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: Tech. Invs (\$	Z)					
TATION OF THE PARTY OF THE PART	Report Format :				1 0000	
Lump Sum / I.B.I: (\$)		\$)	: Weekend (\$	TOTAL	

Not Authorised

Not Authorised

Note Stool

Holy. FASTECH AUTO PTE LTD BLK1 KAKI BUKIT AVE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883 VEHICLE NO:SKU 4273L 665.40 PARTICULAR \$66.50 QTY FRONT BUMPER ner FRONT BUMPER SIDE HOLDER O/S \$45.00 -1 PCS \$105.00 1 PCS FRONT BUMPER CLIPS FRONT BUMPER FOG LAMP COVER O/S \$288.20 🗙 1 SET FRONT BUMPER REINFORCEMENT \$1,650.00 1 PCS \$625.10 1 PCS 1250.20 100/200 HEADLAMP O/S \$199.30 1 PCS FRONT FENDER O/S 1 PCS FRONT FENDER INNERSHIELD O/S \$45.00 FRONT FENDER INNERSHIELD CLIPS \$184.00 X 1 PCS \$625.10 1 SET WIPER WASHER TANK FRONT FENDER INNER PANEL O/S 1 PCS \$650.30 FRONT SHOCK ABSORBER O/S \$766.20 399.50 1 PCS \$250,00 1 PCS 485.20 FRONT KNUCKLE ARM O/S FRONT KNUCKLE ARM BEARING O/S \$545.30 1 PCS \$1,450.00 > 1 PCS FRONT LOWER ARM O/S \$1,899.20 7 1 PCS FRONT DRIVESHAFT O/S \$315.00 7 1 PCS FRONT STEERING RACK \$850.00 (700 (... 1 PCS FRONT GRILLE \$11,425.50 1 PCS FRONT SPORT RIM O/S 1 PCS \$80.00 20 LABOUR CHARGES: 11 \$150.00 X TO CHECK WIRING \$150.00 80 TO REFILL AIRCON GAS TO CONDUCT WHEEL ALIIGMENT \$300.00 /20 TO DISMANTLE & REPLACING FRONT UNDERCARRIAGE \$80.00 30 \$800.00 600 TO SPRAY RUSH PROOFING LABOUR FOR PANEL BEATING & REPLACING PARTS TO \$13,865.50 TO PUTTY & SPRAY PAINTING

LKK Auto Consultants hence notify

- To resurvey before other spray painting
- To display damaged part(s) during resurvey.
- Parts prices are subject to confirmation
- Third party survey is on a "Without Projudice" basis
- No illegal modification(s) is allowed.
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

7-5306.6 47 W.K 6395.28

COMPUTERISED 4 WHEEL ALIGNMENT **HUNTER DSP700**

ompany:

FASTECH AUTO PTE LTD

N:

SKU 4273 L

ite

7.3.19 16:15



Factory Japan 2019.0.1 : Honda : Fit : GK Series : GK3

Front : Left

Actual	Before	Specified Range
0°16'	0°16'	-1°00' 1°00'
5°10'	5°10'	3°55' 5°55'
-0°20'	-0°20'	-0.03, 0.03,
15°22'	15°22'	11°30' 13°30'
15°38'	15°38'	10°30' 14°30'

Camber Caster Toe SAI Included Angle Turning Angle Diff.

Actual	Before	Specified Range
-1°32'	-1°32'	-1°00' 1°00'
5°45'	5°45'	3°55' 5°55'
-0°17'	-0°17'	-0°09' 0°09'
14°59'	14°59'	11°30' 13°30'
13°27'	13°27'	10°30' 14°30'

Front

Cross Camber Cross Caster Cross SAI Total Toe Cross Turn Diff.

Actual	Before	Specified Range
1°47'	1°48'	-1°00' 1°00'
-0°35'	-0°35'	
0°23'	0°23'	
-0°37'	-0°37'	-0°17' 0°17'

Rear: Left

	Actual	Before	Specified Range
Ī	-1°39'	-1°39'	-2°30' -0°30'
Ī	0.06,	0.06,	0°00' 0°17'

Camber Toe

Actual	Before	Specified Range
-1°18'	-1°18'	-2°30' -0°30'
0°14'	0°14'	0°00' 0°17'

Rear: Right

Rear

Cross Camber Total Toe Thrust Angle Axle Offset

	Actual	Before	Specified Range
	-0°21'	-0°21'	
ī	0°21'	0°21'	0°00' 0°34'
Ī	-0°04'	-0°04'	
	0mm	0mm	

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:30.03.2019

AIG Asia Pacific Insurance Pte Ltd Chartis Building 78 Shenton Way #07-16 Singapore 079120

Attn: Motor Claim Department

SKU 4273L AND SLK 4008C ON 07.03.2019 ACCIDENT INVOLVING VEHICLE:

, which was involved in SKU4273L We are the authorized repair workshop for the owner of motor vehicle no: SLK4008C . The vehicle owner has requested and authorized the captioned accident with your insured vehicle no: 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.

		83	
		S	5,959.00
3)	GIA Search Fee	S	2.00
2)	Loss Of Use (4days + 1sun X \$100)	•	2.00
1)	Cost of Repair (inclusive of GST)	S	500.00
	- Calving of GST)	\$	5,457.00

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) GIA Report/GIA Search Result
- e) Insurance Certificate

- b) Vehicle Registration Log Card
- d) I/C & Driving Licence
- f) Letter of Authorisation, etc...

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 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

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Tax Invoice: 20951

Date:

30.03.2019

Vehicle No:

SKU 4273L

Make/Model: HONDA FIT 1.3

Accident Date:

07.03.2019

Claim No:

0319-20951

Reference

Policy No:

Amount

To proceed on lump sum repair

S\$

5,100.00

E. & O. E.

Total: S\$

5,100.00

GST @ 7% : S\$

357.00

Amount Due : S\$

5,457.00

for 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-19-036415

Date of Request:

07/03/2019

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

07/03/2019

Enquiry By

Tang Kok Wee, Allan

Vehicle No.

SLK4008C

Accident Date

07/03/2019

Enquiry Result		D. ded of leasurance	Insurer Tel. No.	
TP Vehicle No.	Insurer	Period of Insurance		
A second	ALC Asia Dacifia Incurance Pte 1 td	16/01/2019-15/01/2020	65-6419-3000	
SLK4008C	AIG Asia Pacific Insurance Pte. Ltd.			

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.

is is a computer generated document and requires no signature.



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-19-036415

Date of Request:

07/03/2019

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

07/03/2019

Enquiry By

Tang Kok Wee, Allan

≥ Vehicle No.

SLK4008C

Accident Date

07/03/2019

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:

[X] GIRO [] Cash [] Cheque

DATE :	7th Mar 2019
то :	Alla Asia Pacific Insurance Pte Ltd
RE :	ACCIDENT INVOLVING VEHICLE NO. SKU 4273L & SLK 4008
	ALONG Nathan Road
	ON_7/3/2019
I/We,/\/	ohd Amin BM Shurift
of (NRIC No	D./ROC No.) So 1 77175B
of BIK 3	06 Tampines st32 #10-04 \$520306
owner of vel	nicle no. SKU 4273 L in consideration of M/s FASTECH AUTO
authorise M/	repairing my/our vehicle SKU 4273L at my/our instruction and hereby s FASTECH AUTO PTE LTD to demand claim settlement whatever
	ed/payable by the Insurance Company and/or third party or to commence legal, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,
	neir appointing solicitor to act for me/us in respect of the said accident/claim and
	and/or settled shall belong to them absolutely.
	agree and undertake to indemnify them against the above-mentioned claim cost
which may a	risen therewith.
Signature of	Owner:
Name of Ow	/ner :



RELEASE VOUCHER (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

"Wer. Fastech Auto Pte Ltd	I THE WORKSDOO') haraby confirms that
have reached an agreement with the appoint	nted surveyor of AIG Asia Pacific Insurance Pte. Ltd.
	("name of surveyor") with respect to the amount of
(repair costs), S\$	Class of use/sental) se
for vehicle file. Shumble that was	damaged pursuant to the
on(date) along N / HAAA K	OG of
vehicle no/s_SLK_HUU8C	
This is pursuant to the inspection conducted on	
We/I confirm that we/I are/arn authorized by the own	ner Mohd Amin BM sHariff (third party claimant)
of vertice no. 3 kg 1 a 13 L to make the clair	as set out in the above paragraph and well be
authority to settle the matter on his/her behalf in a n	namer that well deem fit. Well enclose herein the letter of
authority given by "the third party claimant".	and the state of the series of
We/I further confirm that we/I will indemnify AIG Asi	a Pacific Insurance Pte. Ltd for all damages, loss and/or
expense that trey will of have already incurred in the	event that "the third name claimant" after the
agreement louges a runner claim against the former	for any lose and sympasses - #
of the accident.	te damage to <u>SKU4J73</u> L (vehicle no.) as a result
of the active it	
We/i confirm that the accomment reset of at	
claiment oursuent to the accident and that first are to	full and final settlement of any claim of "the third party
admission of liability basis.	settlement is reached on a without prejudice and without
This agreement is subject to the application of Sin	gapore law and the Singapore Courts have exclusive
Jurisdication over any dispute arising out of the same.	seputa inv and the singapore Courts have exclusive
THE CONTROL SECTION OF THE CONTROL O	
Dated thisday of	(month) 20(year)
	AUTO
· · · · · · · · · · · · · · · · · · ·	(C)
	GST Reg No.
Signed by AIG appointed surveyor	* 0/4
- 9 1. u. a. ahhom ded adi Ashot.	Chopped & Stoned by "the workshop!

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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.
- 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.
- of this report at the centre and to copies of the report being made available

	ACCIDENT STATEMENT
Date Of Report	07/03/2019 15:03
Date Of Accident	07/03/2019 10:00
Exact Location Of Accident	ALONG NATHAN ROAD
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKU4273L
nsured/Policyholder	
Name Of Registered Owner	MOHD AMIN B M SHARIFF
NRIC No	S0177175B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90225722
Alternative Phone No	OTHERS-90225722
Vehicle Particulars	
Manufacturer	HONDA
Model	FIT 1.3G F PACKAGE CVT ABS D/AIRBAG 2WD
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097696202-01

Driver

Policy Number Cover Note Number

MOHD AMIN B M SHARIFF Name of Driver

S0177175B NRIC No 11/12/1953 Date Of Birth OUTDOOR Occupation 12/07/1978 Date Of Driving Pass

40 YEARS AND 7 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-90225722 Mobile Number

Fax Number

OTHERS-90225722 Contact Number

NOEMAIL **EMail Address**

Address

BLK 306 #10-04 TAMPINES STREET 32

Postcode

520306

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

SIDE SWIPE

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

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)

2

Passenger 1

NAME:

: GRAB PASSENGER

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

REFER TO BELOW STATEMENT/SKETCH PLANI

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

SLK4008C

Vehicle Make/Model/Colour

SUBARU FORESTER 2.0I-L CVT AWD SR

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode Insurance Company Name AIG ASIA PACIFIC INSURANCE PTE, LTD.

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 11

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 Authorised Driver.
- 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.
- 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.
- 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.
- 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:
 - 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:
 - 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.

1 11/2

Policyholder's Signature Date & Time: 1)h

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

- 7 MAR 201

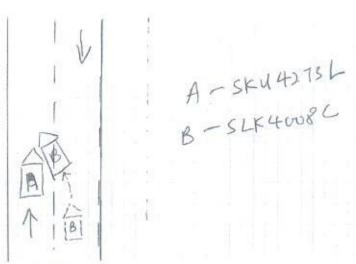
1DAC KAKI BUKIT(VAC) 23 KAKI BUKIT AVE 4

Singapore 415933

Reporting Centre Personeel 6 34464699
Name: Fax: 67492305

NRIC/FIN No.Email: vackb@singnet.com.sg

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on	fhe	٤	torte	d da	te a	nd ti	me,	1 was	driving my
Vehic	le	do	my .	Nath	an R	load.	There	were to	er take my
trave	lling.	, vel	icle	B. tri	welling	in d	Herent	and ou	ertake my
Cer	cun	d	hif	en	my	RIT	side	front	potition
			XII						
							and the second of the second		
					97.5				
8									

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:

- 7 MAR 2019

1DAC KAKI BUKIT(VAC) 23 KAKI BUKIT AVE 4

23 KAKI BUKIT AVE 4
Reporting Centiling Responsed Statute

Name: Tel: 67416697 NRIC/FIN No.: Fax: 67492305

Email: vackb@singnet.com.sg





T/20190308/2131

1 of 4

Report No. T/20190308/2131

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

REPORT	OF A T	RAFFIC	ACCIDENT

Date/Time Report Made: 08/03/2019 16:09			Vide Report No.:	+ +	Station Diary No.: 95
Informa	nt's Particu	ulars	No. of the last		
	Informant: AMIN BIN M		Address: APT BLK 306 TAMPINES 520306	STREE	T 32 #10-04 SINGAPORE
	/ ID No.: D./ S017717	75B	Contact No.: Home/Office:	N	lobile: 90225722
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age:	Date of Birth: 11/12/1953	Type of Informant: Driver		(a
Race: Malay			Language: English	In	stitution / School Name:
Occupation: PRIVATE HIRE DRIVER			Driving Licence Information Class: 2B,3,4,5		ate of Expiry:

seneral imon	nation of the Accid		T	- C1 (C
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/03/2019 09:55	Type of Location Straight Road
Location: Along Road 1 NATHAN ROA	AD @Nathan building			
Weather: Clear		Road Surface: Dry		Road Speed Limit: 0 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled	# TEST (# 1999 1999	raffic Volume: ight
Type of Collisi Between Movi	on: ng Vehicles - Head	To Side	a	inyone conveyed by mbulance:

Details of V	ehicle Invo	lved	A CHANGE			2000/09/50 12:41
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passe ger
SKU4273L	Car	HONDA	FIT	Silver	Slightly Damaged	1
SLK4008C	Car	SUBARU		Silver	Slightly Damaged	1

Details of Vo	ehicle Insurance			pre expression
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKU4273L	NTUC Income Insurance Co-Operative Limited	5097696202-01	27/01/2019	26/01/2020





Report No. T/20190308/2131

2 of 4

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

Details of Person	n Involved	North Control		241-15	
Any Pedestrian In	volved: No		1 1 1	0	ing: NA
No. of Pedestrian	s Injured: NIL	Use of Peo	estrian	Cross	ang. IVA
Driver		The street of the street of	ID M	-	S0177175B
Name	MOHD AMIN BIN M SHARIFF	ID No.		S0177175B	
Related Vehicle	SKU4273L (Car)	# # ¥	Conta	ct No.	90225722
Hospital/Clinic	TAMPINES CLINIC AND SURGE LTD	RY PTE	Class Driving Licence Expiry	e &	Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	07/03/2019	Date Disc			
No of Days gran	ted Medical Leave 03	Degree of	Injury	Sligh	t
Driver		AND SHAPE			
Name	UNKNOWN		ID No.		NIL
Related Vehicle	SLK4008C (Car)	1 2	Conta	ct No.	96525081
Hospital/Clinic	NIL		Class Drivin Licent Expin	g .	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc		NIL	<u> </u>
No of Dave gran	ted Medical Leave NIL	Degree of	f Injury	NIL	

Brief Details.

On 07/02/2019 at about 0955hrs, I was driving my private hire car Reg no: SKU4237L along Nathan Road towards River Valley. I was driving on the left most lane. When suddenly, a silver in colour Subaru travelling on the lane to my right overtake my car and enter my lane abruptly hitting the front right side of my car. After the collision, both the driver and I stopped our cars. I checked if my passenger require any medical attention. When she told me that she is not injured, I went out to talk to the driver.

The driver is a male Caucasian driving a silver in colour Subaru Reg no: SLK4008C. He also informed me that both he and his passenger are not injured and does not require any ambulance. We took photos of both cars and exchange contact number with him however he does not provide me his name and other details of himself. I then proceed to lodge a reported the accident to the company workshop. On the same day at about 1400hrs, I starts to feel some pain on the back of my waist. I then went to the clinic and was given 3 days medical leave.

On 08/03/2019 at about 1200hrs, I went to submit my medical leave and was informed by the insurance company to lodge a traffic police accident report.





Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682

Report No. T/20190308/2131

Tel No: 1800-5871999 CONTINUATION

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:	Signature Of Informant;
Sr Staff Sgt MUHAMAD FAISAL BIN MOHD SALEH	Nyv
Signature Of Interpreter: Not applicable	Date/Time: 08/03/2019 16:09
Officer In Charge Of Case:	Classification Of Case:
SSI 2 YEO GEAK ENG CEC LIA SINGASOP SINGASOP POLICE FUNCE	
	7
Authentication Stamp	





3 of 4

Report No. T/20190308/2131

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT



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)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5097696202-01

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle Chassis Number

: SKU4273L

2. Name of Policyholder

: GK31121352

: MOHD AMIN B M SHARIFF

3. Effective Date of Insurance

: 27 Jan 2019

4. Expiry Date of Insurance

: 26 Jan 2020

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

EXCESS (SECTION 1) EXCESS (SECTION 2) WINDSCREEN EXCESS

: \$\$2,000 : \$\$1,500 : \$\$100

ADDITIONAL EXCESS

: N/A : PLEASE REFER OVERLEAF

UNNAMED DRIVER EXCESS REPAIR AT OWNER'S PREFERRED WORKSHOP INSURE WITH COE

: NO : YES YES

NCD PROTECTION TRANSPORT ALLOWANCE EXCESS WAIVER

: NO : NO

: MOHD AMIN BIN M SHARIFF

PRIMARY DRIVER NAMED DRIVER (1) NAMED DRIVER (2)

: MOHAMMAD NASRUDDIN BIN SUANDY : NUR HANIDAH BINTE MOHD AMIN

HIRE PURCHASE COMPANY

: BENEFIT AUTO ENTERPRISE PTE LTD

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

: BENEFIT AUTO INSURANCE AGENCY (00000573333)

Date of Issue

: 21 Jan 2019 11:31 hrs

Reprint

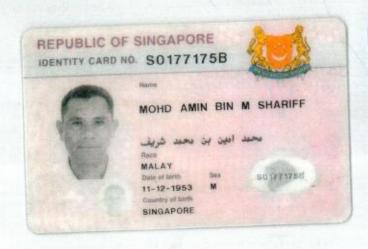
: 21 Jan 2019 11:31 hrs

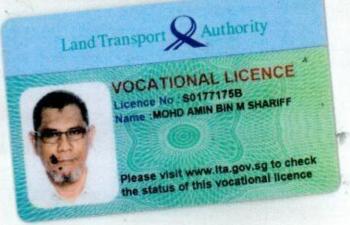
For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive





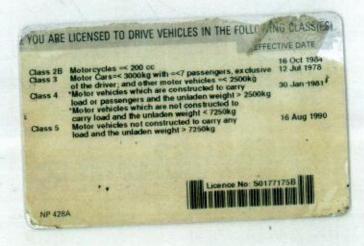


This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

turn so riv.	10 Sin Ming Division Pa	Issue Date
Type	Description	07/07/2010
12	TAXI VL	07/07/2010
03 04	BUS ATTENDANT	07/07/2010







> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	7175B
Vehicle No.:	SKU4273L
Vehicle to be Exported:	Yes
Intended Deregistration Date:	07 Mar 2019
Vehicle Make:	HONDA
Vehicle Model:	FIT 1.3G F PACKAGE CVT ABS D/AIRBAG 2WD
Primary Colour:	Grey
Manufacturing Year:	2015
Engine No.:	L13B1221352
Chassis No.:	GK31121352
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$13,125.00
Original Registration Date:	27 Jul 2015
First Registration Date:	27 Jul 2015
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$8,125.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Jul 2025
PARF Rebate Amount: Intended COE Rebate Details	\$6,093.00
COE Expiry Date:	26 Jul 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$61,000.00
COE Rebate Amount:	\$38,944.00
Total Rebate Amount:	\$45,037.00

The information contained herein is correct as at 07 Mar 2019

OK





T/20190308/2131

1 of 4

Report No. T/20190308/2131

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

REPORT C	F A TRAFFIC	ACCIDENT	10 10 10 10 10	-5		
Date/Time Report Made: 08/03/2019 16:09			Vide Report No.:		Station Diary No.: 95	
Informa	nt's Particu	lars				
Name of	Informant: MIN BIN M.	14.1	Address: APT BLK 306 TAMPINES STI 520306	REET 32 #10	-04 SINGAPORE	
ID Type	/ ID No.: D / S017717	5B	Contact No.: Home/Office: Mobile: 90225722			
National		The state of the s	Email:	e e v		
Sex: Male	Age:	Date of Birth: 11/12/1953	Type of Informant: Driver			
Race: Malay			Language: English	Institution / School Name:		
Occupation: PRIVATE HIRE DRIVER			Driving Licence Information: Class: 2B,3,4,5	Date of Ex	piry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/03/2019 09:55	Type of Location Straight Road	
Location: Along Road 1 NATHAN ROAL	S. Salar				
In front of Lott@ Weather: Clear	Nathan building	Road Surface: Dry		Road Speed Limit: 60 Km/h	
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Málume: Light	
Type of Collisio	n: g Vehicles - Head To	Side		Anyone conveyed by ambulance:	

Details of V	REPORT OF THE PARTY OF THE PART	Make	Model	Color	Condition	No of Passenger
Vehicle No. SKU4273L	Car	HONDA	FIT	Silver	Slightly	1
SLK4008C	Car	SUBARU		Silver	Slightly	1

Details of V	ehicle Insurance		ES A COURSE DE SE	T STORY OF THE
		Insurance No	Effective	Expiry Date
A PARTITION A STATE OF	1 On Operative	5097696202-01	27/01/2019	26/01/2020





2 of 4

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Details of Person	1 Involved		-			
Any Pedestrian In	Use of Pedestrian Crossing: NA					
No. of Pedestrian	s Injured: NIL	Use of Fed	Collidia	OTOGO		
Driver			ID No.		S0177175B	
Name	MOHD AMIN BIN M SHARIFF					
Related Vehicle	SKU4273L (Car)		Contact No.		90225722	
Hospital/Clinic	TAMPINES CLINIC AND SURGERY PTE LTD		Class of Driving Licence & Expiry Date		Class: 2B,3,4,5 Date of Expiry: NIL	
	07/03/2019	2/7/11/4		/2019		
Date Treatment	ted Medical Leave 03	Degree of	Injury	Slight	THE RESERVE THE PERSON NAMED IN COLUMN	
	led Mcdiod.			地區的	NEWSCHOOL STATE	
Driver Name	UNKNOWN	tii	ID No.		NIL	
Related Vehicle	SLK4008C (Car)		Contact No.		96525081	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment No. of Days gran	NIL NIL NIL NIL	Date Disc		NIL		

On 07/02/2019 at about 0955hrs, I was driving my private hire car Reg no: SKU4237L along Nathan Road towards River Valley. I was driving on the left most lane. When suddenly, a silver in colour Subaru travelling on the lane to my right overtake my car and enter my lane abruptly hitting the front right side of my car. After the collision, both the driver and I stopped our cars. I checked if my passenger require any medical attention. When she told me that she is not injured, I went out to talk to the driver.

The driver is a male Caucasian driving a silver in colour Subaru Reg no: SLK4008C. He also informed me that both he and his passenger are not injured and does not require any ambulance. We took photos of both cars and exchange contact number with him however he does not provide me his name and other details of himself. I then proceed to lodge a reported the accident to the company workshop. On the same. day at about 1400hrs, I starts to feel some pain on the back of my waist. I then went to the clinic and was given 3 days medical leave.

On 08/03/2019 at about 1200hrs, I went to submit my medical leave and was informed by the insurance company to lodge a traffic police accident report.





Report No. T/20190308/2131

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

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. nature Of Informant:

	/
Signature Of Officer Recording The Report:	Signature Of Infor
G / Sr Staff Sgt MUHAMAD FAISAL BIN MOHD	\sim
SALEH	
Signature Of Interpreter: Not applicable	Date/Time: 08/03/2019 16:09

Officer In Charge Of Case:

TP / AEIT / SSI ZYEO GEAK ENG CEC LIA



SINGATURE

Classification Of Case:

Authentication Stamp NP168





3 of 4

Report No. T/20190308/2131

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

CONTINUATION OF REPORT