Focus Auto Pte Ltd UEN No. 201004495R GST Reg. No. 201004495R

Tel: 6886 9097 Fax: 6481 9095 Email: claims@focusauto.com.sg

Date

: 29/04/2022

BY E-MAIL

Your ref

: SHC8732H

Our ref : SJB3141C

WITHOUT PREJUDICE

M/S AXA Insurance Pte Ltd

8 Shenton Way #24-01 AXA Tower Singapore 068811

Dear Sir/Madam,

ACCIDENT INVOLVING: (SJB3141C & SHC8732H) ALONG 1 BUKIT BATOK CRESCENT WCEGA PLAZA

DOA:

12/03/2022

TIME:

1945 HOURS

We refer to the above matter and write on behalf of <u>LEE TECK HONG</u>, the registered owner of **SBJ3141C** in respect of the above accident.

We are instructed that the above accident was caused by your insured's negligent driving / or management of your insured vehicle. Your insured's vehicle SHC8732H collided onto the rear portion of our client vehicle SJB3141C. As a result of the accident, our client has been put to loss and expenses, particulars of which are as follows:

1.	Cost of Repair	(\$1500 + 7% GST)	\$ 1,605.00
2.	Loss of Used	$(3 \text{ days} \times $120)$	\$ 360.00
3.	Buy 3rd Party's Report		\$ 29.00
4.	Buy 3rd Party Insurer's LTA Search Fee		\$ 7.45

Total Amount: \$ 2,001.45

Enclosed are the following documents for your perusal.

- 1) Driver's driving license / Identity card
- 2) Certificate of Insurance
- 3) GIA report
- 4) GIA Search

(SHC8732H)

- 5) Original repair claim
- 6) Car Rental Agreement / Receipt

The demand herein is in respect of our client's for damages pertaining to his motor vehicle and any settlement following or subsequent to this demand shall not prejudice any claim in respect of personal injuries.

Kindly acknowledge receipt of the above said documents within 7 days and your favourable reply is deeply appreciated.

Yours faithfully,

18139 9800 Jenny Koh

Jenny Koh

Focus Auto Pte Ltd

Business Reg. No: 201004495R GST Reg. No: 201004495R No 1 Kaki Bukit Ave 6 Autobay #02-50 Singapore 417883

Date : 29/04/2022

LEE TECK HONG

AXA Insurance Pte Ltd 8 Shenton Way #24-01 AXA Tower Singapore 068811

.

MOTOR VEHICLE NO: SJB3141C

TOYOTA COROLLA AXIO 1.5X A

REPAIR CLAIM \$ 1,500.00

LUMP SUM

Sub- total: \$ 1,500.00

7% GST: \$ 105.00

Total: \$ 1,605.00

SINGAPORE DOLLARS: ONE THOUSAND SIX HUNDRED AND FIVE ONLY.

SL0E223G0001 / Lee Sheng Auto Pte Ltd ENTRY DATE & TIME: 17/03/2022 11:50 (SGT) SUBMITTED BY: Lee Ek Chen VERSION: 1 (17/03/2022 11:50 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 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 17/03/2022 11:50 (SGT) Date of Accident 12/03/2022 19:45 (SGT) **Exact Location of Accident** 1 Bukit Batok Cres, Singapore 658064 Additional Location Information 1 BUKIT BATOK CRESCENT WCEGA PLAZA SINGAPORE 658064 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJB3141C INSURED/POLICYHOLDER Is company? No Name Of Registered Owner LEE TECK HONG NRIC No S7136460G **Email Address** YIENLEE98@GMAIL.COM Mobile Phone No (Phone) +65-91119581 Alternative Phone No (Office) +65-91119581

VEHICLE PARTICULARS

Manufacturer Toyota Model Axio 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 1600

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number 5118183702-01 Cover Note Number

DRIVER

Name of Driver IAN LEE



NRIC No Date Of Birth

Occupation Date Of Driving Pass

Driving experience

Gender

Mobile Number

Alt. Phone Number Email Address Address

Address complement

Postcode

is the driver the policyholder? If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged?

Number of Passengers (Including Driver) Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

PASSENGER 1

Name

Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name Police Station Phone No Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

S9807168G

08/03/1998

29/01/2020

S 731887

No

No

Child

Raining

Wet

No

Yes

No

Yes

2

Nο

Male

Yes

Νo

HO KELIVIN

Jurong Division Headquarters

No. 2 Jurong West Avenue 5 Singapore 649482

(Phone) +65-18007910000

(Fax) +65-68965647

2

2 YEARS AND 2 MONTHS

jenniferx4325@gmail.com

Collision - Head on collision

BLK 887A WOODLANDS DRIVE 50 #13-571

(Phone) +65-93805071

Indoor

Male

No No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC8732H



Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Taxi

Name of Driver GOH LYE WHATT NRIC No S0114601G

Contact Number

Address

Address complement -

Postcode -

Insurance Company Name

Nature Of Damage - Details of property damaged in accident -

No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person

Gender

Male

Phone No

Address

Address Complement

Post Code

Approximate Age Years Old

Injuries Sustained

SUB21410

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

SJB3141C

Yes

No

INJURED 2

Name of injured person IAN LEE Gender Male

Phone No (Phone) +65-93805071

Address BLK 887A WOODLANDS DRIVE 50 #13-571

Address Complement -

Post Code S 731887
Approximate Age Years Old 24
Injuries Sustained -

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

SJB3141C

Yes

No

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.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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)

l 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;
- (ii) 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
- (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 Parsonal Information may/can be disclosed by any of the Insurers and/or GM 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

Sketch Plan

IA 3 SJB 3 NAL (B SSAL 8432 H)

The state of the policyholder of the poli

ribe Circumstance	s of the Accident				
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Declaration

(We declare the foregoing particulars are true in every respect.

150322

Policyholder's Signature / Date &

JE 150322

Driver's Signature (# driver is not the policyholder) / Date

AU

Witnessed by Reporting Centre Personnel





1 of 2

Report No. J/20220315/7031

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No:1800-7910000

Date/Time Report Made	rt Made Vide Report No.				
15/03/2022 15:27					
Name Of Informant	Address				
IAN LEE	887A WOODLANDS DRIVE 50 #13-571	SINGAPORE			
	731887				
ID Type / ID No.	Contact No.				
NRIC NO / S9807168G	Home/Office: Mobile:				
	93805071				
Nationality	Email Address	Email Address			
SINGAPORE CITIZEN	YIENLEE98@GMAIL.COM	YIENLEE98@GMAIL.COM			
Occupation	Sex Age Date of Birth Ra	ace			
Manager	Male 24 08/03/1998 CI	hinese			
Institution/School Name	Language	Language			
	English				
Date/Time Of Incident	Location Of Incident	Location Of Incident			
12/03/2022 19:45	1 BUKIT BATOK CRESCENT WCEGA PLAZ				
	SINGAPORE 658064				
m 1 5 1 4 11					

Brief details.

On the stated date and time, I was driving my vehicle SJB3141C heading towards the exit of WCEGA PLAZA after passing the gantry.

My friend, Ho Kelvin, was my front passenger and the both of us were belted.

As I was travelling straight towards Bukit Batok Crescent main road, a taxi SHC8732H, dashed out

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 15/03/2022 15:27
Officer In-Charge Of Case:	Classification Of Cases
	Classification Of Case:





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20220315/7031

abruptly from the minor road from the left and crashed into the left portion of my vehicle.

I was caught off guard as my vehicle shook violently sideways and knocked my left knee against the centre console of my vehicle.

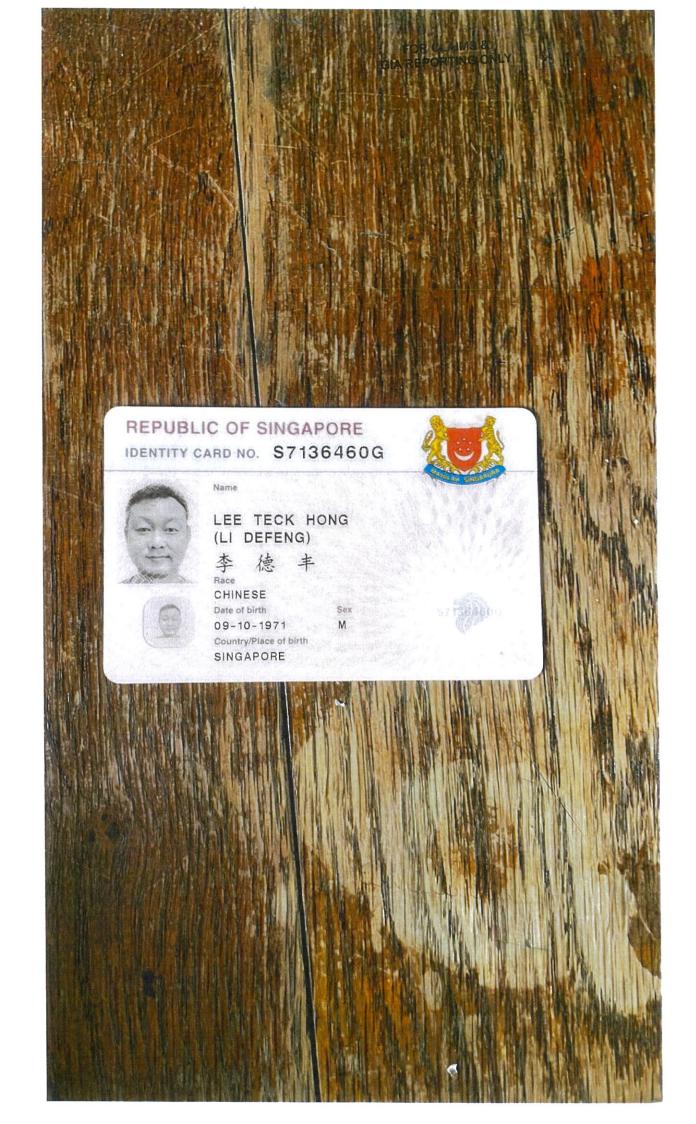
The next day, I woke up with soreness over my neck and back areas.

Kelvin also complained that he was injured due to the accident.

The pain did not go away and as such, we proceeded to Norwood Medical Centre near our place to seek treatment on 14/03/2022.

Both of us were given 5 days MC each.

Signature Of Officer Recording The Report:	Signature Of Informant:		
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 15/03/2022 15:27		
Officer In-Charge Of Case:	Classification Of Case:		







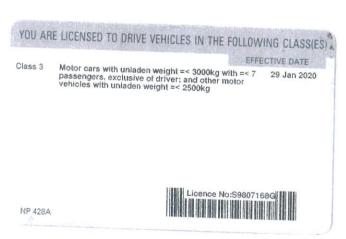
FOR CLAIMS & GIA REPORTING ONLY





FOR CLAIMS & GIA REPORTING ONLY







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: 5118183702-01 Cover: Third Party

1. Index mark and Registration Number of Vehicle : SJB3141C

Chassis Number : NZE1416061457

2. Name of Policyholder : LEE TECK HONG

3. Effective Date of Insurance : 09 Jul 2021

4. Expiry Date of Insurance : 08 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) : N/A

EXCESS (SECTION 2) : N/A

ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS : N/A

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO

INSURE WITH COE : N/A

NCD PROTECTION : NO

PRIMARY DRIVER : LEE TECK HONG

NAMED DRIVER (1) : N/A
NAMED DRIVER (2) : N/A
HIRE PURCHASE COMPANY : N/A
SUM INSURED : N/A

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 : ASSURE PT

: ASSURE PTE. LTD. (00000572842)

Date of Issue

: 31 May 2021 11:36 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

16 Mar 2022 / 17:14:41

Receipt Date/Time: 16 Mar 2022 / 17:14:41

Tax Invoice/Receipt

Receipt No.: ITNET-00000-220316-003327

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHC8732H As at 12 Mar 2022/19:45:00 Insurance Co: AXA INSURANCE PTE LTD Insurance Enquiry - SHC8732H Enquiry Fee 20220316171203570361		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	418238XXXXXX6970	eNETS Credit Card		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

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.