

**HD PERFECT AUTOWORK PTE LTD**

Co. &amp; 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.com](mailto:hdperfectautowork@gmail.com)Our Ref.: SMH1604EYour Ref.: SMP4220SDate: 17.11.2022

ATTN: Motor Claims Department

INS : AXA INSURANCE PTE LTD

Dear Sir/Madam,

Accident Involving: SMH1604E & SMP4220SDate of Accident: 11.08.2022 @ 09:40 HOURSLocation: PIE TOWARDS CHANGI (AFTER EUNOS LINK EXIT 9)

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 9,400.00</u>
Loss of Rental:	
(9Days x \$192.60):	<u>\$ 1,733.40</u>
LTA Search:	<u>\$ 7.45</u>
Towing Fee:	<u>\$ 70.00</u>
Grand Total:	<u>\$ 11,210.85</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 Irene @ 8297 9787, or email to [hdperfectautowork@gmail.com](mailto:hdperfectautowork@gmail.com)

Thank You,

Irene





HD PERFECT  
AUTOWORK PTE LTD

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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

## Authorisation To Act

I, Pang Tong Cheow ("the third party claimant") of  
41 Soo Chow Rise S575482  
(address), owner of SMH1604E (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. SMH1604E that was  
damaged pursuant to the accident which occurred on 11/08/22 (date)  
at/along PTE towards Changi (After Eunos Link Exit 9)  
(location) involving vehicle no/s SMP4220S ("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 11 day of 08 (month) 20 22 (year)

Signed by "the third party claimant"



Signed by "the workshop"



HD PERFECT  
AUTOWORK PTE LTD  
CN: 202136904Z





HD PERFECT  
AUTOWORK PTE LTD

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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

## Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SMH1604E and SMP4220S on 11/08/22

at/along PIE twds Changi (After Euros Link Exit 9)

1. I/We, the Owner of motor vehicle no. SMH1604E 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 11 day of 08 20 22

Signature of vehicle owner

Name: Pang Tong Cheow

IC/UEN No: S1338711G

(Company stamp, if applicable)

Address: 41 Sog Chow Rise

S'pore 575482

Tel: 96155503



Witnessed by:

IRENE

# 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
17.11.2022	HDP202211-00205	SMH1604E

## **AXA INSURANCE PTE LTD**

8 SHENTON WAY

#27-01 AXA TOWER

SINGAPORE 068811

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 9,400.00
Total	\$ 9,400.00

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



## HUA HONG PRIVATE LIMITED

10 Kaki Bukit Avenue 4 #04-63 Premier@Kaki Bukit Singapore 415874

Tel: (65) 6661 9688 Fax: (65) 6661 9699 Email: info@huahong.com.sg

### TAX INVOICE

5 September 2022

PANG TONG CHEOW  
41 SOO CHOW RISE  
SINGAPORE 575482

Vehicle Registration No : SMJ 923 E  
Vehicle Make : HONDA  
Vehicle Model : FREED HYBRID

Rental Charges from 11/08/2022 to 19/08/2022  
(9 days x \$180 per day)

	\$	1,620.00
7% GST	\$	113.40
<b>Total</b>	<b>\$</b>	<b>1,733.40</b>

This is a computer generated document and no signature is required.

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 11 Aug 2022 / 13:23:46

Receipt Date/Time : 11 Aug 2022 / 13:23:46

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-220811-002023

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 - SMP4220S

As at 11 Aug 2022/09:40:00

Insurance Co: AXA INSURANCE PTE LTD

1 Insurance Enquiry - SMP4220S  
Enquiry Fee  
20220811132301893383

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

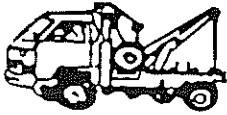
Cash Change 0.00

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.



24 HOURS TOWING SERVICES  
THOMAS HP : 97363184

CASH SALE

No: 1278

Name : CASH

Date : 110822

Vehicle No : SMH 1604IZ

Model No : Honda Freed

Time :                        
AM  
PM

From : Piz Near Ennos

To : Calci Bulet

Remarks : Accident Car

Note : Vehicle is towed at owner's risk. The company accepts no responsibility for damages or other misdemeanour to your vehicle whilst being towed.

\$ \$ 70/2

Authorised by

Received by

## 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 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	12/08/2022 12:00 (SGT)
Reported by	Both
Date of Accident	11/08/2022 09:40 (SGT)
Actual Location of Accident	PIE, Singapore
Additional Location Information	PIE TOWARDS CHANGI (AFTER EUNOS LINK EXIT 9)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH1604E
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	PANG TONG CHEOW
NRIC No	SXXXX711G
Email Address	TONGCHEOW1604@GMAIL.COM
Mobile Phone No	(Phone) +65-96155503
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Freed
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	1500

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5119611741-01

#### DRIVER

Name of Driver	PANG TONG CHEOW
NRIC No	SXXXX711G
Date Of Birth	23/11/1958
Occupation	Outdoor



Date Of Driving Pass	29/08/1980
Driving experience	42 YEARS
Gender	Male
Mobile Number	(Phone) +65-96155503
Alt. Phone Number	-
Email Address	TONGCHEOW1604@GMAIL.COM
Address	41 SOO CHOW RISE
Address complement	-
Postcode	575482
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	3
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	GRAB PASSENGER
Gender	Male

#### PASSENGER 2

Name	GRAB 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

PLEASE REFER TO SKETCH PLAN ATTACHED

#### 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	SMP4220S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLV4173A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	PANG TONG CHEOW
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	63
Injuries Sustained	BODY PAIN
Injured person in which vehicle?	SMH1604E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## 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 under the Actual Power
- 3 Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow
- 4 insurance companies to repudiate policy liability.
- 5 The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 6 **Any false reporting may be referred to the Traffic Police Department for investigation.**
- 7 This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of
- 8 Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 9 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
- 10 report being made available aforesaid.

**6 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 governmental agency/authority (such as the police), for the purpose(s) of

(ii) 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 making 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

(iv) complying with applicable law in administering, processing, handling and/or dealing with my claims

(collectively the 'Purposes')

(If all insured(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/will be permitted to collect my vehicle and/or access my Personal Information for one or more of the above purposes, and

(c) my Personal Information may be disclosed by any of the Insurers under CIA to their third party service providers or agents (including their advisers or firms) which may be based outside of Singapore for one or more of the above Purposes.

1. The first group of authors (e.g., [1, 2]) considers the problem of the stability of the motion of a system of particles in the field of a central body. The results of these studies are used in the theory of the motion of celestial bodies.

1. The sample is taken from the following sources:

Define the map  $\mathcal{R}_\mu: \mathcal{L}_\mu(\mathcal{S}) \rightarrow \mathcal{F}(\mathcal{S})$  and  $\mathcal{H}_\mu: \mathcal{L}_\mu(\mathcal{S}) \rightarrow \mathcal{H}(\mathcal{S})$  by

### Stable Point

Describe Circumstance of the Accident

Refer to Attached

On 11.08.2022 at about 09:40 hours along PIE towards Changi (After Eunos Link Exit 9), I was travelling straight on lane 1 at the above mentioned location and when the front vehicle slowed down and stopped, hence I followed suit.

Suddenly, I heard a loud bang and felt a great impact from behind. When I alighted, I realised it was vehicle (B) that collided onto the rear portion of my vehicle (A).

I wish to state it was a chain collision of total of 3 vehicles involved.

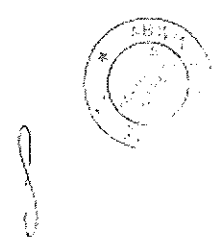
I wish to state that I have 2 passengers in my vehicle (A).

Vehicle (A): SMH 1604E

Vehicle (B): SMP 4220S

Vehicle (C): SLV 4173A

*[Handwritten signature]*





REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1338711G



Name  
PANG TONG CHEOW

Race  
CHINESE

Date of birth  
23-11-1958

Sex  
M

Country of birth  
SINGAPORE



SMH1604E

Owner and Driver



NRIC No. S1338711G



Date of issue  
02-04-2005

Address  
41 SOO CHOW RISE  
SINGAPORE 575482



**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S1338711G**  
 Name: **PANG TONG CHEOW**

Birth Date: **23 Nov 1958**  
 Issue Date: **01 Apr 2013**

002166058J



SMH1604E


Owner and Driver

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

		EFFECTIVE DATE
Class 3	Motor Cars= $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles $\leq$ 2500kg	29 Aug 1980
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight $>$ 2500kg	15 Mar 1983
Class 5	*Motor vehicles which are not constructed to carry load and the unladen weight $<$ 7250kg Motor vehicles not constructed to carry any load and the unladen weight $>$ 7250kg	10 Jun 1983

NP 428A

Licence No: S1338711G






SMH1604E

owner and Driver

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	06/07/2018
03	BUS VL	02/10/2018
04	BUS ATTENDANT	02/10/2018



## 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)  
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5119611741-01

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SMH1604E**  
 Chassis Number : GB71081727
2. Name of Policyholder : **PANG TONG CHEOW**
3. Effective Date of Insurance : **16 Jan 2022**
4. Expiry Date of Insurance : **15 Jan 2023**
5. Persons or Classes of Persons entitled to drive#  
 (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, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: S\$1,000
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: PANG TONG CHEOW
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF 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)

Agency : GOLDEN PRIME INSURANCE AGENCY (00000613808)

Date of Issue : 09 Jan 2022 09:34 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive