

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date : 24.04.2019

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SLV 8424A / GBB 5813A ON 20.02.2019

We are the authorized repair workshop for the owner of motor vehicle no: **SLV 8424A** , which was involved in the captioned accident with your insured vehicle no: **GBB 8513A** . 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)	\$ 20,613.95
2) Loss of Rental	\$ 13,320.00
3) GIA Search Fee	\$ 2.00
	\$ 33,933.95

We enclosed herewith the following documents to support the claims:

- | | |
|----------------------------------|------------------------------------|
| a) Final Repair Invoice | b) Car Rental Invoice / Agreement |
| c) GIA Search Result | d) Letter of Authorisation, etc... |
| e) GIA Report | f) Police Report |
| g) I/C & Driving Licence | h) Insurance Certificate |
| i) Vehicle Registration Log Card | |

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)
For Fastech Auto Pte Ltd

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

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn : Motor Claim Department

Tax Invoice : 20908

Date : 24.04.2019

Vehicle No : SLV 8424A

Make/Model : TOYOTA NOAH

Chassis/Eng# :

Accident Date : 20.02.2019

Claim No :

Reference : 0219 -20908

Policy No :

	Amount
To proceed on lump sum repair	SS 19265.37

E. & O. E.

Total : S\$ 19265.37

GST @ 7% : S\$ 1348.58

Amount Due : **S\$ 20613.95**


for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: KHAIRUNNISA BINTE YAHYA

Invoice : DCR-2019-04-18

Date : 04.04.2019

Agreement No : 20581

Payment Term: LOD

DESCRIPTION	AMOUNT
Rental charges for vehicle : <u>SLI 5059D</u> (0219-20908)	\$ 7,560.00
Rental Period from <u>21.02.2019</u> to <u>04.04.2019</u> .	

E. & O. E.	Total \$ <u>7,560.00</u>
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XIAO QIAN
for Dynamic Car Rental

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 20581

Name Khairunnisa Binte Yahya			REG. No. SLJ5059D		MAKE MODEL:								
ADDRESS					DIESEL		PETROL		E	1/4	1/2	3/4	F
			KM IN		DATE & TIME IN 4.4.2019 - 1.11pm								
			KM OUT		DATE & TIME OUT 21.2.2019 - 11am								
			KM DRIVEN		TIME USED								
NAMED DRIVER Abdulhadi Bin Razali													
DRIVING LICENCE NO S8413553D		DATE OF EXPIRY		PLACE OF ISSUE									
PASSPORT NO		DATE OF ISSUE		PLACE OF ISSUE									
ADD NAMED DRIVER													
DRIVING LICENCE NO		DATE OF EXPIRY		PLACE OF ISSUE									
PASSPORT NO		DATE OF ISSUE		PLACE OF ISSUE									
IMPORTANT NOTES:													
This vehicle is licenced to carry 04 passengers only. No refund will be given for vehicle returns early. No refund will be given for period left in vehicle. Hirer is liable to pay first \$4000 under section I & II in any accident plus loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses.													
Vehicle return during office hour only. No Service on Public Holiday and Sunday													
EXCESS:													
*Sec I - Used in S'pore Only :SGD2000 *Sec II - Used in S'pore Only :SGD2000 *Sec I - Used Outside S'pore Only :SGD4000 *Sec II - Used Outside S'pore Only :SGD4000 W/screen Excess in S'pore: SGD100 W/screen Excess Outside S'pore: SGD200													
ADDITIONAL CONDITIONS:													
* Geographical areas: Singapore & West Malaysia. * Driver must be: a) 18 years old and above; b) holding a valid relevant class of driving license.													
* Additional Own Damage Excess of \$S1,000 is applicable for any named/unnamed drivers who: a) age 22 to 23 years old; b) age 55 to 70 years old; c) with driving experience of 1 year to less than 2 years in Singapore on the relevant classes of driving license.													
* Additional All Claims excess of \$S2,000 is applicable for any named/unnamed drivers who: a) is 18 years old to 21 years old and/or b) is 71 years old and above and/or c) with driving experience of less than 1 year on the relevant classes of driving license.													
* Upon returning the replacement vehicle, you must ensure that all expensive and important items to be removed away from this replacement vehicle. We/I will not be responsible for any reporting of such losses.													
* Hirer is liable to pay first \$4000 under section I & II in any accident plus loss of earning while damage vehicle is under repair.													
Hirer is responsible for Additional \$4,000.00 Excess to the THIRD PARTY DAMAGE / INJURY claims.													
HOURS					@S\$								
42 DAYS					@S\$ 180		\$7560						
WEEKS					@S\$								
MONTHS					@S\$								
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)					SUB-TOTAL								
					TOTAL RENTAL								
					DELIVERY FEE								
					COLLECTION FEE								
X					PER DAY		PER WEEK		PER MONTH				
					\$		\$		\$				
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)													
X					PER DAY		PER WEEK		PER MONTH				
					\$		\$		\$				
PREPAYMENT					TOTAL CHARGE								
CHECK					DEPOSIT								
CASH													
RECEIPT NO.					NETT CHARGE								
AMOUNT DUE / REFUND													

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES
OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

X

DYNAMIC CAR RENTAL

x

RENTER'S/DRIVER'S SIGNATURE

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: KHAIRUNNISA BINTE YAHYA

Invoice : DCR-2019-02-42

Date : 21.02.2019

Agreement No : 20336

Payment Term: LOD

DESCRIPTION	AMOUNT
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Rental charges for vehicle : <u>SKJ 1375D</u> (0219-20908)	\$ 5,760.00
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Rental Period from <u>20.01.2019</u>	to	<u>21.02.2019</u>
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E. & O. E.	Total \$ <u>5,760.00</u>
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XIAO QIAN

for Dynamic Car Rental

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 20336

Name Khairunnisa Binte Yahya			REG. No. SKJ1375D		MAKE MODEL:								
ADDRESS					DIESEL		PETROL		E	1/4	1/2	3/4	F
			KM IN		DATE & TIME IN 21.2.2019 - 11am								
			KM OUT		DATE & TIME OUT 20.1.2019 - 9.30am								
			KM DRIVEN		TIME USED								
NAMED DRIVER Abdulhadi Bin Razali													
DRIVING LICENCE NO 58413553D		DATE OF EXPIRY		PLACE OF ISSUE		HOURS		@\$\$					
PASSPORT NO		DATE OF ISSUE		PLACE OF ISSUE		32 DAYS		@\$\$ 180		\$5760			
ADD NAMED DRIVER					WEEKS		@\$\$						
DRIVING LICENCE NO		DATE OF EXPIRY		PLACE OF ISSUE		MONTHS		@\$\$					
PASSPORT NO		DATE OF ISSUE		PLACE OF ISSUE		BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)		SUB-TOTAL					
IMPORTANT NOTES: This vehicle is licenced to carry 04 passengers only. No refund will be given for vehicle returns early. No refund will be given for period left in vehicle. Hirer is liable to pay first \$4000 under section I & II in any accident plus loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses. Vehicle return during office hour only. No Service on Public Holiday and Sunday. EXCESS: *Sec I - Used in S'pore Only :SGD2000 *Sec II - Used in S'pore Only :SGD2000 *Sec I - Used Outside S'pore Only :SGD4000 *Sec II - Used Outside S'pore Only :SGD4000 W/screen Excess-In S'pore: SGD100 W/screen Excess Outside S'pore: SGD200 ADDITIONAL CONDITIONS: * Geographical areas: Singapore & West Malaysia. * Driver must be: a) 18 years old and above; b) holding a valid relevant class of driving license. * Additional Own Damage Excess of S\$1,000 is applicable for any named/unnamed drivers who: a) age 22 to 23 years old; b) age 66 to 70 years old; c) with driving experience of 1 year to less than 2 years in Singapore on the relevant classes of driving license. * Additional All Claims excess of S\$2,000 is applicable for any named/unnamed drivers who: a) is 18 years old to 21 years old and/or b) is 71 years old and above and/or c) with driving experience of less than 1 year on the relevant classes of driving license. * Upon returning the replacement vehicle, you must ensure that all expensive and important items to be removed away from this replacement vehicle. We'll not be responsible for any reporting of such losses. * Hirer is liable to pay first \$4000 under section I & II in any accident plus loss of earning while damage vehicle is under repair. Hirer is responsible for Additional \$4,000.00 Excess to the THIRD PARTY DAMAGE / INJURY claims.			TOTAL RENTAL										
			DELIVERY FEE										
			COLLECTION FEE										
			PER DAY \$		PER WEEK \$		PER MONTH \$						
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)			PER DAY \$		PER WEEK \$		PER MONTH \$						
			PREPAYMENT		TOTAL CHARGE								
			CHECK		DEPOSIT								
			CASH										
RECEIPT NO.		NETT CHARGE											
AMOUNT DUE / REFUND													

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

SIGNED BY THE PARTIES HERETO ON THE DAY OF

X

DYNAMIC CAR RENTAL

X

RENTER'S/DRIVER'S SIGNATURE



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-19-027077

Date of Request: 20/02/2019

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 20/02/2019
Enquiry By Tang Kok Wee, Allan
TP Vehicle No. GBB8513A
Accident Date 20/02/2019

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

Third Party Insurer Enquiry

Our Ref No: GR-19-027077

Date of Request: 20/02/2019

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 20/02/2019
Enquiry By Tang Kok Wee, Allan
TP Vehicle No. GBB8513A
Accident Date 20/02/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GBB8513A	China Taiping Insurance (Singapore) Pte. Ltd.	30/12/2018-29/12/2019	6389 6111

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.

This is a computer generated document and requires no signature.

DATE : 20.01.2019

TO : China Taiping Insurance (Singapore) Pte.Ltd

RE : ACCIDENT INVOLVING VEHICLE NO. SLV 8424A / GBB 8513A

ALONG cte towards aye by braddell exit

ON 20.2.2019

I/We, KHAIRUNNISA BINTI YAHYA
of (NRIC No./ROC No.) S8436025B
of BLK 333A yishun street 31 #14-195 singapore 761333
owner of vehicle no. SLV 8424A in consideration of M/s FASTECH AUTO
PTE LTD repairing my/our vehicle SLV 8424A 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 : _____

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 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 Report	20/02/2019 10:34
Date Of Accident	20/02/2019 06:50
Exact Location Of Accident	CTE TWDS AYE B4 BRADDELL EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV8424A
Insured/Policyholder	
Name Of Registered Owner	KHAIRUNNISA BINTE YAHYA
NRIC No	S8436025B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91050042
Alternative Phone No	OFFICE-91050042

Vehicle Particulars

Manufacturer	TOYOTA
Model	NOAH
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
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	1800141569
Cover Note Number	-

Driver

Name of Driver	ABDULHADI BIN RAZALI
NRIC No	S8413553D
Date Of Birth	22/05/1984
Occupation	INDOOR
Date Of Driving Pass	07/08/2006
Driving Experience	12 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90478414
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 333A YISHUN ST 31 #14-195
Postcode	761333
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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)	4
Passenger 1	NAME: : KHAIRUNNISA BINTE YAHYA GENDER: : FEMALE
Passenger 2	NAME: : ALISHA BINTE ABDULHADI GENDER: : FEMALE
Passenger 3	NAME: : AMELIA BINTE ABDULHADI GENDER: : FEMALE

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?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB8513A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name ABDULHADI BIN RAZALI
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLV8424A
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name KHAIRUNNISA BINTE YAHYA
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLV8424A
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 3

Name ALISHA BINTE ABDULHADI
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLV8424A
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 4

Name AMELIA BINTE ABDULHADI
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLV8424A
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

SKETCH PLAN

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 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. 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 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)**

(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.

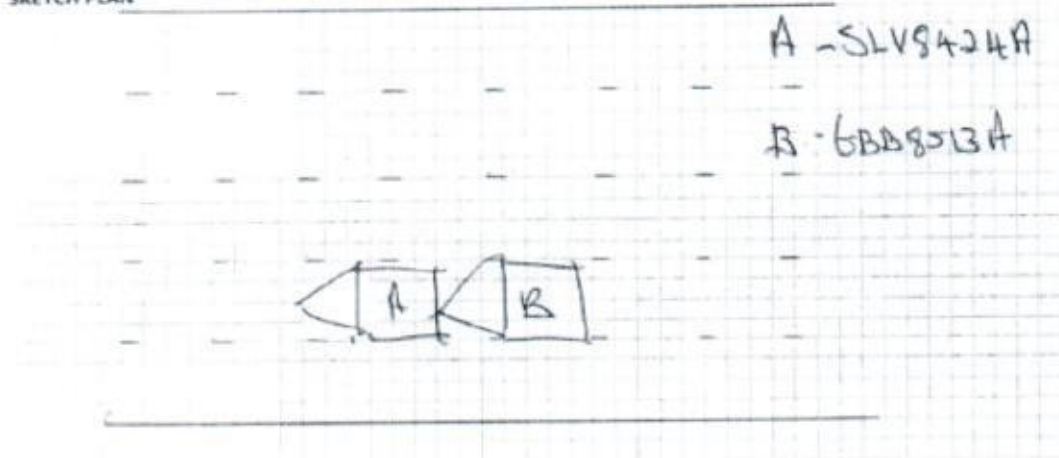
(e) the information so collected under (d) above may be shared / disclosed:

- (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.

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving veh A on the above mentioned date & time. The veh in front slow down & I slow down. A few second later I felt an impact. When I awoke I notice veh B could not stop in time & hit the rear of my veh A.

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:
NRC/FIN No.:



Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20190220/2045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/02/2019 11:41	Vide Report No.:	Station Diary No.: 51
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Informant's Particulars

Name of Informant: ABDULHADI BIN RAZALI			Address: APT BLK 333A YISHUN STREET 31 #14-195 SINGAPORE 761333		
ID Type / ID No.: NRIC NO / S8413553D			Contact No.: Home/Office: Mobile: 90478414		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 34	Date of Birth: 22/05/1984	Type of Informant: Driver		
Race: Malay			Language: English	Institution / School Name:	
Occupation: VIDEO EDITOR			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/02/2019 06:55	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY				
CTE towards City before PIE (Changi) exit and ERP gantry				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB8513A	Van					0
SLV8424A	Car				Seriously Damaged	3

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20190220/2045

CONTINUATION OF REPORT

Driver				
Name	ZHANG XIANJIN		ID No.	S2759295C
Related Vehicle	GBB8513A (Van)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	ABDULHADI BIN RAZALI		ID No.	S8413553D
Related Vehicle	SLV8424A (Car)		Contact No.	90478414
Hospital/Clinic	HEARTLAND FAMILY CLINIC		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	20/02/2019		Date Discharge	NIL
No. of Days granted Medical Leave	03		Degree of Injury	Slight

Brief Details.

On 20/02/2019 at about 0655hrs, I was driving my car (with my family in the car) bearing registration number SLV8424A along CTE towards the direction of City; the traffic was heavy but still moving. While I was before the PIE exit and ERP Gantry, as the traffic was heavy, I had drove slowly and out of a sudden, a vehicle from the rear collided to the rear of my car.

I had immediately stopped my car to check for injuries and damages to the cars. The impact of the collision caused the rear portion of my car to be badly damaged, the rear door were dented and glass panels were shattered. Due to the impact of the collision, I felt pain and uncomfortable on the back of my head, my back and my neck. My family (wife, and two children aged 2 years old and 8 months old) did not complain of any discomfort during that time. Thereafter I exchanged particulars and contact number with the driver of the vehicle (lorry bearing registration number GBB8513A) which collided to my car.

After the accident, I proceeded to consult doctor at Heartland Family Clinic and was given 3 days of MC. I also wish to add that I have installed dashcam (in-car CCTV) in the car and have the footages of the accident. I am lodging this report for my insurance claimant.



**SINGAPORE
POLICE FORCE**



T/20190220/2045

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

3 of 3

Report No. T/20190220/2045

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:
L /
Staff Sgt YAP YHEE HOE

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
20/02/2019 11:41

Officer In Charge Of Case:
TP / AEIT /
SSI 2 JUREMAH BINTE AHMAD
Contact No.: 65472076

Classification Of Case:

Authentication Stamp
NP168



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8413553D**

Name
ABDULHADI BIN RAZALI

Birth Date **22 May 1984**
Issue Date **02 Oct 2008**

001658896F



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8413553D**



Name
ABDULHADI BIN RAZALI

Race
MALAY

Date of birth
22-05-1984

Country of birth
SINGAPORE

Sex
M

S8413553D



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class 3 Motor Cars $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of the driver, and other motor vehicles $\leq 2500\text{kg}$

PASS DATE
07 Aug 2006

Licence No. **S8413553D**

NP 428A

4294747



NRIC No. **S8413553D**



Date of issue
02-10-2008

APT BLK 333A YISHUN STREET 31 #14-195
SINGAPORE 761333

NRIC No. **S8413553D** Date: **24/09/2014**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8436025B



Name



KHAIRUNNISA BINTE YAHYA

خيرونيسا بنت يهيا

Race

MALAY

Date of birth

28-11-1984

Sex

F

Country/Place of birth

SINGAPORE



5509890



NRIC No. S8436025B



Date of issue

11-08-2015

Address

APT BLK 333A YISHUN STREET 31
#14-195
SINGAPORE 761333



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : KHAIRUNNISA BINTE YAHYA
Period of Insurance : 28 Nov 2018 To 27 Nov 2019
Engine No. : 2ZR0B92627
Chassis No. : ZWR800330299

Vehicle No. : SLV8424A
Policy No. : 1800141569
Endorsement No. :
Issued Date : 29 Nov 2018

ABOUT THE COVER

Make/Model : TOYOTA Noah G Hybrid
Engine Capacity/Tonnage : 1,797.00 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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 30 years old and above

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 6 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 - \$500 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Khairunnisa Binte Yahya - \$600 (Own Damage), Abdul Hadi Bin Razali - \$600 (Own Damage)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.
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

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).

0504142000

VENTURE CARS PTE LTD

30 UBI ROAD 4

SINGAPORE 408615

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE
Venture Cars Pte. Ltd.

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC

Owner ID: 6025B

Vehicle Details

Vehicle No.: SLV8424A

Vehicle to be Exported: Yes

Intended Deregistration Date: 20 Feb 2019

Vehicle Make: TOYOTA

Vehicle Model: NOAH HYBRID 7-SEATER 1.8X CVT

Primary Colour: Black

Manufacturing Year: 2018

Engine No.: 2ZR0B92627

Chassis No.: ZWR800330299

Maximum Power Output: 100.0 kW (134 bhp)

Open Market Value: \$34,728.00

Original Registration Date: 28 Nov 2018

First Registration Date: 28 Nov 2018

Transfer Count: 0

Actual ARF Paid: \$30,620.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 27 Nov 2028

PARF Rebate Amount: \$22,965.00

Intended COE Rebate Details

COE Expiry Date: 27 Nov 2028

COE Category: B - Car above 1600cc or 97kW (130bhp)

COE Period(Years): 10

QP Paid: \$31,101.00

COE Rebate Amount: \$24,880.00

Total Rebate Amount: \$47,845.00

The information contained herein is correct as at 20 Feb 2019

OK