

# 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 : 02.06.2022

AXA Insurance Pte Ltd

Attn: Motor Claim Department

Dear Sir/Madam,

**ACCIDENT INVOLVING VEHICLES : SLE 1340T / SHC 5038Z ON 14.05.2022**

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We are the authorized repair workshop for the owner of motor vehicle no: **SLE 1340T** , which was involved in the captioned accident with your insured vehicle no: **SHC 5038Z** . 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)	\$ 5,671.00
2) Loss of Use (7 days + 1 Sunday X S\$60)	\$ 480.00
	<u>\$ 6,151.00</u>

We enclosed herewith the following documents to support the claims:

- |                                    |                                   |
|------------------------------------|-----------------------------------|
| a) Final Repair Invoice            | b) Car Rental Invoice / Agreement |
| c) Letter of Authorisation, etc... | d) GIA Report                     |
| e) Police Report                   | f) I/C & Driving Licence          |
| g) Insurance Certificate           | 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@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**

AXA Insurance Pte Ltd

Attn : Motor Claim Department

Tax Invoice : 22977

Date : 02.06.2022

Vehicle No : SLE 1340T

Make/Model : SUZUKI SWIFT 1.4

Chassis/Eng# :

Accident Date : 14.05.2022

Claim No :

Reference : 0522 -22977

Policy No :

Amount

To proceed on lump sum repair

S\$

5300.00

E. & O. E.

Total : S\$

5300.00

GST @ 7% : S\$

371.00

Amount Due : S\$

**5671.00**

  
for FASTECH AUTO PTE LTD

All Invoices are subjected to GST



## AUTHORISATION TO ACT

I/We, WONG JIL LIAN (the third party claimant") of APT BLK 643 PUNGOL CENTRAL #11-324 S(820643) (address), owner of SLE 1340T (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. SLE 1340T that was damaged pursuant to the accident which occurred on 14/05/22 (date) along SLIP RD OF LOWER DELTA TWDS KAMPUNG BAHRU RD. (location) involving vehicle no/s SHC 5038Z ("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 17 (day) of MAY (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	17/05/2022 18:24 (SGT)
Date of Accident	14/05/2022 22:01 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLIP RD OF LOWER DELTA TWDS KAMPUNG BAHRU RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE1340T
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WONG JIL LIAN
NRIC No	SXXXX261G
Email Address	KEVWONG@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-98352355
Alternative Phone No	(Home) +65-98352355

#### VEHICLE PARTICULARS

Manufacturer	Suzuki
Model	Swift
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 hire
Transmission	Auto
CC	1400

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5108695740-02
Cover Note Number	-

#### DRIVER

Name of Driver	WONG HONG NENG
NRIC No	SXXXX669E





Date Of Birth	12/12/1968
Occupation	Outdoor
Date Of Driving Pass	24/01/2019
Driving experience	3 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81821000
Alt. Phone Number	-
Email Address	KEVWONG@SINGNET.COM.SG
Address	BLK 643 PUNGGOL CENTRAL #11-324
Address complement	-
Postcode	820643
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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?	Yes
Police Station Name	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
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?	Yes
Reasons for not uploading a video of the accident	With Owner.
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5038Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category .....	Taxi
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	AXA 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 .....	WONG HONG NENG
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	REFER BY POLICE REPORT
Injured person in which vehicle? .....	SLE1340T
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 Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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

A: SLE 1340T

B: JHC 5038Z



### Describe Circumstances of the Accident

Please refer to the police report (F/20220515/9035).

### 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





**SINGAPORE  
POLICE FORCE**



F/20220515/7035

1 of 2

**POLICE REPORT (NP299)**

Report No. F/20220515/7035

Police Station Of Origin  
Ang Mo Kio Division HQ  
51 Ang Mo Kio Avenue 9 SINGAPORE  
569784  
Tel No:1800-2180000

Date/Time Report Made 15/05/2022 19:24	Vide Report No.	Station Diary No.
Name Of Informant WONG HONG NENG	Address 643 PUNGGOL CENTRAL #11-324 SINGAPORE 820643	
ID Type / ID No. NRIC NO / S6846669E	Contact No. Home/Office:	Mobile: 81821000
Nationality SINGAPORE CITIZEN	Email Address KEVWONG@SINGNET.COM.SG	
Occupation Taxi driver	Sex Male	Age 53
	Date of Birth 12/12/1968	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 14/05/2022 22:00 - 14/05/2022 22:05	Location Of Incident 643 PUNGGOL CENTRAL #11-324 SINGAPORE 820643	

**Brief details.**

Driving from lower delta towards kampung bahru road. Slowed down to a stop at zebra crossing when trans cab taxi (SHC5038Z) crashed into the back of my car (SLE1340T) around 10:04pm.  
Exchange driver details and confirm to claim insurance.

At time of accident, I did not feel any issue but the next day, felt slight pain and tightness on shoulder and neck, so I went to Sengkang A&E for checkup. And was given pain killers and 3 days MC

**Subjects Involved**

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:  
15/05/2022 19:24

Classification Of Case:





**SINGAPORE  
POLICE FORCE**



F/20220515/7035

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20220515/7035

<b>Victim</b>			
Person Name	WONG HONG NENG		
ID Type	NRIC NO	ID No	S6846669E
Gender	Male	Age	53
Race	Chinese	Language	English
Occupation	Taxi driver	Address	643 PUNGGOL CENTRAL #11-324 SINGAPORE 820643
Mobile No	81821000	Is Informant A Victim?	Yes
Person Name	WONG HONG NENG (Informant)		

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:  
15/05/2022 19:24

Classification Of Case:



For Ins  
Claim Purposes Only

Reporting And  
only

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S7422261G**



Name

**WONG JIL LIAN**  
**(HUANG RUNLIAN)**  
**黃潤蓮**

Race

**CHINESE**

Date of Birth

**15-07-1974**

Sex

**F**

Country of Birth

**SINGAPORE**




1


For Ins  
Claim Purposes Only

Reporting

3207042



NRIC No. **S7422261G**



Blood Group

**B-**

Date of issue

**27-10-2000**

**APT BLK 643 PUNGGOL CENTRAL #11-324**  
**SINGAPORE 820643**

NRIC No: **S7422261G** Date: **23-05-2004** No: **4963320**

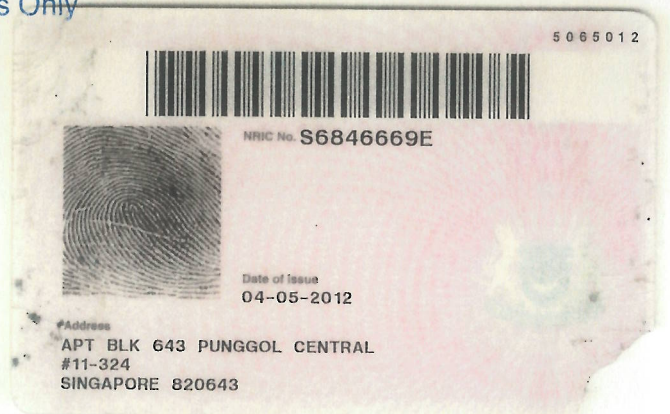
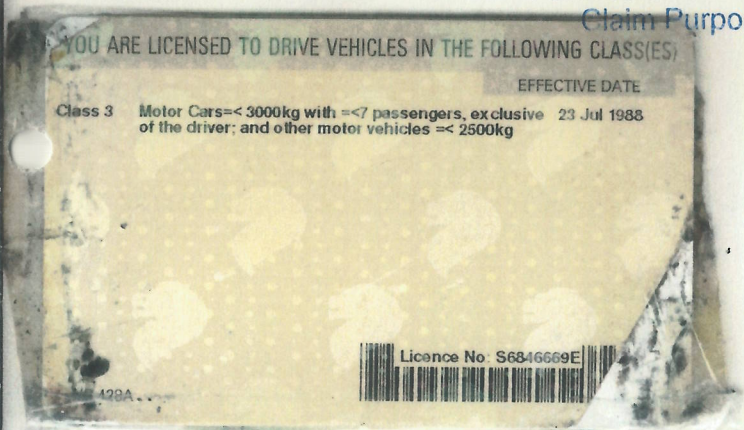




For Insurance Reporting And  
Claim Purposes Only

*Handwritten signature*

For Insurance Reporting And  
Claim Purposes Only





Land Transport Authority



  
PDVL/TDVL  
33 888 88888  
260686



## VOCATIONAL LICENCE

Licence No : S6846669E

Name : WONG HONG NENG

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check  
the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type

12

Description

TAXI VL

Issue Date

24/01/2019





## 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:** 5108695740-02

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SLE1340T**  
 Chassis Number : JSAFZC82S00329427
2. Name of Policyholder : WONG JIL LIAN
3. Effective Date of Insurance : 08 Jul 2021
4. Expiry Date of Insurance : 07 Jul 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 or Hirer's business.

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) 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\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: WONG JIL LIAN
NAMED DRIVER (1)	: WONG HONG NENG
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: HONG LEONG FINANCE LIMITED
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 : AUTOSHIELD PTE. LTD. (00000573469)

Date of Issue : 14 Jun 2021 11:14 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:	261G
<b>Vehicle Details</b>	
Vehicle No.:	SLE1340T
Vehicle to be Exported:	No
Intended Deregistration Date:	17 May 2022
Vehicle Make:	SUZUKI
Vehicle Model:	SWIFT 1.4 AT SPECIAL EDITION
Primary Colour:	Silver
Manufacturing Year:	2016
Engine No.:	K14B1129000
Chassis No.:	JSAFZC82S00329427
Maximum Power Output:	70.0 kW (93 bhp)
Open Market Value:	\$12,629.00
Original Registration Date:	08 Jul 2016
First Registration Date:	08 Jul 2016
Transfer Count:	0
Actual ARF Paid:	\$12,629.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 Jul 2026
PARF Rebate Amount:	\$8,840.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	07 Jul 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$52,301.00
COE Rebate Amount:	\$21,643.00
<b>Total Rebate Amount:</b>	<b>\$30,483.00</b>

The information contained herein is correct as at 17 May 2022

OK