FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date:

19.05.2022

Lonpac Insurance BHD 300 Beach Road #17-04/07 The Concourse Singapore 199555

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: YP 3452D / YN 618Z ON 09.02.2022

We are the authorized repair workshop for the owner of motor vehicle no: $YP\ 3452D$, which was involved in the captioned accident with your insured vehicle no: $YN\ 618Z$. 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)

2) Loss of Use (7 days + 1 Sunday X \$250)

3) GIA Search Fee

\$ 6,527.00
\$ 2,000.00
\$ 2.00
\$ 8,529.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

b) GIA Search Result

c) Letter of Authorisation, etc...

d) GIA Report

e) I/C & Driving Licence

f) Insurance Certificate

g) 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

Lonpac Insurance BHD

300 Beach Road

#17-04/07 The Concourse

Singapore 199555

Attn: Motor Claim Department

Tax Invoice: 22829

Date

19.05.2022

Vehicle No

YP 3452D

Make/Model ISUZU FVR34SUQDC

Chassis/Eng# :

Accident Date 09.02.2022

Claim No

Reference

0222 -22829

Policy No

Amount

To proceed on lump sum repair

S\$

6100.00

E. & O. E.

Total: S\$

6100.00

GST @ 7%: S\$

427.00

Amount Due: \$\$

6527.00

for FASTECH AUTO PTE LTD

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

YN618Z

Date of Accident

09/02/2022

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Requested Date _______10/02/2022 12:25

Payment details

Request Amount: \$\$1.87 GST Amount: \$\$0.13

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

DATE : [0.0]. 2022
TO: lonpac Insurance Bhd
RE : ACCIDENT INVOLVING VEHICLE NO. YP 3452D YN 618Z
ALONG Jurong Town Hall Road Towards AYE (Before Jurong East Centre) ON 19.02.2022
of (NRIC No./ROC No.) 196200138N
of Sophio Road # 05-03 Peace Centre Singapore 228149. owner of vehicle noYP 3452D in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle YP 3452D at my/our instruction and hereby authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever amount settled/payable by the Insurance Company and/or third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use, etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and all claimed and/or settled shall belong to them absolutely. I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.
Signature of Owner : Name of Owner :

The state of



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.

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 witholding 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 10/02/2022 21:25 (SGT) Date of Accident 09/02/2022 17:10 (SGT) **Exact Location of Accident**

Singapore

\dditional Location Information JURONG TOWN HALL ROAD TOWARDS AYE BEFORE

JURONG EASR CENTRAL

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YP3452D

INSURED/POLICYHOLDER

Country/State of Loss

Is company? Name Of Registered Owner NIPPON PAINT (SINGAPORE) COMPANY PTE LTD Company Reg No 196200138N

Email Address DAVISNG@NIPPONPAINT.COM.SG Mobile Phone No (Phone) +65-62655355

Alternative Phone No (Office) +65-62655355

VEHICLE PARTICULARS

Nanufacturer Isuzu Model Fvr34p 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 Commercial vehicle

Transmission Manual

CC 7790

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd. Type of Coverage Comprehensive

Fleet Policy

Policy Number D20MTPCVE001045

Cover Note Number

DRIVER

Name of Driver CHINNAPPAN JOHN BOSCO

Accident report SK0L222A000H

Page 1 of 20

Work Permit No G7560759N Date Of Birth 21/03/1982 Occupation Outdoor Date Of Driving Pass 26/12/2014 Driving experience 7 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-92359614 Alt. Phone Number Email Address LEE_HARDWARE@YAHOO.COM Address 1 FIRST LOK YANG ROAD JUTONG S 629728 Address complement Postcode 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 - Change/cross lane Weather Conditions Raining 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 TO THE ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number YN618Z Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver BALAKRISHNAN THIYAGARAJAN Work Permit No G7137944U

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 Formmust 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 flability.
- 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.
- 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.

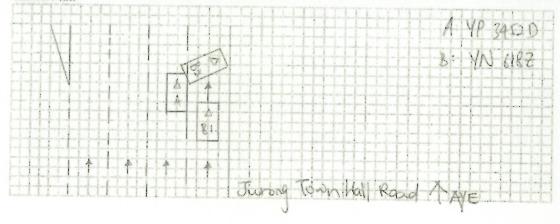


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Ou	umstances of the Accident 09/02/2022 At About 17:10 PM. I was travelly along	
uvory	town hall rd towards AYE before Juvery East Con	
	dula del dissa to to a second	_
mad-	addenly, vehicle B skitted and hitted the right from	Ŧ
ortion	of my vehicle.	
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	The state of the s	-

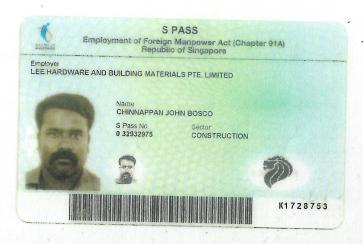
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Winessed by Reporting Centre Personnel



For Insurance Reporting Airc Claim Purposes Only





For Insurance Reporting And Claim Purposes Only

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

Class 3

EFFECTIVE DATE

31 Oct 2007

Class 4

Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg Motor vehicles which are not constructed to carry load or passengers and the unladen weight > 2500kg Motor vehicles which are not constructed to carry load or passengers and the unladen weight =< 7250kg

26 Dec 2014



SOMPO

50 Raffies Place #05-01 06
Singapore Land Tower, Singapore 043623
Tel 6461 6555 | Fax: 5221 3302 | www.sompo.com.sg
Co. Reg. No., 198905490E | GST Reg. No. M20000000

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) **ROAD TRANSPORT ACT 1987 (MALAYSIA)** ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Cert No./Policy No.

: D20MTPCVE001045

1. Registration No.

: YP3452D - Item No. 1

2. Insured Name

: NIPPON PAINT (SINGAPORE) COMPANY PRIVATE LIMITED

4. Expiry Date

3. Commencement Date : 08 JUNE 2020 00:00

: 07 JUNE 2022 23:59

5. Coverage

: Market value at time of loss - Comprehensive

6. Excess

: \$1000 - Section I

7. Persons or Classes of Persons entitled to drive*

a) The Insured.

b) Any other person who is driving on the Insured'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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

8. Limitations as to use*

1) Use in connection with the Insured's business.

- 2) Use for the carriage of passengers (other than for hire or reward) in connection with the policyholder's business
- 3) Use for social, domestic or pleasure purposes.

The Policy does not cover

1) Use for hire or reward or racing, pacemaking, reliability trial or speed-testing.

- 2) Use whilst drawing a greater number of trailers in all than is permitted by law. N.B. Use solely for "Breakdown" purposes is not deemed to be used for hire or reward.
- 9. ExcelDrive Workshops & Accident Reporting

It is a condition precedent to liability that the Policyholder shall, together with the Motor Vehicle, call at the Company's Accident Reporting Center and report the accident within 24 hours of the accident or by the next working day thereof.

It is compulsory to have the accident repairs to the insured vehicle carried out at ExcelDrive Workshops, otherwise claim is not payable.

In an emergency and for directions to the Company's Accident Reporting Centers, please contact our Emergency Hotline: (65) 6461 6555

sit www.sompo.com.sg for list of ExcelDrive Workshops and Accident Reporting Centers.

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)

Sompo Insurance Singapore Pte. Ltd.

Lui 20

Date/Time of Issue: 03 APRIL 2020 13:28

*Limitation 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.

IMPORTANT NOTICE

- 1. Insureds are hereby warned that under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap.189), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicles without a valid policy of insurance under the Act.
- 2. Insureds are further warned that on the sale of a motor vehicle or if for any reason the Insurance is terminated during its currency, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation)Act (Cap.189)

 3. The Policy will cease to be valid once the motor vehicle has been sold to another person. It is not transferable to a new owner of the Vehicle.
- 4. Please note that this insurance is subject to the premium being paid and received in full by the Company (a) before the inception date where the Policy is to be issued to an Individual; or (b) within the period specified in the Premium Payment Warranty applied to the Policy in all other instances.

5. Insurance coverage under this Policy is subject to the terms and conditions as stipulated in the Motor Insurance Policy

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	138N
Vehicle No.:	YP3452D
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Feb 2022
Vehicle Make:	ISUZU
Vehicle Model:	FVR34SUQDC
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	6HK1684931
Chassis No.:	JALFVR347G7000836
Maximum Power Output:	
Open Market Value:	\$54,909.00
Original Registration Date:	20 Jul 2016
First Registration Date:	20 Jul 2016
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$2,746.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	19 Jul 2026
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$47,889.00
COE Rebate Amount:	\$21,266.00
Total Rebate Amount:	\$21,266.00

The information contained herein is correct as at 10 Feb 2022