



HD PERFECT  
AUTOWORK PTE LTD

**HD PERFECT AUTOWORK PTE LTD**

Co. & GST Reg. No.: 202136904Z

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

Tel: +65 6341 6789 | Fax: +65 6341 6778

Email: [hdperfectautowork@gmail.com](mailto:hdperfectautowork@gmail.com)

Our Ref.: PC3485J

Your Ref.: GBL2899Z

Date: 22.01.2022

ATTN: Motor Claims Department

INS: AIG ASIA PACIFIC INSURANCE PTE. LTD.

Dear Sir/Madam,

Accident Involving: PC3485J & GBL2899Z  
Date of Accident: 17/11/2021 @ 11:15HRS  
Location: AYE(Tuas) Before Penjuru Road Exit

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 5,100.00</u>
Loss of Use:	
(6 Days x \$180/Day):	<u>\$ 1,080.00</u>
LTA Search:	<u>\$ 7.45</u>
Towing:	<u>\$ 29.00</u>
Grand Total:	<u>\$ 6,216.45</u>

The above-mentioned settlement is in respect for our client of damage pertaining to his/her motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his/her personal injuries.

For any further queries, please kindly contact Shanelle Lim @ 8297 9787, or email to [hdperfectautowork@gmail.com](mailto:hdperfectautowork@gmail.com)

Thank You,

Shanelle Lim



## Authorisation To Act

I, 3RS Transport Services ("the third party claimant") of  
735, Jurong West Street 75, #02-15, Singapore 640735  
(address), owner of PC3485J (vehicle no.)  
hereby authorise HD Perfect Autowork Pte Ltd ("the workshop")  
to act for me with respect to my claim for repair costs and / or rental and / or  
loss of use ("claim") for my vehicle no. PC3485J that was  
damaged pursuant to the accident which occurred on 17/11/2021 (date)  
at/along AYE towards Tuas (Before Penjuru Road Exit)  
(location) involving vehicle no/s GBL 2899Z ("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a manner that  
they deem it fit and the workshop is further authorised to receive payment further to settlement  
of my claim with payment cheque/s being made in favour of the workshop.

I further authorise the workshop to execute and/or sign any documents/discharge  
vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without  
prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by  
me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident  
concerned.

Dated this 07 day of 12 (month) 20 21 (year)



Signed by "the third party claimant"



HD PERFECT  
AUTOWORK PTE LTD  
Co. Reg. No. 202136904Z

Signed by "the workshop"



## Letter of Authorisation & Indemnity

Accident involving motor vehicles no. PC3485J and GBL 2899Z on 17/11/2021  
at/along AYE towards Tuas (Before Penjuru Road Exit)

1. I/We, the Owner of motor vehicle no. PC3485J hereby instruct and authorise HD Perfect Autowork Pte Ltd ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$\_\_\_\_\_ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 07 day of 12 20 21

Signature of vehicle owner \_\_\_\_\_

Name : 3RS Transport Services

IC/UEN No : 53431830D

(Company stamp, if applicable)

Address : 735, Jurong West Street  
75, #02-15, Singapore 640735

Tel : 9696 0064



Witnessed by :

Shanell Lim



HD PERFECT  
AUTOWORK PTE LTD  
UEN: 202136904Z



"My execution of this Discharge  
Voucher is only for my claim  
for property damage and not  
prejudicial to any other claims"

## AUTHORIZATION TO ACT

(AIG Asia Pacific - Express Third Party Claim)

I, 3RS Transport Services ("the third party claimant")  
of 735, Jurong West Street 75, #02-15, Singapore 640735 (address),  
owner of PC3485J (vehicle no.) hereby authorize  
HD Perfect Autowork Pte Ltd

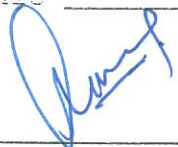
("the workshop") to act for me with respect to my claim for  
repair costs and/or rental and/or loss of use ("claim") for my  
vehicle no. PC3485J that was damaged pursuant to the  
accident which occurred on 17/11/2021 (date) along AYE towards  
Tuas (Before Penjuru Road Exit) (location)

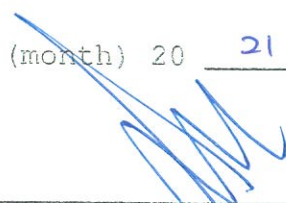
involving vehicle no/s GBL2899Z  
("the accident").

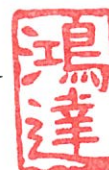
I further authorize the workshop to settle my above mentioned  
claim in a manner that they deem fit and the workshop is further  
authorized to receive payment further to settlement of my claim  
with payment cheque/s being made in favour of the workshop.

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

Dated this 07 day of 12 (month) 20 21 (year)

  
Signed by "the third party claimant"

  
Signed by "the workshop"  
(with chop)



HD PERFECT  
AUTOWORK PTE LTD  
UEN: 202156904Z

# TAX INVOICE

## HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com



HD PERFECT  
AUTOWORK PTE LTD

Date	Invoice Number	Vehicle Number
22.01.2022	HDP202201-00021	PC3485J

## AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-12 AIG BUILDING

SINGAPORE 079120

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 5,100.00
Total	\$ 5,100.00

Cross cheques and pay: HD PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

HD PERFECT AUTOWORK PTE LTD

AUTO Generated - Signature Not Required

Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 18 Nov 2021 / 14:44:39

Receipt Date/Time : 18 Nov 2021 / 14:44:39

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-211118-002282

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 - GBL2899Z As at 17 Nov 2021/11:15:00 Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.			
1	Insurance Enquiry - GBL2899Z Enquiry Fee 20211118144131639677	7.00	0.49	7.49
	<b>Sub-Total</b>	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	<b>Rounding Difference</b>			0.04
	<b>Total Amount Payable</b>			7.45
	<b>Paid By</b>			
	421808XXXXXX9928	eNETS Credit Card		7.45
	<b>Total</b>			7.45
	<b>Cash Change</b>			0.00
	<b>Tendered Amount</b>			7.45
	<b>Excess Refundable Amount</b>			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.



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard #42-01b, Singapore 038989

Email: [gears-support@shift-technology.com](mailto:gears-support@shift-technology.com)

GST Reg No: M400017735

UEN: S66SS0020G

**TAX INVOICE**

HD Perfect Autowork Pte Ltd - 3RS  
Transport Services

**Invoice Number**  
GR-2021-004344

**Invoice Issue Date**  
23 Nov 2021

**Invoice Due Date**  
30 Nov 2021

Total Amount (\$\$)	27.10
Total GST 7.00% (\$\$)	1.90
Total Amount Incl. of GST (\$\$)	29.00

Bill Type	Reference	Amount (\$\$)	GST 7.00% (\$\$)	Amount Incl. of GST (\$\$)
Sale of Accident Report - Publ	18/11/2021,17/11/2021,PC3485J,GBL2899Z	27.10	1.90	29.00
		Total Amount (\$\$)		27.10
		Total GST 7.00% (\$\$)		1.90
		Total Amount Incl. of GST (\$\$)		29.00

*This is a computer generated document.  
No signature is required.*



SP0Q21BI0001 / PREMIUM AUTOCARE CENTRE [629857]  
ENTRY DATE & TIME: 18/11/2021 14:15 (SGT)  
SUBMITTED BY: CHANG CHEE SING  
VERSION: 1 (18/11/2021 14:15 (SGT))

## 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 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. 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	18/11/2021 14:15 (SGT)
Date of Accident	17/11/2021 11:15 (SGT)
Exact Location of Accident	Near AYE, Singapore
Additional Location Information	AFTER PENJURU RD EXIT BEFORE CORPORATION RD EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC3485J
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	3RS TRANSPORT SERVICES
Company Reg No	53431830D
Email Address	3rstransportservices@gmail.com
Mobile Phone No	(Phone) +65-96960064
Alternative Phone No	+65-84242327

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Bus
Transmission	Auto
CC	2982

### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	5122083788
Cover Note Number	-

### DRIVER

Name of Driver	MOHAMED ASHFAQ BIN PEER MOHAMUD
----------------	---------------------------------



Date Of Birth	01/06/1978
Occupation	Outdoor
Date Of Driving Pass	05/08/2015
Driving experience	6 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84242327
Alt. Phone Number	-
Email Address	3rtransportservices@gmail.com
Address	BLK 20 TEBAN GARDENS ROAD
Address complement	#13-99
Postcode	600020
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	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 against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING ALONG AYE TWDS TUAS, AFTER PENJURU EXIT, FRONT VEHICLE SLOW DOWN AND COME TO A COMPLETE STOP, MY VEHICLE WAS STOPPED DUE TO FRONT TRAFFIC, ABOUT 5-10 SECOND LATER, THE VEHICLE B ( GBL 2899 Z ) HIT ME FROM THE BACK.

#### 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	GBL2899Z
Vehicle Manufacturer	-
Vehicle Model	-
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)	-

**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



*[Handwritten signature]*

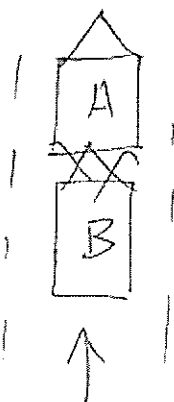
*[Handwritten signature]*

Policyholder's Signature / Date & Time  
19/11/2011  
Sketch Plan @ 13:48

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

Witnessed by Reporting Centre Personnel  
*Chang Chee Sing*  
17 Nov

A = PC 3485 J  
B = GBL 2899 Z



Describe Circumstances of the Accident

I was travelling along AVE tuds Tuas, after Penjurong Exit, front vehicle slow down and come to a complete stop, my vehicle was stopped due to front traffic, about 5-10 second later, the vehicle B (6BGL 2899Z) hit my from the back.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

18/11/2021  
@ 13:48

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

*[Signature]*

Witnessed by Reporting Centre Personnel

*[Signature]*


Chang Chee Seng  
17 Nov



PC3485J

Driver

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7815473Z





Name  
MOHAMED ASHFAQ BIN PEER  
MOHAMUD

Race  
INDIAN


Date of birth  
01-06-1978

Sex  
M

Country of birth  
SINGAPORE



4259029

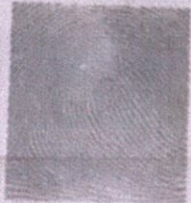


NRIC No. S7815473Z

Date of issue  
05-08-2008

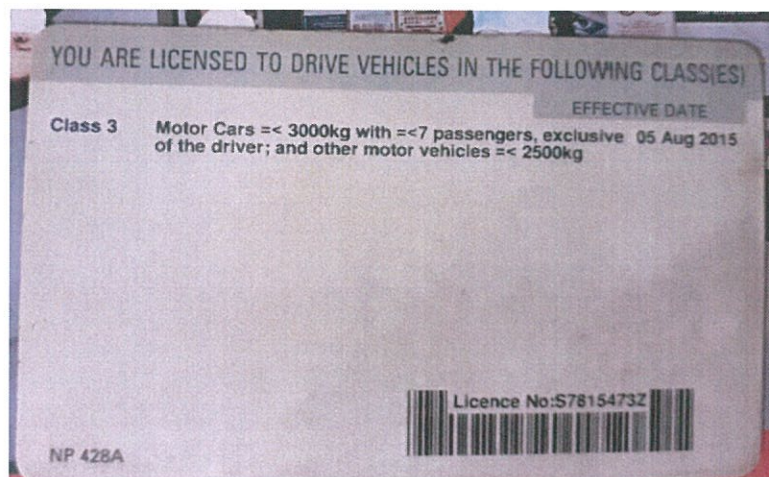
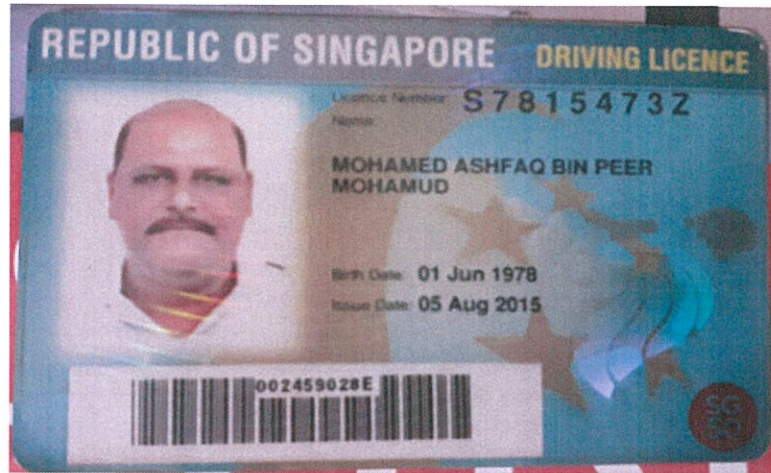
APT BLK 20 TEBAN GARDENS ROAD #13-99  
SINGAPORE 600020

S7815473Z 17/07/2013



PC3485J


Driver



PC3485J

Driver

Land Transport Authority




**VOCATIONAL LICENCE**  
Licence No : S7815473Z  
Name : MOHAMED ASHFAQ BIN PEER  
MOHAMUD

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check  
the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	16/08/2018
03	BUS VL	03/07/2019
04	BUS ATTENDANT	03/07/2019



## 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** : 5122083788

**Cover** : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle : **PC3485J**  
 Chassis Number : KDH2230022743
2. Name of Policyholder : **3RS TRANSPORT SERVICES**
3. Effective Date of Insurance : **17 May 2021**
4. Expiry Date of Insurance : **16 May 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 the carriage of passengers in connection with the Policyholder's business.  
 (b) Limited to carry 14 passengers

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

\* 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.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: N/A
EXCESS (SECTION II)	: S\$3,000
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: ABS FINANCIAL 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 : ABS INSURANCE AGENCY PTE LTD (00000573388)

Date of Issue : 17 May 2021 16:51 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive