

To: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

Attn: **Motor Claims Department**

Date: 8th December 2019

Dear Sir/Madam,

Claimant: **Leo Boon Kin**
199 Pasir Ris Street 12
#08-136 Singapore 510199

"WITHOUT PREJUDICE"

We are instructed by the above named to claim damages against you in connection with a road traffic accident on 07/11/2019 at along Tampines Avenue 7, beside Busstop 76229 involving our client's vehicle registration number SLD 4590 Z and vehicle registration number GBH 8267 D driven by your insured at the material time.

We are instructed that the accident was caused by your insured's negligent driving and/or management of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:

1) Vehicle Repair Costs	\$10,500.00
2) Loss of Rental (SGD\$180.00 x 15Days)	\$2,700.00
3) LTA Search Fee	\$7.45
4) Purchase of GIA Report	\$29.00

Total : **\$13,236.45**

A copy each of the following supporting documents is enclosed:

- Singapore Accident Statement
- Rental Invoice & Agreement
- LTA Search Fee Receipt
- Purchase of GIA Report Receipts

Please send us an acknowledgement of receipt within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice.

Yours faithfully,

Elin Cai

Zoom Autowerks Pte Ltd

130 Bedok Reservoir Road
#08-1339 Singapore 470130

Mobile: 9450 7920 | E-mail: zoomautowerks@gmail.com

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	08/11/2019 12:26
Date Of Accident	07/11/2019 10:20
Exact Location Of Accident	TAMPINES AVENUE 7 BESIDE BUSTOP 76229
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD4590Z
Insured/Policyholder	
Name Of Registered Owner	LEO BOON KIN
NRIC No	S1384815G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90904740
Alternative Phone No	OTHERS-90904740

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E 250CGI
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA488909/1
Cover Note Number	

Driver

Name of Driver	LEO BOON KIN
NRIC No	S1384815G
Date Of Birth	02/12/1959
Occupation	INDOOR
Date Of Driving Pass	10/09/1999
Driving Experience	20 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90904740
Fax Number	
Contact Number	OTHERS-90904740
Email Address	NOEMAIL

Address	199 PASIR RIS STREET 12 #08-136 SPORE 510199
Postcode	
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	2
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: : CHONG CHWEE HOON 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 SKETCH PLAN

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	GBH8267D
Vehicle Make/Model/Colour	TOYOTA / DYNA 150 5MT
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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**.
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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 purposes(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:



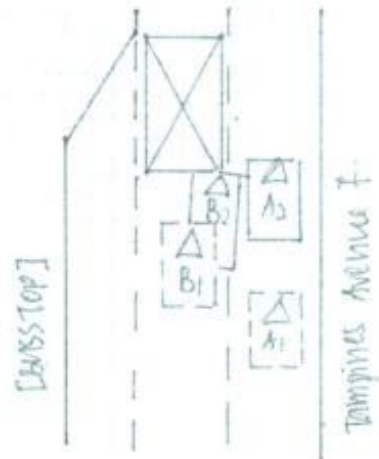
Reporting Centre Personnel's Signature
Name: Sharon
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

Vehicle A: CID 4590Z.

VEHICLES: GBH 8267-D



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I, vehicle 'A',
 QD 4590Z, was travelling straight along the stated
 venue. Suddenly, vehicle 'B', GBH 8767D, altered into
 my lane & collided onto my vehicle's entire left
 portion.

My passenger: Chong Chwee Hoon.
S139 2769 C

DECLARATION

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

Principal Investigator's Signature _____
Date & Time _____

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

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

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

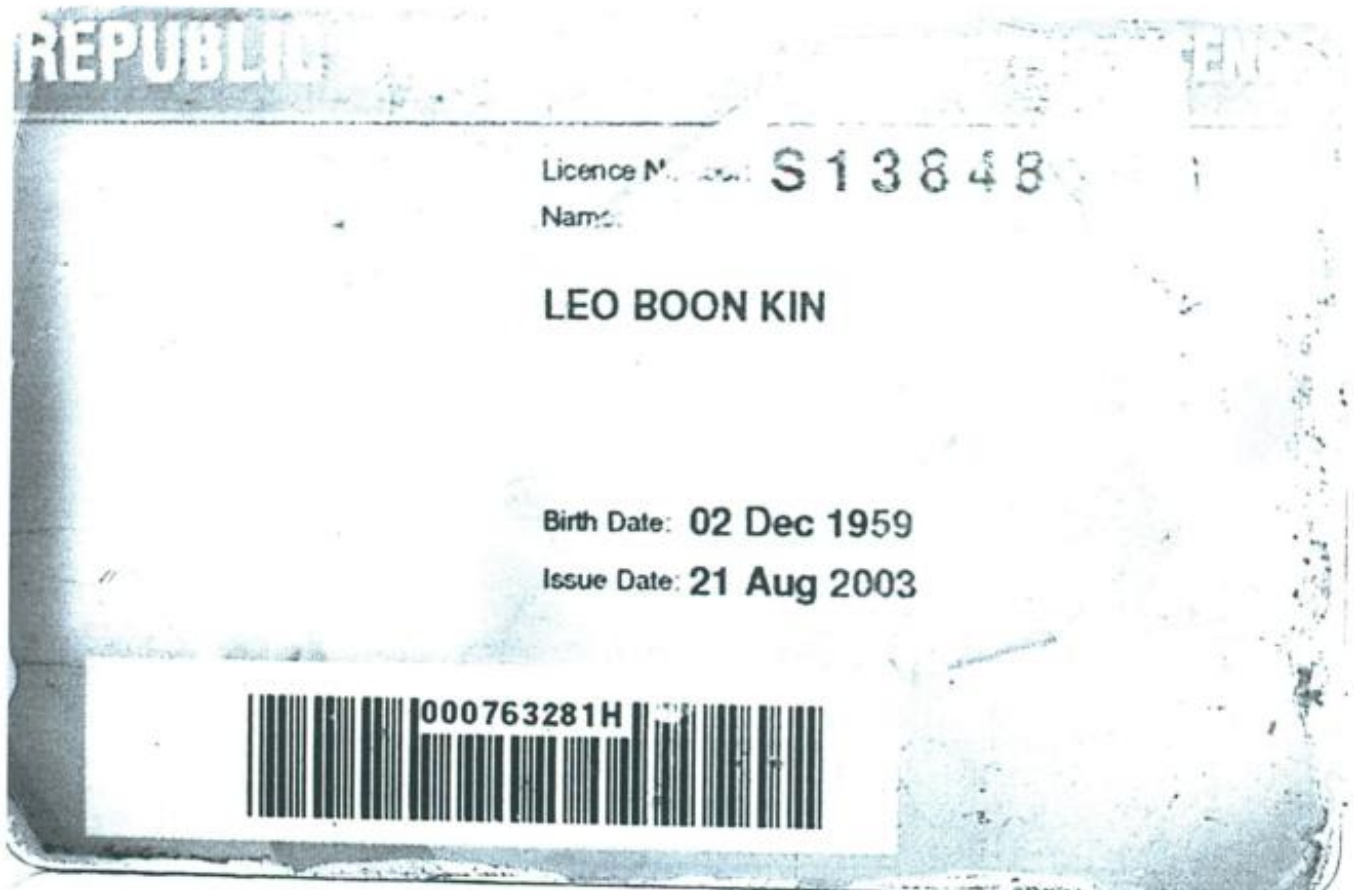


Accident Photo

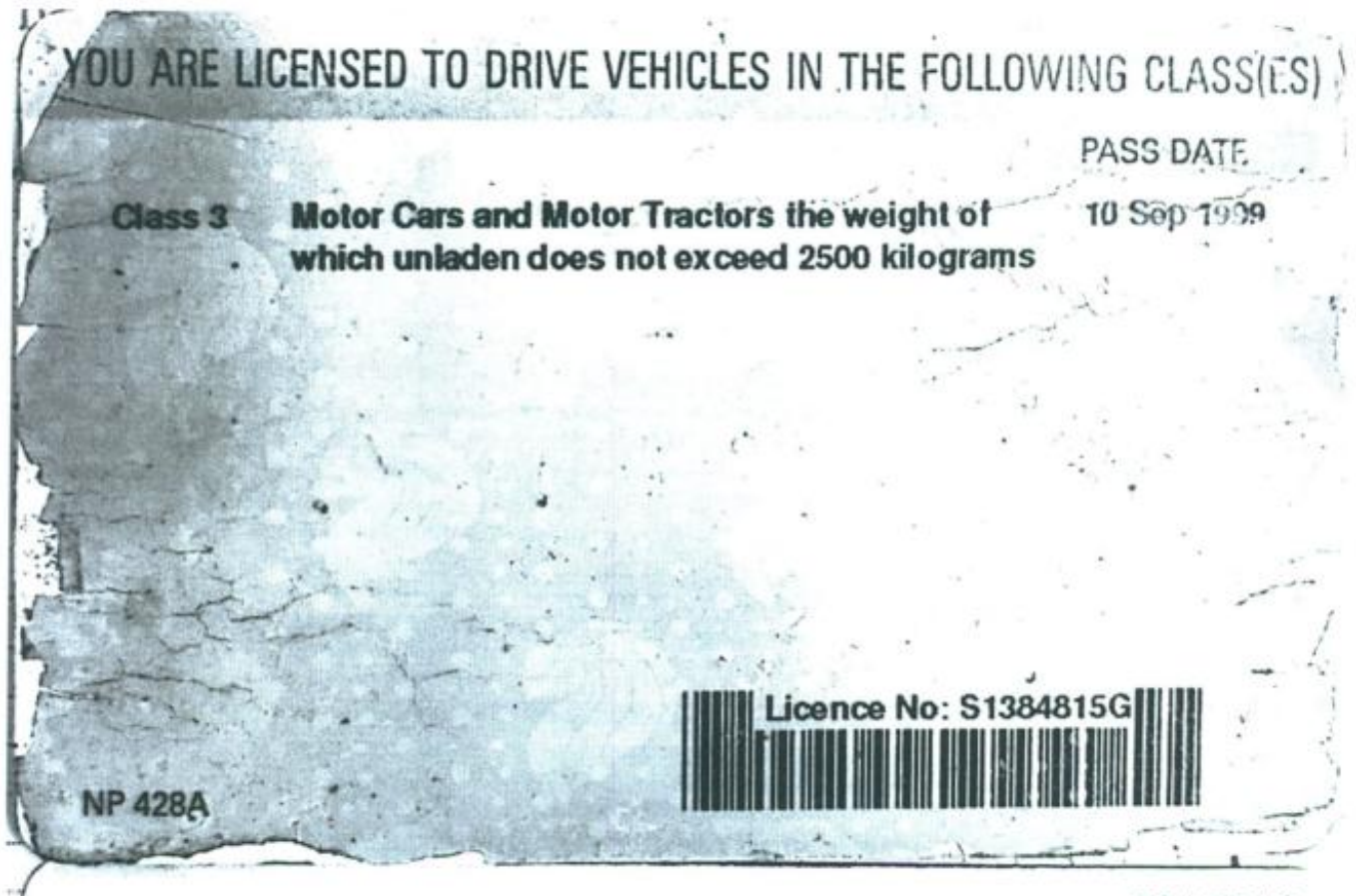




Driving License



Driving License



Insurance policy



redefining / insurance

AXA Insurance Pte Ltd
☎ 1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
— (65) 6880 4740
✉ customer.care@axa.com.sg
www.axa.com.sg

Certificate of Insurance

account number
10837

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 (Malaysia)

Policy details

Policyholder name	LED BOON KIN	Certificate number	GA488909 / 1
Cover	Comprehensive	Chassis number	WDD2120472A080976
Plan name	Essential	Engine number	27186030003913
NCD applicable	0%		
Vehicle registration number	SLD4590Z		
Period of Insurance	from 03/08/2019 to 02/08/2020 (both dates inclusive)		
Finance loan company	Maybank Singapore Limited		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
(b) 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.

Limitation as to use*

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

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* Limitations rendered inoperative by Section 5 of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Section 50 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 800.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undecleared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1967 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this condition is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

The Premium Warranty Clause reburses the premium to be paid in full within a specific period failing which there would be no validity under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903512M)
8 Shenton Way, #24-01, AXA Tower,
Singapore 068811
Customer Centre, #B1-01

1 of 3

**ZOOM AUTOWERKS PTE LTD**

130 Bedok Reservoir Road, Eunos Spring

#08-1339 Singapore 470130

email: zoomautowerks@gmail.com | Contact: 9450 7920

Co. Reg No.: 201725603G

PROFORMA INVOICE

To: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

PF No. : ZP0000345
Date : 8/12/2019
VRN : SLD 4590 Z
Make & Model : M. Benz E250
DOA : 7/11/2019
Terms : COD

S/N.	Description	Qty	U/P	Amt
1	Total Loss			10,500.00
2	Loss of Rental (\$180.00 x 15Days)			2,700.00
3	LTA Search			7.45
4	Purchase of GIA Report			29.00

TOTAL :	\$13,236.45
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I agree to the price as listed above and confirm that
goods are received in good condition.

(Customer's Signature)

(by Zoom Autowerks Pte Ltd)



ZOOM AUTOWERKS PTE LTD

130 Bedok Reservoir Road, Eunos Spring

#08-1339 Singapore 470130

Tel: 9450 7920

✉ zoomautowerks@gmail.com

LETTER OF AUTHORIZATION

Accident on 07/11/2019 10.19 along TAMPINES AVE 7, BESIDE BUS STOP 76229
Involving vehicles SLD 4590 Z, GBH 8267 D

In consideration of **Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130**, repairing my/our motor vehicle no SLD 4590 Z at my request, I/We, LEO BOON KIN ("the claimant") of 199 PASIR RIS ST 12 # 08-136 CS 510199 (address) bearing NRIC No S 1384815 G the owner of motor vehicle no SLD 4590 Z, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.

I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by **Zoom Autowerks Pte Ltd**.

I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.

In the event that my/our claim is unsuccessful, I/we undertake to pay to **Zoom Autowerks Pte Ltd** the cost of repairs to my/our vehicle.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into **Zoom Autowerks Pte Ltd** account. Upon clearance of the said cheque, I/we further authorize **Zoom Autowerks Pte Ltd** and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to **Zoom Autowerks Pte Ltd** shall amount to a good discharge of **Zoom Autowerks Pte Ltd** and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 07 day of 11 (month) 20 19 (year)

Signed by "the claimant"

Name: LEO BOON KIN

NRIC No: S 1384815 G



Signed by Zoom Autowerks Pte Ltd

Name: ROLAND TIONG

RENTAL AGREEMENT

HJ CAR RENTAL PTE LTD

6001 Beach Road, Golden Mile Tower #08-06 SINGAPORE 199589

ROC: 201843281R

OFFICE : 8838 0101 | 8808 6135 | 8666 0101
FAX :
EMAIL :

INVOICE :
DATE :

Company Name

Company Address

Hirer's Name **LEO BOON KIN**

Hirer's Address

NRIC/Passport No. **S13848156**

Driving License No.

Local Contact **9090 4740**

SIN

SIN

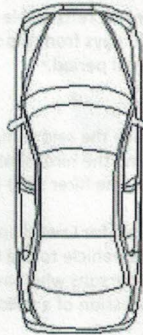
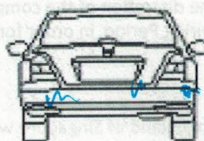
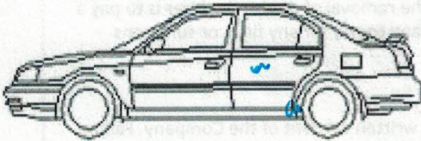
DOB

Issue By

TP

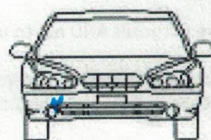
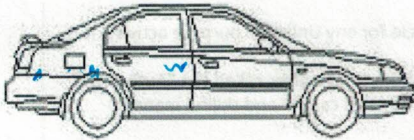
Left Side

Back



Right Side

Front



Top

Model **K3**

Licence Plate **SLC 9087**

Colour

* Rates do not include Petrol.

Taken

E	1/8	1/4	3/8	1/2	5/8	3/4	7/8	F
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Return

E	1/8	1/4	3/8	1/2	5/8	3/4	7/8	F
---	-----	-----	-----	-----	-----	-----	-----	---

* Every 1/8 of petrol used is chargeable @ \$20 nett.

Remarks : D = Dent S = Scratches C = Chips R = Rust M = Missing

RENTAL DETAILS

Start Date **07/11/19**

Start Time

Return Date **22/11/19**

Return Time

Rental Amount

Additional Driver

Malaysia Usage **YES**

Rental of GPS

Rental of P-Plate

Total Cost Of Rental

Remarks:

RATES

QTY

TOTAL

\$180

15

\$2700

\$2700

Hirer's Signature

TAX INVOICE

Our Ref No: GR-19-185318
Date of Request: 11/11/2019

Your Ref No: WALK IN ELIN

ZOOM AUTOWERKS PTE LTD
130 BEDOK RESERVOIR ROAD, EUNOS SPRING, #08-1339
SINGAPORE 470130

Dear Sir/Madam,

Your Vehicle No: SLD4590Z
Date of Accident: 07/11/2019
Place of Accident: TAMPINES AVE 7
Involving Vehicle No: GBH8267D

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ 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

TAX INVOICE

Our Ref No: GR-19-185319
Date of Request: 11/11/2019

Your Ref No: WALK IN ELIN

ZOOM AUTOWERKS PTE LTD
130 BEDOK RESERVOIR ROAD, EUNOS SPRING, #08-1339
SINGAPORE 470130

Dear Sir/Madam,

Date of Accident: 07/11/2019
Vehicle No: SLD4590Z
Place of Accident: TAMPINES AVENUE 7 BESIDE BUSTOP 76229
Involving Vehicle No: GBH8267D

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
GBH8267D	TAMPINES AVENUE 7 BESIDE BUSTOP 76229	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque