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

Date: 01.09.2022

AXA Insurance Pte Ltd

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: SLA 1120H / SHC 5186D ON 05.08.2022

We are the authorized repair workshop for the owner of motor vehicle no: SLA 1120H , which was involved in the captioned accident with your insured vehicle no: SHC 5186D . 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.

		\$ 20,600.00
3)	Towing Charge	\$ 70.00
2)	Loss of Use (11 days + 2 Sunday X S\$180)	\$ 2,340.00
1)	Cost of Repair (inclusive of GST)	\$ 18,190.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

b) Letter of Authorisation, etc...

c) Towing Charge

d) GIA Report

e) Police Result

f) I/C & Driving License

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: 23108

AXA Insurance Pte Ltd

Date **01.09.2022** Vehicle No : SLA 1120H Make/Model 3 AUDI A6 1.8

Chassis/Eng#

Attn: Motor Claim Department

Accident Date = 05.08.2022

Claim No

Reference

0822 -23108

Policy No 13

Amount

To proceed on lump sum repair

S\$

17000.00

E. & O. E.

Total : S\$

17000.00

GST @ 7% : S\$

1190.00

Amount Due: S\$

18190.00

for FASTECH AUTO PTE LTD

AUTHORISATION TO ACT

I/We, Khoo Kay Joo (the third par	ty claimant") of Blk 191 Meyer
Road #19-02 Singapore 437980 (address), owner	r of SLA 1120H (vehicle no.) hereby
	"the workshop") to act for me with respect
to my claim for repair costs and/or rental and/or loss	
SLA 1126H that was damaged pursuant to the ac	ceident which occurred on _05.08.2017(date)
along Bras Basah Road Towards Nic	coll Highway (location) involving
vehicle no/s SHC 5186D ("the accident").	
I further authorize the workshop to settle my above	
deem fit and the workshop is further authorized to re	ceive payment further to settlement of my
claim with payment cheque/s being made in favour o	f the workshop.
I further acknowledge that any settlement the wor	
without prejudice and without admission of liability	basis insofar as the driver/owner/insurers
of the other vehicle/s is concerned.	
Au +	2022 (5022)
Dated this 06 (day) of August (month) 20 <u>72</u> (year)
	CHAUTO ON
	(SST Reg. No.) TO 200006262D
Signed by "the third party claimant"	Signed by "the workshop"
(with company stamp if applicable)	(with company stamp)



PEOPLE'S VEHICLE SERVICE PTE LTD

BLK 3023A, UBI ROAD 1 #01-60, SINGAPORE 408717
TEL: 6743 1987 (3 LINES) FAX: 6743 0013
Email: peoplevehicle@gmail.com
Reg No: 200415052W



Date: 05/8/22	0201
Jane 1	Accident/Breakdown
* # Coll	Multi/Basement
Messrs:	Jump Start
Messrs: 車號 SLA 1/20 H Model No: Audi A6	Changing of Battery
Vehicle No:	Tyre Replacement/ Patching
+ Rose Rosah Rd	Crane Up/Winch Out
From:	With Load/Cargo Box
ALHO Bay	Flat Bed
10:	King Dolly to lift up
其他 Remark	Low Body Kit
時間 AMOUNT: AMOUNT: AMOUNT:	Repo
Time:	Door Opening Service
	Collect Document/Key
注意:本公司對所拖之車輛,在進行中如有任何損失或破壞,一概由車主自行負責。 NOTE: Vehicle is towed at company accepts no responsibility for damages or other misdemeanour to your	Jurong Island/Cargo Complex
vehicle whilst being towed.	Woodlands/Tuas Checkpoint
(M) (M)	Cancellation Charge (Reach Location)
經手人 Authorised by:	Cancellation Charge (After 15 minutes)

SS2X2286000A / SME MOTOR PTE LTD ENTRY DATE & TIME: 06/08/2022 14:19 (SGT) SUBMITTED BY: Wen Ying VERSION: 1 (06/08/2022 14:19 (SGT))

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 Actual 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
- 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 06/08/2022 14:19 (SGT) Reported by Both Date of Accident 05/08/2022 18:45 (SGT) Exact Location of Accident Bras Basah Rd, Singapore Additional Location Information BRAS BASAH ROAD TOWARDS NICOLL HIGHWAY. Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Private car

Auto

1800

No - Claiming third party

Vehicle Registration Number SLA1120H INSURED/POLICYHOLDER

Is company?

Nο Name Of Registered Owner KHOO KAY JOO NRIC No S1317020G Email Address

ROLANDKHOO58@GMAIL.COM

Mobile Phone No (Phone) +65-96654138

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi Model A6 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? Vehicle Category

CC

Transmission

INSURANCE COMPANY

Name of Insurance Company QBE Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number 8-V0012329-MVA-R006

DRIVER

Name of Driver KHOO KAY JOO NRIC No S1317020G Date Of Birth 11/03/1958 Occupation Indoor

Date Of Driving Pass 26/01/1979 Driving experience 43 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-96654138 Alt. Phone Number Email Address ROLANDKHOO58@GMAIL.COM Address **BLK 191 MEYER ROAD #19-02** Address complement Postcode
Is the driver the policyholder? 437980 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 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? Nο 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 CHIA KWEE ENG Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name **Traffic Police** Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO POLCE REFER NO.T/20220806/7011. 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 AT TRAFFIC POLICE.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5186D
Vehicle Manufacturer	
Vehicle Model	3 6
Vehicle Variant	
Vehicle Colour	797
Vehicle Category	Taxi
Name of Driver	323
Contact Number	2 4 5
Address	3#3
Address complement	
Postcode	13 -1 1
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	•
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	KHOO KAY JOO - (Phone) +65-96654138 - - - - - SLA1120H
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	CHIA KWEE ENG (Phone) +65-97763348 SLA1120H

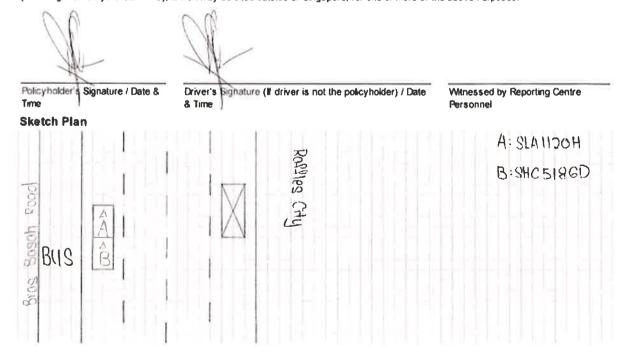
SKETCH PLAN

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
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>
- 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 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, 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' 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Describe Circumstances o Defer to the police	report (T)00200800 (1011)
_	
	The state of the s
claration	
e declare the foregoing particul	lars are true in every respect
cyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel





T/20220806/7011

1 of 3

Report No. T/20220806/7011

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

06/08/2022 11:36			Vide Report No.: A/20220805/0112	Station Diary No.:		
Informant'	s Particul	ars	Wante River Birth		Commission Series	
Name of Informant:			Address:			
KHOO KAY	/ J00		191 MEYER ROAD #19-02 SII	NGAPORE 4	137980	
ID Type / II			Contact No.:			
NRIC NO / S1317020G			Home/Office: Mobile: 96654138			
Nationality:			Email:			
SINGAPOF	RE CITIZE	N	ROLANDKHOO58@GMAIL.COM			
Sex:	Age:	Date of Birth:	Type of Informant:			
Male	64	11/03/1958	Driver			
Race:			Language:	Institution /	School Name:	
Chinese			English			
Occupation:			Driving Licence Information:			
			Class: 3 Date of Expiry:			

General Informati	on of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 05/08/2022 18:4	! 5	Type of Location: Straight Road
Location:					^
BRAS BASAH RO	DAD				
Weather: Clear		Road Surface: Dry		Road 60 K	d Speed Limit:
Traffic Flow: Traffic Control: Traffic Volume: Not Controlled Heavy					ic Volume:
Type of Collision: Between Moving \	Vehicles - Head To Re	ear			one conveyed by ulance:

Details of Vehicle Involved							
Vehicle No.	Туре	Make	Model	Color	Conditio	No of	
SHC5186D	TRANS CAB					0	
SLA1120H	Car	AUDI	A6 1.8 TFSI ULTRA (PI) (NAV)	Black	Seriously Damaged		

Details of Vehicle Insurance								
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date				





2 of 3

Report No. T/20220806/7011

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

CONTINUATION OF REPORT

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
SLA1120H	QBE Insurance (Singapore) Pte Ltd	V0012329	15/01/2022	14/01/2023			

Details of Person Involved								
Any Pedestrian In	Any Pedestrian Involved: No							
No. of Pedestrian	is Injured: NIL	Use of Ped	destrian	Cross	sing: NA			
Passenger								
Name	CHIA KWEE ENG			ID No.		S1420664G		
Related Vehicle	SLA1120H (Car)			Contact No.		97763348		
Hospital/Clinic	RAFFLES HOSPITAL			Class of Driving Licence & Expiry		Class: ,3 Date of Expiry: NIL		
Date	05/08/2022		Date	05/08		3/2022		
No. of Days gran	ted Medical Leave	05	Degree of	Serio		us		
Driver		in residings						
Name	KHOO KAY JOO			ID No.	•	S1317020G		
Related Vehicle	SLA1120H (Car)			Contact No.		96654138		
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL		
Date	NIL		Date	NIL				
No. of Days gran	No. of Days granted Medical Leave NIL				Degree of Serious			

Brief Details.

ON 05.08.2022 AT ABOUT 18:45PM. I WAS TRAVELLING ALONG BRAS BASAH ROAD TOWARDS NICOLL HIGHWAY. I WAS STATIONERY DUE TO THE FRONT TRAFFIC. SUDDENLY, VEHICLE SHC 5186D HIT THE REAR PORTION OF MY VEHICLE SLA 1120H.

MY WIFE (CHIA KWEE ENG) WAS CONVEYED TO THE HOSPITAL (RAFFLES HOSPITAL) BY AMBULANCE AND GIVEN 5 DAYS MC.

I FELT DISCOMFORT TO MY BODY DUE TO THE ACCIDENT AND WILL BE SEEING A DOCTOR SOON.



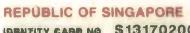


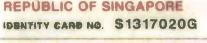
Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20220806/7011

CONTINUATION OF REPORT

Sketch Plan					
Informant is	not	able	to	provide	sketch

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 06/08/2022 11:36
Classification Of Case:





KHOO KAY JOO

CHINESE Date of birth 11-03-1958

SINGAPORE

Country/Place of birth

\$1317020G

REPUBLIC OF SINGAPORE DRIVING LICENCE Laurice Number S 1 3 1 7 0 2 0 G KHOO KAY JOO Birm Date: 11 Mar 1958 Issue Date: 23 Mar 2015

For Insurance Reporting Claim Purposes Only



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

Motor Cars=< 3000kg with =<7 passengers, exclusive 26 Jan 1979 of the driver; and other motor vehicles =< 2500kg Class 3

For Insurance Reporting And Claim Purposes Only

23-03-2015

BLK 191 MEYER ROAD #19-02 SINGAPORE 437980 NRIC No: XXXXX020G

Date of change: 11/06/2022

NP 428A



QBE Insurance (Singapore) Pte Ltd

Part of QBE Insurance Group - Unique Entity No. 198401363C

1 Wallich Street, #35-01 Guoco Tower, Singapore 078881

Tel: 65-6224 6633 Fax: 65-6533 3270 GST Registration No.: M200644018

www.qbe.com/sg



Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No. Account Name GIDEON INSURANCE AGENCIES MCI Type MX1

8-V0012329-MVA-R006 PRIVATE LIMITED

1 Index Mark and Registration Number of Vehicle or Chassis No: SLA1120H

2 Name of Policyholder KHOO KAY JOO

3 Effective date of Commencement of Insurance for the purpose of 15/01/2022

the Regulations

4 Date of Expiry 14/01/2023

5 Person or Classes of Person entitled to drive*

(a) The Policyholder.

Date of Issue: 29/12/2021

The Policyholder may also drive a motor car not belonging to him/her and not hired to him/her under a hire purchase agreement.

(b) Any 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 the driving the Motor Vehicle

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage

6 Limitations as to use*

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

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk 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 Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act. 1987 (Malaysia)

Hire Purchase: UNITED OVERSEAS BANK LIMITED QBE Insurance (Singapore) Pte Ltd

Authorized Signature

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	020G
Vehicle No.:	SLA1120H
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Aug 2022
Vehicle Make:	AUDI
Vehicle Model:	A6 1.8 TFSI ULTRA (PI) (NAV)
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	CYG008748
Chassis No.:	WAUZZZ4G2GN061952
Maximum Power Output:	140.0 kW (187 bhp)
Open Market Value:	\$39,446.00
Original Registration Date:	15 Jan 2016
First Registration Date:	15 Jan 2016
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$42,225.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Jan 2026
PARF Rebate Amount: Intended COE Rebate Details	\$27,446.00
COE Expiry Date:	14 Jan 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$54,920.00
COE Rebate Amount:	\$18,882.00
Total Rebate Amount:	\$46,328.00

The information contained herein is correct as at 06 Aug 2022