



JL PERFECT AUTOWORK PTE LTD

Co. & GST Reg. No.: 202136905K

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

Tel: +65 6341 6789 | Fax: +65 6341 6778

Email: jlperfectautowork@gmail.com

Our Ref.: GBH7778C

Your Ref.: SNC8513C

Date: 04.01.2023

ATTN: Motor Claims Department

INS: **AIG ASIA PACIFIC INSURANCE PTE LTD**

Dear Sir/Madam,

Accident Involving: GBH7778C & SNC8513C

Date of Accident: 30.09.2022 @ 18:15 HOURS

Location: TAMPINES AVENUE 10 TOWARDS PASIR RIS NEAR LP 63/1A

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 2,300.00</u>
Loss of Use:	
(3 Days x \$280)	<u>\$ 840.00</u>
LTA Search:	<u>\$ 7.45</u>
3rd Party GIA Report:	<u>\$ 31.00</u>
Grand Total:	<u>\$ 3,178.45</u>

The above-mentioned settlement is in respect for our client of damage pertaining to his/her motor vehicle and shall not prejudice our client's claim in respect of damages and consequential loss in relation to his/her personal injuries.

For any further queries, please kindly contact Irene @ 8297 9787, or email to jlperfectautowork@gmail.com

Thank You,


Irene



Authorisation To Act

I, Aion Logistics Pte Ltd ("the third party claimant") of
150, Pasir Ris Street 13, #03-58, Singapore 510150
(address), owner of GBH7778C (vehicle no.)
hereby authorise JL Perfect Autowork 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. GBH7778C that was
damaged pursuant to the accident which occurred on 30/09/22 (date)
at/along Tampines Ave 10 towards Pasir Ris Near LP 63/1A
(location) involving vehicle no/s SNC8513C ("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a manner that
they deem it fit and the workshop is further authorised to receive payment further to settlement
of my claim with payment cheque/s being made in favour of the workshop.

I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without
prejudice and without admission of liability basis in so far as any other claim (s) whatsoever by
me and/or the driver/owner/insurers of the other vehicle/s arising from the aforesaid accident
concerned.

Dated this 01 day of 10 (month) 20 22 (year)



Signed by "the third party claimant"



Signed by "the workshop"

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. G547778C and JNC8513C on 30/09/22
at/along Tampines Ave 10 towards Pasir Ris Near LP 63/1A

1. I/We, the Owner of motor vehicle no. G547778C hereby instruct and authorise JL Perfect Autowork Pte Ltd ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$_____ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 01 day of 10 2022

Signature of vehicle owner _____

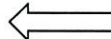
Name: Aion Logistics Pte. Ltd.

IC/UEN No: 201307352W

(Company stamp, if applicable)

Address: 150, Pasir Ris Street 13,
#03-58, Singapore 510150

Tel: _____



Witnessed by: _____

Irane



"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"


AUTHORIZATION TO ACT
(AIG Asia Pacific - Express Third Party Claim)

I, Aion Logistics Pte Ltd ("the third party claimant")
of 150, Pasir Ris Street 13, #03-58, Singapore 510150 (address),
owner of GBH 7778 C (vehicle no.) hereby authorize
JL Perfect AutoWork 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. GBH 7778 C that was damaged pursuant to the
accident which occurred on 30/09/22 (date) along Tampines
Ave 10 towards Pasir Ris Near LP 63/1A (location)
involving vehicle no/s SNC 8513 C
("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.

Dated this 01 day of 10 (month) 20 22 (year)


Signed by "the third party claimant"




Signed by "the workshop"
(with chop)



TAX INVOICE

JL PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136905K

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: jlperfectautowork@gmail.com



Date	Invoice Number	Vehicle Number
04.01.2023	JLP202301-00221	GBH7778C

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-12 AIG BUILDING

SINGAPORE 079120

Description	Amount (SGD)
Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 2,300.00
Total	\$ 2,300.00

Cross cheques and pay: JL PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

JL PERFECT AUTOWORK PTE LTD

AUTO Generated - Signature Not Required

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 01 Oct 2022 / 11:42:20

Receipt Date/Time : 01 Oct 2022 / 11:42:20

Tax Invoice/Receipt

Receipt No. : ITNET-00000-221001-000827

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 - SNC8513C				
As at 30 Sep 2022/18:15:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SNC8513C Enquiry Fee 20221001114115079251	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				
421808XXXXXX9928		eNETS Credit Card		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.



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard #42-01b, Singapore 038989

Email: gears-support@shift-technology.com

GST Reg No: M400017735

UEN: S66SS0020G

TAX INVOICE

JL PERFECT AUTOWORK PTE LTD -
Aion Logistics Pte Ltd

Invoice Number
GR-2022-003759

Invoice Issue Date
04 Oct 2022

Invoice Due Date
11 Oct 2022

Total Amount (S\$) 28.97
Total GST 7.00% (S\$) 2.03
Total Amount Incl. of GST (S\$) 31.00

Bill Type	Reference	Amount (S\$)	GST 7.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	03/10/2022,30/09/2022,GBH7778C,SNC8513C	28.97	2.03	31.00
Total Amount (S\$)				28.97
Total GST 7.00% (S\$)				2.03
Total Amount Incl. of GST (S\$)				31.00

*This is a computer generated document.
No signature is required.*

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	01/10/2022 12:27 (SGT)
Reported by	Driver
Date of Accident	30/09/2022 18:15 (SGT)
Contact Location of Accident	Tampines Ave 10, Singapore
Additional Location Information	TAMPINES AVE 10 TOWARDS PASIR RIS NEAR LP 63/1A
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH7778C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	AION LOGISTICS PTE LTD
Company Reg No	2XXXXX352W
Email Address	WILSONTAN182@GMAIL.COM
Mobile Phone No	(Phone) +65-91273359
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Canter
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	2998

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SI21V14555/VCH/R04

DRIVER

Name of Driver	TAN POH LEONG
NRIC No	SXXXX020Z
Date Of Birth	15/12/1977
Occupation	Outdoor

Date Of Driving Pass	04/08/1999
Driving experience	23 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-81986969
Alt. Phone Number	-
Email Address	WILSONTAN182@GMAIL.COM
Address	BLK 443 TAMPINES STREET 43
Address complement	#10-51
Postcode	520443
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?	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
Yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN 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	SNC8513C
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) -

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.



Policyholder's Signature / Date & Time

[Signature]

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

[Signature]

Witnessed by Reporting Centre Personnel
(Name as in NR/CID card)



Sketch Plan

Vehicle A: GRH 7728C
Vehicle B: SWC 4513C

Describe Circumstance of the Accident

Declaration

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



Policyholder's Signature Date & Time

Driver's Signature of Director and the policyholder Code & Name



Witnessed by Reporting Security Personnel (Working under NR 1-10 code)


ON THE STATED DATE AND TIME. I, VEHICLE A (GBH7778C) WAS TRAVELLING STRAIGHT ON LANE 2 OF TAMPINES AVENUE 10 TOWARDS PASIR RIS NEAR LP 63/1A. SUDDENLY VEHICLE B (SNC8513C) FROM MY RIGHT (LANE 1) CUT INTO MY LANE AND COLLIDED ONTO MY VEHICLE RIGHT PORTION.

VEHICLE A : GBH7778C

VEHICLE B : SNC8513C



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7737020Z



Name
TAN POH LEONG



陈宝良

Race
CHINESE

Date of birth
15-12-1977

Sex
M

Country/Place of birth
SINGAPORE



GBH778C

Dr'm

6461412



NRIC No. S7737020Z



Date of issue
21-07-2020


Address
APT BLK 443 TAMPINES STREET 43
#10-51
SINGAPORE 520443

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S7737020Z**
Name: **TAN POH LEONG**

Birth Date: 15 Dec 1977
Issue Date: 09 Jul 2020

003055618D



GB7778C
drum

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Ambulances / Motor cars \leq 3000kg with \leq 7 passengers, exclusive of the driver / motor tractors or vehicles \leq 2500kg	24 May 1999
Class 4 Heavy motor cars and motor tractors $>$ 2500kg	04 Aug 1999
Class 5 Motor vehicles $>$ 7250kg and not constructed to carry any load	06 Mar 2003

Company: MLS Logistic
HP : 81986969
VEH No : GBH7778C
GBF2631K

NP 428A

Licence No: S7737020Z

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
ROAD TRANSPORT (AMENDMENT) ACT 2019
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959

Certificate No SI21V14555 /VCH /R04
Form MZ301A

Date Of Issue 10-NOV-2021

1.Index Mark and Registration No. of Vehicle: GBH7778C

2.Chassis number of Vehicle: FEA01BA20671

3.Name of Policyholder: AION LOGISTICS PTE LTD

4.Effective date of Commencement of Insurance
for the purposes of the Act: 24-NOV-2021 00:00 AM

5.Date of Expiry of Insurance: 23-NOV-2022 23:59 PM

6.Persons or Classes of Persons
entitled to drive*:

- A) Whilst the vehicle is being used in connection with the Policyholder's business :-
Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.
- B) Whilst the vehicle is being used for social, domestic and pleasure purposes :-
Any person who is driving on the Policyholder's order or with their 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.
And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7.Limitations as to use:

- A) Use in connection with the Policyholder's business.
- B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- C) Use for social, domestic and pleasure purposes.

8.The Policy does not cover:

- A) Use for racing, pace-making, reliability trials or speed-testing.
- B) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
- C) Use for the carriage of passengers for hire or reward.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 are not to be included under these headings.

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.

For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers



Authorised Signature

For Information only:

COVERAGE : Comprehensive, Unlimited Windscreen, Power Tailgate - Sum insured S\$13500.00

SUM INSURED:

EXCESS: All Claims S\$1000, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100

FINANCE COMPANY: MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD

PRODUCER NAME: GOH SOON HENG