			0	int the	work		
	4			, ~		/	0
	*			1/15	6200		,
FASTECH A	UTO PTE LTD			13-4	1	1	
BLK1 KAKI E	BUKIT AVE 6			' 7.	10		
#01-46,48,50				1	4.		
SINGAPORE							
OII TOTAL	. 411000						
VEHICLE NO:	GBF 8162H						
QTY	PARTICULAR (NETT ITEM)			-1 ./ 1			
1 PCS	REAR WINDSCREEN GLASS			shofferd	\$950.30	) _	_
1 PCS	REAR TAILGATE			3005.00	\$2,101.40	)	
1 PCS	TAILGATE OUTER GARNISH			Berflera	\$370.90		
1 PCS	TAILGATE INNER TRIM BORAD			70-1	\$265.20		
1 SET	TAILGATE INNER TRIM BOARD CLIPS			nu	\$35.00	2	
1 PCS	TAILGATE REAR WIPER ARM			sel	\$89.50		
1 PCS	TAILGATE REAR WIPER MOTOR			In	\$394.30		
1 PCS	TAILGATE REAR WIPER BLADE			1	**********		
1 PCS	TAILGATE 'NISSAN' LOGO			sei			_
1 PCS 1 PCS	TAILGATE INNER LOCK			su			_
1 PCS	TAILGATE LOCK STRIKER			myla	\$322.50		
1 PCS	TAILGATE LOCK STRIKER TAILGATE WEATHERSTRIP			17	\$66.50		_
2 PCS				121	266.50		
1 PCS	TAILGATE DAMPERS @\$305.00 TAILGATE KEY SET			47	\$610.00		
1 PCS	REAR BUMPER			2.1	\$285.00		_
2 PCS	REAR BUMPER SIDE HOLDERS @\$105.00			りら	\$648.40		
1 PCS	REAR END PANEL OUTER			Badyin	\$210.00	-	_
1 PCS	REAR END PANEL INNER			BedHID	\$610.60		
1 PCS	REAR STEP PANEL			seamos	\$699.50 \$295.60	-	
1 PCS	REAR FLOOR PANEL			200	\$1,850.00		
1 PCS	REAR FLOOR PANEL TOP PLATE			DUI	\$186.50		
2 PCS	TAILLAMPS @\$350.00				\$700.00		-
2 PCS	TAILLAMP FILLER PANELS @\$365.00		(	ne 3 10	\$730.00		_
1 PCS	REAR SIDE BODY PANEL			R-	\$2,400.00		
1 PCS	REAR EXHAUST			MU	\$866.50		
2 PCS	REAR EXHAUST MOUNTINGS @\$60.00	( '	01	17	\$120.00	~ 1	
1 PCS	REAR LICENCE PLATE LAMP		ω,	che	\$55.50	/	
1 PCS	REAR SPARE TYRE CARRIER			Suffyer,	\$366.20	/	
1 PCS	REAR TAILGATE LOCK REMOTE			Short	\$285.00	/	
		9096	.4	\$	15,735.90		
	S.NETT	4010	(				
SET	REAR BUMPER REVERSE SENSOR			cre	\$280.00	200	5
SET	REAR BUMPER CLIPS			se	\$35.00		
PCS	REAR 70KM/H STICKER				\$20.00		
PCS	REAR WINDSCREEN GLASS SEALANT			111	\$50.00	1/10	
PCS	REAR WINDSCREEN GLASS INNER FOAM TYPE			M	\$50.00	30	
PCS	REAR LICENCE PLATE			hey			,
				2cm	φυυ.υυ	14	
	LABOUR CHARGES						
	TO CHECK WIRING				\$80.00	-22	
	TO DISMANTLE & REPLACING REAR REVERSE SENS	OR			\$80.00		
	TO DISMANTLE & REPLACING REAR WINDSCREEN	,			\$150.00	-70	1
	TO TRANSFER TAILGATE MECHANISM				\$120.00	100	)
	TO DISMANTLE & REFIX REAR EXHAUST			11	\$100.00	00	)

P-9096.40
| Chm - 1780
| Chm -

TO MOUNT VEHICLE ON CAR O-LINER		11 \$380.00 ×
TO DISMANTLE & REFIX FUEL TANK		\$120.00 6,5
TO SPRAY RUS# PROOFING		\$180.00
LABOUR FOR PANEL BEATING & REPLACING PARTS		\$2,500.00 / 203
TO PUTTY & SPRAY PAINTING		\$1,800.00 /2.
	TOTAL	\$21,730.90

# LKK Auto Consultants hence notify the Repairer of the following: To resurvey before/after spray painting

- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No ille all modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

## 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: 19.08.2019

AXA Insurance Pte Ltd 8 Shenton Way #27-01 AXA Tower Singapore 068811

Attn: Motor Claim Department

Dear Sir/Madam,

#### ACCIDENT INVOLVING VEHICLES GBF 8162H / YN 2918U ON 17.07.2019

We are the authorized repair workshop for the owner of motor vehicle no: GBF 8162H , which was involved in the captioned accident with your insured vehicle no: YN 2918U . 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.

-)	SAT BOMONT CO	\$ 7,116.00
3)	GIA Search Fee	\$ 2.00
2)	Loss of Use (7days + 1sunday X \$60)	\$ 480.00
1)	Cost of Repair (inclusive of GST)	\$ 6,634.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

b) GIA Search Result

c) Letter of Authorisation, etc...

d) GIA Report.

e) I/C & Driving Licence

f) Insurance Certificate

g) 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

Tax Invoice: 21252

AXA Insurance Pte Ltd

8 Shenton Way #27-01 AXA Tower Singapore 068811

Attn: Motor Claim Department

19.08.2019 Date GBF 8162H Vehicle No Make/Model NISSAN URVAN

Chassis/Eng# :

Accident Date 17.07.2019

Claim No

0719 -21252 Reference

Policy No

Amount

To proceed on lump sum repair

S\$

6200.00

E. & O. E.

Total: S\$

6200.00

GST @ 7%: S\$

434.00

Amount Due: S\$

6634.00

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-19-115757

Date of Request:

17/07/2019

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** 

17/07/2019

Enquiry By

Tang Kok Wee, Allan

Vehicle No.

YN2918U

Accident Date

17/07/2019

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YN2918U	AXA Insurance Pte Ltd	01/12/2018-30/11/2019	6338 7288

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.

17/07/2019 Invoice



## 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-19-115757

Date of Request:

17/07/2019

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** 

17/07/2019

Enquiry By

Tang Kok Wee, Allan

Vehicle No.

YN2918U

Accident Date

17/07/2019

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:

[X] GIRO [] Cash [] Cheque

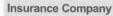
DATE	: 11.01.2019
TO	: Axa Insurance Pte Ltd
RE	: ACCIDENT INVOLVING VEHICLE NO. 4BF 8162H / YN 2918U
	ALONG jurong town hall road
	ON 17.07.2019
of (NRIC	Uncle ang trading No./ROC No.) 53326440E
	D tampines street 43 # 12-378 singapore 523495
owner of	vehicle no. 4BF 8162H in consideration of M/s FASTECH AUTO
	repairing my/our vehicle <b>GBF</b> albah at my/our instruction and hereby
	M/s FASTECH AUTO PTE LTD to demand claim settlement whatever
	ettled/payable by the Insurance Company and/or third party or to commence legal
^	ngs, if necessary, under my name, for the cost of repairs, car rental and/or loss of use, o their appointing solicitor to act for me/us in respect of the said accident/claim and
	ed and/or settled shall belong to them absolutely.
T/XX - Court	han across and an dentales to in demanify them, account the above mantioned aloin, acct
)	her agree and undertake to indemnify them against the above-mentioned claim cost ay arisen therewith.
WIIICH HIG	ty drisen merewith.
	UNCLE
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 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 aforesaid.

aloresaid.	
	ACCIDENT STATEMENT
Date Of Report	18/07/2019 15:30
Date Of Accident	17/07/2019 19:30
Exact Location Of Accident	ALONG JURONG TOWN HALL ROAD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GBF8162H
Insured/Policyholder	
Name Of Registered Owner	UNCLE ANG TRADING
Co Reg No	53326440E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90099996
Vehicle Particulars	
Manufacturer	NISSAN
Model	URVAN
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE



Name of Insurance Company LIBERTY INSURANCE PTE LTD

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number SI19V071/30

Cover Note Number

Driver
Name of Driver
ISLAM MUHAMMAD MOMINUL

 Passport No/FIN
 G2184676M

 Date Of Birth
 02/10/1993

 Occupation
 OUTDOOR

 Date Of Driving Pass
 24/08/2018

Driving Experience 0 YEAR AND 10 MONTH

Gender MALE

Mobile Number (LOCAL) +65-90099996

Fax Number

Contact Number

EMail Address NOEMAIL

Address

BLK 495 TAMPINES STREET 43 #12-378

Postcode

523495

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

Road Surface

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle) involved in the accident

NO 2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

3

Passenger 1

ambulance?

NAME:

: REZA

GENDER:

: MALE

Passenger 2

NAME:

: ANG AH BUCK

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

REFER TO BELOW STATEMENT/SKETCH PLAN ATTACHED;

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

YN2918U

Vehicle Make/Model/Colour

ISUZU / NNR85UH4A

**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

ISLAM MUHAMMAD MOMINUL

Approximate Age

Injuries Sustain

Injured person in which vehicle?

GBF8162H

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Page 3 of 12

#### 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 company with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

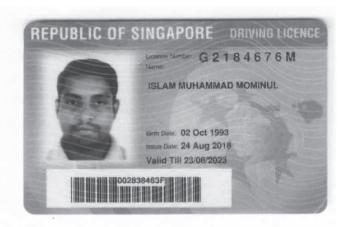
Driver's Signature (If driver is not the policyholder) Date & Time: IDAC KAKI BUKIT(VAC) 23 KAKI BUKIT AVE 4 Singapore 415933

Reporting Centre Personnel's Signature Name: Fax: 0749-305 NRIC/FIN Normall: vackb@singnet.com.sg

GMANAC Shetch/HanForm VS

SKETCH PLAN		
		A - GBF 8162H
	7-7	A - GIST STOP
	1/10/	B - 4 N29 184
		J 8 - JN2
	(6)	
DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT	
		A 1.1
on the Stat	ed derte and time,	I was driving my vehicle
A) e	1.1 0 1 X	
Wong Jurby	Town Hall Koad, O	Stop my cor to wait
0_		1 - 6 - 11 1 - 11 1 6
for on-coming	vehicle to be	clear. Suddenly vehicle F
116		
hit on my "	er pertion.	
DECLARATION		
[0.]	ciculars are true in every respect.	
SMIGHS	$\Lambda$	IDAC KAKI BUKIT(VAC) 23 KAKI BUKIT AVE 4
	- ANT	Singapore 415933
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name: Fax: 67492305
THE STREET	Date & Time:	NRIC/FIN No.mail: vackb@singnet.com.sg







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

EFFECTIVE DATE

Motor cars with unladen weight =< 3000kg with =< 7 24 Aug 2018 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

NP 428A







#### Liberty Insurance Pte Ltd

Registration no.199002791D 51 Club Street #03-00 Liberty House Singapore 069428 Tel: (65) 6221 8611 Fax: (65) 6225 6890 Website: http://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,1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No	SI19V07130 /VCV /R02
Form	MZ300A
Date of Issue:	06-Jun-2019
1.Index Mark and Registration No. of Vehicle:	GBF8162H
2.Chassis number of Vehicle:	JN1MG4E25Z0710642
3.Name of Policyholder:	UNCLE ANG TRADING
4.Effective date of Commencement of Insurance     for the purposes of the Act:	13-JUL-2019 00:00
5.Date of Expiry of Insurance:	18-MAY-2020 23:59
6.Persons or Classes of Persons	

entitled to drive\*:

Any person who is driving on the Policyholder's order or with their 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

7.Limitations as to use\*:

A) Use in connection with the Policyholder's business.

B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

C) Use for social, domestic and pleasure purposes.

A) Use for hire or reward or for racing, pace-making, reliability trials or speed-testing.

B) Use whilst drawing a trailer except the towing or any one disabled mechanically propelled vehicle.

\*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, 1987 (Malaysia) are not to be included under these headings.

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).

For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers

Authorised Signature

For Information only:

COVERAGE:

Third Party Fire & Theft

SUM INSURED (S\$):

MARKET VALUE AT THE TIME OF LOSS

EXCESS (S\$):

Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers \$3,000.00

FINANCE COMPANY:

ETHOZ CAPITAL LTD

PRODUCER NAME:

ALLIANCE INTEGRATED SOLUTIONS PTE LTD

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID: Vehicle Details	440E
Vehicle No.:	GBF8162H
Vehicle to be Exported:	Yes
Intended Deregistration Date:	18 Jul 2019
Vehicle Make:	NISSAN
Vehicle Model:	URVAN
Primary Colour:	Silver
Manufacturing Year:	2003
Engine No.:	ZD30033368
Chassis No.:	JN1MG4E25Z0710642
Maximum Power Output:	
Open Market Value:	\$23,100.00
Original Registration Date:	05 Jan 2004
First Registration Date:	05 Jan 2004
Transfer Count:	3
Actual ARF Paid: Intended PARF Rebate Details	\$1,155.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	31 Mar 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$24,394.00
COE Rebate Amount:	\$13,783.00
Total Rebate Amount: Message	\$13,783.00
Please note that all future COE renewals for this vehicle ovehicle.	can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the

The information contained herein is correct as at 18 Jul 2019

ОК