# BLOCK 1009 BUKIT MERAH LANE 3 #01-90 SINGAPORE 159723 TEL: 6273 0119 FAX: 6270 7065 Email: shufatt@pacific.net.sgsingnet.com.sg

Co. Reg. No. 09062400M GST Reg. No. 09-062400-M

Our Ref. SF/007/2021

10th March 2021

without prejudice

MS First Capital Insurance Limited., 36 Robinson Road, #16-01, City House, Singapore 068877.

Attention: Motor Claims Dept

Dear Sirs,

#### ACCIDENT INVOLVING SLR 6784 U AND SHC 7615 U ON 29/12/2020

We refer to the above matter.

We act for the owner of SLR 6784 U whose vehicle was involved in the above accident with your insured driver of SHC 7615 U due to his/her gross negligence. Our client holds your insured driver responsible for all the outlay they/he/she had incurred we now forward the claim as follows:=

Repair cost	\$5,765.62
GIA search fee	\$
LTA search fee	\$ 7.49
Loss of use (\$100 x 4 days)	\$
Rental	\$1,027.20
Loss of income	\$
Survey fee	\$
Towing fee	\$
GIA report fee for TP report	\$
Miscellaneous (audatex fee)	\$
Miscellaneous (Merimen fee)	\$
Miscellaneous (reinstate sticker)	\$
Off-peak e-day licence	\$
Seal for off-peak car	\$
Photocopies/postages/admin	
	\$6,800.31
	=======

To facilitate your investigation, we forward repair bill, accident report and police report, certificate of Insurance, Letter of Authorisation, LTA search, rental invoice and agreement for your necessary action.

The above pertains to property damage claim only and should not prejudice injury claim, if any.

We thank you for your prompt assistance and we look forward to your early settlement.

Yours faithfully,

SHU FATT AUTO WORKS

Julia Wong (Claims)

Encs.



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TAX INVOICE NO: SF/007/2021 2<sup>nd</sup> March 2021

MS First Capital Insurance Limited (Third Party)

#### SLR 6784 U TOYOTA SIENTA

~		22
Spare parts		3348.43
Labour		2040.00
		5388.43
	7% GST	377.19

5765.62

S'PORE DOLLARS: FIVE THOUSAND SEVEN HUNDRED SIXTY-FIVE & CENTS SIXTY-TWO ONLY.

樹發汽車修理廠 SHU FAFT AUTO WORKS



BLOCK 1009 BUKIT MERAH LANE 3 #01-90 SINGAPORE 159723 TEL: 6273 0119 FAX: 6270 7065

SLR 6784 U TOYOTA SIENTA

SC1P20CU0002 / Charn's CustomCraft ENTRY DATE & TIME: 30/12/2020 15:44 (SGT) SUBMITTED BY: Lee Chia Ling Sharon VERSION: 1 (30/12/2020 15:44 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

Thease report correctly the details of the accident to speed up the claims process.
 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 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.

#### ACCIDENT STATEMENT

Date of Submission Date of Accident **Exact Location of Accident** 

Additional Location Information Country/State of Loss

30/12/2020 15:44 (SGT) 29/12/2020 19:00 (SGT) Singapore MANDAI LAKE ROAD

Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLR6784U

LOY ZHI-YANG

loyzhiyang@gmail.com

(Phone) +65-98445799

SXXXX291D

+65-98445799

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category

Toyota

Sienta

Private use

No - Claiming third party

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number

Cover Note Number

NTUC

Comprehensive

No

5093296733-03

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

LOY ZHI-YANG SXXXX291D 18/11/1978 Indoor

Accident report SC1P20CU0002

13/11/2017 Date Of Driving Pass 3 YEARS AND 1 MONTH Driving experience Male Gender (Phone) +65-98445799 Mobile Number +65-98445799 Alt. Phone Number loyzhiyang@gmail.com Email Address 1P PINE GROVE #04-23 Address Address complement 591401 Postcode Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Collision - Head to Rear Type of Accident Clear Weather Conditions Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Yes Was any other material or property damaged? Yes 5 Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 LOY XING-YI Name Female Gender PASSENGER 2 LOY XING HSU Name Female Gender PASSENGER 3 LOY XING HAN Name Male Gender PASSENGER 4 LIM YING TZE JULIA Name Female Gender DETAILS OF POLICE ACTION Yes Was the accident reported to the police? Traffic Police Police Station Name (Phone) +65-65470000 Police Station Phone No (Fax) +65-65474900 Alt. Police Station Phone No 10 Ubi Avenue 3 Singapore 408865 Police Station Address No Was notice of intended Prosecution given? If yes, against whom?

REFER TO SKETCH AND POLICE REPORT T/20201230/7009 ATTACHED

CIRCUMSTANCES OF ACCIDENT

#### ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

Yes Yes No

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category

Name of Driver NRIC No Contact Number Address

Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

SHC7615U

Yellow Taxi

LAM KONG CHEONG SXXXX812C

#### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person LOY XING YI Address 1P PINE GROVE #04-82 Address Complement Post Code 591401 Approximate Age Years Old Injuries Sustained UNKNOWN Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance? Yes

#### SKETCH PLAN

SLR 67844 29/b/20

#### **IMPORTANT NOTICE**

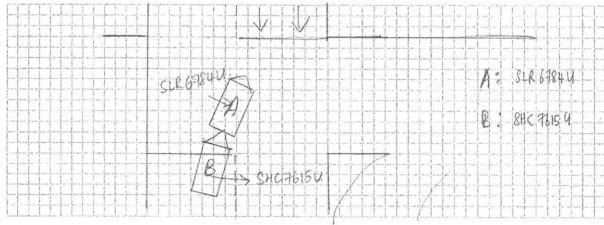
- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan



0)	
Pls refer to Police Report No: T/20201230/7609.	
ration	
clare the foregoing particulars are true in every respect.	. 7
· Consequent	1 / 7933

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

& Time

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre

Personnel



#### THE SCHEDULE

#### **Private Car Insurance Policy**

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Policyholder named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this insurance is subject to:

- 1. any Endorsement specified as operative in the Schedule
- 2. the Conditions and General Exclusions of this Policy, and
- the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document.

GST Reg No. M90372806G

Policy Number : 5093296733-03
The Policyholder : LOY ZHI-YANG
BLK 9 #14-453
JALAN RUMAH TINGGI
SINGAPORE 150009

Period of Insurance : 24 Aug 2020 To 23 Aug 2021

Sum Insured : Market Value of Insured Vehicle at Time of Loss

Premium (inclusive GST) : \$\$683.71

Interest Insured

 Cover Type
 : drivo CLASSIC

 Primary Driver
 : LIM YING TZE JULIA

 Named Driver (1)
 : CHANG SOW FON

 Named Driver (2)
 : N/A

TOYOTA/SIENTA : 1500cc Make/Model Capacity SLR6784U Registration Year : 2017 Registration Number NSP1707028727 Off-peak Car Chassis Number : No Insure with COE Repair at Owner's Preferred Workshop: No : Yes

 Excess (Section 1)
 : \$\$600
 NCD Entitlement
 : 50%

 Excess (Section 2)
 : N/A
 NCD Protection
 : Yes(Free)

 Windscreen Excess
 : \$\$100
 Loyalty Discount
 : 5%

 Additional Excess
 : N/A

Unnamed Driver Excess : Please refer to Terms and Conditions Hire Purchase Company : UNITED OVERSEAS BANK LIMITED

Optional Cover
Transport Allowance : No
Excess Waiver : No

Memo A : N/A

Endorsement Operative : M4

Agency : VINCAR PTE LTD (00000614250)

Date of Issue : 13 Aug 2020 15:38 hrs

#### **DUTY OF DISCLOSURE**

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors

Chief Executive





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 4 Report No. T/20201230/7009

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/12/2020 11:00		Made:	Vide Report No.: L/20201229/0125	Station Diary No.:		
	nt's Partic			77.50.7000.400		
Name of Informant: LOY ZHI-YANG			Address:			
NRIC NO	/ ID No.: D / S78352	91D	1P PINE GROVE #04-82 SINGAPORE 591401 Contact No.: Home/Office: Mobile: 98445700			
Nationality: SINGAPORE CITIZEN		'EN	Home/Office: Mobile: 98445799  Email: loyzhiyang@gmail.com			
Sex: Male	Age: 42	Date of Birth: 18/11/1978	Type of Informant:			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: General practitioner/physician		/physician	Driving Licence Information: Class: Date of Expiry:			

Type of Accident:	Injury Attended by Police	Drink Drive:	Date/Time of Accident:	Type of Location
Location:		No	29/12/2020 19:0	00
		Road Surface:		Boad Speed Limit
Clear		Road Surface: Dry		Road Speed Limit:
Weather: Clear Traffic Flow: Two Way Type of Collision			king	Road Speed Limit: 60 Km/h Traffic Volume: Moderate

Vehicle No.	Type	Make	Model			
SLR6784U	Car		widger	Color	Conditio	No of
021107040	Car	TOYOTA	SIENTA 1.5G CVT ABS	Red		0

Details of Vehicle Insurance
Vehicle No. Insurance Company Insurance No. Effective To Insurance No.
Insurance No Effective Expiry Date





4 of 4

Report No. T/20201230/7009

Police Station Of Origin: **Traffic Police** 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

#### CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 30/12/2020 11:00
Officer In Charge Of Case: TP / TPHQ / HO JIEKANG, IVAN Contact No.: 65476170	Classification Of Case:

**Authentication Stamp** NP168

## **LETTER OF AUTHORISATION**

VEHICLE NO. SLR 6784 N

Name of owner for Zhe- Yang	NRIC No. SXXXX291/D
Name of owner Log Zher Yang  Address < 0 Block 10001 Bubert Werch For	ne 3 #01-90 S(159723)
Name of driver #2 ALOVE	NRIC No
Address	
ACCIDENT INVOLVING SHR 6784 4 AND	SHC 7615 U
ON 24-Dec-2020 ALONG Mandas	
In consideration of M/S. SHU FATT AUTO WORKS repairing at my/our request, I/we, the abovenamed owner/drivinstruct and authorize SHU FATT AUTO WORKS to demonstruct and authorize SHU FATT AUTO works and/or third claimed and/or settled shall belong to SHU FATT AUTO my/our behalf. The settlement cheque should be madirectly.	ver of the said vehicle hereby irrevocably and/claim/settle/receive whatever amount party insurance company and all amount works to give an absolute discharge on
Dated this day of	20 21
Signature:	
Name :	19
Car No. : SLR 6784 U	

**Enquire Vehicle Insurance Details** 

Vehicle No. Incident Date/Time

Search Status Insurance Company Code

Insurance Company Name

SHC7615U 29 Dec 2020 / 19:00:00

Successful

F03

MS FIRST CAPITAL INSURANCE LIMITED

Previous

ОК



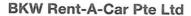
## **TAX INVOICE**

GST REG. NO.: 200106276D

DATE	INVOICE NO.
18/1/2021	A 42466

# INVOICE TO. LOY ZHI-YANG 1P PINE GROVE #04-82 SINGAPORE 591401

	VHA NO.	DUE DATE	VEH NO.	
	A 42466	18/1/2021	SLM 3723 S	
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT	
Account Name: BKW RENT A CAR PTE LTD	8	120.00	960.00	
Account No: 118-312-9991 Bank: UNITED OVERSEAS BANK LTD (UOB)	Subtotal	\$960.00		
Branch: UOB Shaw Centre Branch Bank Address: 1 Scotts Road #03-04 Shaw Centre Singapore 228208 Bank Code: 7375 Branch Code: 018 Swift Code: UOVBSGSG	GST @ 7%	\$67.20		
All cheques must be made payable to BKW RENT A CAR PTE LTD.  Please indicate the invoice number and vehicle number in the reference.	TOTAL		\$1,027.20	



120 Lower Delta Road #02-15 Cendex Centre (S) 169208 Tel: 6738 7777 Fax: 6738 6666





120 Lower Delta Road #02-15 Cendex Centre Singapore 169208 Tel: 6738 7777 Fax: 6738 6666 VHA No: A 4.24.66

ACRA No: 20-0106276-D GST Reg. No: 20-0106276-D 24 HOURS HELPLINE: 6223 1122

	27日-1533日 三元30日	05425 120013 10		65151147		
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		PER HISTORY	HIRIN	( march	(-K-	EMENT
2.10		4 10 10 10 10 10 10 10 10 10 10 10 10 10				

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HIRER'S PARTICULARS	Hirer's Own Vehicle No: 31 6 784 (16) 18 Replace Veh N	the hirer named vehicle descio
Name (as in I/C) to India Zinti Zinti Zinti Date of Birth; and India Spring and India Sprin	Loan Vehicle No: State 2773 M S VR No:	
	Make & Model: L. F. A. T. C. A. Auto/Manual Group:	
13. CH of page to the excitation of the page to will be visible in the care and equipment to the Owner Republic	Hard the bedrage end of CHARGES and the appearance decision with the CHARGES. The land source of the videous courses and videous courses are videous courses.	cts
( card vehicle was when a the little from the Owner.	Daily & day @\$ 120 Per day	\$960 F
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Occupation GP/Physician does deprivation to be be before the same of the beautiful of the b	Others are good to continue and the aborder sales are majored beliefed a	mH edt 11 - Þ
Driving Licence No:	CDW/PAI @\$ Per day/Monthly	Cwner lo
To the breach of the terms and conditions of the agreement of the reservoir.  D/L Type: Local/Int1/Others: a sale intermediate of the free type.	Delivery/Collection Svc	r ed) djive tr di vism
	the gais voit time vab as the to specify whose GST	\$67 2
DRIVER'S PARTICULARS	OR No: the morths and halise testing events and (A) SUB-TOTAL	\$1007 PC
Name (as in I/C) and hit /ing 12.6. Julia and a country of in prior begotte	Petrol Level OUT E 1/4 1/2 3/4 F	mida bne minedo
NRIC/Passport No: Date of Birth; 16 7 1980	Surcharge IN community and of the surface of the su	the Hines and shall Inquiries
Address: A do Alse we without the written greater and the Address and the second and a second with this torn may enter second or the second with this torn may enter second or the secon	Firstkm FREE per day GST	prinvogot :
that assure product and full responsibility and in the overtical time said retrieved, the charged as a result thereof, we chure shall introduce the charge of charged including the value of that the charge of the charged including the value of that the value of the	Excess mileage is chargeable at cents per km TOTAL CHARGES	99 94
Occupation Driving Exp: Yrs	MAN VIRAN VI	118.
Driving Licence No:  Passed / Expiry Date: entitle between the property of the	されついがらん プロジェストンディス・カース・カース・カース・カース・カース・カース・カース・カース・カース・カー	
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S - Scratches X - Crack		iver's Signature :
I have read and agree to the terms and condition on both sides of this agreeme	SINGAPORE Use Only	(a) JATACI DELIVERATE PARTICIPATION (CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACT
payable under this agreement and for parking and traffic infringements may be made on the charge/credit card voucher. All information I have been given the charge/credit card voucher. All information I have been given to the charge/credit card voucher. All information I have been given to the charge of the ch	ven BKW Rent A Car Pte Ltd in connection with this a legal costs on a full indemnity basis), whatsoever and howsoever suffered or incurred by you in respect of the vehicle or the use of vehicle. Full excess amount have to be paid immediately in the earth of the convent reserve the right not to replace an replacement vehicle occurred. Any damage to the car will be repair at BKW authorize Smoke or permit smoking and transport of pets in the vehicle are offensive smell e.g. cigarette, durian or pet's smell, the hirer and the cost of removing the offensive smell or pet's hair between \$1.0 and the cost of removing the offensive smell or pet's hair between \$2.0 and the cost of removing the offensive smell or pet's hair between \$2.0 and the cost of removing the offensive smell or pet's hair between \$2.0 and the cost of such response in the event the owner's 24-Hours Emergency Service is called the such occurrence, the Hirer shall bear the cost of such response 10. In case of accident, the hirer shall report to rental office immediate report must be made within 24 hours. Failure to comply, the hirer all liability from all parties claim. Full excess amount have to be put the event of an accident.  11. The hirer/Driver also have the responsibility to ensure that the rain the car is sufficient and do not drive when the vehicle is stall a sufficient water. Any damage to the engine will be bear by the hire 12. All customers' data will be kept strictly confidential and is solely to	greement is true er brought against, the operation of the event of an accident. cle if an accident d workshop. e not allowed. Any for driver shall bear 200 \$400. f vehicle's key or akdown and that upon to respond to at \$50.00 per trip. ately. An accident will have to borne band immediately in accident water level and does not have er/driver.
whatsoever reason in respect of or in connection with it's use or operation.  7. The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-wavier excess and cost expense (including	purpose of completing the sales transactions and other relating r  13. I understand and agree to the personal data collection statement Terms and Conditions Page.	natters.

Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"

Remarks

Time In

Mileage

Check By

Date In

The state of the s Hirer's/Driver Signature

Hirer's/Driver Signature