

To: **AXA Insurance Pte Ltd**
Robinson Road P.O. Box 1094
Singapore 902144

Attn: **Motor Claims Department**

Date: 1st February 2023

Dear Sir/Madam,

Claimant: **Muhammad Firdaus Bin Selamat**

“WITHOUT PREJUDICE”

We are instructed by the above named to claim damages against you in connection with a road traffic accident on 03/07/2022 at along 842 Woodlands Street 82 involving our client’s vehicle registration number SMR 469 H and vehicle registration number SHA 90 P driven by your insured at the material time.

We are instructed that the accident was caused by your insured’s negligent driving and/or management of your vehicle. As a result of the accident, our client’s vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:

1) Vehicle Repair Costs	\$2,000.00
2) Loss of Rental (SGD\$120.00 x 4Days)	\$480.00
3) Insurance Search Fee	\$7.45

Total : **\$2,487.45**

A copy each of the following supporting documents is enclosed:

- Singapore Accident Statement
- Rental Invoice & Agreement
- LTA Insurance Search Fee Receipt

Please send us an acknowledgement of receipt within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice.

Yours faithfully,

Elin Cai

Zoom Autowerks Pte Ltd

130 Bedok Reservoir Road, Eunos Spring

#08-1339 Singapore 470130

Mobile: 9450 7920 | E-mail: zoomautowerks@gmail.com

**ZOOM AUTOWERKS PTE LTD**

130 Bedok Reservoir Road, Eunos Spring

#08-1339 Singapore 470130

email: zoomautowerks@gmail.com | Contact: 9450 7920

Co. Reg No.: 201725603G

PROFORMA INVOICE

To: **AXA Insurance Pte Ltd**
Robinson Road
P.O. Box 1094
Singapore 902144

PF No. : ZP0000743
Date : 1/2/2023
VRN : SMR 469 H
Make & Model : BMW 216i
DOA : 3/7/2022
Terms : COD

	Description	Qty	U/P	Amt
1	Repair & Respray Accident Affected Portions			2,000.00
2	Loss of Rental (SGD\$120.00 x 4Days)			480.00
3	LTA Search			7.45

TOTAL : **\$2,487.45**

All crossed cheques must be made to "**ZOOM AUTOWERKS PTE LTD**"

Bank Name: Oversea-Chinese Banking Corporation Ltd

Account Number: 623326998001

Paynow UEN: 201725603G

(by Zoom Autowerks Pte Ltd)

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	04/07/2022 15:48 (SGT)
Reported by	Both
Date of Accident	03/07/2022 22:00 (SGT)
Exact Location of Accident	842 Woodlands Street 82, Singapore 730842
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMR469H

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MUHAMMAD FIRDAUS BIN SELAMAT
NRIC No	S8209030D
Email Address	zoomautowerks@gmail.com
Mobile Phone No	(Phone) +65-87510683
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	216i
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	1499

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00137112200

DRIVER

Name of Driver	MUHAMMAD FIRDAUS BIN SELAMAT
NRIC No	S8209030D
Date Of Birth	21/03/1982
Occupation	Indoor

Date Of Driving Pass	09/10/2007
Driving experience	14 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87510683
Alt. Phone Number	-
Email Address	zoomautowerks@gmail.com
Address	BLK 842 WOODLANDS STREET 82
Address complement	#03-71
Postcode	730842
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	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?	No
Was any injured conveyed to hospital by ambulance?	-
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	PASSENGER
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

PLS REFER TO THE ATTACHED STATEMENT.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA90P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour -
Vehicle Category Taxi
Name of Driver -
Contact Number (Phone) +65-91785475
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

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 Actual 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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:

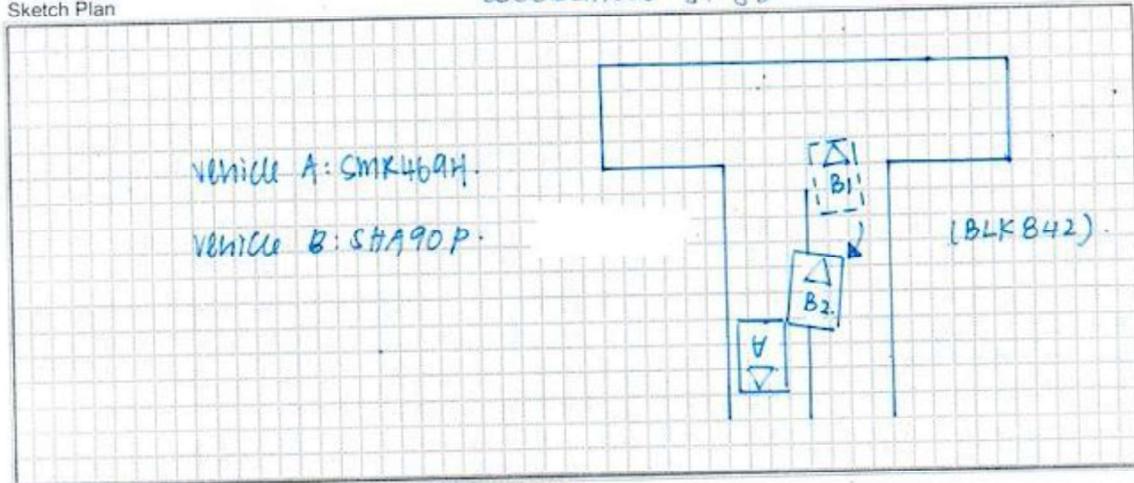
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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
 WOODLANDS ST 82

ROSLINDA BINTE AWANAB
 Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card) 04/07/22

Sketch Plan



Describe Circumstance of the Accident

On the stated date & time, I, vehicle 'A', SMR469H, was stationary along the stated venue as I was waiting for vehicle 'B', STA90P, to alight his passenger. After the passenger alighted, vehicle 'B', STA90P, reversed and collided onto my vehicle's rear left portion.

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

ROSLINDA BINTI A WAHAB
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) 04/07/22



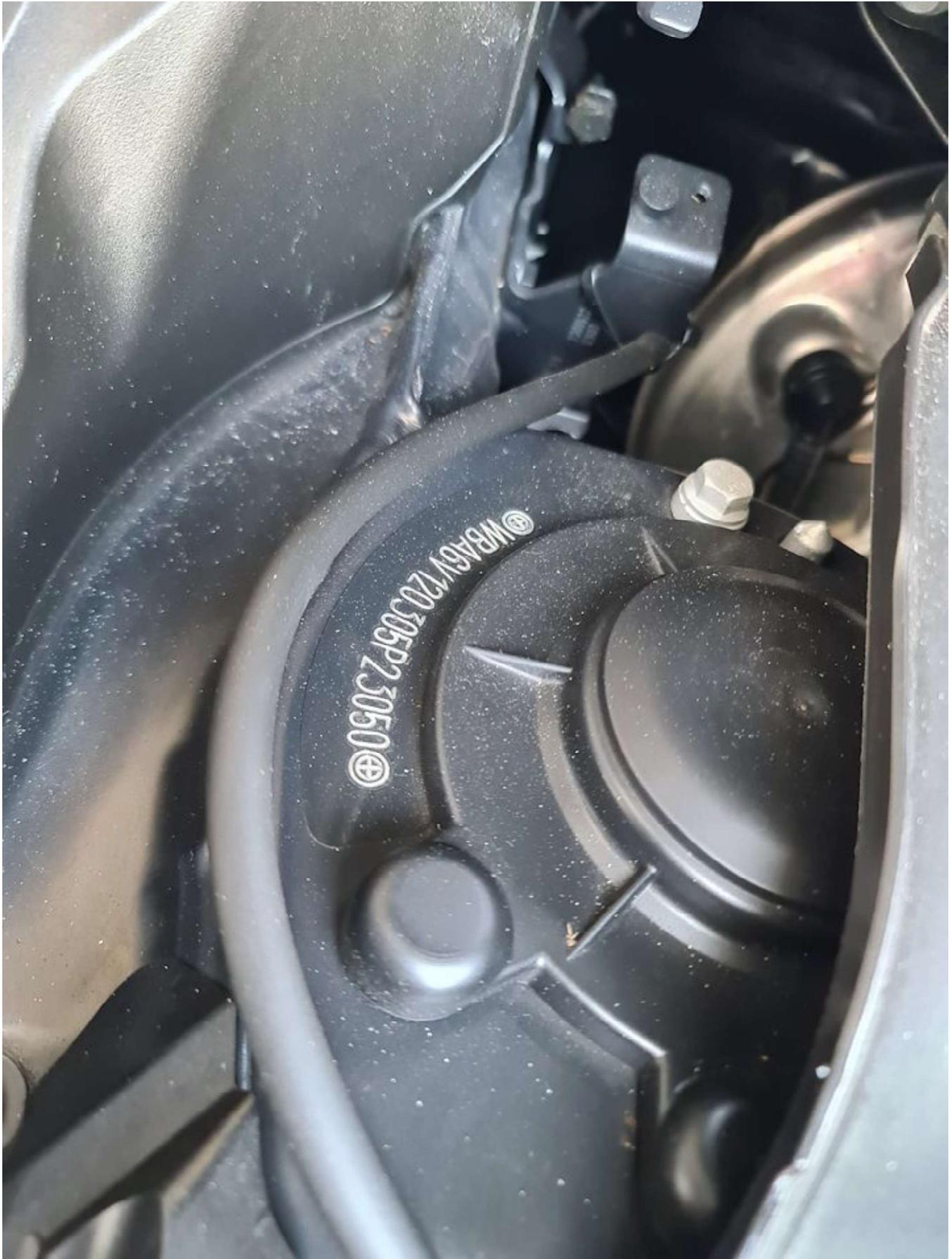














LETTER OF AUTHORIZATION

Accident on 03/07/2022 @ 22:00 along 842 Woodlands St B2,
Involving vehicles SMR469H and SHA90P.

In consideration of **Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130**, repairing my/our motor vehicle no SMR469H at my request, I/We, Muhammad Firdaus Bin Selamat ("the claimant") of _____ (address) bearing NRIC No 88209030D the owner of motor vehicle no SMR469H, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.

I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by **Zoom Autowerks Pte Ltd**.

I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.

In the event that my/our claim is unsuccessful, I/we undertake to pay to **Zoom Autowerks Pte Ltd** the cost of repairs to my/our vehicle.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into **Zoom Autowerks Pte Ltd** account. Upon clearance of the said cheque, I/we further authorize **Zoom Autowerks Pte Ltd** and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to **Zoom Autowerks Pte Ltd** shall amount to a good discharge of **Zoom Autowerks Pte Ltd** and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 03 day of 07 (month) 20 22 (year)

[Signature]
Signed by "the claimant"

Name: _____

NRIC No: _____

[Signature]
ZOOM AUTOWERKS
Signed by Zoom Autowerks Pte Ltd
Name: Elin Cai



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 04 Jul 2022 / 18:21:20

Receipt Date/Time : 04 Jul 2022 / 18:21:20

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220704-003635

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHA90P As at 03 Jul 2022/22:00:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHA90P Enquiry Fee 20220704182023335413	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				
526471XXXXXX0962		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.

ZOOM CAR LEASING

Zoom Car Leasing
Registration No.: 5339410M
e-mail : zoomcarleasing@gmail.com

Zoom Autowerks Pte Ltd
Tel: 9450 7920

RENTAL INVOICE

Invoice No. : **INV0000713**
Date : 11/7/2022
Ref : SNE 5103 L
Your Ref : SMR 469 H
Terms : 30Days

#	Rental Period	Rate	Quantity	Amount
1	Rental Charges for SNE 5103 L (04/07/2022 to 08/07/2022)	\$120.00	4 Days	\$480.00

C/O Muhammad Firdaus Bin Selamat
842 Woodlands Street 82
#03-71 Singapore 730842
Contact: 8751 0683

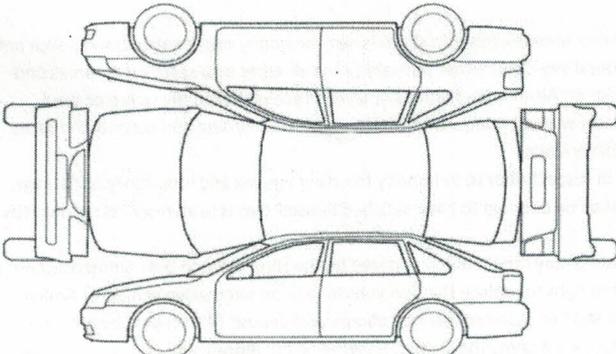
Total : \$480.00

(Customer's Signature/Stamp)


ZOOM CAR LEASING

(For Zoom Car Leasing)

RENTAL AGREEMENT

HIRER'S PARTICULAR		VEHICLE DETAIL																					
Name: Muhammad Firdaus Bin Selamat		Vehicle No.: SNE5103 L																					
NRIC/Passport No.: S8209030D		Vehicle Make/Model: Honda Freed																					
Address: 842 Woodlands St B2, #03-71 S(730842)		Date/Time Out: 04/07/22																					
Tel: 8751 0683		Date/Time In: 08/07/22																					
Driving License No./Exp.:		<table border="1"> <tr> <td>E</td><td>¼</td><td>½</td><td>¾</td><td>F</td> <td>E</td><td>¼</td><td>½</td><td>¾</td><td>F</td> </tr> <tr> <td colspan="5">OUT</td> <td colspan="5">IN</td> </tr> </table>		E	¼	½	¾	F	E	¼	½	¾	F	OUT					IN				
E	¼	½	¾	F	E	¼	½	¾	F														
OUT					IN																		
ADDITIONAL DRIVER'S PARTICULAR		Mileage: 197426 Mileage:																					
Name:		RENTAL CHARGES																					
NRIC/Passport No.:		Hours @	per hour																				
Address:		4 Days @ \$120	per day \$480																				
Tel:		Weeks @	per week																				
Driving License No./Exp.:		Months @	per month																				
(A) - Accident (D) - Dent (S) - Scratch		Other Charges																					
		Petrol Top-Up																					
		Sub-total																					
		TOTAL CHARGES \$480																					
PHYSICAL DAMAGE EXCESS		ACKNOWLEDGEMENT																					
Singapore - Own Damage	S\$2,000.00																						
Singapore - 3rd Party	S\$2,000.00																						
Malaysia*	S\$8,000.00																						
For Drivers aged < 27 or > 65 and/or less than 2 years driving experience regardless of age	S\$3,000.00 (Additional)																						
IMPORT NOTE:		<p>I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license(s) is/are current and not disqualified from driving.</p>																					
<ol style="list-style-type: none"> ONLY PERSONS ABOVE 22 YEARS OF AGE, HOLDING A VALID SINGAPORE LICENCE FOR MORE THAN 2 YEARS, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE Vehicle is strictly for use in Singapore only and may not be driven out of Singapore without the prior written consent of Zoom Car Leasing Use of vehicle for illegal purposes (e.g. in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited. In case of accident, the hirer shall report to Zoom Car Leasing immediately. 		<p>Hirer's Signature / Date</p> 																					
		<p>Owner's Signature / Date</p> 																					