

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 : 10.10.2022

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

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : GBC 9415M / YQ 3311Y ON 13.09.2022

We are the authorized repair workshop for the owner of motor vehicle no: **GBC 9415M**, which was involved in the captioned accident with your insured vehicle no: **YQ 3311Y**. 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.

1) Cost of Repair	\$ 2,800.00
2) Loss of Use (4 days x \$100.00)	\$ 400.00
3) LTA Search Fee	\$ 7.45
	\$ 3,207.45

We enclosed herewith the following documents to support the claims:

- | | |
|------------------------------------|--------------------------|
| a) Final Repair Invoice | b) LTA Search Result |
| c) Letter of Authorisation, etc... | d) GIA Report |
| e) I/C & Driving Licence | f) Insurance Certificate |
| g) 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

India International Insurance Pte Ltd

64 Cecil Street

#04-05 IOB Building

Singapore 049711

Attn : Motor Claim Department

Tax Invoice : 23168

Date : 10.10.2022

Vehicle No : GBC 9415M

Make/Model : TOYOTA HIACE VAN

Chassis/Eng# :

Accident Date : 13.09.2022

Claim No :

Reference : 0922 -23168

Policy No :

	Amount
To proceed on lump sum repair	S\$ 2800.00

E. & O. E.

Total : S\$

2800.00


for CHOO MOTOR SPRAY PAINTER



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 14 Sep 2022 / 09:01:13

Receipt Date/Time : 14 Sep 2022 / 09:01:13

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220914-000451

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - YQ3311Y				
As at 13 Sep 2022/16:00:00				
Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - YQ3311Y			
	Enquiry Fee	7.00	0.49	7.49
	20220914090033150809			
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				
20220914090044255		Direct Debit: eNETS Debit (Internet 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 : 17.09.2022

TO : India International Insurance Pte Ltd

RE : ACCIDENT INVOLVING VEHICLE NO. GBC 9415M / YQ 3311Y

ALONG Blk 370 Tampines Street 34 Carpark No. TMTM19

ON 13.09.2022

I/We, Car(s) Leasing Pte Ltd

of (NRIC No./ROC No.) 201724841H

of 39 Woodlands Close #08-04 Mega @ Woodlands S 737856

owner of vehicle no. GBC 9415M in consideration of M/s CHOO MOTOR SPRAY PAINTER repairing my/our vehicle GBC 7415M 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/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.

Signature of Owner :

Hong hong chee



Name of Owner :

Car (s) Leasing 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	14/09/2022 16:41 (SGT)
Reported by	Driver
Date of Accident	13/09/2022 16:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 370 TAMPINES STREET 34 CAR PARK No. TMTM19
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC9415M
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CAR (S) LEASING PTE. LTD.
Company Reg No	201724841H
Email Address	leasing@carsg.sg
Mobile Phone No	(Phone) +65-63853322
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	TOYOTA / TOYOTA HIACE VAN TURBO 5 DR MANUAL
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2002749495 (C) 31.08.22-30.08.23

DRIVER

Name of Driver	EE HOCK BENG
NRIC No	S8108570F
Date Of Birth	24/03/1981
Occupation	Outdoor

Date Of Driving Pass	09/10/2007
Driving experience	14 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93374985
Alt. Phone Number	-
Email Address	Aaron_ee_82@yahoo.com.sg
Address	BLK 896 TAMPINES STREET 81#08-880 S520896
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Change/cross lane
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)	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	DO THI HONG
Gender	Female

PASSENGER 2

Name	DO THUY LINH
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 ATTACHED REPORT

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	YQ3311Y
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	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	EE HOCK BENG
Gender	Male
Phone No	(Phone) +65-93374985
Address	BLK 896 TAMPINES STREET 81#08-880 S520896
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBC9415M
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	DO THI HONG
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	DO THUY LINH
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to reputate 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. 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)**

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

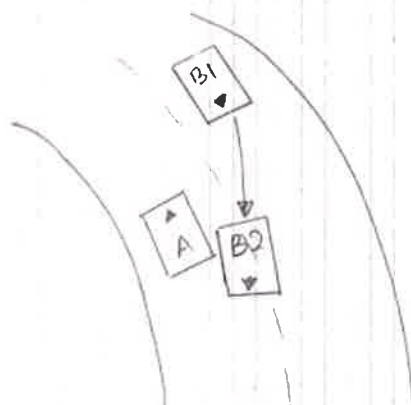
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A: GBC 9415M

B: 4Q 3311Y

Describe Circumstances of the Accident

On 13.09.2022 at about 16:00 hrs, I was in Blk 370
 Tampines Street 34 Carpark. Vehicle B from the opposite direction encroached
 into my lane, It hit my vehicle rear on.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

14/9/2022
 1430

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8108570F

For Insurance
Claim Purposes Only

Name
EE HOCK BENG

余 福 明



Race
CHINESE

Date of birth
24-03-1981

Country/Place of birth
SINGAPORE

Sex
M

98108570F




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8108570F
Name: EE HOCK BENG

Birth Date: 24 Mar 1981
Issue Date: 09 Oct 2007

1901534831A



For Insurance Reporting And
Claim Purposes Only

5469018

Barcode

NIRSO No. S8108570F

93374985

Date of issue
28-04-2015

Address
APT BLK 896 TAMPINES STREET 81
#08-080
SINGAPORE 520896



PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)


PASS DATE

Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg

09 Oct 2007

NP 428A

Licence No: S8108570F



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SP2002749495
Date of Issue : 30 August 2022
Coverage : COMPREHENSIVE - AUTHORISED WORKSHOP
Policyholder : CAR (S) LEASING PTE. LTD.
Finance Company : SINGAPURA FINANCE LTD
Period of Insurance : 31 August 2022 To 30 August 2023 (both dates inclusive)
Registration Number : GBC9415M
Chassis Number of Vehicle : JTFHT02P300134710

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 or to whom the vehicle is hired.
- * Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

Limitation as to Use*:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
- (b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.

* Limitation rendered inoperative by Section 8 of Motor Vehicles (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.

Policy does not cover:

- (a) Use for racing, pace-making, reliability trials or speed-testing.
- (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- (c) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

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).

30 August 2022

Issue Date



Hicham Raissi
Chief Executive Officer

Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000313 FINSURETEQ AGENCY PTE LTD
Excess : Section 1: Own Damage
Section 1: Windscreen
Section 2: Liabilities To Third Parties

S\$	2,000.00
S\$	100.00
S\$	1,500.00

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	841H
Vehicle Details	
Vehicle No.:	GBC9415M
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Sep 2022
Vehicle Make:	TOYOTA
Vehicle Model:	TOYOTA HIACE VAN TURBO 5 DR MANUAL
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	1KD2376936
Chassis No.:	JTFHT02P300134710
Maximum Power Output:	-
Open Market Value:	\$27,502.00
Original Registration Date:	19 Mar 2014
First Registration Date:	19 Mar 2014
Transfer Count:	1
Actual ARF Paid:	\$1,376.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	18 Mar 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$52,890.00
COE Rebate Amount:	\$7,990.00
Total Rebate Amount:	\$7,990.00

The information contained herein is correct as at 14 Sep 2022

OK