

**HD PERFECT AUTOWORK PTE LTD**

Co. & GST Reg. No.: 202136904Z

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

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

Email: hdperfectautowork@gmail.comOur Ref.: SLF8293UYour Ref.: GBH622PDate: 30.09.2022

ATTN: Motor Claims Department

INS: INDIA INT'L INS PTE LTD

Dear Sir/Madam,

Accident Involving: SLF8293U & GBH622P
Date of Accident: 14.07.2022 @ 08:30HRS
Location: International Road Towards Benoi Road

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 5,000.00</u>
Loss of Use:	
(5 Days x \$180/Day):	<u>\$ 900.00</u>
LTA Search:	<u>\$ 7.45</u>
3rd Party Report:	<u>\$ 31.00</u>
Grand Total:	<u>\$ 5,938.45</u>

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 Shanelle Lim @ 8297 9787, or email to hdperfectautowork@gmail.com

Thank You,

Shanelle Lim





HD PERFECT
AUTOWORK PTE LTD

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#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: hdperfectautowork@gmail.com

Authorisation To Act

I, SKK Works Pte Ltd ("the third party claimant") of
27 First Lok Yang Road S(629735)
(address), owner of SLF8293U (vehicle no.)
hereby authorise HD 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. SLF8293U that was
damaged pursuant to the accident which occurred on 14/07/22 (date)
at/along International Road turns Benoi Road
(location) involving vehicle no/s G2H622P ("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.

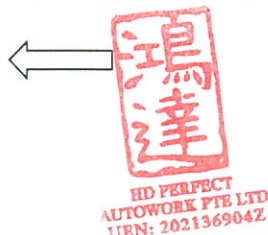
I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

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 14 day of 07 (month) 20 22 (year)



Signed by "the third party claimant"



Signed by "the workshop"



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Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SLF8293U and GBH622P on 14/07/22
at/along International Road towards Benoi Road

1. I/We, the Owner of motor vehicle no. SLF8293U hereby instruct and authorise HD 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 14 day of 02 20 22

Signature of vehicle owner _____

Name : SKK Works Pte Ltd

IC/UEN No : 201328018C

(Company stamp, if applicable)

Address : 27 First Lok Yang Road
S(629735)

Tel : _____



Witnessed by : Charlene Lim

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com



HD PERFECT
AUTOWORK PTE LTD

Date	Invoice Number	Vehicle Number
30.09.2022	HDP202209-00157	SLF8293U

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	\$ 5,000.00
Total	\$ 5,000.00

Cross cheques and pay: HD PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

HD 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 : 14 Jul 2022 / 10:31:19

Receipt Date/Time : 14 Jul 2022 / 10:31:19

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220714-000882

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 - GBH622P

As at 14 Jul 2022/08:30:00

Insurance Co: INDIA INT'L INS PTE LTD

1 Insurance Enquiry - GBH622P
Enquiry Fee
20220714103044393288

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

GST Reg No: M400017735

UEN: S66SS0020G

TAX INVOICE

HD Perfect Autowork Pte Ltd - SKK
Works Pte Ltd

Invoice Number
GR-2022-002742

Invoice Issue Date
22 Jul 2022

Invoice Due Date
29 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	21/07/2022,14/07/2022,SLF8293U,GBH622P	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 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	14/07/2022 15:26 (SGT)
Reported by	Driver
Date of Accident	14/07/2022 08:30 (SGT)
Exact Location of Accident	International Rd, Singapore
Additional Location Information	TWDS BENOI ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF8293U
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SKK WORKS PTE LTD
Company Reg No	201328018C
Email Address	seongskk@gmail.com
Mobile Phone No	(Phone) +65-63343831
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Axio
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1500

INSURANCE COMPANY

Name of Insurance Company	Etika Insurance Pte Ltd
Policy Number / Cover Note Number	MA014214

DRIVER

Name of Driver	SUNDARAM SAKTHIVEL KUMAR
Passport No/FIN	G614982T
Date Of Birth	12/09/1969
Occupation	Indoor

Date Of Driving Pass	17/01/2018
Driving experience	4 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84445343
Alt. Phone Number	-
Email Address	sakthikumarskk@gmail.com
Address	27 FIRST LOK YANG ROAD
Address complement	-
Postcode	629735
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	No
Was any injured conveyed to hospital by ambulance?	-
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

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

CIRCUMSTANCES OF ACCIDENT

ON THE STATED DATE AND TIME, VEHICLE A (SLF8293U) WAS STATIONARY ON LANE 1 OF INTERNATIONAL ROAD TOWARDS BENOI ROAD DUE TO TRAFFIC WAS RED. SUDDENLY, VEHICLE B (GBH622P) REVERSE AND COLLIDE ONTO MY STATIONARY VEHICLE FRONT PORTION.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

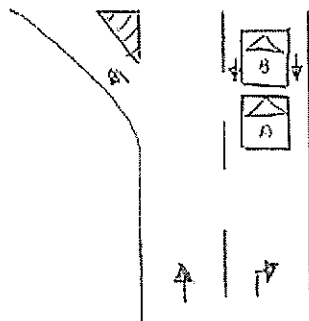
Vehicle Registration Number	GBH622P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PROOF

WHA: SLF 82934

vel: GBH 622P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

50 The

paper

7 (continued)

ON THE STATED DATE AND TIME. I, VEHICLE A (SLF8293U) WAS STATIONARY ON LANE 1 OF INTERNATIONAL ROAD TOWARDS BENOI ROAD DUE TO THE TRAFFIC WAS RED. SUDDENLY, VEHICLE B (GBH622P) REVERSE AND COLLIDED ONTO MY STATIONARY VEHICLE FRONT PORTION.

VEHICLE A : SLF8293U

VEHICLE B : GBH622P

A handwritten signature in black ink, appearing to be 'B. K. M.' or similar, with a stylized flourish at the end.



S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer:
SKK WORKS PTE. LTD.



Name
SUNDARAM SAKTHIVEL KUMAR
S Pass No.
0 36225890 Sector:
CONSTRUCTION



K0668935

SLF8293U

Dim

VISIT PASS
Immigration Regulations

07-08-2018

Name
SUNDARAM SAKTHIVEL KUMAR



FIN
G5614982T
Date of Birth
12-09-1969 Sex
M
Nationality
INDIAN

Download SGWorkPass
App to check status



MULTIPLE JOURNEY VISA ISSUED

**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**



REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **G 5614982T**
Name: **SAKTHIVEL KUMAR SUNDARAM**

Birth Date: 12 Sep 1969
Issue Date: 17 Jan 2018
Valid Till 18/02/2023

002764622K



SLF8293U
Driver

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

EFFECTIVE DATE

Class 3C Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver 17 Jan 2018

NP 428A



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) • MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE No. MA014214

- | | | | | |
|--|-------------------|-------------------------|-----------------|-------|
| 1. Index Mark and Registration Number of Vehicle | SLF8293U | | | |
| 2. Name of Policyholder | SKK Works Pte Ltd | | | |
| 3. Effective Date of Commencement of Insurance for the purposes of the Act | 03/06/2022 | Excess: Named Drivers | S\$ | 600 |
| | | Excess: Unnamed Drivers | S\$ | 1,100 |
| 4. Date of Expiry of Insurance | 02/06/2023 | | | |
| 5. Persons or Classes of Persons entitled to drive | | Engine No | : 2NR8493105 | |
| | | Chassis No | : NRE1610008929 | |

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR PERMISSION.

SAKTHIVEL KUMAR SUNDARAM

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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER:
(i) USE FOR HIRE OR REWARD.
(ii) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(iii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(iv) 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 bindings.

Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

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).

For and on behalf of Etiqa Insurance Pte. Ltd.

Approved Insurer

TIQSRGI 12/05/2022 12:37:50



Authorised Signature