

# 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

AXA Insurance Pte Ltd

Attn: Motor Claim Department

Dear Sir/Madam,

**ACCIDENT INVOLVING VEHICLES : SKZ 2601K / GBE 2522Y AND OTHER ON 20.03.2022.**

We are the authorized repair workshop for the owner of motor vehicle no: **SKZ 2601K** , which was involved in the captioned accident with your insured vehicle no: **GBE 2522Y** . 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)	\$ 21,400.00
2) Loss of Rental	\$ 1,650.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 23,052.00</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) Police Report                   |
| g) I/C & Driving Licence         | h) Insurance Certificate           |
| i) 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

AXA Insurance Pte Ltd

Attn : Motor Claim Department

Tax Invoice : 22884

Date : 12.04.2022

Vehicle No : SKZ 2601K

Make/Model : TOYOTA COROLLA ALTIS

Chassis/Eng# :

Accident Date : 20.03.2022

Claim No :

Reference : 0322 -22884

Policy No :

	Amount
To proceed on lump sum repair	S\$ 20000.00

E. & O. E.

Total : S\$ 20000.00

GST @ 7% : S\$ 1400.00

*Amount Due* : **S\$ 21400.00**



for FASTECH AUTO PTE LTD



# DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: TAY SOH LIAN

Invoice : DCR-2022-04-02

Date : 01.04.2022

Agreement No : 22225

Payment Terms : LOD

DESCRIPTION	AMOUNT
Rental charges for vehicle : <u>SMM 5332L</u> ( 0322-22884 )	\$ 1,650.00
Rental Period from <u>21.03.2022</u> to <u>01.04.2022</u> .	
<hr/>	
E. & O. E.	Total \$ <u><u>1,650.00</u></u>

SHI YING

for Dynamic Car Rental



# Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

## RENTAL TERMS AND CONDITIONS

No. 22225

Name <b>Tay Soh Lion</b>			REG. No. <b>SMM5332L</b>		MAKE MODEL:									
ADDRESS <b>Blk 22 Teban Gardens Road</b>					DIESEL		PETROL		E	1/4	1/2	3/4	F	
<b>#21-139</b>			KM IN		DATE & TIME IN <b>01.04.2022 @ 09:40am</b>									
<b>Singapore 600022</b>			KM OUT		DATE & TIME OUT <b>21.03.2022 @ 16:08pm</b>									
			KM DRIVEN		TIME USED									
NAMED DRIVER														
DRIVING LICENCE NO <b>S1172089G</b>			DATE OF EXPIRY			PLACE OF ISSUE			HOURS		@SS			
PASSPORT NO			DATE OF ISSUE			PLACE OF ISSUE			<b>11</b> DAYS		@SS <b>150.00</b>		<b>\$ 1650.00</b>	
ADD NAMED DRIVER														
DRIVING LICENCE NO			DATE OF EXPIRY			PLACE OF ISSUE			MONTHS		@SS			
PASSPORT NO			DATE OF ISSUE			PLACE OF ISSUE								
<b>IMPORTANT NOTES:</b> This vehicle is licenced to carry 04 passenger only. No refund will be given for vehicle returns early. No refund will be given for period left in vehicle. Hirer is liable to pay loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses. Vehicle return during office hour only. No service on public holiday and Sunday. Geographical areas: Singapore & West Malaysia. Driver must be: a) 18 years old and above. b) Holding a valid relevant class of driving license. The vehicle is strictly to be driven by the person to whom it is hired to and the additional driver named in the agreement. The hirer is not allowed to sub-let the vehicle to another party and subletting is not covered.														
<b>ADDITIONAL CONDITIONS:</b> <b>COMPREHENSIVE COVERED EXCESS:</b> *Section I - Used in S'pore only : SGD 2000.00      *Section I - Used outside S'pore : SGD 4000.00 *Section II - Used in S'pore only : SGD 1500.00      *Section II - Used outside S'pore : SGD 3000.00 *W/screen Excess In S'pore : SGD 100.00      *W/screen Excess Outside S'pore : SGD 100.00 <b>THIRD PARTY COVERED EXCESS:</b> *Hirer must bear all costs to the damages of the return vehicle. *Section II - Used in S'pore only : SGD 1500.00 *Hirer must bear all costs to the damages of the return vehicle. *Section II - Used outside S'pore : SGD 3000.00 <b>YOUNG AND INEXPERIENCE DRIVER</b> Hirer or any authorized driver who is aged 22 years old (on the date of accident) and below or possess only 18 month or less driving experience. <b>COMPREHENSIVE COVERED EXCESS: (YOUNG AND INEXPERIENCE DRIVER)</b> *Section I - Used in S'pore only : SGD 6000.00      *Section I - Used outside S'pore : SGD 12,000.00 *Section II - Used in S'pore only : SGD 6000.00      *Section II - Used outside S'pore : SGD 12,000.00 *W/screen Excess In S'pore : SGD 100.00      *W/screen Excess Outside S'pore : SGD 100.00 <b>THIRD PARTY COVERED EXCESS: (YOUNG AND INEXPERIENCE DRIVER)</b> *Hirer must bear all costs to the damages of the return vehicle. *Section II - Used in S'pore only : SGD 6000.00 *Hirer must bear all costs to the damage of the return vehicle. *Section II - Used outside S'pore : SGD 12,000.00 <b>Hirer is responsible for any costs to the THIRD PARTY DAMAGE / INJURY claims.</b>														
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)					SUB-TOTAL									
					TOTAL RENTAL					<b>\$ 1650.00</b>				
					DELIVERY FEE									
					COLLECTION FEE									
<b>X</b> PER DAY \$      PER WEEK \$      PER MONTH \$														
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)														
<b>X</b> PER DAY \$      PER WEEK \$      PER MONTH \$														
PREPAYMENT					TOTAL CHARGE									
CHECK					DEPOSIT									
CASH														
RECEIPT NO.					NETT CHARGE									
AMOUNT DUE / REFUND														

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

SIGNED BY THE PARTIES HERETO ON THE ..... DAY OF .....

**X** \_\_\_\_\_  
RENTER'S/DRIVER'S SIGNATURE

**X** \_\_\_\_\_  
DYNAMIC CAR RENTAL




## INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

GBE2522Y

Date of Accident

20/03/2022 

Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... AXA Insurance Pte Ltd

Period of Insurance ..... 09/10/2021 - 08/10/2022

Requested By ..... ALLAN TANG (KIM CHWEE AUT...

Requested Date ..... 21/03/2022 17:27

## 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**


## AUTHORISATION TO ACT

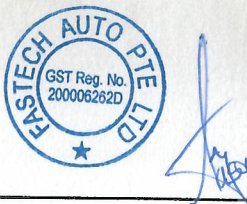
I/We, Tay Soh Lian (the third party claimant") of Blk 22 Teban Gardens Road #21-139 S (600022) (address), owner of SKZ 2601K (vehicle no.) hereby authorize Fastech Auto Pte Ltd ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SKZ 2601K that was damaged pursuant to the accident which occurred on 20.03.2022 (date) along PIE (Lamp Post No 336). (location) involving vehicle no/s GBE 2522Y ("the accident").

I further authorize the workshop to settle my 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.

Dated this 21 (day) of 03 (month) 2022 (year)

  
Signed by "the third party claimant"  
(with company stamp if applicable)

  
Signed by "the workshop"  
(with company stamp)



## 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	21/03/2022 12:21 (SGT)
Date of Accident	20/03/2022 13:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE (LAMP POST NO 336)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ2601K
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAY SOH LIAN
NRIC No	SXXXX089G
Email Address	SUSAN.TAY.SL@GMAIL.COM
Mobile Phone No	(Phone) +65-96908995
Alternative Phone No	(Home) +65-96908995

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	Private car
Transmission	Auto
CC	1600

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100447852-06
Cover Note Number	-

#### DRIVER

Name of Driver	TAY SOH LIAN
NRIC No	SXXXX089G



Date Of Birth	14/09/1956
Occupation	Outdoor
Date Of Driving Pass	06/05/1978
Driving experience	43 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96908995
Alt. Phone Number	(Home) +65-96908995
Email Address	SUSAN.TAY.SL@GMAIL.COM
Address	BLK 22 TEBAN GARDENS ROAD #21-139
Address complement	-
Postcode	600022
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	TAN POH HOON
Gender	Female

#### PASSENGER 2

Name	KONG SEAH YIN
Gender	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008999999
Alt. Police Station Phone No	(Fax) +65-66655791
Police Station Address	No. 92 Boon Lay Way Singapore 609962
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED SKETCH PLAN AND 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	GBE2522Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	MANI THIRUVENKADAM
Passport No/FIN	GXXXX375X
Contact Number	(Phone) +65-91600406
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLT5656C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHOW TENG MUN
NRIC No	SXXXX235H
Contact Number	(Phone) +65-91899730
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	TAY POH HOON
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKZ2601K
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

### INJURED 2

Name of injured person	TAY SOH LIAN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKZ2601K
Were seat belts worn?	-

Was this injured conveyed to hospital by ambulance? .....

-

INJURED 3

Name of injured person .....

KONG SEAH YIN

Gender .....

-

Phone No .....

-

Address .....

-

Address Complement .....

-

Post Code .....

-

Approximate Age Years Old .....

-

Injuries Sustained .....

-

Injured person in which vehicle? .....

SKZ2601K

Were seat belts worn? .....

-

Was this injured conveyed to hospital by ambulance? .....

-



Ref to Police Report T/20220321/2015

### 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

SKETCH PLAN

IMPORTANT NOTICE

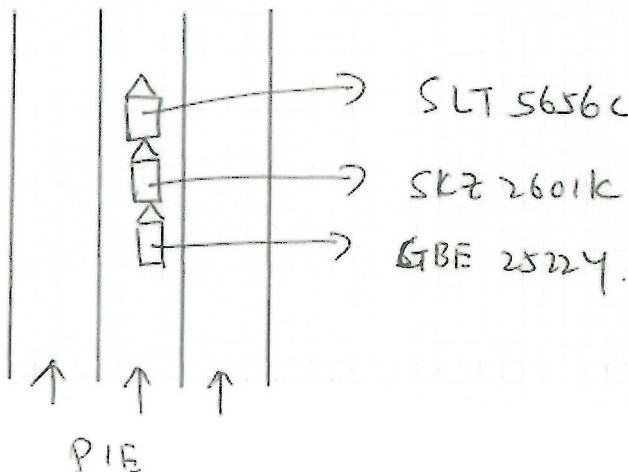
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**







**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: SB0G 223 L 0007 Vehicle Registration No: SCZ 2601K  
 Name (as shown in NRIC): Tay Soh Lian NRIC/FIN/Passport No: Sxxxx 0896  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: Blk 22 Teban Gardens Road #21-139 Singapore 600024  
 Contact (Tel): \_\_\_\_\_ Mobile No.: 9690 8955  
 Email Address: Susan.tay.sle@gmail.com  
 Date of Accident: 20/2/2022 Time of Accident: 13:15pm  
 Place of Accident: P112  
 Insurance Company: AIG Asia

**(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:

Change to Third Party Claim

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Policyholder / Driver's Signature  
Date:

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date:





Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/03/2022 10:26		Vide Report No.:		Station Diary No.: 22	
<b>Informant's Particulars</b>					
Name of Informant: TAY SOH LIAN			Address: APT BLK 22 TEBAN GARDENS ROAD #21-139 SINGAPORE 600022		
ID Type / ID No.: NRIC NO / S1172089G			Contact No.: Home/Office: Mobile: 96908995		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 65	Date of Birth: 14/09/1956	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/03/2022 13:15	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Lamp Post Number: 336				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	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
GBE2522Y	Van					0
SKZ2601K	Car	TOYOTA	TOYOTA COROLLA ALTIS 1.6L CVT	White		3
SLT5656C	Car					0





Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKZ2601K	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100447852-06	15/01/2022	14/01/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Driver				
Name	MANI THIRUVENKADAM	ID No.	G2551375X	
Related Vehicle	GBE2522Y (Van)	Contact No.	91600406	
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	
Passenger				
Name	TAN POH HOON	ID No.	S6812143D	
Related Vehicle	SKZ2601K (Car)	Contact No.	91013881	
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	20/03/2022	Date Discharge	20/03/2022	
No. of Days granted Medical Leave	05	Degree of Injury	NIL	
Driver				
Name	TAY SOH LIAN	ID No.	S1172089G	
Related Vehicle	SKZ2601K (Car)	Contact No.	96908995	
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	20/03/2022	Date Discharge	20/03/2022	
No. of Days granted Medical Leave	05	Degree of Injury	NIL	





**SINGAPORE  
POLICE FORCE**



T/20220321/2015

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

3 of 4

Report No. T/20220321/2015

**CONTINUATION OF REPORT**

Passenger			
Name	KONG SEAH YIN	ID No.	S0176378D
Related Vehicle	SKZ2601K (Car)	Contact No.	NIL
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	20/03/2022	Date Discharge	20/03/2022
No. of Days granted Medical Leave	05	Degree of Injury	NIL
Driver			
Name	CHOW TENG MUN	ID No.	S1523235H
Related Vehicle	SLT5656C (Car)	Contact No.	91899730
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 20/03/2022 at about 1315hrs, I was driving along PIE towards Changi before Tampines exit when I jammed my brake due to the vehicle in-front also jamming their brake. I managed to stop my vehicle in time but the van behind hit onto my vehicle. The impact of the hit is very big and hit me twice. Due to the impact, my vehicle moved forward and hit onto the rear of the vehicle in-front. EMSU attended to our accident and directed us to the nearest carpark. I subsequently called for the Police and ambulance attended to us. None of us convey to hospital. I went to the clinic (Our Family Physician Clinic a& Surgery) together with my 2 passengers and all of us were given 5 days of medical leave. I have reported the accident to my insurance company and was advised to lodge a Traffic Accident report.





SINGAPORE  
POLICE FORCE



T/20220321/2015

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

4 of 4

Report No. T/20220321/2015

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:  
D / SI KO KOK DEAN

Signature Of Informant:

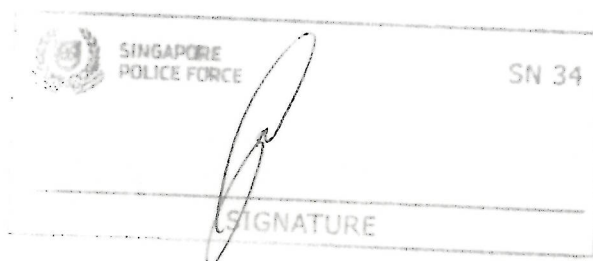
Signature Of Interpreter:  
Not applicable

Date/Time:  
21/03/2022 10:26

Officer In Charge Of Case:  
TP / AEIT /  
Other MUHAMMAD NOOR BIN ABDUL  
RAHMAN  
Contact No.: 65476201

Classification Of Case:

NP168





1861470

Barcode

NRIC No: S1172089G

Fingerprint

Blood Group: O+ Date of issue: 06-04-1994

APT BLK 22 TEBAN GARDENS ROAD #21-139 SINGAPORE 600022

NRIC No: S1172089G Date: 01/08/2012 No: 7192008

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: 06 May 1978

NP 428A

Barcode

Licence No: S1172089G

For Insurance Reporting And  
Claim Purposes Only

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1172089G

Portrait

Name: TAY SOH LIAN

Place: 郑素莲

Race: CHINESE

Date of Birth: 14-09-1956

Sex: F

Country of Birth: SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait

Licence Number: S1172089G

Name: TAY SOH LIAN

Birth Date: 14 Sep 1956

Issue Date: 14 May 2003

Barcode

100482633D



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

**Name of Policyholder** : Tay Soh Lian  
**Period of Insurance** : 15 Jan 2022 To 14 Jan 2023  
**Engine No.** : 1ZRX554580  
**Chassis No.** : MR053REH104546090

**Vehicle No.** : SKZ2601K  
**Policy No.** : 2100447852-06  
**Endorsement No.** :  
**Issued Date** : 07 Jan 2022

### ABOUT THE COVER

**Make/Model** : TOYOTA COROLLA ALTIS 1.6 DUAL  
**Engine Capacity/Tonnage** : 1,598.00 CC  
**Driver Restriction** : NA  
**Sum Insured** : Market Value  
**Off Peak Car** : No  
**First Year of Registration** : 2016  
**Insuring with COE/PAF** : Yes  
**Person 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.  
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of S\$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

**Age Condition** : All Age Condition  
**Mileage Condition** : Unlimited Mileage

**Limitation as to use\*** :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.  
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

### EXCESS

**Section 1**  
Fire - \$0 Own Damage - \$0 Theft - \$0 Flood Cover - \$0

**Section 2**  
Property Damage - \$0

Windscreen : \$100

**Named Driver and Excess** (where applicable)

Tay Soh Lian

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)  
Accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.  
For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website [www.aig.sg](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0030210000

AIG ASIA PACIFIC INSURANCE PTE. LTD.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.



> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	089G
<b>Vehicle Details</b>	
Vehicle No.:	SKZ2601K
Vehicle to be Exported:	No
Intended Deregistration Date:	21 Mar 2022
Vehicle Make:	TOYOTA
Vehicle Model:	TOYOTA COROLLA ALTIS 1.6L CVT
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	1ZRX554580
Chassis No.:	MR053REH104546090
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$19,589.00
Original Registration Date:	15 Jan 2016
First Registration Date:	15 Jan 2016
Transfer Count:	0
Actual ARF Paid:	\$19,589.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Jan 2026
PARF Rebate Amount:	\$12,732.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	14 Jan 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$45,002.00
COE Rebate Amount:	\$17,166.00
<b>Total Rebate Amount:</b>	<b>\$29,898.00</b>

The information contained herein is correct as at 21 Mar 2022

OK