: ONE THOUSAND FOUR HUNDRED TWELVE AND FORTY CTS ONLY)

Standard Rated Supplies:\$ 1320.00
Total Amount of GST:\$ 92.40


AUTHORISED SIGNATURE

DATE: _____
SIGNATURE OF HIRER

DATE: _____
SIGNATURE OF HIRER