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: 22.09.2021

AXA Insurance Pte Ltd 8 Shenton Way #27-01 AXA Tower Singapore 068811

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: SMH 5572L / SLR 5290J ON 06.08.2021

We are the authorized repair workshop for the owner of motor vehicle no: SMH 5572L , which was involved in the captioned accident with your insured vehicle no: SLR 5290J . 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)	\$ 10,700.00
2)	Loss of Rental	\$ 1,050.00
3)	GIA Search Fee	\$ 2.00
4)	Towing Fee	\$ 120.00
		\$ 11,872.00

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) Towing Bill
- e) Letter of Authorisation, etc...
- g) I/C & Driving Licence
- i) Vehicle Registration Log Card

- b) Car Rental Invoice / Agreement
- d) GIA Search Result
- f) GIA Report
- h) Insurance Certificate

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: 22516

Date

:22.09.2021

Vehicle No

:SMH 5572L

Make/Model : BMW X3

Chassis/Eng# :

Accident Date : 06.08.2021

Claim No Reference

:0821 -22516

Policy No

Amount

To proceed on lump sum repair

S\$

10000.00

E. & O. E.

Total: S\$

10000.00

GST @ 7% : S\$

700.00

Amount Due: \$\$

10700.00

for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883. TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 21861

RENTER'S/DRIVER'S SIGNATURE

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Name Ng Sin Teek (S7611538I) ADDRESS 7 Pine Grove #07-02	a mil administrator book and	REG. No.	MAKE MODEL:			
ADDRESS 7 Pine Grove #07-02		SMM 5332L		EL PETROL	E 1/4 1/2 3/4	
Singapore 597592		KM N	drao an	DATE & TIME IN		
31/13/2	ii sabau aut an	KM		14/08/2021 @ 11:00AM DATE & TIME OUT 07/08/2021 @10:30AM		
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IMPORTANT NOTES:	A	IY INITIALLING, RE GREES TO PAY AD OR COLLISION DAM VAIVER (C.D.W.)	D FEE	SUB-TOTAL	GT (0)	
This vehicle is licenced to carry 04 passengers only. No refund will be given for vehicle returns early. No refund will be given for period left in vehicle.		together amorals to early	oulini se	TOTAL RENTAL	\$1050-00	
Hirer is liable to pay loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking ee and traffic summonese. Vehicle return during office hour only.	damon y		rmin en	DELIVERY FEE	onfile	
No service on Public Holiday and Sunday. Geographical areas: Singapore & West Malaysia. Driver must be: a) 18 years old and above.				COLLECTION FEE	panud a Vis anv	
b) By east out and above. b) Holding a valid relevant class of driving license. The vehicle is strictly to be driven by the person to whom it is hired to and the additional driver named in the agreement of the hirer is not allowed to sub-let the vehicle to another party and subletting is not covered.	nt. P	ER DAY PER WE		PER MONTH		
ADDITIONAL CONDITIONS:	B	Y INITIALLING, REI	UTED	Alexandra (Jacob) Nameo (Jacob)	Brit yd	
COMPREHENSIVE COVERED EXCESS: *Section I - Used in S'pore Only: SGD 2000.00 *W/screen Excess In S'pore: SGD 100.00 *W/screen Excess In S'pore: SGD 100.00 *W/screen Excess Outside S'pore: SGD 100.00	A FC	AGREES TO PAY ADD FEE FOR PERSONAL ACCI DENT INSURANCE (P.A.I.)				
THIRD PARTY COVERED EXCESS: *Hirer must bear all costs to the damages of the return vehicle. *Section II - Used in S'pore Only: SGD 1500.00		bee of or dunages of the control of		ell de fon libre son XXII te al novies tel	O off 11 fo yes	
*Hirer must bear all costs to the damages of the return vehicle. *Section (I - Used Outside S'pore: SGD 3000.00	PE	ER DAY PER WE		PER MONTH	is each is each and to	
YOUNG AND INEXPERIENCE DRIVER Hirer or any authorised driver who is age 22 years old (on the date accident) and below or possess	Amount of the same	man seriance ³ retem	S	ANCO TOM SESSION	V-ent2t	
18 month or less driving experience. COMPREHENSIVE COVERED EXCESS:	PF	REPAYMENT		TOTAL CHARGE		
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*Hirer must bear all costs to the damages of the return vehicle. *Section II - Used Outside S'pore: SGD 12,000,00		theread	TEQ VI	Agreeman, and ev	eld to	
Hirer is responsible for any costs to the THIRD PARTY DAMAGE / INJURY claims.	AN	MOUNT DUE / REFU	ND	office december with	(d)	
I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THEREOF.	nave bearing on the	contract made between may engine with a visual may greenent shall be visual	slorly se os no as A Entrac	Wedictors ingmess of second nother stage earlies at the centers behavior mean	V SHT CYL	
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DYNAMIC CAR RENTAL	^	RENTE	R'S/DF	RIVER'S SIGNA	TURE	

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: NG SIN TECK

Invoice

: DCR-2021-08-20

Date : 14.08.2021

Agreement No : 21861

Payment Terms: LOD

DESCRIPTION

AMOUNT

Rental charges for vehicle: SMM 5332L (0821-22516)

\$ 1,050.00

Rental Period from 07.08.2021 to

14.08.2021

E. & O. E.

Total

1,050.00

ASHLEY

for Dynamic Car Rental

CASH SALE/WORK ORDER

NO. 41813



東方拖車服

ORIENTAL AUTOMOTIVE CENTRE

Regn. No: 50727900W

Blk 405 Ang Mo Kio Ave 10 #03-683 Singapore 560405

H/P: 9833 6132

24 HOURS TOWING SERVICES

24 HOURS TOW	ING SERVICES	
	г	Date
宝号		oute.
Messrs CAT		
车号 Vehicle No.	^{车型} Model No. <i>Bace</i>	シャュ
From: SENTESA GATILOA!	10: 45/5/h	i ie
时间(日/夜) Time (day / night) つつらし		MAID
其他 (Other	<u> </u>	-
CASH \$ /26/	CHEQUE	
注意:本公司对所拖之车辆,在进行中如有	任何损失或破坏, -	一概由车主自行负责
NOTE: Vehicle is towed at owner's risk. The company accept your vehicle whilst being towed.		
经 手 人 Authorised by	收货人 Received by	

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLR5290J

Date of Accident

06/08/202

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Period of Insurance _______ 28/08/2020 - 27/08/2021

Requested By _____ ALLAN TANG (KIM CHWEE AUT...

Requested Date ______ 07/08/2021 09:39

Payment details

Request Amount: **\$\$1.87**GST Amount: **\$\$0.13**Total Amount Due (GST

Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

AUTHORISATION TO ACT

I/We Ng Sin leck	(the third party claimant") of The Grove
to7-02 S(597592)	(address), owner of SMH 5572L (vehicle no.) hereby
authorize Fastech Auto Pt	(the third party claimant") of The Grove (address), owner of MH 5572L (vehicle no.) hereby ("the workshop") to act for me with respect
to my claim for repair costs and/or	r rental and/or loss of use ("claim") for my vehicle no. If the description of the accident which occurred on 06/08/2021 (date)
I further authorize the workshop	to settle my above mentioned claim in a manner that they
deem fit and the workshop is furth	her authorized to receive payment further to settlement of my
claim with payment cheque/s bein	g made in favour of the workshop.
	settlement the workshop may reach on my behalf is on a mission of liability basis insofar as the driver/owner/insurers
Dated this	Aug (month) 201 (year)
XO	
Signed by "the third party claiman	
twith company ctamp if applicable	e) (with company stamp)

S101218A0002-01 / 1ST AUTOWORKS PTE LTD ENTRY DATE & TIME: 10/08/2021 13:56 (SGT) SUBMITTED BY: Tan Guan Hin Ronnie VERSION: 2 (11/08/2021 14:25 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate
- 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 10/08/2021 13:56 (SGT) Date of Accident 06/08/2021 18:45 (SGT) Exact Location of Accident Singapore Additional Location Information Artillery Ave South

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMH5572L

INSURED/POLICYHOLDER

Country/State of Loss

Is company? No Name Of Registered Owner Ng Sin Teck NRIC No SXXXX538I Email Address xin@lucida10.com Mobile Phone No (Phone) +65-97919315 Alternative Phone No (Home) +65-97919315

VEHICLE PARTICULARS

Vanufacturer **BMW** Model X3 Variant **X3** Exact purpose for which vehicle was being used at time of

Private use

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

No - Claiming third party Private car

Vehicle Category Transmission

Auto

CC 2000

INSURANCE COMPANY

Cover Note Number

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number MT 00601065/02

DRIVER

Name of Driver Yauw Wun Man Oranna NRIC No SXXXX217E

Date Of Birth 18/06/1975 Occupation Indoor Date Of Driving Pass 04/01/2003 Driving experience 18 YEARS AND 7 MONTHS Gender Female Mobile Number (Phone) +65-97919356 Alt. Phone Number Email Address xin@licida10.com Address 7 Pine Grove #07-02 Address complement Postcode 597592 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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 Report Please Refer to Sketch Plan ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SLR5290.J Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category

Private car

Nikhil Kishore Sadarangani

Address

Name of Driver

Contact Number

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	Yauw Wun Man Oranna
Gender	Female
Phone No	
Address	7 Pine Grove #07-02
Address Complement	-
Post Code	
Approximate Age Years Old	
Injuries Sustained	unknown
Injured person in which vehicle?	SMH5572L
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 Formmust 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
- 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)

funderstand, 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
- (ii) investigating the accident and/or my claims:
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

8

- (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
- (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 &

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

NOS KINNA

Witnessed by Reporting Centre

Personnel

Sketch Plan

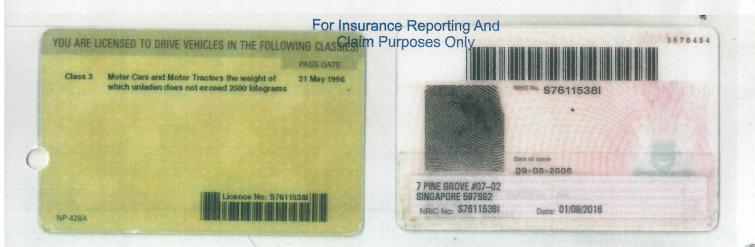
A: SMH 5572L

B: SLR 52907

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Contact us at

Hotline: (65) 6532 2888

E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. : MT/00601065/02

Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. : SMH5572L

Chassis No. . WBAWX320000B27691

2) Name of Policy Holder : NG SIN TECK

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act : 28/02/2021 00:00

4) Date/Time of Expiry of Insurance : 27/02/2022 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) Any named person under the policy who is driving on the Policyholder's permission.

(b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured : Market Value

Own Damage Excess:S\$ 1,000.00 (before any applicable GST)Windscreen Excess:S\$ 100.00 (before any applicable GST)

Choice of workshop : DirectAsia approved workshops

Finance company / Hire Purchase

Main driver : NG SIN TECK
Named driver : None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

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 Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 06/01/2021

Direct Asia Insurance (Singapore) Pte. Ltd.

Company Registration: 200822611G

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	5381
Vehicle No.:	SMH5572L
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Aug 2021
Vehicle Make:	B.M.W.
Vehicle Model:	X3 XDRIVE20I ABS 4WD SR HID DSC NAV
Primary Colour:	Black
Manufacturing Year:	2013
Engine No.:	A6400505N20B20A
Chassis No.:	WBAWX320000B27691
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$41,776.00
Original Registration Date:	30 Aug 2013
First Registration Date:	30 Aug 2013
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$50,487.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Aug 2023
PARF Rebate Amount: Intended COE Rebate Details	\$30,292.00
COE Expiry Date:	29 Aug 2023
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$77,600.00
COE Rebate Amount:	\$15,978.00
Total Rebate Amount:	\$46,270.00

The information contained herein is correct as at 07 Aug 2021