

To: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

Attn: **Motor Claims Department**

Date: 30th September 2022

Dear Sir/Madam,

Claimant: **J & S Handyman**

"WITHOUT PREJUDICE"

We are instructed by the above named to claim damages against you in connection with a road traffic accident on 12/09/2022 at along Serangoon Central involving our client's vehicle registration number GX 646 C and vehicle registration number SNK 8886 K driven by your insured at the material time.

We are instructed that the accident was caused by your insured's negligent driving and/or management of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:

1) Vehicle Repair Costs	\$4,500.00
2) Loss of Rental (SGD\$150.00 x 7Days)	\$1,050.00
3) Insurance Search	\$2.00

Total : **\$5,552.00**

A copy each of the following supporting documents is enclosed:

- Singapore Accident Statement
- Rental Invoice & Agreement
- Insurance Search Receipt

Please send us an acknowledgement of receipt within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice.

Yours faithfully,

Elin Cai

Zoom Autowerks Pte Ltd

130 Bedok Reservoir Road

#08-1339 Singapore 470130

Mobile: 9450 7920 | E-mail: zoomautowerks@gmail.com

**ZOOM AUTOWERKS PTE LTD**

130 Bedok Reservoir Road, Eunos Spring

#08-1339 Singapore 470130

email: zoomautowerks@gmail.com | Contact: 9450 7920

Co. Reg No.: 201725603G

PROFORMA INVOICE

To: **AIG Asia Pacific Insurance Pte. Ltd.**
78 Shenton Way
#07-16
Singapore 079120

PF No. : ZP0000699
Date : 30/9/2022
VRN : GX 646 C
Make & Model : Toyota Liteace
DOA : 12/9/2022
Terms : COD

	Description	Qty	U/P	Amt
1	Repair & Respray Accident Affected Portions			4,500.00
2	Loss of Rental (SGD\$150.00 x 7Days)			1,050.00
3	LTA Search			2.00

TOTAL :	\$5,552.00
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All crossed cheques must be made to "**ZOOM AUTOWERKS PTE LTD**"

Bank Name: Oversea-Chinese Banking Corporation Ltd

Account Number: 623326998001

Paynow UEN: 201725603G

(by Zoom Autowerks Pte Ltd)

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	13/09/2022 12:08 (SGT)
Reported by	Both
Date of Accident	12/09/2022 14:20 (SGT)
Exact Location of Accident	Serangoon Central, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX646C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	J & S HANDYMAN
Company Reg No	53135650K
Email Address	jamestng2008@hotmail.com
Mobile Phone No	(Phone) +65-96993511
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Liteace
Variant	-
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	Commercial vehicle
Transmission	Manual
CC	2184

INSURANCE COMPANY

Name of Insurance Company	Great American Insurance Company
Policy Number / Cover Note Number	MOMVC000009153-00-000

DRIVER

Name of Driver	TNG CHIA HONG
NRIC No	S1374266I
Date Of Birth	26/09/1959
Occupation	Outdoor

Date Of Driving Pass	19/10/1978
Driving experience	43 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96993511
Alt. Phone Number	-
Email Address	jamestng2008@hotmail.com
Address	BLK 445A FERNVALE ROAD
Address complement	#26-387
Postcode	792445
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE 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	SNF6366H
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)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMP1542H
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)	1

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.

J & S HANDYMAN

Policyholder's Signature / Date & Time

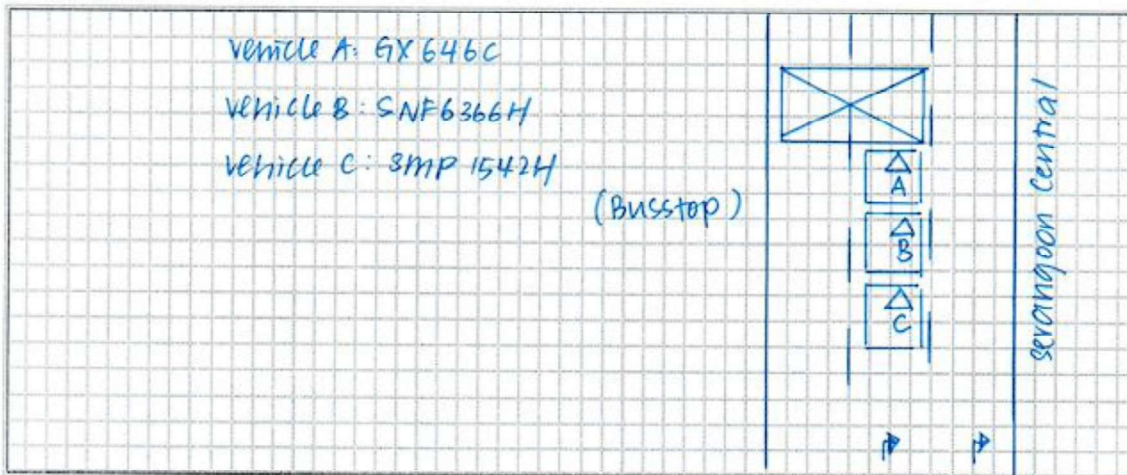
[Signature]

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

R 13/9/22

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

Sketch Plan



Describe Circumstance of the Accident

On the stated date & time, I, vehicle 'A', GX646C, was stationary before the yellow box. I was stationary for about 2-3 seconds when I felt a huge impact on my vehicle's rear portion. When I alighted, I then realised I was involved in a chain collision of 3 vehicles.

Declaration

I/We declare the foregoing particulars are true in every respect.

J & S HANDYMAN

Policyholder's Signature / Date & Time



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

R 13/1/22

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



























ZOOM AUTOWERKS PTE LTD

UEN No.: 201725603G

✉ zoomautowerks@gmail.com

LETTER OF AUTHORIZATION

Accident on 12/09/2022 @ 14:20 along Serangoon Central
Involving vehicles GX646C and SNF6366H

In consideration of **Zoom Autowerks Pte Ltd, 130 Bedok Reservoir Road, Eunos Spring, #08-1339 Singapore 470130**, repairing my/our motor vehicle no GX646C at my request, I/We, J & S handyman ("the claimant") of _____ (address) bearing NRIC No _____ the owner of motor vehicle no GX646C, hereby authorize them to demand claim, settle and receive whatever amount settle payable by the insurance company or third party or commence legal proceeding for cost of repairs, loss of use and etc to any of their appointed solicitors to act for me/us in respect of the said accident/claim and all the amount claimed or settled shall belong and make payable to them absolutely by the insurance company of the third party. I/We further authorized them to give an absolute discharge on my/our behalf and to sign discharge voucher(s) and any other documents necessary or incidentals to the conduct and disposal of my/our above claims.

I/We further agree to fully co-operate and attend all court hearings that are necessary to prosecute the claims maintained by **Zoom Autowerks Pte Ltd**.

I/We further agree and undertake to indemnify them against my/our claim for costs which arise therewith.

In the event that my/our claim is unsuccessful, I/we undertake to pay to **Zoom Autowerks Pte Ltd** the cost of repairs to my/our vehicle.

In the event that settlement cheque were to be drawn in my/our favour, I/we hereby give my/our instructions to clear the said cheque on my/our behalf by presenting the same for payment directly into **Zoom Autowerks Pte Ltd** account. Upon clearance of the said cheque, I/we further authorize **Zoom Autowerks Pte Ltd** and/or their appointed law firm to utilize the monies to pay their charges without further reference to me. I confirm that the payment to **Zoom Autowerks Pte Ltd** shall amount to a good discharge of **Zoom Autowerks Pte Ltd** and/or their appointed law firm's obligation to me in respect of the settlement monies.

Dated this 10 day of 09 (month) 20 22 (year)

J & S HANDYMAN

Signed by "the claimant"

Name: J & S handyman

NRIC No: _____



Signed by Zoom Autowerks Pte Ltd

Name: Elin Cui


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

SNF6366H

Date of Accident

12/09/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **AIG Asia Pacific Insurance Pte....**

Period of Insurance **27/12/2021 - 28/02/2023**

Requested By **Elin Cai (Zoom Autowerks Pte ...**

Requested Date **13/09/2022 14:43**

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

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

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

CARS FOR RENT (2016) PTE LTD

Mailing Address:

10 Kaki Bukit Ave 4 #09-60 Premier@Kaki Bukit, Singapore 415874

Tel Nos.: +65 6970 9119 / 6789 5155

Co. Reg'n No.: 201609732N

GST Reg'n No.: 201609732N

Tax Invoice #: E2209199

Date: 23-09-22

Bill To:

Ship To:

1

Zoom Autowerks

For the account of:

Tng Chia Hong

S1374266I

APT Blk 445A Fernvale Road

#26-387

Zoom Autowerks

For the account of:

Tng Chia Hong

S1374266I

APT Blk 445A Fernvale Road

#26-387

Description	Amount	Job No.
Vehicle Rental for Period 13.09.2022 to 20.09.2022 (Billing for days 7 X \$150.00/per day) (Vehicle No.: GX646C)	\$1,050.00	GBL4409S SR

Your Order #: 20695

		Terms: Net 30th after	GST:	\$68.69
COMMENT	CODE	RATE	GST SALE AMOUNT	Total Inv Amt:
	SR	7%	\$68.69 \$981.31	\$1,050.00
				Amount Applied:
				\$0.00
				Balance Due:
				\$1,050.00



CARS FOR RENT (2016) PTE LTD

10 Kaki Bukit Ave 4 #09-60 Premier @ Kaki Bukit Singapore 415874

Tel: 6970 9119 Fax: 6970 9961

Website: www.carsforrent2016.com

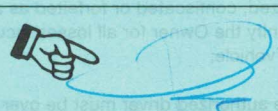
No: 20695

ROC/GST No: 201609732N

VEHICLE RENTAL AGREEMENT

Zoom

GX646C

HIRER'S PARTICULAR		Vehicle No: <u>GRL 4409S</u> Replace Veh No:	
Name: (as in I/C) <u>Tng chia Hong</u>		Mileage out:	
Email:		Make & Model : <u>Nissan NV 200</u> Auto / Manual	
NRIC/PASSPORT No: <u>S1374266I</u>		OUT : Date <u>13 Sep 22</u> Time : <u>9:30am</u>	
Date of Birth:		HIRE PERIOD	
Address (Res): <u>445A Fernvale Rd</u> <u>#26-387 S(792445)</u>		OWN DAMAGE CLAIM Excess S\$ <u>2,000</u>	
Driving Licence No: <u>S1374266I</u> D/L Type: <u>Local / International</u>		THIRD PARTY CLAIM Excess S\$ <u>1,500</u>	
Issue Date: <u>25 Aug 2018</u>		CHARGES	
Tel: (O) _____ HP <u>9699 3511</u>		Daily <u>7</u> @ \$ <u>150.00</u> per day <u>1,050</u> <u>00</u>	
Company Name:		Weekly @ \$ _____ per week	
Company UEN:		Monthly @ \$ _____ per month	
Company Address:		Others @ \$ _____	
ADDITIONAL DRIVER'S PARTICULARS		Delivery Service	
Name: (as in I/C)		GST	
NRIC/PASSPORT No:		SUB-TOTAL \$	
Date of Birth:		PETROL LEVEL	
Address (Res):		Out E 1/4 1/2 3/4 F	
Driving Licence No: _____ D/L Type: Local / International		In E 1/4 1/2 3/4 F	
Issue Date: _____		EXTENSION	
Tel: (O) _____ HP _____		Misc.	
VEHICLE CHECK LIST		GST <u>Ind 79.00</u>	
INDICATE: D - DENTS S - SCRATCHES A - ACCIDENTS	BACK	TOTAL CHARGES <u>1,050</u> <u>00</u>	
	RIGHT	Rented out by:	
	FRONT	Hirer's Signature 	
	TOP	Addition Driver's Signature	
LEFT			

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/ credit card for payment, I agree that all amount payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given CARS FOR RENT (2016) PTE LTD in connection with this agreement is true.

* IMPORTANT

- ONLY PERSON ABOVE 22 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN ABOVE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY AND BE RESPONSIBLE FOR THE INSURANCE EXCESS. IF THERE IS BODILY INJURIES, POLICE REPORT MUST BE MADE.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CARS FOR RENT (2016) PTE LTD

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVE" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CARS FOR RENT (2016) PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	HIRER'S SIGNATURE
20/9					