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: 17.09.2022

AXA Insurance Pte Ltd

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: SJX 8649G/SLM 2697R ON 03.09.2022

We are the authorized repair workshop for the owner of motor vehicle no: SJX~8649G, which was involved in the captioned accident with your insured vehicle no: SLM~2697R. 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.

		\$ 2,810.00
3)	GIA Search Fee	\$ 2.00
2)	Loss of Use (4 days X \$60)	\$ 240.00
1)	Cost of Repair (inclusive of GST)	\$ 2,568.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

c) Letter of Authorisation, etc...

e) Police Report

g) Insurance Certificate

b) GIA Search Report

d) GIA Report

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,

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

Attn: Motor Claim Department

AXA Insurance Pte Ltd

Tax Invoice: 23155

Date

:15.09.2022

Vehicle No : SJX 8649G

Make/Model : TOYOTA COROLLA ALTIS

Chassis/Eng# :

Accident Date : 03.09.2022

Claim No

Reference

: 0922 -23155

Policy No

Amount

To proceed on lump sum repair

S\$

2400.00

E. & O. E.

Total: S\$

2400.00

GST @ 7% : S\$

168.00

Amount Due: \$\$

2568.00

for FASTECH AUTO PTE LTD

INSURER ENQUIRY Find insurer

Vehicle reg. no.

SLM2697R

Date of Accident

03/09/2022

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance AXA Insurance Pte Ltd

Period of Insurance 27/03/2022 - 26/03/2023

Requested By ALLAN TANG (KIM CHWEE AUT...

Requested Date 05/09/2022 10:32

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

AUTHORISATION TO ACT

I/We, CHEW PENG GUAN (the third party claimant") of BLK 23 IB SUMANG LANE #03-257 SINGAPORE 822231 (address), owner of SJX 86496 (vehicle no.) hereby
authorize FASTECH AUTO 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. 31x86496 that was damaged pursuant to the accident which occurred on 03/04/2012 (date)
along SERANGOON NORTH AVE 2 (location) involving vehicle no/s SLM 2694R ("the accident").
I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.
I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Signed by "the workshop"

(with company stamp)

Dated this _______ (day) of ______ (month) 2022 (year)

Signed by "the third party claimant"

(with company stamp if applicable)



SINGAPORE ACCIDENT STATEMENT

1. Please report correctly the details of the accident to speed up the claims process.

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 lability.

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 05/09/2022 11:31 (SGT) Reported by Both Date of Accident 03/09/2022 10:10 (SGT) Exact Location of Accident Serangoon North Ave. 2, Singapore Additional Location Information SERANGOON NORTH AVE 2 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJX8649G

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner CHEW PENG GUAN NRIC No S1535998F Email Address CHEWPG62@GMAIL.COM Mobile Phone No (Phone) +65-81804468 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Toyota Model Corolla 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

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5103917394-04

DRIVER

Name of Driver CHEW PENG GUAN NRIC No S1535998F Date Of Birth 22/12/1962 Occupation Outdoor

Date Of Driving Pass 04/09/1980 Driving experience **42 YEARS** Gender Male Mobile Number (Phone) +65-81804468 Alt. Phone Number Email Address CHEWPG62@GMAIL.COM Address APT BLK 231B SUMANG LANE #03-257 Address complement Postcode 822231 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 Collided into Parked Vehicle 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? 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? 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? Police Station Name Jurong West Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002689999 Alt. Police Station Phone No (Fax) +65-62672438 Police Station Address 700 Corporation Road Singapore 649818 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? Yes Reasons for not uploading a video of the accident VIDEO WITH OWNER **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SLM2697R Vehicle Manufacturer

Vehicle Model

vate car
vale car

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHEW PENG GUAN
Gender	Male
Phone No	(Phone) +65-81804468
Address	APT BLK 231B SUMANG LANE #03-257
Address Complement	- 1 DER 2010 OOMANG EANE #03-237
Post Code	822231
Approximate Age Years Old	-
Injuries Sustained	
Injured person in which vehicle?	SJX8649G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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IWe declare the foregoing particulars are true in every respect.

Policy holder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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' 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 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
- (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.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan



[T/20220903/2068

Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

1 of 3 //20220903/2068

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/09/2022 14:58			Vide Report No.:	Station Diary No.: 71			
Informa	nt's Partic	ulars					
	Informant: PENG GUA		Address: APT BLK 231B SUMANG LANE #03-257 SINGAPORE 82223				
	/ ID No.: D / S15359	98F	Contact No.: Home/Office: Mobile: 81804468				
Nationality: SINGAPORE CITIZEN			Email:				
Sex: Male	Age: 59	Date of Birth: 22/12/1962	Type of Informant:				
Race: Chinese			Language: Institution / School Nam				
Occupation: Grab Driver			Driving Licence Information: Class: 3	Date of Expiry:			

Type of Accident: Injury Others		Drink Drive: No	Date/Time of Accident: 03/09/2022 10:10	Type of Location: Car Park
Location: SERANGOON Weather:	NORTH AVENUE	Road Surface		
				Road Speed Limit:
Clear		Dry Traffic Control:		
Clear Traffic Flow: Two Way Type of Collisi		Dry	7	Road Speed Limit: Fraffic Volume: No Traffic

Details of V	ehicle Invo	lved	**************************************			
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJX8649G	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	Black	Slightly Damaged	0
SLM2697R	Car				Slightly Damaged	0

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJX8649G	NTUC Income Insurance Co-Operative	5103917394-04	02/09/2022	01/09/2023



Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999 T/20220903/2068

2 of 3 Report No. T/20220903/2068

CONTINUATION OF REPORT

Any Pedestrian I	n Involved	And a state of the		and a series of the series of		
No. of Pedestriar		****	Use of Pr	Use of Pedestrian Crossing: NA		
Driver					. 0.000	ang. svv
Name	CHEW PENG GUAN			ID No	,	S1535998F
Related Vehicle	SJX8649G (Car)			Conta	ict No.	81804468
Hospital/Clinic	Calrose medical fan		Class of Driving Licence & Expiry Date		Class; 3 Date of Expiry; NIL	
Date Treatment 03/09/2022			Date Dis		NAME OF THE OWNER OF THE OWNER, OF THE OWNER, OF THE OWNER, OWNER	/2022
No. of Days gran	05	Degree o				
Driver						
Name	Fong Kah Swee	The state of the s		ID No		S0532286C
Related Vehicle	SLM2697R (Car)			Conta	ct No.	NIL
-lospital/Clinic NIL				Class Drivin Licend Expiry	g se &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc			
No. of Days granted Medical Leave NIL			Degree o			

Brief Details.

On the 3rd September 2022 at about 1010hrs, I was driving my vehicle SJX8649G along Serangoon North Ave 2. I was on the way to pick up a passenger. I turned into the open space carpark of Blk 136 Serangoon North Ave 2. As I was driving, there was another car bearing number plate SLM2697R which was driving in front of me. Suddenly driver stopped his car and then move off. I followed the vehicle behind. Suddenly he stopped again and started to reverse. He did not signal the hazard light. I pressed on the horn for a long time to warn him that I was behind his vehicle. However he still reversed and hit onto the front of my car. We came out to exchange particulars. The driver informed me that he did not hear my horn from the vehicle. As none of us were injured, we exchanged particulars and left. After which I felt some pain to my back and neck area, therefore visited the doctor and was given 5 days of MC, no fractures. The damage to my car was a dented front bumper. I am not sure on the repair cost of my vehicle, there is an in car camera in my vehicle which had captured the incident.





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999 3 of 3 Report No. T/20220903/2068

CONTINUATION OF REPORT

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Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:	Signature Of Informant:
STAFF SGT TAMILLMAARAN S/O LETCHMANAN	Phil
Signature Of Interpreter: Not applicable	Date/Time: 03/09/2022 14:58
Officer In Charge Of Case: TP / AEIT / SSI TAY CHUN KEEN Contact No.: 65476436	Classification Of Case:
NP168	



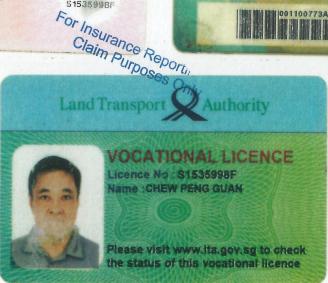
S1535998F

CHINESE

22-12-1962

SINGAPORE







Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type Description

13

Issue Date

PRIVATE HIRE CAR VL 19/11/2018





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: 5103917394-04

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SJX8649G

Chassis Number

2. Name of Policyholder

: MR053ZEE106115030 : CHEW PENG GUAN

2. Fifther Discontinuer

CITEW FLING GO

3. Effective Date of Insurance

: 02 Sep 2022

4. Expiry Date of Insurance

: 01 Sep 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 : N/A REPAIR AT OWNER'S PREFERRED WORKSHOP : NO **INSURE WITH COE** : YES **NCD PROTECTION** : NO ROADSIDE ASSISTANCE AND WELLNESS COVER · YFS TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO

PRIMARY DRIVER : CHEW PENG GUAN

NAMED DRIVER (1) : N/A
NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : GV CARS FINANCING PTE LTD

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 : KHC HOLDINGS PTE. LTD. (00000613934)

Date of Issue : 01 Aug 2022 14:47 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	998F
Vehicle No.:	SJX8649G
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Sep 2022
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Black
Manufacturing Year:	2008
Engine No.:	3ZZ4785827
Chassis No.:	MR053ZEE106115030
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$16,777.00
Original Registration Date:	02 Sep 2008
First Registration Date:	02 Sep 2008
Transfer Count:	3
Actual ARF Paid: Intended PARF Rebate Details	\$16,777.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	01 Sep 2023
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$16,170.00
COE Rebate Amount:	\$3,199.00
Total Rebate Amount: Message	\$3,199.00
Please note that the 5-year COE for this vehicle cannot be reaches its statutory lifespan (if applicable), whichever is e	e further renewed. The vehicle must be de-registered upon COE expiry or when the vehicl

The information contained herein is correct as at 05 Sep 2022