



Teamwork Garage Pte Ltd  
53 Ubi Avenue 1 #01-23/24 Singapore 408934  
Paya Ubi Industrial Park  
Tel: 6844 2475 Fax: 6844 2474  
Email: [claims@teamworkgarage.com](mailto:claims@teamworkgarage.com)  
GST Register No: 201015366H

25th Nov 2021

Our reference: 2110-18

Your reference: SLB1988R

**AIG Asia Pacific Insurance Pte Ltd**

**BY HAND**

78 Shenton Way

#08-16

Singapore 079120

**Attn: Motor Claims Department**

Dear Sir/ Madam,

Claimant : KUEK KIEN JOO

Address : 15D JALAN ARIF S(548822)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **25/10/2021** along **UBI AVE 2 TOWARDS UBI ROAD 1** involving our client's vehicle registration number **SFC988M** and vehicle registrations number **SLB1988R** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the 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:-

Cost of Repair	:	\$ 6,527.00
Loss of Use (\$200 x 9 Days)	:	\$ 1,800.00
LTA Search	:	\$ 7.45
Total	:	\$ 8,334.45

A copy of each of the following supporting documents is enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Driver's IC & Driving License;
- d) Letter Of Authorisation;
- e) Tax Invoice;
- f) LTA Search Invoice;
- g) Certificate of Insurance;
- h) Satisfaction of repaired vehicle;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 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 to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,

A handwritten signature in blue ink is written over a circular blue stamp. The stamp contains the text "TEAMWORK GARAGE PTE LTD" around the perimeter.

Teamwork Garage Pte Ltd

Encl.

## 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	26/10/2021 17:07 (SGT)
Date of Accident	25/10/2021 16:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UBI AVENUE 2 TOWARDS UBI ROAD 1
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFC988M
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KUEK KIEN JOO
NRIC No	S6860678J
Email Address	austenkjy@gmail.com
Mobile Phone No	(Phone) +65-97334822
Alternative Phone No	+65-97334822

#### VEHICLE PARTICULARS

Manufacturer	BMW
Model	640I 3.0 AT ABS D/AB HID DSC NAV HUD
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2979

#### INSURANCE COMPANY

Name of Insurance Company	Etiga Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MA011769
Cover Note Number	14/11/2020 TO 13/11/2021

#### DRIVER

Name of Driver	AUSTEN KUEK JINGYONG
NRIC No	T0037878F



Date Of Birth .....	28/10/2000
Occupation .....	Indoor
Date Of Driving Pass .....	15/11/2018
Driving experience .....	2 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90849088
Alt. Phone Number .....	-
Email Address .....	austenkjy@gmail.com
Address .....	150 JALAN ARIF SINGAPORE 548822
Address complement .....	-
Postcode .....	-
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 .....	AFTER RAIN
Road Surface .....	Wet

#### 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 WITH ATTACHED.

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

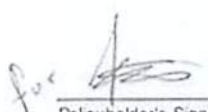
Vehicle Registration Number .....	SLB1988R
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-

Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

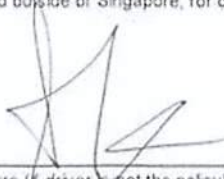
# SKETCH PLAN

## 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.
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 Purpose.

for 

Policyholder's Signature / Date & Time

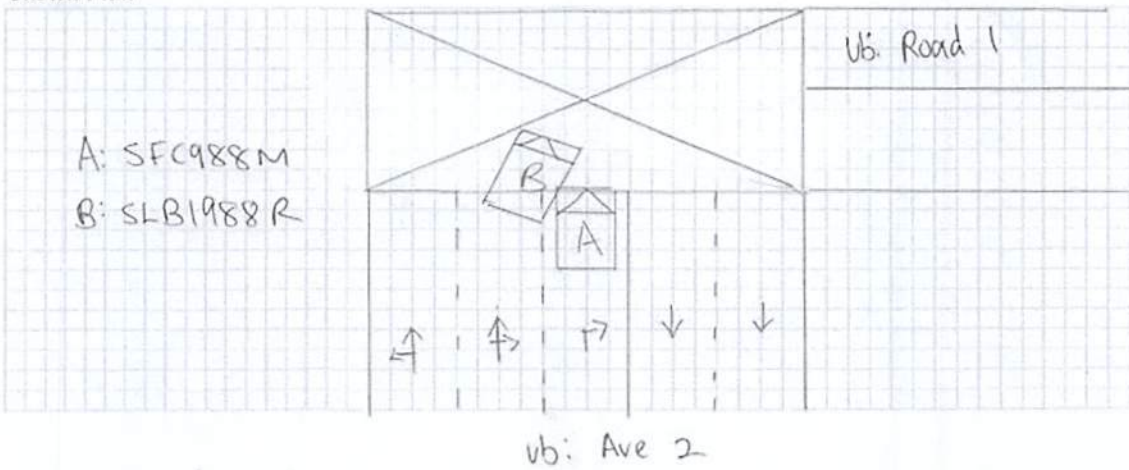


Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

## Sketch Plan





**Describe Circumstances of the Accident**

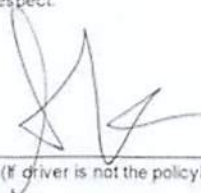
I was travelling along Ubi Ave 2 turning towards Ubi Road 1 on the most right lane. As I approached the Junction, vehicle B which is on the middle lane cut into my lane and collided onto my vehicle front right portion.

**Declaration**

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

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	678J
<b>Vehicle Details</b>	
Vehicle No.:	SFC988M
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Oct 2021
Vehicle Make:	B.M.W.
Vehicle Model:	640i 3.0 AT ABS D/AB HID DSC NAV HUD
Primary Colour:	Silver
Manufacturing Year:	2012
Engine No.:	08288218N55B30A
Chassis No.:	WBALW72020DK15564
Maximum Power Output:	235.0 kW (315 bhp)
Open Market Value:	\$78,398.00
Original Registration Date:	12 Sep 2012
First Registration Date:	12 Sep 2012
Transfer Count:	3
Actual ARF Paid:	\$78,398.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Sep 2022
PARF Rebate Amount:	\$39,199.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	11 Sep 2022
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$87,999.00
COE Rebate Amount:	\$7,035.00
<b>Total Rebate Amount:</b>	<b>\$46,234.00</b>

The information contained herein is correct as at 26 Oct 2021

OK



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. T0037878F



Name

AUSTEN KUEK JINGYONG

郭 勁 勇

Race

CHINESE

Date of birth

28-10-2000

Sex

M

Country/Place of birth

SINGAPORE

T0037878F

For Insurance Purposes

Customer Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number T0037878F

AUSTEN KUEK JINGYONG

Birth Date: 28 Oct 2000

Issue Date: 15 Nov 2018



002870357H

For Insurance Purposes

Customer Name: \_\_\_\_\_

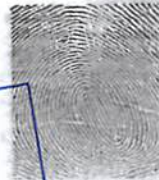
Signature: \_\_\_\_\_

Date: \_\_\_\_\_

5719759



NPIC No. T0037878F



Date of Issue  
09-03-2017

Address  
15D JALAN ARIF  
SINGAPORE 548822

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

EFFECTIVE DATE

Class: 3 Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg 15 Nov 2018



Licence No: T0037878F

NP 428A



9333011



NRIC No. **S6860678J**

Nationality

**MALAYSIAN**

Date of issue

**16-05-2014**

Address

**15D JALAN ARIF  
SINGAPORE 548822**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S6860678J**



Name

**KUEK KIEN JOO**

**郭 健 裕**

Race

**CHINESE**

Date of birth

**02-06-1968**

Sex

**M**

Country/Place of birth

**MALAYSIA**



## LETTER OF AUTHORIZATION

To : AIG & Teamwork Garage PTE LTD (Third party insurance & Workshop)  
Claimant : Kuek Kien Joo

Dear Sirs,

I/We, Kuek Kien Joo owner of vehicle no. SFC988M  
hereby authorize my/our repairer, Teamwork Garage PTE LTD  
act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or  
loss of use ("claim") for my/our vehicle no. SFC988M that was damage pursuant to the  
accident which occurred at/along  
Ubi Ave 2 towards Ubi Road 1  
involving vehicle nos. SFC988M & SLB1988R

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies  
pertaining the above mentioned accident due to me/us to my/our repairer/solicitors  
Teamwork Garage PTE LTD. I/We hereby authorize you to forward and release all  
compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors  
Teamwork Garage PTE LTD pertaining to above said accident whom I/we  
authorized and assigned to collect the said compensation monies.

I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without prejudice  
and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s concerned.

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the  
personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein  
should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured  
losses claim arising of the subject matter in the action.

Thank you.

Dated this 25 day of 10 (month) 20 21 (year)

Signature of owner vehicle (claimant): [Signature]

Name of owner of vehicle (claimant): Kuek Kien Joo

NRIC Number (claimant): 56860678J





TEAMWORK GARAGE PTE LTD  
BLK 53 UBI AVE 1 #01-24/34  
PAYA UBI INDUSTRIAL PARK  
SINGAPORE 408934  
TEL: 90119989 / 83389989  
(TEL)(65) 6844 2475(FAX) (65) 6844 2474  
(E-MAIL) [claims@teamworkgarage.com](mailto:claims@teamworkgarage.com)  
UEN 201015366H  
GST Reg 201015366H

**Bill To:**

AIG ASIA PACIFIC INSURANCE PTE LTD  
AIG BUILDING  
78 SHENTON WAY  
#08-16 SINGAPORE 079120

**Tax Invoice**

Invoice number : TI-8828  
Date : 24-11-21  
Terms : C.O.D.  
Vehicle number : SFC988M  
Make / Model : BMW 640i

Description	Amount (S\$)
ACCIDENT INVOLVING SFC988M / SLB1988R ON 25/10/2021 @ UBI AVENUE 2 TOWARDS UBI ROAD 1 INCLUSIVE OF SUPPLYING PARTS , LABOUR , PANEL BEATING AND SPRAY PAINTING LUMP SUM REPAIR	\$6,100.00
Thank you for your business and have a nice day !	

Reference : 2110-18

\* Cheque payment should be issued in favour to TEAMWORK GARAGE PTE LTD  
PAYNOW UEN: 201015366H  
\*\* Please ensure that your vehicle is of good condition upon the point of collection.

E. & O. E

Subtotal	\$6,100.00
Add: GST 7%	\$427.00
Total Inc GST 7%	\$6,527.00
Less: Deposit	\$0.00
Balance Due	\$6,527.00



TEAMWORK GARAGE PTE LTD

CUSTOMER'S SIGNATURE

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 26 Oct 2021 / 15:59:38

Receipt Date/Time : 26 Oct 2021 / 15:59:38

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-211026-002898

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SLB1988R

As at 25 Oct 2021/16:30:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1 Insurance Enquiry - SLB1988R  
Enquiry Fee  
20211026155852073206

7.00 0.49 7.49

Sub-Total 7.00 0.49 7.49

Total Before Rounding 7.00 0.49 7.49

Rounding Difference 0.04

Total Amount Payable 7.45

Paid By

540191XXXXXX6572 eNETS Credit Card 7.45

Total 7.45

Cash Change 0.00

Tendered Amount 7.45

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.

**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)

CERTIFICATE No. MA011769

- |  |               |   |
|--|---------------|---|
| 1. Index Mark and Registration Number of Vehicle                                       | SMR2992A      |   |
| 2. Name of Policyholder  | KUEK KIEN JOO |   |
| 3. Effective Date of Commencement of Insurance for the purposes of the Act             | 14/11/2020    | Engine No.: 08288218N55B30A<br>Chassis No.: WBALW72020DK15564<br>Excess (Named Drivers): S\$1500.00<br>Excess (Unnamed Drivers): S\$2000.00 |
| 4. Date of Expiry of Insurance   | 13/11/2021    |   |
| 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 |               |   |

KUEK KIEN JOO

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 REGULATIONS IN THAT BEHALF FROM DRIVING THE MOTOR VEHICLE.

6. Limitations as to use
- USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.
- THE POLICY DOES NOT COVER:
- (i) USE FOR HIRE OR REWARD.
  - (ii) USE FOR RACING, PACE MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
  - (iii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
  - (iv) 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.

**Policy Owners' Protection Scheme**

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the General Insurance Association Of Singapore (GIA) / Life Insurance Association Singapore (LIA) / SDIC websites ([www.gia.org.sg](http://www.gia.org.sg) / [www.lia.org.sg](http://www.lia.org.sg) / [www.sdic.org.sg](http://www.sdic.org.sg)).

I/WE HEREBY CERTIFY that the policy to which this Certificate relates to is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV for the Road Transport Act, 1987 (Malaysia).

For and on behalf of **eTiqa Insurance Pte. Ltd.**  
Approved Insurer

  
Authorised Signature



# SATISFACTION OF REPAIRED VEHICLE


I/We, Austen Kueck, owner/driver of vehicle No. SFC 988M declare that the repairs of my/our vehicle has been completed and to my/our satisfaction.

I/We agree that I/we hereby irrevocable absolutely accept the settlement amount and the liability from the third party on the repair costs and/or rental and/or loss of use which are final and that the sum of amount are to be released and payment to the workshop for such repairs in respect of the damages caused in the accident.

I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s concerned.

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Dated this 3 day of 11 (month) 20 21 (year)  
@ 16 hrs 30 mins

  
\_\_\_\_\_  
Name and Signature Austen Kueck