



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	INV No.	AC2501470
60 WOODLANDS INDUSTRIAL PARK E4	INV Date	13/03/2025
SINGAPORE 757705	Reference	CS/SMR24120287/Enp3m4
ATTN: HUA YEN	Code	SMR

PROFESSIONAL SERVICE FEE

Vehicle No.	SNF 1383R
Insured Veh.	SHD 6171J
Claim No.	TAX/12/24/2029
Policy No.	
Accident Date	09/12/2024
Inspection Date	19/12/2024

Description	Total
Survey Inspection	128.00
Resurvey Inspection	
Digital Photographs	
Transportation	
Subtotal	128.00
GST (9%)	11.52
Grand Total	139.52

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

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

LKK Auto Consultants Pte Ltd

SML



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Affiliated to Federation Internationale Des Experts En Automobile				
STRIDES PREMIER AUTOMOTIVE SERVICES PL			Ref:	CS/SMR24120287/Enp3m4 (N)
60 WOODLANDS INDUSTRIAL PARK E4SINGAPORE 757705			Date:	13/03/2025
ATTN: HUA YEN			Code:	SMR
1. Policy Particulars :- THIRD PARTY CLAIM				
	Insured Veh.	SHD 6171J	Veh. Inspected	SNF 1383R
	Policy No.		Coverage (\$)	0.00
	Claim No.	TAX/12/24/2029	Excess (\$)	0.00
	Assign From	HUA YEN	Assign Date	18/12/2024
2. Vehicle Particulars & Condition				
	Make & Model	HONDA SHUTTLE	c.c	1496
	Engine No.	HIDDEN	Year of Reg.	2022
	Chassis No.	GK82201187	Colour	BLUE
	Odometer	60521 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3. Conditions of Tyres				
		Size	Make	Balance
	R/H Front Tyre	185/60R15	TOURADOR	5 mm
	L/H Front Tyre	185/60R15	TOURADOR	5 mm
	R/H Rear Tyre	185/60R15	TOURADOR	5 mm
	L/H Rear Tyre	185/60R15	TOURADOR	5 mm
4. Description of Damages				
	THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information				
	Accident Date	09/12/2024	Inspection Date	19/12/2024
	Survey held at	MOVA AUTOMOTIVE PTE LTD 15 FAN YONG ROAD SINGAPORE 629792		
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:		20 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SNF 1383R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BONNET	DENTED	950.70	950.70
2	BONNET HINGE LH/RH @\$85.70	BENT	171.40	171.40
1	BONNET LOCK	NOT NECESSARY	150.70	-
1	BONNET INSULATOR	TORN	150.70	150.70
10	BONNET INSULATOR CLIPS @\$5.89	NECESSARY	58.90	30.00
1	BONNET RUBBER SEAL	TORN	45.10	45.10
1	FRONT FENDER LH	DENTED	650.10	530.00
1	FRONT FENDER INNER LINER LH	NOT NECESSARY	107.60	-
10	FRONT FENDER INNER LINER CLIPS LH @\$5.89	NOT NECESSARY	58.90	-
1	FRONT WHEEL HOUSE EXTENSION INNER	NOT NECESSARY	250.70	-
1	FRONT WHEEL HOUSE EXTENSION OUTER	NOT NECESSARY	280.40	-
1	WIPER PANEL TRIM	CUT	280.50	280.50
1	FRONT W/SCREEN	BROKEN	2,035.20	1,645.00
1	FRONT W/SCREEN SEAL	NECESSARY	159.12	120.00
2	HEADLAMP LH/RH @\$2,450.40	BROKEN	4,900.80	4,500.00
1	HEADLAMP LOWER BRKT LH	BROKEN	65.10	65.10
1	GRILLE BASE	BROKEN	301.40	301.40
1	GRILLE COVER	BROKEN	350.70	350.70
1	HONDA LOGO	NECESSARY	45.30	45.30
1	FRONT BUMPER	BROKEN	985.60	985.60
2	FRONT BUMPER RETAINER LH/RH @\$35.70	BROKEN	71.40	71.40
10	FRONT BUMPER CLIPS @\$5.89	NECESSARY	58.90	30.00
1	BATTERY BRKT	BROKEN	65.80	65.80
1	BATTERY STAY	BENT	28.60	28.60
1	SUPPORT PANEL	DENTED	780.10	780.10
1	SUPPORT PANEL TOP GARNISH	BROKEN	95.80	95.80
8	SUPPORT PANEL TOP GARNISH CLIPS @\$5.89	NECESSARY	47.12	20.00
1	BONNET STOPPER LH	NOT NECESSARY	18.90	-
1	A/C CONDENSER	BENT/TWISTED	878.10	878.10
1	RADIATOR	BROKEN	1,450.40	1,356.00
1	TAILGATE	DENTED	1,250.40	1,194.00

Report Ref No. CS/SMR24120287/Enp3m4(N)



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	SHUTTLE EMBLEM	NECESSARY	65.40	65.40
2	TAILGATE HINGE LH/RH @\$78.30	NOT NECESSARY	156.60	-
1	TAILGATE GLASS	BROKEN	1,322.10	1,210.00
1	SET TAILGATE GLASS SEAL	NECESSARY	150.80	120.00
1	WIPER BLADE	NOT NECESSARY	60.10	-
1	WIPER MOTOR	NOT NECESSARY	401.30	-
2	TAILGATE ABSORBER LH/RH @\$320.00	NOT NECESSARY	640.00	-
1	TAILGATE INNER TRIM	BROKEN	231.40	231.40
1	TAILGATE LOCK	BENT	180.70	180.70
1	TAILGATE STICKER	NOT NECESSARY	45.10	-
1	TAILGATE OUTER TRIM HANDLE	CRUSHED	381.10	381.10
1	HONDA LOGO	NECESSARY	55.40	55.40
2	TAILGATE LAMP LH/RH @\$420.40	BROKEN	840.80	840.80
2	TAILLAMP LH/RH @\$550.40	O/S BROKEN	1,100.80	550.40
2	TAILLAMP CLIPS LH @\$5.89	NECESSARY (1PC ONLY)	11.78	5.89
1	TAILGATE WEATHERSTRIPS	CRUSHED	178.60	178.60
1	REAR FENDER RH	DENTED	1,125.40	1,125.40
1	REAR FENDER INNER LINER RH	BROKEN	350.40	350.40
1	REAR BUMPER	BROKEN	850.40	850.40
2	REAR BUMPER RETAINER LH/RH @\$35.80	BROKEN	71.60	71.60
1	REAR BUMPER TOW COVER	BROKEN	58.10	58.10
10	REAR BUMPER CLIPS @\$5.89	NECESSARY	58.90	30.00
1	REAR BUMPER CHROME STRIPS	BROKEN	85.10	85.10
2	REAR BUMPER REFLECTOR LH/RH @\$82.70	BROKEN (1PC ONLY)	165.40	82.70
1	REAR END PANEL	DENTED	580.10	580.10
2	TAILLAMP PANEL LOWER LH/RH @\$358.00	DENTED	716.00	716.00
1	REAR END PANEL TRIM	BROKEN	120.40	120.40
1	SPARE TYRE PANEL	DENTED	1,150.80	1,150.80
1	SPARE TYRE PANEL REINFORCEMENT HORIZONTAL	DENTED	190.40	190.40
1	SPARE TYRE PANEL REINFORCEMENT VERTICAL	DENTED	180.70	180.70
1	REAR FENDER INNER TRIM UPPER, SIDE	CUT	185.90	185.90
1	REAR FENDER INNER TRIM LOWER, SIDE	CRUSHED	185.40	185.40

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	FLOOR BOARD	BROKEN	308.10	308.10
1	LID JACK TRIM	BROKEN	150.10	150.10
1	TOOL LID TRAY COVER	BROKEN	550.40	495.00
1	TOOL LID TRAY	BROKEN	240.10	240.10
1	REAR FENDER INNER TRIM LOWER BOARD	CRUSHED	195.40	195.40
1	TYRE SEALANT SPONGE	CRUSHED	240.40	240.40
1	INNER SECOND COMPARTMENT	BROKEN	180.70	180.70
1	EXHAUST MUFFLER	DENTED	650.90	650.90
1	EXHAUST MUFFLER HEATSHIELD	BENT	45.10	45.10
1	EXHAUST CENTER PIPE	NOT NECESSARY	601.70	-
1	REAR CHASSIS RH	DENTED	298.10	298.10
1	REAR CHASSIS TOP PANEL	DENTED	355.80	355.80
1	RH REAR QTR GLASS (NPA)	NOT NECESSARY	-	-
	LESS 20% DISCOUNT		-6,491.64	-5,526.82
			25,966.58	22,107.27
	<u>SPECIAL NETT ITEMS</u>			
1	RR SIDE GLASS RH PRIMER (SN)	NECESSARY	30.00	20.00
1	RR SIDE GLASS SEALANT (SN)	NECESSARY	40.00	30.00
1	REVERSE SENSOR (SN)	BROKEN	200.00	200.00
1	NUMBER PLATE (SN)	BENT	40.00	40.00
5	IROAD @\$450.00 (SN)	MISSING/WIRE TORN (1PC ONLY)	2,250.00	400.00
1	TAILGATE GLASS PRIMER (SN)	NECESSARY	30.00	20.00
1	TAILGATE GLASS SEALANT (SN)	NECESSARY	40.00	40.00
1	COOLANT (SN)	NECESSARY	60.00	30.00
1	A/C GAS (SN)	NECESSARY	40.00	40.00
1	V-KOOL X75 (SN)	NECESSARY	450.00	400.00
1	FRONT W/SCREEN SEALANT (SN)	NECESSARY	40.00	40.00
1	FRONT W/SCREEN PRIMER (SN)	NECESSARY	30.00	20.00
1	IU BRKT (SN)	NECESSARY	40.00	25.00
			3,290.00	1,305.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>LABOUR</u>			
	TO CUT/WELD/PANEL BEAT FRONT LH WHEEL HOUSE AND REALIGN ALL THE CONNECTION.	NOT NECESSARY	700.00	600.00
	TO REMOVE AND REFIT LH FRONT SUSPENSION TO FACILITATE REPAIR.		200.00	-
	TO SPRAY PAINT ON FRONT BONNET, HINGE, WHEEL HOUSE, LH FRONT FENDER, FRONT BUMPER, LH DOOR & A-PILLAR.		1,000.00	900.00
	TO CUT/ WELD/ PANEL BEAT REAR END PANEL, BOTH TAILLAMP LOWER PANEL, BOOT FLOOR PANEL, RH REAR CHASSIS, RH REAR FENDER AND RH INNER CHASSIS UPPER PANEL.		2,600.00	1,800.00
	TO SPRAY PAINT ON TAILGATE, REAR BUMPER, RH REAR FENDER, TAILGATE HANDLE TRIM, REAR END PANEL, BOTH LH/RH TAILLAMP LOWER PANEL, BOOT FLOOR, CHASSIS MEMBER.		1,650.00	1,400.00
	TO APPLY ANTI RUST PROOFING ON AFFECTED AREAS.		180.00	50.00
	TO APPLY BODY JOINT SEALANT ON CUTTING AREAS.		120.00	50.00
	TO REMOVE & REFIT RH REAR PANEL GLASS.		150.00	50.00
	TO REPLACE TAILGATE GLASS.		150.00	120.00
	TO REMOVE/ REFIT REAR AXLE BEAM TO ASSIST REPAIR.		250.00	100.00
	TO REPLACE EXHAUST MUFFLER AND LEAK TEST.		180.00	80.00
	TO REMOVE/ REFIT LUGGAGE COMPARTMENT INNER TRIM, UPHOLSTERY, FLOOR BOARD & ETC.		120.00	100.00
	TO INSTALL IN-CAR CAMERA & FUNCTIONING CHECK.		80.00	50.00
	TO INSTALL REVERSE SENSOR, REVERSE CAMERA & CHECK FUNCTIONING.		80.00	30.00
	TO CHECK FOR/ RECTIFY WIRING CONNECTION, RESET SYSTEM, DIAGNOSIS AND LIGHTING SYSTEM CHECK.		250.00	80.00
	TO REPLACE FRONT W/SCREEN.		150.00	120.00
			7,860.00	5,530.00
	GRAND TOTAL		37,116.58	28,942.27

Report Ref No. CS/SMR24120287/Enp3m4(N)



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			23,150.00
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Report Ref No. CS/SMR24120287/Enp3m4(N)

CHEN TSUE YEE

Automotive Assessor

ANG BRYAN TANI

Automotive Assessor / Investigator

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 responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying 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	12/12/2024 15:52 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	09/12/2024 08:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CHOA CHU KANG NORTH 6
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNF1383R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	IRFAN SAIFULLAH B RAWI
NRIC No	SXXXX417E
Email Address	IRFAN.SAIF.RAWI@GMAIL.COM
Mobile Phone No	(Phone) +65-96232143
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	1496
Vehicle Fuel	Petrol
First Registration Date	-
Chassis no	GK82201187
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5135705015-01

DRIVER

Name of Driver	IRFAN SAIFULLAH B RAWI
NRIC No	SXXXX417E
Date Of Birth	25/10/1991
Occupation	Indoor
Driving Pass Date	01/02/2011
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	13 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96232143
Alt. Phone Number	-
Email Address	IRFAN.SAIF.RAWI@GMAIL.COM
Address	433C BUKIT BATOK WEST AVENUE 8
Address complement	#05-1521
Postcode	653433
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	Chain Collision
Weather Conditions	DRIZZLING
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?	Yes
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	PASSENGER
Gender	Male

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

-

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 YN5907G
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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHD6171J
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Taxi
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 IRFAN SAIFULLAH B RAWI
Gender -
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SNF1383R
Were seat belts worn? -
Was this injured conveyed to hospital by ambulance? Yes

INJURED 2

Name of injured person ILYAS NAZIRULLAH BIN IRFAN SAIFULLAH
Gender -
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SNF1383R

Were seat belts worn? -
Was this injured conveyed to hospital by ambulance? Yes

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:

(iii) 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

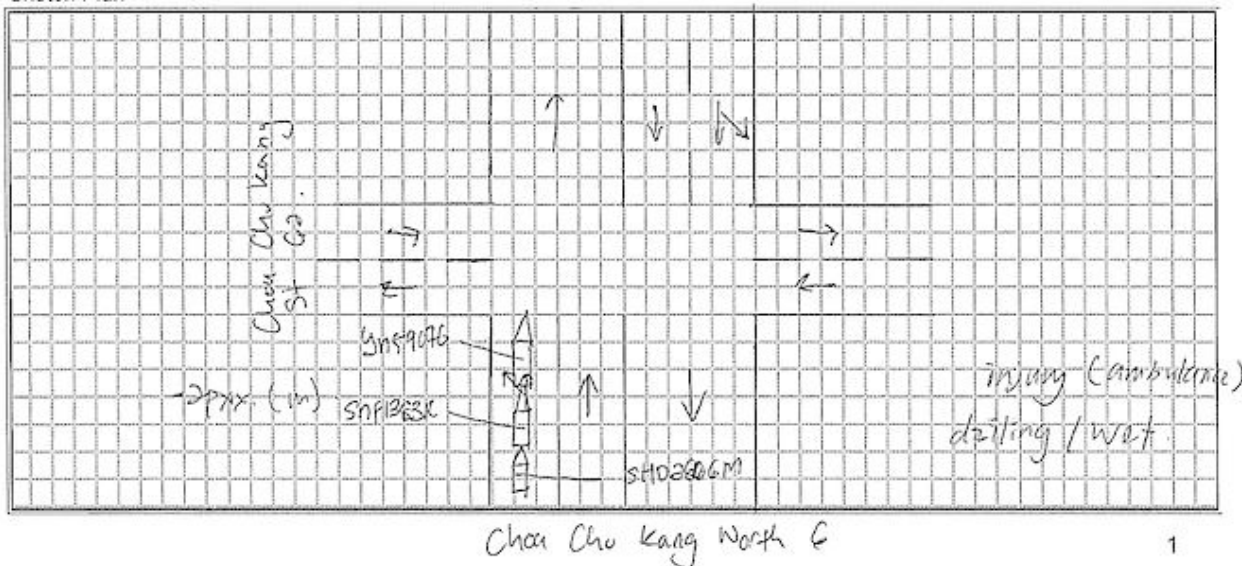
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

12/12/24 1038
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	
VEHICLE NO: SNF B83F	ACCIDENT DATE & TIME: 9/12/24 0815
CONTACT NUMBER: 96232143	E-MAIL: irfan.sait.rafi@gmail.com
LOCATION: Choa Chu Kang North 6.	
I was waiting at a traffic light at the junction of Choa Chu Kang North 6 and Choa Chu Kang St 62/52.	
I was waiting behind a lorry (YNS907G) and waiting for the light to turn green to make a left turn into Choa Chu Kang St 62.	
While stationary, I suddenly felt an impact from behind and the hit caused my car to move forward and hit the lorry in front of me.	
As I was in the car I asked a witness about what had hit me and they said a taxi (SHD 2806M) had hit me from behind.	
NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE A 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.	
PLEASE STATE: <input type="checkbox"/> CLAIM OWN POLICY <input checked="" type="checkbox"/> CLAIM THIRD PARTY <input type="checkbox"/> CLAIM OD/TP AT OTHER WORKSHOP <input type="checkbox"/> REPORTING ONLY	

Declaration

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

 9/12/24 1046
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)



**SINGAPORE
POLICE FORCE**



T/20241210/7079

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

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Report No. T/20241210/7079

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNF1383R	NTUC Income Insurance Co-Operative Limited	5135705015-01	04/05/2024	03/05/2025

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	ILYAS NAZIRULLAH BIN IRFAN SAIFULLAH		ID No.	T1930077Z
Related Vehicle	SNF1383R (Motor car)		Contact No.	96232143
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	09/12/2024		Date Discharge	09/12/2024
No. of Days granted Medical Leave (MC)		07	Degree of Injury	Slight
Driver				
Name	IRFAN SAIFULLAH BIN RAWI		ID No.	S9138417E
Related Vehicle	SNF1383R (Motor car)		Contact No.	96232143
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL		Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	09/12/2024		Date Discharge	09/12/2024
No. of Days granted Medical Leave (MC)		03	Degree of Injury	Slight

Brief Details.

My car was stopped at the junction of Choa Chu Kang North 6 and Choa Chu Kang Street 65/52 as I was waiting for the traffic light to turn green.

My car was positioned on the left lane of the road as I was waiting to make a left turn into Choa Chu Kang Street 62. While waiting, I suddenly felt a very strong impact from behind and then I felt my car hit the lorry that was in front of me.



**SINGAPORE
POLICE FORCE**

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



T/20241210/7079

3 of 3

Report No. T/20241210/7079

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
NADYA BINTE MOIDEEN
Contact No.: 65476331

NP168

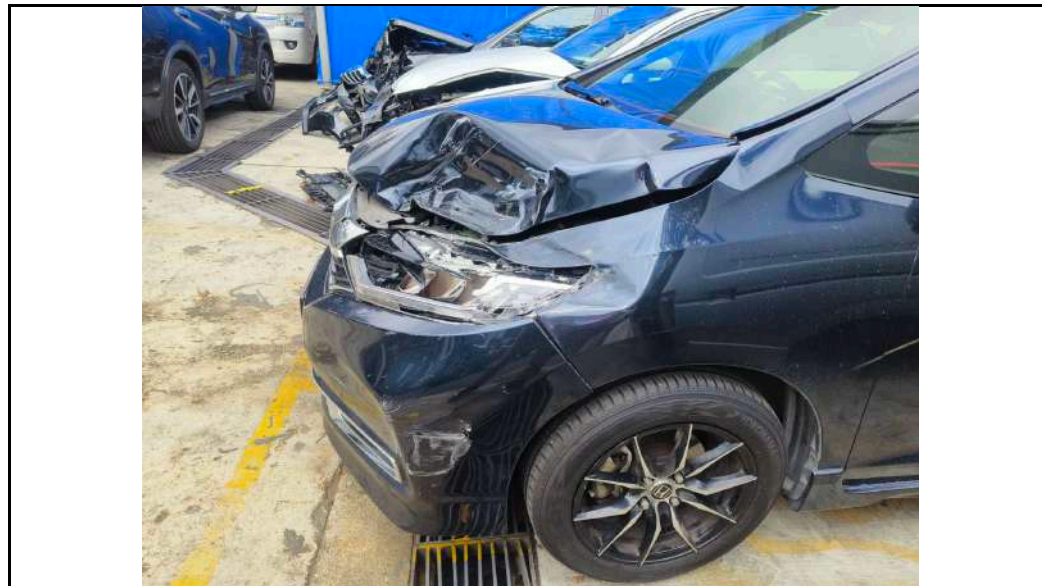
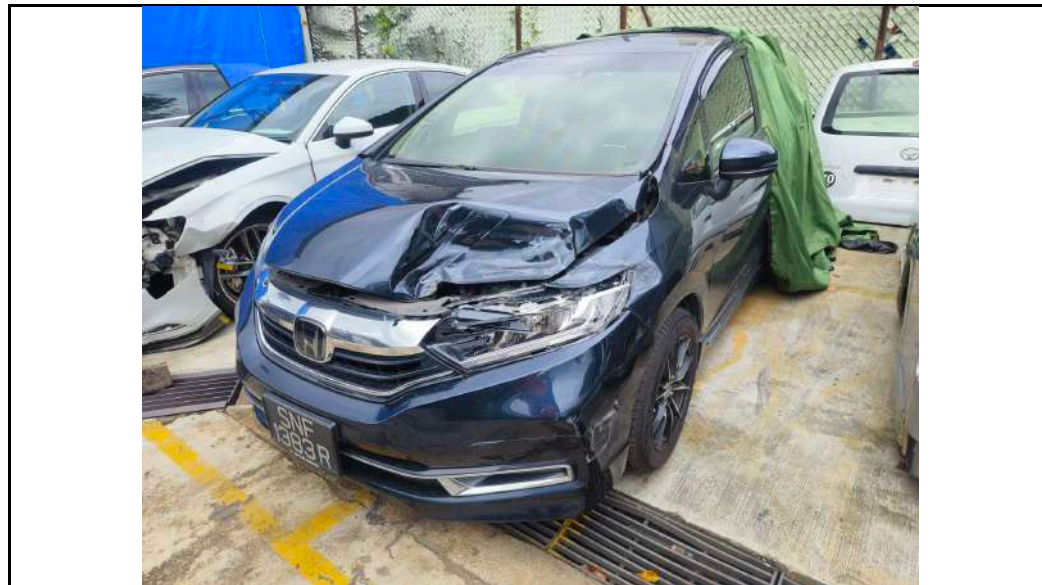
Signature Of Informant:

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

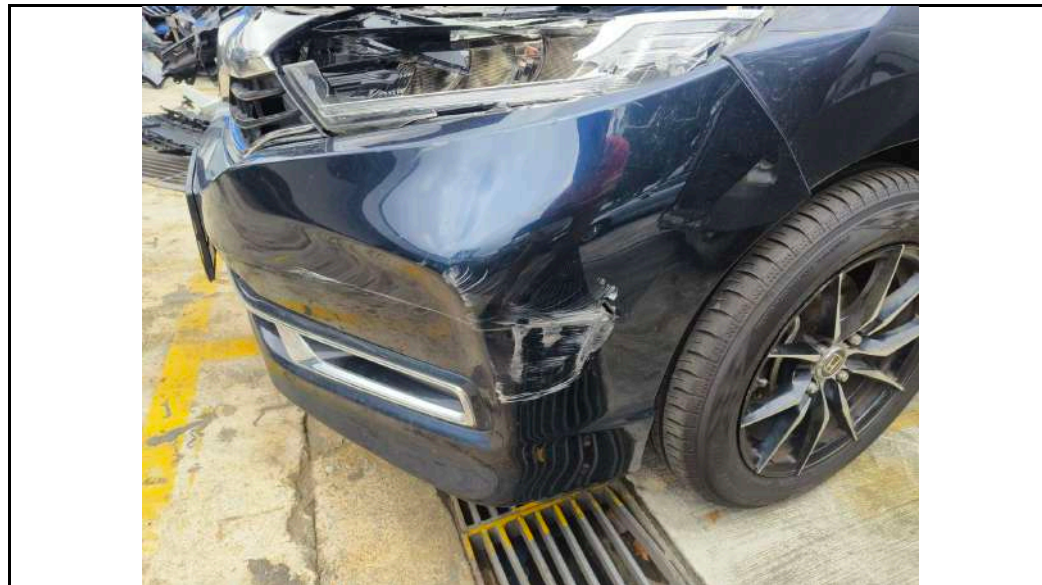
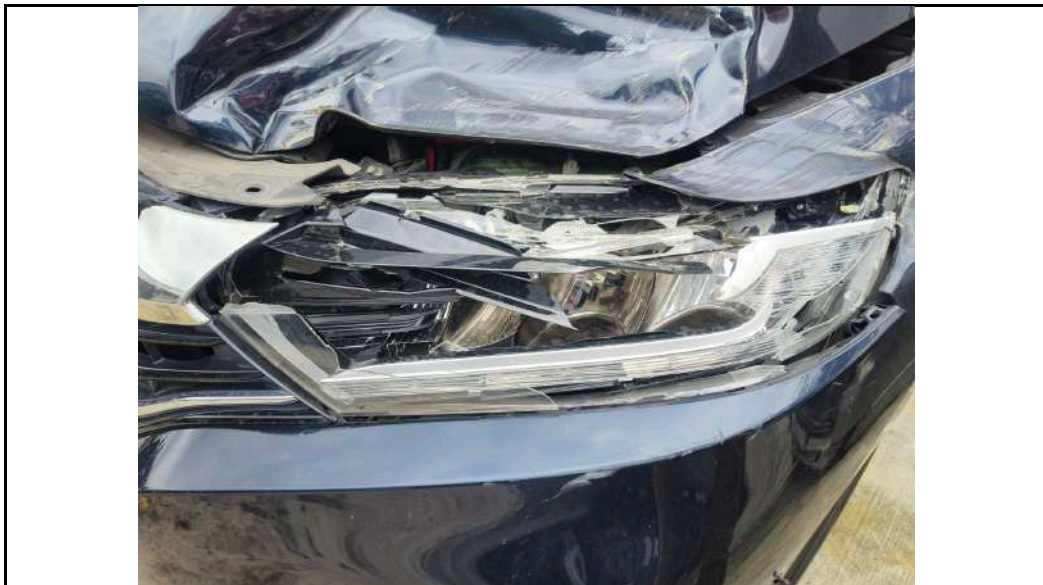
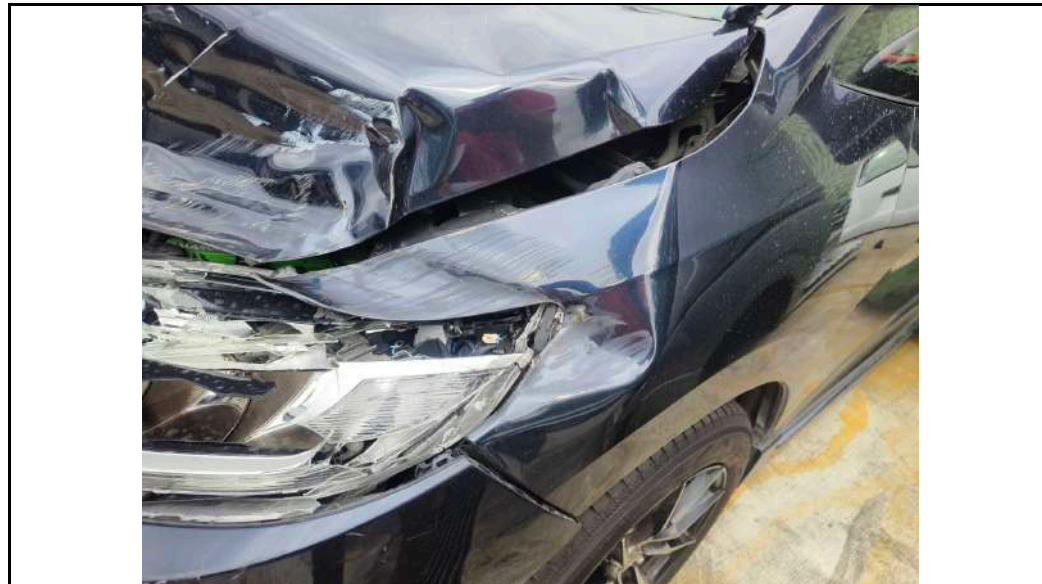
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Classification Of Case:

PHOTOGRAPHS FOR VEHICLE NO. : SNF 1383R



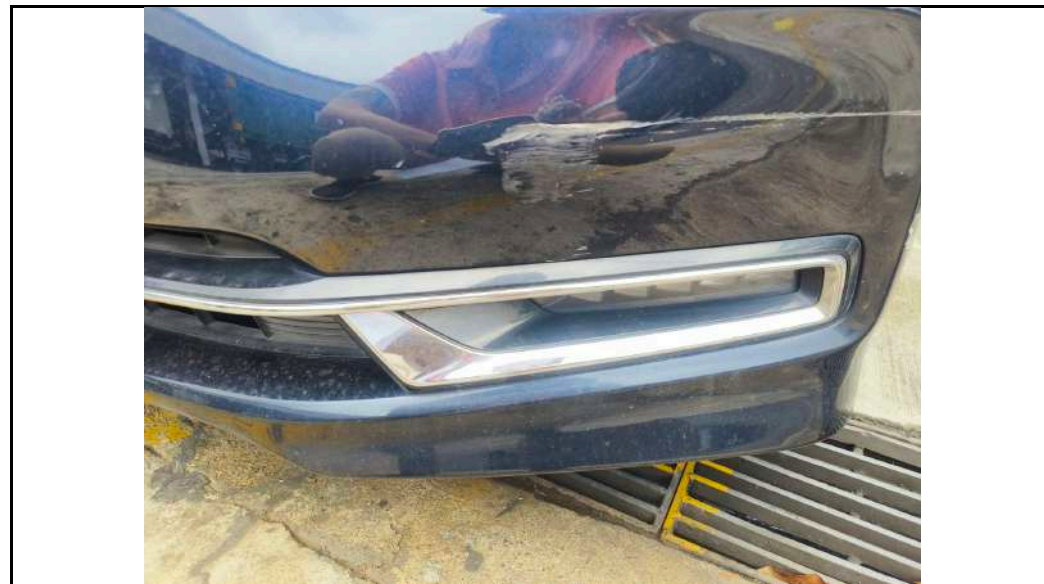
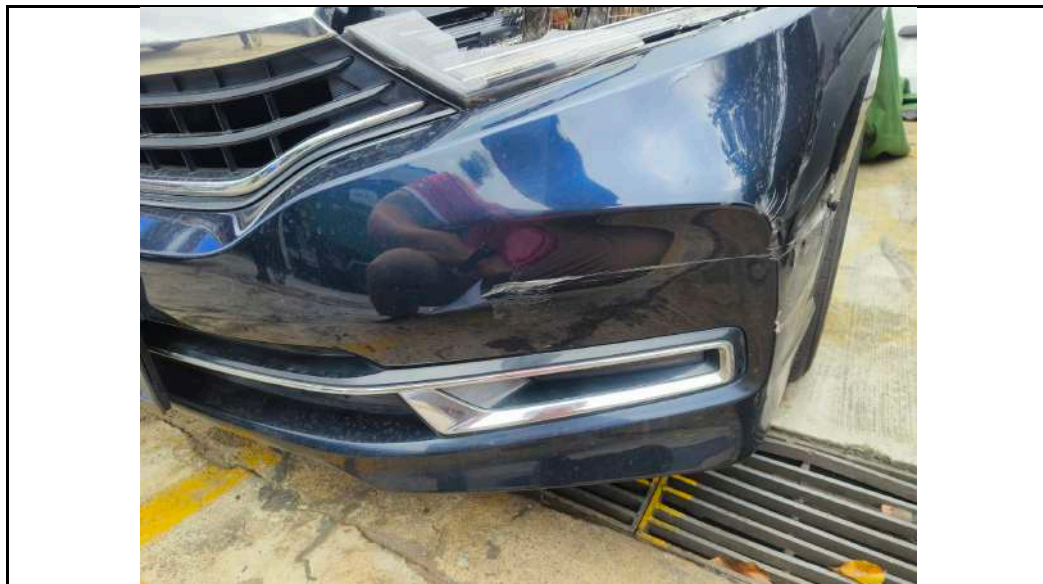
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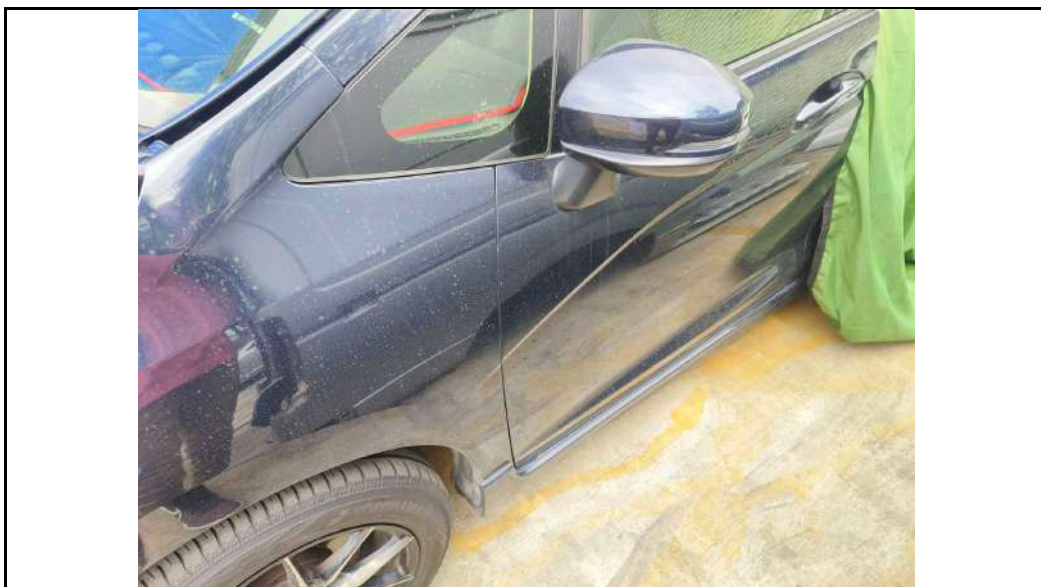
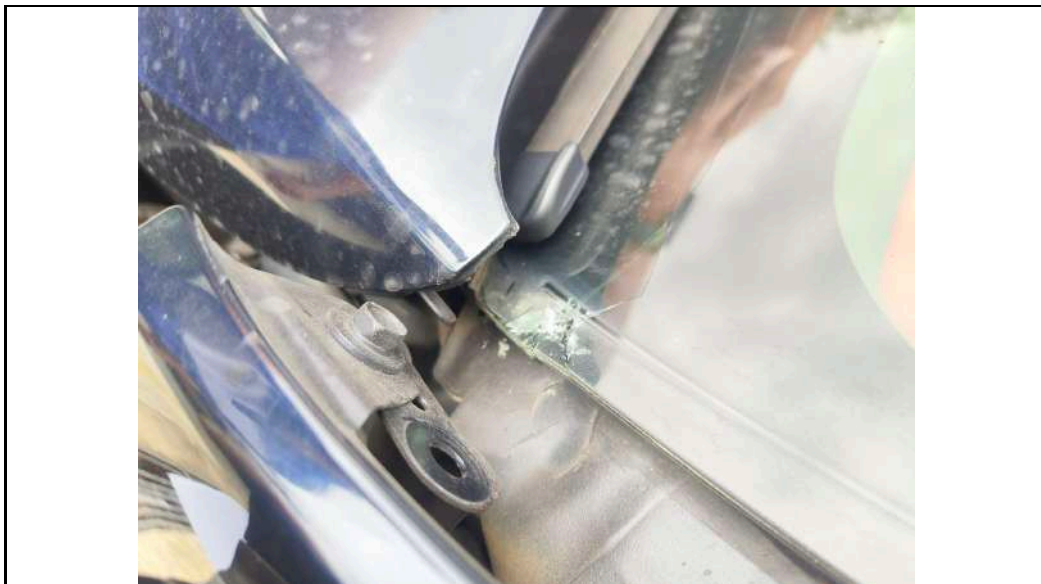
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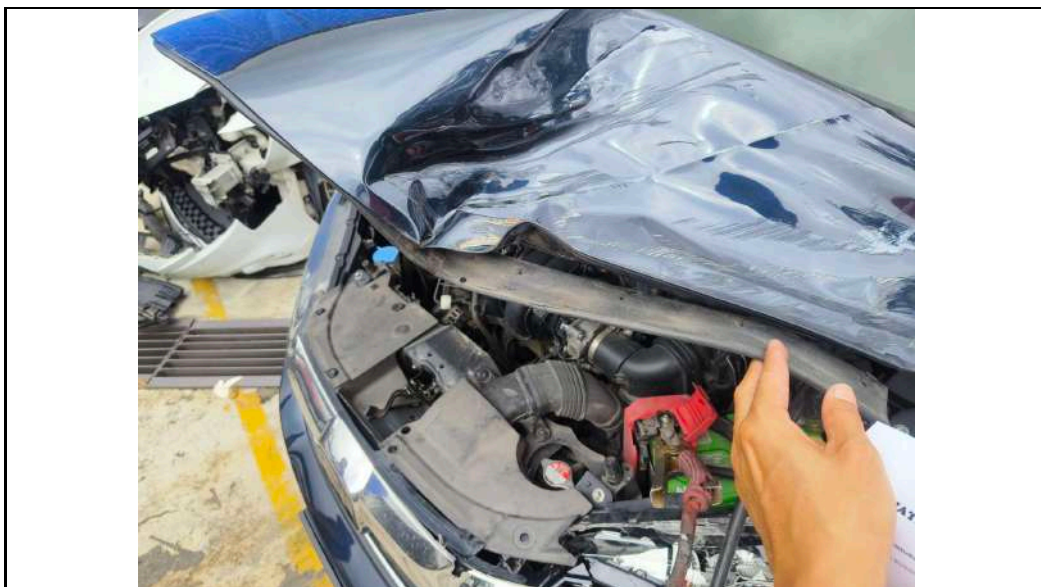
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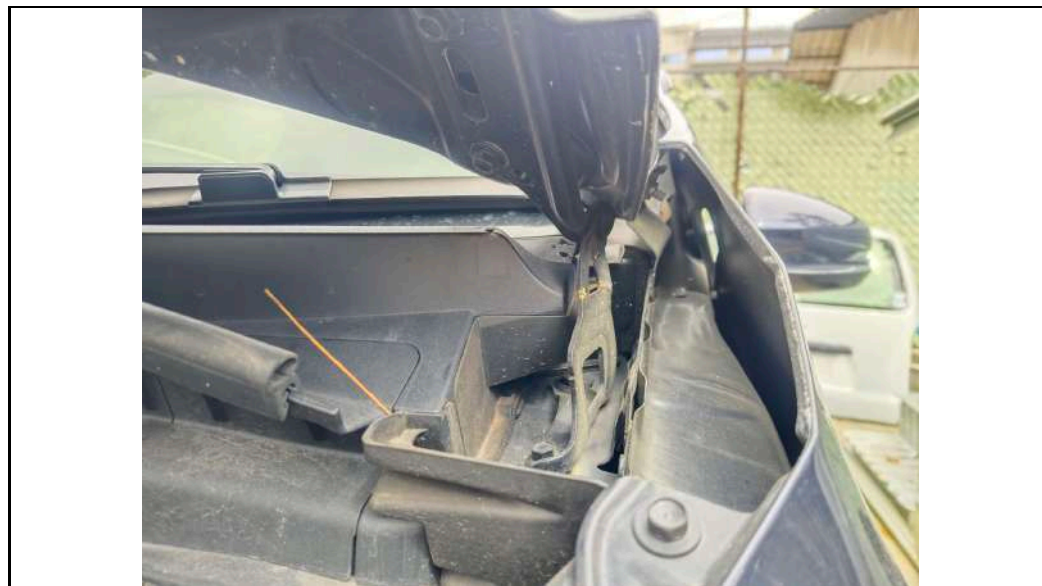
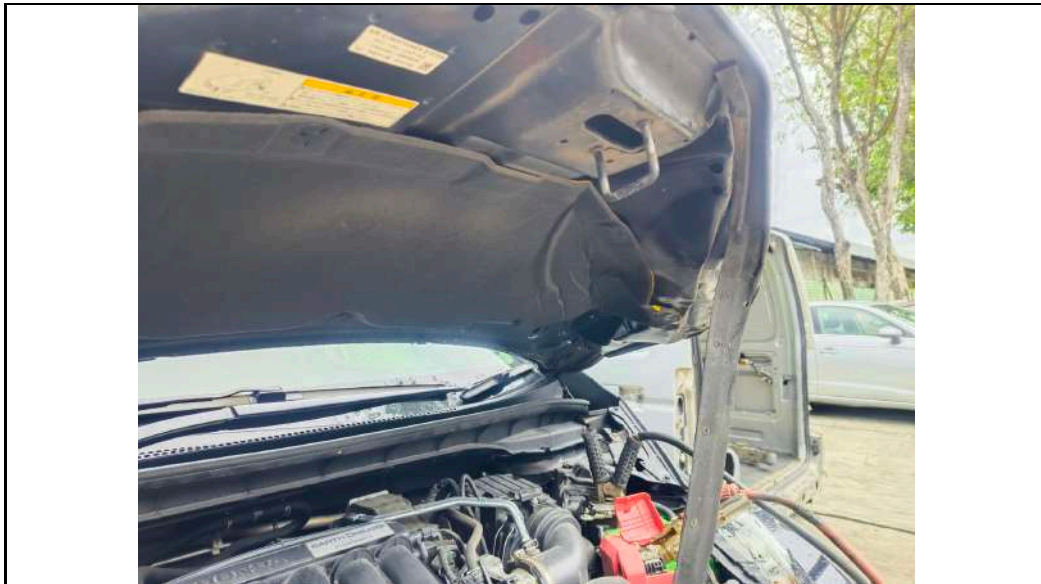
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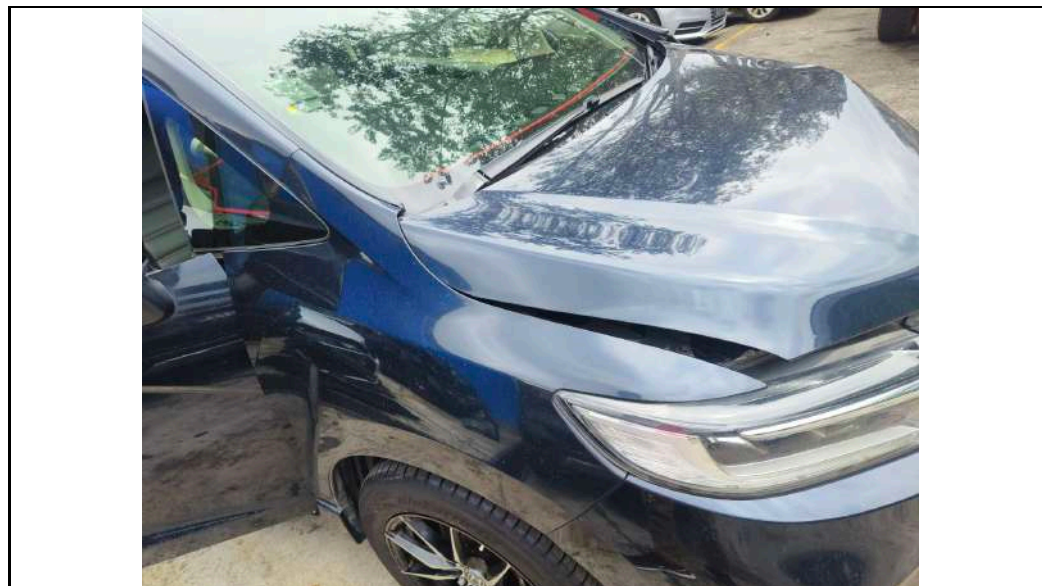
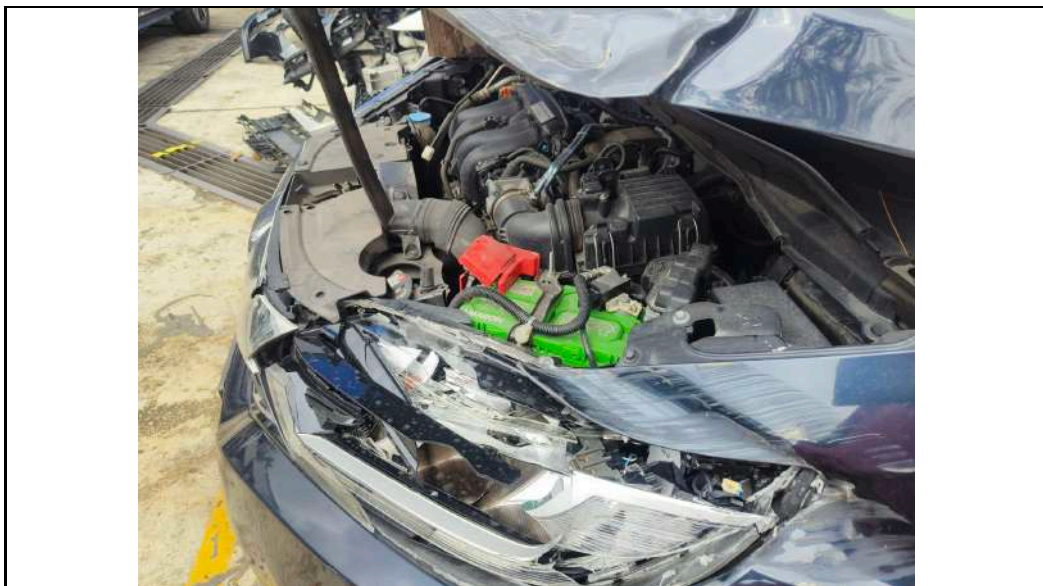
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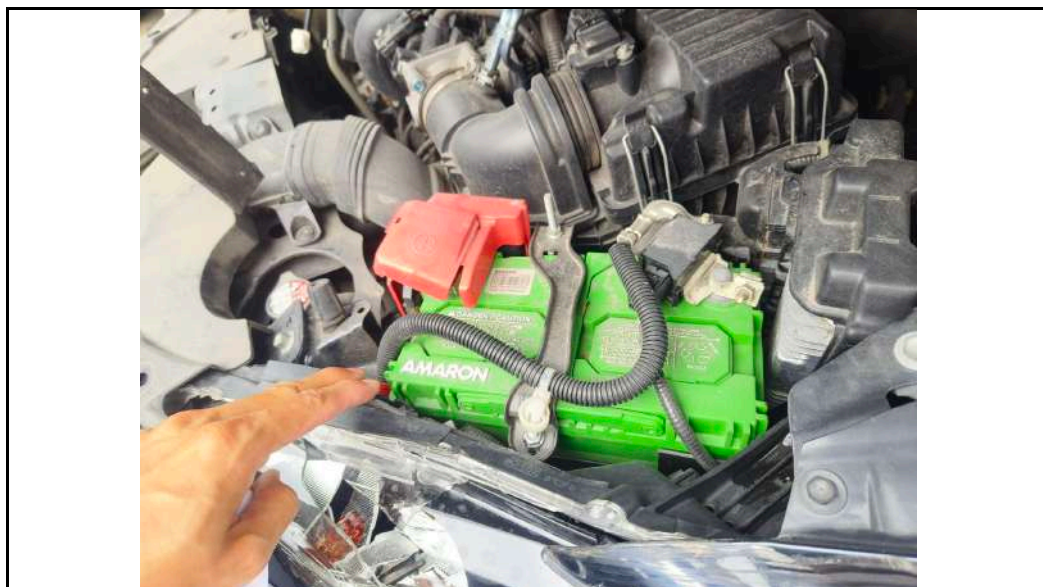
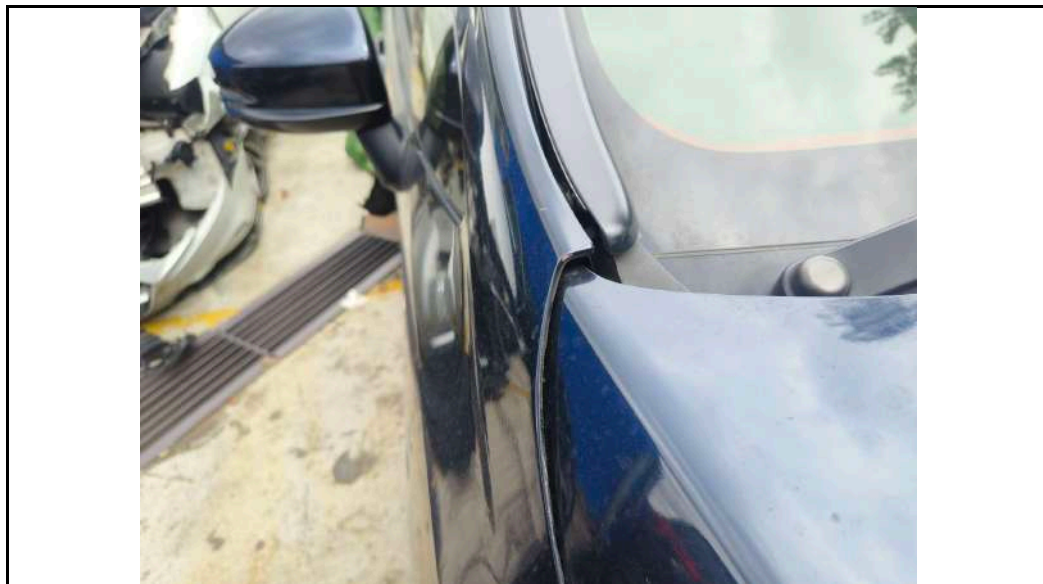
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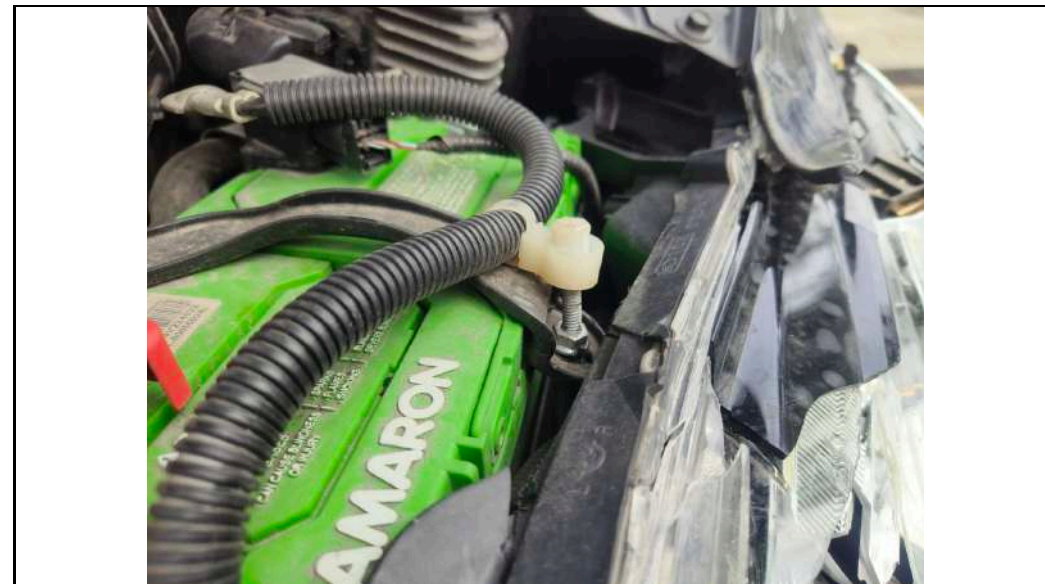
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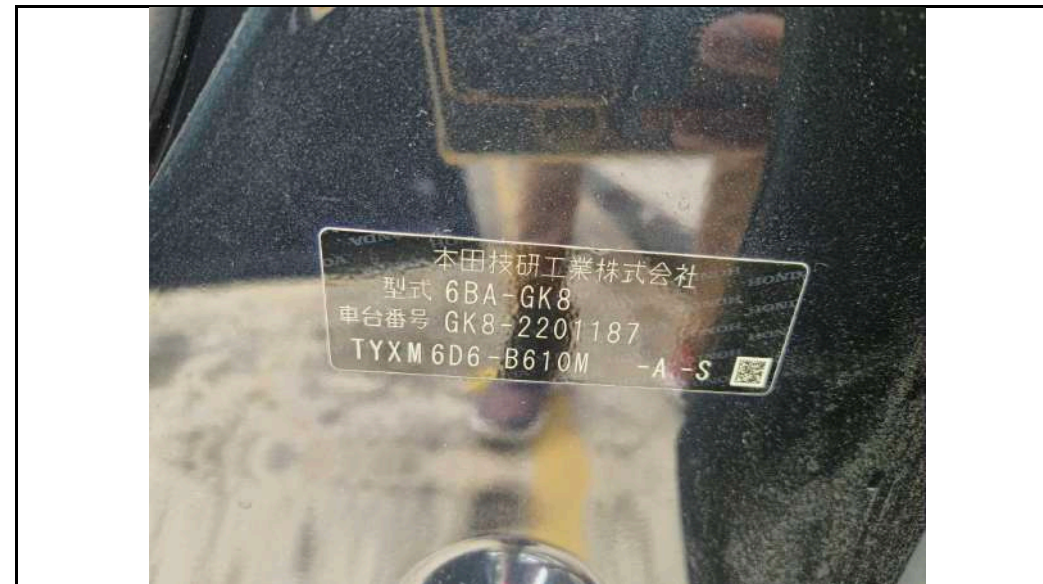
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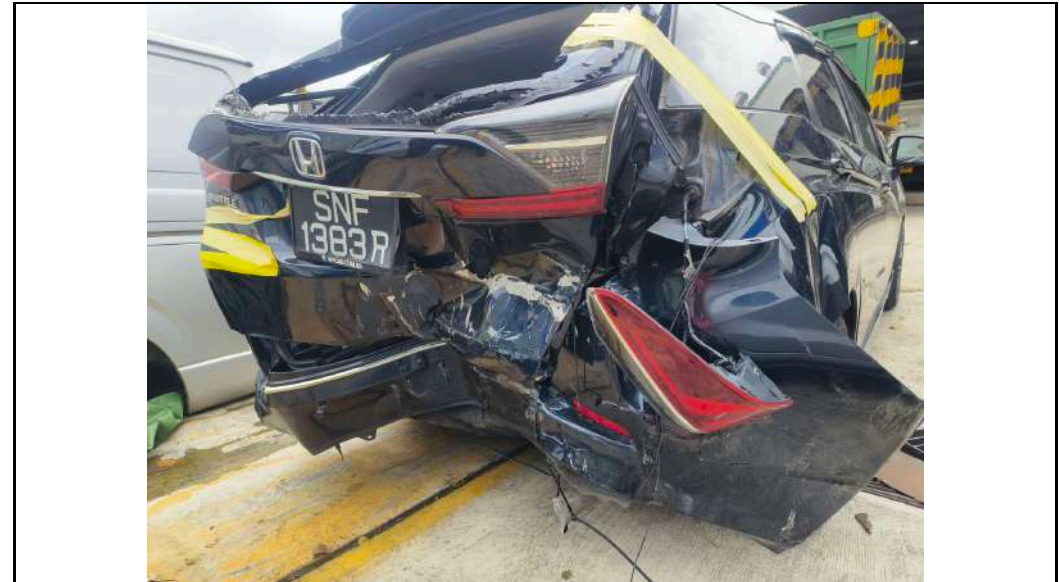
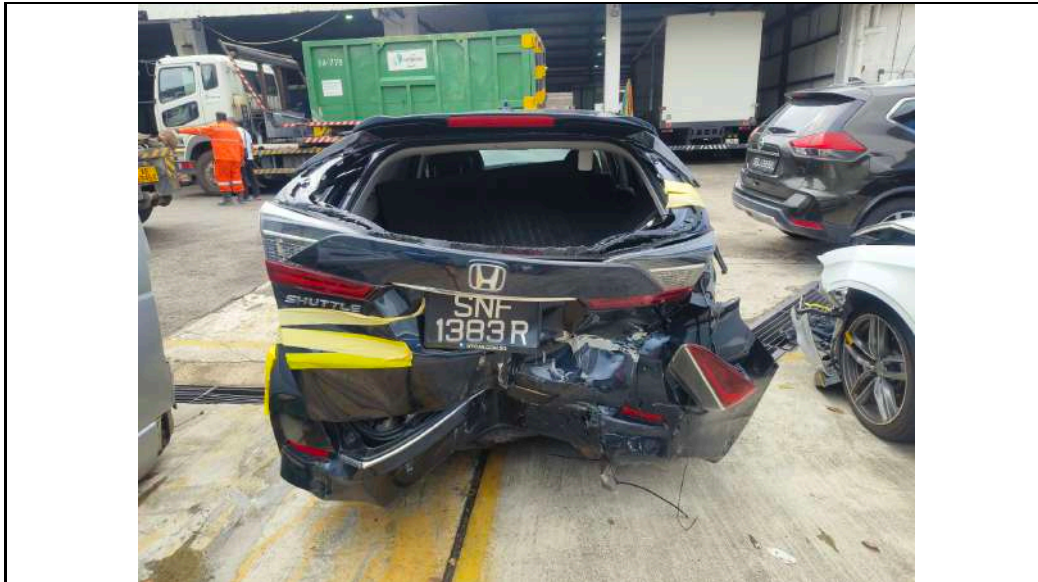
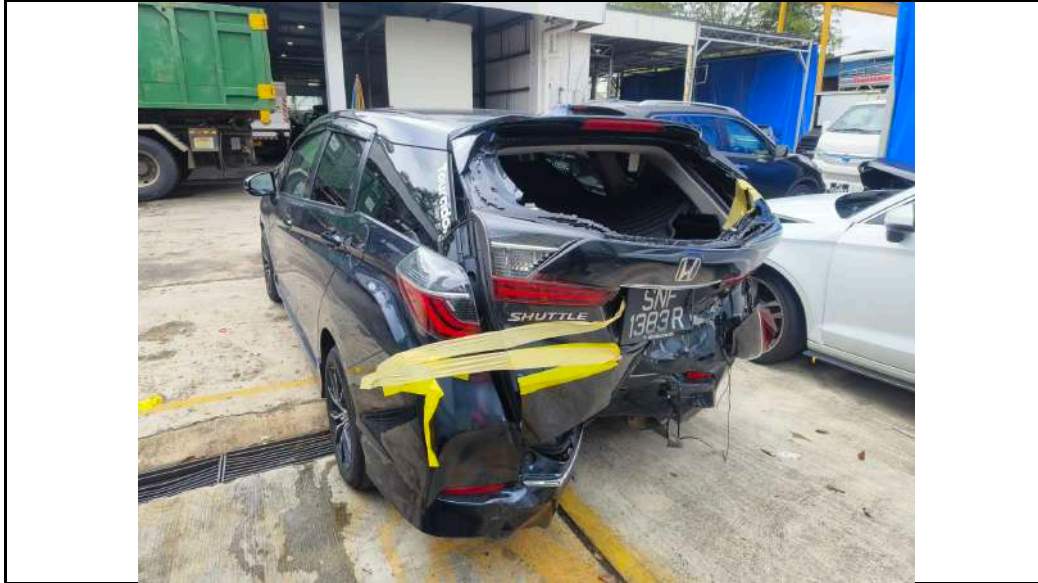
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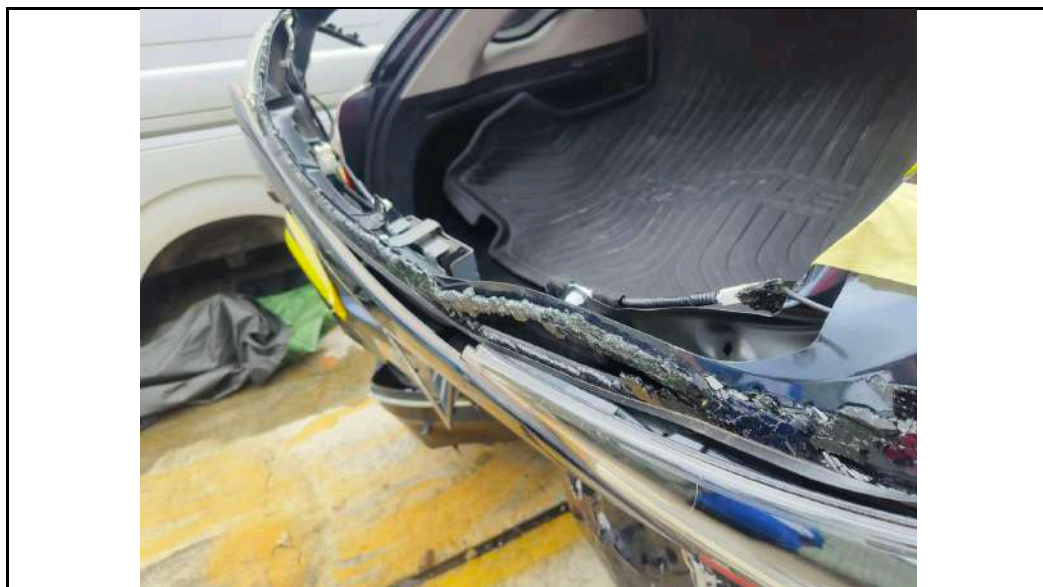
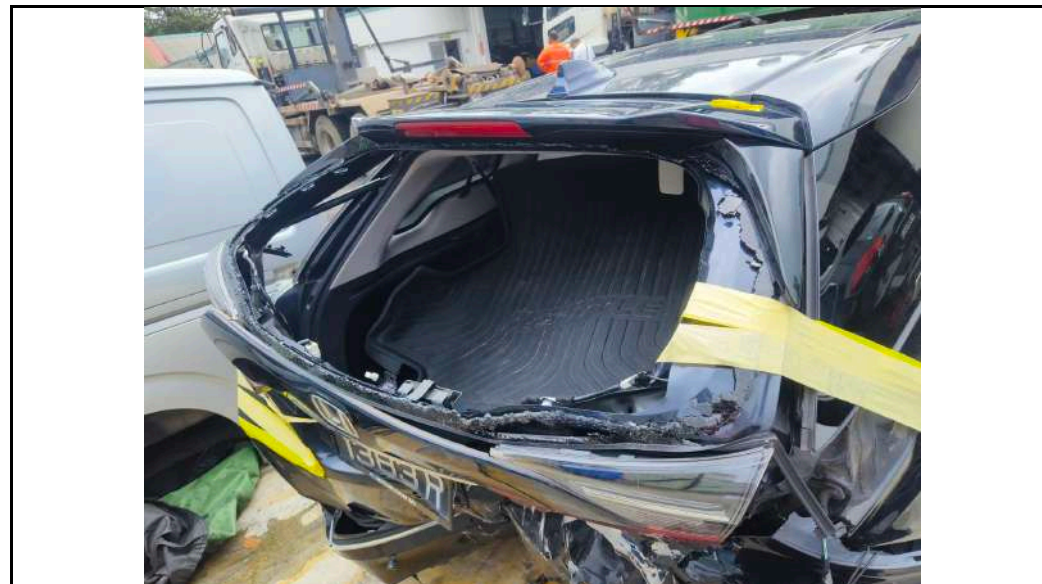
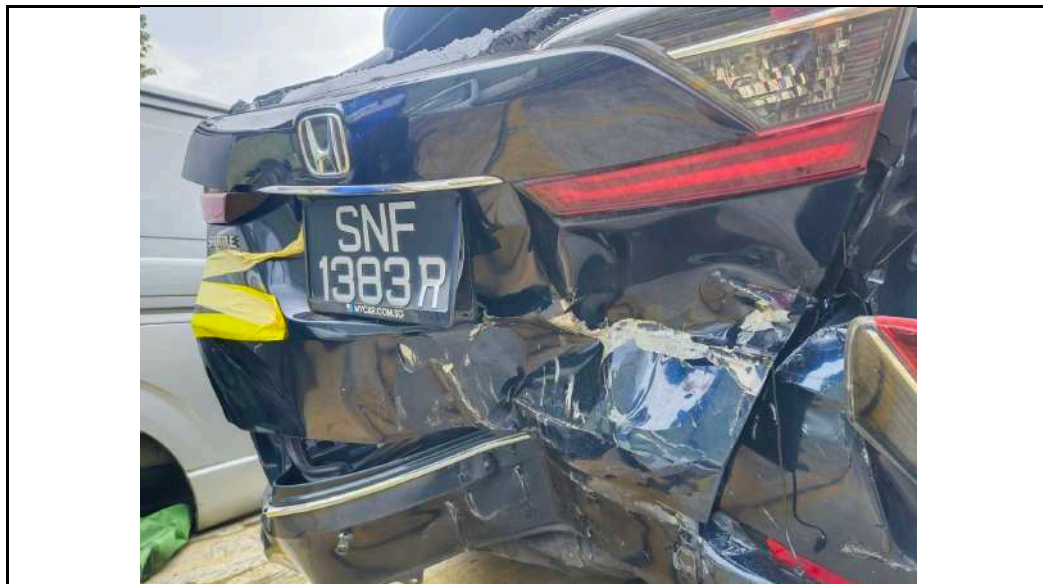
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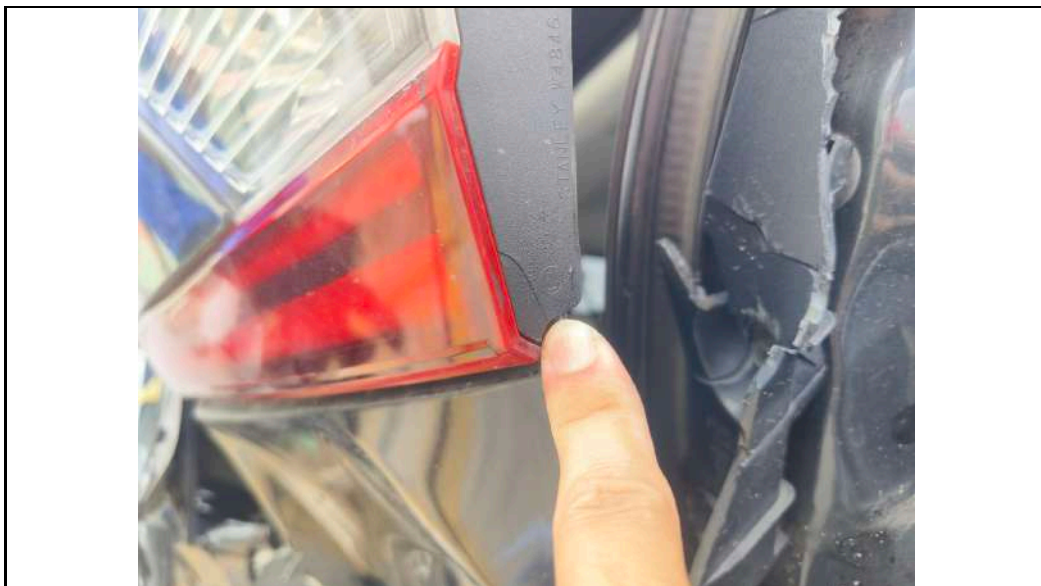
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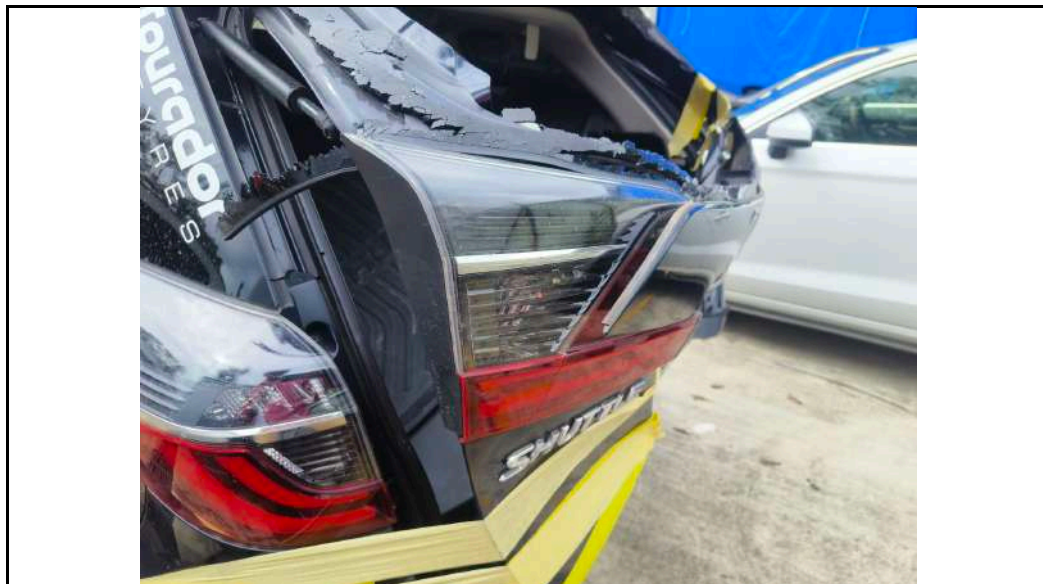
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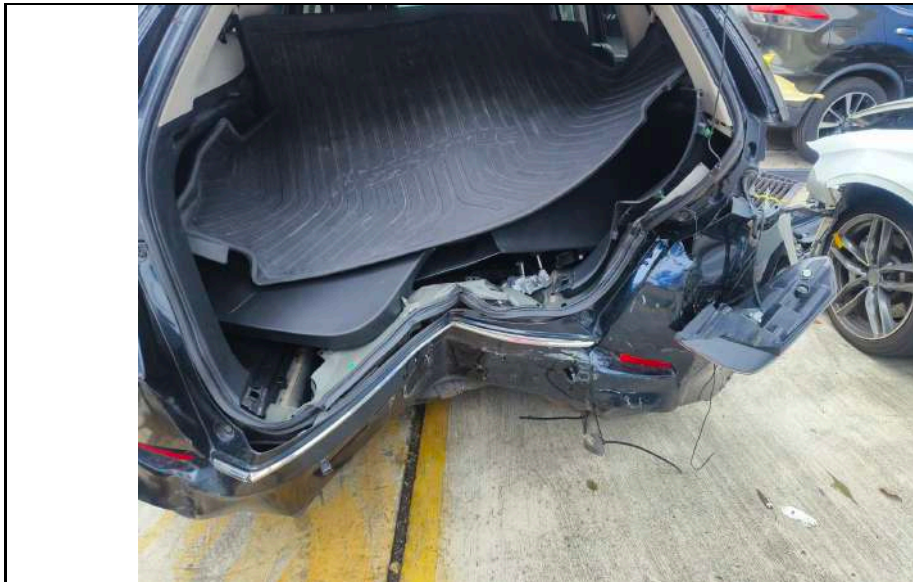
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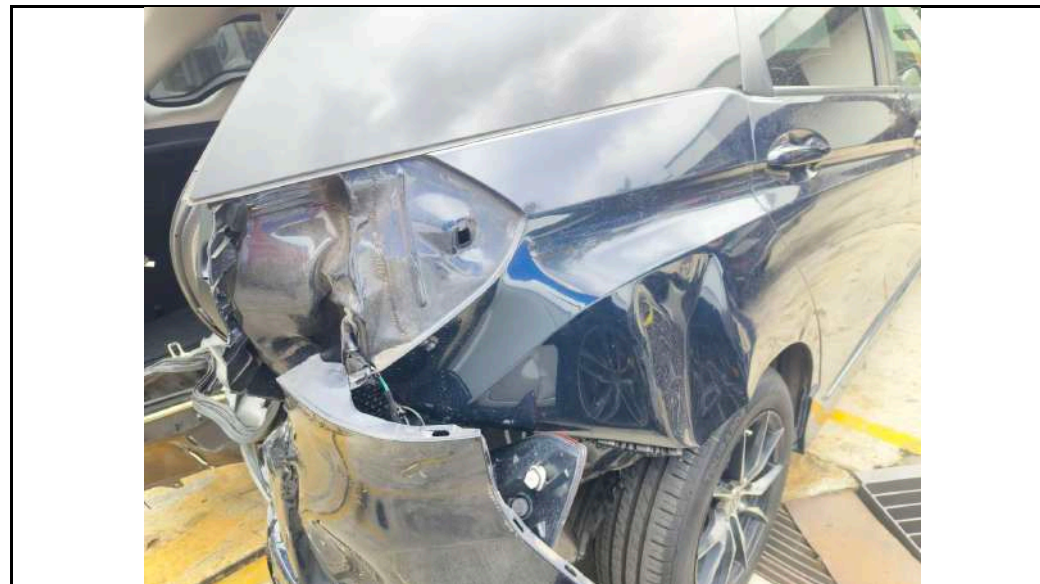
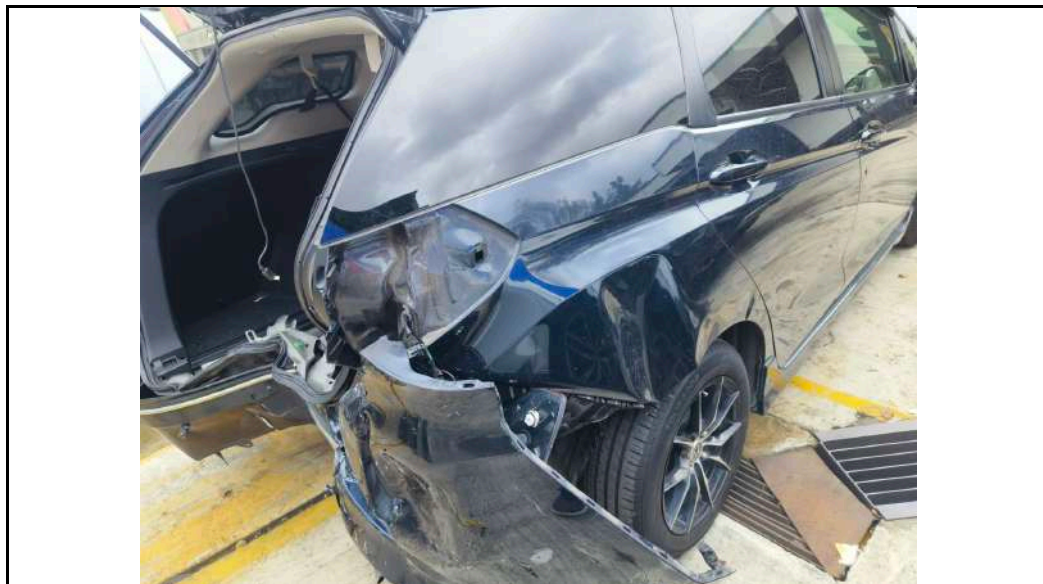
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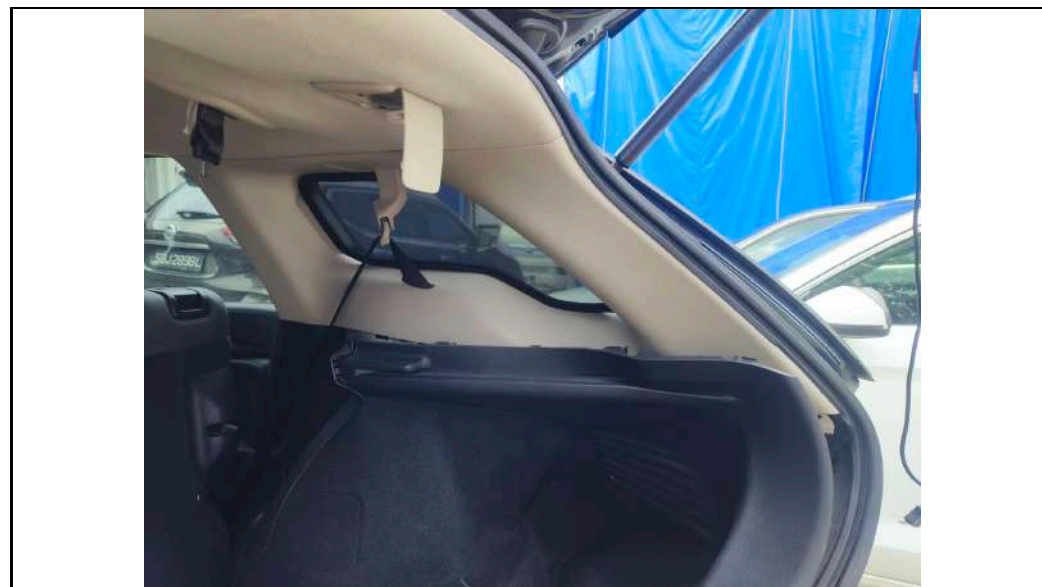
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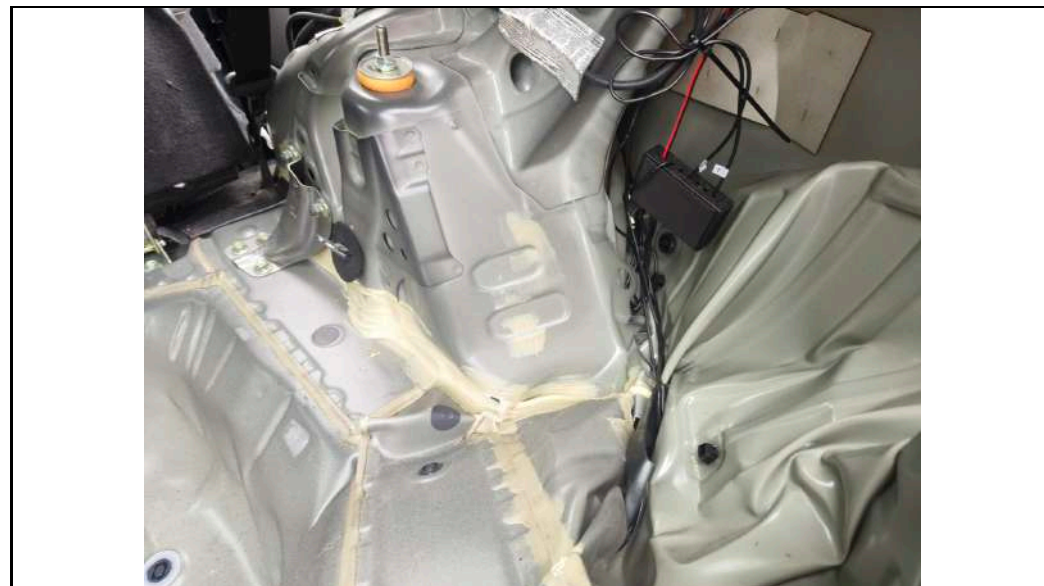
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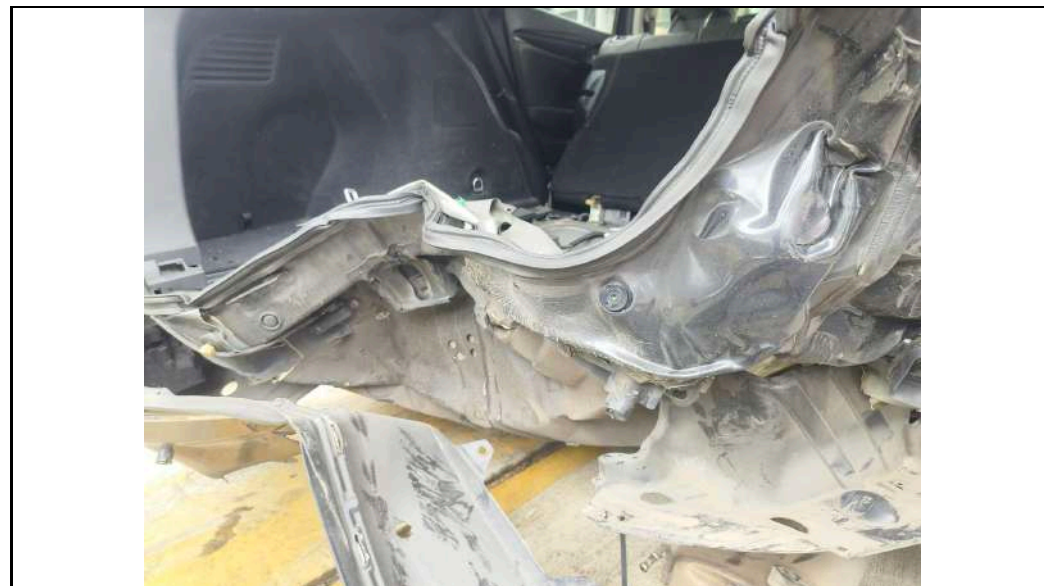
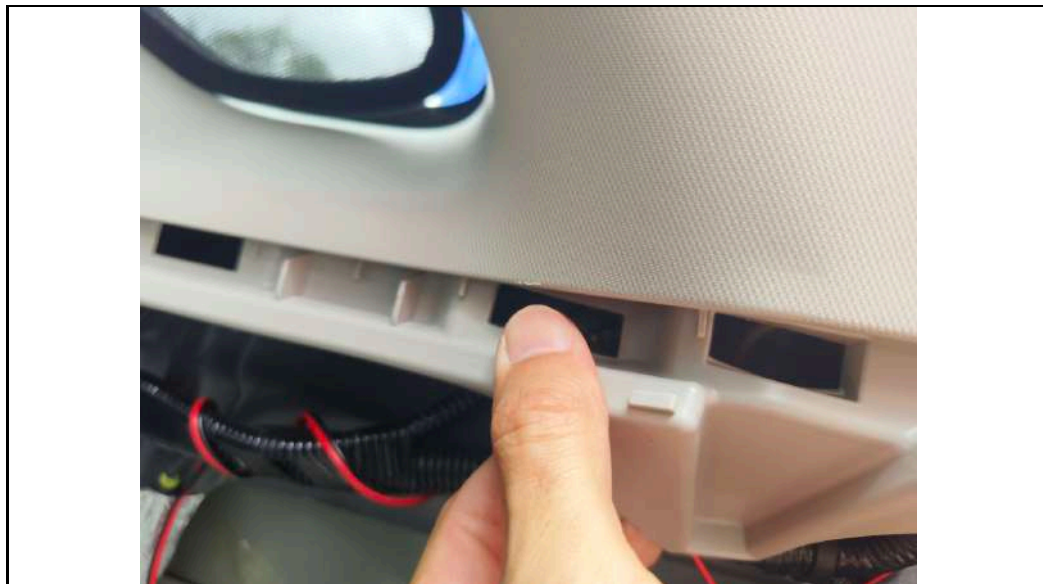
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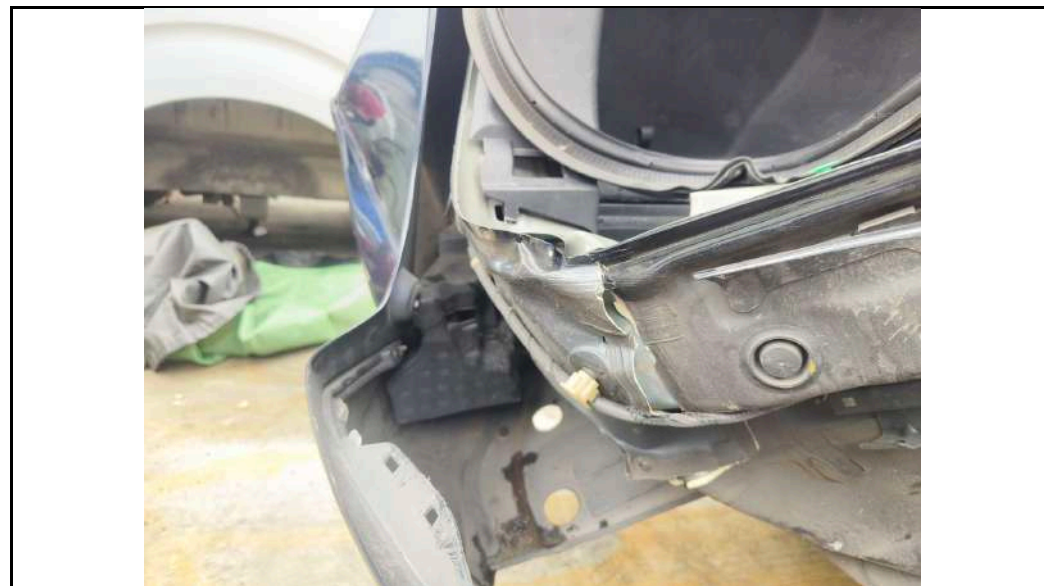
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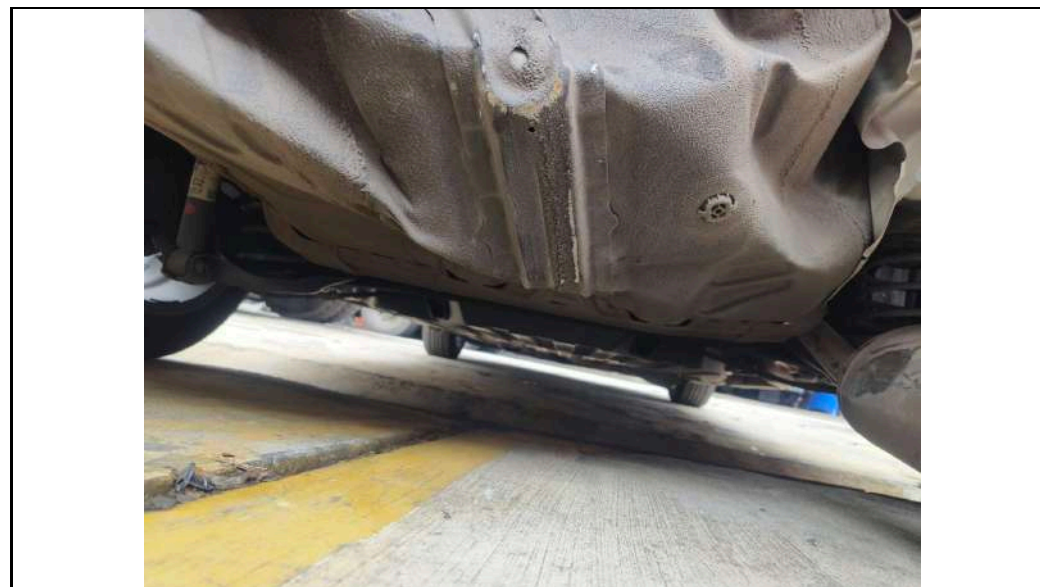
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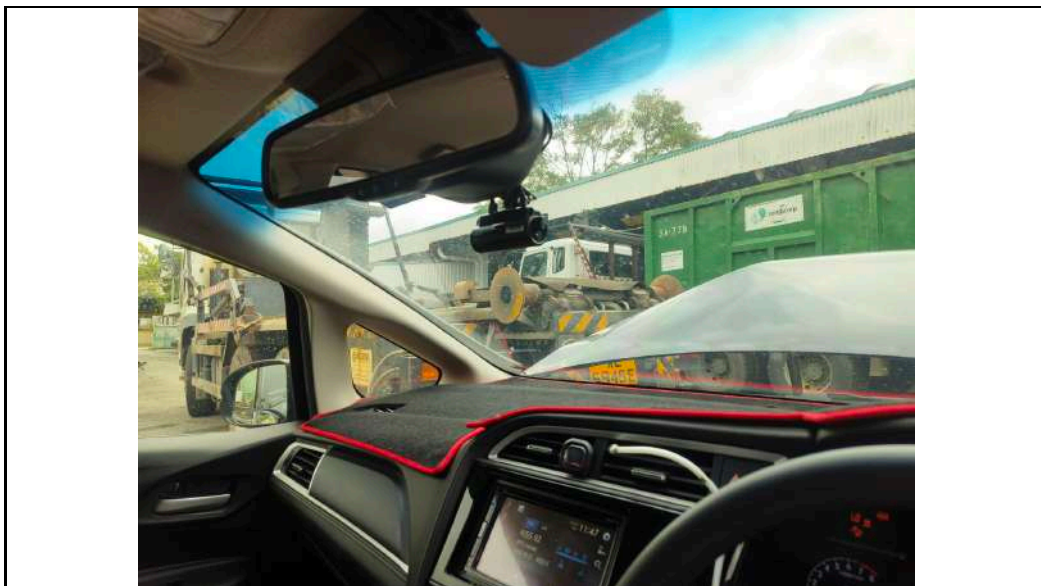
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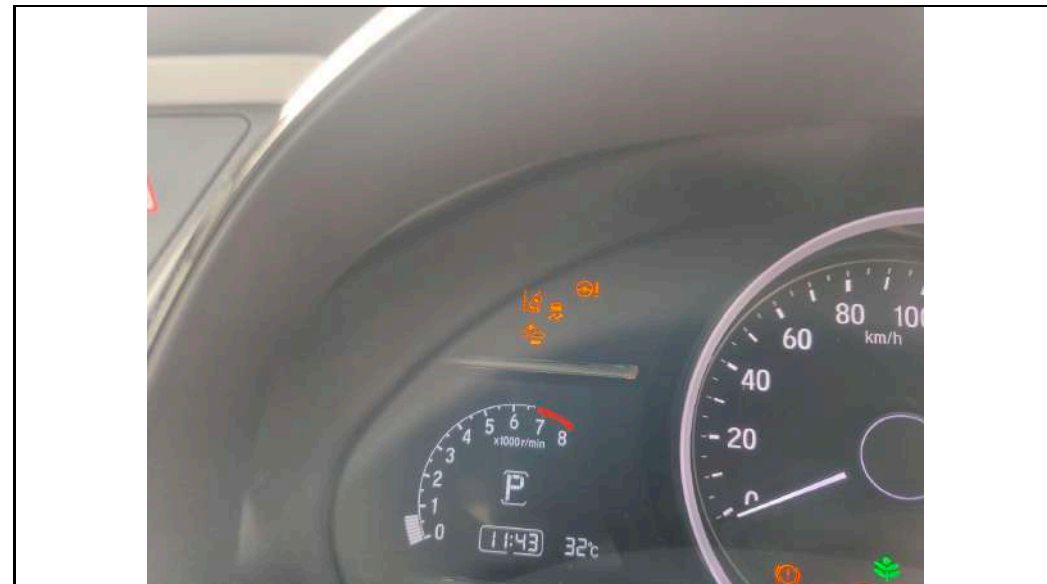
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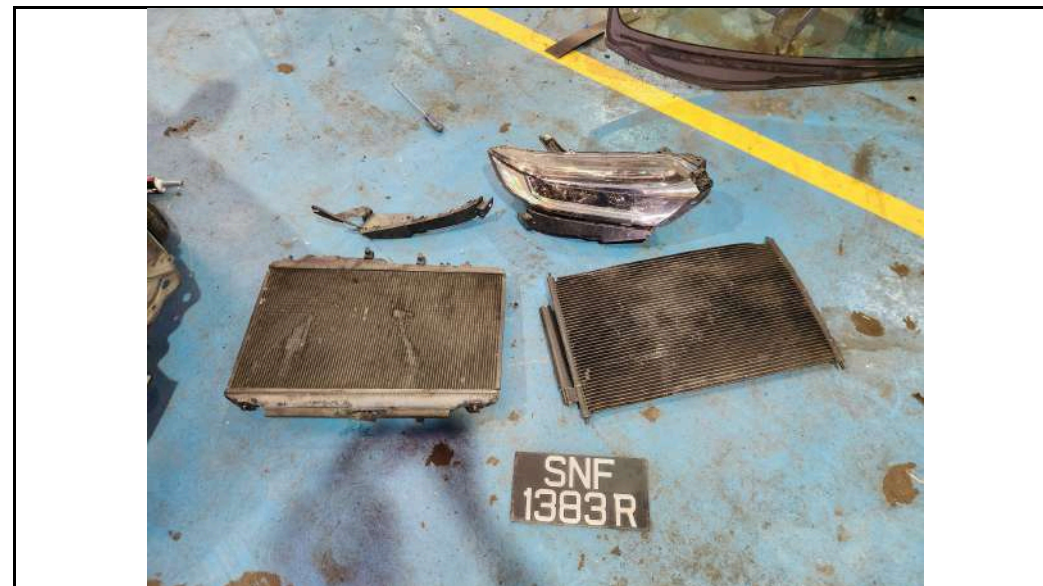
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Singapore 408933
TEL: 6256 3561 FAX: 6256 4315
Reg. No: 199607198R GST Reg. No.
19-9607198-R

REINSPECTION PHOTOS (Page 2 of 2)

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