

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

Date : 01.03.2022

AXA Insurance Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SJS 4326R / SH 9513K ON 27.12.2021

We are the authorized repair workshop for the owner of motor vehicle no: **SJS 4326R**, which was involved in the captioned accident with your insured vehicle no: **SH 9513K**. 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)	\$	4,815.00
2) Loss of Use (4 Days X \$60)	\$	240.00
	\$	<u>5,055.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|--------------------------|------------------------------------|
| a) Final Repair Invoice | b) Letter of Authorisation, etc... |
| c) GIA Report | d) I/C & Driving Licence |
| e) Insurance Certificate | f) 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

AXA Insurance Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn : Motor Claim Department

Tax Invoice : 22753

Date : 01.03.2022

Vehicle No : SJS 4326R

Make/Model : TOYOTA VIOS E

Chassis/Eng# :

Accident Date : 27.12.2021

Claim No :

Reference : 1221 -22753

Policy No :

	Amount
To proceed on lump sum repair	S\$ 4500.00

E. & O. E.

Total : S\$	4500.00
GST @ 7% : S\$	315.00
Amount Due : S\$	4815.00


for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

AUTHORISATION TO ACT

I/We, Peresh Kumar s/o Gnanasegaran (the third party claimant") of BK 858 Yishun Ave 4
#03-25 S760858 (address), owner of SJS4326R (vehicle no.) hereby
authorize Fastech Auto 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.
SJS4326R that was damaged pursuant to the accident which occurred on 27/12/21 (date)
along BKE Toward KJE (location) involving
vehicle no/s SH951315 ("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 28 (day) of Dec (month) 2021 (year)



Signed by "the third party claimant"
(with company stamp if applicable)



Signed by "the workshop"
(with company stamp)

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	28/12/2021 18:13 (SGT)
Date of Accident	27/12/2021 19:50 (SGT)
Exact Location of Accident	BKE, Singapore
Additional Location Information	BKE TOWARDS KJE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJS4326R

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NERESH KUMAR S/O GNASEGARAN
NRIC No	SXXXX708I
Email Address	KANCHULOVES28@GMAIL.COM
Mobile Phone No	(Phone) +65-84181190
Alternative Phone No	(Home) +65-84181190

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
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	5123124322
Cover Note Number	-

DRIVER

Name of Driver	KANCHANA D/O SYED IBRAHIM
NRIC No	SXXXX728I

Date Of Birth	28/01/1991
Occupation	Indoor
Date Of Driving Pass	14/12/2016
Driving experience	5 YEARS
Gender	Female
Mobile Number	(Phone) +65-96559385
Alt. Phone Number	-
Email Address	KANCHULOVES28@GMAIL.COM
Address	APT BLK 698B JURONG WEST CENTRAL 3 #10-59
Address complement	-
Postcode	642698
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	GIRLFRIEND
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	NERESH KUMAR S/O GNASEGARAN
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 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	SH9513K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi

Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AXA Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KANCHANA D/O SYED IBRAHIM
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJS4326R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

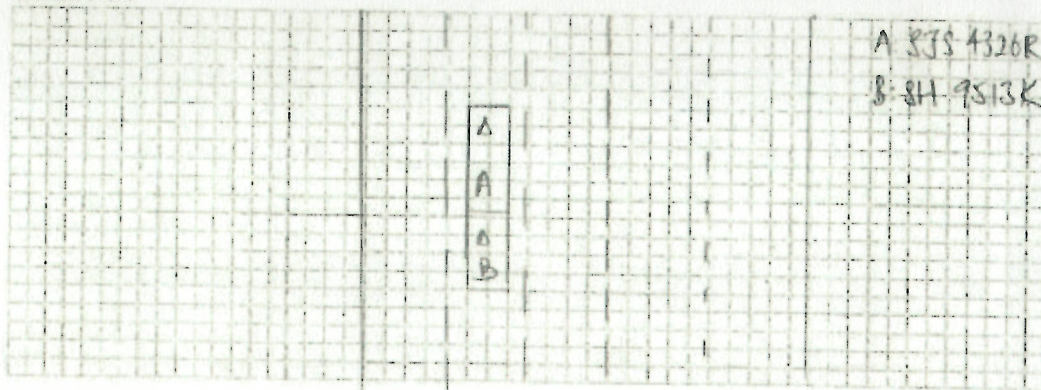
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

On 27/12/21 at about 19:50 pm, I was travelling along BKE towards KJE near to the Exit I was stationary due to front traffic. Suddenly vehicle B hit the rear of my vehicle.

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



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
5 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SY0A21CS0008 Vehicle Registration No: SJS 4326R
Name (as shown in NRIC) : Kanchana D/O Syed Ibrahim NRIC/FIN/Passport No : S9103728I
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Blk 698B Jurong West Central 3 #10-59 Singapore (642698)
Contact (Tel) : _____ Mobile No. : 9655 9385
Email Address : kanchu.love.28@gmail.com
Date of Accident : 27/12/2021 Time of Accident : 19:50PM
Place of Accident : BKE Towards KJE
Insurance Company : NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

- 1) Email Address: "KANACHALOVE28@GMAIL.COM" change to
"KANCHU LOVES28@GMAIL.COM".
- 2) Relationship of the Driver with the Insured: "Spouse" change to "Girlfriend".

Policyholder / Driver's Signature
Date:

MAY
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

Owner

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S94227081



Name

NERESH KUMAR S/O GNASEGARAN

நிரேஷ் குமார்

Race

INDIAN

Date of birth

22-06-1994

Sex

M

S94227081

Country/Place of birth

SINGAPORE

For Insurance Reporting &
Claim Purposes Only

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For Insurance Reporting &
Claim Purposes Only

5947473



NRIC No. S94227081



Date of issue


11-05-2018

Address

APT BLK 858 YISHUN AVENUE 4
#03-85
SINGAPORE 760858

Driver

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S91037281



Name
KANCHANA D/O SYED IBRAHIM
காஞ்சனா
Race
INDIAN
Date of birth
28-01-1991
Sex
F
Country of birth
SINGAPORE

3849639

For Insurance Reporting
Claim Purposes Only


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S91037281
Name:
KANCHANA D/O SYED IBRAHIM
Birth Date: 28 Jan 1991
Issue Date: 17 Oct 2017




002734494D

3849639



NRIC No. S91037281



Date: 03-2006

APT BLK 698B JURONG WEST CENTRAL 3 #10-59
SINGAPORE 642698

NRIC No: S91037281 Date: 03/04/2018

For Insurance Reporting
Claim Purposes Only

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

	EFFECTIVE DATE
Class 3A Motor cars without clutch pedals (Auto) with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight <= 2500kg	14 Dec 2016

NP 428A

Licence No: S91037281



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: 5123124322

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SJS4326R**
Chassis Number : MR053HY9305126074
2. Name of Policyholder : **NERESH KUMAR S/O GNASEGARAN**
3. Effective Date of Insurance : **29 Jul 2021**
4. Expiry Date of Insurance : **28 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
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: KANCHANA D/O SYED IBRAHIM
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: ZW CAPITAL 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 : GS ASSURANCE AGENCY PTE. LTD. (00000573647)

Date of Issue : 28 Jul 2021 17:06 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:	708I
Vehicle Details	
Vehicle No.:	SJS4326R
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Dec 2021
Vehicle Make:	TOYOTA
Vehicle Model:	VIOS E AUTO
Primary Colour:	White
Manufacturing Year:	2009
Engine No.:	1NZX955604
Chassis No.:	MR053HY9305126074
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$12,717.00
Original Registration Date:	17 Aug 2009
First Registration Date:	17 Aug 2009
Transfer Count:	3
Actual ARF Paid:	\$12,717.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	16 Aug 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$14,664.00
COE Rebate Amount:	\$7,726.00
Total Rebate Amount:	\$7,726.00
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 28 Dec 2021

OK