



WITHOUT PREJUDICE

Our Ref: YP 7646K

Your Ref: YN 8800K- S2M03RAX

10th March 2022

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AXA Insurance Pte Ltd

Dear Hsiao Tong,

Accident Involving: YP 7646K and YN 8800K

Date of Accident: 15 January 2022

Location of Accident: Along Mcpherson Road (After Junction of Mcpherson Lane)

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair Inc. GST	\$ 13,963.50	\$13,050 COR Agreed + \$913.50 GST
Add Loss of Use	\$ 1,500.00	10 Days : 2 Days PRS + 1 Day Resurvey (18 Feb) + 6 Repair Days Agreed + 1 Sunday (20 Feb)
TOTAL	\$ 15,463.50	
Add Search Fee	\$ 7.45	
GRAND TOTAL	\$ 15,470.95	

Kindly pay the Grand Total Amount of **\$15,470.95** to:

Team AutoPro Pte Ltd
160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

Thank you



Regards
Adel (Ms)

Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

Tel: 6258-1955 Fax: 6258-1956 Email: teamautoffice@gmail.com / teamautopl@gmail.com

PROFORMA INVOICE

**ATTENTION:**

24 Hour Recovery Services

PI Number	P2203-2557
PI Date	10-Mar-2022
Vehicle No.	YP 7646K
Accident Date	15-Jan-2022

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. YP 7646K	COR Lump Sum		\$ 13,050.00

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$	13,050.00
GST 7%	\$	913.50
GRAND TOTAL AMOUNT	\$	13,963.50

Authorized Signature

A blue ink signature is written over a circular blue stamp. The stamp contains the text "TEAM AUTO PRO PTE. LTD." around the top edge, "TEAM AUTO PRO" in the center, and "Reg No: 201811621K" around the bottom edge.



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 18 Jan 2022 / 10:35:26

Receipt Date/Time : 18 Jan 2022 / 10:35:26

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220118-000869

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 - YN8800K

As at 15 Jan 2022/10:30:00

Insurance Co: AXA INSURANCE PTE LTD

1 Insurance Enquiry - YN8800K
Enquiry Fee
20220118103420270903

7.00	0.49	7.49
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Sub-Total	7.00	0.49	7.49
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Total Before Rounding	7.00	0.49	7.49
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Rounding Difference			0.04
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Total Amount Payable			7.45
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Paid By

426569XXXXXX8100	eNETS Credit Card	7.45
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Total		7.45
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Cash Change		0.00
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Tendered Amount		7.45
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Excess Refundable Amount		0.00
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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.

To : **Team AutoPro Pte Ltd**
CRN : **201811621K**
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

Letter of Authorization & Undertaking

In Respect of Accident Involving my/our Vehicle No.: YP7646K
and YN 8800 K and
and and
@ Along Macpherson Road Towards (after junction of Macpherson Lane)
dated 15/01/22

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,



Claimant Signature & Co's Stamp (if applicable)

Date:

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	17/01/2022 18:23 (SGT)
Date of Accident	15/01/2022 10:30 (SGT)
Exact Location of Accident	MacPherson Rd, Singapore
Additional Location Information	ALONG MACPHERSON ROAD (AFTER JUNCTION OF MACPHERSON LANE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP7646K
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	24 HOUR RECOVERY SERVICES
Company Reg No	5XXXX929D
Email Address	24hoursrecovery@gmail.com
Mobile Phone No	(Phone) +65-94311986
Alternative Phone No	(Office) +65-94311986

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	Nhr69e
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	Commercial vehicle
Transmission	Auto
CC	3050

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	SPMF1000000485
Cover Note Number	-

DRIVER

Name of Driver	DERRICK CHEE WIN SUM
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NRIC No	SXXXX585A
Date Of Birth	31/08/1986
Occupation	Outdoor
Date Of Driving Pass	14/03/2019
Driving experience	2 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94311986
Alt. Phone Number	-
Email Address	24hoursrecovery@gmail.com
Address	BLK 739 JURONG WEST STREET 73 #09-60 SINAGPORE
Address complement	-
Postcode	640739
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	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?	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?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE SKETCH PLAN (POLICE REPORT NO. T/20220115/2088).

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	YN8800K
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

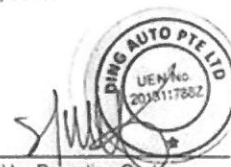
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

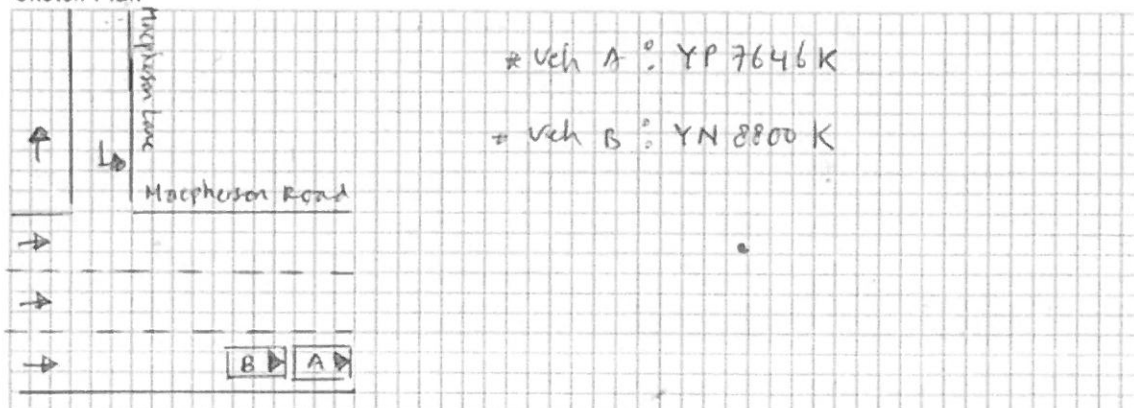
Jack

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 police report : 7/20200115/2088

* I wish to add in the following:

after the accident, I tried to operate the hydraulic system of my tow truck but it is already mal-functioned after being hit by vehicle B.

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



**SINGAPORE
POLICE FORCE**



T/20220115/2088

1 of 3

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20220115/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/01/2022 23:16		Vide Report No.:		Station Diary No.: 134
Informant's Particulars				
Name of Informant: DERRICK CHEE WIN SUM		Address: APT BLK 739 JURONG WEST STREET 73 #09-60 SINGAPORE 640739		
ID Type / ID No.: NRIC NO / S8661585A		Contact No.: Home/Office: Mobile: 94311986		
Nationality: MALAYSIAN		Email:		
Sex: Male	Age: 35	Date of Birth: 31/08/1986	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: TOWING CREW		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/01/2022 10:30	Type of Location: T-Junction
Location: MACPHERSON ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YN8800K	Tow Truck					0
YP7646K	Tow Truck					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20220115/2088

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Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20220115/2088

CONTINUATION OF REPORT

Driver			
Name	DERRICK CHEE WIN SUM	ID No.	S8661585A
Related Vehicle	YP7646K (Tow Truck)	Contact No.	94311986
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	15/01/2022	Date Discharge	15/01/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	Truck Driver	ID No.	NIL
Related Vehicle	NIL	Contact No.	90217589
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 15/01/2022 at about 1030hrs, I was drove my tow truck to Macpherson road to attend to an accident there as instructed by my company (24hr recovery). I was stationary along the first lane waiting for traffic to clear up in front of me. Then suddenly a tow truck hit onto the rear of my tow truck. I came out to assess the damage and saw scratches on my vehicle rear portion. The other truck suffered dented front bumper, damaged head lights and cracked windscreen. Nobody reported any injury at scene. We gave our particulars to the Traffic Police officer and left scene. Later, while driving, I felt dizzy and pain on my neck area. As such, I stopped my tow truck and called for ambulance. I was treated at Changi General Hospital and was given 3 days Medical Leave. I am now making the report as advised by the Traffic Police at scene.



**SINGAPORE
POLICE FORCE**



T/20220115/2088

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 3

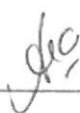

Report No. T/20220115/2088

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report J/ Staff Sgt R VIKNESH 	Signature Of Informant: 
Signature Of Interpreter: Not applicable <div style="border: 1px solid black; width: 150px; height: 20px; margin-left: 100px; text-align: center;">SIGNATURE</div>	Date/Time: 15/01/2022 23:16
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN Contact No.: 65476404	Classification Of Case:

Allianz Insurance Singapore Pte Ltd

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1960
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number	: SPMF1000000485
Date of Issue	: 04 October 2021
Coverage	: THIRD PARTY, FIRE AND THEFT
Policyholder	: 24 HOUR RECOVERY SERVICES
Finance Company	: THIAM HENG AUTO (S) PTE LTD
Period of Insurance	: 29 September 2021 To 28 September 2022 (both dates inclusive)
Registration Number	: YP7646K
Chassis Number of Vehicle	: JAANPR85HH7100977

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 the his/her permission or to whom the vehicle is hired.**

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage

Limitation as to Use^:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
- (b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.

^ Limitation rendered inoperative by Section 8 of 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 does not cover:

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

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).

04 October 2021

Issue Date



Hicham Raissi
 Chief Executive Officer
 Allianz Insurance Singapore Pte Ltd

Intermediary Code	: 0000156 GENRIVER FINANCIAL PTE LTD
Excess	: Section 1 : Own Damage
	: Section 1 : Windscreen
	: Section 2 : Liabilities to Third Parties

SGD	-
SGD	-
SGD	1,500.00

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait photo of a man.

License Number: **S8661585A**

Name: **DERRICK CHEE WIN SUM**

Birth Date: **31 Aug 1986**

Issue Date: **03 Nov 2018**

Barcode: 0028649520

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8661585A**

Portrait photo of a man.

Name: **DERRICK CHEE WIN SUM**

Race: **CHINESE**

Date of birth: **31-08-1986**

Country/Place of birth: **MALAYSIA**

Sex: **M**

NRIC No: **S8661585A**

Coat of arms of Singapore.

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

		EFFECTIVE DATE
C Class 2B	Motorcycles <= 200 CC	03 Nov 2018
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	14 May 2019

S8661585A

S / No. 9000297436

Licence No: S8661585A

NP 428A

9479792

Barcode

NRIC No: **S8661585A**

Fingerprint

Nationality: **MALAYSIAN**

Date of issue: **27-03-2018**

Address: **APT BLK 739 JURONG WEST STREET 73
#09-60
SINGAPORE 640739**