



**WITHOUT PREJUDICE**

Our Ref: SGW 5245Z

Your Ref: SND 6530K

21<sup>st</sup> April 2022

**ATTN:** LKK Auto Consultants Pte Ltd  
**INSURER:** AIG Asia Pacific Insurance Pte Ltd

Dear Hsiao Tong,

**Accident Involving:** SGW 5245Z and SND 6530K  
**Date of Accident:** 31 March 2022  
**Location of Accident:** Turning into Geylang Lorong 1

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair Inc. GST	\$ 5,403.50	\$5050 COR Agreed + \$353.50 GST 7%
Add Loss of Use	\$ 1,120.00	14 DAYS - 2 Days PRS (7/8 April) + 9 Repair Days Agreed + 2 Sunday (10/17 Apr) + 1 PH (15 Apr)
Total	\$ 6,523.50	
Add Search Fee	\$ 31.00	
<b>GRAND TOTAL</b>	<b>\$ 6,554.50</b>	

Kindly pay the Grand Total Amount of **\$8,192.95** to:  
160 Sin Ming Drive #02-12  
Sin Ming AutoCity  
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

Thank you.

  
Reg no: 201811621K  
Regards  
Adel

# PROFORMA INVOICE

**ATTENTION:**

Unique Tourist Service Pte Ltd

PI Number	P2204-2606
PI Date	21-Apr-2022
Vehicle No.	SGW 5245Z
Accident Date	31-Mar-2022

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SGW 5245Z	COR Lump Sum		\$ 5,050.00

Notes:

Total Amount	\$	5,050.00
GST 7%	\$	353.50
GRAND TOTAL AMOUNT	\$	5,403.50

Authorized Signature





RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard #42-01b, Singapore 038989

Email: [gears-support@shift-technology.com](mailto:gears-support@shift-technology.com)

GST Reg No: M400017735

UEN: S66SS0020G

**TAX INVOICE**

TEAM AUTOPRO PTE LTD - Unique  
Tourist Service Pte Ltd

**Invoice Number**  
GR-2022-001293

**Invoice Issue Date**  
06 Apr 2022

**Invoice Due Date**  
13 Apr 2022

<b>Total Amount (S\$)</b>	<b>28.97</b>
<b>Total GST 7.00% (S\$)</b>	<b>2.03</b>
<b>Total Amount Incl. of GST (S\$)</b>	<b>31.00</b>

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	05/04/2022,31/03/2022,SGW5245Z,SND6530K	28.97	2.03	31.00
Total Amount (S\$)				28.97
Total GST 7.00% (S\$)				2.03
Total Amount Incl. of GST (S\$)				31.00

*This is a computer generated document.  
No signature is required.*

To : **Team AutoPro Pte Ltd**  
CRN : **201811621K**  
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

**Letter of Authorization & Undertaking**

In Respect of Accident Involving my/our Vehicle No.: SGW 5245 Z  
and SND 6530 K and .....  
and ..... and .....  
@ Along Geylang Road Turning Into Geylang Lorong 1  
dated 31/03/2022

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,



\_\_\_\_\_  
Claimant Signature & Co's Stamp (if applicable)

Date: .....

## 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	31/03/2022 17:16 (SGT)
Date of Accident	31/03/2022 00:10 (SGT)
Exact Location of Accident	Geylang Rd, Singapore
Additional Location Information	Turning into Geylang Lorong 1
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW5245Z
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Unique Tourist Service Pte Ltd
Company Reg No	197401067R
Email Address	uniqtour@singnet.com.sg
Mobile Phone No	(Phone) +65-62927656
Alternative Phone No	(Office) +65-62927656

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	1598

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	999993578/100734081-00000
Cover Note Number	-

#### DRIVER

Name of Driver	Toh Hock Lye
NRIC No	S7335078F



Date Of Birth	20/09/1973
Occupation	Indoor
Date Of Driving Pass	10/12/1991
Driving experience	30 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94855133
Alt. Phone Number	-
Email Address	RT20091973@gmail.com
Address	Blk 120 Pending Road #05-174
Address complement	-
Postcode	670120
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	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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	Wong Kum Fatt
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

Please refer to the sketch plan.

#### 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




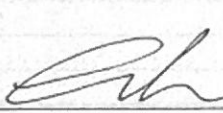
Vehicle Registration Number	SND6530K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

# SKETCH PLAN

## IMPORTANT NOTICE

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

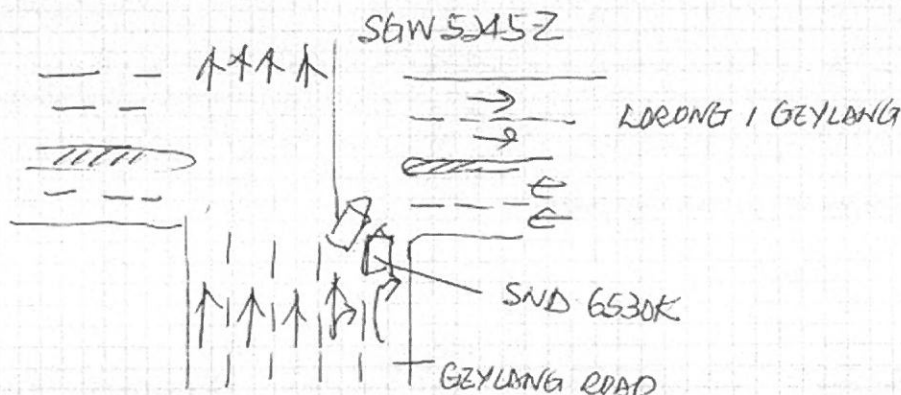





Policyholder's Signature / Date & Time  
 31 MAR 2022

Driver's Signature (if driver is not the policyholder) / Date & Time  
 31 MAR 2022

Witnessed by Reporting Centre Personnel  
 Angie Soh

Sketch Plan





**Describe Circumstances of the Accident**

ON 31ST MARCH 2022 AT ABOUT 0010 HRS. I WAS DRIVING ON GEYLANG ROAD TURNING RIGHT TO LOONG 1, GEYLANG

I WAS ON 2ND LANE FROM THE RIGHT WHICH ALLOW RIGHT TURN AND GOING STRAIGHT.


WHEN THE TRAFFIC LIGHT TURNED GREEN, I PROCEED TO MAKE RIGHT TURN, THE CAR ON MY RIGHT APPARENTLY WAS GOING STRAIGHT ON THE WRONG LANE AND HIT ONTO MY REAR RIGHT PORTION


**Declaration**

We declare the foregoing particulars are true in every respect.

  
 Policyholder's Signature / Date & Time  
 31 MAR 2022



  
 Driver's Signature (if driver is not the policyholder) / Date & Time  
 31 MAR 2022

  
 Witnessed by Reporting Centre Personnel  
 Angie Soh



HOTLINE TEL: (65) 6419-3000

## 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)

M.Z.400

<b>COMPREHENSIVE COMMERCIAL MOTOR</b>  <b>CERTIFICATE NO.</b> 999993578/100734081-00000	<table style="width: 100%;"> <tr> <td style="width: 60%;"><b>OWN DAMAGE EXCESS</b></td> <td style="width: 40%; text-align: right;">S\$1,200.00 (1)</td> </tr> <tr> <td><b>WINDSCREEN EXCESS</b></td> <td style="text-align: right;">S\$100.00</td> </tr> <tr> <td colspan="2" style="text-align: center;"><small>(for policies with effect from 1st November 2002)</small></td> </tr> <tr> <td><b>SUM INSURED</b></td> <td style="text-align: right;">S\$1.00</td> </tr> <tr> <td><b>INSURING WITH COE/PARF</b></td> <td style="text-align: right;">NO</td> </tr> </table>	<b>OWN DAMAGE EXCESS</b>	S\$1,200.00 (1)	<b>WINDSCREEN EXCESS</b>	S\$100.00	<small>(for policies with effect from 1st November 2002)</small>		<b>SUM INSURED</b>	S\$1.00	<b>INSURING WITH COE/PARF</b>	NO
<b>OWN DAMAGE EXCESS</b>	S\$1,200.00 (1)										
<b>WINDSCREEN EXCESS</b>	S\$100.00										
<small>(for policies with effect from 1st November 2002)</small>											
<b>SUM INSURED</b>	S\$1.00										
<b>INSURING WITH COE/PARF</b>	NO										
<b>1) VEHICLE REGISTRATION NO.</b> <b>2) NAME OF INSURED</b> <b>3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT</b> <b>4) DATE OF EXPIRY OF INSURANCE</b> <b>5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *</b>	SGW5245Z  Unique Tourist Service Pte Ltd  1 Jun 2021  31 May 2022  Any person who is driving on the Insured's order or with their permission.										
<p>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) LIMITATION AS TO USE *</b></p> <p>Use for the carriage of passengers or goods in connection with the Insured's business.          Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.          The Policy does not cover</p> <p>1) Use for racing, pace-making, reliability trial or speed-testing.          2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.          3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.</p>											
<p><b>LOSS OF USE</b> NOT INCLUDED</p> <p><b>* NAMED DRIVER</b> N/A</p> <p><b>HIRE PURCHASE COMPANY</b> NA</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>											

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).

Issued At Singapore 11 Jun 2021

AIG ASIA PACIFIC INSURANCE PTE. LTD.

500533-010  
 NEW FRONTIERS ALLIANCE PTE LTD  
 371 ALEXANDRA ROAD  
 #05-06 AIA ALEXANDRA  
 SINGAPORE 159963  
 SP-LEADVISORY

\_\_\_\_\_  
 Authorized Representative

ORIGINAL

SSCANA

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7335078F**

**TOH HOCK LYE**  
(ZHUO FULAI)

Birth Date: **20 Sep 1973**  
Issue Date: **26 Feb 2004**

001135554H

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7335078F**

Name: **TOH HOCK LYE**  
(ZHUO FULAI)  
**卓福來**

Race: **CHINESE**

Date of Birth: **20-09-1973** Sex: **M**

Country of Birth: **SINGAPORE**

94855133

RT20091973@gmail.com.

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

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

PASS DATE: **10 Dec 1991**

Licence No: **S7335078F**

NP 428A

2683103

NRIC No. **S7335078F**

Address: **APT BLK 120 PENDING ROAD**  
**#05-174**  
**SINGAPORE 2367**

Blood Group: **A+** Date of issue: **14-07-1995**