FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date: 08.08.2022

China Taiping Insurance Singapore Pte Ltd 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam.

ACCIDENT INVOLVING VEHICLES: SLM 4218C / GBL 6908E ON 13.07.2022.

We are the authorized repair workshop for the owner of motor vehicle no: **SLM 4218C**, which was involved in the captioned accident with your insured vehicle no: **GBL 6908E**. 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.

		\$ 3,071.00
3)	GIA Search Fee	\$ 2.00
2)	Loss of Use (3 days X S\$60)	\$ 180.00
1)	Cost of Repair (inclusive of GST)	\$ 2,889.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

b) GIA Search Result

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@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

Tax Invoice: 23077

China Taiping Insurance Singapore Pte Ltd

3 Anson Road Date 08.08.2022 #16-00 Springleaf Tower Vehicle No SLM 4218C

Singapore 079909 Make/Model :: TOYOTA SIENTA 1.5G

Chassis/Eng#

Attn: Motor Claim Department Accident Date 113.07.2022

Claim No :

Reference : 0722 -23077

Policy No

Amount

To proceed on lump sum repair \$\\$ 2700.00

E. & O. E. Total: S\$ 2700.00

GST @ 7% : S\$ 189.00

Amount Due : S\$ 2889.00

for FASTECH AUTO PTE LTD

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GBL 6908E

Date of Accident

13/07/2022

Reset

% RESULT & RECEIPT

TP Insurer Enquiry Insurance ______ China Taiping Insurance (Sing... Period of Insurance ______ 20/01/2022 - 19/01/2023 Requested By _____ JASON TANG (KIM CHWEE AUT... Requested Date ______ 13/07/2022 11:46

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

DATE: 13.07.2022
TO : China Taiping Insurance Singapore Ple Ltd
RE : ACCIDENT INVOLVING VEHICLE NO. SIM 42180 GBL 6908 E
ALONG 18 Marina Gardens Dr
ON13.07.2022
L'We, Pro Shine
of (NRIC No./ROC No.) 52999906D
of 191 Punggol Central # 06-309 Singapore 820191
owner of vehicle no. SLM 4218C in consideration of M/s FASTECH AUTO
PTE LTD repairing my/our vehicle at my/our instruction and hereby authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever amount settled/payable by the Insurance Company and/or third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use etc. and to their appointing solicitor to get for me/vs in respect of the said assident/sleim and
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and all claimed and/or settled shall belong to them absolutely.
I/We further agree and undertake to indemnify them against the above-mentioned claim cost
which may arisen therewith.
Signature of Owner:

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 13/07/2022 16:38 (SGT) Reported by Driver Date of Accident 13/07/2022 10:20 (SGT) Exact Location of Accident 18 Marina Gardens Dr, Singapore 018953 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLM4218C INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **PRO SHINE** Company Reg No 52999906D **Email Address** BABIHENG71@GMAIL.COM Mobile Phone No (Phone) +65-90095085 Alternative Phone No

VEHICLE PARTICULARS

lanufacturer Toyota Model Sienta Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private hire Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Policy Number / Cover Note Number 5089425486-05

DRIVER

Name of Driver TAN CHENG HENG(CHEN QINGXING) NRIC No S7100176H Date Of Birth 02/01/1971 Occupation Outdoor

Date Of Driving Pass 13/05/2003 Driving experience 19 YEARS AND 2 MONTHS Gender Male Mobile Number (Phone) +65-90095085 Alt. Phone Number Email Address BABIHENG71@GMAIL.COM Address APT BLK 191 PUNGGOL CENTRAL #06-309 Address complement Postcode 820191 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **COMPANY OWNER** Does Driver Own Other Vehicles? 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) 7 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 UNKNOWN Gender Male PASSENGER 2 **Jame** UNKNOWN Gender Male PASSENGER 3 Name UNKNOWN Gender Male PASSENGER 4 Name **UNKNOWN** Gender Female PASSENGER 5 Name UNKNOWN Gender Female PASSENGER 6 Name UNKNOWN Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Address

Traffic Police

(Phone) +65-65470000

(Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

Was notice of intended Prosecution given?

No

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

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 VIDEO WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **GBL6908E** Vehicle Manufacturer ehicle Model Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle Name of Driver Contact Number Address Address complement Postcode Insurance Company Name China Taiping Insurance (Singapore) 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 TAN CHENG HENG(CHEN QINGXING) Gender Male Phone No (Phone) +65-90095085 Address APT BLK 191 PUNGGOL CENTRAL #06-309 Address Complement Post Code 820191 Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SLM4218C 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 Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy flability 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, scree 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 (all insurers) who have insured vehicle(s) involved in this accident (all insurers), the honetary 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), which may be sited outside of Singapore, for one or more of the above Purposes.



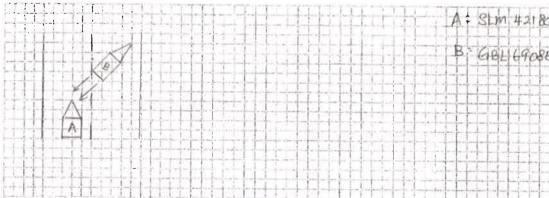
Policyholder's Signature / Date & Time

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

dickny

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Please Ref	Per Police Report	NO. T/2022071	3/7031
			177
			12000
			3130 517
OF LITTING			Talis in Majorata
claration			
e declare the foregoing particula	rs are true in every respect.		
Mr PRO	,		1.
cyholder's Signature / Date &	Debrode Clauston and Advant		dickny
ne	Driver's Signature (if driver is a & Time	not the policyholder) / Date	Witnessed by Reporting Centre Personnel





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

11/11/11			10 EE 11 EE	100
1100 100	O Jo on (XXX (110)	11001000	OR COOL IN	
	8.000 006 30	100 1 1 1 1 1 1	M 1831 SI	
	220713/			

1 of 3

Report No. T/20220713/7031

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/07/2022 15:35		fade:	Vide Report No.:	Station Diary No.	
Informa	nt's Partice	ulars			
Name of Informant: TAN CHENG HENG			Address: 191 PUNGGOL CENTRAL #06-309 SINGAPORE 820191		
ID Type / ID No.: NRIC NO / S7100176H Nationality: SINGAPORE CITIZEN		76H	Contact No.: Home/Office: Mobile: 90095085 Email: BABIHENG71@GMAIL.COM		
		EN			
Sex: Male	Age: 51	Date of Birth: 02/01/1971	Type of Informant: Driver		
Race: Chinese Occupation: Phy driver			Language: English	Institution / School Name:	
			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/07/2022 10:20	Type of Location Car Park
	RDENS DRIVE	Road Surface:	R	load Speed Limits
Weather: Clear		Dry		toad Speed Limit: 0 Km/h
		Dry Traffic Control: Not Controlled	2 T	raffic Volume:

Details of V	ehicle Invo	ived				
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBL6908E	Van				Slightly Damaged	0
SLM4218C	Car				Slightly Damaged	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20220713/7031

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	s Injured: NIL		Use of Pe	edestrian	Cross	ing: NA
Driver				13 W/W		
Name	TAN CHENG HENG			ID No.		S7100176H
Related Vehicle	SLM4218C (Car)			Contac	t No.	90095085
Hospital/Clinic	MOUNT ALVERNIA	ıL	Class of Driving Licence Expiry	.	Class: 3 Date of Expiry: NIL	
Date	13/07/2022		Date		13/07	7/2022
No. of Days gran	No. of Days granted Medical Leave			of	Slight	8

Brief Details.

I was dropping passenger off at drop off/pick up lobby A and my vehicle is stationary. Out of sudden GBL6908E reverse hardly and ram to the front of my vehicle. My vehicle jerk hardly due to impact.





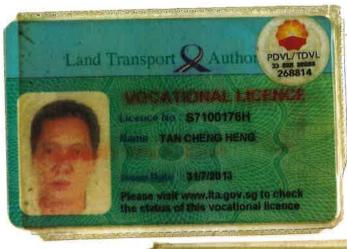
Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20220713/7031

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 13/07/2022 15:35		
Officer In Charge Of Case: TP / TPIB / MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case:		

NP168













Certificate of Insurance

ASSIC

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA) MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MACAYSIA)

Certificate Number: 50894

-81	The state of the s			
800	Index mark and Registration Number of Mark		Come	DATE OF STREET
	and Resistration at the		Cover ;	SLING CT
	Physics of the party of the par	ATT		

assis Number 2. Name of Policyholder NSP1707030221 3. Effective Date of Insurance PRO SHINE

4. Expiry Date of Insurance 30 Mar 2022 5 Persons or Classes of Persons entitled to drivel 29 Mar 2023

(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

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	\$\$1.500
WINDSCREEN EXCESS	S\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	NO SERVICE DE LA COMPANION DE
INSURE WITH COE	VES 1
NCD PROTECTION	NO LOS CONTRACTOR OF THE PARTY
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	NO NO PROPERTY AND
EXCESS WAIVER	NO CONTRACTOR OF THE PARTY OF T
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	N/A STATE OF THE S
NAMED DRIVER (2)	N/A
HIRE PURCHASE COMPANY	: HONG LEONG FINANCE LIMITED
SUM INSURED	MARKET VALUE OF INSURED VEHICLE AT TIME DE 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)

: INSURE LINK PTE. LTD. (00000614836) Agency

: 14 Feb 2022 21:59 hrs Date of Issue

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:	Business
Owner ID: Vehicle Details	906D
Vehicle No.:	SLM4218C
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Jul 2022
Vehicle Make:	TOYOTA
Vehicle Model:	SIENTA 1.5G CVT ABS D/AIRBAG 2WD 5DR
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	2NR8610781
Chassis No.:	NSP1707030221
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$20,571.00
Original Registration Date:	30 Mar 2017
First Registration Date:	30 Mar 2017
Transfer Count:	0
.ctual ARF Paid: Intended PARF Rebate Details	\$10,800.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Mar 2027
PARF Rebate Amount: Intended COE Rebate Details	\$7,560.00
COE Expiry Date:	29 Mar 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,789.00
COE Rebate Amount:	\$23,919.00
Total Rebate Amount:	\$31,479.00

The information contained herein is correct as at 13 Jul 2022

ОК