

**HD PERFECT AUTOWORK PTE LTD**

Co. & GST Reg. No.: 202136904Z

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

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

Email: hdperfectautowork@gmail.com

Our Ref.: SLL6663SYour Ref.: SLS2322RDate: 21.02.2023

ATTN: Motor Claims Department

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

Dear Sir/Madam,

Accident Involving: SLL6663S & SLS2322RDate of Accident: 30.12.2022 @ 13:20 HOURSLocation: SLIP ROAD OF TAMPINES LINK TOWARDS TAMPINES AVENUE 10

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	<u>\$ 6,400.00</u>
Loss of Use:	
(7Days x \$180.00):	<u>\$ 1,260.00</u>
LTA Search :	<u>\$ 26.75</u>
Towing Fee:	<u>\$ 120.00</u>
Grand Total:	<u>\$ 7,806.75</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 hdperfectautowork@gmail.com

Thank You,


Irene



HD PERFECT
AUTOWORK PTE LTD

HD Perfect Autowork Pte. Ltd.
Co. Reg No: 202136904Z
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: hdperfectautowork@gmail.com

Authorisation To Act

I, Amanda Jillian Toh Tong Jie ("the third party claimant") of
Bik 325 Ang Mo Kio Avenue 3 #10-1900 Singapore 560325
(address), owner of SLL 66635 (vehicle no.)
hereby authorise HD 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. SLL 66635 that was
damaged pursuant to the accident which occurred on 30/12/2022 (date)
at/along Slip Road Tampines Link toward Tampines Avenue 10
(location) involving vehicle no/s SLS 2322R ("the accident").

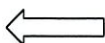
I further hereby authorise the workshop to settle my above mentioned claim in a manner that
they deem it fit and the workshop is further authorised to receive payment further to settlement
of my claim with payment cheque/s being made in favour of the workshop.

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 03 day of 01 (month) 20 23 (year)

Signed by "the third party claimant"



Signed by "the workshop"

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SLL 6663S and SLS 2322R on 30/12/2022
at/along Slip Road Tampines Link toward Tampines Avenue 10

1. I/We, the Owner of motor vehicle no. SLL 6663S hereby instruct and authorise HD 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 03 day of 01 2023

Signature of vehicle owner

Name: Amanda Jillian Toh Tong Jie

IC/UEN No: S87018996

(Company stamp, if applicable)

Address: Blk 325 Ang Mo Kio Avenue 3

10-1400 Singapore 560325

Tel: 8366 6981

Witnessed by:

Jrene



"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, Amanda Jillian Toh Tong Jie ("the third party claimant")
of Blk325 Ang mo Kio Avenue 3 #10-1900 Singapore 560325 (address),
owner of SLL 6663S (vehicle no.) hereby authorize
HD 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. SLL 6663S that was damaged pursuant to the
accident which occurred on 30/12/2022 (date) along Slip Road
Tampines Link toward Tampines Avenue 10 (location)
involving vehicle no/s SLS 2322R
("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 03 day of 01 (month) 20 23 (year)

Signed by [Signature] "the third party claimant"

Signed by [Signature] "the workshop"
(with chop)



HD PERFECT
AUTOWORK PTE LTD
UEN: 2021369047

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: hdperfectautowork@gmail.com



**HD PERFECT
AUTOWORK PTE LTD**

Date	Invoice Number	Vehicle Number
21.02.2023	HDP202302-00350	SLL6663S

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	\$ 6,400.00
Total	\$ 6,400.00

Cross cheques and pay: HD PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

HD 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 : 02 Jan 2023 / 16:56:11

Receipt Date/Time : 02 Jan 2023 / 16:56:11

Tax Invoice/Receipt

Receipt No. : ITNET-00000-230102-001357

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 - SLS2322R				
As at 30 Dec 2022/13:20:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SLS2322R			
	Enquiry Fee	24.77	1.98	26.75
	20230102165504594092			
	Sub-Total	24.77	1.98	26.75
	Total Before Rounding	24.77	1.98	26.75
	Rounding Difference			0.00
	Total Amount Payable			26.75
Paid By				
	421808XXXXXX9928	eNETS Credit Card		26.75
	Total			26.75
	Cash Change			0.00
	Tendered Amount			26.75
	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.



AUTOW Recovery Services

Hotline: +65 9392 4545

Email: info.autow@gmail.com

8 Kaki Bukit Avenue 4, #08-41 Premier @ Kaki Bukit, Singapore 415875
ROC: 53347242C

CASH ORDER / WORK ORDER

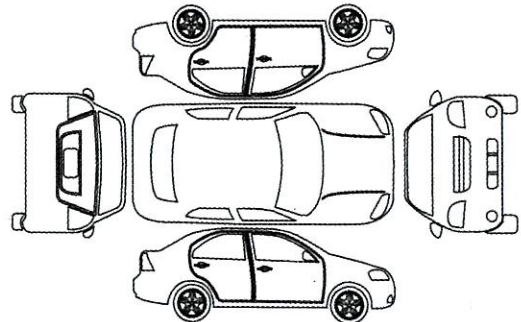
No. A 17875

Service Date: 30/12/2022 Time Received: 1340
Member Name: Cy5 Time Arrived: 1410
NRIC No.: _____ Time Completed: 1430
Contact No.: 83666981 From: Slip Rd of Tampine Link
Car Reg No.: SL4663S To: Kaki Bukit Premier @ 08
Car Make/Model: Merz C180 Tow Truck No.: YP 4655D
Remarks: _____ Amount: \$120
Cash / Credit

ADDITIONAL CHARGES:

- ☒ Dolly Wheels / Flat Bed
- ☐ Basement / Multi Storey
- ☐ Crane up / Bogged
- ☐ Causeway / Second Link
- ☐ Low Body Kit
- ☐ Collection of Key
- ☐ ERP / Carpark _____

BODY & PAINT CONDITION:



XOhy
Tow Diver's Name & Signature

Member's Name & Signature

Note: Vehicle is towed at owner's risk. The company accepts no responsibility for damage or other misdemeanour to your vehicle / asset whilst being towed.

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	31/12/2022 10:49 (SGT)
Reported by	Both
Date of Accident	30/12/2022 13:20 (SGT)
Exact Location of Accident	Tampines Link, Singapore
Additional Location Information	SLIP RD OF TAMPINES LINK TOWARD TAMPINES AVE 10
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL6663S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Toh Tong Jie Amanda Jillian
NRIC No	S8701899G
Email Address	luvayn@gmail.com
Mobile Phone No	(Phone) +65-83666981
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1595

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	B300658409QMY

DRIVER

Name of Driver	Toh Tong Jie Amanda Jillian
NRIC No	S8701899G
Date Of Birth	27/01/1987
Occupation	Indoor

Date Of Driving Pass	24/11/2009
Driving experience	13 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-83666981
Alt. Phone Number	-
Email Address	luvayn@gmail.com
Address	Blk 325 Ang Mo Kio Ave 3 #10-1900
Address complement	-
Postcode	560325
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?	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

I STOPPED MY CAR (SLL6663S) ALONG THE SLIP ROAD TAMPINES LINK TOWARD TAMPINES AVE 1 AS THERE WERE CAR ON THE MAIN ROAD.

AS I STOPPED MY CAR (SLL6663S), VEHICLE B (SLS2322R) CAME FROM THE REAR DID NOT STOP ON TIME AND COLLIDED ONTO MY REAR PORTION.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	REFER TO KO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLS2322R
Vehicle Manufacturer	Nissan
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 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 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.

Kerlyn Ong Kai Li

DID : 6771 4420 HP : 9186 5113

Email : kerlyn.ong@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Ltd

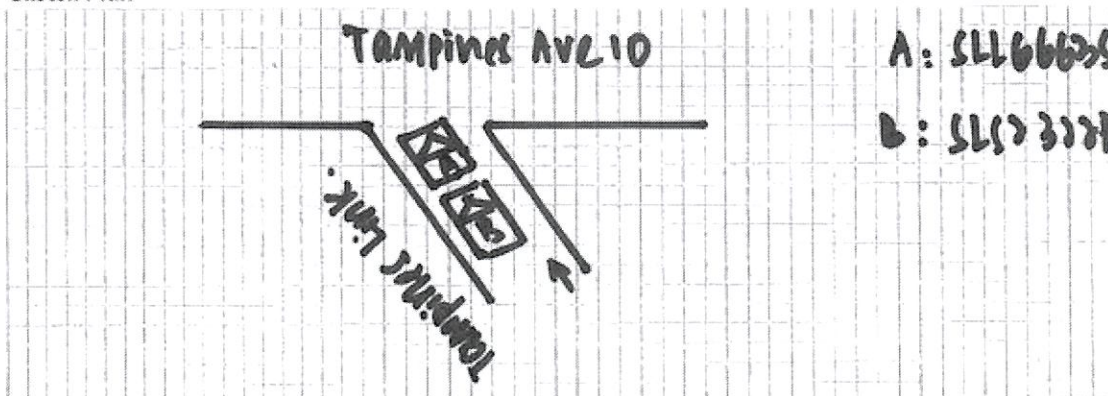
Customer Service Centre - Pandan Loop

Policyholder's Signature / Date &
Time 31/12/2022 1029

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

Witnessed by Reporting Centre
Personnel KERLYN

Sketch Plan




Describe Circumstances of the Accident

I STOPPED MY CAR (SLL6663S) ALONG THE SLIP ROAD TAMPINES LINK TOWARD TAMPINES AVE 1 AS THERE WERE CAR ON THE MAIN ROAD.

AS I STOPPED MY CAR (SLL6663S), VEHICLE B (SLS2322R) CAME FROM THE REAR DID NOT STOP ON TIME AND COLLIDED ONTO MY REAR PORTION.

Declaration

We declare the foregoing particulars are true in every respect.




Policyholder's Signature / Date &
Time 31/12/2022 1029

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

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Witnessed by Reporting Centre
Personnel KERLYN

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8701899G



Name
AMANDA JILLIAN TOH TONG JIE
卓 瞳 珏

Race
CHINESE

Date of birth
27-01-1987

Sex
F

Country/Place of birth
SINGAPORE

SLL 6663S

Owner and Driver

5880070



NRIC No. S8701899G



Date of issue
27-02-2018

Address
APT BLK 325 ANG MO KIO AVENUE 3
#01-1900
SINGAPORE 560325

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S8701899G**
Name: **AMANDA JILLIAN TOH TONG JIE**

Birth Date: **27 Jan 1987**
Issue Date: **11 Jan 2019**



 002891082F

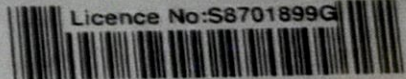
SLL 66635

owner and driver

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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	24 Nov 2009

NP 428A

 Licence No: S8701899G



MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G GST Reg. No. 20-0412212G
A Member of **MS&AD** INSURANCE GROUP

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

MOTORMAX PLUS Comprehensive

Certificate No. B 300658409 QMY

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SLL6663S

2. Name of Policyholder

AMANDA JILLIAN TOH TONG JIE

3. Effective Date of the Commencement of Insurance for the purposes of the Act

07/10/2022

4. Date of Expiry of Insurance

06/10/2023

5. Persons or Classes of Persons entitled to drive*

AMANDA JILLIAN TOH TONG JIE

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

*Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

6. Limitations as to Use *

Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

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

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP. REFER TO MSIG.COM.SG FOR LIST OF AUTHORISED WORKSHOPS.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

Mack Eng
Chief Executive Officer