FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date: 11.02.2023

China Taiping Insurance Singapore Pte Ltd 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SLF 364B / SMV 8865Z AND OTHER ON 21.01.2023

We are the authorized repair workshop for the owner of motor vehicle no: SLF 364B , which was involved in the captioned accident with your insured vehicle no: SMV 8865Z . 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.

		\$ 18,982.00
3)	GIA Search Fee	\$ 2.00
2)	Loss of Rental	\$ 1,700.00
1)	Cost of Repair (inclusive of GST)	\$ 17,280.00

We enclosed herewith the following documents to support the claims:

- a) Final Repair Invoice
- c) GIA Search Report
- e) GIA Report
- g) I/C & Driving License
- i) Vechicle Registration Log Card

- b) Car Rental Invoice / Agreement
- d) Letter of Authorisation, etc...
- f) Police Report
- h) Insurance Certificate

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: 23347

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn: Motor Claim Department

Date

:10.02.2023

Vehicle No

:SLF 364B

Make/Model TOYOTA COROLLA ALTIS

Chassis/Eng#

Accident Date @ 21.01.2023

Claim No

Reference

0123 -23347

Policy No

Amount

To proceed on lump sum repair

S\$

16000.00

E. & O. E.

Total: S\$ GST @ 8% : S\$

16000.00 1280.00

Amount Due: \$\$

17280.00

for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 22981

Name Ho	en Nee		REG. No.	MAKE	MODE	_:		
ADDRESS 93	BUK17 DRIVE		SLH 76312	DIES	EL	PETROL	E 1/4 1/2 3/4	4 F
# 10	-28		KM		DATE & TIME IN 07.01.2013@ [7:25] DATE & TIME OUT		- ch	
		P 1	KM OUT		DATE	& TIME O	UT UT	
3 Ing	apore \$8784	4	KM DRIVEN		TIME	USED	013@ 15:11	D ru
NAMED DRIVER			DITIVELY					
	Lim Kai En	1 20 102 27 122 12						
DRIVING LICENCE NO 2 9403 > 63 F	DATE OF EXPIRY	PLACE OF ISSUE		HOURS	@ S\$			
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	17	DAYS	@S\$	100.0	0 \$1700.	.00
ADD NAMED DRIVER				WEEKS	@S\$			
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	M	ONTHS	@SS			
PASSPORT NO	SSPORT NO DATE OF ISSUE PLACE OF ISSUE		BY INITIALLING, RENTER AGREES TO PAY ADD FEE		OOD TOTAL			
IMPORTANT NOTES:			FOR COLLISION DA WAIVER (C.D.W.)	WAGES				
This vehicle is licenced to carry 04 No relund will be given for vehicle No relund will be given for period Hirer is liable to pay loss of earning	returns early left in vehicle	N. ranair			TOTA	AL RENTAL	\$1700.0	60
Hirer is liable to pay all parking fee Vehicle return during office hour o	e and traffic summonese nly	этеран		DELI	VERY FEE			
No service on public holiday and \$ Geographical areas: Singapore & Driver must be:			V	V			EE	
 a) 18 years old and above b) Holding a valid relevant class of The vehicle is strictly to be driven agreement The hirer is not allowed to sub-let 	by the person to whom it is hired	to and the additional driver named in the	PER DAY PER V	VEEK	PER N \$	IONTH		
ADDITIONAL CONDITIONS:			BY INITIALLING, R	ENTER				
COMPREHENSIVE COVERED E 'Section I - Used in S'pore only: 'Section II - Used in S'pore only: 'Wiscreen Excess In S'pore: SGE	SGD 2000 00	Used outside S'pore : SGD 4000 00 Used outside S'pore : SGD 3000,00 xcess Outside S'pore : SGD 100.00	AGREES TO PAY AI FOR PERSONAL ACC INSURANCE (P.A.L.)	CIDENT				
THIRD PARTY COVERED EXCES 'Hirer must bear all costs to the da' Section II – Used in S'pore only:	amages of the return vehicle		X					
*Hirer must bear all costs to the da *Section II – Used outside S'pore			PER DAY PER V	VEEK	PER M \$	ONTH		
YOUNG AND INEXPERIENCE DE Hirer or any authorized driver who 18 month or less driving experience	is aged 22 years old (on the date	of accident) and below or possess only	PREPAYMENT		TOTA	L CHARGE		
COMPREHENSIVE COVERED ET Section I – Used in S'pore only : S		IJENCE DRIVER) Jsed outside S'pore : SGD 12,000.00	CHECK		DEPO	DSIT		
*Section II – Used in S'pore only : *W/screen Excess In S'pore : SGD	SGD 6000 00 Section II -	Used outside S'pore : SGD 12,000.00 ccess Outside S'pore : SGD 100.00	CASH					
THIRD PARTY COVERED EXCES *Hirer must bear all costs to the da *Section II – Used in S'pore only:	mages of the return vehicle	CE DRIVER)	RECEIPT NO.		NETT	CHARGE		
*Hirer must bear all costs to the da *Section II – Used outside S'pore :								
Hirer is responsible for any co			AMOUNT DUE / REI	FUND				
I HAVE READ THE TERMS OF THIS RENTAL AGREEM								
SIGNED BY THE PARTIES H	ERETO ON THE		DAY OF				2773333 337777443344444444444	
	7. (
					y	1	•	
V	1/0		Y		/			

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: HO YEN NEE

Invoice

: DCR-2023-02-07

Date 07.02.2023

Agreement No : 22981 Payment Terms : LOD

DES	CRI	ГPТ	'OI	N
12111	V-1V		1 (/	I V

AMOUNT

Rental charges for vehicle: SLH 7631Z (0123-23347)

1,700.00

Rental Period from 21.01.2023 to

07.02.2023

E. & O. E.

Total

1,700.00

KE LI

for Dynamic Car Rental

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SMV8865Z

Date of Accident

21/01/2023

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance China Taiping Insurance (Sing...

Period of Insurance ________11/06/2022 - 10/06/2023

Requested By ______ALLAN TANG (KIM CHWEE AUT...

Requested Date ______25/01/2023 12:37

Payment details

Request Amount: **\$\$1.85** GST Amount: **\$\$0.15**

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

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

	r ^x e
•	DATE : 21.01. 2023
	TO : (HINA TAIPING INSURANCE SINGAPORE PTE LTD
	RE: ACCIDENT INVOLVING VEHICLE NO. SLF 364 B / SMV 8865 Z and other ALONG PIE towards tuas ON 21.01. 2023
	of (NRIC No./ROC No.) S1481 363 B of 93 Bukit Drive # 10-28 singapore x87844 owner of vehicle no. SLF 364 B in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle SLF 364B at my/our instruction and hereby authorise M/s FASTECH AUTO PTE LTD 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.
<u></u>	I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.
5	Signature of Owner: Name of Owner:

SY03231Q0001 / YEW TEE AUTOMOBILE TECH PTE LTD [417800] ENTRY DATE & TIME: 26/01/2023 10:56 (SGT) SUBMITTED BY: TOH LEI MING VERSION: 1 (26/01/2023 10:56 (SGT))

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 witholding 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 26/01/2023 10:56 (SGT) Reported by Driver Date of Accident 21/01/2023 05:10 (SGT) Exact Location of Accident Singapore Additional Location Information PIE (TUAS) 15.2 KM Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLF364B

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner HO YEN NEE NRIC No S1481363B Email Address ENJIR07@HOTMAIL.COM Mobile Phone No (Phone) +65-97319681 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Corolla 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

No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5108989792-03

DRIVER

Name of Driver LIM KALEN NRIC No. S9403263F Date Of Birth 21/01/1994 Occupation Outdoor

Date Of Driving Pass 20/03/2013 Driving experience WHITE WALLET IT THE LOCAL COLUMN TO THE COLU 9 YEARS AND 10 MONTHS Gender Male Mobile Number (Phone) +65-96790687 Alt, Phone Number Email Address LIM.KAIEN1994@GMAIL.COM Address 93 BUKIT DRIVE #10-28 Address complement Postcode 587844 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 Chain Collision Weather Conditions **CLOUDY** Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? Yes Number of vehicles involved in the accident 3 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) 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 FOREIGN VEHICLE 1 Vehicle Registration Number PQL8064 Vehicle Category Motorcycle **DETAILS OF POLICE ACTION** Was the accident reported to the police? Police Station Name **Traffic Police** Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given?

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

If yes, against whom?

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	SMV8865Z
Vehicle Manufacturer	π:
Vehicle Model	777
Vehicle Variant	3
Vehicle Colour	<u>~</u>
Vehicle Category	Private car
Name of Driver	¥
Contact Number	÷
Address	#.
Address complement	₩.
Postcode	<i>m</i>
Insurance Company Name	8
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	#

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	PQL8064
Vehicle Manufacturer	₹.
Vehicle Model	ë
Vehicle Variant	2
Vehicle Colour	w w
Vehicle Category	Motorcycle
Name of Driver	×
Contact Number	~
Address	-
Address complement	=
Postcode	-
Insurance Company Name	ä
Nature Of Damage	=
Details of property damaged in accident	2
No. Of Passenger (Including Driver)	*

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	-
INJURED 2	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old	± € 2
Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	PQL8064 No Yes

Describe Circumstances of the Accident

Please refer	police report	T/ 20230125/7040	
	10 750		
laration			
declare the foregoing particular	s are true in every respec	ct.	
	LL.	25/01/23	
yholder's Signature / Date &	Driver's Signature (If dr	iver is not the policyholder) / Date	Winessed by Reporting Centre

SKETCH PLAN

IMPORTANT NOTICE

- 1. Flease 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 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. 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)

lunderstand, acknowledge, agree and consent that

- (a) My insurer into 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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the posses), 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.
- (4) investigating the accident and/or my claims;
- (ii) carrying out and/or dealing with my instructions or responding to any enquines by me,
- (iv) administering my claims (including the making 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/faw firms, may/are permitted to collectuse, 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 yers/law firms) which may be sized outside of Singapore, for one or more of the above Purposes.

Poscynolder's Signature / Date & Time

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

Sketch Plan

A = SLF 3648

B = 5MV 3865 = C = PQIL 2064





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20230125/7040

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/01/2023 15:01		Vide Report No.:	Station Diary No.:			
Informa	nt's Partic	ulars				
Name of LIM KAI	Informant: EN		Address: 93 BUKIT DRIVE #10-28 SINGAPORE 587844			
	/ ID No.; D / S94032	63F	Contact No.: Home/Office: Mobile: 96790687			
Nationality: SINGAPORE CITIZEN			Email: LIM.KAIEN1994@GM	AIL.COM		
Sex: Male	Age: 29	Date of Birth: 21/01/1994	Type of Informant:			
Race: Chinese		Language: Institution / School Na English				
Occupation:		Driving Licence Information: Class: Date of Expiry:				

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/01/2023 05:10	Type of Location: Straight Road
PIE TUAS 15	.2KM			
Weather: Cloudy		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light

Vehicle No.	Type	Make	Model	Color	Conditio	No of
PQL8064	Motorcycle				Seriously Damaged	0
SLF364B	Car	ТОУОТА			Seriously Damaged	0
SMV8865Z	Car	PORSCHE			Seriously Damaged	0



Police Station Of Origin: **Traffic Police**

2 of 3 Report No. T/20230125/7040

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pe	destriar	Cross	ing: NA
Driver						
Name	LIM KAI EN			ID No	.	S9403263F
Related Vehicle	SLF364B (Car)			Conta	ct No.	96790687
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL		SPITAL	Class Drivin Licend Expin	g ce &	Class: NIL Date of Expiry: NIL
Date	21/01/2023	-	Date	-	21/01	/2023
No. of Days gran	ted Medical Leave	NIL	Degree o	f	Serio	

Brief Details.

ON 21/01/2023 AT OR ABOUT 5:10AM, I WAS TRAVELLING ALONG PIE TOWARDS TUAS. THERE WAS AN ACCIDENT INVOLVING MUTIPLE VEHICLES AT LANE 1 AND 2, ONE OF VEHICLES WAS IN FLAMES AND SEVERVAL INJURED WAS ON THE GROUND. I STOPPED MY VEHICLE AND ALIGHTED TO RENDER HELP. 10 MINS LATER VEHICLE SMV8865Z REAR ENDED MY VEHICLE. I WAS STANDING IN FRONT OF MY VEHICLE,. THE IMPACT CAUSED MY VEHICLE TO MOVE FORWARD AND HIT ME. A MALAYSIAN MOTORCYCLE PQL8064 WAS ALSO INVOLVED.

THE MOTORCYCLIST WAS CONVEYED BY AMBULANCE.

I WAS INJURED DUE TO THE IMPACT AND WAS ISSUED WITH A 5 DAY MC BY NUH

REPORT NO: T/20230122/7000





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20230125/7040

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 25/01/2023 15:01
Officer In Charge Of Case: TP / TPIB / YAN MINGSHENG DANIEL Contact No.: 65476252	Classification Of Case:





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 4 Report No. T/20230122/7000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/01/2023 00:59		Vide Report No.: E/20230121/0046	Station Diary No.	
Informa	nt's Partic	ulars		
Name of LIM KAI	Informant: EN		Address: 93 BUKIT DRIVE #10-	28 SINGAPORE 587844
ID Type NRIC NO	/ ID No.: D / S940320	63F	Contact No.; Home/Office:	Mobile: 96790687
National SINGAP	ily: ORE CITIZ	EN	Email: LIM.KAIEN1994@GM	AIL.COM
Sex: Male	Age: 29	Date of Birth: 21/01/1994	Type of Informant: Driver	
Race: Chinese		Language: English	Institution / School Name:	
Occupation:		Driving Licence Inform Class: 3	ation: Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/01/2023 05:10	Type of Location: Left bend on PIE	
Location: KIM KEAT A	/ENUE				
Weather: Cloudy		Road Surface: Wet		load Speed Limit: 0 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	·	Traffic Volume: Light	
Type of Collis Moving vehic		Anyone conveyed by ambulance:			

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLF364B	Car	TOYOTA	Corolla Altis	Silver	Seriously Damaged	0
SMV8865Z	Car	PORSCHE	Cayman	Gold	Seriously Damaged	0
	Motorcycle	-	-			0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20230122/7000

CONTINUATION OF REPORT

Detans of V	ehicle Insurance	The second secon		
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLF364B	NTUC Income Insurance Co-Operative Limited	5108989792-03	11/08/2022	11/08/2023
SMV8865Z	LIBERTY INSURANCE PTE LTD			

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestriar	lo. of Pedestrians Injured: NIL Use of Ped			destrian Crossing: NA		
Driver						
Name	LIM KAI EN			ID No.		S9403263F
Related Vehicle	SLF364B (Car)			Contact No.		96790687
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date	21/01/2023 Date					/2023
No. of Days gran	ted Medical Leave 05 Degree of					
Driver					3.13	
Name	CHONG CHAN WOON (ZHANG ZANWEN)			ID No.		S7720085A
Related Vehicle	SMV8865Z (Car)			Contact No.		NIL
Hospital/Clinic	NIL			Class of Driving Licence Expiry	e &	Class: NIL Date of Expiry: NIL
Date	NIL		Date	20,45,5	NIL	
	led Medical Leave	NIL	Degree of			
Rider	and the state of t		1 2 3, 00 01		. 1152	
Name	Unknown Rider			ID No.		NIL
Related Vehicle	(Motorcycle)			Contact No.		NIL
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days grant	ed Medical Leave	NIL	Degree of		NIL	



T/202301**22/7000**

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20230122/7000

CONTINUATION OF REPORT

Brief Details.

PIE towards Tuas after CTE/SLE slip road. Accident took place as my vehicle was stationary in lane 1 due to another accident directly ahead of me on lane 1 and 2. The two other vehicles involved was a car(SMV8865Z) and a motorbike(did not manage to get details as he had a paramedic attending to him and was conveyed to hospital). I was rear ended by the Porsche,

I have photos and videos exceeding 2mb of the aftermath of the accident.



T/20230122/7000

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

Informant is not able to provide sketch

Sketch Plan

4 of 4 Report No. T/20230122/7000

CONTINUATION OF REPORT

00:59
n Of Case:
-









林 CHINESE Date of birth 21-01-1994 Country of birth

SINGAPORE

For Insurance Reporting An Claim Purposes Only





Date: 27709/2019

93 BUKIT DRIVE #10-28 SINGAPORE 587844 NRIC No: \$9403263F

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

Motor Cars=< 3000kg with =<7 passengers, exclusive 20 Mer 2013 of the driver; and other motor vehicles =< 2500kg

For Insurance Reporting And Claim Purposes Only

NP 428A *



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 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5108989792-03 Cover: drivo CLASSIC

: SLF364B 1. Index mark and Registration Number of Vehicle

Chassis Number : MR053REH104551130

: HO YEN NEE 2. Name of Policyholder 3. Effective Date of Insurance : 11 Aug 2022 4. Expiry Date of Insurance : 10 Aug 2023

5. 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.

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.

- 6. Limitations as to Use#
 - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.
 - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1) : S\$600 **EXCESS (SECTION 2)** N/A WINDSCREEN EXCESS : S\$100 ADDITIONAL EXCESS ≨ N/A UNNAMED DRIVER EXCESS

PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO **INSURE WITH COE** : YES NCD PROTECTION YES (FREE) ROADSIDE ASSISTANCE AND WELLNESS COVER : NO TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** ₹ NO PRIMARY DRIVER * HO YEN NEE NAMED DRIVER (1) **LIM TEE AUN** NAMED DRIVER (2) ELIM KALEN HIRE PURCHASE COMPANY ₹ N/A

SUM INSURED MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

ASSURE PTE. LTD. (00000572842) Agency

23 Jun 2022 12:44 hrs Date of Issue

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	363B
Vehicle No.:	SLF364B
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Jan 2023
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS CLASSIC 1.6 CVT
Primary Colour:	Silver
Manufacturing Year:	2016
Engine No.:	1ZRY292782
Chassis No.:	MR053REH104551130
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$17,982.00
Original Registration Date:	11 Aug 2016
First Registration Date:	11 Aug 2016
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$17,982.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	10 Aug 2026
PARF Rebate Amount: Intended COE Rebate Details	\$11,688.00
COE Expiry Date:	10 Aug 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$52,503.00
COE Rebate Amount:	\$18,601.00
Total Rebate Amount:	\$30,289.00

The information contained herein is correct as at 25 Jan 2023

OK