

**FORZA AUTOHAUS PTE LTD**

39 WOODLANDS CLOSE, #01-34/35, MEGA@WOODLANDS  
SINGAPORE 737856  
TEL: 62781889 EMAIL: ENQUIRY@FORZAAUTO.SG  
CO./GST REG: 201833292C

Our Ref : C22120018

Your Ref : YQ5121R

13/02/2023

**INCOME INSURANCE LIMITED**

1 MARITIME SQUARE #10-01 HARBOUR FRONT CENTRE  
Singapore 099253

**WITHOUT PREJUDICE**

**BY EMAIL @ MTCL@INCOME.COM.SG**

**Attn: MOTOR CLAIMS DEPARTMENT**

Dear Sir/Madam

**CLAIMANT: CYK ENGINEERING PTE LTD**

**RE: ACCIDENT INVOLVING VEHICLES GBF2107H AND YQ5121R AT 5 SOON LEE ST #05-46, DRIVEWAY OUTSIDE THE UNIT IN THE BUILDING ON 22/12/2022 AT ABOUT 10:20.**

We refer to the above matter.

Please find our claims as follows:-

1. COST OF REPAIR (\$430 BEFORE GST)	\$	464.40
2. LOSS OF USE FOR 2 DAYS @\$90 PER DAY	\$	180.00
3. LTA SEARCH	\$	2.00
Total	\$	646.40

**Pre-repair inspection arranged on 07/02/2023 and was surveyed on 07/02/2023.**

A copy each of the following supporting documents is enclosed:

1. GIA Report
2. Final Repair Bill
3. LTA search
4. Vehicle Registration Card
5. Insurance Certificate
6. Letter of Authority & Payment Authorisation

Yours faithfully



FORZA AUTOHAUS PTE LTD

**FORZA AUTOHAUS PTE LTD**

39 WOODLANDS CLOSE, #01-34/35, MEGA@WOODLANDS

SINGAPORE 737856

TEL: 62781889

EMAIL: ENQUIRY@FORZAAUTO.SG

CO./GST REG: 201833292C

**Invoice****INCOME INSURANCE LIMITED**1 MARITIME SQUARE #10-01 HARBOUR FRONT CENTRE  
Singapore 099253

Inv No. : DI23020004

Date : 17 Feb 2023

Ref : C22120018

Currency : SGD

Terms : COD

Veh No. : GBF2107H

#	Description	Qty	UOM	U/P	Disc	Amt
1	GLOBAL SUM	1.00		430.00	0.00	430.00

**Remarks:**

3RD PARTY CLAIM

**Payment Instruction:**All cheques payable to: FORZA AUTOHAUS PTE LTD  
Bank Account: UOB 374-320-954-9  
PayNow UEN: 201833292C

Subtotal :	S\$ 430.00
GST 8.0% :	S\$ 34.40
<b>Total :</b>	<b>S\$ 464.40</b>

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

**For Forza AutoHaus Pte Ltd**

(Authorised Signature)

## 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	31/01/2023 11:52 (SGT)
Reported by	Owner
Date of Accident	22/12/2022 10:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	5 SOON LEE STREET #05-46, DRIVEWAY OUTSIDE THE UNIT IN THE BUILDING
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF2107H
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CYK ENGINEERING PTE LTD
Company Reg No	2XXXXX802Z
Email Address	claims@forzaauto.sg
Mobile Phone No	(Phone) +65-91526821
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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	2982

#### INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMCPHQ21-001720

#### DRIVER

Name of Driver	CHUA KAI SAN
NRIC No	SXXXX079D
Date Of Birth	20/01/1973

Occupation .....	Outdoor
Date Of Driving Pass .....	24/10/1994
Driving experience .....	28 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91526821
Alt. Phone Number .....	-
Email Address .....	claims@forzaauto.sg
Address .....	BLK 449B BUKIT BATOK WEST AVE 9 #19-40
Address complement .....	-
Postcode .....	652449
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	OWNER
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 .....	Hit and run / Vandalism / Damaged whilst parked
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? .....	Yes
Police Station Name .....	Jurong Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18002659999
Alt. Police Station Phone No .....	(Fax) +65-62664987
Police Station Address .....	Blk 158 Yung Loh Road #01-58 Singapore 610158
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN DRAFT AND REPORT.  
GIA REPORT UNTIL NOW THEN SUBMIT AS TP VEHICLE DRIVER NO RESPON.

#### 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 .....	YQ5121R
Vehicle Manufacturer .....	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SABA
Contact Number	(Phone) +65-81386565
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.

**5. 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.



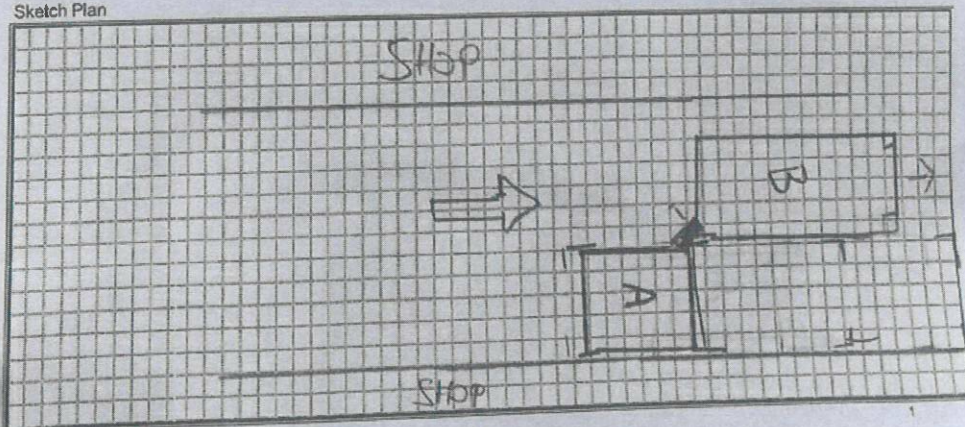
Policyholder's Signature / Date & Time



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

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

**Sketch Plan**



vJun2022

SSID: TP-LINK\_9860

SSID: TP-LINK\_9860

FW: 91624772

84188000




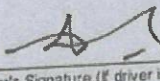
Describe Circumstances of the Accident

I WAS ALERTED BY MY NEIGHBOURING VENDOR ON AN ACCIDENT THAT WAS INVOLVED WITH MY VEHICLE BEARING GBF 207H WHEN STATIONARY PARKED IN THE PARKING LOT. I THEN DISCOVER DAMAGES ON MY LH PASSENGER DOOR. THE DRIVER HAVE NOT LEFT ANY MEANS OF CONTACT BUT I WAS ABLE TO RETRIEVE FOOTAGE OF THE ACCIDENT VIA MY STORE FRONT CCTV. I WAS ALSO TOLD THAT THE THIRD PARTY IS MY NEIGHBOUR SUPPLIERS. AND THEY HAVE CAPTURED A PHOTO OF THE (RED) IDPH / VEHICLE REGISTRATION NUMBER YQ 5121R. I THEN CONTACTED THE COMPANY KRIS PACKAGING PTE LTD, (65 6841 7731) TO FOLLOW UP WITH THEM ON THE SETTLEMENT. I WAS THEN DRAGGED WEEKS AND WEEK TO NO VALID RESPONSE AND DECIDE TO GO WITH THE CLAIM. I HAVE MADE A HOT & RUN REPORT TO THE POLICE.

Declaration

We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

WIFI LINK  
SSID: TP-LINK\_9860  
SSID: TP-LINK\_9860  
PW: 91624772



SINGAPORE  
POLICE FORCE



J/20230114/2063

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20230114/2063

my neighboring vendor that their supplier's vehicle had collided into my vehicle. I was then given a contact detail of the company, Kris Packaging Pte Ltd, 49 Pandan Road, #05-02 Pandan Logistic Hub, Suba HP: 81386565.

I made a contact with Suba and he affirmed that one of his driver had accidentally collided into my vehicle. Suba inform that he wishes to meet up on the 03/01/2023 at my stall to settle the issue however he did not turn up. He kept on postponing the meet up till date.

I met up with Pioneer Point management to view the CCTV, however I was advised to lodge a police report.

Signature Of Officer Recording The Report:  
J / SGT 3 FAIZUL BIN NENWARI

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
J / Jurong Police Divisional Investigation Branch /  
INSP (1) CHEN QIHUA  
Contact No.: 67910000

Signature Of Informant:

Date/Time:  
14/01/2023 15:56

Classification Of Case:





**SINGAPORE  
POLICE FORCE**



J/20230114/2063

1 of 2

**POLICE REPORT (NP299)**

Report No. J/20230114/2063

Police Station Of Origin  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

Date/Time Report Made 14/01/2023 15:56	Vide Report No.	Station Diary No. 15	
Name Of Informant CHUA KAI SAN	Address APT BLK 449B BUKIT BATOK WEST AVENUE 9 #19-80 SINGAPORE 652449		
ID Type / ID No. NRIC NO / S7302079D	Contact No. Home/Office	Mobile 91526821	
Nationality SINGAPORE CITIZEN	Email Address		
Occupation Other business services and administration managers	Sex Male	Age 49	Date of Birth 20/01/1973
Institution/School Name	Language English	Race Chinese	
Date/Time Of Incident 22/12/2022 10:20	Location Of Incident 5 SOON LEE STREET #05-46 PIONEER POINT SINGAPORE 627607		

**Brief details.**

On 23/12/2022, I was alerted by a neighboring vendor about a hit and run accident involving my parked lorry bearing plate number GBF2107H at 5 Soon Lee St #05-46, Pioneer Point, that happened on 22/12/2022 at about 1020hrs.

Later, I went over to my vehicle and discovered a scratch on the left passenger door. I was informed by

Signature Of Officer Recording The Report: J / SGT 3 FAIZUL BIN NENWARI 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 14/01/2023 15:56
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / INSP (1) CHEN QIHUA Contact No.: 67910000	Classification Of Case:

**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF 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.

**COMMERCIAL VEHICLE PRIVATE (SCH I )  
Comprehensive****Certificate No.: DMCPhQ21-001720**

Form: LCV1

Excess:

Section 1 SGD500.00

YEID-AC Additional SGD3,000.00

**1. Index Mark and Registration Number of Vehicles**

GBF2107H

**2. Engine No. and Chassis No.**

1KD2604499 / KDY2318024305

**3. Name of Policyholder**

CYK ENGINEERING PTE LTD

**4. Effective Date of the Commencement of Insurance for the purpose of the Act**

01/05/2021

**5. Date of Expiry of Insurance**

03/08/2022

**6. Person or Classes of Persons entitled to drive\***

Goods carrying - (MZ300) Authorised Driver. Any of the following :-

1. The Policyholder

2. Any person on the order or with the permission of the Policyholder

\*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 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 has not been cancelled at the time of accident loss or damage.

**7. Limitations as to use\***

1) Use in connection with the Insured's business. 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business. 3) Use for social domestic and pleasure purposes.

THE POLICY DOES NOT COVER

1) Use for hire or reward or for racing pace-making reliability trial or speed testing. 2) Use whilst drawing a greater number of trailers in all than is permitted by Law. 3) Use for the carriage of passengers for hire or reward. 4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

\*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 (Malaysia), 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 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.

EQI Motor Accident  
Hotline**6311 3211**

Authorised Signatory  
EQ Insurance Company Limited

UNWTSY/HO/A000423/Car Insurance Agency



A Member of Citystate



**FORZA AUTOHAUS PTE LTD**  
39 WOODLANDS CLOSE, #01-34/35, WOODLANDS CLOSE  
SINGAPORE 737856  
TEL: 62781889 EMAIL: ENQUIRY@FORZAAUTO.SG  
CO./GST REG: 201833292C

## LETTER OF AUTHORITY

ACCIDENT INVOLVING VEHICLE NO. GBF 2107H And YQ 5121R.  
Along 5800N LRT ST # 05-46 ALONG THE ROAD OUTSIDE THE PREMISES.  
On 22.12.2022 at about 1020.

1. I/ We, hereby appoint **FORZA AUTOHAUS PTE LTD.** to be my agent and I/We authorize my said agent to give you all instructions pertaining to the conduct of my **Third-Party Claim** including instructions to commence legal proceedings in court in my name against the third-party driver/or his employers, if applicable.
2. **\*\* My said agent also has my authority to decide on my behalf whether to accept any offer of settlement from the respective insurer/owner/driver or company.**
3. I understand and agree that until I revoke my said agent's authority in writing to you, I am bound by all instructions given by my said agent to you.
4. **\*\* Upon settlement of the Third-Party Claim and in case the settlement monies were sent to me/us by the insurers/owner/company, I/We undertake to make payment to FORZA AUTOHAUS PTE LTD for the costs of repairs settled and related expenses and disbursement incurred.**
5. The above-mentioned vehicle is to be repair at **FORZA AUTOHAUS PTE LTD.** on my own will Without any inducement, threat or promise.
6. In an event should my Third-Party claim being rejected by Insurance. I am liable to pay for the Repair Costs arise from the Accident Repair works done by **FORZA AUTOHAUS PTE LTD**


Signature of Owner/Company  
(Company's stamp if applicable)

Name:

NRIC No:

Address





# FORZA AUTOHAUS PTE LTD

39 Woodlands Close #01-34/35, Mega @ Woodlands Singapore 737856  
Tel: 6278 1889 Email: enquiry@forzaauto.sg  
8 Kaki Bukit Avenue 4 #07-23 Premier @ Kaki Bukit Singapore 415875  
Tel: 65 6881 1772 Fax: 65 8166 5437  
Registration No.: 201893292C

## Payment Authorisation Form

Date: 01.02.2023

Attention: Motor Claims Department

INCOME

Dear Sir/Madam,

Accident involving no. CBF 2107 H and YQ 5121 R along  
5 BOON LEE ST #05-46, DRIVEWAY OUTSIDE THE UNIT IN THE BUILDING on  
22-12-2022 at about 1020HRS

I/We, (Name) CYK ENGINEERING PTE LTD of (RCB/NRIC/Passport No.)  
201620802 Z is the owner of vehicle no. CBF 2107 H which was involved in the  
above mentioned accident with your insured vehicle no. YQ 5121 R.

I/We hereby authorised any settlement payment due to me arising from the above-mentioned accident to be made payable to my appointed repairer M/s Forza AutoHaus Pte Ltd.

I/We hereby agreed to indemnify M/s Forza AutoHaus Pte Ltd against all claims and/or damages which may arise from all actions taken for and on my/our behalf.

I/We hereby affirmed that the above-mentioned statement to be true and correct.

Yours faithfully,



Signature of Owner/Company  
(Company's stamp if applicable)

Name:

RCB/NRIC/Passport No.

Address:


INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

YQ5121R

Date of Accident

22/12/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... **Income Insurance Limited**

Period of Insurance ..... **10/03/2022 - 31/05/2023**

Requested By ..... **FOO MEI MEI (FORZA AUTOHA...**

Requested Date ..... **31/01/2023 11:54**

**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**

(GBF 2107H)