

## 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 : 13.04.2022

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 : SKZ 8542H /SKQ 7758G AND OTHER ON 06.04.2022

We are the authorized repair workshop for the owner of motor vehicle no: **SKZ 8542H** , which was involved in the captioned accident with your insured vehicle no: **SKQ 7758G** . 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 Use (5 Days + 1 Sunday x S\$60)	\$	360.00
3) GIA Search Fee	\$	2.00
	<u>\$</u>	<u>7,852.00</u>

We enclosed herewith the following documents to support the claims:

- |                                    |                          |
|------------------------------------|--------------------------|
| a) Final Repair Invoice            | b) GIA Search Result     |
| c) Letter of Authorisation, etc... | d) GIA Report            |
| e) I/C & Driving Licence           | f) Insurance Certificate |
| g) 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@fastechnauto.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 : 22912

Date : 13.04.2022

Vehicle No : SKZ 8542H

Make/Model : HONDA VEZEL 1.5

Chassis/Eng# :

Accident Date : 06.04.2022

Claim No :

Reference : 0422 -22912

Policy No :

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		Amount
To proceed on lump sum repair	S\$	7000.00

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E. & O. E.

Total : S\$ 7000.00

GST @ 7% : S\$ 490.00

*Amount Due* : S\$ 7490.00



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for FASTECH AUTO PTE LTD




## INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SKQ7758G

Date of Accident

06/04/2022 

Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... **AIG Asia Pacific Insurance Pte....**Period of Insurance ..... **26/12/2021 - 25/12/2022**Requested By ..... **ALLAN TANG (KIM CHWEE AUT...**Requested Date ..... **07/04/2022 10:15****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, Yeo Cho Hong ("the third party claimant")  
of Blk 299 Punggol Central # 16-451 Singapore 820299 (address),  
owner of SKZ 8542 H (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 8542 H that was  
damaged pursuant to the accident which occurred on 06.04.2022 (date) along  
after Loyang Exit (location)  
involving vehicle no/s SKQ 7758 G ("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 07 day of 04 (month) 20 22 (year)

Signed by "the third party claimant"



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	07/04/2022 08:27 (SGT)
Date of Accident	06/04/2022 17:30 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	AFTER LOYANG EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ8542H
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YEO CHO HONG
NRIC No	S1572070J
Email Address	TZL.CHERLYN@GMAIL.COM
Mobile Phone No	(Phone) +65-81210015
Alternative Phone No	+65-81210015

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1500

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5087633328-05
Cover Note Number	-

#### DRIVER

Name of Driver	YEO CHO HONG
NRIC No	S1572070J



Date Of Birth .....	15/03/1963
Occupation .....	Indoor
Date Of Driving Pass .....	30/08/1983
Driving experience .....	38 YEARS AND 8 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-81210015
Alt. Phone Number .....	+65-81210015
Email Address .....	TZL.CHERLYN@GMAIL.COM
Address .....	BLK 299 #16-451
Address complement .....	PUNGGOL CENTRAL
Postcode .....	820299
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 .....	Raining
Road Surface .....	Wet

#### 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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	EDRIC LIM
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 DRIVING ALONG LANE 2 WHEN VEHICLE B SUDDENLY COLLIDED AGAINST MY VEHICLE REAR. I UNDERSTAND FROM DRIVER'S OF VEHICLE B THAT VEHICLE C HAD COLLIDED AGAINST HIS VEHICLE CAUSING HIS VEHICLE TO SURGE FORWARD AND COLLIDED WITH MY VEHICLE.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	Submitted to workshop.
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SKQ7758G
Vehicle Manufacturer .....	-
Vehicle Model .....	-



Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MOHAMMAD FAIRUSHAH
NRIC No	S7707587I
Contact Number	(Phone) +65-90293945
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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)	-

#### INJURED PERSONS DETAILS

##### INJURED 1

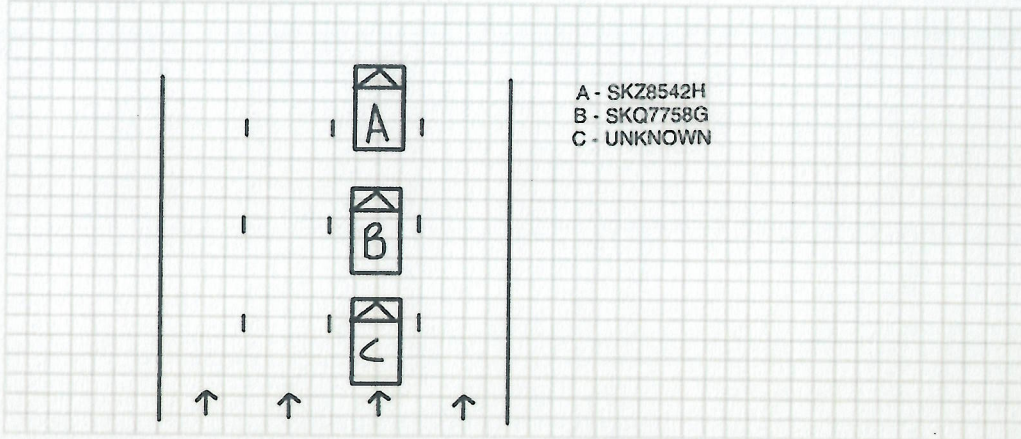
Name of injured person	YEO CHO HONG
Gender	Female
Phone No	-
Address	BLK 299 PUNGOOL CENTRAL
Address Complement	#16-451
Post Code	820299
Approximate Age Years Old	59
Injuries Sustained	NECK STRAIN
Injured person in which vehicle?	SKZ8542H
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 2

Name of injured person	EDRIC LIM RUI
Gender	Male
Phone No	(Phone) +65-92313337
Address	BLK 164 TAMPINES ST 12
Address Complement	#08-275
Post Code	521164
Approximate Age Years Old	28
Injuries Sustained	RIGHT SHOULDER AND BACK STRAIN
Injured person in which vehicle?	SKZ8542H
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A large rectangular area with horizontal lines for text entry. A diagonal line is drawn from the bottom-left corner to the top-right corner, indicating that no description was provided.

DECLARATION

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

Policyholder's Signature

Date & Time: 07042022 & 0930HRS

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: Md Ikhsan

NRIC/FIN No.: S098395

GIARMC SketchPlanForm\_V3



**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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature

Date &amp; Time: 07/04/2022 &amp; 0930HRS (if driver is not the policyholder)

Driver's Signature

Date &amp; Time:



Reporting Centre Personnel's Signature

Name: Md Ikhsan

NRIC/FIN No.: S098395





**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: SN0722470001 Vehicle Registration No: SKZ8542H  
 Name (as shown in NRIC): Yeo Cho Hong NRIC/FIN/Passport No: S1572070J  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: Blk 299 Punggol Central #16-451 Singapore (820299 )  
 Contact (Tel):  Mobile No.: 81210015  
 Email Address: tzi.cherlyn@gmail.com  
 Date of Accident: 06-Apr-2022 Time of Accident: 17:30  
 Place of Accident: TPE, Singapore  
 Insurance Company: NTUC Income Insurance Co-operative Ltd

**(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:

Details for injured person (Injured 2)

Were seat belts worn? ..... - 'Yes' instead of 'No'

Policyholder / Driver's Signature  
 Date: 07/04/2022

Reporting Centre Personnel's Signature  
 Name: Arden Lim  
 NRIC/FIN No.: 991022  
 Date: 8/4/22

GIARMC Addendum Form



REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of Yeo Cho Hong

Licence Number: S1572070J

Name: YEO CHO HONG

Birth Date: 15 Mar 1963

Issue Date: 11 Jul 2014

Barcode: 002323067E

For Insurance Reporting And Claim Purposes Only

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1572070J

Portrait of Yeo Cho Hong

Name: YEO CHO HONG

杨楚凤

Race: CHINESE

Date of birth: 15-03-1963

Country/Place of birth: SINGAPORE

Sex: F

6106794

S1572070J

*Yeo Cho Hong*

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 30 Aug 1983

For Insurance Reporting And Claim Purposes Only

Licence No: S1572070J

NP 428A

6106794

Barcode

NRIC No S1572070J

Portrait of Yeo Cho Hong

Date of issue: 18-01-2019

Address: APT BLK 299 PUNGGOL CENTRAL #16-451 SINGAPORE 820299



## 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:** 5087633328-05

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SKZ8542H**  
Chassis Number : RU11108050
2. Name of Policyholder : YEO CHO HONG
3. Effective Date of Insurance : 04 Feb 2022
4. Expiry Date of Insurance : 03 Feb 2023
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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: YEO CHO HONG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 : BUSINESS CENTRE (00000601399)  
Date of Issue : 12 Jan 2022 12:02 hrs  
Reprint : 12 Jan 2022 12:03 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	070J
<b>Vehicle Details</b>	
Vehicle No.:	SKZ8542H
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Apr 2022
Vehicle Make:	HONDA
Vehicle Model:	VEZEL 1.5X A
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	L15B4028054
Chassis No.:	RU11108050
Maximum Power Output:	96.0 kW (128 bhp)
Open Market Value:	\$18,940.00
Original Registration Date:	04 Feb 2016
First Registration Date:	04 Feb 2016
Transfer Count:	0
Actual ARF Paid:	\$8,940.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	03 Feb 2026
PARF Rebate Amount:	\$5,811.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	03 Feb 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$46,651.00
COE Rebate Amount:	\$17,836.00
<b>Total Rebate Amount:</b>	<b>\$23,647.00</b>

The information contained herein is correct as at 07 Apr 2022

OK