

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 : 04.07.2019

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

ACCIDENT INVOLVING VEHICLE: SKW 5961S AND SJB 8199D ON 31.05.2019

We are the authorized repair workshop for the owner of motor vehicle no: **SKW 5961S**, which was involved in the captioned accident with your insured vehicle no: **SJB 8199D**. 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) | \$ | 5,564.00 |
| 2) Loss Of Use (5 days + 1 Holiday X \$100) | \$ | 600.00 |
| 3) GIA Search Fee | \$ | 2.00 |
| | \$ | 6,166.00 |

We enclosed herewith the following documents to support the claims:

- | | |
|---------------------------------|------------------------------------|
| a) Final Repair Invoice | b) Vehicle Registration Log Card |
| c) GIA Report/GIA Search Result | d) I/C & Driving Licence |
| e) Insurance Certificate | 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 : 21134

Date: 04.07.2019

Vehicle No: SKW 5961S

Make/Model: HONDA MOBILIO

Accident Date: 31.05.2019

Claim No : 0619-21134

Reference :

Policy No :

| | Amount |
|-------------------------------|--------------|
| To proceed on lump sum repair | S\$ 5,200.00 |

| | | |
|------------|-------------------------|-----------------|
| E. & O. E. | Total : S\$ | 5,200.00 |
| | GST @ 7% : S\$ | 364.00 |
| | Amount Due : S\$ | 5,564.00 |


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

TAX INVOICE

Our Ref No: GR-19-087125

Date of Request: 01/06/2019

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 01/06/2019
Enquiry By Tang Kok Wee, Allan
TP Vehicle No. SJB8199D
Accident Date 01/06/2019

| 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

**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-19-087125

Date of Request: 01/06/2019

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 01/06/2019
Enquiry By Tang Kok Wee, Allan
TP Vehicle No. SJB8199D
Accident Date 01/06/2019

Enquiry Result

| TP Vehicle No. | Insurer | Period of Insurance | Insurer Tel. No. |
|----------------|--------------------------------------|-----------------------|------------------|
| SJB8199D | AIG Asia Pacific Insurance Pte. Ltd. | 30/01/2018-29/01/2020 | 65-6419-3000 |

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.




AUTHORIZATION TO ACT
(AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

I, Khoo Khur Lee ("the third party claimant")
of BLK 253 Bishan St 22 #11-422 5570253 (address),
owner of SKW59615 (vehicle no.) hereby authorize
Fastech Auto Pte Ltd
("the workshop") to act for me with respect to my claim for repair costs and/or
rental and/or loss of use ("claim") for my vehicle no. SKW59615 that was
damaged pursuant to the accident which occurred on 31/5/2019 (date) along
Paya Lebar Road (location)
involving vehicle no/s SJB 8199D ("the accident").

I further authorize the workshop to settle the above mentioned claim in a
manner that they deem fit and the workshop is further authorized to receive
payment further to settlement of my claim with payment cheque/s being made in
favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my
behalf is on a without prejudice and without admission of liability basis insofar
as the driver/owner/insurers of the other vehicle/s is concerned.

Date this _____ day of _____ (month) 20____ (year)


Signed by "the third party claimant"


Signed by "the workshop"



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

"We/I, Faotech Auto Pte Ltd ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte. Ltd. ("name of surveyor") with respect to the amount claimed for S\$ _____ (repair costs), S\$ _____ (loss of use/rental) S\$ _____ (search fees) for vehicle no. SKW5961S that was damaged pursuant to the accident which occurred on 31/5/14 (date) along Paya Lebar Rd June with Sims Ave (location) involving vehicle no/s SJB 8199D

This is pursuant to the inspection conducted on _____ (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner Khoo Khar Lee ("third party claimant") of vehicle no. SKW5961S to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem 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 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 damage to SKW5961S (vehicle no.) as a result of the accident.

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.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this _____ day of _____ (month) 20____ (year)



Signed by AIG appointed surveyor

Chopped & Signed by "the workshop"

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 | 01/06/2019 17:42 |
| Date Of Accident | 31/05/2019 17:30 |
| Exact Location Of Accident | PAYA LEBAR RD JUNC WITH SIMS AVE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SKW5961S |
| Insured/Policyholder | |
| Name Of Registered Owner | KHOO KHAR LEE |
| NRIC No | S1667210F |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-98592262 |
| Alternative Phone No | OFFICE-98592262 |

Vehicle Particulars

| | |
|--|-------------|
| Manufacturer | HONDA |
| Model | MOBILIO |
| 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 | LIBERTY INSURANCE PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | SI18V13362/VPC/R03 |
| Cover Note Number | - |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | TAN KENG SING |
| NRIC No | S8910930B |
| Date Of Birth | 29/03/1989 |
| Occupation | INDOOR |
| Date Of Driving Pass | 16/04/2008 |
| Driving Experience | 11 YEARS AND 1 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-81801260 |
| Fax Number | |
| Contact Number | |
| Email Address | NOEMAIL |

| | |
|---|------------------------------|
| Address | BLK 253 BISHAN ST 22 #11-422 |
| Postcode | 570253 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | CHILDREN |
| 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? | NO |
| Was any injured conveyed to hospital by ambulance? | |
| Was any other material or property damaged? | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver) | 4 |
| Passenger 1 | NAME: : UNKNOWN GENDER: : MALE |
| Passenger 2 | NAME: : UNKNOWN GENDER: : MALE |
| Passenger 3 | NAME: : UNKNOWN GENDER: : MALE |

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 |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|-------------|
| Vehicle Registration Number | SJB8199D |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | LAI CAIQIN |
| NRIC/Passport Number | S2640279D |
| Contact Number | |

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

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
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)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:


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


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

Accident Sketch Plan

SKETCH PLAN

The sketch plan is a grid-based diagram. On the left side, there are two small rectangular boxes, each containing a triangle and the letter 'A'. In the center of the grid, there is a handwritten note: "Please Refer to Statement". To the right of this note, there are two more handwritten notes: "A - 20000000" and "B - 20000000". At the bottom of the grid, there is a handwritten note: "Prya Bhanu Red".

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

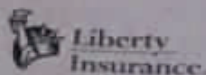
Accident Sketch Plan

I WAS TRAVELLING ALONG PAYA LEBAR RD WHILE APPROACHING JUNC WITH SIMS AVE, MY VEH STOP DUE TO RED LIGHT, ALL OF A SUDDEN, I FELT AN IMPACT FROM BEHIND. AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED VEH B (BEARING NO SJB8199D) FROM BEHIND COLLIDED ONTO MY VEH REAR PORTION.

DRIVING DOC

driver





www.libertyinsurance.com.sg



Certificate of Insurance

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks And Compensation) Rules, 1967 (Road Transport Act 1967) (Malaysia) Motor Vehicles (Third-Party Risks And Compensation) Rules, 1967 (Road Transport Act 1967) (Malaysia)

| | | |
|---|---|---|
| Name of Policyholder: KHOO KHAR LEE | Effective Date of Commencement: 04 Nov 2018 00:00 | Certificate No.: S116V12562 VPC / R02 |
| Date of issue: 26 Oct 2018 | Chassis No.: MRHCD4870FP000348 | Date of Expiry: 03 Nov 2018 23:59 |
| Registration No.: SKW50615 | | Type of Certificate: MX1 |

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 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials or speed-testing.
- C) Use for the carriage of goods (other than samples) in connection with any trade or business.
- D) Use for any purpose in connection with the Motor Trade.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1967 (Malaysia) are not to be included under these headings.

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, 1967 (Malaysia).

For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers

For Information Only:

| | |
|--------------------------|--|
| Coverage(s): | Comprehensive, Unlimited Windscreen, NCD Protection |
| Sum Insured: | MARKET VALUE AT THE TIME OF LOSS |
| Excess: | Section I: \$3600, Additional Excess for Young & Inexperienced Drivers: \$53000, Windscreen Excess: \$3100 |
| Name of Finance Company: | |
| Name of Producer: | KAH MOTOR COMPANY SDN BERHAD (A1572-7) |

MOTOR VEHICLE (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) (MALAYSIA)

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|-------------------------------------|--------------------------------------|
| Vehicle Owner Particulars | |
| Owner ID Type: | Singapore NRIC |
| Owner ID: | 7210F |
| Vehicle Details | |
| Vehicle No.: | SKW59615 |
| Vehicle to be Exported: | Yes |
| Intended Deregistration Date: | 03 Jun 2019 |
| Vehicle Make: | HONDA |
| Vehicle Model: | MOBILIO SV 1.5 CVT |
| Primary Colour: | White |
| Manufacturing Year: | 2015 |
| Engine No.: | L15Z12101423 |
| Chassis No.: | MRHDD4870FP000346 |
| Maximum Power Output: | 88.0 kW (118 bhp) |
| Open Market Value: | \$19,572.00 |
| Original Registration Date: | 04 Nov 2015 |
| First Registration Date: | 04 Nov 2015 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$19,572.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 03 Nov 2025 |
| PARF Rebate Amount: | \$14,679.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 03 Nov 2025 |
| COE Category: | A - Car up to 1600cc & 97kW (130bhp) |
| COE Period(Years): | 10 |
| QP Paid: | \$57,301.00 |
| COE Rebate Amount: | \$36,768.00 |
| Total Rebate Amount: | \$51,447.00 |

The information contained herein is correct as at 03 Jun 2019

OK