

# 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 : 12.04.2022

AIG Asia Pacific Insurance Pte Ltd  
Chartis Building  
78 Shenton Way #07-16  
Singapore 079120

Attn: Motor Claim Department

Dear Sir/Madam,

## ACCIDENT INVOLVING VEHICLES : YQ 5158K / GBG 2269T ON 06.03.2022

We are the authorized repair workshop for the owner of motor vehicle no: **YQ 5158K** , which was involved in the captioned accident with your insured vehicle no: **GBG 2269T** . 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) | \$ 7,490.00        |
| 2) Loss of Rental                    | \$ 385.20          |
| 3) GIA Search Fee                    | \$ 2.00            |
|                                      | <u>\$ 7,877.20</u> |

We enclosed herewith the following documents to support the claims:

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

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn : Motor Claim Department

Tax Invoice : 22869

Date : 12.04.2022

Vehicle No : YQ 5158K

Make/Model : HINO XZU710R 14FT

Chassis/Eng# :

Accident Date : 06.03.2022

Claim No :

Reference : 0322 -22869

Policy No :

---

|                               | Amount      |
|-------------------------------|-------------|
| To proceed on lump sum repair | S\$ 7000.00 |

---

E. & O. E.

Total : S\$ 7000.00

GST @ 7% : S\$ 490.00

*Amount Due* : S\$ 7490.00

  
for FASTECH AUTO PTE LTD



# LIAN AIK LEASING PTE LTD

No 363 Joo Chiat Road Singapore 427608 Tel : 6345 8080 Fax : 6345 6793  
Company UEN & GST Regn No : 200003782M

## TAX INVOICE

Invoice To :-

China Star Building Construction Pte Ltd

Invoice No **2203042**

Date 24/03/2022

P.O. No.

Our Ref 009432

Mileage [KM]

Terms Due on receipt

| S/No | Description  | Qty | Unit Rate | Amount |
|------|--|-----|-----------|--------|
| 1    | Rent a Year 2017 HINO 14ft lorr from<br>08.03.2022 5:00pm to 10.03.22 2:05pm | 2   | 180.00    | 360.00 |

**Sub-Total** \$360.00

**GST @ 7%** \$25.20

Confirmed & Accepted by :-

**Total** **\$385.20**

Name / Mobile No / Signature

Payments by cheque should be crossed and made payable to

LIAN AIK LEASING PTE LTD

For e-payment : PayNow UEN 200003782M

OCBC Current A/C No : 501468649001

For cheque payment, NO official receipt will be issued.

Overdue accounts shall bear interest at current bank lending rate.

This is a computer generated document, no signature is required.



# 聯益租賃私人有限公司 LIAN AIK LEASING PTE LTD

363 Joo Chiat Road Singapore 427608 Tel : 6345 8080 Fax : 6345 6793

RA No : 009432

Company & GST Regn No : 200003782M

Date 08.03.22

## VEHICLE RENTAL AGREEMENT

| COMPANY / HIRER / BILLING DETAILS                |  |  |  |            |  |  |  |                  |  |  |  |
|--|--|--|--|------------|--|--|--|------------------|--|--|--|
| Name : China Star Building Construction Pte Ltd. |  |  |  |            |  |  |  |                  |  |  |  |
| Add :  |  |  |  | #          |  |  |  | P/Code           |  |  |  |
| UEN No   |  |  |  |            |  |  |  |                  |  |  |  |
| Tel No   |  |  |  | HP No      |  |  |  | Fax No           |  |  |  |
| NRIC No :  |  |  |  | Issue Date |  |  |  | Class of D/Lic : |  |  |  |
| Date of Birth :                                  |  |  |  | 2          |  |  |  | 2A 2B 3 4 5      |  |  |  |

| CO-HIRER / DRIVER'S DETAILS |  |  |  |                        |  |  |  |                     |  |  |  |
|-----------------------------|--|--|--|------------------------|--|--|--|---------------------|--|--|--|
| Name : Prakasam Selvakumar  |  |  |  |                        |  |  |  |                     |  |  |  |
| Add :                       |  |  |  | #                      |  |  |  | P/Code              |  |  |  |
| Tel / HP No 87471269        |  |  |  |                        |  |  |  |                     |  |  |  |
| NRIC No :                   |  |  |  | Date of Birth 07051983 |  |  |  | Issue Date 09042019 |  |  |  |
| D/Lic No : G7658377W        |  |  |  | Class of D/Lic :       |  |  |  | 2 2A 2B 3 4 5       |  |  |  |

| LIMITATIONS AS TO USE & WARNING   |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|
| The Hirer and Driver should not use or permit the vehicle to be use or operated in a manner contrary to any statutory provision, act or regulation or in any way contrary to law or for any illegal purpose whatsoever. |  |  |  |  |  |  |  |  |  |  |  |
| X P. Kumar  |  |  |  |  |  |  |  |  |  |  |  |

| COLLISION DAMAGE EXCESS  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
| The vehicle is Not covered by a motor insurance policy covering personal accident insurance for the Hirer, his passenger or authorized driver and the Owner shall not be responsible for any liability claims, injuries or otherwise in connection with any accident death or the losses arising from the use of the vehicle. In any event of an accident (Own Damage), the Hirer will be held responsible for the Total Cost of damages with the number of days loss for the hired vehicle with us. Should there be any Third Party involved, the Hirer will have to settle for the Excess of Third Party Claim on top of the total cost of damages and the number of days loss for the hired vehicle. Our Insurance policy only covers Third Party Liability and property damage. Hirers are always responsible for the amount of "Non-Waivable Excess" for each & every accident. The Excess is applicable regardless of who is at fault and must be paid at the time of the Accident Report is completed. Both the Hirer and Driver jointly acknowledges and responsible for SGD5,000.00 EXCESS in any accident. |  |  |  |  |  |  |  |  |  |  |  |
| X P. Kumar   |  |  |  |  |  |  |  |  |  |  |  |

| HIRER'S ACKNOWLEDGEMENT  |  |  |  |  |  |                                  |  |  |  |  |  |
|--|--|--|--|--|--|----------------------------------|--|--|--|--|--|
| I/We have Read & Agree to the Terms & Conditions on both side of this Agreement. |  |  |  |  |  |                                  |  |  |  |  |  |
| X Company Stamp & Signature of Hirer   |  |  |  |  |  | X Signature of Additional Driver |  |  |  |  |  |
| Owner  |  |  |  |  |  |                                  |  |  |  |  |  |

| IMPORTANT NOTES  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
| 1. All vehicles are supplied with a complete set of tools and should be returned.  |  |  |  |  |  |  |  |  |  |  |  |
| 2. Only persons above 24 & below 65 years of age with more than Two (2) years driving experiences in Singapore, licensed and authorized driver stated in this Agreement may drive the vehicle. Any unauthorized driver shall not drive the vehicle stated in the Agreement. In case of accident, the Driver shall exchange particulars, take photos at scene before moving away vehicles, pull out in-car camera SD card or unplugged in-car camera power source and report to the Rental office within 12/24 hours. |  |  |  |  |  |  |  |  |  |  |  |
| 3. To check Radiator water, engine oil, clutch/brake fluid every morning. To stop the vehicle immediately at any moment if temperature raise-up or any warning light lighted-up.   |  |  |  |  |  |  |  |  |  |  |  |
| 4. Minimum car washing fee of S\$50 chargeable on those who returned a dirty vehicle.  |  |  |  |  |  |  |  |  |  |  |  |

| PARTICULARS OF HIRED VEHICLE |  |  |  |         |  |    |  |                 |  |  |  |
|------------------------------|--|--|--|---------|--|----|--|-----------------|--|--|--|
| VEHICLE NO Y P 5587K         |  |  |  |         |  |    |  |                 |  |  |  |
| MAKE / MODEL :               |  |  |  |         |  |    |  |                 |  |  |  |
| DIESEL                       |  |  |  | PETROL  |  |    |  | E 1/4 1/2 3/4 F |  |  |  |
| OUT                          |  |  |  |         |  | IN |  |                 |  |  |  |
| DATE 08.03.22                |  |  |  | 10-3-22 |  |    |  |                 |  |  |  |
| TIME 5.00                    |  |  |  | AM      |  |    |  | PM              |  |  |  |
| 2-05                         |  |  |  | AM      |  |    |  | PM              |  |  |  |

| MILEAGE |  |  |  |    |  |  |  |    |  |  |  |
|---------|--|--|--|----|--|--|--|----|--|--|--|
| OUT     |  |  |  | KM |  |  |  | IN |  |  |  |
|         |  |  |  |    |  |  |  | KM |  |  |  |

| HIRE PERIOD EXPIRY / DUE RETURN DETAILS |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|
| DATE / TIME :                           |  |  |  |  |  |  |  |  |  |  |  |

| EXTENSION OF RENTAL DETAILS |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Date                        |  |  |  |  |  |  |  |  |  |  |  |
| Sum Paid                    |  |  |  |  |  |  |  |  |  |  |  |
| Expiry                      |  |  |  |  |  |  |  |  |  |  |  |
| Remarks                     |  |  |  |  |  |  |  |  |  |  |  |

| RENTAL CHARGES (SGD) |  |  |  |  |  |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|--|--|--|--|--|
| Hours @              |  |  |  |  |  |  |  |  |  |  |  |
| Days @               |  |  |  |  |  |  |  |  |  |  |  |
| Weeks @              |  |  |  |  |  |  |  |  |  |  |  |
| Months @             |  |  |  |  |  |  |  |  |  |  |  |

|                           |  |  |  |  |  |  |  |  |  |  |  |
|---------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Sub-Total (1)             |  |  |  |  |  |  |  |  |  |  |  |
| Delivery / Collection fee |  |  |  |  |  |  |  |  |  |  |  |
| Repairs / Damages         |  |  |  |  |  |  |  |  |  |  |  |
| Fuel / Other Charges      |  |  |  |  |  |  |  |  |  |  |  |
| Sub-Total (2)             |  |  |  |  |  |  |  |  |  |  |  |
| GST                       |  |  |  |  |  |  |  |  |  |  |  |

|                       |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|--|--|--|--|--|
| TOTAL CHARGES         |  |  |  |  |  |  |  |  |  |  |  |
| Security Deposit Paid |  |  |  |  |  |  |  |  |  |  |  |
| Advance Rental Paid   |  |  |  |  |  |  |  |  |  |  |  |
| TOTAL PAID            |  |  |  |  |  |  |  |  |  |  |  |
| Guard Total           |  |  |  |  |  |  |  |  |  |  |  |
| Less Payments         |  |  |  |  |  |  |  |  |  |  |  |
| BALANCE DUE           |  |  |  |  |  |  |  |  |  |  |  |

| Charges subject to final audit |  |  |  |  |  |           |  |  |  |  |  |
|--------------------------------|--|--|--|--|--|-----------|--|--|--|--|--|
| REFUND - COLLECTED BY :-       |  |  |  |  |  |           |  |  |  |  |  |
| Amount                         |  |  |  |  |  | Signature |  |  |  |  |  |
| \$                             |  |  |  |  |  | X         |  |  |  |  |  |




## INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

GBG2269T

Date of Accident

06/03/2022 

Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... **AIG Asia Pacific Insurance Pte....**Period of Insurance ..... **28/12/2021 - 29/12/2022**Requested By ..... **ALLAN TANG (KIM CHWEE AUT...**Requested Date ..... **08/03/2022 16:01**

## Payment details

Request Amount: **S\$1.87**GST Amount: **S\$0.13**Total Amount Due (GST Inclusive): **S\$2**

## General Insurance Association

Records Management Centre

GST Registration No: **M400017735**





**AUTHORIZATION TO ACT**  
**(AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)**

I, China Star Building Construction Pte. Ltd. ("the third party claimant")  
of 10 Ubi Crescent #07-51 Ubi Techpark Singapore 408564 (address),  
owner of YQ 5158K (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. YQ 5158K that was  
damaged pursuant to the accident which occurred on 06.03.2022 (date) along  
10 Toh Guan Road E (location)  
involving vehicle no/s GBG 2269T ("the accident").

I further authorize the workshop to settle the 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.

Date this 08 day of 03 (month) 20 22 (year)



P. Kumar

Signed by "the third party claimant"



[Signature]

Signed by "the workshop"





**RELEASE VOUCHER**  
**(AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)**

"We/I, Fastech Auto Pte Ltd ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte. Ltd. \_\_\_\_\_ ("name of surveyor") with respect to the amount claimed for S\$ \_\_\_\_\_ (repair costs), S\$ \_\_\_\_\_ (loss of use/rental) S\$ \_\_\_\_\_ (search fees) for vehicle no. YQ 5158K that was damaged pursuant to the accident which occurred on 06.03.2022 (date) along 10 Toh Guan Road E (location) involving vehicle no/s GBG 2269T

This is pursuant to the inspection conducted on \_\_\_\_\_ (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner China Star Building Construction Pte. Ltd. ("third party claimant") of vehicle no. YQ 5158K to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte. Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to YQ 5158K (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ (month) 20\_\_\_\_ (year)

Signed by AIG appointed surveyor



Chopped & Signed by "the workshop"



## 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              | 07/03/2022 19:12 (SGT)             |
| Date of Accident                | 06/03/2022 06:15 (SGT)             |
| Exact Location of Accident      | 10 Toh Guan Rd E, Singapore 608838 |
| Additional Location Information | -                                  |
| Country/State of Loss           | Singapore                          |

### DETAILS OF OWN VEHICLE

|                             |         |
|-----------------------------|---------|
| Vehicle Registration Number | YQ5158K |
|-----------------------------|---------|

#### INSURED/POLICYHOLDER

|                          |  |
|--------------------------|--|
| Is company?              | Yes                                      |
| Name Of Registered Owner | CHINA STAR BUILDING CONSTRUCTION PTE LTD |
| Company Reg No           | 2XXXXXX267R                              |
| Email Address            | wjj.csbc@gmail.com                       |
| Mobile Phone No          | (Phone) +65-87226689                     |
| Alternative Phone No     | +65-87226689                             |

#### VEHICLE PARTICULARS

|  |                           |
|--|---------------------------|
| Manufacturer   | Hino                      |
| Model  | XZU710R 14FT WIDE CAB 5T  |
| 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   | Manual                    |
| CC   | 4009                      |

#### INSURANCE COMPANY

|                           |                                       |
|---------------------------|---------------------------------------|
| Name of Insurance Company | India International Insurance Pte Ltd |
| Type of Coverage          | Comprehensive                         |
| Fleet Policy              | No                                    |
| Policy Number             | D21MCV0000807_01                      |
| Cover Note Number         | -                                     |

#### DRIVER

|                 |                     |
|-----------------|---------------------|
| Name of Driver  | PRAKASAM SELVAKUMAR |
| Passport No/FIN | GXXXX377W           |



|  |                           |
|--|---------------------------|
| Date Of Birth  | 07/05/1983                |
| Occupation   | Outdoor                   |
| Date Of Driving Pass   | 04/05/2009                |
| Driving experience   | 12 YEARS AND 10 MONTHS    |
| Gender   | Male                      |
| Mobile Number  | (Phone) +65-87471269      |
| Alt. Phone Number  | -                         |
| Email Address  | wjj.csbc@gmail.com        |
| Address  | 10 UBI CRESCENT           |
| Address complement   | #07-51 UBI TECHPARK LOBBY |
| Postcode   | 408564                    |
| 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   | Side Swipe |
| 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)   | 5   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No  |

#### PASSENGER 1

|        |        |
|--------|--------|
| Name   | WORKER |
| Gender | Male   |

#### PASSENGER 2

|        |        |
|--------|--------|
| Name   | WORKER |
| Gender | Male   |

#### PASSENGER 3

|        |        |
|--------|--------|
| Name   | WORKER |
| Gender | Male   |

#### PASSENGER 4

|        |        |
|--------|--------|
| Name   | WORKER |
| 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

PLS 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 ..... GBG2269T  
Vehicle Manufacturer ..... -  
Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
Vehicle Category ..... Commercial vehicle  
Name of Driver ..... RETHINASAMY AROCKIYADASS  
Passport No/FIN ..... GXXXX665M  
Contact Number ..... (Phone) +65-88273534  
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' 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

Sketch Plan

A = YQ 5158K

B = G8G 2269T

10 TOH GUAN ROAD EAST.



P. Namart

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

07/03/22

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

~~Vehicle 8 is in front of me~~

I was travelling along Tin Guan Road and vehicle 8 which is in front of me slow down hence i ~~swerved~~ swerved to right side but suddenly vehicle 8 veered towards right side too hence our vehicle collided.

Declaration

I/we declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

P. Kurnoor.

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

lym 07/03/22

Witnessed by Reporting Centre Personnel





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

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SN092237000B Vehicle Registration No: 4Q5158K  
 Name (as shown in NRIC): ARAKASAM SELVAKUMAR NRIC/FIN/Passport No: GXXXX377W  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: 10 UBI CRESCENT #07-51 UBI TECHPARK LOBBY Singapore ( 408564 )  
 Contact (Tel): \_\_\_\_\_ Mobile No.: 87471269  
 Email Address: \_\_\_\_\_  
 Date of Accident: 06/03/22 Time of Accident: 06:15  
 Place of Accident: 10 TOH QUAN RD EAST  
 Insurance Company: INDIA

**(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:

REVERT FROM REPORTING TO TP CLAIMS



Policyholder / Driver's Signature  
 Date:

shym 08/03/22  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:  
 Date:

General Insurance Association Form 1



**WORK PERMIT**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
CHINA STAR BUILDING CONSTRUCTION PTE. LTD.

Name  
PRAKASAM SELVAKUMAR

Work Permit No.  
0 3306358-

Sector  
CONSTRUCTION

K1971075

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **G7658377W**  
Name: **PRAKASAM SELVAKUMAR**

Birth Date: **07 May 1983**  
Issue Date: **09 Apr 2019**  
Valid Till: **03/05/2024**

002921439B

For Insurance Reporting And  
Claim Purposes Only

P. Kumar.

**VISIT PASS**  
Immigration Regulations

Name  
PRAKASAM SELVAKUMAR

FIN  
G7658377W

Date of Birth: 07-05-1983 Sex: M

Nationality  
INDIAN

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED  
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

Download SGWorkPass App to check status

06-12-2019

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

Class 3 Motor cars with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq 2500\text{kg}$

EFFECTIVE DATE  
04 May 2009

NP 428A


Licence No: G7658377W



## 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)

**All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.**

|  |  |
|--|--|
| <b>CERTIFICATE NO.: D21MCV0000807_01</b>   | <b>COVER: Comprehensive</b>  |
| <p><b>1. Index Mark and Registration Number of Vehicle</b> : YQ5158K</p> <p><b>Chassis No</b> : JHHUCV3H80K033174</p> <p><b>2. Name of Policyholder</b> : CHINA STAR BUILDING CONSTRUCTION PTE. LTD.</p> <p><b>3 Effective date of Insurance</b> : 03 Feb 2022</p> <p><b>4. Expiry date of Insurance</b> : 02 Feb 2023</p> <p><b>5. Persons or Classes of Persons entitled to drive*</b></p> <p>Any person who is driving on the Policyholder's order or with their permission.<br/>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.</p> <p><b>6. Limitations as to use*</b></p> <p>a) Use in connection with the Policyholder's business.<br/>b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.<br/>c) Use for social, domestic and pleasure purposes.</p> <p><b>The Policy does not cover</b></p> <p>a) Use for hire or reward.<br/>b) Use for racing, pace-making, reliability trial or speed-testing.<br/>c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p> <p><small>*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.</small></p> |  |
| <p>Excess Sect I : SGD750.00<br/>Windscreen Excess : SGD100.00<br/>Hire Purchase Company : United Overseas Bank Limited</p>  |  |
| <p>FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &amp;/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.</p>  |  |
| <p>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).</p>  |  |
| <p>Agent/Broker : A000078/INSURANCE SOLUTIONS HUB &amp; CONSULTANCY AGENCY PTE LTD<br/>Date of Issue : 12/01/2022 12:08:25<br/>M.Z. 300C - GOODS CARRYING(ORGANIZATION)</p>  | <p>For India International Insurance Pte Ltd</p> <br><hr style="width: 100%;"/> <p>Authorised Signatory</p> |



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

|                                     |                          |
|-------------------------------------|--------------------------|
| <b>Vehicle Owner Particulars</b>    |                          |
| Owner ID Type:                      | Company                  |
| Owner ID:                           | 267R                     |
| <b>Vehicle Details</b>              |                          |
| Vehicle No.:                        | YQ5158K                  |
| Vehicle to be Exported:             | No                       |
| Intended Deregistration Date:       | 08 Mar 2022              |
| Vehicle Make:                       | HINO                     |
| Vehicle Model:                      | XZU710R 14FT WIDE CAB 5T |
| Primary Colour:                     | White                    |
| Manufacturing Year:                 | 2019                     |
| Engine No.:                         | N04CVV11016              |
| Chassis No.:                        | JHHUCV3H80K033174        |
| Maximum Power Output:               | -                        |
| Open Market Value:                  | \$35,351.00              |
| Original Registration Date:         | 03 Feb 2020              |
| First Registration Date:            | 03 Feb 2020              |
| Transfer Count:                     | 0                        |
| Actual ARF Paid:                    | \$1,768.00               |
| <b>Intended PARF Rebate Details</b> |                          |
| PARF Eligibility:                   | No                       |
| PARF Eligibility Expiry Date:       | -                        |
| PARF Rebate Amount:                 | \$0.00                   |
| <b>Intended COE Rebate Details</b>  |                          |
| COE Expiry Date:                    | 02 Feb 2030              |
| COE Category:                       | C - Goods Vehicle & Bus  |
| COE Period(Years):                  | 10                       |
| QP Paid:                            | \$24,402.00              |
| COE Rebate Amount:                  | \$19,280.00              |
| <b>Total Rebate Amount:</b>         | <b>\$19,280.00</b>       |

The information contained herein is correct as at 08 Mar 2022

OK