### 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

27.05.2022 Date:

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: SJZ 204Z / SKQ 6794H ON 21.04.2022

We are the authorized repair workshop for the owner of motor vehicle no: SJZ 204Z , which was involved in the captioned accident with your insured vehicle no: SKQ 6794H . 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)	
2)	Loss of Rental	

- 3) GIA Search Fee

\$	6,420.00
Φ.	1 200 00

\$ 1,200.00

7,622.00

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) GIA Search Result
- e) GIA Report
- g) Insurance Certificate

- b) Car Rental Invoice / Agreement
- d) Letter of Authorisation, etc...
- f) I/C & Driving Licence
- h) 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

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Tax Invoice: 22932

Date

:27.05.2022

Vehicle No

:SJZ 204Z

Make/Model : TOYOTA ALPHARD 2.5

Chassis/Eng# :

Accident Date : 21.04.2022

Claim No

Reference

: 0422 -22932

Policy No

Amount

To proceed on lump sum repair

S\$

6000.00

E. & O. E.

Total: S\$

GST @ 7%: S\$

6000.00 420.00

Amount Due: \$\$

6420.00

For FASTECH AUTO PTE LTD

All Invoices are subjected to GST

# **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: PRECISION COMPANY PTE LTD

Invoice : DCR-2022-04-23

Date : 25.04.2022

Agreement No : 22261

Payment Terms: LOD

**DESCRIPTION** 

**AMOUNT** 

Rental charges for vehicle: SGQ 555T ( 0422-22932 )

\$ 1,200.00

Rental Period from 21.04.2022 to

25.04.2022

E. & O. E.

Total

\$

1,200.00

JIN EE

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. 22261

Name PRECIS	ION COMPANY	PTG. LTD	REG. No.	MAKE	E MODEL		
-28 MANDAL ASTATE		- S4Q 555T	DIE	SEL	PETROL	E 1/4 1/2 3/4	
#01-02	L BHIL FACTORIE	5 8(120000)	KM IN			& TIME IN 04/202	18:200
		2 - (421/201)	KM OUT		DATE	8, TIME 9U	T 91
A SOLVETE DES OUSVISA	Lie Bioday apinus a dine s	DE UNIO SERIE HE HE DWN BARREN	KM DRIVEN	Hola da disgrand	TIME	1 /	25 (0-15
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C8737074G	DATE OF ISSUE		ŀ	IOURS	@ S\$	10 10 EE 100	
ADD NAMED DRIVER	DATE OF 1000E	PLACE OF ISSUE	4	DAYS	@S\$	30,00	# 1200.00
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DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	MC	NTHS	@S\$	salana ( )	2 JEIGT N. X.
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALLING, RE	NTER	SUB-TO	OTAL	(6) (8)
IMPORTANT NOTES:			AGREES TO PAY AD FOR COLLISION DAN	D FEE IAGES	elnays.	noga terem	64 (g)
This vehicle is licenced to carry 04 No refund will be given for vehicle r	returns early	TO SHEET ISSUE TO THE VEHICLE OF	WAIVER (C.D.W.)		70711		11
No refund will be given for period le Hirer is liable to pay loss of earning Hirer is liable to pay all parking fee	oft in vehicle.	repair.	GERBACO GRICOLE TO SOMEULINE A		TOTAL RENTAL		\$1200,00
No service on public holiday and St	ly.		Stero de Agracine		DELIVE	RY FEE	00.10
Driver must be: a) 18 years old and above	Vest Malaysia.		V		COLLEC	CTION FEE	
<ul> <li>b) Holding a valid relevant class of a The vehicle is strictly to be driven b agreement.</li> </ul>	ry the person to whom it is hired to	and the additional driver named in the		EK	PER MON	VTH	
The hirer is not allowed to sub-let th	ne vehicle to another party and sub	eletting is not covered.	\$ \$		S		ant variable
ADDITIONAL CONDITIONS:  COMPREHENSIVE COVERED EXC	CESS:		BY INITIALLING, REM AGREES TO PAY ADD	NTER FEE	O subling	ned Kana ne nedt nodika	R ant 1 e 1
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*Hirer must bear all costs to the dam *Section II - Used outside S'pore : S	nages of the return vehicle. GGD 3000.00		PER DAY PER WE \$ \$		PER MON	ITH	
YOUNG AND INEXPERIENCE DRIV Hirer or any authorized driver who is 18 month or less driving experience.	aged 22 years old (on the date of	accident) and below or possess only	PREPAYMENT		TOTAL (	CHARGE	(Oloq
COMPREHENSIVE COVERED EXC Section I – Used in S'pore only : SG	11 6000 00 "Cootion I II	(CE DRIVER)	CHECK	no you	DEPOSIT	T 30 - 181 - 181	sw old Let
Section II – Used in S'pore only : So W/screen Excess In S'pore : SGD 1	GD 6000.00 *Section II - Use	d outside S'pore : SGD 12.000.00 ed outside S'pore : SGD 12.000.00 es Outside S'pore : SGD 100.00	CASH				A altitude
THIRD PARTY COVERED EXCESS: Hirer must bear all costs to the dama Section II – Used in S'pore only : SG	(YOUNG AND INEXPERIENCE I		RECEIPT NO.	A DATE OF	NETT CH	HARGE	er autr — Nill Manager — Wander
Hirer must bear all costs to the dama Section II – Used outside S'pore : SO	aga of the return as his la		topard:	fied y	we bus 1	gerreenpA	10.10
lirer is responsible for any costs	s to the		AMOUNT DUE / REFUN	VD	mat poolgi mos vosa		
HAVE READ THE TERMS AN	ND CONDITIONS ON BOTH	SIDES	incoursed of an improved void year fact dispressions.	iterty s	er ecologia er econogia	onsime of	EART TI
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RENTER'S/I	DRIVER'S SIGNATUR	E	Dy	NAMI	CCAR	RENTAL	

**INSURER ENQUIRY** 

Find insurer

Vehicle reg. no.

SKQ6794H

**Date of Accident** 

21/04/2022

Reset

### % RESULT & RECEIPT

# **TP Insurer Enquiry**

Period of Insurance \_\_\_\_\_\_\_\_ 19/12/2021 - 18/12/2022

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

Requested Date \_\_\_\_\_\_\_21/04/2022 09:22

### Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13** 

Total Amount Due (GST Inclusive): \$\$2

### **General Insurance Association**

Records Management Centre GST Registration No: **M400017735** 



# AUTHORIZATION TO ACT (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

PRECISION COMPANY PTE. LTD.	
OF 2B MANDAI ESTATE #01-02 BHL FACTORIES	SINGAPORE 729929 (address),
owner of SIZ 204Z (vehicle	no.) hereby authorize
FASTECH AUTO PTE LTD	
("the workshop") to act for me with respect to my	y claim for repair costs and/or
rental and/or loss of use ("claim") for my vehicle r	no. SJZ 204Z that was
damaged pursuant to the accident which occurred	d on 21.04.2022 (date) along
BUKIT BATOK STREET 52 OUTSIDE LIAN HUA PRI S	(location)
involving vehicle no/s SKQ 6794H	("the accident").
I further authorize the workshop to settle the manner that they deem fit and the workshop is	further authorized to receive
payment furtherto settlement of my claim with pay	ment cheque/s being made in
favour of the workshop.	
I faith an an ann and and any anti-	tratahan mar mah
I further acknowledge that any settlement the	
behalf is on a without prejudice and without adm as the driver/owner/insurers of the other vehicle/s	
92 file dilacitolalicitiionicia oi nic onici acincica	is concerned.
Date this 21 day of 64 (m	onth) 20_22(year)
* OFFICE STATES	GST Reg. No.) TO 200006262D
Signed by "the third party claimant" Signe	ed by "the workshop"



# SINGAPORE ACCIDENT STATEMENT

Please report <u>correctly</u> 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 witholding of material facts may allow insurance companies to repudiate

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 Date of Accident **Exact Location of Accident** Additional Location Information

Country/State of Loss

21/04/2022 11:52 (SGT) 21/04/2022 07:24 (SGT)

Bukit Batok Street 52, Singapore

Bukit Batok Street 52 OUTSIDE LIAN HUA PRI SCH

Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SJZ204Z

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes PRECISION COMPANY PTE LTD 1XXXXX055H JORDAN@PRECO.COM.SG (Phone) +65-91813705 (Home) +65-91813705

VEHICLE PARTICULARS

/lanufacturer Model

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? Vehicle Category

Transmission CC

Toyota

**Alphard** 

**Employment** 

No - Claiming third party Commercial vehicle

NTUC Income Insurance Co-operative Ltd

Auto

0

**INSURANCE COMPANY** 

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number Cover Note Number No 5117312110-01

Comprehensive

DRIVER

Name of Driver NRIC No

YEE QIYUAN SXXXX074G



Date Of Birth 20/11/1987 Occupation Indoor Date Of Driving Pass 12/02/2008 Driving experience 14 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-91813705 Alt. Phone Number **Email Address** JORDAN@PRECO.COM.SG Address BLK 27 HAZEL PARK TERRACE #19-07 Address complement Postcode 678949 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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 - Head to Rear 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? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 1 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **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 REFER TO ATTACHED 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 SKQ6794H Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour .... Vehicle Category Private car Name of Driver SHI HUI JUN **Contact Number** 

(Phone) +65-92396185

Address

Address complement

Postcode	
Insurance Company Name	AIG Asia Pacific Insurance Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

### INJURED PERSONS DETAILS

### INJURED 1

Name of injured person	YEE QIYUAN
Gender	
Phone No	
Address	
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	
Injured person in which vehicle?	SJZ2047
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	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.
- 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 Formby 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 ladgement 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)

Lunderstand, 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
- (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' 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 Personal information may/can be disclosed by any of the insurers and/or GIA 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

20400

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

Witnessed by Reporting Centre Personnel

Sketch Plan

ST2204Z

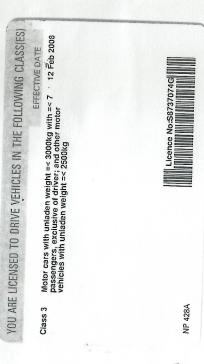
SKQ6794H

Describe Circumstances	or the Accident
Slove 8.10:1	Batok St 32 due to traffic ahead when
5. d. ( )   Val	Batol st 52 are to tractic ahead when
34000 MG	13 collicted on to my rear.
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ve declare the foregoing particul	lars are true in every respect.
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Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel







\$8737074G



IDENTITY CARD NO. \$8737074G REPUBLIC OF SINGAPORE

YEE GIYUAN

Name

涨

石

张 ge

CHINESE

. 6800509



### 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: 5117312110-01 Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : SJZ204Z

Chassis Number : JTNGF3DH808000212

2. Name of Policyholder : PRECISION COMPANY PTE LTD

3. Effective Date of Insurance : 22 Jun 20214. Expiry Date of Insurance : 21 Jun 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) : \$\$600

EXCESS (SECTION 2) : N/A

WINDSCREEN EXCESS : \$\$100

ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO **INSURE WITH COE** : YES NCD PROTECTION · YFS TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO PRIMARY DRIVER : N/A 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 : ALL INS AGENCY PTE. LTD. (00000571908)

Date of Issue : 25 May 2021 14:01 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

**Chief Executive** 

### > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	055Н
Vehicle No.:	SJZ204Z
Vehicle to be Exported:	No
Intended Deregistration Date:	21 Apr 2022
Vehicle Make:	TOYOTA
Vehicle Model:	ALPHARD 2.5 CVT ELEGANCE S/R
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	2ARH518073
Chassis No.:	JTNGF3DH808000212
Maximum Power Output:	134.0 kW (179 bhp)
Open Market Value:	\$45,427.00
Original Registration Date:	22 Jun 2015
First Registration Date:	22 Jun 2015
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$55,598.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Jun 2025
PARF Rebate Amount: Intended COE Rebate Details	\$36,138.00
COE Expiry Date:	21 Jun 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$75,000.00
COE Rebate Amount:	\$23,750.00
Total Rebate Amount:	\$59,888.00

The information contained herein is correct as at 21 Apr 2022