CHOO MOTOR SPRAY PAINTER

1 Kaki Bukit Ave 6 #01-39 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

Date: 21.09.2022

India International Insurance Pte Ltd 64 Cecil Street #04-05 IOB Building Singapore 049711

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: SLA 1215T / GBH 9810D ON 19.08.2022

We are the authorized repair workshop for the owner of motor vehicle no: SLA 1215T, which was involved in the captioned accident with your insured vehicle no: GBH 9810D. 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.

		\$ 12,267.45
3)	LTA Search Fee	\$ 7.45
2)	Loss of Rental	\$ 1,260.00
1)	Cost of Repair	\$ 11,000.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

c) LTA Search Result

e) GIA Report

g) Insurance Certificate

b) Car Rental Invoice / Agreement

d) Letter of Authorisation, etc...

f) I/C & Driving Licence

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,

TANG JUN ZHONG
For Choo Motor Spray Painter

TAX INVOICE

CHOO MOTOR SPRAY PAINTER

1 Kaki Bukit Ave 6 #01-39 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

Tax Invoice: 23127

India International Insurance Pte Ltd

 64 Cecil Street
 Date
 :21.09.2022

 #04-05 IOB Building
 Vehicle No
 :SLA 1215T

 Singapore 049711
 Make/Model
 :MAZDA 5

Chassis/Eng#

Attn: Motor Claim Department Accident Date : 19.08.2022

Claim No

Reference : 0822 -23127

Policy No

Amount

To proceed on lump sum repair S\$ 11000.00

E. & O. E. Total: S\$ 11000.00

for CHOO MOTOR SPRAY PAINTER

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: JAIDI LEE YEN MING

Invoice

DCR-2022-08-18

Date : 26.08.2022

Agreement No 22448

Payment Terms : LOD

DESCRIPTION	AMOUNT
Rental charges for vehicle: SJS 2873R (0822-23127)	\$ 1,260.00
Rental Period from 19.08.2022 to 26.08.2022	

E. & O. E.	Total \$ 1,260.00	

SZE LIN

for Dynamic Car Rental

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No.22448

Name Jaidi L	ee Yen Min	Ø1	REG. No.	MAKE	MODEL	:			
ADDRESS BIK 42	ee Yen Min 2B Northsho 41 Singapore	Duine	8JS 2873R	DIESI	EL	PETROL	E 1/4	4 1/2 3	8/4 F
# 19 7	41 Commo	822422	KM IN		DATE	& TIME IN	0	08:5	50
11 11-4	TI SUNGEDOVE	023722	KM OUT		DATE	8 - 2032 8 TIME OUT 18 - 2032	0	19.25	-
			KM		TIME	USED		1.50	an
NAMED DRIVER			DRIVEN						
							ī		
S7878689B PASSPORT NO	DATE OF EXPIRY	PLACE OF ISSUE		HOURS	@S\$,		
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	7	DAYS	@S\$	180.00	\$ 1	260.	. 00
ADD NAMED DRIVER			1	WEEKS	@S\$				
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	M	ONTHS	@S\$				
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALLING, R AGREES TO PAY AI FOR COLLISION DA	DD FEE	SUB-	TOTAL			
MPORTANT NOTES: This vehicle is licenced to carry 0-	4 nassenger only		WAIVER (C.D.W.)						
No refund will be given for vehicle No refund will be given for period	e returns early	er repair				L RENTAL	\$	1260	. 0
Hirer is liable to pay all parking fe /ehicle return during office hour o	e and traffic summonese only				DELIV	VERY FEE			
No service on public holiday and Beographical areas: Singapore & Driver must be:			V		COLL	ECTION FEE			
agreement		to and the additional driver named in the	PER DAY PER V	VEEK	PER M	ONTH			
ADDITIONAL CONDITIONS	and volumes to unionic party and a	ableang is not develous	BY INITIALLING, R	ENTER					
COMPREHENSIVE COVERED E Section I – Used in S'pore only : Section II – Used in S'pore only : W/screen Excess In S'pore : SGI	SGD 2000 00	Used outside S'pore : SGD 4000.00 Used outside S'pore : SGD 3000.00 xcess Outside S'pore : SGD 100.00	AGREES TO PAY AI FOR PERSONAL ACC INSURANCE (P.A.I.)	CIDENT					
THIRD PARTY COVERED EXCE Hirer must bear all costs to the d Section II – Used in S'pore only:	amages of the return vehicle.		X						
Hirer must bear all costs to the d Section II – Used outside S'pore			PER DAY PER V	VEEK	PER M \$	IONTH			
YOUNG AND INEXPERIENCE D Hirer or any authorized driver who 8 month or less driving experien	is aged 22 years old (on the date	e of accident) and below or possess only	PREPAYMENT		TOTA	AL CHARGE			
Section I - Used in S'pore only:		Jsed outside S'pore : SGD 12,000 00	CHECK		DEPO	DSIT			
Section II – Used in S'pore only : W/screen Excess In S'pore : SGI		Used outside S'pore : SGD 12,000,00 xcess Outside S'pore : SGD 100,00	CASH						
HIRD PARTY COVERED EXCE Hirer must bear all costs to the d Section II – Used in S'pore only:	SS: (YOUNG AND INEXPERIENCE amages of the return vehicle. SGD 6000,00	CE DRIVER)	RECEIPT NO.		NETT	CHARGE			
Hirer must bear all costs to the d Section II – Used outside S'pore									
Hirer is responsible for any c			AMOUNT DUE / RE	FUND					
	AND CONDITIONS ON BOMENT AND AGREE THERE								
SIGNED BY THE PARTIES F	HERETO ON THE		DAY OF						
m /	į –)				
IW.			V	5	e				
	SORIVER'S SIGNAT		X			AR RENT			_

8/19/22, 9:12 AM Feedback

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time: 19 Aug 2022 / 09:12:30

Receipt Date/Time 19 Aug 2022 / 09:12:30

Tax Invoice/Receipt

Receipt No.: ITNET-00000-220819-000461

Previous Receipt No.:

В	tem Description/ Business Transaction Reference Io.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
As at 19 Insurance	of Insurance Enquiry - GBH9810D 9 Aug 2022/06:46:00 ce Co: INDIA INT'L INS PTE LTD surance Enquiry - GBH9810D				
En	nquiry Fee 1220819091144277928		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			
		20220819091201261	Direct Debit: el (Intern	NETS Debit et Banking)	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.

DATE : 19.08.2022
TO : Jaidi Lee Yen Ming
RE : ACCIDENT INVOLVING VEHICLE NO. SLA 1215T / GBH 9810D
ALONG Buangkok Dr Sengkang East Rd towards Hougang ON 19.08.2022
I/We, Jaidi Lee Yen Ming
of (NRIC No./ROC No.) \$7878689B
of Blk 422B Northshore Drive #19-741 Singapore 822422
owner of vehicle no. SLA 1215T in consideration of M/s CHOO MOTOR SPRAY
PAINTER repairing my/our vehicle SLA 1215T at my/our instruction and hereby
authorise M/s CHOO MOTOR SPRAY PAINTER 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 act for me/us in respect of the said accident/claim and
all claimed and/or settled shall belong to them absolutely.
I/Wa further come and undertake to be described.
I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.
which stay ariser increwitti.
Signature of Owner:
Signature of Owner: Jaidi Lee Yen Mina

united the Both of the Book of the State of

SY03228J0008 / YEW TEE AUTOMOBILE TECH PTE LTD [417800] ENTRY DATE & TIME: 19/08/2022 16:08 (SGT) SUBMITTED BY: TOH LEI MING

VERSION: 1 (19/08/2022 16:08 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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 19/08/2022 16:08 (SGT) Reported by Date of Accident 19/08/2022 06:46 (SGT) ct Location of Accident Buangkok Dr. Sengkang East Rd. Singapore Auditional Location Information BUANGKOK DR SENGKANG EAST RD TOWARDS HOUGANG PRIMARY SCHOOL Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLA1215T**

Manufacturer

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner JAIDI LEE YEN MING NRIC No. SXXXX689B Email Address lyming787@yahoo.com.sg Mobile Phone No (Phone) +65-98381479 Alternative Phone No

HICLE PARTICULARS

Mazda Model Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Policy Number / Cover Note Number 5105527610-03

DRIVER

Name of Driver JAIDI LEE YEN MING NRIC No SXXXX689B Date Of Birth 09/05/1978

Occupation Outdoor Date Of Driving Pass 14/08/2003 Driving experience 19 YEARS Gender Male Mobile Number (Phone) +65-98381479 Alt. Phone Number Email Address lyming787@yahoo.com.sg Address APT BLK 422B NORTHSHORE DRIVE #19-741 Address complement Postcode 822422 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 Collision - Head to Rear Weather Conditions Clear Road Surface Dry HER 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name LEE ZI KIAN Gender Male FASSENGER 2 Name LEE ZI HAO Gender PASSENGER 3 Name LEE ZI JUN Gender Male PASSENGER 4 Name LEE ZI YUAN Gender Male **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

REFER TO ATTACHMENT

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 **GBH9810D** 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 Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person JAIDI LEE YEN MING Gender Male Phone No (Phone) +65-98381479 Address APT BLK 422B NORTHSHORE DRIVE #19-741 Address Complement Post Code 822422 Approximate Age Years Old Injuries Sustained Injured person in which vehicle? **SLA1215T** Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No

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<u>)r .</u>	Song	kang	Fa	24_	roa	<u>d</u>	to	war	ds	Ho	uga	ng	Prim	vary	2	100l-	74	0 +	roffi	-	light	cha
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Driver's Signature (if driver is not the policyholder) / Date & Time

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre Personnel

SKETCH PLAN

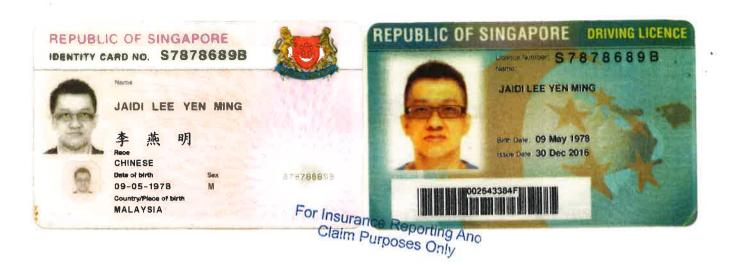
IMPORTANT NOTICE

- 1. Please report sorrectly 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 meterial 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 liability on the part of the insurance companies.
- 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 Contre 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.
- 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' law yers/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 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
- (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.

M	Med	$\sqrt{}$					
Policyholder Signature / Date & Time Sketch Plan	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel					
		A- 9LA (2157					
AI		B: 68H 9810D					
2							







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: 5105527610-03

Cover: drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SLA1215T

Chassis Number

: JM6CW1071G0123206

2. Name of Policyholder

: JAIDI LEE YEN MING

3. Effective Date of Insurance

: 23 Feb 2022

4. Expiry Date of Insurance

: 22 Feb 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 business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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\$600

EXCESS (SECTION 2) WINDSCREEN EXCESS : N/A : S\$100

ADDITIONAL EXCESS

: N/A

UNNAMED DRIVER EXCESS

: PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP

∄ NO

INSURE WITH COE

: YES

NCD PROTECTION

YES (FREE)

ROADSIDE ASSISTANCE AND WELLNESS COVER

: NO

TRANSPORT ALLOWANCE

: NO

EXCESS WAIVER

: NO ¡ JAIDI LEE YEN MING

PRIMARY DRIVER

≅ N/A

NAMED DRIVER (1)

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

CREATIVE AUTO

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

IMOTOR INSURE (00000573595)

Date of Issue

23 Jan 2022 23:05 hrs

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:	Singapore NRIC
Owner ID: Vehicle Details	689B
Vehicle No.:	SLA1215T
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Aug 2022
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA5 5-DOOR WAGON 2.0L SP.6EAT SUNROOF
Primary Colour:	Grey
Manufacturing Year:	2015
Engine No.:	PE10299237
Chassis No.:	JM6CW1071G0123206
Maximum Power Output:	111.0 kW (148 bhp)
Open Market Value:	\$18,806.00
Original Registration Date:	23 Feb 2016
First Registration Date:	23 Feb 2016
ansfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$18,806.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 Feb 2026
PARF Rebate Amount: Intended COE Rebate Details	\$12,223.00
COE Expiry Date:	22 Feb 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$38,610.00
COE Rebate Amount:	\$13,547.00
Total Rebate Amount:	\$25,770.00

The information contained herein is correct as at 19 Aug 2022

ОК