

**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.: SDW59MYour Ref.: YP8048EDate: 11.04.2023

ATTN: Motor Claims Department

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

Dear Sir/Madam,

Accident Involving: SDW59M AND YP8048EDate of Accident: 20.01.2023 @ 15:00 HOURSLocation: BAYFRONT AVE, SINGAPORE

We refer to the above-mentioned accident.

We are claiming as follows:

Cost of Repair:	\$ 14,000.00
Loss of Rental :	
(\$200.00 X 05 Days):	\$ 1,000.00
Loss of Rental :	
(\$220.00 X 10 Days):	\$ 2,200.00
LTA Search :	\$ 26.75
Towing Fee	\$ 80.00
Grand Total:	\$ 17,306.75

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,

Joanne



HD PERFECT
AUTOWORK PTE LTD
UEN: 202136904Z



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

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Authorisation To Act

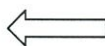
I, Choo Chiang Marketing Pte-Ltd ("the third party claimant") of
10, Woodlands Loop, Singapore 738388
(address), owner of SDW 59 m (vehicle no.)
hereby authorise HD Perfect Autowork Pte Ltd ("the workshop")
to act for me with respect to my claim for repair costs and / or rental and / or
loss of use ("claim") for my vehicle no. SDW 59 m that was
damaged pursuant to the accident which occurred on 20/01/2023 (date)
at/along Bayfront Avenue
(location) involving vehicle no/s YP 8048 E ("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 20 day of 01 (month) 20 23 (year)



Signed by "the third party claimant"


Signed by "the workshop"





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

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SDW 59M and YP 8048E on 20/01/2023
at/along Bayfront Avenue

1. I/We, the Owner of motor vehicle no. SDW 59M 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 20 day of 01 2023

Signature of vehicle owner _____

Name : Choo Chiang Marketing Pte Ltd

IC/UEN No : 199103762R

(Company stamp, if applicable)

Address : 10, Woodlands Loop,

Singapore 738388

Tel : 9683 5496

Witnessed by :

Joanne

TAX INVOICE

HD PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136904Z

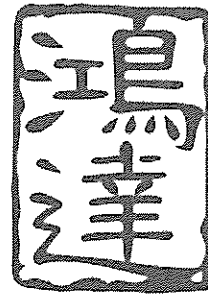
8 Kaki Bukit Avenue 4

#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
11.04.2023	HDP202304-00377	SDW59M

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	\$ 14,000.00
Total	\$ 14,000.00

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



Invoice

SDW59M
CHOO CHIANG MARKETING

Invoice No : GPLIN0003172
Invoice Date : 25/1/2023
Due Date : 25/1/2023
VHA No : 3507
Referral ID : H064

Description :	Amount
Rental for 5 Day/s @ \$200 per Day \$	1,000.00

Vehicle No : SLP5941A

Vehicle Description : Toyota Previa 2.4A

Rental Period : 20/01/2023 to 25/01/2023

Total Amount Payable : \$ 1,000.00

GOOD WAY RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875
Tel: 6315 8479 H/P: 9833 0807

VHA No: 3507

Invoice No: GPLIN3172

Hirer's Vehicle No: (HD Perfect)

UEN: 201505120D

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS

Name: (as in I/C) CHOO CHIANG MARKETING

NRIC / FIN No: _____

Address (Res): _____

Name & Address of Employer: _____

Occupation: _____ Driving Exp: _____

Singapore Driving Licence No: _____

Issue Date: _____ Date of Birth: _____

Tel: (O) _____ (R) _____ HP: _____

ADDITIONAL DRIVER'S PARTICULARS

Name: (as in I/C) LIM TECK CHUAN

NRIC / FIN No: S1166827E

Address (Res): 27 SPRINGLEAF AVENUE

(S 788845)

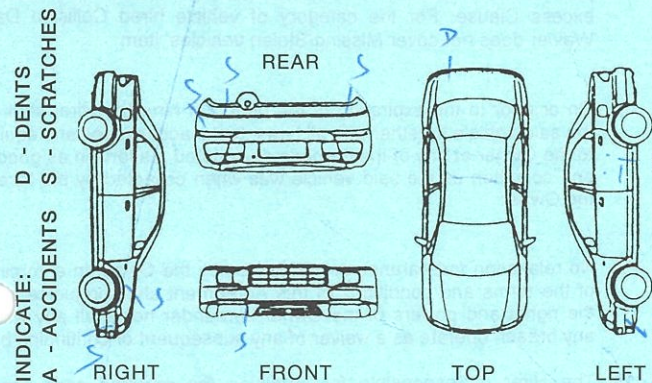
Occupation: _____ Driving Exp: _____

Singapore Driving Licence No: _____

Issue Date: 7/6/03 Date of Birth: 7/3/56

Tel: (O) _____ (R) _____ H/P: _____

VEHICLE CHECK LIST



MISSING / FAULTY ACCESSORIES / PARTS

REMARKS: _____

Vehicle No: SLP5941A Replace Veh No: SDW59M

Mileage Out: 186778 Mileage Out: _____

Make & Model: TOYOTA PREVIA 2.8A Auto / Manual

Out : Date 20/1/23 Time: 17:00

HIRE / PERIOD EXPIRY Time: _____

NON-WAIVER EXCESS=\$ 3000/-

CHARGES

Daily 5 @\$ 200 per day \$1000 -

Weekly @\$ per week

Monthly @\$ per month

Hours @\$ per hour

Extension @\$

Delivery/Collection Service

SUB-TOTAL \$

PETROL LEVEL

Out E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

In E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

Fuel

Traffic / Parking Fines

TOTAL CHARGES \$

Hirer's Signature

Additional Driver's Signature

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given GOOD WAY RENT-A-CAR PTE LTD in connection with this agreement is true.

*IMPORTANT

1. VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
2. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
3. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
4. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY. INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
5. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
6. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY GOOD WAY RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN " SIGNATURE OF HIRER / DRIVER " FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO GOOD WAY RENT-A-CAR PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
20/01/23	6:40p.m	-			



Invoice

SDW59M
CHOO CHIANG MARKETING PTE LTD

Invoice No : GPLIN0003218
Invoice Date : 28/2/2023
Due Date : 28/2/2023
VHA No : 3524
Referral ID : H064

Description :	Amount
Rental for 10 Day/s @ \$220 per Day \$	2,200.00

Vehicle No : SLR8224G

Vehicle Description : Toyota Estima 2.4 A

Rental Period : 25/01/2023 to 04/02/2023

Total Amount Payable : \$ 2,200.00

GOOD WAY RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875
Tel: 6315 8479 H/P: 9833 0807

(HD Perfect)

VHA No: 3524

Invoice No:

GPLIN3218

Hirer's Vehicle No:

UEN: 201505120D

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS

Name: (as in I/C) CHOO CHIANG MARKETING PTE LTD

NRIC / FIN No:

Address (Res):

Name & Address of Employer:

Occupation: Driving Exp:

Singapore Driving Licence No:

Issue Date: Date of Birth:

Tel: (O) (R) HP:

ADDITIONAL DRIVER'S PARTICULARS

Name: (as in I/C) LIM TECK CHUAN

NRIC / FIN No: S1166827 E

Address (Res): 27 SPRINGLEAF AVE

S(788445)

Occupation: Driving Exp:

Singapore Driving Licence No:

Issue Date: Date of Birth: 7/3/56

Tel: (O) (R) H/P:

VEHICLE CHECK LIST

INDICATE: D - DENTS S - SCRATCHES A - ACCIDENTS

RIGHT FRONT TOP LEFT

REAR

MISSING / FAULTY ACCESSORIES / PARTS

REMARKS:

Vehicle No: SLR 8224G Replace Veh No: SDW 59M

Mileage Out: 94019km Mileage Out:

Make & Model: TOYOTA ESTIMA 2.4A Auto / Manual

Out : Date 25/1/23 Time: 06:40 p.m.

HIRE / PERIOD EXPIRY Time:

NON-WAIVER EXCESS=\$ 3000/-

CHARGES

Daily 10 @\$ 220 per day \$2200

Weekly @\$ per week

Monthly @\$ per month

Hours @\$ per hour

Extension @\$

Delivery/Collection Service

SUB-TOTAL \$

PETROL LEVEL

Out E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

In E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

Fuel

Traffic / Parking Fines

TOTAL CHARGES \$

Hirer's Signature

Additional Driver's Signature

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DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER
04/02/23	5:00pm				

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 27 Jan 2023 / 17:10:52

Receipt Date/Time : 27 Jan 2023 / 17:10:52

Tax Invoice/Receipt

Receipt No. : ITNET-00000-230127-002892

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 - YP8048E				
As at 20 Jan 2023/15:00:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - YP8048E			
	Enquiry Fee	24.77	1.98	26.75
	20230127170938416095			
	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.

CASH ORDER / WORK ORDER

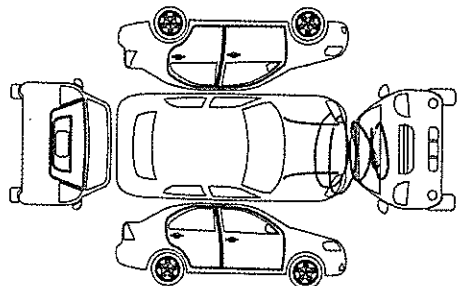
No. A 20465

Service Date: 20/01/2023 Time Received: 15:00
Member Name: _____ Time Arrived: 15:30
Contact Person: _____ Time Completed: 16:30
Contact No.: _____ From: Bayfront Ave
Car Reg No.: SDW 59M To: Kaki Bukit #08-09
Car Make/Model: Toyota Alphard Tow Truck No.: YM 6079U
Battery: _____
Remarks: _____ Amount: \$ 80
Cash / Credit

ADDITIONAL CHARGES:

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

BODY & PAINT CONDITION:



bizSAFE₃

Matthew
Tow Diver's Name & Signature

Member's Name & Signature
PAY NOW 202136139R
AUTOCREW PTE LTD

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	27/01/2023 17:05 (SGT)
Reported by	Both
Date of Accident	20/01/2023 15:00 (SGT)
Actual Location of Accident	Bayfront Ave, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDW59M
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	CHOO CHIANG MARKETING PTE LTD
Company Reg No	1XXXXX762R
Email Address	joeylow@choochiang.com
Mobile Phone No	(Phone) +65-96835496
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Alphard
Variant	-
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	2995

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5132929826

DRIVER

Name of Driver	LIM TECK CHUAN
NRIC No	SXXXX827E
Date Of Birth	07/03/1956
Occupation	Indoor

Date Of Driving Pass	14/08/1974
Driving experience	48 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96835496
Alt. Phone Number	-
Email Address	joeylow@choochiang.com
Address	27 SPRINGLEAF AVENUE
Address complement	-
Postcode	788445
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	DIRECTOR OF COMPANY
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	Raining
Road Surface	Wet

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
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP8048E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



SKETCH PLAN

IMPORTANT NOTICE

- 1 Please report correctly the details of the accident to speed up the claims process.
- 2 This Form must be completed by the Policyholder and/or the Actual Driver.
- 3 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4 The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
- 6 This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7 By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8 Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/small 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

<p>Bayfront Avenue</p>		<p>vehicle A: SDW59M vehicle B: YP8048E</p>
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Describe Circumstance of the Accident

On the above mentioned date & time I was travelling along ^{Bayfront Avenue} ~~in~~ ^{extrem} left lane front vehicle stop. I stopped vehicle B failed to stop and collided onto my vehicle rear portion.

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 (Name as in NRIC/ID card)



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1166827E



Name
LIM TECK CHUAN

林 德 全

Race
CHINESE

Date of birth
07-03-1956

Sex
M


Country of birth
SINGAPORE

S1166827E


SDW 59 M

DRIVER

4619457



NRIC No. S1166827E



Date of issue
21-08-2010

Address
27 SPRINGLEAF AVENUE
SINGAPORE 788445

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1166827E**
Name: **LIM TECK CHUAN**

Birth Date: **07 Mar 1956**
Issue Date: **07 Jun 2003**

000548571K

SPW 59m

Driver

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	15 Jul 1976
Class 2A Motorcycles between 201 cc and 400 cc	15 Jul 1976
Class 2 Motorcycles exceeding 400 cc	15 Jul 1976
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	14 Aug 1974

NP 428A

Licence No: S1166827E

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: 5132929826

Cover : drive CLASSIC

- | | |
|---|---------------------------------|
| 1. Index mark and Registration Number of Vehicle | : SDW59M |
| Chassis Number | : AGH300435924 |
| 2. Name of Policyholder | : CHOO CHIANG MARKETING PTE LTD |
| 3. Effective Date of Insurance | : 23 Dec 2022 |
| 4. Expiry Date of Insurance | : 22 Dec 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	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: YES
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
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)

Agency : VINCAR PTE LTD (00000614250)

Date of Issue : 23 Dec 2022 09:32 hrs

For INCOME INSURANCE LIMITED



Chief Executive