

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 : 09.11.2021

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 : SLG 9818U / GBD 2542U ON 05.10.2021

We are the authorized repair workshop for the owner of motor vehicle no: **SLG 9818U** , which was involved in the captioned accident with your insured vehicle no: **GBD 2542U** . 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)	\$ 8,667.00
2) Loss of Use (7 days X S\$60)	\$ 420.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 9,089.00</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) Police 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@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

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn : Motor Claim Department

Tax Invoice : 22627

Date : 09.11.2021

Vehicle No : SLG 9818U

Make/Model : NISSAN SYLPHY 1.5L

Chassis/Eng# :

Accident Date : 05.10.2021

Claim No :

Reference : 1021 -22627

Policy No :

Amount

To proceed on lump sum repair

S\$

8100.00

E. & O. E.

Total : S\$

8100.00

GST @ 7% : S\$

567.00

Amount Due : S\$

8667.00


for FASTECH AUTO PTE LTD


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

GBD2542U

Date of Accident

05/10/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

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

Period of Insurance **31/07/2021 - 30/07/2022**

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

Requested Date **06/10/2021 16:20**

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 : 06.10.2021

TO : China Taiping Insurance Singapore Pte Ltd.

RE : ACCIDENT INVOLVING VEHICLE NO. SLG 9818U / GBD 2542U

ALONG TPE towards PIE (After Punggol Road Exit)

ON 05.10.2021

I/We, Lavanesan s/o Rajagopal @ Umar Ali

of (NRIC No./ROC No.) S 9414094C

of Blk 747 Pasir Ris Street 71 # 04-44 Singapore 510747

owner of vehicle no. SLG 9818U in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle SLG 9818U 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 : Lavanesan s/o Rajagopal @ Umar Ali.

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	06/10/2021 18:00 (SGT)
Date of Accident	05/10/2021 07:05 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TPE TOWARDS PIE AFTER PUNGGOL ROAD EXIT LANE 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG9818U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LAVANESAN S/O RAJAGOPAL @UMAR ALI
NRIC No	SXXXX094C
Email Address	MICHAEL_LAVA@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97925450
Alternative Phone No	(Home) +65-97925450

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Sylphy
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	0

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5122936042
Cover Note Number	-

DRIVER

Name of Driver	LAVANESAN S/O RAJAGOPAL @UMAR ALI
NRIC No	SXXXX094C

Date Of Birth	12/04/1994
Occupation	Indoor
Date Of Driving Pass	08/04/2021
Driving experience	6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97925450
Alt. Phone Number	(Home) +65-97925450
Email Address	MICHAEL_LAVA@HOTMAIL.COM
Address	APT BLK 747 PASIR RIS ST 71 #04-44
Address complement	-
Postcode	510747
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 - Head to Rear
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 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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
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	GBD2542U
Vehicle Manufacturer	Nissan
Vehicle Model	Cabstar
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

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	LAVANESAN S/O RAJAGOPAL @UMAR ALI
Gender	
Phone No	
Address	
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	
Injured person in which vehicle?	SLG9818U
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' 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

Describe Circumstances of the Accident

Refer to the police report (T/2021/006/7017)

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time

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

MAC

 Witnessed by Reporting Centre
 Personnel



**SINGAPORE
POLICE FORCE**



T/20211006/7017

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3
Report No. T/20211006/7017

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLG9818U	NTUC Income Insurance Co-Operative Limited	5122938042	16/07/2021	15/07/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	Unknown Passenger	ID No.	NIL
Related Vehicle	GBD2542U (Lorry)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	LAVANESAN S/O RAJAGOPAL	ID No.	S9414094C
Related Vehicle	SLG9818U (Car)	Contact No.	97925450
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	05/10/2021	Date	06/10/2021
No. of Days granted Medical Leave	16	Degree of	Serious

Brief Details.

I was travelling in TPE towards PIE after Punggol Rd exit in lane 2 when the vehicle in front of me stopped suddenly, so I braked and came to a complete stop behind the vehicle. A few seconds later, my car was hit in the rear by a lorry, vehicle number GBD2542U. This caused me to suffer whiplash. I came out of my car, and proceeded to exchange particulars with the lorry driver and took photographs of both vehicle's damages, after which he drove off. I was in extreme pain so I slowly made my way to Sengkang General Hospital where I was admitted for one day and given 16 days MC.



**SINGAPORE
POLICE FORCE**



T/20211006/7017

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408665
Tel No: 65470000

3 of 3

Report No. T/20211006/7017

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

This report is lodged at Sengkang NPC Kiosk 1
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
06/10/2021 15:34

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20211006/7017

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20211006/7017

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/10/2021 15:34		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: LAVANESAN S/O RAJAGOPAL		Address: 747 PASIR RIS STREET 71 #04-44 SINGAPORE 510747	
ID Type / ID No.: NRIC NO / S9414094C		Contact No.: Home/Office: Mobile: 97925450	
Nationality: SINGAPORE CITIZEN		Email: MICHAEL_LAVA@HOTMAIL.COM	
Sex: Male	Age: 27	Date of Birth: 12/04/1994	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation:		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/10/2021 07:05	Type of Location: Expressway
Location: TPE towards PIE after punggol road exit lane 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBD2542U	Lorry	NISSAN	Cabestar	Gold	Slightly Damaged	6
SLG9818U	Car	NISSAN	Sylphy	Silver	Seriously Damaged	0

REPUBLIC OF SINGAPORE DRIVING LICENCE

Identification No: **S9414094C**

Name: **LAVANESAN S/O RAJAGOPAL**

Birth Order: **12 Apr 1994**

Issue Date: **06 Dec 2018**

002878273K

**For Insurance Reporting And
Claim Purposes Only**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9414094C

Name: **LAVANESAN S/O RAJAGOPAL @UMAR ALI**

Race: **INDIAN**

Date of birth: **12-04-1994**

Country/Place of birth: **SINGAPORE**

Sex: **M**

S9414094C

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 2B Motorcycles \leq 200cc / Electric Motorcycles \leq 15kW **06 Dec 2018**

Class 3 Ambulances / Motor cars \leq 3000kg with \leq 7 passengers, exclusive of the driver / motor tractors or vehicles \leq 2500kg **06 Apr 2021**

S9414094C

S / No.9000367867

Licence No: S9414094C

NP 422A

6046275

NRIC No. S9414094C

Date of issue: 18-10-2018

APT BLK 747 PASIR RIS STREET 71 #04-44 SINGAPORE 510747

NRIC No: 90000094C

Date of change: 03/11/2020

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: 5122936042

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SLG9818U**
Chassis Number : JN1BAAG11Z0110089
2. Name of Policyholder : LAVANESAN S/O RAJAGOPAL @UMAR ALI
3. Effective Date of Insurance : 16 Jul 2021
4. Expiry Date of Insurance : 15 Jul 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.

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

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
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	: LAVANESAN S/O RAJAGOPAL @UMAR ALI
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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 : BENEFIT AUTO INSURANCE AGENCY (00000573333)

Date of Issue : 16 Jul 2021 15:55 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:	094C
Vehicle Details	
Vehicle No.:	SLG9818U
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Oct 2021
Vehicle Make:	NISSAN
Vehicle Model:	SYLPHY 1.5L 4AT ABS D/AB 2WD 4DR
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	HR15156101B
Chassis No.:	JN1BAAG11Z0110089
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$19,094.00
Original Registration Date:	31 Jul 2009
First Registration Date:	31 Jul 2009
Transfer Count:	4
Actual ARF Paid:	\$19,094.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 May 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$13,943.00
COE Rebate Amount:	\$7,391.00
Total Rebate Amount:	\$7,391.00
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 06 Oct 2021

OK