

To: **EQ Insurance Company Limited**
5 Maxwell Road
#17-00 Tower Block MND Complex
Singapore 069110

Attn: **Motor Claims Department**

Date: 3rd May 2020

Dear Sir/Madam,

Claimant: **Aw Peng An**

"WITHOUT PREJUDICE"

We are instructed by the above named to claim damages against you in connection with a road traffic accident on 03/04/2020 at along Junction of Sengkang Central & Sengkang East Avenue involving our client's vehicle registration number SLF 5940 E and vehicle registration number YN 9905 K 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	\$1,850.00
2) Loss of Rental (SGD\$150.00 x 7Days)	\$1,050.00
3) LTA Search Fee	\$7.45

Total : **\$2,907.45**

A copy each of the following supporting documents is enclosed:

- Singapore Accident Statement
- Rental Invoice & Agreement
- LTA Search Fee Receipt

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, Eunos Spring

#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	03/04/2020 13:42
Date Of Accident	03/04/2020 10:15
Exact Location Of Accident	JUNC SENGKANG CENTRAL & SENGKANG EAST AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF5940E
Insured/Policyholder	
Name Of Registered Owner	AW PENG AN
NRIC No	SXXXX083I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90686899
Alternative Phone No	OFFICE-90686899

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS 1.5E A
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3100911903
Cover Note Number	

Driver

Name of Driver	AW PENG AN
NRIC No	SXXXX083I
Date Of Birth	25/01/1976
Occupation	INDOOR
Date Of Driving Pass	15/12/2003
Driving Experience	16 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90686899
Fax Number	
Contact Number	OFFICE-90686899
Email Address	NOEMAIL

Address	BLK 645 YISHUN STREET 61 #08-324
Postcode	760645
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	RAINING
Road Surface	WET

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)	1

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 STATEMENT.

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	YN9905K
Vehicle Make/Model/Colour	
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)	1

Accident Sketch Plan

SKETCH PLAN

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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

vehicle A: SLFS940E

vehicle B: YN9905K

← sengkang East Ave

sengkang central



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated date & time, I, vehicle 'A', SLFS940E, was stationary along the stated venue due to red light. Moments later, vehicle 'B', YN9905K, hit onto my vehicle's rear portion.

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 Photo



Accident Photo



Accident Sketch Plan



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**ZOOM AUTOWERKS PTE LTD**

130 Bedok Reservoir Road, Eunost Spring

#08-1339 Singapore 470130

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

Co. Reg No.: 201725603G

PROFORMA INVOICE

To: **EQ Insurance Company Limited**
5 Maxwell Road
#17-00 Tower Block MND Complex
Singapore 069110

PF No. : ZP0000414
Date : 3/5/2020
VRN : SLF 5940 E
Make & Model : Toyota Vios
DOA : 3/4/2020
Terms : COD

S/N.	Description	Qty	U/P	Amt
1	Repair & Respray Accident Affected Portions			1,850.00
2	Loss of Rental (\$150.00 x 7Days)			1,050.00
3	LTA Search Fee			7.45

TOTAL :	\$2,907.45
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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 03/04/2020 @ 10:15 along Junction of Sengkang Central & Sengkang East Ave
Involving vehicles SLF5940E and YN9905K

In consideration of **Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130**, repairing my/our motor vehicle no SLF5940E at my request, I/We, Aw Peng An ("the claimant") of _____ (address) bearing NRIC No SXXXX 083 I the owner of motor vehicle no SLF5940E, 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 03 day of 04 (month) 20 20 (year)

Signed by "the claimant"

Name: Aw Peng An

NRIC No: SXXXX 083 I

Signed by Zoom Autowerks Pte Ltd

Name: Elin Ooi

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 03 Apr 2020 / 12:03:29

Receipt Date/Time : 03 Apr 2020 / 12:03:20

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200403-001298

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SMG9902Y As at 31 Mar 2020/16:30:00 Insurance Co: ETIQA INSURANCE PTE LTD				
1	Insurance Enquiry - SMG9902Y Enquiry Fee 20200403120226681515	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - YN9905K As at 03 Apr 2020/10:15:00 Insurance Co: EQ INSURANCE COMPANY LTD				
2	Insurance Enquiry - YN9905K Enquiry Fee 20200403120226734665	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		14.00	0.98	14.98
Rounding Difference				0.03
Total Amount Payable				14.95
Paid By				
	526471XXXXXX0962	eNETS Credit Card		14.95
Total				14.95
Cash Change				0.00
Tendered Amount				14.95
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.

ZOOM CAR LEASING

Zoom Car Leasing

Registration No.: 5339410M

e-mail : zoomcarleasing@gmail.com

Zoom Autowerks Pte Ltd

Tel: 9450 7920

RENTAL INVOICE

Invoice No. : **INV0000548**
Date : 19/4/2020
Ref : SLF 5513 E
Your Ref : SLF 5940 E
Terms : 30Days

#	Rental Period	Rate	Quantity	Amount
1	Rental Charges for SLF 5513 E (03/04/2020 to 10/04/2020)	\$150.00	7 Days	\$1,050.00

C/O Aw Peng An

645 Yishun Street 61

#08-324 Singapore 760645

Contact: 9068 6899

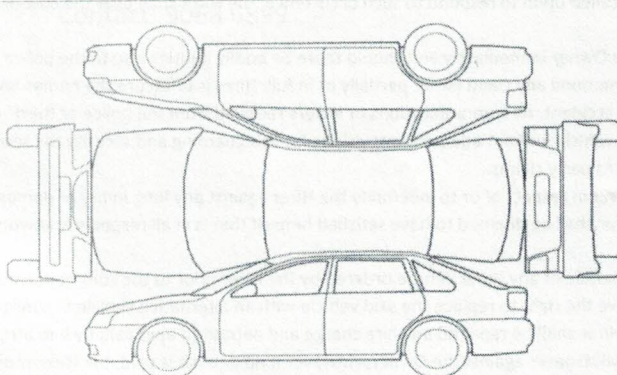

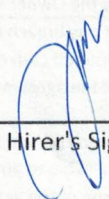


Total : \$1,050.00

**ZOOM CAR
LEASING**

(Customer's Signature/Stamp)

(For Zoom Car Leasing)

RENTAL AGREEMENT

HIRER'S PARTICULAR		VEHICLE DETAIL	
Name: <u>AN PENG AN</u>	Vehicle No.: <u>8LF5513E</u>		
NRIC/Passport No.: <u>SXXXX0831</u>	Vehicle Make/Model: <u>Kia Spv tage</u>		
Address: <u>645 Yishun St 61</u> <u>#08-324 8760645</u>	Date/Time Out: <u>03/04/2020</u>		
	Date/Time In: <u>10/04/2020</u>		
Tel: <u>90686899</u>	<div style="display: flex; justify-content: space-around;"> <div> <div style="border: 1px solid black; padding: 2px;">E</div> <div style="border: 1px solid black; padding: 2px;">1/4</div> <div style="border: 1px solid black; padding: 2px;">1/2</div> <div style="border: 1px solid black; padding: 2px;">3/4</div> <div style="border: 1px solid black; padding: 2px;">F</div> </div> <div> <div style="border: 1px solid black; padding: 2px;">E</div> <div style="border: 1px solid black; padding: 2px;">1/4</div> <div style="border: 1px solid black; padding: 2px;">1/2</div> <div style="border: 1px solid black; padding: 2px;">3/4</div> <div style="border: 1px solid black; padding: 2px;">F</div> </div> </div> <div style="display: flex; justify-content: space-around;"> OUT IN </div>		
Driving License No./Exp.:	Mileage: <u>223350</u>	Mileage:	
ADDITIONAL DRIVER'S PARTICULAR		RENTAL CHARGES	
Name:	Hours @	per hour	
NRIC/Passport No.:	<u>7</u> Days @ <u>\$150</u>	per day	<u>\$1050</u>
Address:	Weeks @	per week	
	Months @	per month	
Tel:	Other Charges		
Driving License No./Exp.:	Petrol Top-Up		
(A) - Accident (D) - Dent (S) - Scratch	Sub-total		
	TOTAL CHARGES		<u>\$1050</u>
	PRE-PAYMENT		
	Downpayment and Deposit		
	Amount Refunded Due		
I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license(s) is/are current and not disqualified from driving.			
PHYSICAL DAMAGE EXCESS		ACKNOWLEDGEMENT	
Singapore - Own Damage	S\$2,000.00		
Singapore - 3rd Party	S\$2,000.00		
Malaysia*	S\$8,000.00		
For Drivers aged < 27 or > 65 and/or less than 2 years driving experience regardless of age	S\$3,000.00 (Additional)		
IMPORT NOTE:		<div style="text-align: center;">  Hirer's Signature / Date </div>	
<p>1. ONLY PERSONS ABOVE 22 YEARS OF AGE, HOLDING A VALID SINGAPORE LICENCE FOR MORE THAN 2 YEARS, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE</p> <p>2. Vehicle is strictly for use in Singapore only and may not be driven out of Singapore without the prior written consent of Zoom Car Leasing</p> <p>3. Use of vehicle for illegal purposes (e.g. in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited.</p> <p>4. In case of accident, the hirer shall report to Zoom Car Leasing immediately.</p>		<div style="text-align: center;">   Owner's Signature / Date </div>	