

To: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

Attn: **Motor Claims Department**

Date: 26th September 2021

Dear Sir/Madam,

Claimant: **Liew Hua Jian**

"WITHOUT PREJUDICE"

We are instructed by the above named to claim damages against you in connection with a road traffic accident on 07/09/2021 at along PIE(Changi) before Bedok Reservoir involving our client's vehicle registration number SMT 9725 Z and vehicle registration number SFD 119 A 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 | \$1,050.00 |
| 2) Loss of Rental (SGD\$150.00 x 3Days) | \$450.00 |
| 3) LTA Search | \$7.45 |

Total : **\$1,507.45**

A copy each of the following supporting documents is enclosed:

- Singapore Accident Statement
- Rental Invoice & Agreement
- LTA Search 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

#08-1339 Singapore 470130

Mobile: 9450 7920 | E-mail: zoomautowerks@gmail.com

**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: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

PF No. : ZP0000576
Date : 26/9/2021
VRN : SMT 9725 Z
Make & Model : Honda Civic
DOA : 7/9/2021
Terms : COD

| | Description | Qty | U/P | Amt |
|---|---|-----|-----|----------|
| 1 | Repair & Respray Accident Affected Portions | | | 1,050.00 |
| 2 | Loss of Rental (SGD\$150.00 x 3Days) | | | 450.00 |
| 3 | LTA Search | | | 7.45 |

TOTAL : **\$1,507.45**

All crossed cheques must be made to "**ZOOM AUTOWERKS PTE LTD** "

Bank Name: Oversea-Chinese Banking Corporation Ltd

Account Number: 623326998001

Paynow UEN: 201725603G

(by Zoom Autowerks Pte Ltd)

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 08/09/2021 14:02 (SGT)
Date of Accident 07/09/2021 18:45 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information PIE (CHANGI) BEFORE BEDOK RESERVOIR
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT9725Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIEW HUA JIAN
NRIC No SXXXX176B
Email Address liewhuajian@gmail.com
Mobile Phone No (Phone) +65-96544537
Alternative Phone No (Home) +65-96544537

VEHICLE PARTICULARS

Manufacturer Honda
Model Civic
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 1597

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 20-MR004015-R00
Cover Note Number -

DRIVER

Name of Driver LIEW HUA JIAN
NRIC No SXXXX176B

| | |
|--|------------------------------|
| Date Of Birth | 04/03/1991 |
| Occupation | Indoor |
| Date Of Driving Pass | 16/11/2009 |
| Driving experience | 11 YEARS AND 10 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96544537 |
| Alt. Phone Number | (Home) +65-96544537 |
| Email Address | liewhuajian@gmail.com |
| Address | BLK 537 BEDOK NORTH STREET 3 |
| Address complement | #03-501 |
| Postcode | 460537 |
| 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 | Side Swipe |
| 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 vehicle 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 SKETCH PLAN ATTACHED.

ATTACHMENT(S)

| | |
|---|----|
| Are accident photos available for attachment? | No |
| Was there any video captured by Car Camera? | No |
| Was there any audio recorded? | No |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------------|-------------|
| Vehicle Registration Number | SFD119A |
| 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) | 1 |

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

 070921
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: SMT9725Z
Vehicle B: SFD119A




Describe Circumstances of the Accident

On the stated date & time, I, vehicle A',
 SMT9725Z, was traveling straight along
 the stated vehlu. vehicle B', SFD119A, suddenly
 filtered into my lane and grazed onto my
 vehicle's rear right 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



















Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg. No.: M2-0000023-0)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine GroupTOKIO MARINE
INSURANCE GROUP

FORM MX1

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)

Policy No.: 20-MR004015-R00 (Private Motor Car 24 Months)

1. Index Mark and Registration Number of Vehicle SMT9725Z Chassis No.: MRHFC5650LT000058
2. Name of Policyholder LIEW HUA JIAN
3. Effective date of the Commencement of Insurance for the purposes of the Act 27/07/2020
4. Date of Expiry of Insurance 26/07/2022
5. Persons or Class of Persons entitled to drive*
 - (a) The Policyholder.
 - (b) Any other person who is driving on the Policyholder's order or with his 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. 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 the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, 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) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: E2316DDA

| | | |
|--------------------------------|--------------------------------------|---------|
| Insurance Plan: | Comprehensive Approved Workshop Plan | |
| Limit for total loss or theft: | Prevailing Market Value | |
| Policy Excess: | Own Damage Claims | SGD 600 |
| | Windscreen Excess | SGD 100 |
| Financial Interest: | UNITED OVERSEAS BANK LIMITED | |

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Yeo Chor Joo Irene - Mot

Printed 28/07/2020



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 07/09/2021 @ 18:45 along PIE (Changi) before Bedok Reservoir
Involving vehicles SMT 9725Z and SFD 119A.

In consideration of **Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130**, repairing my/our motor vehicle no SMT 9725Z at my request, I/We, Liew Hua Jian ("the claimant") of 537 Bedok North St 3, #03-501 S(460537) (address) bearing NRIC No S9107176B the owner of motor vehicle no SMT 9725Z, 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 07 day of 09 (month) 20 21 (year)

Signed by "the claimant"

Name: LIEW HUA JIAN

NRIC No: S9107176B



Signed by Zoom Autowerks Pte Ltd

Name: Elin Cai



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 07 Sep 2021 / 23:41:12

Receipt Date/Time : 07 Sep 2021 / 23:41:12

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210907-004315

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 - SFD119A | | | | |
| As at 07 Sep 2021/18:45:00 | | | | |
| Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD. | | | | |
| 1 | Insurance Enquiry - SFD119A Enquiry Fee 20210907233945061388 | 7.00 | 0.49 | 7.49 |
| Sub-Total | | 7.00 | 0.49 | 7.49 |
| Result of Insurance Enquiry - SLR7735E | | | | |
| As at 06 Sep 2021/23:15:00 | | | | |
| Insurance Co: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD | | | | |
| 2 | Insurance Enquiry - SLR7735E Enquiry Fee 20210907233945136211 | 7.00 | 0.49 | 7.49 |
| Sub-Total | | 7.00 | 0.49 | 7.49 |
| Total Before Rounding | | 14.00 | 0.98 | 14.98 |
| Rounding Difference | | | | 0.03 |
| Total Amount Payable | | | | 14.95 |
| Paid By | | | | |
| 526471XXXXXX0962 | | eNETS Credit Card | | 14.95 |
| Total | | | | 14.95 |
| Cash Change | | | | 0.00 |
| Tendered Amount | | | | 14.95 |
| 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. : **INV0000633**

Date : 15/9/2021

Ref : SKP 1847 C

Your Ref : SMT 9725 Z

Terms : 30Days

| # | Rental Period | Rate | Quantity | Amount |
|---|---|----------|----------|----------|
| 1 | Rental Charges for SKP 1847 C (07/09/2021 to 10/09/2021) | \$150.00 | 3 Days | \$450.00 |

C/O Liew Hua Jian

537 Bedok North Street 3

#03-501 Singapore 460537

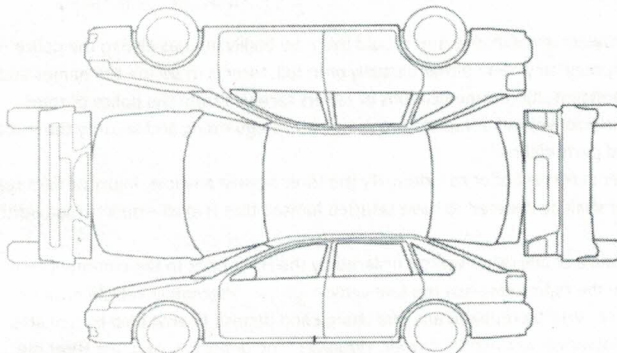


Contact: 9654 4537

| | | |
|--------------|----------|-----------------|
| Total | : | \$450.00 |
|--------------|----------|-----------------|

(Customer's Signature/Stamp)

(For Zoom Car Leasing)

RENTAL AGREEMENT

| HIRER'S PARTICULAR | | VEHICLE DETAIL | |
|---|--|--|---------------|
| Name: | Liew Hua Jian | Vehicle No.: | SFP1847C |
| NRIC/Passport No.: | S9107176B | Vehicle Make/Model: | Mazda 6 |
| Address: | 537 Bedok North St 3, #03-501 S(460537) | Date/Time Out: | 07/09/2021 |
| Tel: | 9654 4537 | Date/Time In: | 10/09/2021 |
| Driving License No./Exp.: | | <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">E</div> <div style="border: 1px solid black; padding: 2px;">1/4</div> <div style="border: 1px solid black; padding: 2px;">1/2</div> <div style="border: 1px solid black; padding: 2px;">3/4</div> <div style="border: 1px solid black; padding: 2px;">F</div> </div> <div style="display: flex; justify-content: space-around;"> <div>OUT</div> <div>IN</div> </div> | |
| ADDITIONAL DRIVER'S PARTICULAR | | Mileage: | |
| Name: | | Mileage: | |
| NRIC/Passport No.: | | RENTAL CHARGES | |
| Address: | | Hours @ | per hour |
| Tel: | | 3 Days @ \$150 | per day \$450 |
| Driving License No./Exp.: | | Weeks @ | per week |
| | | Months @ | per month |
| (A) - Accident (D) - Dent (S) - Scratch | | Other Charges | |
|  | | Petrol Top-Up | |
| | | Sub-total | |
| | | TOTAL CHARGES \$450 | |
| PHYSICAL DAMAGE EXCESS | | PRE-PAYMENT | |
| Singapore - Own Damage | S\$2,000.00 | Downpayment and Deposit | |
| Singapore - 3rd Party | S\$2,000.00 | Amount Refunded Due | |
| Malaysia* | S\$8,000.00 | 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. | |
| For Drivers aged < 27 or > 65 and/or less than 2 years driving experience regardless of age | S\$3,000.00 (Additional) | | |
| ACKNOWLEDGEMENT | | <div style="text-align: center;">  Hirer's Signature / Date </div> | |
| IMPORT NOTE: 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. 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. | | <div style="text-align: center;">  Owner's Signature / Date </div> | |