

To: **India International Insurance Pte Ltd**
64 Cecil Street #04/#05
IOB Building
Singapore 049711

Attn: **Motor Claims Department**

Date: 9th July 2021

Dear Sir/Madam,

Claimant: **Tan Zijian**
394 Yishun Avenue 6
#11-1086 Singapore 760394

"WITHOUT PREJUDICE"

We are instructed by the above named to claim damages against you in connection with a road traffic accident on 30/05/2021 at along SLE(CTE), before Upper Thomson involving our client's vehicle registration number SDS 5365 S and vehicle registration number SLQ 8274 S 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	\$3,200.00
2) Loss of Rental (SGD\$120.00 x 4days)	\$480.00
3) LTA Search Fee	\$7.45

Total : **\$3,687.45**

A copy each of the following supporting documents is enclosed:

- Singapore Accident Statement
- Rental 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 Submission 31/05/2021 15:39 (SGT)
Date of Accident 30/05/2021 15:45 (SGT)
Exact Location of Accident SLE, Singapore
Additional Location Information BEFORE UPPER THOMSON.
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDS5365S

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN ZIJIAN
NRIC No SXXXX688B
Email Address zijian1990@hotmail.sg
Mobile Phone No (Phone) +65-86888540
Alternative Phone No +65-86888540

VEHICLE PARTICULARS

Manufacturer Honda
Model Stepwagon
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
Transmission Auto
CC 2000

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number P10548228R00
Cover Note Number -

DRIVER

Name of Driver TAN ZIJIAN
NRIC No SXXXX688B

Date Of Birth	31/01/1990
Occupation	Indoor
Date Of Driving Pass	26/08/2011
Driving experience	9 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86888540
Alt. Phone Number	+65-86888540
Email Address	zijian1990@hotmail.sg
Address	BLK 394 YISHUN AVE 6 #11-1086
Address complement	-
Postcode	760394
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 - Change/cross lane
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

ON THE STATED DATE AND TIME, I VEHICLE A SDS5365S, WAS TRAVELLING STRAIGHT ALONG THE STATED VENUE, FRONT VEHICLES MADE AND ABRUPT BRAKE AND I IMMEDIATELY BRAKE AS WELL. ABOUT 1-2 SECONDS LATER, VEHICLE B SLQ8274S HIT ONTO MY VEHICLE'S REAR PORTION.

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	SLQ8274S
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) -

Report send to zoomautowerks@gmail.com

SKETCH PLAN

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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' 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' law yers/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 & Time

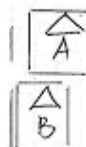
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

Vehicle A: SDS5365S

Vehicle B: SL08274S



SLE (CTE), before Lipp-Thomson


Describe Circumstances of the Accident

On the stated date & time, I, vehicle 'A',
 SDS53655, was travelling straight along the stated
 venue. Front vehicles made an abrupt brake and I
 immediately brake as well. About 1 - 2 seconds later,
 vehicle 'B', SH282945, 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

Witnessed by Reporting Centre
 Personnel











It pays to choose

**Budget
Direct**
insurance

Certificate of Insurance

 Comprehensive Car Policy
 Policy Number: P10548228R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.


Certificate Number P10548228R00 s(Comprehensive / Named Driver Plan)

1) Vehicle Registration Number	:	SDS536SS
Chassis Number	:	-
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	05/04/2021 (00:00)
3) Date / Time of Expiry of Insurance	:	31/12/2021 (23:59)
4) Excess (i) Policy	:	S\$ 600.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Tan Zijian
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
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 any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.		
Main Driver / Date of Birth	:	Tan Zijian(31/01/1990)
Named Driver(s) / Date of Birth	:	No driver is named.
7) Limitation as to use*		
Use only for social, domestic and pleasure purposes and for the occasional business purposes of the drivers listed above. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.		
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.		
8) Finance Company	:	NA

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) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on
 04/04/2021

 Auto & General Insurance (Singapore) Pte. Limited
 Trading as Budget Direct Insurance



 Simon Birch
 Chief Executive Officer

 Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**
 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg

**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: **India International Insurance Pte Ltd**
64 Cecil Street #04/#05
IOB Building
Singapore 049711

PF No. : ZP0000548
Date : 9/7/2021
VRN : SDS 5365 S
Make & Model : Honda Stepwagen
DOA : 30/5/2021
Terms : COD

S/N.	Description	Qty	U/P	Amt
1	Repair & Respray Accident Affected Portions			3,200.00
2	Loss of Rental (SGD\$120.00 x 4Days)			480.00
3	LTA Search			7.45

TOTAL :	\$3,687.45
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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 30/05/2021 @ 15:45 along SLEETIE, before Upp. Thomson.
Involving vehicles SDS 5365S and SLQ 8274S.

In consideration of **Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130**, repairing my/our motor vehicle no SDS 5365S at my request, I/We, Tan Zijian ("the claimant") of 394 Yishun Ave 6, #11-108b S (760394) (address) bearing NRIC No S9003688B the owner of motor vehicle no SDS 5365S, 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 30 day of 05 (month) 20 21 (year)



[Signature]
Signed by "the claimant"

Name: Tan Zijian

NRIC No: S9003688B

[Signature]
Signed by **Zoom Autowerks Pte Ltd**

Name: Lim Can



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 01 Jun 2021 / 10:44:11

Receipt Date/Time : 01 Jun 2021 / 10:44:11

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210601-001135

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 - SLQ8274S As at 30 May 2021/15:45:00 Insurance Co: INDIA INT'L INS PTE LTD Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD			
1	Insurance Enquiry - SLQ8274S Enquiry Fee 20210601104228898683	7.00	0.49	7.49
	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 526471XXXXXX0962		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.

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. : **INV0000615**
Date : 26/6/2021
Ref : SGT 8972 D
Your Ref : SDS 5365 S
Terms : 30Days

#	Rental Period	Rate	Quantity	Amount
1	Rental Charges for SGT 8972 D (31/05/2021 to 04/06/2021)	\$120.00	4 Days	\$480.00

C/O Tan Zijian

394 Yishun Avenue 6

#11-1086 Singapore 760394

Contact: 8688 8540

Total : \$480.00

**ZOOM CAR
LEASING**

(Customer's Signature/Stamp)

(For Zoom Car Leasing)

RENTAL AGREEMENT

HIRER'S PARTICULAR		VEHICLE DETAIL																					
Name: Tan Zijan		Vehicle No.: SGT8972D																					
NRIC/Passport No.: S9003688B		Vehicle Make/Model: Kia Cerato																					
Address: 394 YBhnn Ave 6, #11-1086 S(760394)		Date/Time Out: 31/05/2021																					
Tel: 8688 8540		Date/Time In: 04/06/2021																					
Driving License No./Exp.:		<table><tr><td>E</td><td>1/4</td><td>1/2</td><td>3/4</td><td>F</td></tr><tr><td colspan="5">OUT</td></tr></table> <table><tr><td>E</td><td>1/4</td><td>1/2</td><td>3/4</td><td>F</td></tr><tr><td colspan="5">IN</td></tr></table>		E	1/4	1/2	3/4	F	OUT					E	1/4	1/2	3/4	F	IN				
E	1/4	1/2	3/4	F																			
OUT																							
E	1/4	1/2	3/4	F																			
IN																							
ADDITIONAL DRIVER'S PARTICULAR		Mileage: Mileage:																					
Name:		RENTAL CHARGES																					
NRIC/Passport No.:		<table><tr><td>Hours</td><td>@</td><td>per hour</td><td></td></tr><tr><td>4</td><td>Days</td><td>@ \$120</td><td>per day \$480</td></tr><tr><td>Weeks</td><td>@</td><td>per week</td><td></td></tr><tr><td>Months</td><td>@</td><td>per month</td><td></td></tr></table>		Hours	@	per hour		4	Days	@ \$120	per day \$480	Weeks	@	per week		Months	@	per month					
Hours	@	per hour																					
4	Days	@ \$120	per day \$480																				
Weeks	@	per week																					
Months	@	per month																					
Address:		Other Charges																					
Tel:		Petrol Top-Up																					
Driving License No./Exp.:		Sub-total																					
(A) - Accident (D) - Dent (S) - Scratch		TOTAL CHARGES																					
		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:		Hirer's Signature / Date																					
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		 Zoom Car Leasing																					
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																							
3. Use of vehicle for illegal purposes (e.g. in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited.																							
4. In case of accident, the hirer shall report to Zoom Car Leasing immediately.																							
		Owner's Signature / Date																					