



JL PERFECT AUTOWORK PTE LTD

Co. & GST Reg. No.: 202136905K

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

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

Email: jlperfectautowork@gmail.com

Our Ref.: SNC7433G

Your Ref.: SJW8059P

Date: 12.04.2022

ATTN: Motor Claims Department

INS: AIG ASIA PACIFIC INSURANCE PTE LTD

Dear Sir/Madam,

Accident Involving: SNC7433G & SJW8059P

Date of Accident: 22.12.2021 @ 12:45HRS

Location: Bukit Panjang Road Slip Road Towards Upper Bukit Timah Road

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair: \$ 7,800.00

Loss of Use:

(13 Days x \$150/Day): \$ 1,950.00

LTA Search: \$ 7.45

3rd Party Report: \$ 29.00

Grand Total: \$ 9,786.45

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 jlperfectautowork@gmail.com

Thank You,

Shanelle Lim



Authorisation To Act

I, Muhammad Ridzuan Bin Rahim ("the third party claimant") of
Blk 783C Woodlands Rise #02-13 (S) 733783
(address), owner of SHC7433G (vehicle no.)
hereby authorise JL 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. SHC7433G that was
damaged pursuant to the accident which occurred on 22/12/2021 (date)
at/along Bukit Panjang Rd Slip Rd trade upper Bukit Timah Rd
(location) involving vehicle no/s JSW 8059P ("the accident").

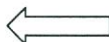
I further hereby authorise the workshop to settle my above mentioned claim in a manner that
they deem it fit and the workshop is further authorised to receive payment further to settlement
of my claim with payment cheque/s being made in favour of the workshop.

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 22 day of 12 (month) 20 21 (year)

Bie



Signed by "the third party claimant"



[Signature]

Signed by "the workshop"

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SNC7433G and SSW8059P on 22/12/2021
at/along Bukit Panjang Rd slip road towards Upper Bukit Timah Rd

1. I/We, the Owner of motor vehicle no. SNC7433G hereby instruct and authorise JL 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 22 day of 12 2021

Signature of vehicle owner

Name: Muhammad Ridwan Bin Rahim

IC/UEN No: S8925169I

(Company stamp, if applicable)

Address: Blk 703C Woodlands

Rm #02-13 (S) 703783

Tel: 8818 7031

Witnessed by:

Shamir Lim



"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, Muhammad Ridwan Bin Rahim ("the third party claimant")
of BK 783C Woodland Rise #02-13 U733783 (address),
owner of SNC 7433 G (vehicle no.) hereby authorize
3L 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. SNC 7433 G that was damaged pursuant to the
accident which occurred on 22/12/2021 (date) along Bukit Panjang
rd side of road oppo GRC Timesth Rd (location)
involving vehicle no/s STW 8059P
("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 22 day of 12 (month) 20 21 (year)

[Signature]
Signed by "the third party claimant"

[Signature]
Signed by "the workshop"
(with chop)



TAX INVOICE

JL PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136905K

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: jlperfectautowork@gmail.com



Date	Invoice Number	Vehicle Number
12.04.2022	JLP202204-00069	SNC7433G

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	\$ 7,800.00
Total	\$ 7,800.00

Cross cheques and pay: JL PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

JL 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 : 22 Dec 2021 / 14:03:36

Receipt Date/Time : 22 Dec 2021 / 14:03:36

Tax Invoice/Receipt

Receipt No. : ITNET-00000-211222-002383

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 - SJW8059P

As at 22 Dec 2021/12:45:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

1	Insurance Enquiry - SJW8059P Enquiry Fee 20211222140113998636	7.00	0.49	7.49
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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			
526471XXXXXX0544	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.



RECORD MANAGEMENT CENTRE

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

9 Temasek Boulevard #42-01b, Singapore 038989

Email: gears-support@shift-technology.com

GST Reg No: M400017735

UEN: S66SS0020G

TAX INVOICE

JLPerfect Autowork Pte Ltd -
Muhammad Ridzuan Bin Rahim

Invoice Number
GR-2021-004789

Invoice Issue Date
24 Dec 2021

Invoice Due Date
31 Dec 2021

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

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	24/12/2021,22/12/2021,SNC7433G,SJW8059P	27.10	1.90	29.00
		Total Amount (S\$)		27.10
		Total GST 7.00% (S\$)		1.90
		Total Amount Incl. of GST (S\$)		29.00

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



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	23/12/2021 13:11 (SGT)
Date of Accident	22/12/2021 12:45 (SGT)
Exact Location of Accident	Bukit Panjang Rd, Singapore
Additional Location Information	SLIP ROAD TOWARDS UPPER BUKIT TIMAH ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNC7433G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	MUHAMMAD RIDZUAN BIN RAHIM
NRIC No	S8925169I
Email Address	bumblebbb8888@gmail.com
Mobile Phone No	(Phone) +65-88187031
Alternative Phone No	+65-88187031

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Yaris
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	1490

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00238032100
Cover Note Number	-

DRIVER

Name of Driver	MUHAMMAD RIDZUAN BIN RAHIM
NRIC No	S8925169I

Date Of Birth	04/08/1989
Occupation	Indoor
Date Of Driving Pass	22/12/2016
Driving experience	5 YEARS
Gender	Male
Mobile Number	(Phone) +65-88187031
Alt. Phone Number	+65-88187031
Email Address	bumblebbb8888@gmail.com
Address	BLK 783C WOODLANDS RISE
Address complement	#02-13
Postcode	733783
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	NIZAMUDDIN
Gender	Male

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 THE ATTACHED STATEMENT

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	SJW8059P
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	MUHAMMAD RIDZUAN BIN RAHIM
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SNC7433G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No


SKETCH PLAN

IMPORTANT NOTICE

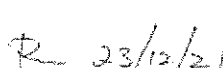
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts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



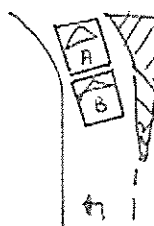
Driver's Signature (If driver is not the policyholder) / Date
& Time

 23/12/21

Witnessed by Reporting Centre
Personnel

Sketch Plan

veh A: SNC7433G
veh B: SJW8059P



Bukit Panjang Road, tip road
Inwards Upper Bukit Timah Rd.

Describe Circumstances of the Accident

[illegible]

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

ON THE STATED DATE AND TIME. I , VEHICLE A (SNC7433G) WAS STATIONARY ON THE STATED VENUE TO WAIT FOR THE TRAFFIC TO BE CLEARED BEFORE MOVING OFF. SUDDENLY I FELT A HUGE IMPACT FROM THE REAR PORTION OF MY STATIONARY VEHICLE. AFTER I ALIGHTED I THEN REALISE THAT IS VEHICLE B (SJW8059P) THAT HAD COLLIDED ONTO MY VEHICLE.

I WISH TO STATE THAT I GOT 1 PASSENGER IN MY CAR.

VEHICLE A : SNC7433G

VEHICLE B : SJW8059P

A handwritten signature in black ink, appearing to be 'SJW', is written over the text 'VEHICLE B : SJW8059P'.

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8925169I



Name

MUHAMMAD RIDZUAN BIN RAHIM

محمد ريزون بن رحيم

Race

BOYANESE

Date of birth

04-08-1989

Sex

M

S8925169I

Country/Place of birth

SINGAPORE



SNC7433G

Owner and Driver

5318099



NRIC No. S8925169I



Date of issue

29-05-2014

APT BLK 783C WOODLANDS RISE #02-13
SINGAPORE 733783

NRIC No: S8925169I

Date: 11/07/2018

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S89251691**
 Name: **MUHAMMAD RIDZUAN BIN RAHIM**
 Birth Date: **04 Aug 1989**
 Issue Date: **16 Nov 2013**

002246533H



SNC7433G

Owner and Driver

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


		EFFECTIVE DATE
Class 2B	Motorcycles ≤ 200 CC	12 Feb 2008
Class 2A	Motorcycles between 201 CC and 400 CC	23 Mar 2013
Class 2	Motorcycles > 400 CC	09 Oct 2014
Class 3	Motor cars ≤ 3000 kg with ≤ 7 passengers, exclusive of the driver; and motor tractors/vehicles ≤ 2500 kg	22 Dec 2016

S89251691

S / No. 9000264942

NP 428A

Licence No: S89251691



Motor Private Car

MX1F

N SN

AN0644A

Cov. Type:C

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.	DMPCSNW00238032100	Engine No.: M15AY203324	Cha. No.: MXPB102012893
1. Index Mark and Registration Number of Vehicle	SNC7433G	AUTOSAFE	=====
2. Name of Policy Holder	MUHAMMAD RIDZUAN BIN RAHIM		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	12/11/2021 (00:00:00)	Named Drivers Ex Sect. I	SS500.00
		Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	SS3,000.00
		Ex Sect. I - Age >= 26	SS500.00
		* Age as at date of accident	
		EX ON WINDSCREEN .	SS100.00
4. Date of Expiry of Insurance	11/11/2022		
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 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*			
Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, 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.			
Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.			

HIRE PURCHASE CO.: OCBC BANK

** 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.***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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: CAR HOUSE ENTERPRISE (S) PTE LTD
Authorised Officer

Authorised Signatory