

STRIDES

AUTOMOTIVE

Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4
SINGAPORE 757705



Strides Automotive Services Pte. Ltd.
2 Tanjong Katong Road, Tower 3, Paya
Lebar Quarter, #08-01, Singapore 437161
Tel: 65 69083530 Fax: 65 69083592

Tax Invoice

GST Reg No. : MR-8500001-7
CRN : 199004280Z
Invoice No. : IV220400285
Date : 25.04.2022
Vehicle No. : SHB5798T
Your Ref No. : TAX/03/22/2032
Our Ref No. : 24114278
Terms : 30 Days

| Description | Qty | Unit Cost | Add % | (Discount) Amount | Amount |
|---|------|-----------|----------|-------------------|-----------|
| Parts | | | | | |
| PANEL SUB-ASSY, REAR DOOR , RH | 1.00 | \$1243.90 | (100.00) | \$1243.90 | \$ 0.00 |
| HINGE ASSY, REAR DOOR , UPPER RH | 0.00 | \$ 83.30 | 0.00 | \$ 0.00 | \$ 0.00 |
| HINGE ASSY, REAR DOOR , LOWER RH | 0.00 | \$ 73.30 | 0.00 | \$ 0.00 | \$ 0.00 |
| DOOR REAR MOTOR ASSY, POWER WINDOW REGULATOR , RH | 0.00 | \$ 768.60 | 0.00 | \$ 0.00 | \$ 0.00 |
| DOOR REAR WINDOW REGULATOR SUB-ASSY, RH | 0.00 | \$ 200.70 | 0.00 | \$ 0.00 | \$ 0.00 |
| DOOR LOCK REAR , RH | 0.00 | \$ 544.70 | 0.00 | \$ 0.00 | \$ 0.00 |
| PANEL SUB-ASSY, FENDER REAR RH | 1.00 | \$ 824.80 | (100.00) | \$ 824.80 | \$ 0.00 |
| Sub-Total | | | | | \$ 0.00 |
| Labour | | | | | |
| TO REPAIR REAR RHS PORTION | 1.00 | \$ 300.00 | 0.00 | \$ 0.00 | \$ 300.00 |
| Others | | | | | |
| TO RESPRAY RH REAR DOOR | 1.00 | \$ 200.00 | 0.00 | \$ 0.00 | \$ 200.00 |
| TO RESPRAY REAR FENDER RH | 1.00 | \$ 200.00 | 0.00 | \$ 0.00 | \$ 200.00 |
| TO WASH AND VACUUM | 0.00 | \$ 60.00 | 0.00 | \$ 0.00 | \$ 0.00 |
| TO REPLACE SUNDRY PARTS | 0.00 | \$ 100.00 | 0.00 | \$ 0.00 | \$ 0.00 |
| TO APPLY RUST-PROOFING ON AFFECTED AREA | 0.00 | \$ 100.00 | 0.00 | \$ 0.00 | \$ 0.00 |
| TO TRANSFER DOOR MECHANISM | 0.00 | \$ 120.00 | 0.00 | \$ 0.00 | \$ 0.00 |
| GRAND TOTAL | | | | | \$ 700.00 |

Remark :

Make/Model : PRIUS4
Accident Date : 12.03.2022

Payment Instructions

By Cheque: Crossed and made payable to "Strides Automotive Services Pte. Ltd." with invoice no. indicated on the reverse side. No receipt will be issued unless requested.

By Bank Transfer:
Account Name : Strides Automotive Services Pte. Ltd.
Bank Name : DBS Bank Ltd - SGD
Bank Account No.: 018-008617-4
Swift Code : DBSSSGSG

Koo Yew Chung
Koo Yew Chung (Apr 25, 2022 16:33 GMT+8)

Authorised Signature
for Strides Automotive Services Pte. Ltd.



Laid Up Report

Accident Start Date : 12/03/2022

Date Generated : 30/03/2022

Accident End Date : 30/03/2022

User Name : LeeGek

| Case Reference Number | Vehicle Registration Number | Company Type | Vehicle Make | Vehicle Model | Job Card Number | Date and Time (Accident Repair) | Date and Time (Repair Completed) |
|-----------------------|-----------------------------|----------------------|--------------|---------------|-----------------|---------------------------------|----------------------------------|
| TAX/03/22/2032 | SHB5798T | Strides Taxi Pte Ltd | TOYOTA | PRIUS4 | 24114278 | 14/03/2022 10:40 AM | 17/03/2022 1:59 PM |

STRIDES

TAXI

MEMORANDUM

To: Claims Dept

Our Ref: TAX/03/22/2032

From: Strides Taxi Pte Ltd

Date: 31st March 2022

**ACCIDENT ON 12/3/2022 INVOLVING SHB 5798T & SLT 1375P ALONG
MIDDLE RD TOWARDS BEACH RD**

This is to confirm that the daily rental rate for SHB 5798T is \$108.07 per day.

Please proceed to recover any rental loss from the third party as a result of the above accident.

Thank you.

Yours sincerely
STRIDES TAXI PTE LTD



for Manager

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 | 14/03/2022 13:56 (SGT) |
| Date of Accident | 12/03/2022 22:55 (SGT) |
| Exact Location of Accident | Middle Rd, Singapore |
| Additional Location Information | MIDDLE ROAD TOWARDS BEACH ROAD |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SHB5798T |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|----------------------------|
| Is company? | Yes |
| Name Of Registered Owner | Strides Taxi Pte Ltd |
| Company Reg No | 1XXXXX369K |
| Email Address | AUTO-SVCS-TARC@SMRT.COM.SG |
| Mobile Phone No | (Phone) +65-68662671 |
| Alternative Phone No | (Office) +65-68662672 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Toyota |
| Model | Prius |
| 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 | Taxi |
| Transmission | Auto |
| CC | 1800 |

INSURANCE COMPANY

| | |
|---------------------------|--------------------------------|
| Name of Insurance Company | MS First Capital Insurance Ltd |
| Type of Coverage | ThirdParty |
| Fleet Policy | Yes |
| Policy Number | D-21097466MFSH |
| Cover Note Number | - |

DRIVER

| | |
|----------------|---------------------------|
| Name of Driver | MAHMOOD BIN MOHAMED MUKRY |
| NRIC No | SXXXX532F |

| | |
|--|----------------------------|
| Date Of Birth | 18/12/1949 |
| Occupation | Outdoor |
| Date Of Driving Pass | 02/04/2007 |
| Driving experience | 14 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-68662672 |
| Alt. Phone Number | - |
| Email Address | AUTO-SVCS-TARC@SMRT.COM.SG |
| Address | 11 |
| Address complement | - |
| Postcode | - |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Hirer |
| 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 - Opening Door of Vehicle |
| 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) | 2 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

PASSENGER 1

| | |
|--------|---------|
| Name | UNKNONW |
| 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

I WAS TRAVELLING ALONG MIDDLE ROAD TOWARDS BEACH ROAD WITH ONE PASSENGER (MALE CHINESE) ON BOARD. TRAFFIC WAS RED AND ALL THE VEHICLES ON THE RIGHT LANE STOPPED. WHILST I WAS TRAVELLING ON THE EXTREME LEFT LANE, THE PASSENGER FROM THE STATIONARY VEHICLE SLT1375P, SUDDENLY OPENED THE LEFT REAR DOOR AND HIT ONTO MY MOVING VEHICLE.

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 | SLT1375P |
| Vehicle Manufacturer | - |
| Vehicle Model | - |

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

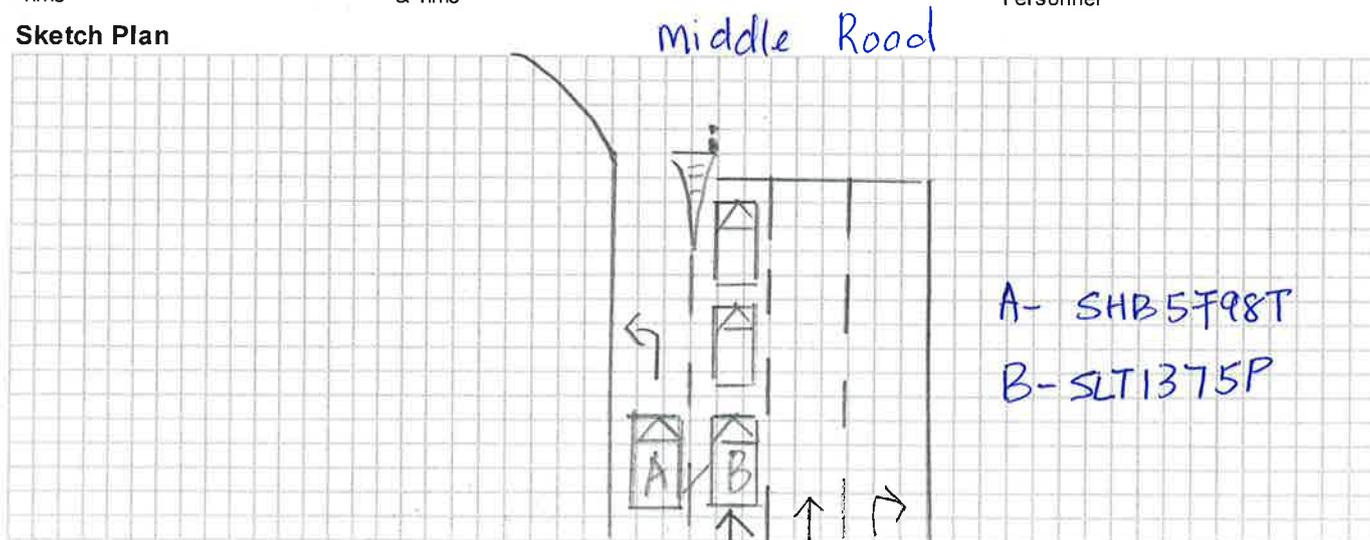
[Signature] 14/3/2022

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

[Signature] 14-3-2022

Witnessed by Reporting Centre Personnel

Sketch Plan



Date: 14.3.2022

Our Ref. No.:

Letter of Authorisation

I, MAHMOOD MOHAMED MUKRY (NRIC No.: _____) the registered hirer / relief driver / taxi share driver of Strides taxi registration number SHB 57 987 hereby authorise **Strides Automotive Services Pte Ltd** ("AutoSvs") to deal with all matters arising out of the accident between my taxi and CAR NO SL7 1375P happened on 12/3/2022 along Middle Road towards Beach Road (the "Accident") on my behalf, including but not limited to instituting and any claims or proceedings against such party or parties (as AutoSvs deems fit in its absolute discretion) in respect of any claim, demand, loss, cost, expense, liability, damages or action made against us or incurred or suffered by us.

Without prejudice to the foregoing, I further authorise AutoSvs to negotiate, resolve and settle any proceeding or claim arising out of the accidents, including but not limited to doing any act or executing any document or signing the Discharge Voucher on my behalf as may be required.

Name: MAHMOOD MOHAMED MUKRY Signature: 

NRIC No. :

Tel No. :

Address :
.....
.....

730155

Enquire Vehicle-Related Transaction History

Transaction History Details

| | | | |
|---------------------|---|-------------------------------------|----------------------|
| Log Date/Time: | 14 Mar 2022 / 14:44:00 | Transaction Amount: | \$7.49 |
| Asset Type: | Vehicle | Channel: | External Agency |
| Asset ID: | SLT1375P | Business Transaction Reference No.: | 20220314144400351278 |
| Transaction Type: | 18.32 Insurance Enquiry (GIRO Payment) | | |
| User ID: | ESASBAHO - BALQISH BINTE ABDUL HALIL | | |
| Search Date / Time: | 12 Mar 2022 22:55:00 | | |
| Insurance Company: | CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD | | |

Information displayed is correct as at the log date and time.

[Enquire Related Logs](#)

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