

# 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 : 21.01.2021

AXA Insurance Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn: Motor Claim Department

Dear Sir/Madam,

## ACCIDENT INVOLVING VEHICLES : SJN 8437D / SHD 3386B ON 12.01.2021

We are the authorized repair workshop for the owner of motor vehicle no: **SJN 8437D**, which was involved in the captioned accident with your insured vehicle no: **SHD 3386B**. 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)	\$ 4,815.00
2) Loss of Use (5 days + 1 Sunday X S\$60)	\$ 360.00
	<u>\$ 5,175.00</u>

We enclosed herewith the following documents to support the claims:

- |                          |                                    |
|--------------------------|------------------------------------|
| a) Final Repair Invoice  | b) Letter of Authorisation, etc... |
| c) GIA Report            | d) I/C & Driving Licence           |
| e) Insurance Certificate | f) 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@fastechnauto.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**

AXA Insurance Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn : Motor Claim Department

Tax Invoice : 22183

Date : 21.01.2021

Vehicle No : SJN 8437D

Make/Model : NISSAN LATIO 1.5

Chassis/Eng# :

Accident Date : 12.01.2021

Claim No :

Reference : 0121 -22183

Policy No :

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		Amount
To proceed on lump sum repair	S\$	4500.00

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E. & O. E.

Total : S\$

4500.00

GST @ 7% : S\$

315.00

*Amount Due* : S\$

**4815.00**

  
for FASTECH AUTO PTE LTD

All Invoices are subjected to GST



## AUTHORISATION TO ACT

I/We, Mok Siew Sum (the third party claimant") of Blk 122 Jurong East  
Street 13 #04-29 Singapore 600122 (address), owner of SJN 8437D (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.  
SJN 8437D that was damaged pursuant to the accident which occurred on 12-01-2021 (date)  
along AYE Towards Changi (After Buona Vista) (location) involving  
vehicle no/s SHD 3386 B ("the accident").

I further authorize the workshop to settle my 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.

Dated this 12 (day) of Jan (month) 2021 (year)



Signed by "the third party claimant"  
(with company stamp if applicable)

Signed by "the workshop"  
(with company stamp)

## 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 Submission	12/01/2021 14:50 (SGT)
Date of Accident	12/01/2021 10:10 (SGT)
Exact Location of Accident	AYE, Singapore
Additional Location Information	TOWARDS CHANGI (AFTER BUONA VISTA)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN8437D
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOK SIEW SUM
NRIC No	SXXXX394F
Email Address	mssmact@gmail.com
Mobile Phone No	(Phone) +65-97568295
Alternative Phone No	+65-97568295

#### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Latio
Variant	-
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 - Claiming third party
Vehicle Category	Private car

#### INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100123937-11
Cover Note Number	-

#### DRIVER

Name of Driver	MOK SIEW SUM
NRIC No	SXXXX394F
Date Of Birth	31/10/1948
Occupation	Indoor



Date Of Driving Pass .....	26/07/1977
Driving experience .....	43 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97568295
Alt. Phone Number .....	+65-97568295
Email Address .....	mssmact@gmail.com
Address .....	BLK 122 JURONG WEST STREET 13
Address complement .....	#04-29
Postcode .....	600122
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

Type of Accident .....	Collision - Head to Rear
Weather Conditions .....	Raining
Road Surface .....	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### PLEASE 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 .....	SHD3386B
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-

Nature Of Damage ..... -  
Details of property damaged in accident ..... -  
No. Of Passenger (Including Driver) ..... -

#### INJURED PERSONS DETAILS

##### INJURED 1



Name of injured person ..... MOK SIEW SUM  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... SLIGHT INJURY  
Injured person in which vehicle? ..... SJN8437D  
Were seat belts worn? ..... Yes  
Was this injured conveyed to hospital by ambulance? ..... No



SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
  2. The Form must be completed by the Policyholder and/or the Authorized Dealer.
  3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate and/or forfeit.
  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 filed by the insurers of the GI 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)
- 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 envelop/postal 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.

Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
 Sketch Plan 12/11/2021	 12/11/2021	12/11/2021
A) 31N 8437D B) 3ND 3386B		


**Describe Circumstances of the Accident**


On 12/12/2021 at about 10:00am, I was travelling along AYE FRANKS  
 Changi (After Buena Vista). The front vehicle slowed down and stopped  
 I followed. Suddenly vehicle B hit on my vehicle A.

**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

  
 Witnessed by Reporting Centre  
 (Personal)



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number **S0143394F**  
Name **MOK SIEW SUM**  
Birth Date: **31 Oct 1948**  
Issue Date: **05 May 2003**

1000446331D

**For Insurance Reporting And  
Claim Purposes Only**

**REPUBLIC OF SINGAPORE**  
IDENTITY CARD NO. **S0143394F**

Name **MOK SIEW SUM**  
**莫紹森**  
Race **CHINESE**  
Date of birth **31-10-1948**  
Country/Place of birth **SINGAPORE**  
Sex **M**

6393485

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:**

Class 3 **Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms**  
26 Jul 1977

NP 428A

Licence No: **S0143394F**

**6393485**

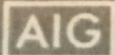
NRIC No. **S0143394F**

Date of issue **21-02-2020**

Address  
**APT BLK 122 JURONG EAST STREET 13  
#04-29  
SINGAPORE 600122**

*[Handwritten signature]*





# CERTIFICATE OF INSURANCE

## NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Mok Siew Sum  
Period of Insurance : 27 Feb 2020 To 26 Feb 2021  
Engine No. : HR15076950B  
Chassis No. : JN1BAAC11Z0020981

Vehicle No. : SJN8437D  
Policy No. : 2100123937-11  
Endorsement No. :  
Issued Date : 12 Feb 2020

### ABOUT THE COVER

Make/Model : NISSAN LATIO 1.5  
Engine Capacity/Tonnage : 1,498.00 CC  
Driver Restriction : NA  
Person or Classes of Persons Entitled to Drive\* :  
Sum Insured : Market Value  
Off Peak Car : No  
First Year of Registration : 2009  
Insuring with COE/PARF : Yes

a) The Policyholder  
b) Any other person who is driving on the Policyholder's order or with his/her permission.  
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition  
Limitation as to use\* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or 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.

Loss of Use 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

### EXCESS

Section 1  
Fire - \$0 Own Damage - \$1100 Theft - \$0 Flood Cover - \$1100

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Mok Siew Sum - \$1100 (Own Damage), \$1100 (Flood Cover)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513
2. TC AutoClinic Add: No 1, Sixth Lok Yang Road Singapore 628099 62822212
3. Autolusion Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64694091 64694092 64694093
5. Tan Chong Motor Sales Add: 17 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.sg](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: UOB LIMITED

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500610456

TAN CHONG CREDIT PTE LTD - LLO

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE  
SINGAPORE 589623 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Gek Chai Sylvia Lim



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	394F
<b>Vehicle Details</b>	
Vehicle No.:	SJN8437D
Vehicle to be Exported:	No
Intended Deregistration Date:	12 Jan 2021
Vehicle Make:	NISSAN
Vehicle Model:	LATIO 1.5L AT ABS D/AIRBAG 2WD 4DR
Primary Colour:	Beige
Manufacturing Year:	2008
Engine No.:	HR15076950B
Chassis No.:	JN1BAAC11Z0020981
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$18,697.00
Original Registration Date:	27 Feb 2009
First Registration Date:	27 Feb 2009
Transfer Count:	0
Actual ARF Paid:	\$18,697.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	26 Feb 2029
COE Category:	E - Open Category
COE Period(Years):	10
PQP Paid:	\$25,727.00
COE Rebate Amount:	\$20,903.00
<b>Total Rebate Amount:</b>	<b>\$20,903.00</b>

The information contained herein is correct as at 12 Jan 2021

OK