

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 : 18.06.2021

AXA Insurance Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SLC 6889E / SFF 6863J ON 04.06.2021

We are the authorized repair workshop for the owner of motor vehicle no: **SLC 6889E** , which was involved in the captioned accident with your insured vehicle no: **SFF 6863J** . 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)	\$ 6,955.00
2) Loss of Use (9 days + 2 Sunday X \$60)	\$ 660.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 7,617.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|------------------------------------|--------------------------|
| a) Final Repair Invoice | b) GIA Search Result |
| c) Letter of Authorisation, etc... | d) GIA Report |
| e) I/C & Driving Licence | f) Insurance Certificate |
| g) 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@fastechauto.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 : 22427

Date : 18.06.2021

Vehicle No : SLC 6889E

Make/Model : TOYOTA VIOS E

Chassis/Eng# :

Accident Date : 04.06.2021

Claim No :

Reference : 0621 -22427

Policy No :

	Amount
To proceed on lump sum repair	S\$ 6500.00

E. & O. E.

Total : S\$ 6500.00

GST @ 7% : S\$ 455.00

Amount Due : S\$ 6955.00


for FASTECH AUTO PTE LTD

INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

SFF6863J

Date of Accident

04/06/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance AXA Insurance Pte Ltd

Period of Insurance 24/02/2021 - 23/02/2022

Requested By ALLAN TANG (KIM CHWEE AUT...

Requested Date 04/06/2021 16:29

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

AUTHORISATION TO ACT

I/We, EasyDrive Car Rental (the third party claimant") of 200 Jalan Sultan #02-38
Textile Centre Singapore 199018 (address), owner of SLC 6889E (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.
SLC 6889E that was damaged pursuant to the accident which occurred on 04.06.2021 (date)
along Old Tampines Road (location) involving
vehicle no/s SFF 6863J ("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 04 (day) of June (month) 2021 (year)

EasyDrive Car Rental
200 Jalan Sultan
#02-38 Textile Centre
Singapore 190018
Tel: 9673 5989 Fax: 6883 2418
Email: easydrivesg@gmail.com
UEN: 53375068L

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	07/06/2021 09:17 (SGT)
Date of Accident	04/06/2021 15:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	OLD TAMPINES ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC6889E
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	EASYDRIVE CAR RENTAL
Company Reg No	5XXXX868L
Email Address	jasonkcapl@gmail.com
Mobile Phone No	(Phone) +65-96735989
Alternative Phone No	+65-96735989

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	TOYOTA / VIOS E GRADE 1.5 A/T
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1498

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	5117282402-01
Cover Note Number	-

DRIVER

Name of Driver	LIM CHENG HOE
NRIC No	SXXXX457E

Date Of Birth	10/03/1964
Occupation	Outdoor
Date Of Driving Pass	28/03/1985
Driving experience	36 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93364314
Alt. Phone Number	-
Email Address	jasonkcapl@gmail.com
Address	BLK 785A WOODLANDS RISE #11-140
Address complement	-
Postcode	731785
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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?	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

REFER ATTACHED;

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	SFF6863J
Vehicle Manufacturer	Toyota
Vehicle Model	TOYOTA / ESTIMA AERAS 2.4 A
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LIM CHENG HOE
Address	BLK 785A WOODLANDS RISE #11-140
Address Complement	-
Post Code	731785
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLC6889E
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. 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.
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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.

EasyDrive Car Rental
700 Jalan Sultan
#02-38 Textile Centre
Singapore 155018
Tel: 9673 5989 Fax: 6583 2418
Email: easydrive.sg@gmail.com
UEN: 53375858L

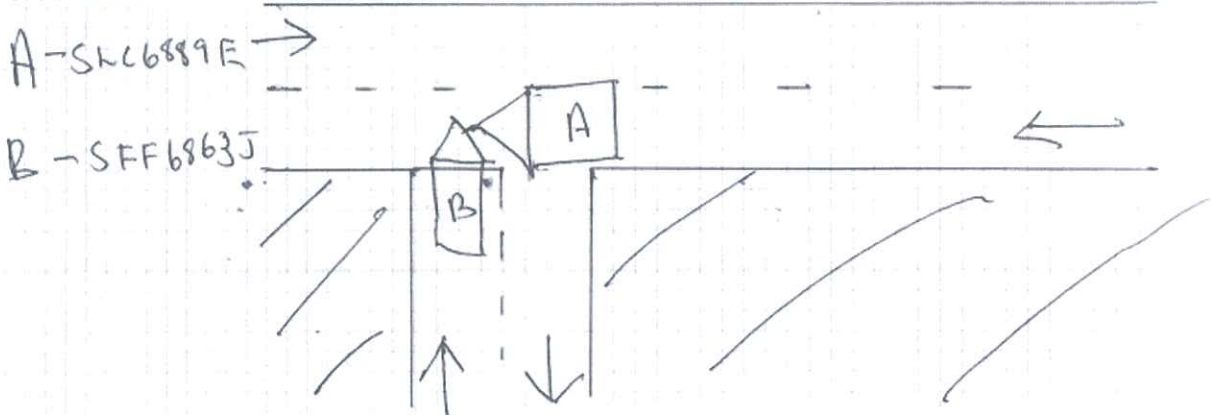
IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vacbk@vicom.com.sg

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

07 JUN 2021

Sketch Plan

Describe Circumstances of the Accident

I was traveling on the above mention date n time.
 & Suddenly veh B ~~had~~ fail to stop at the stop line
 n crash into my car

Declaration

We declare the foregoing particulars are true in every respect.

EasyDrive Car Rental

200 Jalan Sultan
 #02-38 Textile Centre
 Singapore 199018
 Tel: 9673 5989 Fax: 6883 2418
 Email: easydrivesg@gmail.com
 UEN: 53375868L

Policyholder's Signature / Date &
 Time

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

IDAC KAKI BUKIT (VAC)
 23 Kaki Bukit Ave 4 #02-02
 Singapore 415933
 Tel: 67416697 Fax: 67492305
 Email: vackb@vicom.com.sg

Witnessed by Reporting Centre
 Personnel

07 JUN 2021

For Insurance Reporting And
Claim Purposes Only

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1634457E



Name

LIM CHENG HOE

林 清 和

Race

CHINESE

Date of birth

10-03-1964

Sex

M

S1634457E

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1634457E
Name:

LIM CHENG HOE

Birth Date: 10 Mar 1964

Issue Date: 13 Feb 2003



1000199375K

For Insurance Reporting And
Claim Purposes Only



NRIC No. S1634457E



Date of issue

07-03-2012

APT BLK 785A WOODLANDS RISE #11-140
SINGAPORE 731705

NRIC No: S1634457E
SINGAPORE 300223

Date: 15/01/2020

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

Class 2B Motorcycles not exceeding 200 cc
Class 3 Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

PASS DATE
04 Oct 1983
28 Mar 1985



Licence No: S1634457E

NP 428A

For Insurance Reporting And
Claim Purposes Only

Land Transport Authority

VOCATIONAL LICENCE



Licence No: S1634457E

Name: LIM CHENG HOE

Issue Date: 28/7/2005

Expiry Date: 27/7/2008

For Insurance Reporting And
Claim Purposes Only

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	11/03/1997
02	TAXI VL	19/03/1998
04	BUS ATTENDANT	11/03/1997



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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5117282402-01

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SLC6889E**
Chassis Number : **MHFBT9F3106065334**
2. Name of Policyholder : **EASYDRIVE CAR RENTAL**
3. Effective Date of Insurance : **24 May 2021**
4. Expiry Date of Insurance : **23 May 2022**
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her 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#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

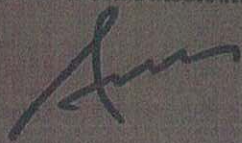
This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: S\$1,500
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: KENSO LEASING PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : ASSURE PTE. LTD. (00000572842)
Date of issue : 03 May 2021 09:51 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Business

Owner ID:

868L

Vehicle Details

Vehicle No.:

SLC6889E

Vehicle to be Exported:

No

Intended Deregistration Date:

04 Jun 2021

Vehicle Make:

TOYOTA

Vehicle Model:

VIOS E GRADE 1.5 A/T

Primary Colour:

Silver

Manufacturing Year:

2015

Engine No.:

1NZZ326632

Chassis No.:

MHFBT9F3106065334

Maximum Power Output:

80.0 kW (107 bhp)

Open Market Value:

\$13,699.00

Original Registration Date:

24 May 2016

First Registration Date:

24 May 2016

Transfer Count:

2

Actual ARF Paid:

\$13,699.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

23 May 2026

PARF Rebate Amount:

\$9,589.00

Intended COE Rebate Details

COE Expiry Date:

23 May 2026

COE Category:

A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$45,504.00

COE Rebate Amount:

\$22,605.00

Total Rebate Amount:

\$32,194.00

The information contained herein is correct as at 04 Jun 2021

OK