



JL PERFECT AUTOWORK PTE LTD

Co. & GST Reg. No.: 202136905K

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#08-09, Singapore 415875

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

Email: jlperfectautowork@gmail.com

Our Ref.: SNH956J

Your Ref.: SMV381E

Date: 17.05.2023

ATTN: Motor Claims Department

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

Dear Sir/Madam,

Accident Involving: SNH956J & SMV381E

Date of Accident: 07.03.2023 @ 19:15 HOURS

Location: SLIP ROAD OF HAVELOCK ROAD ENTERING CLEMENCEAU AVE

We refer to the above-mentioned accident.

We are claiming as follows:

| | |
|----------------------|---------------------------|
| Cost of Repair: | <u>\$ 4,800.00</u> |
| Loss of Use : | |
| (\$180.00 X 05 Days) | <u>\$ 900.00</u> |
| GIA 3rd Party Report | <u>\$ 31.00</u> |
| LTA SEARCH | <u>\$ 26.75</u> |
| Grand Total: | <u>\$ 5,757.75</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 Joanne @ 97231055, or email to jlperfectautowork@gmail.com

Thank You,

Joanne





JL Perfect Autowork Pte. Ltd.
Co. Reg No: 202136905K
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: jlperfectautowork@gmail.com

Authorisation To Act


I, Chan Yew Wai ("the third party claimant") of
APT BLK 149 Silat Avenue #13-66 (S) 160149
(address), owner of SNH 956 J (vehicle no.)
hereby authorise JL 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. SNH 956 J that was
damaged pursuant to the accident which occurred on 07/03/2023 (date)
at/along Slip Road of Havelock Road entering
(location) involving vehicle no/s SMV 381 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.

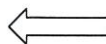
I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

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



Signed by "the third party claimant"





Signed by "the workshop"





JL Perfect Autowork Pte. Ltd.
Co. Reg No: 202136905K
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875
Tel: 6341 6789 Fax: 6341 6778
Email: jlperfectautowork@gmail.com

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SNH 956 J and SMV 381 E on 07/03/2023
at/along Slip Road of Havelock Road entering

1. I/We, the Owner of motor vehicle no. SNH 956 J hereby instruct and authorise JL 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 09 day of 03 2023

Signature of vehicle owner

Name :

Chan Yew Wai

IC/UEN No :

S8334206 D

(Company stamp, if applicable)

Address :

Blk 149 Silat Avenue
#13-66 (S) 160149

Tel :

9128 3767

Witnessed by :

Joanne



"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, chan Yew Wai ("the third party claimant")
of 149 Silat Ave #13-b6 (s 160149) (address),
owner of SNH 956J (vehicle no.) hereby authorize
JL 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. SNH 956J that was damaged pursuant to the

accident which occurred on 7/3/23 (date) along slip Road of
Havelock Road Entering clemenceau Ave (location)

involving vehicle no/s SMV 381E

("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 09 day of 03 (month) 20 23 (year)

Signed by "the third party claimant"

Signed by "the workshop"
(with chop)



TAX INVOICE

JL PERFECT AUTOWORK PTE LTD

Co. Reg No: 202136905K

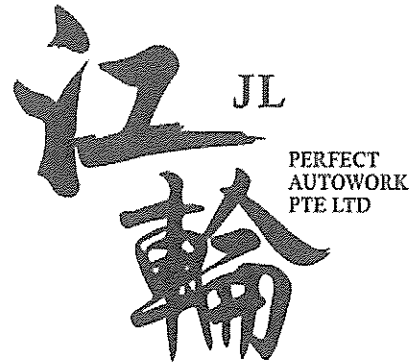
8 Kaki Bukit Avenue 4

#08-09 Premier @ Kaki Bukit

Singapore 415875

Tel: 6341 6789 Fax: 6341 6778

Email: jlperfectautowork@gmail.com



| Date | Invoice Number | Vehicle Number |
|------------|-----------------|----------------|
| 17.05.2023 | JLP202305-00277 | SNH956J |

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-12 AIG BUILDING

SINGAPORE 079120

SINGAPORE 018983

| Description | Amount (SGD) |
|---|--------------|
| Carry out Lump-sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges | \$ 4,800.00 |
| Total | \$ 4,800.00 |

Cross cheques and pay: JL PERFECT AUTOWORK PTE LTD

Please indicate the invoice number on the reverse side.

JL 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

Total = \$ 57.75

Print Date/Time : 09 Mar 2023 / 15:01:46

Receipt Date/Time : 09 Mar 2023 / 15:01:46

Tax Invoice/Receipt

Receipt No. : ITNET-00000-230309-002428

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 - SMV381E

As at 07 Mar 2023/19:15:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

| | | | | |
|---|--|-------|------|-------|
| 1 | Insurance Enquiry - SMV381E Enquiry Fee 20230309150103698491 | 24.77 | 1.98 | 26.75 |
|---|--|-------|------|-------|

| | | | |
|------------------|-------|------|-------|
| 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.



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard #42-01b, Singapore 038989

Email: gears-support@shift-technology.com

GST Reg No: M400017735

UEN: S66SS0020G

TAX INVOICE

JL Perfect Autowork Pte Ltd - Chan
Yew Wai (Chen YaoWei)

Invoice Number
GR-2023-000970

Invoice Issue Date
11 Mar 2023

Invoice Due Date
18 Mar 2023

Total Amount (\$\$) 28.70
Total GST 8.00% (\$\$) 2.30
Total Amount Incl. of GST (\$\$) 31.00

| Bill Type | Reference | Amount (\$\$) | GST 8.00% (\$\$) | Amount Incl. of GST (\$\$) |
|--------------------------------|---------------------------------------|---|------------------|----------------------------|
| Sale of Accident Report - Publ | 10/03/2023,07/03/2023,SNH956J,SMV381E | 28.70 | 2.30 | 31.00 |
| | | Total Amount (\$\$) | | 28.70 |
| | | Total GST 8.00% (\$\$) | | 2.30 |
| | | Total Amount Incl. of GST (\$\$) | | 31.00 |

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

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 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. 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 | 10/03/2023 12:43 (SGT) |
| Reported by | Both Policyholder and Actual Driver |
| Date of Accident | 07/03/2023 19:15 (SGT) |
| Exact Location of Accident | Singapore |
| Additional Location Information | SLPI ROAD OF HAVELOCK ROAD ENTERING CLEMENCEAU AVENUE |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNH956J

INSURED/POLICYHOLDER

| | |
|--------------------------|----------------------|
| Is company? | No |
| Name Of Registered Owner | CHAN YEOW WAI |
| NRIC No | SXXXX206D |
| Email Address | uychan1983@gmail.com |
| Mobile Phone No | (Phone) +65-91283767 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|-------------------------------------|
| Manufacturer | Volkswagen |
| Model | Golf |
| Variant | VOLKSWAGEN / GOLF 1.2 TSI AT 5G12BZ |
| 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 | 1197 |

INSURANCE COMPANY

| | |
|-----------------------------------|---|
| Name of Insurance Company | Direct Asia Insurance (Singapore) Pte Ltd |
| Policy Number / Cover Note Number | - |

DRIVER

| | |
|----------------|---------------|
| Name of Driver | CHAN YEOW WAI |
| NRIC No | SXXXX206D |
| Date Of Birth | 12/10/1983 |

| | |
|--|--------------------------------------|
| Occupation | Indoor |
| Date Of Driving Pass | 09/07/2012 |
| Driving experience | 10 YEARS AND 8 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-91283767 |
| Alt. Phone Number | - |
| Email Address | uychan1983@gmail.com |
| Address | 149 SILAT AVENUE #13-66 SPORE 160149 |
| Address complement | - |
| Postcode | - |
| 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) | 2 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |
| Translator's name | - |
| Translator's ID | - |
| Translator's phone number | - |
| Translator's email | - |
| Original language used in the statement | - |

PASSENGER 1

| | |
|--------|------|
| Name | STAR |
| Gender | Male |

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 OT SKETCH PLAN

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 | SMV381E |
| Vehicle Manufacturer | - |
| 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 Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages), and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims, (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

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

Sketch Plan

Describe Circumstance of the Accident

Refer to Attached

Declaration
We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature / Date & Time

(If driver is not the policyholder) / Date

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

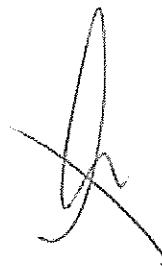
On 07.03.2023 at about 19:15 hours at Slip Road of Havelock Road entering Clemenceau Avenue, I was stationary at the above mentioned location to check the oncoming traffic condition.

Suddenly, I heard a bang and felt an impact from behind. When I alighted, I realised it was vehicle (B) that collided onto the rear portion of my vehicle (A).

I wish to state that I have 1 passenger in my vehicle (A).

Vehicle (A): SNH 956J

Vehicle (B): SMV 381E

A handwritten signature in black ink, consisting of a large, stylized capital letter 'A' with a horizontal stroke crossing through the middle.

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8334206D



Name

CHAN YEW WAI
(CHEN YAOWEI)

陈耀伟

Race

CHINESE

Date of birth

12-10-1983

Sex

M

S8334206D

Country/Place of birth

SINGAPORE



SNH956J

Owner and Driver

6421177



NRIC No. S8334206D



Date of issue

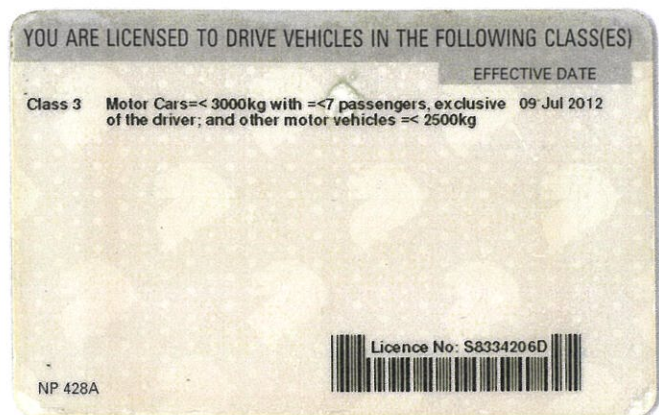
18-03-2020

Address

APT BLK 149 SILAT AVENUE
#13-66
SINGAPORE 160149



SNH956J
Owner and Driver



CERTIFICATE OF INSURANCE

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

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

| | |
|---|---------------------------------------|
| Certificate No. | : MT/01139430 |
| Type of Coverage / Driver Plan | : Car Comprehensive (Value Plus Plan) |
| 1) Vehicle Registration No. | : SNH956J |
| Chassis No. | : WVVZZZAUZH099467 |
| 2) Name of Policy Holder | : CHAN YEW WAI |
| 3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act | : 15/12/2022 10:15 |
| 4) Date/Time of Expiry of Insurance | : 14/12/2023 23:59 |
| 5) Persons or Classes of Persons Entitled to Drive | |
| (a) Any named person under the policy who is driving on the Policyholder's permission. | |
| (b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission | |
| The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving. | |
| 6) Limitations as to use* | |
| Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. | |
| *Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading. | |
| Sum Insured | : Market Value |
| Own Damage Excess | : S\$ 800.00 |
| Windscreen Excess | : S\$ 100.00 |
| Choice of workshop | : DirectAsia approved workshops |
| Finance company / Hire Purchase | : HONG LEONG FINANCE LIMITED |
| Main driver | : CHAN YEW WAI |
| Named driver | : None |
| Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above. | |

I/We hereby certify that the Policy to which this Certificate relates to is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 15/12/2022

Direct Asia Insurance (Singapore) Pte. Ltd.



Underwriting Manager

Direct Asia Insurance (Singapore) Pte Ltd
20 Anson Road #08-01 Twenty Anson Singapore 079912
www.DirectAsia.com