

## EzLyna (LKKAuto)

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**From:** Tan Lee Gek (Strides Automotive Services Pte Ltd) <LeeGek.Tan@strides.com.sg>  
**Sent:** Monday, 21 November 2022 11:24 AM  
**To:** CS A Team; Admin A  
**Subject:** LOD Re: Accident on 23/7/2022 involving SHB 5322H & GBK 7569Z (China Taiping's insured) Our Ref: TAX/07/22/2079/lg  
**Attachments:** 07 22 2079 - supporting documents.pdf; SHB5322H - scene1.jpg; SHB5322H - scene2.jpg; SHB5322H - scene3.jpg

Dear All,

We quantify our own losses as follows:-

Cost of Repair	\$2,681.95
Loss of Rental	\$1,306.47 ( 16.5 days x \$79.18 )
<b>Total</b>	<b>\$3,988.42</b>

We enclose the following documents:-

- 1) Repair invoice
- 2) Proof of rental rate
- 3) Police/GIA reports
- 4) Police investigation result
- 5) Accident vehicle laid-up report
- 6) Scene photographs (video footage is not available)

**Our hirer is claiming his injury and loss of income through his own lawyer.**

Please acknowledge receipt within 14 days from the date hereof and let us have your offer soon. Thanks.

Regards

Tan Lee Gek (DID: 6556 3548)

Claims Department

STRIDES Automotive Services Pte Ltd



Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4  
SINGAPORE 757705Strides 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. : IV221100145  
Date : 15.11.2022  
Vehicle No. : SHB5322H  
Your Ref No. : TAX/07/22/2079  
Our Ref No. : 24115707  
Terms : 30 Days

Description	Qty	Unit Cost	Add %	/ (Discount) Amount	Amount
<b>Parts</b>					
SENSOR REVERSE	0.00	\$ 180.00	0.00	\$ 0.00	\$ 0.00
TYRE	0.00	\$ 126.74	0.00	\$ 0.00	\$ 0.00
PAD, RR BUMPER, RH & LH , 3	0.00	\$ 11.00	0.00	\$ 0.00	\$ 0.00
PAD, RR BUMPER, CTR	0.00	\$ 11.00	0.00	\$ 0.00	\$ 0.00
WHEEL, DISC	0.00	\$1555.10	0.00	\$ 0.00	\$ 0.00
REAR BUMPER REFLECTOR ASSY, REFLEX, RH	0.00	\$ 39.00	0.00	\$ 0.00	\$ 0.00
STOPPER, RR BUMPER, RH & LH	0.00	\$ 4.50	0.00	\$ 0.00	\$ 0.00
GARNISH, REAR SEAT SIDE, RH	0.00	\$ 241.90	0.00	\$ 0.00	\$ 0.00
DUCT ASSY, QUARTER VENT , RH & LH	0.00	\$ 67.00	0.00	\$ 0.00	\$ 0.00
WEATHERSTRIP, REAR DOOR OPENING TRIM, RH	0.00	\$ 293.00	0.00	\$ 0.00	\$ 0.00
LINER, REAR FENDER , RH	0.00	\$ 139.80	0.00	\$ 0.00	\$ 0.00
HUB & BEARING ASSY, RH & LH	0.00	\$ 668.90	0.00	\$ 0.00	\$ 0.00
LENS & BODY, REAR COMBINATION LAMP, NO.2 RH	0.00	\$ 261.00	0.00	\$ 0.00	\$ 0.00
LAMP ASSY, REAR, RH	0.00	\$ 293.60	0.00	\$ 0.00	\$ 0.00
LENS & BODY, REAR COMBINATION LAMP , RH	0.00	\$ 339.60	0.00	\$ 0.00	\$ 0.00
GUARD, RR BUMPER, LOWER	0.00	\$ 374.50	0.00	\$ 0.00	\$ 0.00
SEAL, RR BUMPER , RH	0.00	\$ 118.30	0.00	\$ 0.00	\$ 0.00
COVER, REAR FLOOR UNDER , RH	0.00	\$ 175.10	0.00	\$ 0.00	\$ 0.00
PAD, RR BUMPER, RH & LH , 1	0.00	\$ 4.00	0.00	\$ 0.00	\$ 0.00
SEAL, RR BUMPER ARM, RH & LH	0.00	\$ 11.30	0.00	\$ 0.00	\$ 0.00
PAD, RR BUMPER, RH & LH , 2	0.00	\$ 4.00	0.00	\$ 0.00	\$ 0.00
CLIPS PIECE, FRT & RR BUMPER	10.00	\$ 4.50	(25.00 )	\$ 11.25	\$ 33.75

**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*

Koo Yew Chung (Nov 16, 2022 11:45 GMT+8)

Authorised Signature  
for Strides Automotive Services Pte. Ltd.

**Tax Invoice**

Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4  
SINGAPORE 757705

GST Reg No. : MR-8500001-7  
CRN : 199004280Z  
Invoice No. : IV221100145  
Date : 15.11.2022  
Vehicle No. : SHB5322H  
Your Ref No. : TAX/07/22/2079  
Our Ref No. : 24115707  
Terms : 30 Days

Description	Qty	Unit Cost	Add %	(Discount) Amount	Amount
COVER, RR BUMPER ASSY	1.00	\$ 485.60	(25.00 )	\$ 121.40	\$ 364.20
RETAINER, RR BUMPER, RH	1.00	\$ 132.60	(25.00 )	\$ 33.15	\$ 99.45
PANEL SUB-ASSY, FENDER REAR RH	1.00	\$ 871.50	(25.00 )	\$ 217.87	\$ 653.63
PATCH, SIDE PANEL REAR END , RH & LH	1.00	\$ 33.70	(25.00 )	\$ 8.42	\$ 25.28
LENS & BODY, REAR COMBINATION LAMP , RH	1.00	\$ 339.60	(10.00 )	\$ 33.96	\$ 305.64

Sub-Total \$ 1481.95

**Labour**

TO REPAIR REAR PORTION RH	1.00	\$ 700.00	0.00	\$ 0.00	\$ 700.00
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**Others**

TO RESPRAY REAR BUMPER	1.00	\$ 200.00	0.00	\$ 0.00	\$ 200.00
TO RESPRAY REAR FENDER RH	1.00	\$ 200.00	0.00	\$ 0.00	\$ 200.00
TO CHECK WIRING AND SYSTEM FUNCTION	1.00	\$ 30.00	0.00	\$ 0.00	\$ 30.00
TO APPLY RUST-PROOFING ON AFFECTED AREA	1.00	\$ 30.00	0.00	\$ 0.00	\$ 30.00
TO REPLACE SUNDRY PARTS	1.00	\$ 20.00	0.00	\$ 0.00	\$ 20.00
TO TEST AND REFIX REVERSE SENSOR SYSTEM	1.00	\$ 20.00	0.00	\$ 0.00	\$ 20.00
TO RESPRAY RIM	0.00	\$ 180.00	0.00	\$ 0.00	\$ 0.00
TO RESPRAY FLOOR CORNER PANEL RH	0.00	\$ 180.00	0.00	\$ 0.00	\$ 0.00
TO DO WHEEL ALIGNMENT / TYRE BALANCING	0.00	\$ 120.00	0.00	\$ 0.00	\$ 0.00
TO WASH AND VACUUM	0.00	\$ 60.00	0.00	\$ 0.00	\$ 0.00

**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*

Koo Yew Chung (Nov 16, 2022 11:45 GMT+8)

Authorised Signature  
for Strides Automotive Services Pte. Ltd.

# STRIDES

AUTOMOTIVE

Customer Code: 3000063

STRIDES TAXI PTE. LTD.

Block Unit

60 WOODLANDS INDUSTRIAL PARK E4  
SINGAPORE 757705

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. : IV221100145  
Date : 15.11.2022  
Vehicle No. : SHB5322H  
Your Ref No. : TAX/07/22/2079  
Our Ref No. : 24115707  
Terms : 30 Days

Description	Qty	Unit Cost	Add %	/ (Discount) Amount	Amount
GRAND TOTAL					\$ 2,681.95

Remark :

Make/Model : PRIUS4FL  
Accident Date : 22.07.2022

### 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*

Koo Yew Chung (Nov 16, 2022 11:45 GMT+8)

Authorised Signature  
for Strides Automotive Services Pte. Ltd.

## Laid Up Report

Accident Start Date : 19/07/2022

Date Generated : 15/08/2022

Accident End Date : 15/08/2022

User Name : LeeGek

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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/07/22/2079	SHB5322H	Strides Taxi Pte Ltd	TOYOTA	PRIUS4FL	24115707	25/07/2022 3:32 PM	11/08/2022 2:40 PM

**STRIDES**

TAXI

**MEMORANDUM**

To: Claims Dept

Our Ref: TAX/07/22/2079

From: Strides Taxi Pte Ltd

Date: 11<sup>th</sup> August 2022

**ACCIDENT ON 23/7/2022 INVOLVING SHB 5322H & GBK 7569Z AT BLK 507B WELLINGTON CIRCLE RUBBISH CHUTE**

This is to confirm that the daily rental rate for SHB 5322H is \$79.18 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



for Manager



## 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	25/07/2022 18:39 (SGT)
Reported by	Driver
Date of Accident	23/07/2022 00:30 (SGT)
Exact Location of Accident	507B Wellington Cir, Block 507B, Singapore 752507
Additional Location Information	BLK 507B WELLING CIRCLE RUBBISH CHUTE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB5322H
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#### 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	

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	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	1798

#### INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099115MFSH

#### DRIVER

Name of Driver	NG KIM HENG
NRIC No	SXXXX380C
Date Of Birth	18/04/1975
Occupation	Outdoor



Date Of Driving Pass	15/07/1999
Driving experience	23 YEARS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	Auto-Svcs-TARC@smrt.com.sg
Address	1
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	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 STATIONARY INF FRONT OF RUBBISH CHUTE AT BLK 507B WELLINGTON CIRCLE WANTED TO ALIGHT PASSENGER. WHILE I WAS RETURNING CHANGES TO THE PASSENGER SEATED AT THE FRONT PASSENGER SEAT, SUDDENLY THE LORRY GBK7569Z REVERSED AND HIT ONTO THE RIGHT REAR PORTION OF MY TAXI.

#### 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	GBK7569Z
Vehicle Manufacturer	-



## 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.

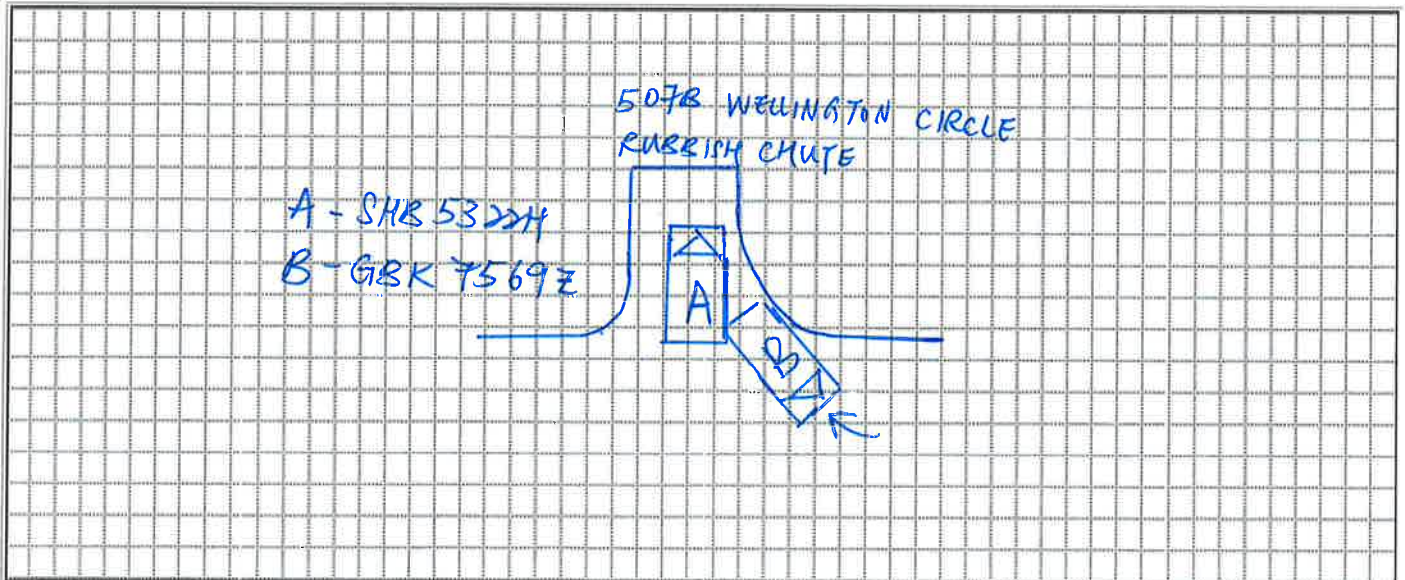


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

#### Sketch Plan





# SINGAPORE POLICE FORCE



T/20220725/7054

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20220725/7054

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/07/2022 17:15		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: NG KIM HENG			Address:		
ID Type / ID No.: NRIC NO /			Contact No.: Home/Office: Mobile:		
Nationality: SINGAPORE CITIZEN			Email: 1828KIMHENG@GMAIL.COM		
Sex: Male	Age: 47	Date of Birth:	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: TAXI DRIVER		Driving Licence Information: Class: 3		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/07/2022 00:30	Type of Location: Car Park
Location:  BLK 507B WELLINGTON CIRCLE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: STATIONARY VEHICLE AGAINST REVERSING VEHICLE				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBK7569Z	Lorry				Slightly Damaged	0
SHB5322H	Car	TOYOTA	PRIUS	Maroon	Slightly Damaged	1



**SINGAPORE  
POLICE FORCE**



T/20220725/7054

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20220725/7054

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	WANG BAOQIAN	ID No.	G2397683N
Related Vehicle	GBK7569Z (Lorry)	Contact No.	84319886
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
<b>Driver</b>			
Name	NG KIM HENG	ID No.	
Related Vehicle	SHB5322H (Car)	Contact No.	
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	25/07/2022	Date	25/07/2022
No. of Days granted Medical Leave	03	Degree of	Slight

**Brief Details.**

On 23/7/2022 at about 0030 Hrs, i was stationery my taxi SHB5322H along Blk 507B Wellington Circle rubbish collection with 1 passenger onboard. While i was collecting my fare from the passenger, suddenly i felt a impact from my right side portion. I alighted my taxi and discover that a Lorry GBK7569Z abruptly reversing without checking his blind spot and recklessly action. As the result, his right rear portion collided onto my taxi right rear side portion and cause damage and dented to my taxi right rear side section. My neck and back pain due to the sudden impact of the accident and today the pain more worse so i consult doctor and was given 3 days MC.



**SINGAPORE  
POLICE FORCE**



T/20220725/7054

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20220725/7054

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
TAY CHUN KEEN  
Contact No.: 65476436

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:  
25/07/2022 17:15

Classification Of Case:



**SINGAPORE  
POLICE FORCE**  
SAFEGUARDING EVERY DAY

Our Ref: TP/IP/21013/2022

NG KIM HENG

000065

Traffic Police  
10 Ubi Avenue 3  
Singapore 408865

IB Call Centre: 65470000  
[eservices.police.gov.sg](https://eservices.police.gov.sg)

Date: 28/09/2022

Dear Sir

**TRAFFIC ACCIDENT INVOLVING GBK7569Z AND SHB5322H ALONG WELLINGTON CIRCLE  
ON 23.07.2022 AT ABOUT 12.30AM**

I refer to the above accident.

2 We have completed our investigation into the case. Action has been initiated against the driver of **GBK7569Z** for the offence of **Careless Driving Causing Hurt under Section 65(1)(b) of the Road Traffic Act 1961 p/u Section 65(4)(a) of the same Act.**

3 If you have any clarification, you may contact the Investigation Officer, Fahkrul Razi Bin Suhaime at office number: 65476404.

Yours faithfully,  
Sr Staff Sgt Fahkrul Razi Bin Suhaime  
Investigation Officer (GIT 3)  
Traffic Police  
Singapore Police Force

This is a computer-generated letter. No signature is required.