

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date : 25.11.2021

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SJP 1227D / SDK 9980G AND OTHER ON 23.09.2021

We are the authorized repair workshop for the owner of motor vehicle no: **SJP 1227D** , which was involved in the captioned accident with your insured vehicle no: **SDK 9980G** . 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)	\$ 3,317.00
2) Loss of Rental	\$ 720.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 4,039.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|--------------------------|------------------------------------|
| a) Final Repair Invoice | b) Car Rental Invoice / Agreement |
| c) GIA Search Result | d) Letter of Authorisation, etc... |
| e) GIA Report | f) I/C & Driving Licence |
| g) Insurance Certificate | h) 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@fastechnauto.com.sg)

For Fastechn 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

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn : Motor Claim Department

Tax Invoice : 22605

Date : 25.11.2021

Vehicle No : SJP 1227D

Make/Model : HYUNDAI AVANTE

Chassis/Eng# :

Accident Date : 23.09.2021

Claim No :

Reference : 0921 -22605

Policy No :

Amount

To proceed on lump sum repair

S\$

3100.00

E. & O. E.

Total : S\$

3100.00

GST @ 7% : S\$

217.00

Amount Due : S\$

3317.00


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. 22000

Name Ramona Binte Kamis			REG. No. SJR 734K		MAKE MODEL:									
ADDRESS 12 Stratton Walk					DIESEL		PETROL		E	1/4	1/2	3/4	F	
S (806764)			KM IN		DATE & TIME IN 27/09/2021 @ 12:30pm									
			KM OUT		DATE & TIME OUT 23/09/2021 @ 9pm									
			KM DRIVEN		TIME USED									
NAMED DRIVER														
DRIVING LICENCE NO S7106985J			DATE OF EXPIRY			PLACE OF ISSUE			HOURS @ \$\$					
PASSPORT NO			DATE OF ISSUE			PLACE OF ISSUE			4 DAYS @ \$\$ 180.00 \$720.00					
ADD NAMED DRIVER														
DRIVING LICENCE NO			DATE OF EXPIRY			PLACE OF ISSUE			WEEKS @ \$\$					
PASSPORT NO			DATE OF ISSUE			PLACE OF ISSUE			MONTHS @ \$\$					
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)														
SUB-TOTAL														
TOTAL RENTAL \$720.00														
DELIVERY FEE														
COLLECTION FEE														
<p>X</p> <p>PER DAY \$ PER WEEK \$ PER MONTH \$</p>														
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)														
<p>X</p> <p>PER DAY \$ PER WEEK \$ PER MONTH \$</p>														
PREPAYMENT														
TOTAL CHARGE														
CHECK														
DEPOSIT														
CASH														
RECEIPT NO.														
NETT CHARGE														
AMOUNT DUE / REFUND														

IMPORTANT NOTES:

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.
Hirer is liable to pay loss of earnings while damaged vehicle is under repair.
Hirer is liable to pay all parking fee and traffic summonses.
Vehicle return during office hour only.
No service on Public Holiday and Sunday.
Geographical areas: Singapore & West Malaysia.
Driver must be:
a) 18 years old 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.
The hirer is not allowed to sub-let the vehicle to another party and subletting is not covered.

ADDITIONAL CONDITIONS:

COMPREHENSIVE COVERED EXCESS:

*Section I - Used in S'pore Only : SGD 2000.00 *Section I - Used Outside S'pore : SGD 4000.00
*Section II - Used in S'pore Only : SGD 1500.00 *Section II - Used Outside S'pore : SGD 3000.00
*W/Screen Excess In S'pore : SGD 100.00 *W/Screen Excess Outside S'pore : SGD 100.00

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
*Hirer must bear all costs to the damages of the return vehicle.
*Section II - Used Outside S'pore : SGD 3000.00

YOUNG AND INEXPERIENCE DRIVER

Hirer or any authorised driver who is age 22 years old (on the date accident) and below or possess 18 month or less driving experience.

COMPREHENSIVE COVERED EXCESS:

*Section I - Used in S'pore Only : SGD 6000.00 *Section I - Used Outside S'pore : SGD 12,000.00
*Section II - Used in S'pore Only : SGD 6000.00 *Section II - Used Outside S'pore : SGD 12,000.00
*W/Screen Excess In S'pore : SGD 100.00 *W/Screen Excess Outside S'pore : SGD 100.00

THIRD PARTY COVERED EXCESS:

*Hirer must bear all costs to the damages of the return vehicle.
*Section II - Used in S'pore Only : SGD 6000.00
*Hirer must bear all costs to the damages of the return vehicle.
*Section II - Used Outside S'pore : SGD 12,000.00

Hirer is responsible for any costs to the
THIRD PARTY DAMAGE / INJURY claims.

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES
OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

SIGNED BY THE PARTIES HERETO ON THE DAY OF

X

[Signature]

DYNAMIC CAR RENTAL

X

RENTER'S/DRIVER'S SIGNATURE

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: RAMONA BINTE KAMIS

Invoice : DCR-2021-09-30

Date : 27.09.2021

Agreement No : 22000

Payment Terms : LOD

DESCRIPTION	AMOUNT
Rental charges for vehicle : <u>SJR 7314K</u> (0921-22605)	\$ 720.00
Rental Period from <u>23.09.2021</u> to <u>27.09.2021</u> .	

E. & O. E.	Total	\$ <u>720.00</u>
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ASHLEY
for Dynamic Car Rental


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

SDK9980G

Date of
Accident

23/09/20: 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **China Taiping Insurance (Sing...**

Period of Insurance **26/04/2021 - 25/04/2022**

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

Requested Date **24/09/2021 09:54**

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**

DATE : 23/09/2021

TO : China Taiping Insurance

RE : ACCIDENT INVOLVING VEHICLE NO. SJP 1227D / SDK 9980G
And Other

ALONG Yio Chu Kang Rd to CTE

ON 23/09/2021


I/We, Ramona Binte Kamis

of (NRIC No./ROC No.) S7106985J

of 12 Stratton Walk S(806764)

owner of vehicle no. SJP 1227D in consideration of M/s FASTECH AUTO
PTE LTD repairing my/our vehicle SJP 1227D at my/our instruction and hereby
authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever
amount settled/payable by the Insurance Company and/or third party or to commence legal
proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and
all claimed and/or settled shall belong to them absolutely.

I/We further agree and undertake to indemnify them against the above-mentioned claim cost
which may arisen therewith.

Signature of Owner : 

Name of Owner : Ramona Binte Kamis



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	24/09/2021 12:19 (SGT)
Date of Accident	23/09/2021 07:09 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	YIO CHU KANG RD TO CTE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP1227D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	RAMONA BINTE KAMIS
NRIC No	SXXXX985J
Email Address	JASONKCAPL@GMAIL.COM
Mobile Phone No	(Phone) +65-90672433
Alternative Phone No	(Home) +65-90672433

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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	1598

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5120839880
Cover Note Number	

DRIVER

Name of Driver	RAMONA BINTE KAMIS
NRIC No	SXXXX985J



Date Of Birth	05/03/1971
Occupation	Indoor
Date Of Driving Pass	23/08/2007
Driving experience	14 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-90672433
Alt. Phone Number	(Home) +65-90672433
Email Address	JASONKCAPL@GMAIL.COM
Address	12 STRATTON WALK
Address complement	-
Postcode	806764
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	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 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	SDK9980G
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLX3576S
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	RAMONA BINTE KAMIS
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJP1227D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

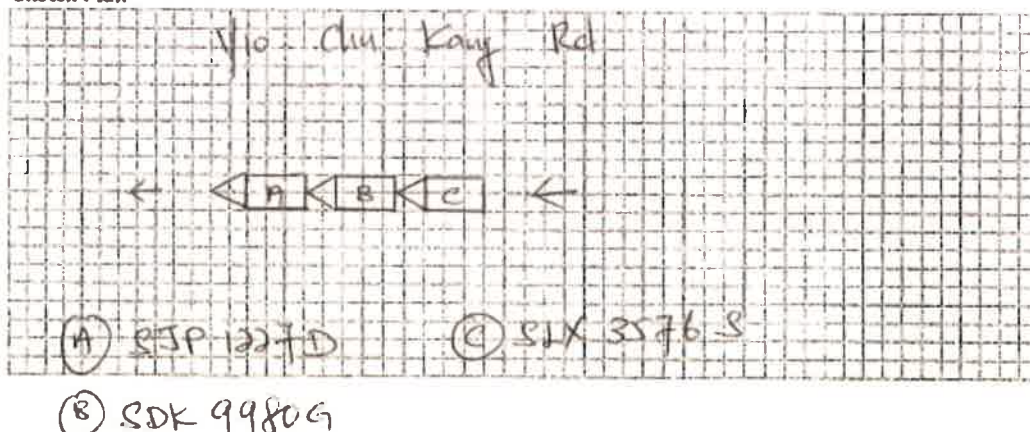
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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

SHUGA
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident


On the stated date and time, my veh was stationary along Yio Chu Kang Road, when I felt an impact from my veh rear portion. when I got down my veh, I realised that I was involved in a 3-car collision. The impact caused my body to have some pain and I may seek medical attention.


Reason for stopping- Zebra Crossing as cyclist crossing.

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

For Insurance Reporting And
Claim Purposes Only

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

License Number: **S7106985J**

Name: **RAMONA BINTE KAMIS**

Birth Date: **05 Mar 1971**

Issue Date: **23 Aug 2007**



 001524145E

For Insurance Reporting And
Claim Purposes Only

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7106985J



Name: **RAMONA BINTE KAMIS**

رامونا بنت كاميس

Race: **MALAY**

Date of Birth: **05-03-1971**

Sex: **F**

Country of Birth: **SINGAPORE**





For Insurance Reporting And
Claim Purposes Only

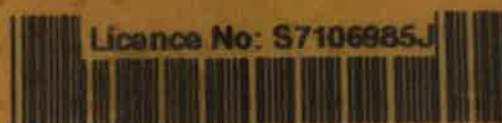
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg
with =< 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals =< 2500kg

23 Aug 2007

NP 428A



Licence No: S7106985J

For Insurance Reporting And
Claim Purposes Only



2973478

NRIC No. **S7106985J**



Blood Group

Date of Issue

B+

04-08-1997

12 STRATTON WALK

SINGAPORE 806764

NRIC No: XXXXX985J

Date of change: 23/11/2020

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: 5120839880

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SJP1227D**
Chassis Number : **KMH DU41BR9U712483**
2. Name of Policyholder : **RAMONA BINTE KAMIS**
3. Effective Date of Insurance : **30 Jan 2021**
4. Expiry Date of Insurance : **29 Jan 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 business or profession.

This Policy does not cover

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

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: S\$500
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: RAMONA BINTE KAMIS
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: GENIE FINANCIAL SERVICES 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 : SONA INSURANCE AGENCIES PTE. LTD. (00000573866)
Date of Issue : 29 Jan 2021 16:52 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:	Singapore NRIC
Owner ID:	985J
Vehicle Details	
Vehicle No.:	SJP1227D
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Sep 2021
Vehicle Make:	HYUNDAI
Vehicle Model:	HD AVANTE 1.6 A
Primary Colour:	White
Manufacturing Year:	2009
Engine No.:	G4FC9U618424
Chassis No.:	KMH DU41BR9U712483
Maximum Power Output:	89.7 kW (120 bhp)
Open Market Value:	\$11,943.00
Original Registration Date:	12 Mar 2009
First Registration Date:	12 Mar 2009
Transfer Count:	3
Actual ARF Paid:	\$11,943.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	11 Mar 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$12,763.00
COE Rebate Amount:	\$6,280.00
Total Rebate Amount:	\$6,280.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 24 Sep 2021

OK