

Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4

AS PER SURVEYOR'S RECOMMENDATION

SINGAPORE 757705

2 1 JUN 2022

SMRT AUTOMOTIVE SERVICES PTE LTD Claims & Insurance Agency

Strides Automotive Services Pte. Ltd. 2 Tanjong Katong Road, Tower 3, Paya Lebar Quarter, #08-01, Singapore 437161 Tel: 65 69083530 Fax: 65 69083592

#### Tax Invoice

GST Reg No. : MR-8500001-7

CRN : 199004280Z

Invoice No. : IV220600278
Date : 20.06.2022

Vehicle No. : SHB5798T

Your Ref No. : TAX/05/22/2037

Our Ref No. : 24114939 Terms : 30 Days

Description	Qty	Unit	Add	/ (Discount) Amount		\	Amount
<u></u>		Cost	ક				
LUMP SUM AMOUNT FOR REPAIR	1.00					\$	2,200.0

GRAND TOTAL \$ 2,200.00

#### Remark :

Make/Model : PRIUS4
Accident Date : 13.05.2022

#### Payment Instructions

By Cheque: Crossed and made payable to "Strides
Automotive Services Pte. Ltd." with invoice no. indicated on
the reverse side. No receipt will be issued unless requested.

By Bank Transfer:

Account Name : Strides Automotive Services Pte. Ltd.

Bank Name : DBS Bank Ltd - SGD

Bank Account No.: 018-008617-4

Swift Code : DBSSSGSG

Koo Yew Chung

Authorised Signature for Strides Automotive Services Pte. Ltd.

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E. & O.E



### Laid Up Report

Accident Start Date : 23/04/2022

Date Generated: 25/05/2022

Accident End Date : 25/05/2022

User Name : LeeGek

Case Reference Number	Vehicle Registration Number	Company Type	Vehicle Make	Vehicle Model	Job Card Number	Date and Time (Accident Repair)	Date and Time (Repair Completed)
TAX/05/22/2037	SHB5798T	Strides Taxi Pte Ltd	TOYOTA	PRIUS4	24114939	13/05/2022 4:46 PM	23/05/2022 3:27 PM





31 May 2022

60 Woodlands Industrial Park E4 Singapore 757705 Tel: 65 6477 5353 Fax: 65 6369 3639 stridesmobility.sg

### Vehicle Attachment History of NG HIN WOO (SXXXX028I)

Vehicle Num	Vehicle Make	Vehicle Model	Attachment Type	Attachment Start Date Time	Attachment End Date Time	Return Reason
SHB5798T	TOYOTA	PRIUS4	MAIN	22/04/2022 01:05 PM		
SHD6177T	TOYOTA	PRIUS	COURTESY	19/05/2022 11:10 AM	24/05/2022 10:55 AM	



#### **MEMORANDUM**

To: Claims Dept

Our Ref:

TAX/05/22/2037

From:

Strides Taxi Pte Ltd

Date:

23<sup>rd</sup> May 2022

# ACCIDENT ON 13/5/2022 INVOLVING SHB 5798T & SMC 4990X AT BLK 145 BISHAN STREET 12

This is to confirm that the daily rental rate for SHB 5798T is \$70.00 per day.

Please proceed to recover any rental loss from the third party as a result of the above accident.

Thank you.

Yours sincerely STRIDES TAXI PTE LTD



S\$27225E0002 / Strides Automotive Services Pte Ltd ENTRY DATE & TIME: 14/05/2022 09:32 (SGT) SUBMITTED BY: SHANTI B THAIYAL NAYAGI (SMRT05) VERSION: 1 (14/05/2022 09:32 (SGT))



## 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 14/05/2022 09:32 (SGT) Date of Accident 13/05/2022 10:40 (SGT) Exact Location of Accident Bishan Street 12, Singapore Additional Location Information BLK 145 BISHAN STREET 12 CAR PARK ountry/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

**SHB5798T** 

INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner Strides Taxi Pte Ltd Company Reg No 1XXXXX369K **Email Address** AUTO-SVCS-TARC@SMRT.COM.SG Mobile Phone No (Phone) +65-68662671 Alternative Phone No (Office) +65-68662672

#### VEHICLE PARTICULARS

Vehicle Registration Number

`{anufacturer Toyota **∄odel** Prius 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 Taxi Transmission Auto CC 1800

#### INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd Type of Coverage **ThirdParty** Fleet Policy Yes Policy Number D-22099115MFSH Cover Note Number

DRIVER

Name of Driver NG HIN WOO NRIC No SXXXX028I

Date Of Birth 08/01/1955 Occupation Outdoor **Date Of Driving Pass** 15/06/1977 Driving experience 44 YEARS AND 11 MONTHS Gender Male Mobile Number (Phone) +65-68662672 Alt. Phone Number Email Address AUTO-SVCS-TARC@SMRT.COM.SG Address Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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? Yes Was any injured conveyed to hospital by ambulance? No 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 UNKNOWN Gender Female PASSENGER 2 Name **UNKNOWN** 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 I WAS TRAVELLING STRAIGHT ALONG THE CAR OF BISHAN STREET 12 WITH 2 PASSENGERS (CHINESE) ON BOARD. SUDDENLY A VEHICLE SMC4990X CAME OUT FROM MSCP WITHOUT PROPER LOOK OUT AND COLLIDED ONTO THE LEFT PORTION OF MY TAXI. 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 **FILE TOO BIG** Was there any audio recorded?

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

#### 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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' 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), w hich may be sited outside of Singapore, for one or more of the above Purposes.

ELTD F

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel

Sketch Plan

BIK 145, Bishan street 12

MSCP

BDA

A-SHB57987

B-SMC 4990X



Date: 13/5/2021

Our Ref. No.:

### **Letter of Authorisation**

1, NG 1	4IN WOO		NRIC No.:		) the		
registered hi	irer / relief drive	r / taxi share drive		ıxi registration n	umber		
	hereby a	authorise <b>Strides</b>	Automotive	Services Pt	e Ltd		
and S	HB 5798T	Il matters arising & SMC 4990X 1912, Multi-	happene	d on $13/5/2$			
(the "Accide	ent") on my be	ehalf, including bu	ut not limited	to instituting ar	nd any		
claims or pro	oceedings agai	nst such party or	parties (as Aı	utoSvs deems fi	it in its		
absolute disc	cretion) in respe	ect of any claim, d	emand, loss, o	cost, expense, li	ability,		
damages or action made against us or incurred or suffered by us.							
resolve and but not limit	settle any proce ted to doing a	oregoing, I furthe eeding or claim and any act or execu- ehalf as may be re	rising out of th	e accidents, inc	cluding		
Name	NG HIN	WOO	Signature:	ogn	13/5/22		
Tel No.	*** ***						
Address							
				o o.o.co.10.31.0.00000 ##############################	****		

**Enquire Vehicle-Related Transaction History** 

Transaction History Details

Log Date/Time:

14 May 2022 / 09:31:42

Asset Type: Asset ID:

User ID:

Vehicle

Transaction Type:

SMC4990X

18.32 Insurance Enquiry (GIRO Payment) ESASBAHO - BALQISH BINTE ABDUL HALIL

\$7.49

Channel:

Transaction Amount:

External Agency

Business Transaction Reference No.: 20220514093142406961

Search Date / Time:

13 May 2022 10:40:00

Insurance Company:

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Information displayed is correct as at the log date and time.

**Enquire Related Logs** 

ОК