

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

Date : 18.07.2018

EQ Insurance Company Limited
5 Maxwell Road
#17-00 Tower Block MND Complex
Singapore 069110

Attn: Motor Claims Department

ACCIDENT INVOLVING VEHICLE: SLX 9203D / YP 4395D ON 03.06.2018

We are the authorized repair workshop for the owner of motor vehicle no: **SLX 9203D**, which was involved in the captioned accident with your insured vehicle no: **YP 4395D**. 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.

1) Cost of Repair (inclusive of GST)	\$	4,708.00
2) Loss Of Use (4 days X \$100)	\$	400.00
3) GIA Search Result	\$	2.00
	\$	5,110.00

We enclosed herewith the following documents to support the claims:

- | | |
|-----------------------------------|------------------------------------|
| a) Final Repair Invoice | e) Vehicle Registration Log Card |
| b) I/C & Driving License | f) Letter of Authorisation, etc... |
| c) GIA Report / GIA Search Result | |
| d) Insurance Certificate | |

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,

Jason Tang (jason@fastechauto.com.sg)
FASTECH AUTO PTE LTD

DATE : 03.06.2018

TO : EQ Insurance Company Limited

RE : ACCIDENT INVOLVING VEHICLE NO. SLX 9203D and

YP 4395D ONLY

ALONG BLK 209 BOON LAY PLACE

ON 03.06.2018

I/We, SAHMUDIN BIN MODH

of (NRIC No./ROC No.) S7518412C

of BLK 187 BOON LAY AVE #15-50 S-640187

owner of vehicle no. SLX 9203D in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle SLX 9203D at my/our instruction and hereby authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever amount settled/payable by the Insurance Company and/or third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use, etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and all claimed and/or settled shall belong to them absolutely.

I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.

Signature of Owner :



Name of Owner :

SAHMUDIN BIN MODH

TAX INVOICE

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

EQ Insurance Company Limited

5 Maxwell Road

#17-00 Tower Block MND Complex

Singapore 069110

Attn: Motor Claims Department

Tax Invoice : 20332

Date : 18.07.2018

Vehicle No : SLX 9203D

Make/Model : MAZDA

Chassis/Eng# :

Accident Date : 03.06.2018

Claim No : 0618- 20332

Reference :

Policy No :

Amount

To proceed on lump sum repair

S\$

4,400.00

E. & O. E.

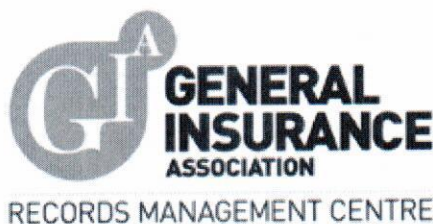
Total : S\$ 4,400.00

GST @ 7% : S\$ 308.00

Amount Due : S\$ **4,708.00**

FASTECH AUTO PTE LTD

All Invoices are subjected to GST

**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

Third Party Insurer Enquiry

Our Ref No: GR-18-084246

Date of Request: 04/06/2018

Your Ref No: Online Purchase

Kim Chwee Auto Pte Ltd
1 Kaki Bukit Avenue 6 #01-48
AutoBay@Kaki Bukit
Singapore 417883

Dear Sir/Madam,

Enquiry Date 04/06/2018
Enquiry By Jason Tang Jun Zhong
TP Vehicle No. YP4395D
Accident Date 04/06/2018

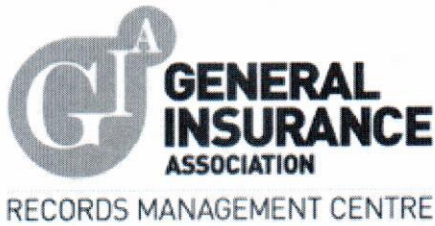
Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YP4395D	EQ Insurance Company Ltd	10/10/2017-09/10/2018	6223 9433

Thank You.

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.

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Our Ref No: GR-18-084246

Date of Request: 04/06/2018

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd
1 Kaki Bukit Avenue 6 #01-48
AutoBay@Kaki Bukit
Singapore 417883

Dear Sir/Madam,

Enquiry Date 04/06/2018
Enquiry By Jason Tang Jun Zhong
TP Vehicle No. YP4395D
Accident Date 04/06/2018

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:

☒ [X] GIRO ☐ [] Cash ☐ [] Cheque

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	8412C
Vehicle Details	
Vehicle No.:	SLX9203D
Vehicle to be Exported:	No
Intended De-registration Date:	04 Jun 2018
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 HATCHBACK 1.5 AT DELUXE EU6
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	P520498724
Chassis No.:	JM6BN24A8J0208415
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$18,435.00
Original Registration Date:	17 Apr 2018
First Registration Date:	17 Apr 2018
Transfer Count:	0
Actual ARF Paid:	\$18,435.00
OPC Cash Rebate Details	
OPC Cash Rebate Eligibility:	No
OPC Cash Rebate Eligibility Expiry Date:	-
OPC Cash Rebate Amount:	-
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Apr 2028
PARF Rebate Amount:	\$13,826.00
Intended COE Rebate Details	
COE Expiry Date:	16 Apr 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$19,810.00
COE Rebate Amount:	\$19,545.00
Total Rebate Amount:	\$33,371.00

The information contained herein is correct as at 04 Jun 2018

OK

REPUBLIC OF SINGAPORE DRIVING LICENCE


Licence Number: **S7518412C**

Name: **SAHMUDIN BIN MODH**

Birth Date: **25 Jun 1975**

Issue Date: **10 Feb 2003**

1000188205B



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7518412C**

Name: **SAHMUDIN BIN MODH**



شاهمودين بن محمد

Race: **BOYANESE**

Date of birth: **25-06-1975** Sex: **M**

Country of birth: **SINGAPORE**

3742801

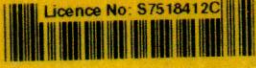



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	09 Jan 1995
Class 2A	Motorcycles between 201 cc and 400 cc	06 Feb 1996
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	28 Apr 1998
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	14 Sep 1998

NP 428A

Licence No: S7518412C





3742801

NRIC No: **S7518412C**

Date of issue: **18-07-2005**

APT BLK 187 BOON LAY AVENUE #15-50
SINGAPORE 640187

NRIC No: S7518412C Date: 25/10/2010 No: 6661851



CERTIFICATE OF INSURANCE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : SAHMUDIN BIN MODH
Period of Insurance : 17 Apr 2018 To 16 Apr 2020
Engine No. : P520498724
Chassis No. : JM6BN24A8J0208415

Vehicle No. : SLX9203D
Policy No. : 1800049138
Endorsement No. :
Issued Date : 04 May 2018

ABOUT THE COVER

Make/Model : MAZDA 3 1.5 SKYACTIV
Engine Capacity/Tonnage : 1,496.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PAF : Yes

Person 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.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

SAHMUDIN BIN MODH - \$600 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Trans Eurokars Pte Ltd Add: 5 Ubi Close, Singapore 408605 63958899

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503599190

ARF (AP) PTE LTD - MAZDA
7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX
SINGAPORE 069111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSCASB

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 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	04/06/2018 16:23
Date Of Accident	03/06/2018 17:30
Exact Location Of Accident	ALONG BLK 209 BOON LAY PLACE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX9203D
Insured/Policyholder	
Name Of Registered Owner	SAHMUDIN BIN MODH
NRIC No	S7518412C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90040730
Alternative Phone No	OFFICE-90040730

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA3 HATCHBACK 1.5 AT DELUXE EU6
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800049138
Cover Note Number	-

Driver

Name of Driver	SAHMUDIN BIN MODH
NRIC No	S7518412C
Date Of Birth	25/06/1975
Occupation	INDOOR
Date Of Driving Pass	28/04/1998
Driving Experience	20 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90040730
Fax Number	
Contact Number	OFFICE-90040730
Email Address	NOEMAIL

Address	BLK 187 BOON LAY AVE #15-50
Postcode	640187
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

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?	
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

PLEASE REFER TO ATTACHED STATEMENT.

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	YP4395D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHUA TECK CHAI
NRIC/Passport Number	S1373628F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan


SKETCH PLAN


IMPORTANT NOTICE


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7. By the lodgment 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.

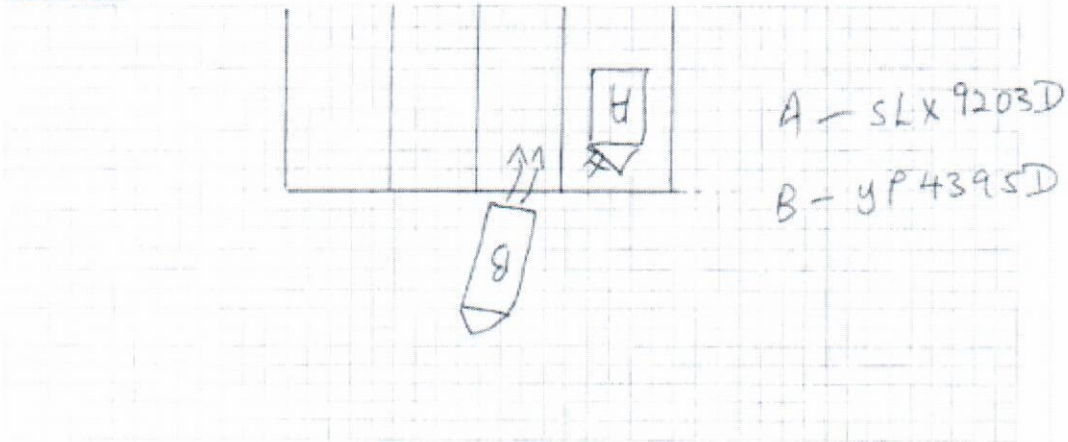

Policyholder's Signature
Date & Time:


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


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

Accident Sketch Plan

SKETCH PLAN





DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


on 3/6/2018 at 5-30pm, I parked my car at BIK
 809 Iron Lay Place. When I retrieved my car and found
 that my RH side front portion damaged. I was
 informed by my pass by that my car was hit by
 vehicle B.

DECLARATION

I/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 & Time:


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