

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 : 04.02.2023

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SMH 5185X / SDD 7572B ON 03.01.2023

We are the authorized repair workshop for the owner of motor vehicle no: **SMH 5185X** , which was involved in the captioned accident with your insured vehicle no: **SDD 7572B** . 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 (inclusive of GST)	\$ 6,804.00
2) Loss of Use (3 days x S\$ 60)	\$ 180.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 6,986.00</u>

We enclosed herewith the following documents to support the claims:

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

Tax Invoice : 23323

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn : Motor Claim Department

Date : 02.02.2023

Vehicle No : SMH 5185X

Make/Model : TOYOTA LEXUS CT200H

Chassis/Eng# :

Accident Date : 03.01.2023

Claim No :

Reference : 0123 23323

Policy No :

	Amount
To proceed on lump sum repair	S\$ 6300.00

E. & O. E.

Total : S\$ 6300.00

GST @ 8% : S\$ 504.00

Amount Due : **S\$ 6804.00**


for FASTECH AUTO PTE LTD

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SDD7572B

Date of Accident

04/01/2023 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

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

Period of Insurance **16/06/2022 - 15/06/2023**

Requested By **ALLAN TANG (KIM CHWEE AUT...**

Requested Date **04/01/2023 16:55**

Payment details

Request Amount: **S\$1.85**

GST Amount: **S\$0.15**

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

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**



AUTHORIZATION TO ACT
(AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

I, LIM Kok Poh ("the third party claimant")
of 17 Fernvale Close #06-34 Singapore 797478 (address),
owner of SMH 5185X (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. SMH 5185X that was
damaged pursuant to the accident which occurred on 03.01.2023 (date) along
SIMS WAY SINGAPORE (location)
involving vehicle no/s SDD 7572B ("the accident").

I further authorize the workshop to settle the 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.

Date this 04 day of Jan (month) 20 23 (year)


Signed by "the third party claimant"


Signed by "the workshop"



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	04/01/2023 16:43 (SGT)
Reported by	Both
Date of Accident	03/01/2023 18:45 (SGT)
Exact Location of Accident	Sims Way, Singapore
Additional Location Information	SIMS WAY SINGAPORE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH5185X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM KOK POH (LIN GUO BAO)
NRIC No	S7928714H
Email Address	MUJILIM@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-96348227
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Lexus
Model	Ct200h
Variant	TOYOTA / LEXUS CT200H AUTO STANDARD
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	Private car
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/00708396/02

DRIVER

Name of Driver	SUAN TJU
NRIC No	S2189406J
Date Of Birth	02/03/1954
Occupation	Indoor

Date Of Driving Pass	30/03/1984
Driving experience	38 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97983909
Alt. Phone Number	-
Email Address	MUJILIM@YAHOO.COM.SG
Address	246 ONAN ROAD
Address complement	-
Postcode	424627
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Parent
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	Side Swipe
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)	2
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	PAX 1
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sengkang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003438999
Alt. Police Station Phone No	(Fax) +65-63438939
Police Station Address	2 Sengkang Square #01-02
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD
TEL 67415336

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDD7572B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM KWONG FEI
NRIC No	S6934973J
Contact Number	(Phone) +65-96907190
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

WITNESS DETAILS

WITNESS 1

Name	KELVIN
Phone	(Phone) +65-97815152
Email	-

SKETCH PLAN

Describe Circumstance of the Accident

REFER TO POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Policyholder's Signature / Date & Time

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

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

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 _____

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

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

Sketch Plan

1


**SINGAPORE
POLICE FORCE**


T/20230104/2000

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. T/20230104/2000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/01/2023 00:02		Vide Report No.:		Station Diary No.: 1	
Informant's Particulars					
Name of Informant: SUAN TJU			Address: 246 ONAN ROAD SINGAPORE 424627		
ID Type / ID No.: NRIC NO / S2189406J			Contact No.: Home/Office: Mobile: 97983909		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 68	Date of Birth: 02/03/1954	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Company director			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 03/01/2023 18:45	Type of Location: Merging lane
Location: SIMS WAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SDD7572B	Car	MERCEDES BENZ		Grey	Slightly Damaged	0
SMH5185X	Car	LEXUS	LEXUS CT200H	Black	Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20230104/2000

2 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20230104/2000

CONTINUATION OF REPORT

Driver			
Name	LIM KWONG FEI	ID No.	NIL
Related Vehicle	SDD7572B (Car)	Contact No.	96907190
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	NIL
Driver			
Name	SUAN TJU	ID No.	S2189406J
Related Vehicle	SMH5185X (Car)	Contact No.	97983909
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above-mentioned date and time, I was driving along Sims Way with my car SMH5185X.

While driving, I then came into merging lane and the slowly drive as the traffic on the merging lane was heavy.

Subsequently while driving into a merging lane, a car SDD7572B then cut me off from the back and went forward on my left side. Upon doing so, the rear right side of his car collided onto the front left side of my vehicle.

However, the driver did not stop. I then pursued the driver and we subsequently stopped before Paya Lebar exit.

After stopping, the driver informed me that he did not notice the collision as such he did not felt it. He also claimed that he was not in the wrong and to settle this issue with our insurance.

We then exchanged particulars and subsequently drove off.

My car suffered damages on the front left side. I also have in-car footage of what happened.

**SINGAPORE
POLICE FORCE**

T/20230104/2000

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

3 of 3

Report No. T/20230104/2000

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:

F /

SGT 2 MUHAMMAD SUHAIRI
BIN MOHD HAMZAH

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

04/01/2023 00:02

Officer In Charge Of Case:

TP / GIA /


SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:

NP168

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7928714H




LIM KOK POH
(林國寶) GUOBAO)
林國寶

Place
CHINESE

Date of birth
15-09-1979

Country of birth
SINGAPORE



S7928714H

For Insurance Reporting And
Claim Purposes Only

NRIC No. S7928714H



Date of issue
24-09-2009

17 FERNVALE CLOSE #06-34
SINGAPORE 797478

NRIC No: S7928714H Date: 01/07/2017



For Insurance Reporting And
Claim Purposes Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Insurance Reporting And
For Purposes Only

Licence Number: **S2189406J**

Name: **SUAN TJU**

Birth Date: **02 Mar 1954**

Issue Date: **14 Feb 2003**

000196022C



REPUBLIC OF SINGAPORE

IDENTITY CARD No. **S2189406J**



Name: **SUAN TJU**

種 珠

Race: **CHINESE**

Date of birth: **02-03-1954**

Country/Place of birth: **INDONESIA**

Sex: **F**

S2189406J





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

Class 3: **Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms**

PASS DATE: **30 Mar 1964**

Licence No: **S2189406J**



IP 428A

5425185



Licence No. **S2189406J**



Date of issue: **30-09-2015**

Address: **248 ONAN ROAD
SINGAPORE 424627**

direct
asia

● A HISCOX COMPANY

Contact us at

Hotline: (65) 6665 5555

E-mail: customerservice@directasia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. : MT/00708396/02
Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)
1) Vehicle Registration No. : SMH5185X
Chassis No. : JTHKD5BH902018528
2) Name of Policy Holder : LIM KOK POH,
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act : 12/05/2022 00:00
4) Date/Time of Expiry of Insurance : 11/05/2023 23:59
5) Persons or Classes of Persons Entitled to Drive
(a) Any named person under the policy who is driving on the Policyholder's permission.
(b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured : Market Value
Own Damage Excess : S\$ 900.00
Windscreen Excess : S\$ 100.00
Choice of workshop : DirectAsia approved workshops
Finance company / Hire Purchase : Hong Leong Finance Limited
Main driver : LIM KOK POH,
Named driver : None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

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 the Road Transport Act, 1987 (Malaysia).

Issued on: 12/04/2022

Direct Asia Insurance (Singapore) Pte. Ltd.

Underwriting Manager

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	714H
Vehicle Details	
Vehicle No.:	SMH5185X
Vehicle to be Exported:	No
Intended Deregistration Date:	04 Jan 2023
Vehicle Make:	TOYOTA
Vehicle Model:	LEXUS CT200H AUTO STANDARD
Primary Colour:	Black
Manufacturing Year:	2011
Engine No.:	2ZRR275555
Chassis No.:	JTHKD5BH902018528
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$33,555.00
Original Registration Date:	12 May 2011
First Registration Date:	12 May 2011
Transfer Count:	2
Actual ARF Paid:	\$20,133.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	30 Apr 2031
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$47,316.00
COE Rebate Amount:	\$39,377.00
Total Rebate Amount:	\$39,377.00

The information contained herein is correct as at 04 Jan 2023

OK