

**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park,  
Singapore 408933  
TEL: 6256 3561 FAX: 6256 4315  
Reg. No: 199607198R GST Reg. No.  
19-9607198-R

**Tax Invoice**

STRIDES PREMIER AUTOMOTIVE SERVICES PL.  
60 WOODLANDS INDUSTRIAL PARK E4  
SINGAPORE 757705

INV No. : SAC2400590

INV Date : 11-09-2024

Reference CS/SMR24090040/Uvp3

Code SMR

**PROFESSIONAL SERVICE FEE**

Vehicle No. SNP 2370T  
Insured Veh. SHB 1183T  
Claim No. TAX/08/24/2105  
Policy No.  
Accident Date 31/08/2024  
Inspection Date 03/09/2024

Description	Amount
Survey Inspection	128.00
Resurvey Inspection	0.00
Digital Photographs	0.00
Transportation	0.00
Sub-Total	128.00
GST (9%)	11.52
Grand Total	139.52

We shall be glad if you could forward the payment at your earliest convenience.

Cheque should be crossed and made payable to **'LKK Auto Consultants Pte Ltd'**

**LKK Auto Consultants Pte Ltd**

***KHM***

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Singapore 408933

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## Affiliated to Federation Internationale Des Experts En Automobile

MS STRIDES PREMIER AUTOMOTIVE SERVICES PL.	Ref:	CS/SMR24090040/Uvp3
60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705	Date:	11/09/2024
	Code:	SMR

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 1183T	Veh. Inspected	SNP 2370T
Policy No.	-	Coverage	0
Claim No.	TAX/08/24/2105	Excess	\$0.00
Assign From	HUA YEN	Assign Date	03/09/2024

### 2. Vehicle Details

Make & Model	HONDA SHUTTLE (A)	C.C	1496
Engine No.	L15B5462536	Year of Reg.	25/06/2018
Chassis No.	GK81202179	Colour	RED
Odometer	145752 KM	Steering	IN ORDER
Brakes	IN ORDER	General	GOOD
Modification(s)	RIMS: SPORTS RIM		

### 3. Conditions of Tyres

	Size	Make	Balance (mm)
R/H Front Tyre	195/50R16	HANKOOK	6
L/H Front Tyre	195/50R16	HANKOOK	6
R/H Rear Tyre	195/50R16	HANKOOK	6
L/H Rear Tyre	195/50R16	HANKOOK	6

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.

DAMAGES SEE DETAILS.

### 5. General Information

Accident Date	31/08/2024	Inspection Date	03/09/2024
Survey held at	FASTECH AUTO PTE LTD - 1 KAKI BUKIT AVENUE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883		

### 5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.  
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: 5 Working Days



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO SNP 2370T

REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	REAR WINDSCREEN MOULDING	NECESSARY	\$166.20	\$166.20
1	TAILGATE	BADLY DENTED	\$1,455.20	\$1,193.00
1	TAILGATE REAR LOGO	CRACKED	\$48.00	\$48.00
2	TAILGATE REFLECTORS @\$341.60	SERVICEABLE	\$683.20	\$0.00
1	TAILGATE OUTER GARNISH	CRACKED	\$495.00	\$381.20
1	TAILGATE INNER LOCK	BENT	\$288.20	\$245.50
1	TAILGATE INNER TRIM BOARD	DEFORMED/TORN	\$455.10	\$455.10
1	TAILGATE WEATHERSTRIP	TWISTED	\$232.80	\$232.80
2	TAILLAMPS @\$950.00	CRACKED	\$1,900.00	\$1,160.00
1	REAR BUMPER	DENTED/DEFORMED	\$1,415.10	\$985.00
2	REAR BUMPER SIDE RETAINERS @\$45.00	NOT NECESSARY	\$90.00	\$0.00
2	REAR BUMPER REFLECTORS @\$75.00	NOT NECESSARY	\$150.00	\$0.00
2	REAR BUMPER SIDE COVERS @\$111.00	N/S NOT NECESSARY / O/S TWISTED	\$222.00	\$111.00
2	REAR BUMPER INNER SPONGES @\$150.00	N/S NOT NECESSARY / O/S TORN	\$300.00	\$148.00
1	REAR END PANEL	DENTED/BENT	\$755.20	\$615.00
1	REAR END PANEL TOP GARNISH	TWISTED	\$248.70	\$248.70
1	REAR END PANEL ANTENNA SENSOR	NOT NECESSARY	\$108.90	\$0.00
2	REAR END PANEL SIDE EXTENSION PANELS @\$285.00	TO REPAIR SEE LABOUR	\$570.00	\$0.00
1	REAR EXHAUST	NOT NECESSARY	\$688.20	\$0.00
1	REAR FLOOR PANEL TOP BOARD	NOT NECESSARY	\$544.10	\$0.00
1	REAR FLOOR PANEL	TO REPAIR SEE LABOUR	\$1,140.20	\$0.00
1	REAR FLOOR PANEL TOOLS TRAY	TWISTED/CRACKED	\$652.30	\$481.20
2	REAR FENDER INNER TRIM BOARDS @\$690.00	DEFORMED/TORN	\$1,380.00	\$910.00
1	REAR FENDER	TO REPAIR SEE LABOUR	\$1,155.20	\$0.00
	<b>LESS 0.00 / 20.00% DISCOUNT</b>		\$0.00	(\$1,476.14)
			\$15,143.60	\$5,904.56

Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	REAR WINDSCREEN SEALANT (SN)	NECESSARY	\$50.00	\$40.00
1	REAR WINDSCREEN INNER SEAL (SN)	NECESSARY	\$50.00	\$20.00



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19-9607198-R

Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	SET REAR BUMPER REVERSE SENSOR (SN)	SERVICEABLE	\$280.00	\$0.00
1	SET TAILGATE INNER TRIM BOARD CLIPS (SN)	NECESSARY	\$50.00	\$40.00
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	\$60.00	\$30.00
1	REAR BUMPER LOWER SPOILER (SN)	DENTED/DEFORMED	\$900.00	\$600.00
1	REAR END PANEL SEALANT (SN)	NECESSARY	\$50.00	\$50.00
1	SET REAR FLOOR PANEL INSULATOR (SN)	NOT NECESSARY	\$200.00	\$0.00
			\$1,640.00	\$780.00
Labour				
	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
	TO CHECK WIRING	NOT NECESSARY	\$50.00	\$20.00
	TO DISMANTLE & REFIX REVERSE SENSOR		\$80.00	\$30.00
	TO DISMANTLE & REFIX REAR WINDSCREEN		\$150.00	\$120.00
	TO DISMANTLE & REFIX CUSHION UPHOLSTERY		\$120.00	\$60.00
	TO TRANSFER TAILGATE MECHANISM		\$100.00	\$60.00
	TO SPRAY RUST PROOFING		\$100.00	\$50.00
	TO RESET DIAGNOSTIC & REPROGRAMME SYSTEM		\$120.00	\$0.00
	LABOUR FOR PANEL BEATING & REPLACED PARTS. INCLUSIVE OF THE REPAIR OF REAR END PANEL SIDE EXTENSION PANELS, REAR FLOOR PANEL AND REAR FENDER		\$1,800.00	\$600.00
	TO PUTTY & SPRAY PAINTING		\$1,800.00	\$800.00
			\$4,320.00	\$1,740.00
GRAND TOTAL			\$21,103.60	\$8,424.56
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			\$6,700.00
Report Ref No: CS/SMR24090040/Uvp3				

**CKS**

MARCUS CHUA KANG SENG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of repositibility whatsoever, in contact or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.

## 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 First Submission .....	02/09/2024 17:24 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	31/08/2024 10:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	SIMS AVENUE
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SNP2370T
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	ONG WEE HUAT
NRIC No .....	S8721628D
Email Address .....	MICHAEL.ONG87@GMAIL.COM
Mobile Phone No .....	(Phone) +65-97838242
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Shuttle
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 .....	0
Vehicle Fuel .....	Petrol
First Registration Date .....	25/06/2018
Chassis no .....	GK81202179
Effective Date/Time of Ownership .....	25/06/2018 00:00 (SGT)

#### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5142919716

#### DRIVER

Name of Driver .....	NG KOK HENG
NRIC No .....	S1503187E
Date Of Birth .....	29/10/1961
Occupation .....	Outdoor
Driving Pass Date .....	18/02/1983
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	41 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98569975
Alt. Phone Number .....	-
Email Address .....	KOKHENGKHNG@GMAIL.COM
Address .....	APT BLK 106 ALJUNIED CRESCENT #02-205
Address complement .....	-
Postcode .....	380106
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Relative
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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 .....	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? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO 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 .....	SHB1183T
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	NA / Unknown
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	NG KOK HENG
Gender .....	Male
Phone No .....	(Phone) +65-98569975
Address .....	APT BLK 106 ALIUNIED CRESCENT #02-205
Address Complement .....	-
Post Code .....	380106
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SNP2370T
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No



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.

2 Sep 2024

Policyholder's Signature / Date & Time

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

LENG

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

Sketch Plan

A = SNP 2340 T

B = SHB 1183 T

Sims Avenue

vJun2022



Describe Circumstance of the Accident

*Please refer to the police report T/20240902/7059.*

Declaration

I/We declare the foregoing particulars are true in every respect.



2 Sep 2024

Policyholder's Signature / Date & Time



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

LENG

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



**SINGAPORE  
POLICE FORCE**



T/20240902/7059

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

1 of 3

Report No. T/20240902/7059

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 02/09/2024 13:46		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: NG KOK HENG			Address: 106 ALJUNIED CRESCENT #02-205 SINGAPORE 380106		
ID Type / ID No.: NRIC NO / S1503187E			Contact No.: Home/Office:		Mobile: 98569975
Nationality: SINGAPORE CITIZEN			Email: kokhengkhng@gmail.com		
Sex: Male	Age: 62	Date of Birth: 29/10/1961	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: plumbing engineering			Driving Licence Information: Class: 2B,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 31/08/2024 10:00	Type of Location: X-Junction
Location:  SIMS AVENUE				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB1183T	Motor car					1
SNP2370T	Motor car	HONDA	shuttle	Red	Seriously Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNP2370T	NTUC Income Insurance Co-Operative Limited	5142919716	29/01/2024	28/01/2025



**SINGAPORE  
POLICE FORCE**



T/20240902/7059

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

2 of 3

Report No. T/20240902/7059

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NG KOK HENG	ID No.	S1503187E
Related Vehicle	SNP2370T (Motor car)	Contact No.	98569975
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	02/09/2024	Date Discharge	02/09/2024
No. of Days granted Medical Leave (MC)	05	Degree of Injury	Serious

**Brief Details.**

31.08.2024 at about 10:00am, I was travelling along SIMS AVENUE. Due to the traffic light being red, I stopped in place. Suddenly, I felt an impact. Vehicle B (SHB 1183T) collided with the rear of my vehicle (SNP 2370T). During the accident no passenger was in my vehicle.

As a result of the accident, I felt pain on my neck, shoulder and back. I visited to NORWOOD MEDICAL HOUGANG after the accident. The doctor gave me 5 days MC.

- My vehicle no video.



**SINGAPORE  
POLICE FORCE**

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



T/20240902/7059

3 of 3

Report No. T/20240902/7059

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
CHUA SOON KEONG  
Contact No.: 65476030

NP168

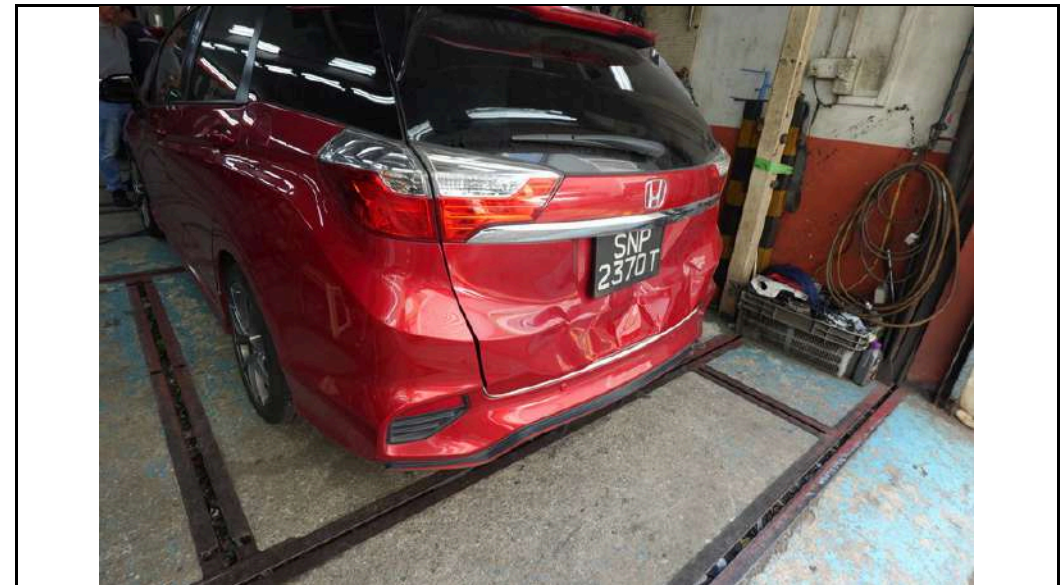
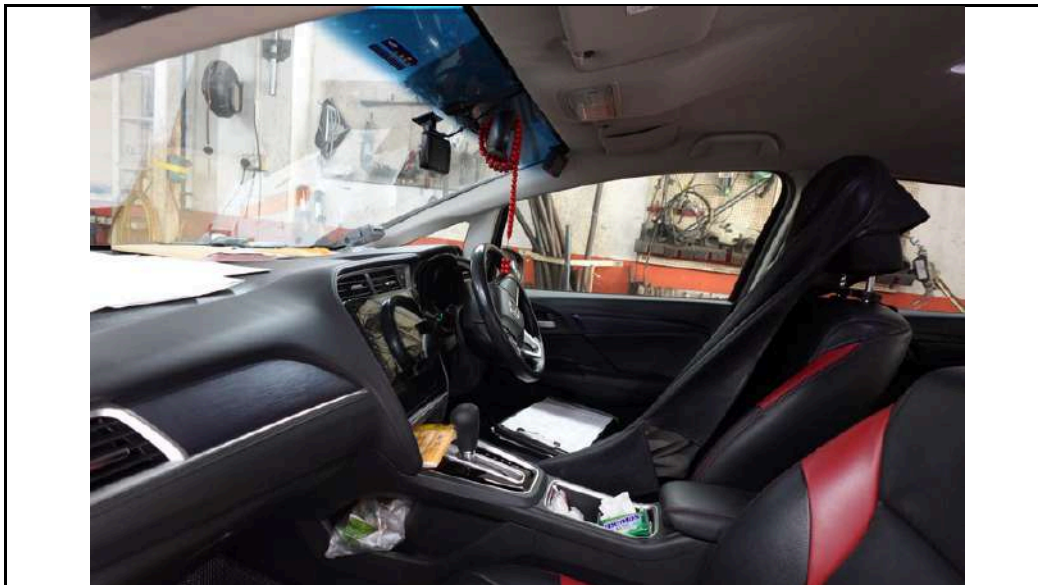
Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
02/09/2024 13:46

Classification Of Case:



**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**





**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**





**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**



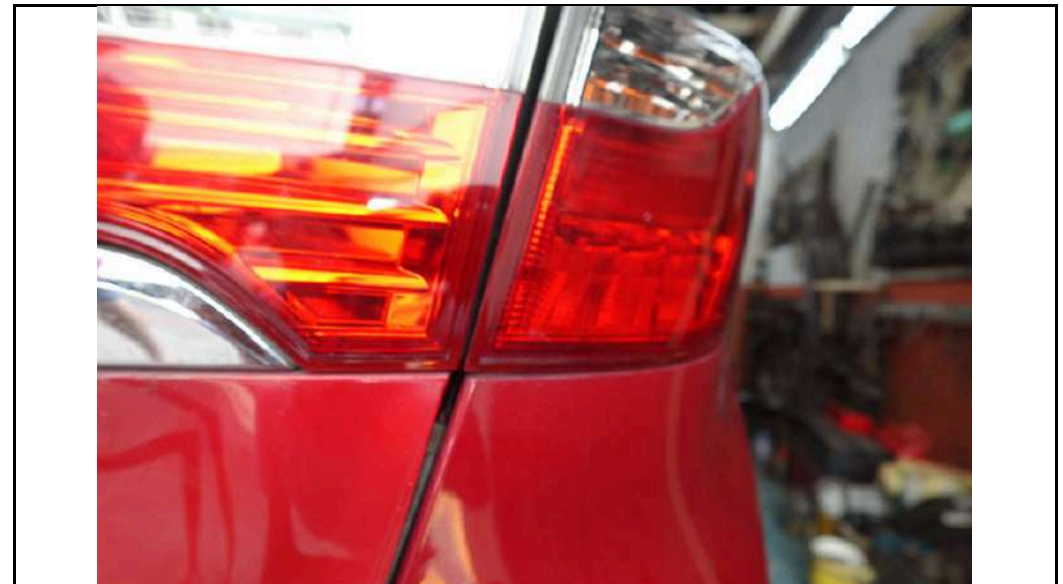


**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**



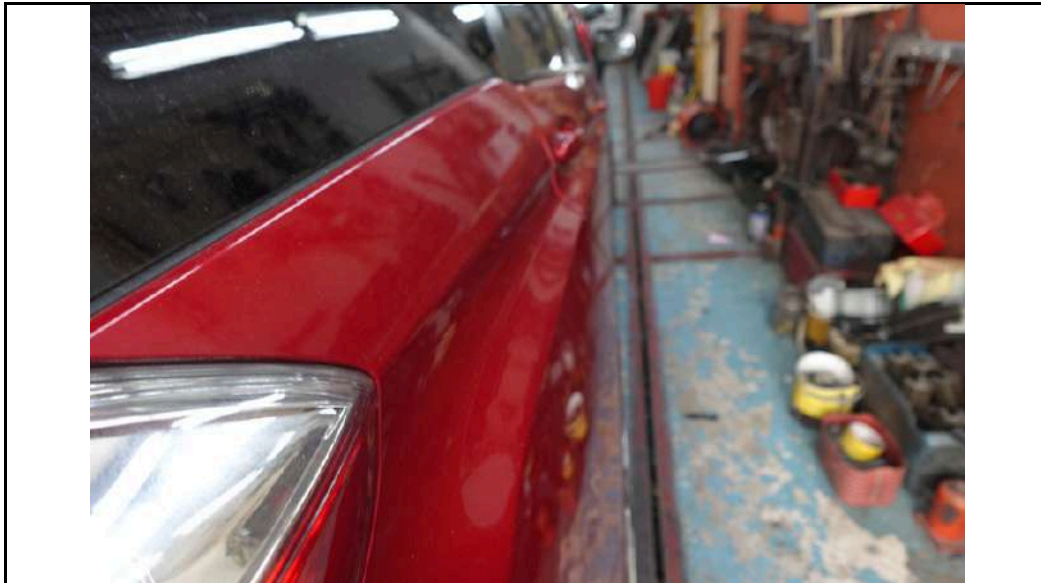


**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**





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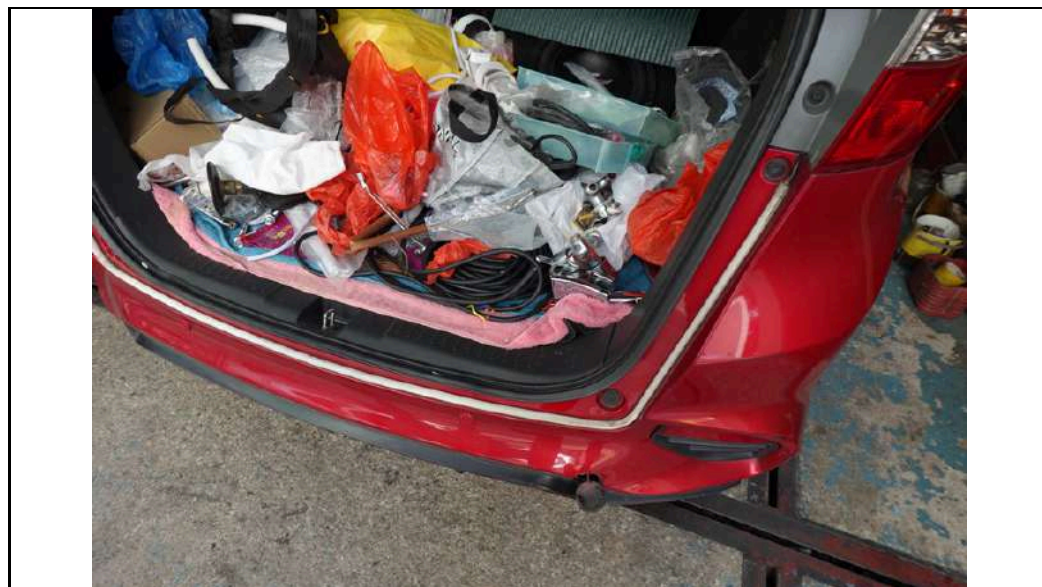


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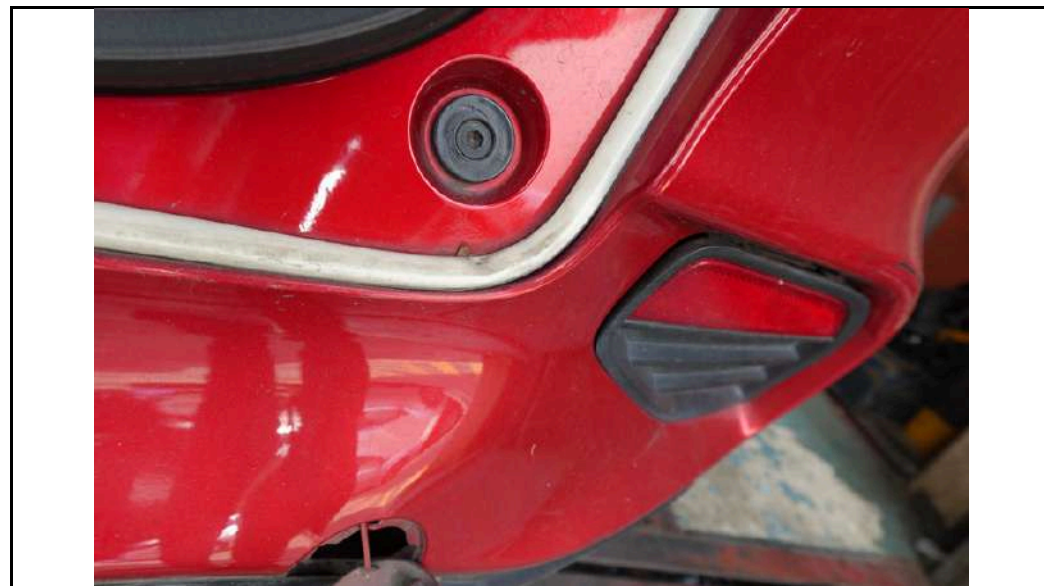


**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**





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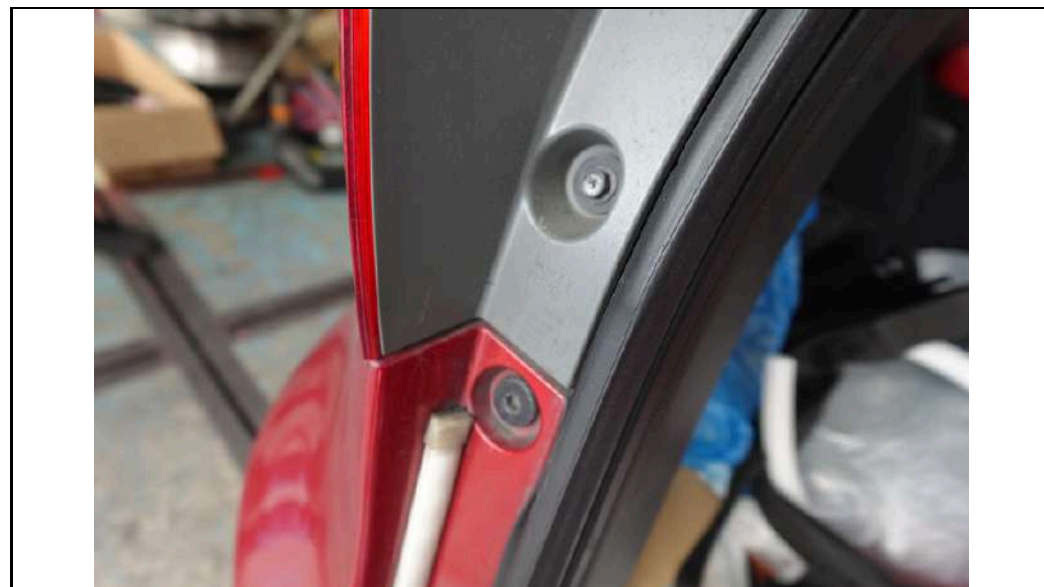


**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**





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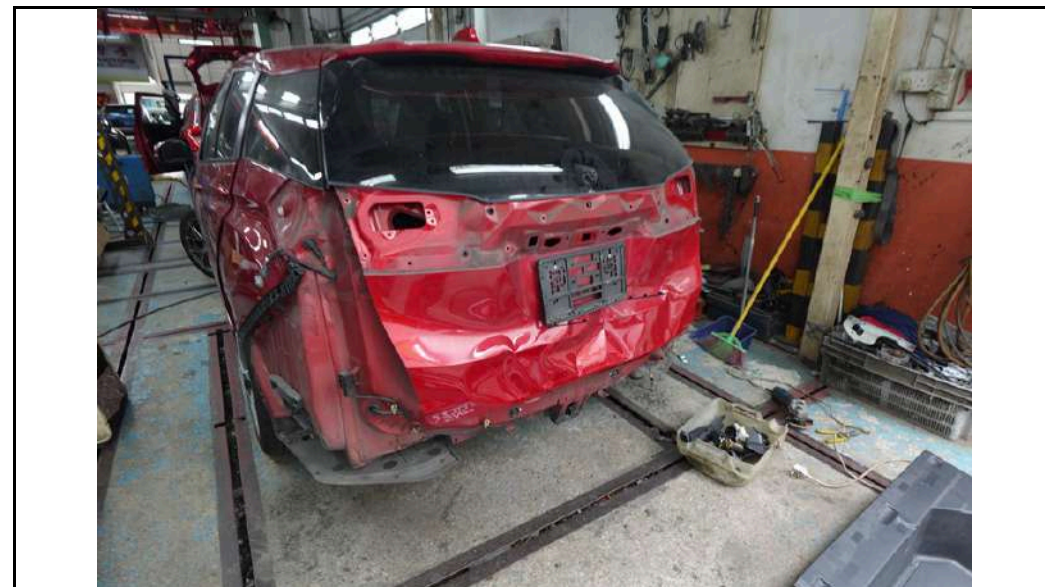
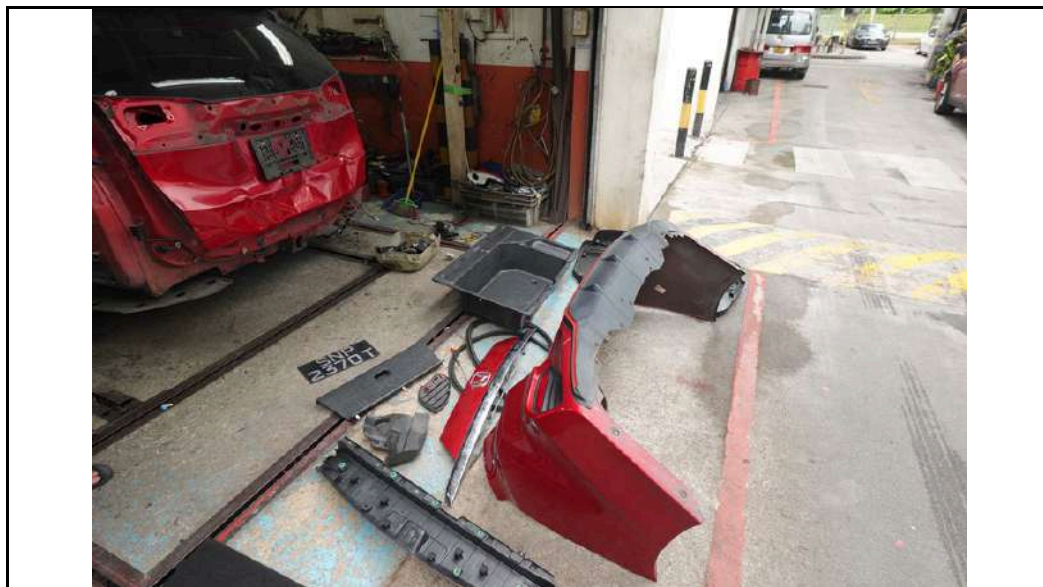
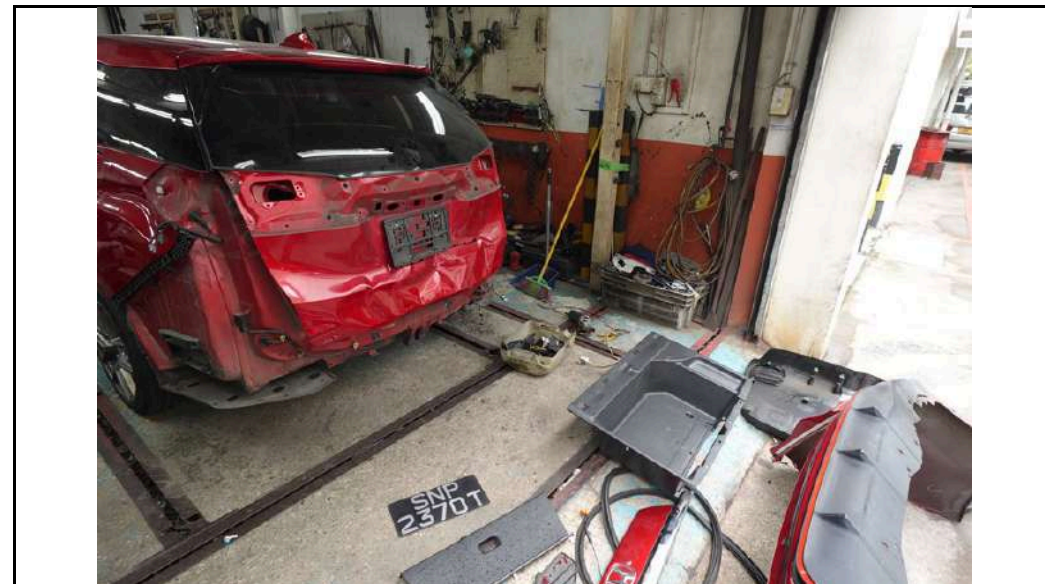


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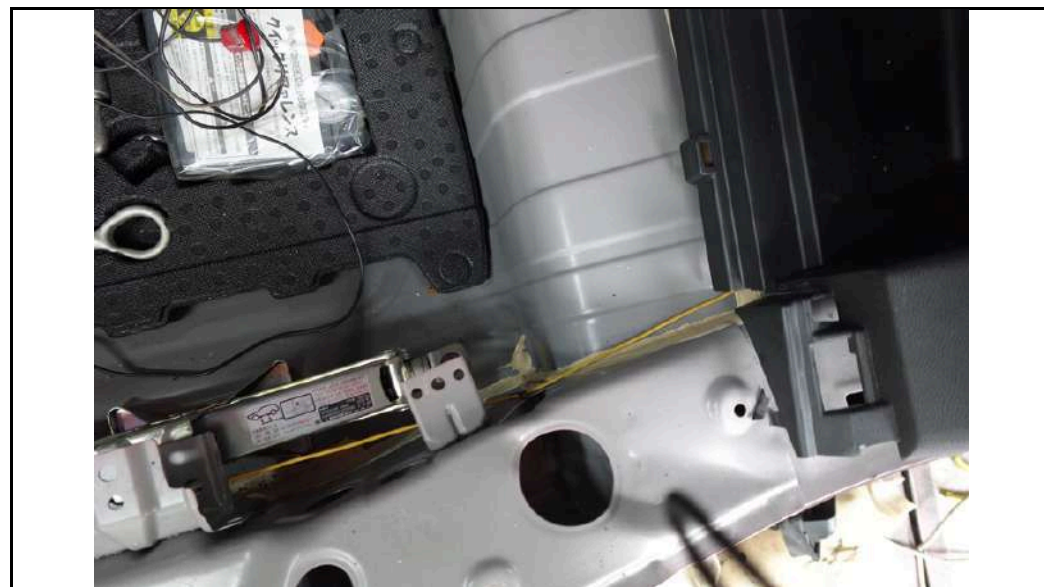


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**PHOTOGRAPHS FOR VEHICLE NO. : SNP 2370T**





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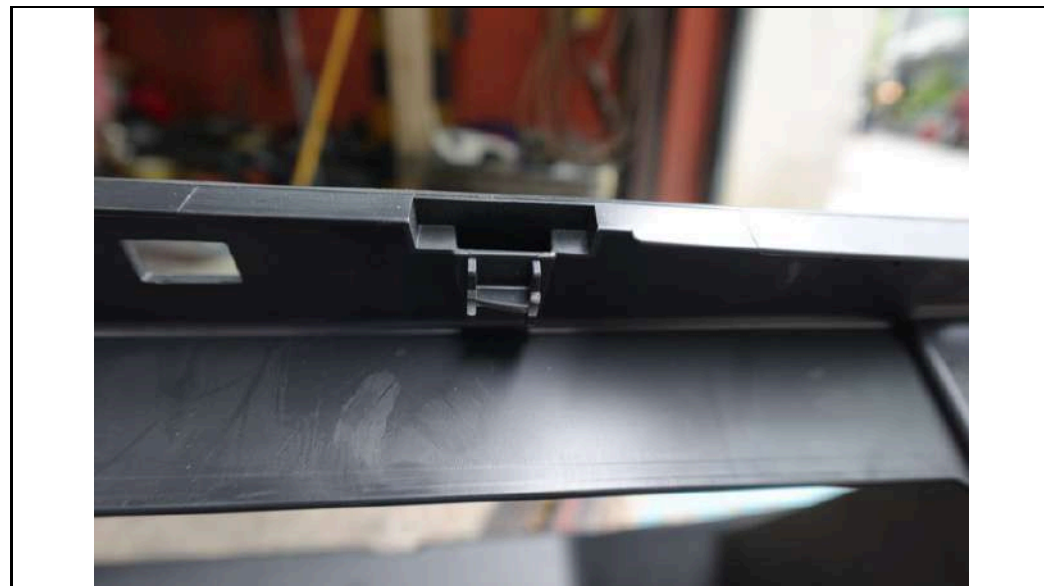


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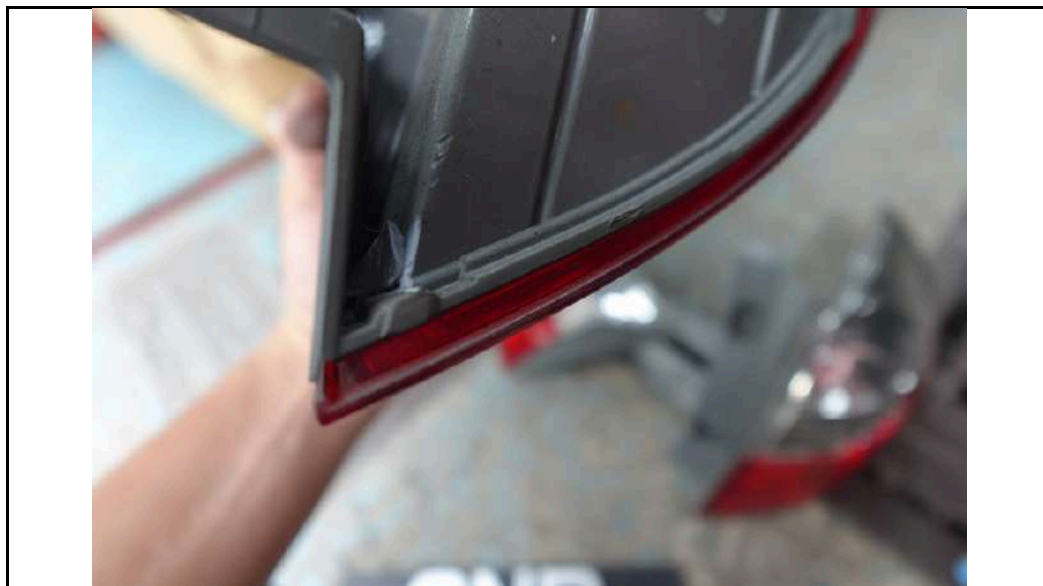


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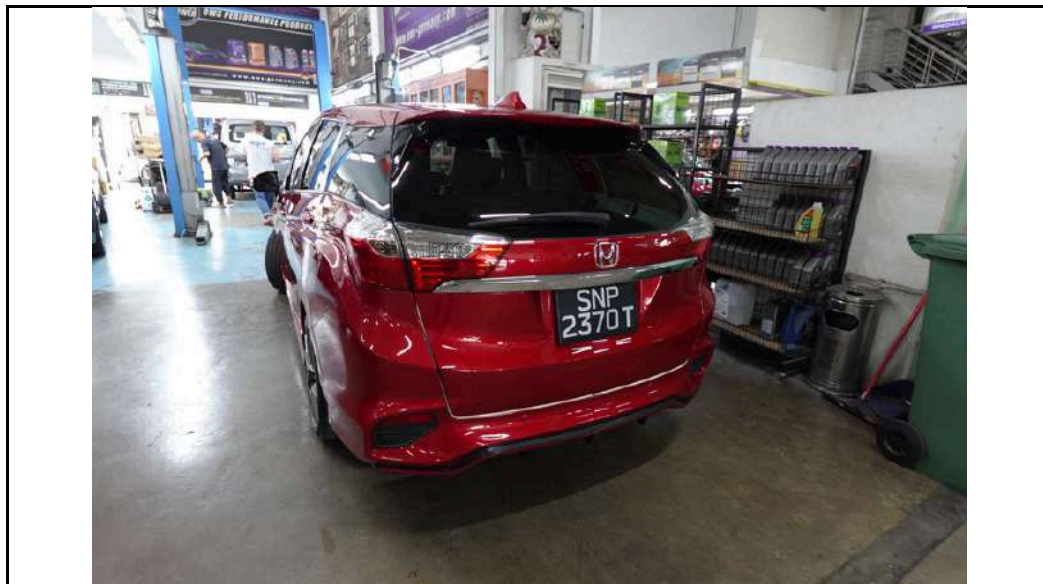




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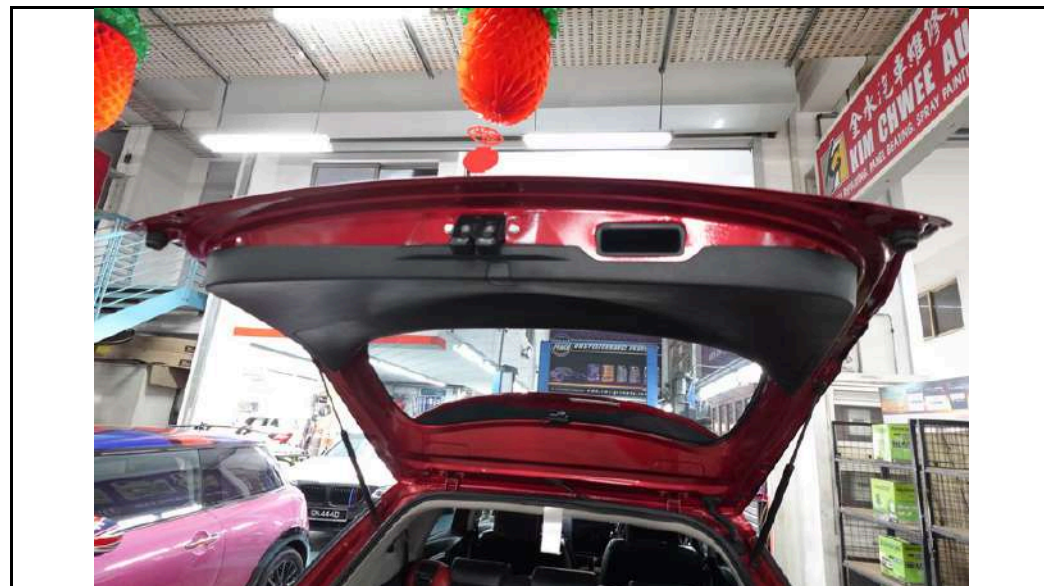


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REINSPECTION PHOTOS (Page 3 of 3)

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