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: 31.05.2019

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

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES SDA 5595P / SMA 6976K ON 25.05.2019

We are the authorized repair workshop for the owner of motor vehicle no: SDA 5595P , which was involved in the captioned accident with your insured vehicle no: SMA 6976K . 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.

		5	4,861.45
3)	LTA Search Fee	S	7.45
2)	Loss of Rental	\$	360.00
1)	Cost of Repair (inclusive of GST)	S	4,494.00

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) LTA Search Result
- e) GIA Report
- g) I/C & Driving License
- i) Vehicle Registration Log Card

- b) Car Rental Invoice / Agreement
- d) Letter of Authorisation, etc ...
- f) Police Report
- h) 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@fastvchauto.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

Tax Invoice: 21102

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Date

:31.05.2019

Vehicle No

:SDA 5595P

Make/Model : TOYOTA CAMRY

Chassis/Eng# :

Accident Date : 25.05.2019

Claim No

Reference

: 0519 -21102

Policy No

Amount

To proceed on lump sum repair

S\$

4200.00

E. & O. E.

Total: S\$

4200.00

GST @ 7% : S\$

294.00

Amount Due : SS

4494.00

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: MAK KUM CHEW

Invoice

: DCR-2019-05-13

Date : 29.05.2019

Agreement No: 20664

Payment Term:: LOD

DESC	RI	PT	ION	
Acres Acres 19 Contract			A-1-71-7	

AMOUNT

Rental charges for vehicle: SJR 7314K (0519-21102)

360.00

Rental Period from 27.05.2019

to

29.05.2019

E. & O. E.

Total \$ 360.00

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. 20664

Mak Ku	Mak Kum chew			MAKE	MAKE MODEL		
ADDRESS			STRATE	DIESE		E 1/4 1/2 3/4	
			HOM IN		29.05.20	19 Q 4.5 2PM	
			KM			@ 10-38am	
			KM	-	TIME USED	C 10-300m	
			DRIVEN				
NAMED DRIVER							
51585994F			HOURS		@B\$		
PASSPORT NO	DATE OF ISSUE	PLACE OF IBSUE	2	DAYS	ess 180	\$360	
DD NAMED DRIVER				WEEKS	988		
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE		ONTHS	ess		
				CHING	6.95		
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	AGREES TO PAY A		SUB-TOTAL	\$360	
IMPORTANT NOTES:			FOR COLLISION DA WAIVER (C.D.W.)	MAGES			
This service is liberared to carry 94.			CONTRACT (CONTRACT)		TOTAL RENTAL		
No refund will be given für vertiche i No refund will be given für geenoch le dens in Sales in oppulier für Vic	ett in vertecie.	tics loss of earnings white damaged wellcole			DELIVERY FEE		
of order repair. Hirer is fieble to pay all parlong fee		A CONTRACTOR OF THE CONTRACTOR					
Addition return maring office from on			COLLECTION FEE				
No Service on Public Holiday and I	Synday		PER DAY PER WEEK PER MONTH				
EXCESS: Sec 1 - Used in Shore Only (5/30)							
"Sec I - Used in S'pore Only :SGD "Sec I - Used Outside S'pine Only	5004000						
"Sec II - Used Outside 5 pore Only Witnessen Excess in 5 pore: 5001	80		BY INITIALLING, R AGREES TO PAY AL				
Wiscreen Excess Duteldo S'pore: I ADDITIONAL CONDITIONS:	95,822,000		FOR PERSONAL ACCIDENT INSURANCE (P.A.L.)				
* Geographical ereas: Erryspers A * Driver must be	L West Malaysta.		INDEPENDED (F. SEL)				
in) 18 years old and above; to helding a valid resevent state in	d decima bisman		V				
Additional Own Damage Excess		named towns when	PER DAY PER V	VEEK.	PER MONTH		
a) age 22 to 23 years old. b) age 60 to 70 years slid.	N 001/00/10 HANDON SC 30/	The second secon	\$ \$	(ERIGINE)	\$	1 4 1	
	year to less than 2 years in Sir	guotre on the relevant classes of driving	The second second second		NAME OF TAXABLE		
Additional All Claims excess of 5	\$2,000 is applicable for any ner	ted Universal Street who	PREPAYMENT		YOTAL CHARGE		
 a) is 38 years old to 21 years and b) is 71 years old and above and 	lbr.		CHECK		DEPOSIT		
s) with driving experience of less			CASH				
removed away from this replacer	ment vehicle. We'll will not be re-	all expensive and important items to be spensible for any reporting of such trieses	RECEIPT NO		NETT CHARGE		
Hires to felded to pay first \$4000 or is under requir	nter section I & II in any acciden	ratio less of earning when demage remote	(deposite) 1964		PROLE GENERAL		
Hirer is responsible for Addiso	mai 54,000.00 Excess		AMOUNT DUE / RE	EUMP			
to the THIRD PARTY DAMAG			SAMPAGE NACTURE	Court of			
HAVE READ THE TERMS							
OF THIS RENTAL AGREEM	ENT AND AGREE THERE	OF					
SIGNED BY THE PARTIES H	ERETO ON THE		DAY OF				
				0	At .		
/	M		/				
(/			/	M			
X			X	11			
DYN	AMIC CAR RENTAL		REN	TER'S/	DRIVER'S SIGN	IATURE	

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

27 May 2019 / 10:29:21

Receipt Date/Time: 27 May 2019 / 10:29:21

Tax Invoice/Receipt

Receipt No.: ITNET-00000-190527-000656

Previous Receipt No.:

Previous Receipt No.				
S/N Item Description/ Business Transaction Ref No.	erence	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SMA As at 25 May 2019/13:00:00 Insurance Co: AIG ASIA PACIFIC				
1 Insurance Enquiry - SMA6976K Enquiry Fee 20190527102751669260		7.00	0,49	7.49
	Sub-Total	7,00	0,49	7.49
	Total Before Rounding	7,00	0,49	7,49
	Rounding Difference			0,04
	Total Amount Payable			7.45
	Paid By			
	20190527102759809	Direct Debit: eNi (Internet Banking		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF



*** This Discharge Venther applies only to the character does for his property demane and will not affect his personal impries claim analise minimum lemma claim in a hour does. Further, the sectement terms became should not be send at its Evidence to prejudice to the claimant's personal injuries claim and/or other uniquated losses claim arising of the subject matter in this action.

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

"Well, Fastech Auto Pte Ltd	("the workshop") hereby confirm that we/
have reached an agreement with the appointe	d surveyor of AIG Asia Pacific Insurance Pte. Ltd
	'name of surveyor") with respect to the amount claimed for (loss of use/rental) S\$ (search fees
for vehicle no. 50A 5545P that was d	amaged pursuant to the accident which occurred
on 16.05.2019(date) along lorong chuan	(location) involving
vehicle no/s SMA 6976 K	
This is pursuant to the inspection conducted on	(date) at "the workshop".
We/I confirm that we/I are/am authorized by the own	er Mak kum them ("third party claimant")
of vehicle no. 50 A 5595P to make the claim	as set out in the above paragraph and we/l have full
authority to settle the matter on his/her behalf in a m	anner that we/I deam fit. We/I enclose herein the letter of
authority given by "the third party claimant".	
We/I further confirm that we/I will indemnify AIG Asia	a Pacific Insurance Pte. Ltd for all damages, loss and/or
expense that they will or have already incurred in the	event that "the third party claimant" after the above said
agreement lodges a further claim against the former	for any loss and expenses suffered pertaining to costs of
repairs and/or rental and/or loss of use pursuant to the accident.	e damage to 6DA 5595P (vehicle no.) as a result
We/I confirm that the agreement reached above is in	full and final settlement of any claim of "the third party
claimant" pursuant to the accident and that further this	settlement is reached on a without prejudice and without
admission of liability basis.	and without
This agreement is subject to the application of Sir	gapore law and the Singapore Courts have exclusive
jurisdication over any dispute arising out of the same.	gaporo ida ano die omgapora courts nave exclusive
Dated thisday of _	(month) 20(year)
	AND AND AND
Signed by AIG appointed surveyor	Chopped & Signed by "the workshop"

DATE	: 27.05.2019
ТО	: AI& Asia Pacific Insurance Pte Ltd
RE	: ACCIDENT INVOLVING VEHICLE NO. SDA 5595P /SMA 6976K
	ALONG lorong chuan ON 25.05.2019
● I/We,	Mak Kum Chen
of (NRI	C No./ROC No.) 5158599#F
owner of PTE LT authoris amount proceed etc. and	of vehicle no
	rther agree and undertake to indemnify them against the above-mentioned claim cost hay arisen therewith.
	re of Owner : 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 willul 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.
- 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

No. of Concession, Name of Street, or other	ACCIDENT STATEMENT	
Date Of Report	27/05/2019 12:09	
Date Of Accident	25/05/2019 13:00	
Exact Location Of Accident	LORONG CHUAN	
Country/State of Loss	SINGAPORE	
	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	SDA5595P	
Insured/Policyholder		
Name Of Registered Owner	MAK KUM CHEW	
NRIC No	S1585994F	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-91015595	
Alternative Phone No	OTHERS-91015595	
Vehicle Particulars		
Manufacturer	ТОУОТА	
Model	CAMRY 2.0 AUTO ABS AIRBAG	
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 LT	D
Type Of Coverage	COMPREHENSIVE	

Fleet Policy NO

Policy Number 5095698815-01

Cover Note Number

Driver

Name of Driver MAK KUM CHEW NRIC No S1585994F Date Of Birth 03/04/1963 Occupation INDOOR Date Of Driving Pass 13/03/1985

Driving Experience 34 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91015595

Fax Number

Contact Number OTHERS-91015595

EMail Address NOEMAIL Address 28 BUKIT BATOK EAST AVENUE 2 #24-21 HILLVIEW REGENCY

Postcode 659921

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 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

Was any body injured in the Accident? YES

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.

Number of Passengers (Including Driver)

Passenger 1

NAME: GRAB PASSENGER

GENDER: FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

NO

NO

NO:

2

Police Station Address ROAD: 21 BUKIT BATOK EAST AVE 4, POSTCODE: 659840, COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 1800-6659999 - FAX NO: 66655793

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

AS PER POLICE REPORT No.T/20190526/2027;

Attachment(s)

ramarinantoj

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMA6976K

Vehicle Make/Model/Colour MAZDA3 SEDAN 1.5 AT LED EU6

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

No. Of Passenger (Including Driver)	
	DETAILS OF INJURED PERSON 1
Name	MAK KUM CHEW
Approximate Age	56
Injuries Sustain	
Injured person in which vehicle?	SDA5595P
Were seat belts worm?	YES
Was this injured conveyed to hospital by ambulance?	
Address	28 BUKIT BATOK EAST AVENUE 2 #24-21 HILLVIEW REGENCY
Postcode	659921

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 reisropresentation or withholding of material facts may allow insurance companies to gaputilate 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:

- (ii) My insurer, my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal deta/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 whicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively informed to as the "Insurers"), the insurers' lawyers/lew firms, the incorary Authority of Singapore and any relevant government agreesy/authority (seet as the police), for the purpose(s) of
 - processing, handling anti/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 rise, 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 eliministering, 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' invyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal information for one or more of the above Purposes; and
- (r) my Fersonal 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.
- id) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and reanagement to present and all feature claims.
- (e) the information so coffected under (d) above may be shared / disclosed:
 - (ii) so all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agrecies as reasonably required for the purposes stated, or
 - (iii) for complying with requirements under any regulations, laws or court orders.

2 7 MAY 2019

Policyholder's Signature Date & Time:

Driver's Signature U (If driver is not the policyholder)

Dute & Time:

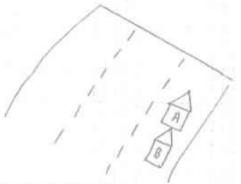
1DAC KAKI BUKIT (VAC) 23 KAKI BUKIT AVE 4

Reporting Centre Personnel's Signature Name: HEIC/FIN ton: Fax: 6740/2305

Email: vuckb@ningnet.com.ag

protection in the form, di

SKETCH PLAN



the book with a second						
DESCRIBE	CIRCU	IMSTANI	TES DE	THE A	CCIPA	DATE:

Refer	to the	Police	Report	No	T/20190	26 / 202	Ţ	

DECLARATION

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

2 7 MAY 2019

Policybolder Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Timer

IDAC KAKI BUKIT(VAC) 23 KAKI BUKIT AVE 4

Reporting Centre Taxon 45, 3 provine
Name: Tel: 67416697
HRIC/TIN No.: Fax: 67492305
Email: vackb@singnet.com.sg





Report No. T/20190526/2027

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE

659840

Tel No: 1800-6659999

REPORT OF	A	TRAFFIC	ACCIDENT
-----------	---	---------	----------

Date/Time Report Made: 26/05/2019 11:48			Vide Report No.:	Station Diary No.: 70	
Informa	nt's Partic	ulars			
	Informant: IM CHEW		Address: 28 BUKIT BATOK EAS 659921	ST AVENUE 2 #24-21 SINGAPORE	
ID Type / ID No.: NRIC NO / S1585994F			Contact No.: Home/Office: Mobile: 91015595		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Age: Date of Birth: Male 56 03/04/1963		Type of Informant: Driver			
Race: Chinese		Language: Institution / School Nat English			
Occupation: Grab Driver		Driving Licence Information: Class: 3 Date of Expiry:			

General Infor	mation of the Acci	dent			
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/05/2019 1		Type of Location: Straight Road
Location: Along Road 1 LORONG CH					
Weather: Clear		Road Surface Dry		Road	d Speed Limit:
Traffic Flow: One Way		Traffic Control Traffic Light -		Traff Light	fic Volume:
Type of Collis Between Mov	ion: ring Vehicles - Head	To Rear		1000	one conveyed by ulance:

Details of Vehicle Involved								
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger		
SDA5595P	Car	TOYOTA	CAMRY 2.0 AUTO ABS AIRBAG	Beige	Slightly Damaged	1		
SMA6976K	Car				Slightly Damaged	3		

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





Report No. T/20190526/2027

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE 659840

Tel No: 1800-6659999

CONTINUATION OF REPORT

Details of V	ehicle Insurance		The second second second	Description of the latest of t
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDA5595P	NTUC Income Insurance Co-Operative	5095698815-01	24/06/2018	23/06/2019

Details of Perso	n Involved					
Any Pedestrian Ir	rvolved: No					
No. of Pedestrian	s Injured: NIL		Use of Pec	destrian	Cross	ing: NA
Driver			31 31 11			
Name	MAK KUM CHEW			ID No.		S1585994F
Related Vehicle	SDA5595P (Car)				ct No.	91015595
Hospital/Clinic	OneCare Bukit Batol		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	26/05/2019	Date Disc	harge	26/05	5/2019	
No. of Days gran	ted Medical Leave	03	Degree of	Injury	Slight	
Driver						
Name	Noel Jane Alexandra	Noel Jane Alexandra				S7788168I
Related Vehicle	SMA6976K (Car)		Contact No.		91507067	
Hospital/Clinic	NIL			Class Drivin Licens Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 25/5/2019 at around 1300hrs, the weather was sunny, road was dry, the traffic light was working and traffic was light. There was no ambulance or police at the scene. I was driving my own beige Toyota Camry (SDA5595P) with 1 female passenger as I am working as a Grab Driver, along the straight road on Lorong Chuan to turn left into Braddell Road. There was a traffic light there which turned red and I came to a complete stop for around 2 minutes. Subsequently, I felt a hit at the rear of my car. I went out to check and saw that the black Mazda 3 (SMA6976K) was reversing slightly after hitting the back of my car.

The driver informed me that SMA6976K was a she leased the car and to claim any damages from insurance. There were 1 other adult and 2 children in her car. Her car SMA6976K had collided into the rear of my car SDA5595P, resulting in cracks and scratches on the rear bumper of my car, and cracks on her license plate and scratches on her front car bumper.

My car SDA5595P has a in-car camera at the front. For SMA6976K, she has an in-car camera at the front. I am able to provide the footages to Traffic Police should they require. I am not sure if the other





Report No. T/20190526/2027

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE 659840

Tel No: 1800-6659999

CONTINUATION OF REPORT

parties are injured butmy passenger mentioned she is feeling fine. I felt shoulder and neck pains subsequently and went for check-up at OneCare Bukit Batok Clinic on 26/5/2019 and was given 3 days medical certificate.





Report No. T/20190526/2027

Police Station Of Origin: Bukit Batok N.P.C 21 Bukit Batok East Avenue 4 SINGAPORE 659840

Tel No: 1800-6659999

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.

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: J / Sgt 2 GARRISON CHUA KESHENG	Signature Of Informant
Signature Of Interpreter: Not applicable	Date/Time: 26/05/2019 11:48
Officer In Charge Of Case: TP / AEIT /	Classification Of Case:
Sr Staff Sgt MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	SN 114
Authentication Stamp NP168	otice Force





VOCATIONAL LICENCE Licence No. 81585994F Name MAK KUM CHEW

Card Issue Date: 19/93/2018

Please visit www.lta.gov.sg to check the status of this vocational licence

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

Type

Description

Insti Date

PRIVATE HIRE CAR VL

19/03/2018















Certificate of Insurance

						COMPENSATION)		189)
MOTOR	VEHICLES	(THIRD	PARTY	RISKS	AND	COMPENSATION)	RULES, 1960	
ROAD TE	RANSPORT	ACT, 1	987 (M	ALAYS	(As			

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

Index mark and Registration Number of Vehicle : SDAS595P

Chassis Number : MR0538K4107030941

Name of Policyholder : MAK KUM CHEW

3. Effective Date of Insurance : 24 Jun 2018 4. Expiry Date of Insurance : 23 Jun 2019

5. 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 headings.

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO
INSURE WITH COE : YES
NCD PROTECTION : NO
TRANSPORT ALLOWANCE : NO
EXCESS WAIVER : NO

PRIMARY DRIVER : MAK KUM CHEW

 NAMED DRIVER (1)
 : N/A

 NAMED DRIVER (2)
 : N/A

 HIRE PURCHASE COMPANY
 : N/A

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 : AUTOSHIELD PTE. LTD. (00000573469)

Date of Issue : 08 Jun 2018 15:52 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	5994F	
Vehicle No.:	SDA5595P	
/ehicle to be Exported:	Yes	
ntended Deregistration Date:	27 May 2019	
/ehicle Make:	TOYOTA	
Vehicle Model:	CAMRY 2.0 AUTO ABS AIRBAG	
Primary Colour:	Beige	
Manufacturing Year:	2008	
Engine No.:	1AZE105774	
Chassis No.:	MR053BK4107030941	
Maximum Power Output:	108.0 kW (144 bhp)	
Open Market Value:	\$26,497.00	
Original Registration Date:	24 Jun 2008	
irst Registration Date:	24 Jun 2008	
Transfer Count:	1	
Actual ARF Paid: Intended PARF Rebate Details	\$26,497.00	
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:		
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	23 Jun 2023	
COE Category:	E - Open Category	
COE Period(Years):	5	
PQP Pald:	\$18,953.00	
COE Rebate Amount:	\$15,445.00	
Total Rebate Amount: Message	\$15,445.00	

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 27 May 2019

OK