



WITHOUT PREJUDICE

Our Ref: GBJ 5646C

Your Ref: SLB 4482M

26th March 2021

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AIG Asia Pacific Insurance Pte Ltd

Dear Hsiao Tong,

Accident Involving: GBJ 5646C and SLB 4482M

Date of Accident: 9 March 2021

Location of Accident: Keong Saik Rd

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair Inc. GST	\$ 6,206.00	\$5800 COR + \$406 GST 7%
Add Loss of Use	\$ 1,440.00	12 DAYS
**2+1 Days PRS (13/14/15 Mar) + 1 Day Resurvey (16/17 Mar) + 7 Repair Days Agreed + 1 Sunday		
Total	\$ 7,646.00	
Add LTA Search Fee	\$ 7.45	
GRAND TOTAL	\$ 7,653.45	

Kindly pay the Grand Total Amount of **\$7,653.45** to:

Team AutoPro Pte Ltd
160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

Thank you.



Regards
Adel (Ms)

Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

Tel: 6258-1955 Fax: 6258-1956 Email: teamautoffice@gmail.com / teamautopl@gmail.com

PROFORMA INVOICE

**ATTENTION:**

Atom Events & Marketing Pte Ltd

PI Number	P2103-2106
PI Date	26-Mar-2021
Vehicle No.	GBJ 5646C
Accident Date	9-Mar-2021

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. GBJ 5646C	COR Lump Sum		\$ 5,800.00

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$	5,800.00
GST 7%	\$	406.00
GRAND TOTAL AMOUNT	\$	6,206.00

Authorized Signature



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 13 Mar 2021 / 15:56:21

Receipt Date/Time : 13 Mar 2021 / 15:56:13

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210313-001608

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 - SLB4482M				
As at 09 Mar 2021/14:45:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SLB4482M			
	Enquiry Fee	7.00	0.49	7.49
	20210313154541253236			
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	426569XXXXXX8855	eNETS Credit Card		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	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.

To : **Team AutoPro Pte Ltd**
CRN : **201811621K**
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

Letter of Authorization & Undertaking

In Respect of Accident Involving my/our Vehicle No.: GBJ 5646 C
and SLB 4482 M and
and and
@ KEONG SAIK ROAD
dated 09/03/2021

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,


Claimant Signature & Co's Stamp (if applicable)



Date:

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	10/03/2021 14:08 (SGT)
Date of Accident	09/03/2021 14:45 (SGT)
Exact Location of Accident	Keong Saik Rd., Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ5646C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ATOM EVENTS & MARKETING PTE LTD
Company Reg No	-
Email Address	ERIC.NG@ATOM.SG
Mobile Phone No	(Phone) +65-98333329
Alternative Phone No	+65-98333329

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	3000

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00036832000
Cover Note Number	-

DRIVER

Name of Driver	SOORIYAMOORTHY SATHISH
Work Permit No	GXXXX332K

Date Of Birth	29/07/1988
Occupation	Outdoor
Date Of Driving Pass	21/11/2016
Driving experience	4 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90390788
Alt. Phone Number	-
Email Address	ERIC.NG@ATOM.SG
Address	BLK 440A FERNVALE LINK #13-177
Address complement	-
Postcode	791440
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry

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?	No
Was any injured conveyed to hospital by ambulance?	-
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

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	SLB4482M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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) -

SKETCH PLAN

IMPORTANT NOTICE

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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.
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)**

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.

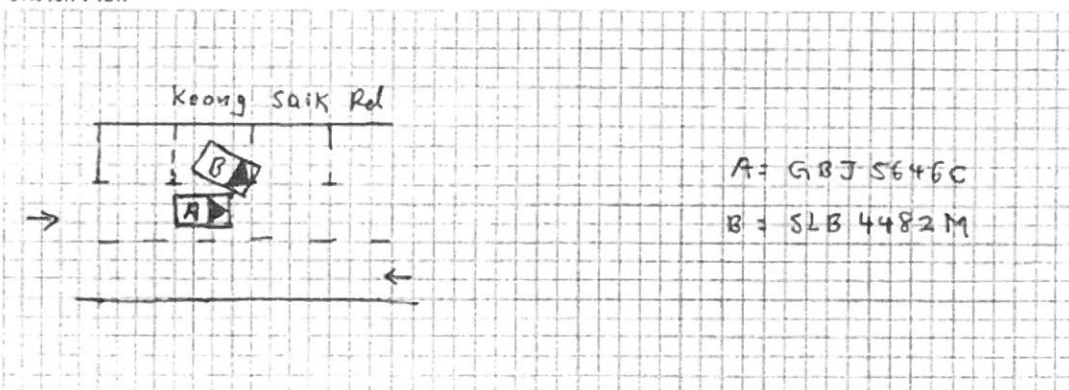


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

I was travelling along Keong Saik Rd ,
 While going straight, suddenly Veh B dashed out
 from my left side parallel parking and hit onto
 my Veh left front portion. I wish to state, Veh
 B no signal and come out from side parking

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 Personnel



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09.00 - 17.00
 UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN 09213A 0007 Vehicle Registration No: GBJ 5646 C
 Name (as shown in NRIC): Atom Events & Marketing Pte Ltd NRIC/FIN/Passport No: 201136356M
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address: 57 Kallang Pudding Road #05-01, Tong Lee Building Blk B Singapore 349859
 Contact (Tel): 9833 3329 Mobile No.: 9833 3329
 Email Address: eric.ng@atom.sg
 Date of Accident: 9/3/2021 Time of Accident: 14.45 Hrs
 Place of Accident: Keong Sae Rd
 Insurance Company: China Taiping

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To Amend no video footage.

Policyholder / Driver's Signature
 Date: _____

Reporting Centre Personnel's Signature
 Name: _____
 NRIC/FIN No.: _____
 Date: 22/3/21



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

N SN

AN0394A

Cov. Type:C

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.

DMCVSNW00036832000

Engine No.: 1KD2856642

Cha. No.: JTFAT35Y40K213279

1. Index Mark and Registration
Number of Vehicle

GBJ5646C

AUTOSAFE

=====

2. Name of Policy Holder

ATOM EVENTS & MARKETING PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

31/05/2020

Excess Sect I. S\$500.00
EX ON WINDSCREEN. S\$100.00

4. Date of Expiry of Insurance

30/05/2021

5. 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.

6. Limitations as to use:*

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) Use whilst drawing a trailer except the towing of 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).

Denso Insurance Agency Pte Ltd

Please see reverse

8001 Beach Road

#02-57 Golden Mile Tower

Singapore 199589

Hp: 9382 5631 Fax: 6234 4596

Email: denso2288@gmail.com

Issued By: DENSO INSURANCE AGENCY PTE LTD

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com


S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
EVENT CREATIVE PTE. LTD.

Name
SOORIYAMOORTHY SATHISH

S Pass No.
0 35787569

Sector
MANUFACTURING

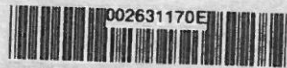
 K1504419

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G2160332K**

Name
SOORIYAMOORTHY SATHISH

Birth Date: **29 Jul 1988**
Issue Date: **21 Nov 2016**
Valid Till **20/11/2021**

 002631170E

VISIT PASS
Immigration Regulations

Name
SOORIYAMOORTHY SATHISH

FIN
G2160332K

Date of Birth
29-07-1988


Sex
M

Nationality
INDIAN

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

Download SGWorkPass
App to check status



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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ **21 Nov 2016**

NP 428A

Licence No: G2160332K