



華明噴漆廠
HUA MENG SPRAY PAINTING WORKSHOP

AUTOBAY@KAKIBUKIT

1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883

Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Email: huameng@live.com.sg

Reg. No.: 254678/00M



Your Ref :

Our Ref :

Date: 16/12/2022

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Attn: Motor Claims Dept

ACCIDENT ON 28.09.2022 INVOLVING VEHICLE SJY 419 B & GBD 9363 Z ALONG
CTE/AYE/PIE TOWARDS (CHANGI) EXIT

With regards to the above, we are writing on behalf of the registered owner of vehicle SJY 419 B which was involved in the above mentioned accident.

We are informed that the above accident was caused solely by the negligence of your insured vehicle GBD 9363 Z. As a result of the accident, our client's vehicle was damaged and our client had instructed us to submit his claims for loss and expenses, particulars of which are follows:

1) Repair cost	\$	12,500.00
2) Loss of rental-\$200 X 07 days	\$	1,400.00
3) LTA search	\$	7.45
Total	\$	13,907.45

We hereby enclosed herewith the following documents for your consideration of the above claim.

- | | |
|-----------------------------------|--|
| a) Final Repair Bill Of SJY 419 B | c) LTA SEARCH |
| b) GIA report | d) Owner / Driver NRIC & Driving License |

Yours faithfully,

HUA MENG SPRAY PAINTING WORKSHOP

華明噴漆廠
HUA MENG SPRAY PAINTING WORKSHOP
AUTOBAY @ KAKI BUKIT
1 KAKI BUKIT AVE 6 #01-34 SINGAPORE 417883
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Reg. No.: 254678/00M



Your Ref :

Our Ref :

Date:..... 16/12/2022

VEHICLE NO :SJY 419 B
MAKE / MODEL :AUDI A5
NAME :TAN WEI LOONG, WILSON
ADDRESS :33 UPPER SERANGOON VIEW
#14-26
S 534042

FINAL REPAIR BILL FOR VEHICLE NO:SJY 419 B

TO SUPPLY AND REPLACE PARTS, LABOUR CHARGES FOR
REPAIRING, KNOCKING, WELDING AND TO RESPRAY PAINTING
(LUMP SUM REPAIR)

\$ 12,500.00

SINGAPORE DOLLARS:TWELVE THOUSAND FIVE HUNDRED ONLY

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	29/09/2022 16:25 (SGT)
Reported by	Both
Date of Accident	28/09/2022 16:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE/ AYE/ PIE TOWARDS (CHANGI) EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY419B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN WEI LOONG, WILSON
NRIC No	S9211067B
Email Address	SALVATOREE-BB@HOTMAIL.SG
Mobile Phone No	(Phone) +65-93889551
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A5
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1984

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5118682193-02

DRIVER

Name of Driver	TAN WEI LOONG, WILSON
NRIC No	S9211067B
Date Of Birth	12/03/1992
Occupation	Indoor

Date Of Driving Pass	09/01/2012
Driving experience	10 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93889551
Alt. Phone Number	-
Email Address	SALVATOREE-BB@HOTMAIL.SG
Address	33 UPPER SERANGOON VIEW #14-26 S534042
Address complement	-
Postcode	-
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

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)	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?	Yes
Police Station Name	Tampines Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005871999
Alt. Police Station Phone No	(Fax) +65-65871699
Police Station Address	6 Tampines Ave 4 Singapore 529682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT 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	GBD9363Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	MUHD BADRUN BIN ABDUL NASIR
Contact Number	(Phone) +65-86945164
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	TAN WEI LOONG, WILSON
Gender	Male
Phone No	(Phone) +65-93889551
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJY419B
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 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. 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 any 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' law firms/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

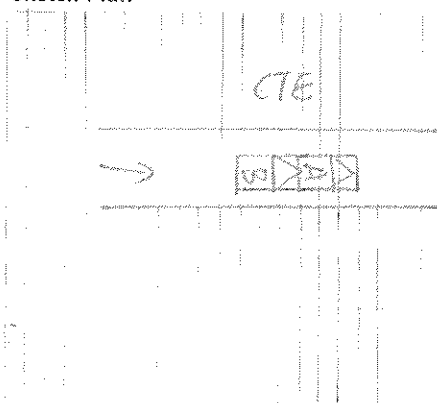
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel LEK Gm

Sketch Plan



57X49B

B: GED 93632

Describe Circumstances of the Accident

Refer to Police Report NO : T/20220929/2139

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 **LEK Sui ENG**



**SINGAPORE
POLICE FORCE**



T/20220929/2139

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20220929/2139

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/09/2022 13:22	Video Report No.:	Station Diary No.: 32
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Informant's Particulars

Name of Informant: TAN WEI LOONG, WILSON			Address: APT BLK 33 UPPER SERANGOON VIEW #14-26 SINGAPORE 534042		
ID Type / ID No.: NRIC NO / S9211067B			Contact No.: Home/Office: Mobile: 93889551		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 30	Date of Birth: 12/03/1992	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: financial advisor			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/09/2022 16:45	Type of Location:
Location: CENTRAL EXPRESSWAY				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD9363Z	Van	NISSAN	NV200 1.5 MT ABS AIRBAG 2WD 6DR E6 WRC	Red	Seriously Damaged	0
SJY419B	Car	AUDI	A5 2.0 QUATTRO A	Black	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220929/2139

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

2 of 3
Report No. T/20220929/2139

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SJY419B	NTUC Income Insurance Co-Operative Limited	5118682193-02	29/07/2022	28/07/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD BADRUN BIN ABDUL NASIR	ID No.	S9104405F
Related Vehicle	GBD9363Z (Van)	Contact No.	86945164
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious
Driver			
Name	TAN WEI LOONG, WILSON	ID No.	S9211067B
Related Vehicle	SJY419B (Car)	Contact No.	93889551
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	29/09/2022	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 28/09/2022, at 1645hrs, I was driving along CTE > AYE, I was exiting CTE and on a lane towards PIE(Changi). Traffic was heavy and vehicles were inching forward gradually. Travelling speed was between 30km/h to 40km/h. As I slowly moved forward and slowed down in the heavy traffic, I was rear ended by a Red Nissan Van(GBD9363Z). I suffered back and neck pains. I received a 5 day MC from Our Family Physician Clinic & Surgery. The damages on my vehicles were as such, a cracked and dented rear bumper, broken rear brake lights and a damaged exhaust. The van's damages were as such, heavily dented front, broken front bumper, and a broken license plate.



**SINGAPORE
POLICE FORCE**



T/20220929/2139

Police Station Of Origin: ...
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20220929/2139

CONTINUATION OF REPORT

Sketch Plan

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: G / SR STAFF SGT SITI NUR SYAFIQAH BINTE AZMAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/09/2022 13:22
Officer In Charge Of Case: TP / AEIT / SI MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case:

NP168

REPUBLIC OF SINGAPORE
IDENTIFICATION NO. S9211067B



TAN WEI LOONG, WILSON

陳 威 龍

Race
CHINESE

Date of birth
12-03-1992

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9211067B

Name:

TAN WEI LOONG, WILSON

Birth Date: 12 Mar 1992

Issue Date: 09 Jan 2012



4017055



S9211067B



16-03-2007

APT BLK 33 UPPER SERANGOON VIEW #14-26
SINGAPORE 534042

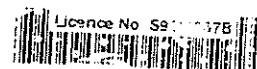
NRIC No: S9211067B Date: 10/08/2020

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

EFFECTIVE DATE

Class 3 Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver, and other motor vehicles ≤ 2500kg

NP 428A



> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 29 Sep 2022 / 11:08:44

Receipt Date/Time : 29 Sep 2022 / 11:08:44

Tax Invoice/Receipt

Receipt No. : ITNET-00000-220929-001250

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 - GBD9363Z				
As at 28 Sep 2022/16:49:00				
Insurance Co: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD				
1	Insurance Enquiry - GBD9363Z Enquiry Fee 20220929110726869332	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				
20220929110747158		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.



**SINGAPORE
POLICE FORCE**
SAFEGUARDING EVERY DAY

Our Ref: TP/IP/27224/2022

TAN WEI LOONG, WILSON
33 UPPER SERANGOON VIEW
#14-26
SINGAPORE 534042

000070

Traffic Police
10 Ubi Avenue 3
Singapore 408865

IB Call Centre: 65470000
eservices.police.gov.sg

Date: 08/11/2022

Dear Sir

**TRAFFIC ACCIDENT INVOLVING GBD9363Z AND SJY419B ALONG CENTRAL EXPRESSWAY
ON 28.09.2022 AT ABOUT 4.45PM**

I refer to the above accident.

2 We have completed our investigation into the case. Action has been initiated against the driver of **GBD9363Z** for the offence of **Careless Driving Causing Hurt** under **Section 65(1)(a)** of the Road Traffic Act 1961 p/u **Section 65(4)(a)** of the same Act.

3 If you have any clarification, you may contact the Investigation Officer, Mohamad Zulfazdli Bin Abdullah at office number: 65476204.

Yours faithfully,
SI Mohamad Zulfazdli Bin Abdullah
IO (Accident Enquiry & Investigation)
Traffic Police
Singapore Police Force

This is a computer-generated letter. No signature is required.



DAWN ENTERPRISES

21 Seletar West Farmway 1

Singapore 798125

Tel: 63832661 Fax: 64842836

Reg No.430058/00D

SY 419B

Nº 38224

RENTAL AGREEMENT

DATE 28/9/2022

HIRER'S PARTICULARS

Name Tan Wei Loong Wilson

Address 33 Upper Serangoon View

#14-26

S534042

I/C or Passport No. 9211067B Country

Occupation

Date of Birth Age

Driving Licence No. Date Passed

Tel: (HP) (Residence)

DRIVER'S PARTICULARS

Name

Address

I/C or Passport No. Country

Occupation

Date of Birth Age

Driving Licence No. Date Passed

Tel: (Office) (Residence)

IMPORTANT NOTES:

- 1 No Insurance Coverage if the driver is below 24yrs old or less than 2 years driving licence.
- 2 This vehicle is licenced to carry 200 passengers only.
- 3 Hirer is liable to pay first \$2000 as excess all claims any accident plus loss of earning while damaged vehicle is under repair.
- 4 For usage to Malaysia subject to higher excess all claims of S\$5,000.00 and different rental rate
- 5 Please notify our office should there be any accident involving this hired vehicle within 24 hrs
- 6 No refund will be given for vehicle returns early.
- 7 No refund will be given for petrol left in vehicle.
- 8 Hirer is liable to pay all parking fee and traffic summonses.
- 9 Vehicles to be return during office hour only.
- 10 No Service on Public Holiday and Sunday.

CHARGES

Day at \$200.00	per days	\$1400.00
Day at \$	per week	
Day at \$	per month	
TOTAL AMOUNT		\$1400.00
AMOUNT PAID		\$1400.00
BALANCE DUE		
Days Extension From	To	
Amount Deposit (refundable) \$		

SCHEDULE

MODEL

SMP5498B

Mazda 5

Date	Time	Mileage
28/9/22	645 pm.	
5/10/22		

FROM

28/9/22

TO

5/10/22

I/we have read and understood the terms and conditions above and hereby agreed to abide

Hirer's Signature

Hirer's Signature

Driver/Gurantor's Signature

DAWN ENTERPRISES



DAWN ENTERPRISES

21 SELETAR WEST FARMWAY 1
SINGAPORE 798125
TEL: 6383 2661 FAX: 6484 2836
REG. NO. 430058/00D

No. **20649**

OFFICIAL RECEIPT

Date, 5/10/22

Received from Tan Wei Loong Wilson
the sum of Dollars One thousand four hundred only

being Payment Of SMS 5498B (5/10/22 - 28/9/22 - 5/10/22)

DAWN ENTERPRISES

\$ 1400 ~~XX~~
Cash/Cheque No.