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: 10.06.2022

AXA Insurance Pte Ltd

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: GBB 2696U / SHA 3537Z ON 03.05.2022

We are the authorized repair workshop for the owner of motor vehicle no: $GBB\ 2696U$, which was involved in the captioned accident with your insured vehicle no: $SHA\ 3537Z$. 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

\$ 1,712.00
\$ 300.00
\$ 2,012.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

c) Letter of Authorisation, etc...

e) I/C & Driving Licence

g) Vehicle Registration Log Card

b) Car Rental Invoice / Agreement

d) GIA Report

f) Insurance Certificate

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

Attn: Motor Claim Department

AXA Insurance Pte Ltd

Tax Invoice: 22956

Date

:10.06.2022

Vehicle No

:GBB 2696U

Make/Model : NISSAN CABSTAR 3.0

Chassis/Eng# :

Accident Date : 03.05.2022

Claim No

Reference

: 0522 -22956

Policy No

Amount

To proceed on lump sum repair

S\$

1600.00

E. & O. E. Total: S\$ 1600.00 GST @ 7% : S\$ 112.00

Amount Due: \$\$

1712.00

for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

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

		RENTAL TERMS AND			No. 22	216			
Name AL 'F1	RESCO ELITE S'	YOTEM DIE ITS	REG. No.	MAKE MODEL:					
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No service on public holiday and Si Geographical areas: Singapore & V Driver must be:	unday. Vest Malaysia.	nus saturetar fiata vis		COLLECTION FEE	90 N.Q				
 a) 18 years old and above. b) Holding a valid relevant class of The vehicle is strictly to be driven tagreement. The hirer is not allowed to sub-let if 	by the person to whom it is hired	to and the additional driver named in the	PER DAY PER WE		PER MONTH				
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DYNAMIC CAR RENTAL

RENTER'S/DRIVER'S SIGNATURE

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: AL 'FRESCO ELITE SYSTEM PTE LTD

Invoice

: DCR-2022-05-19

Date : 06.05.2022

Agreement No : 22216

Payment Terms: LOD

DESCRIPTION

AMOUNT

Rental charges for vehicle : GY 9749A (0522-22956)

300.00

Rental Period from

04.05.2022 to

06.05.2022

E. & O. E.

Total

300.00

JIN EE

for Dynamic Car Rental

AUTHORISATION TO ACT

OTC LID
I/We, AL 'FRESCO ELITE SYSTEM PTE (the third party claimant") of 23 KAKI BUKIT ROAD 4
#OI-16/17 SYNERGY@KB 5(417801) (address), owner of GBB 2696U (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.
GBB 2696U that was damaged pursuant to the accident which occurred on 03.05.20 (date)
along BKE TOWARD SLE (BEFORE TURF CLUB AVENUE EXIT B) (location) involving
vehicle no/s SHA 3537 Z ("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
without prejudice and without admission of liability basis insofar as the driver/owner/insurers
without prejudice and without admission of liability basis insofar as the driver/owner/insurers
without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Signed by "the workshop"

(with company stamp)

Signed by "the third party claimant"

(with company stamp if applicable)



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

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 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 04/05/2022 18:10 (SGT) Date of Accident 03/05/2022 21:10 (SGT) **Exact Location of Accident** Turf Club Rd, Singapore

ditional Location Information BKE TOWARD SLE (BEFORE TURF CLUB AVENUE EXIT 8) Country/State of Loss

Singapore

Employment

Manual

No - Claiming third party

Commercial vehicle

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBB2696U

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner AL' FRESCO ELITE SYSTEM PTE LTD Company Reg No 1XXXXX190Z

Email Address ANTSHIPCREW@YAHOO.COM.SG

Mobile Phone No (Phone) +65-96191565 Alternative Phone No (Home) +65-96191565

VEHICLE PARTICULARS

∩ufacturer Nissan Model Cabstar

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

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd

Type of Coverage Comprehensive

Fleet Policy

Policy Number 5114060226-02

Cover Note Number

DRIVER

Name of Driver ABDUL AZIZ BIN AMAT NRIC No

Accident report SY0A2254000A

SXXXX148E

Date Of Birth 18/01/1964 Occupation Outdoor Date Of Driving Pass 30/09/2000 Driving experience 21 YEARS AND 8 MONTHS Gender Male Mobile Number (Phone) +65-84998173 Alt. Phone Number Email Address ANTSHIPCREW@YAHOO.COM.SG Address BLK 273 PASIR RIS STREET 21 #02-508 SINGAPORE 510273 Address complement Postcode 510273 Is the driver the policyholder? 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 - Change/cross lane 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) 3 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name NADIA AMIRAH Gender Female PASSENGER 2 Name **AISAH** Gender Female **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 SHA3537Z

Vehicle Manufacturer

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_
_
Private car
-
_
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_
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SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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 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)

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

(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 & Times

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A: GBB 2896U B: SHA 3537Z

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		***************************************				TOTAL SERVICE															

Declaration

We declare the foregoing particulars are true in every respect.

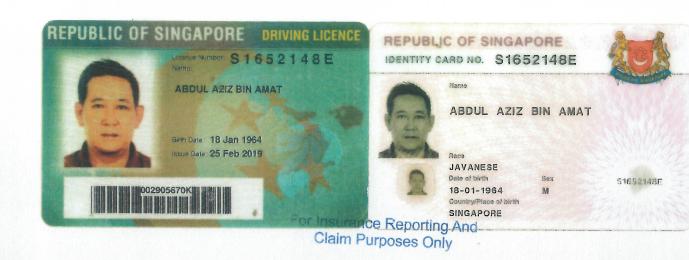
Policyholder's Signature / Date & Time

& Time

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

Witnessed by Reporting Centre

Personnel







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: 5114060226-02

Cover: Comprehensive

1. Index mark and Registration Number of Vehicle

: GBB2696U

Chassis Number

2. Name of Policyholder

: JN1SC2F24Z0800674

3. Effective Date of Insurance

: AL' FRESCO ELITE SYSTEM PTE LTD

: 17 Nov 2021

4. Expiry Date of Insurance

: 16 Nov 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.

(b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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) WINDSCREEN EXCESS

: N/A

INSURE WITH COE

: S\$100

: YES

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

: ANG HAO @ HONG HAO (00000631763)

Date of Issue

: 08 Nov 2021 19:01 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	190Z
Vehicle No.:	GBB2696U
Vehicle to be Exported:	No
Intended Deregistration Date:	04 May 2022
Vehicle Make:	NISSAN
Vehicle Model:	CABSTAR 3.0 5M/T ABS 2DR 2WD 3.4T
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	ZD30206188K
Chassis No.:	JN1SC2F24Z0800674
Maximum Power Output:	
Open Market Value:	\$27,524.00
Original Registration Date:	17 Nov 2008
First Registration Date:	17 Nov 2008
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$1,377.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	16 Nov 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$14,367.00
COE Rebate Amount:	\$4,405.00
Total Rebate Amount: Message	\$4,405.00

The information contained herein is correct as at 04 May 2022