



**JL PERFECT AUTOWORK PTE LTD**

Co. & GST Reg. No.: 202136905K

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

Tel: +65 6341 6789 | Fax: +65 6341 6778

Email: jlperfectautowork@gmail.com

Our Ref.: SMA3280D

Your Ref.: SKX1819S

Date: 28.09.2022

ATTN: Motor Claims Department

INS: INDIA INTERNATIONAL INSURANCE PTE LTD

Dear Sir/Madam,

Accident Involving: SMA3280D & SKX1819S

Date of Accident: 20.06.2022 @ 08:20 HOURS

Location: PIE/TUAS NEAR STEVEN ROAD EXIT LAMPOST 953

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair: \$ 7,400.00

Loss of Use:

(10 Days x \$250.00): \$ 2,500.00

LTA Search \$ 7.45

GIA 3rd Party Report \$ 31.00

**Grand Total:** \$ 9,938.45

The above-mentioned settlement is in respect for our client of damage pertaining to his/her motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his/her personal injuries.

For any further queries, please kindly contact Irene @ 8297 9787, or email to [jlperfectautowork@gmail.com](mailto:jlperfectautowork@gmail.com)

Thank You,

Irene



## Authorisation To Act

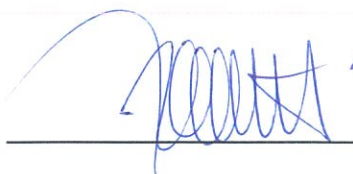
I, Tan Seon Hwa ("the third party claimant") of  
Blk 6 Tampines Street 73 #13-04 S(528825)  
(address), owner of SMA 3280 D (vehicle no.)  
hereby authorise JL Perfect Autowork Pte Ltd ("the workshop")  
to act for me with respect to my claim for repair costs and / or rental and / or  
loss of use ("claim") for my vehicle no. SMA 3280 D that was  
damaged pursuant to the accident which occurred on 20/06/22 (date)  
at/along PIE/Tuas near Steven Road Exit Lampost 953  
(location) involving vehicle no/s SKX1819S ("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a manner that  
they deem it fit and the workshop is further authorised to receive payment further to settlement  
of my claim with payment cheque/s being made in favour of the workshop.

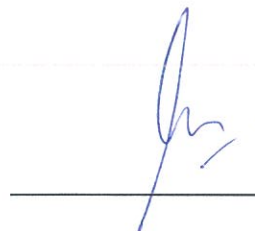
I further authorise the workshop to execute and/or sign any documents/discharge  
vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without  
prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by  
me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident  
concerned.

Dated this 21 day of 06 (month) 20 22 (year)



Signed by "the third party claimant"



Signed by "the workshop"



## Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SMA3280D and SKX1819S on 20/06/22  
at/along PIE/Tuas near Steven Road Exit Lampost 953

1. I/We, the Owner of motor vehicle no. SMA3280D hereby instruct and authorise JL Perfect Autowork Pte Ltd ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$\_\_\_\_\_ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 21 day of 06 20 22

Signature of vehicle owner

Name : Tan Soon Hwa

IC/UEN No : S17646089

(Company stamp, if applicable)

Address : Blk 6 Tampines Street 73

#13-04 S(528825

Tel : 9180 1617

Witnessed by :

IRENE

# TAX INVOICE

**JL PERFECT AUTOWORK PTE LTD**

Co. Reg No: 202136905K

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: jlperfectautowork@gmail.com



Date	Invoice Number	Vehicle Number
28.09.2022	JLP202209-00139	SMA3280D

## INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET

#04/#05 IOB BUILDING

SINGAPORE 049711

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 7,400.00
Total	\$ 7,400.00

Cross cheques and pay: JL PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

JL PERFECT AUTOWORK PTE LTD

AUTO Generated - Signature Not Required

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 21 Jun 2022 / 10:10:08

Receipt Date/Time : 21 Jun 2022 / 10:10:08

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-220621-000797

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - SKX1819S

As at 20 Jun 2022/08:15:00

Insurance Co: INDIA INT'L INS PTE LTD

1 Insurance Enquiry - SKX1819S

Enquiry Fee

20220621100920334426

7.00 0.49 7.49

**Sub-Total** 7.00 0.49 7.49

**Total Before Rounding** 7.00 0.49 7.49

**Rounding Difference** 0.04

**Total Amount Payable** 7.45

Paid By

421808XXXXXX9928 eNETS Credit Card 7.45

Total 7.45

Cash Change 0.00

Tendered Amount 7.45

Excess Refundable Amount 0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



RECORD MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE

9 Temasek Boulevard #42-01b, Singapore 038989

Email: [gears-support@shift-technology.com](mailto:gears-support@shift-technology.com)

GST Reg No: M400017735

UEN: S66SS0020G

TAX INVOICE

JL Perfect Autowork Pte Ltd - Tan  
Soon Hwa

Invoice Number  
GR-2022-002455

Invoice Issue Date  
30 Jun 2022

Invoice Due Date  
07 Jul 2022

Total Amount (S\$) 28.97  
Total GST 7.00% (S\$) 2.03  
Total Amount Incl. of GST (S\$) 31.00

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	30/06/2022,20/06/2022,SMA3280D,SKX1819S	28.97	2.03	31.00
Total Amount (S\$)				28.97
Total GST 7.00% (S\$)				2.03
Total Amount Incl. of GST (S\$)				31.00

This is a computer generated document.  
No signature is required.

# 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 GlA Records Management Centre established by the General Insurance Association of Singapore (GlA) 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	21/06/2022 00:25 (SGT)
Date of Accident	20/06/2022 08:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE/TUAS NEAR STEVEN ROAD EXIT LAMPOST 953
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA3280D
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN SOON HWA
NRIC No	SXXXX608G
Email Address	freddietansh@gmail.com
Mobile Phone No	(Phone) +65-91801617
Alternative Phone No	+65-91801617

### VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
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	1995

### INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPPHQ21-004705
Cover Note Number	-

### DRIVER

Name of Driver	TAN SOON HWA
NRIC No	SXXXX608G

Date Of Birth	22/03/1966
Occupation	Indoor
Date Of Driving Pass	02/10/1985
Driving experience	36 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91801617
Alt. Phone Number	+65-91801617
Email Address	freddietansh@gmail.com
Address	Blk 6 Tampines st 73
Address complement	#13-04
Postcode	528825
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	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

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

#### PASSENGER 1

Name	PASSENGER 1
Gender	Male

#### DETAILS OF POLICE ACTION

Is the accident reported to the police?	No
Is notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

I SMA3280D was driving along PIE TOWARDS TUAS on the most right lane near lamppost 953. While I was following the traffic ahead, the traffic started to slow down and came to a stationary position. The moment I slow down my vehicle and came to a stationary position, suddenly I felt an hard impact coming from my rear vehicle and discover that the 3rd party SKX1819S had failed to stop on time and collided onto my vehicle . I managed to take some photos and exchange particulars with the 3rd party. And there was police officers that happen to there to assist us, after a few hours of the incident I felt pain on my upper back area

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKX1819S
Vehicle Manufacturer	Citroen
Vehicle Model	C4 picasso

Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	TAN JIK LONG ANTHONY
NRIC No	SXXXX368J
Contact Number	(Phone) +65-82922433
Address	Na
Address complement	Na
Postcode	Na
Insurance Company Name	-
Nature Of Damage	Na
Details of property damaged in accident	Na
No. Of Passenger (Including Driver)	1

#### INJURED PERSONS DETAILS

##### INJURED 1


Name of injured person	TAN SOON HWA
Gender	Male
Phone No	(Phone) +65-91801617
Address	Na
Address Complement	Na
Post Code	Na
Approximate Age Years Old	56
Injuries Sustained	Pain on the upper back
Injured person in which vehicle?	SMA3280D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLANIMPORTANT 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:

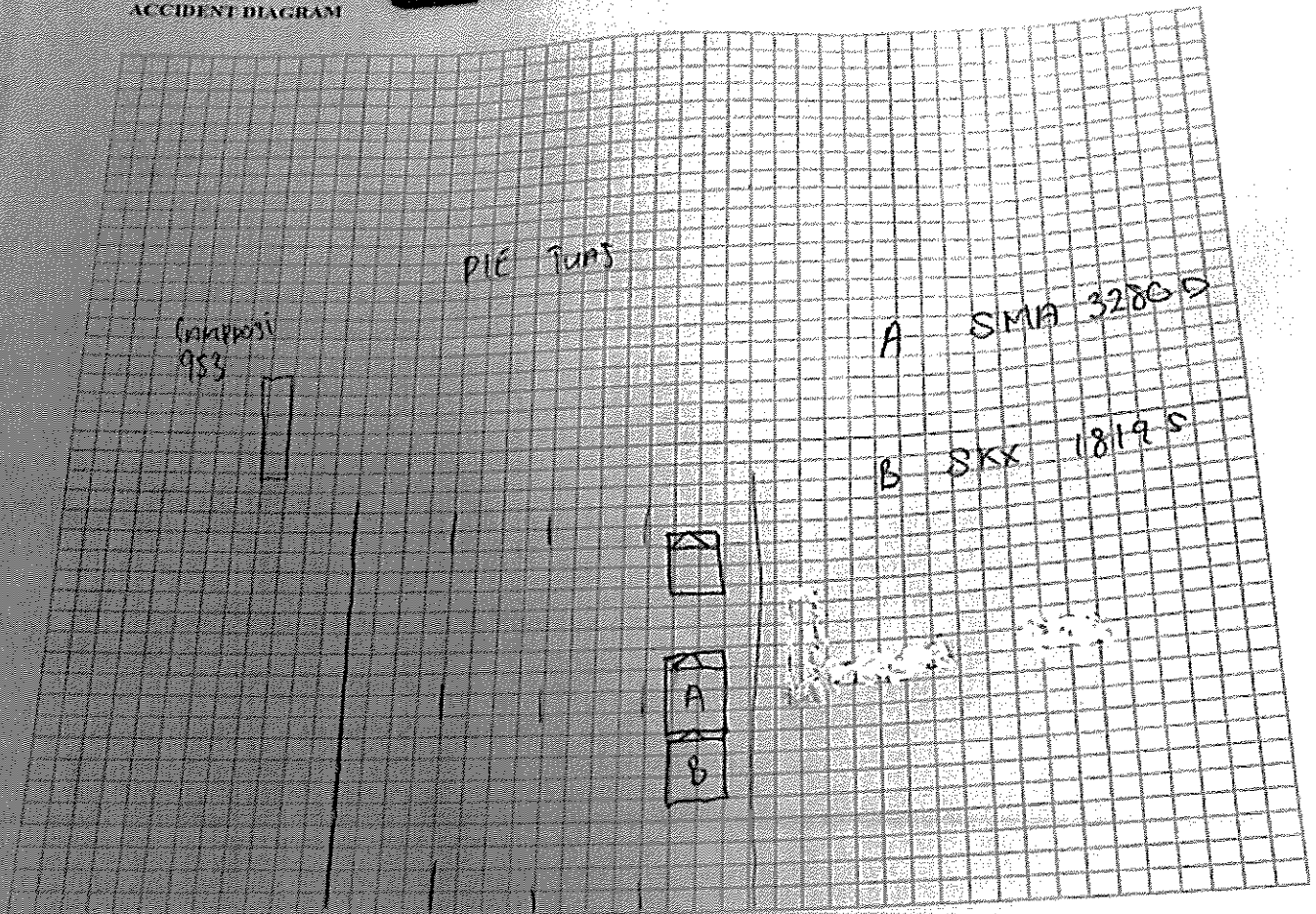
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this {form} and any other personal information provided by me or possessed by my insurer (collectively the "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 & Time

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

**VERIFY BY AJAX MARS (ARC)**  
**REPORTING OFFICER**  
MUHAMMAD SUMARDI BIN MOHD AFFANDI  
Reporting Centre Personnel's Signature  
Name  
NRIC/IN No

### ACCIDENT DIAGRAM



VERIFIED BY AJAX MARS (ARC)  
REPORTING OFFICER  
MUHAMMAD SUMARDI BIN MOHD AFFANDI

Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/FIN No.: \_\_\_\_\_

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

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

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I SMA3280D was driving along PIE TOWARDS TUAS on the most right lane near lamppost 953. While I was following the traffic ahead, the traffic started to slow down and came to a stationary position. The moment I slow down my vehicle and came to a stationary position, suddenly I felt an hard impact coming from my rear vehicle and discover that the 3rd party SKX1819S had failed to stop on time and collided onto my vehicle . I managed to take some photos and exchange particulars with the 3rd party. And there was police officers that happen to there to assist us, after a few hours of the incident I felt pain on my upper back area

DECLARATION

I/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

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER  
MUHAMMAD SUMARDI BIN MOHD AFFANDI  
Reporting Centre Personnel's Signature  
Name  
NRIC/FIN No

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1764608G



Name

TAN SOON HWA

Race

CHINESE

Date of birth

22-03-1966

Sex

M

Country/Place of birth

SINGAPORE

SMA3280D

Owner and Driver

6738703



NRIC No. S1764608G



Date of issue

02-11-2021

Address


APT BLK 6 TAMPINES STREET 73  
#13-04  
SINGAPORE 528825

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1764608G  
Name: TAN SOON HWA

Birth Date: 22 Mar 1966  
Issue Date: 03 Oct 2003

000387697J



SMA3280D

owner and Driver

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

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	02 Oct 1985

NP 428A

Licence No: S1764608G

**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110

tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg

reg no. 1978-00490-N

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION)

(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION(REPUBLIC OF SINGAPORE)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

**PRIVATE CAR****Comprehensive Premier****Certificate No. : DMPPHQ21-004705**

Comprehensive Plan - Any Workshop

Form: MX2

Excess:

Insured/Named Driver: S\$600.00

Unnamed Drivers: S\$1,100.00

YEID Additional: S\$3,000.00

**1. Index Mark and Registration Number of Vehicles**

SMA3280D

**2. Name of Policyholder**

TAN SOON HWA

**3. Effective Date of the Commencement of Insurance for the purpose of the Act**

22/06/2021

**4. Date of Expiry of Insurance**

21/06/2022

**5. Person 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 permission.

EQI Motor Accident  
Hotline**6311 3211**

\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

**6. Limitation as to use\***

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover :

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials 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 vehicles (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.

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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase :

A000342/Abwin Pte Ltd  
Date of Issue : 16/06/2021 09:05Authorised Signatory  
EQ Insurance Company Limited

Exp No. : DMPPHQ20-003695