a4/111/600 2728/ (wa392-1 Califus CC4/1111600 2728, [W63] IDAC: 15/5/2010 INS. CASE OWNER 15/02/10 TWIN AMON DOI: Date / Time : 102/16 Registered in Merimen: Surveyor mcw16 /173 Prc-assign / CCU / FTE XD 4882 P m 48 23 64 Claim No. Insured Vehicle No. BOK SENG LOGISTICS Policy No. HUND Name of Insured Make / Model PIE trods Insured Tel No. Place of Accident : D.O.A: Excess Sec II :SS Nature of Accident (YES / NO) OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO Is driver the owner? TEO BOON HUAH Final? Yes/No If NO, Driver Name / Age: % Insured Liability: (V/L: YES / NO) 93732187 Driver Tel No. SJF 4806 R INSRS: INSRS: INSRS WSP: WSP: INSRS: Tel: WSP: Tel: WSP: Meisterwat Liability: Tel: Liability: Tel: Liability: RMKS: Liability: RMKS: RMKS: RMKS: DATE / PIC Date/ Time STAGE Non-Reporting ltr (1st): Non-Reporting ltr (2nd) MIGVIVE Non-Reporting ltr (Final) Notification ltr (if non-pickup) MAN Call Ol Seek 50% habity via Merimen After call ltr to Ol. 19/2 Documentation Check List: Handler Notification ltr (if non-pickup) 23 011 After call ltr to OI: Authorisation To Act: to temporary close Email fo 41116 Release Voucher. provide Final Repair Bill TP ded not 14/12/17 Cancel Car Rental Invoice: LOD Towing Invoice LTA / GIA Medical Bill: PIR: Mandate/Reject Instruction LOD Payment Breakdown Form: Post-Repair Photos: Sent By: PRELIMINARY ADVICE Date/Time: Others: Confirm by: Confirm with: Call Email Date/Time: FINALIZATION days) Reduction: SS Email Call Repair Cost: Confirm with FINAL SETTLEMENT Date/Time If NO or B 28, Ass. Lia (Agreed / Assessed) BOLA S/N No. : 9/4 Final Liability: 4/11/16 SS Repair Cost: days) Loss of Rental (LOR): SS days) (\$ 5\$ Loss of Use (LOU): days) SS (\$ Loss of Income (LOI): [Tick only one] LOR + LOI L LOR + LOU LOU only LOR only 1) Claim status: Normal/Reject/Private Settle SS GIA/LTA Search 2) Report Format: SS (e.g. Tow/ Independent) Medical: 3) Survey fee: S\$ Disbursement: 85 Legal Cost Global Sum SS: Call Email SS Total: Confirm with: Date/Time: FINAL PAYMENT Name 1: S\$ Payee 1: Name 2: 55 Payee 2: (Strike if N.A.) Name 3 Payee 3: (Strike if N.A.) SS

ission REF: THE LAC	00)7281 was
SUMBOUR FE FOR	
AS	SIGNMENT
rom: Date: 17() 2016	Veh No: 53 F 4806 R Yr Regn: 05 / 2008
stimated Cost	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
D TP WS TP RES OD RES EVA / INV / MV	Truck / Trailer or
o Inspect Vehicle No: SJF 4866R	Make: Muz Au Z c.c 1498
Workshop m/s Meistenkraft Body work	Colour 5707 C
48 Teh Quan Rd Eagl # 07-142	Sp.Reading 17 4423 T/Radio: Insured / Std / NI / NA
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emark: The veh had commenced its N/S O/S	4
repair at the time of inspection.	TOYO / YOKO or
al. or Market Value:	<u>Front</u> <u>Rear</u>
AC Accident Rport: Consistent? : Yes or No	R/Bal. 5 mm R/Bal. 5 mm
IA / PR Seen: Consistent? : Yes or No	L/Bal. 5 mm L/Bal. 5 mm
st. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 17-2-/6
um Sum: 7-82 % 3 Val.: Yes or No	Survey held at
A / REV / REP. / 24 HRS Wigh	Des. of Damages : Frt / Rear / OIS / N/S / U/C / Rooftop or
vehicle: IN / OU ate: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	The U/O / Chassis frame / Dody Structure and to common to
17-2-16 1405 TP \$1450/2	
\$ 1100.00	
4 11 b Confirm I. B. 2 \$ 1585.00	with 4 worldng days
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	30%)
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te/Time, File Pass to? : Preli. Report	Days Of Repair:
: Final Report	Resurvey No. of Trip: Survey Fee:
ata/Time, File Return to?	Transportation:
Add F	
	: Interview (\$) Photos
eport Format :	: Tech. Invs (\$) Others
ump Sum / I.B.I: (\$)	: Weekend (\$)
·	TOTAL



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

		Affiliated to Federation Intern	nationale Des Experts En Auton	nobile
IND	A INTERNATIONA	AL INSURANCE PL	Ref : CC4/III160027	28/Fwa3
	ECIL STREET 02 IOB BUILDING	SINGAPORE 049711	Date: 15-02-2016 Code: III2	
1.		Policy Particul	ars :- THIRD PARTY CLA	IM
	Insured Veh.	XD 4882P	Veh. Inspected	SJF 4806R
	Policy No.		Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From		Assign Date	15/02/2016
2.	计数型以上的	Vehicle P	articulars & Condition	自然自己的自然的"数据"。在UES
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer		Steering	
	Brakes		Modification	
	General			
3.		Con	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre			mm
	L/H Front Tyre			mm
	R/H Rear Tyre			mm
	L/H Rear Tyre			mm
4.		Descr	iption of Damages	性的自然性性性的
5.		Gen	eral Information	
	Accident Date	11/02/2016	Inspection Date	17/02/2016
	Survey held at	MEISTERKRAFT BODYWE		
		48 TOH GUAN ROAD EAST	#07-142 ENTERPRISE HUB	SINGAPORE 608586
5a.	Contractor of the Act	Remarks		



Meisterkraft Bodywerke Pte Ltd

Registration No. 201436061W 48 Toh Guan Road East #07-142 Enterprise Hub Singapore 608586 Tel: 6515 8306 Fax: 6515 8335 Email: meisterkraft@singnet.com.sg

ESTIMATE REPAIR

Bill To:

Estimate No.: MKB-00015385

India International Insurance Pte Ltd 64 Cecil Street, #04-#05, IOB Building 049711 Singapore

Tel: 6347 6100

Fax: 6224 4174

Attn: Motor Claim Department

Date: 15/02/2016 Veh Reg. No: SJF4806R

Claim Type: Third Party Accident Date: 11/02/2016

Descriptions	Amount
PART REAR RH BUMPER RETAINER (1X) / NEC	\$45.00
LABOUR REMOVE/REINSTALL REAR BUMPER TO REPLACE ABOVE-MENTIONED PART AND REPAIR REAR BUMPER. REMOVE REAR RH BOOT INNER LINING AND REAR RH WHEEL ARCH	\$250.00 (50
COVER TO CARRY OUT KNOCKING/REPAIR REAR RH FENDER AND REMOVE REAR RH INNER DOOR DOOR TRIM TO CARRY OUT KNOCKING/REPAIR REAR RH DOOR. REMOVE/REINSTALL REAR RH OUTER DOOR HANDLE TO CARRY OUT	\$80.00 60
REPAIR/SPRAYPAINT. REMOVE/REINSTALL REAR RH TYRE TO CARRY OUT REPAIR/SPRAYPAINT AND WHEEL BALANCING SPRAYPAINT FOR ALL THE DAMAGES AREAS	\$180.00 / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
SUNDRIES TO CARRY OUT CLEARING ANY FAULT CODES AFTER REPAIR RETRIEVE VEHICLE INSURANCE PARTICULAR CAR RENTAL FOR 4 DAYS	\$15.00 \$50.00 \$5.35 \$400.00
17/2/16 w/p, not anthorsed	
F/F, HE report days 4	
Steven feory @ 1kk outo, con Ell 7723 Total Amount Pavable:	
Total Amount Payable:	\$2,255.35

^{*}This is only an estimate based on our preliminary inspection and does not cover additional parts, labour time which may be required after work has begun



Meisterkraft Bodywerke Pte Ltd

Registration No. 201436061W
48 Toh Guan Road East #07-142 Enterprise Hub Singapore 608586
Tel: 6515 8306 Fax: 6515 8335 Email: meisterkraft@singnet.com.sg

Invoice

Bill To:

India International Insurance Pte Ltd 64 Cecil Street, #04-#05, IOB Building 049711 Singapore Invoice No.: MKB-00015385

Car Reg. No:

SJF4806R

Date:

15/02/2016

Terms: C.O.D.

Page:

1

Descriptions	Amount
PART	
REAR RH BUMPER RETAINER (1X)	\$45.00
LABOUR	
REMOVE/REINSTALL REAR BUMPER TO REPLACE	\$150.00
ABOVE-MENTIONED PART AND REPAIR REAR BUMPER.	
REMOVE REAR RH BOOT INNER LINING AND REAR RH WHEEL ARCH COVER TO CARRY OUT KNOCKING/REPAIR REAR RH FENDER AND	\$400.00
REMOVE REAR RH INNER DOOR DOOR TRIM TO CARRY OUT	
KNOCKING/REPAIR REAR RH DOOR.	
REMOVE/REINSTALL REAR RH OUTER DOOR HANDLE TO CARRY OUT	\$60.00
REPAIR/SPRAYPAINT. REMOVE/REINSTALL REAR RH TYRE TO CARRY OUT	\$180.00
REPAIR/SPRAYPAINT AND WHEEL BALANCING	Ψ100.00
SPRAYPAINT FOR ALL THE DAMAGES AREAS	\$600.00
SUNDRIES	\$15.00
RETRIEVE VEHICLE INSURANCE PARTICULAR	\$5.35
Sub-Total:	\$1,455.35
Balance Due:	\$1,455.35

MEISTERKRAFT BODYWERKE PTE LTD

48 Toh Guan Road East

#07-142 Enterprise Hub

Singapore 608586

Tel: 6515 8306 Fax: 6515 8335

Email: meisterkraft@singnet.com.sg

Please make your cheque payable to :

Meisterkraft Bodywerke Pte Ltd Internet Banking: DBS Bank Account No.: 054-904672-8

Authorised Signature



Meisterkraft Bodywerke Pte Ltd 48 Enterprise Hub, Toh Guan Road East #07-142 Singapore 608586 Tel: 6515 8306 Fax: 6515 8355

Tel: 6515 8306 Fax: 6515 8355 Email: meisterkraft@singnet.com.sg

Invoice

Bill To:

India International Insurance Pte Ltd 64 Cecil Street, #04-#05, IOB Building 049711 Invoice No: MKB 00015565

Date:

08/06/2016

Car Reg No.:

SJF4806R

Terms

C.O.D.

Pages: 1

Qty	Description	Unit Price	Disc	Amount
1	CAR RENTAL FOR 4 DAYS	\$400.00		\$400.00

Four Hundred Singapore Dollars Only

Total: 3

\$400.00

Total Amount:

\$400.00

All cheques should be crossed and make paypable to: Meisterkraft Bodywerke Pte Ltd

Al.

MEISTERKRAFT BODYWERKE PTE LTD
48 Toh Guan Road East
#07-142 Enterprise Hub
Singapore 608586
Tel: 6515 8306 Fax: 6515 8335
Email: meisterkraft@singnet.com.sg

Authorised Signature

Vehicle Insurance Particulars Result

Vehicle No.

Search Date/Time

Insurance Company Name

XD4882P

15 Feb 2016 / 09:30:00

INDIA INT'L INS PTE LTD

Print OK

Please read through the Privacy Statement, Terms of Use and Disclaimer,
Please do not use the Back or Forward buttons on your browser as this may after the results of the transactions.

Best viewed with IE 6.0 SP3 and above, 1024 × 768 resolution

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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 Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability
- 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 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.	
·斯特·斯特·斯特·斯特·斯特·斯特·斯特·斯特·斯特·斯特·斯特·斯特	ACCIDENT STATEMENT
Date Of Report	12/02/2016 09:05
Date Of Accident	11/02/2016 21:25
Exact Location Of Accident	CLEMENTI AVE 6 > BT BATOK EAST AVE 3
Country/State of Loss	Singapore
PARAMETER STATES IN THE SECOND	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJF4806R
Insured/Policyholder	
Name Of Registered Owner	CHIA HEOK HUA
NRIC No	S0080193C
Email Address	DEIRDRE CHIA@HOTMAIL.COM

Mobile Phone No (LOCAL) +65-98259616

Alternative Phone No Others-81264878

Vehicle Particulars

 Manufacturer
 MAZDA

 Model
 2-1.5 R (A)

Exact Purpose for which vehicle was being used

at time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

No

If No, Please state action to be taken

Third Party

Vehicle Category

Private Car

Insurance Company

Name of Insurance Company AXA Insurance Singapore Pte Ltd

Type Of Coverage Comprehensive

Fleet Policy No

Policy Number P1249067

Cover Note Number

Driver

Name of Driver CHIA WEILING DEIRDRE

 NRIC No
 \$89262561

 Date Of Birth
 03/08/1989

 Occupation
 Indoor

 Date Of Driving Pass
 04/07/2008

Driving Experience 7 Years And 7 Months

Gender Female

Mobile Number (Local) +65-81264878

Fax Number Contact Number

EMail Address DEIRDRE_CHIA@HOTMAIL.COM

IMPORTANT NOTICE

- I. 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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
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- 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)

Lunderstand, 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' law yers/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' law yers/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 javy) ers/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

Sketch Plan

Witnessed by Reporting Centre Personnel

Daughter: Chia Weiling, Deirdre

1/C:

S8926256I

Vehicle: SJF 4806 R (Mazda 2)

(Insured): Chia Heok Hua (9825 9616)

Date:

Thurs, 11 February 2016

Time: 9.28p.m.

Driver: Teo Boon Huah

I/C no: S1278260H

Vehicle: Bok Seng heavy vehicle regn no. XD 4882 P

Tel:

9373 2187

We (SJF 4806 R) were keeping in the left most lane of Clementi Ave 6 towards Bt Batok East Ave 3.

A heavy vehicle (XD 4882 P) was intending to enter our lane as he had just emerged from the Clementi Ave 6 Underpass.

We were hit at the rear side end and our car swerved.

No one was injured.

Photos taken.

Catherine Chong (LKK Auto)

From:

Roger Yap <Roger@iii.com.sg> on behalf of Motor Claim - III <motorclaim@iii.com.sg>

Sent:

Monday, 15 February, 2016 2:17 PM

To: Cc: TONY JEFFERY; 'assignments' Lalitha Krishnan - III; Adeline Tham RE: 3rd Party Claim against XD4882P

Subject: Attachments:

doc00283820160215125108.pdf

Hi Catherine

Please conduct a survey on TP vehicle SJF4806R and let us have your report urgently.

This claim will be handled by Ms Lalitha

*Kindly upload this survey request email to merimen.

15.00.2016 @ 5.237m Jaffrou Wh not in

Thank you. Best Regards,

Roger Yap

Motor Claim Dept.

India International Insurance Pte Ltd

From: TONY JEFFERY [mailto:tjms79@yahoo.com.sg]

Sent: Monday, 15 February, 2016 12:56 PM
To: Motor Claim - III < motorclaim@iii.com.sg>
Subject: 3rd Party Claim against XD4882P

Dear Sir/Ma'am,

I've attached the GIA Accident Report for your perusal, pertaining an accident claim on 3rd party between the vehicle no. SJF4806R and XD4882P. I've also attached the estimate repair for your reference. Please do not hesitate to contact us at 6515 8306 or 8511 5582, for any queries.

Thank you.

Best Regards, Jeffery

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

DISCLAIMER:

This email is intended solely for the person to whom it has been addressed. It may contain confidential and/or legally privileged information.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability
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- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of 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

	ACCIDENT STATEMENT
Date Of Report	12/02/2016 09:32
Date Of Accident	11/02/2016 21:30
Exact Location Of Accident	CLEMENTI AVE 6 TOWARDS PIE
Country/State of Loss	Singapore
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	XD4882P
Insured/Policyholder	
Name Of Registered Owner	BOK SENG LOGISTICS PRIVATE LIMITED
Co Reg No	199305010H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-64161999
Vehicle Particulars	NEW PROPERTY OF BUILDING BUILD
Manufacturer	HINO
Model	SH1EEKA-12.9 D (M)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Goods Vehicle
Insurance Company	
Name of Insurance Company	India International Insurance Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	M482364
Cover Note Number	
Driver	
Name of Driver	TEO BOON HUAH
NRIC No	S1278260H
Date Of Birth	29/09/1957
Occupation	Outdoor
Date Of Driving Pass	09/03/1981
Driving Experience	34 Years And 11 Months
Gender	Male
Mobile Number	(Local) +65-93732187
Fax Number	
T dx 14dillbol	
Contact Number	

NOEMAIL

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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Lunderstand, acknowledge, agree and consent that

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- (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' law yers/faw 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Vehicle A: XD 4812P Vehicle B: STF 4806R

Clementi Ave 6 Clementi Ave 6 (Tunnel)

Acknowledgement from company about the accident

Steven Chew Jing Woei

From:

Cassandra Tan <cassandra.tan@bokseng-ipl.com>

Sent:

12 February 2016 10:39

To:

Ivy Ng; Ashley Ng

Cc:

Steven Tan; Stephanie Chan; Lily Tan; Maggie Hee; Ellson Tan; Jessie Chew; Steven

Chew Jing Woei; Arulmani; Damotharan; Susan Sim

Subject:

Accident for XB4482 on 11.02.2016

Hi Ivy and Ashley,

I would like to report an accident for CCT driver, Teo Boon Huah (XB4882) whuch happened yesterday, 11/02/2016 at 9.30pm at Clementi Ave 6 towards PIE.

Driver was at 2nd lane when he exit out frim tunnel, A car (SJF4806R) from lane 3 cut into his lane without signal.

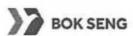
Both vehicles collided on the side. No one was injured.

Driver has went to Goldbell this morning to report IDAC as Sin Seng Engineering is not opened.

Thanks.

Cassandra Tan

Senior Manager, Container/Conventional Transport



Bok Seng Group | No. 5 Tuas Avenue 3. BS Logistics Hub. Singapore 639405 |T: 6416 3543 |F: 6861 0325 | www.bokseng-ipl.com

Driving License

VOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES) PASS DATE Class 3 Motor Cars and Motor Tractions the weight of which unlodes does not accosed 2500 bitograms Class 4 Hoery Motor Cars and Motor Tractions the weight of which unlodes accosed 2500 bitograms Old May 1979 Williams Solution accosed 2500 bitograms Class 5 Motor Vehicles which unlodes accosed 2500 bitograms Old May 1979 Old May

NP 428A

Licence Ho: \$12783600



36 alope

Vivian Lau (LKKAuto)

From:

Vivian Lau (LKKAuto)

Sent:

Monday, 14 November, 2016 10:00 AM

To:

'Lalitha Krishnan - III'

Cc:

'Motor Claim - III'; Zayyer (LKKAuto); Hsiao Tong (LKKAuto); Admin A

Subject:

PODS III Ref: MC2016/2173LKK Ref: CC4/III16002728/Fwa3 Accident on 11/02/2016

involving XD 4882PG (India) and SJF 4806R (TP)

PODS III Ref: MC2016/2173LKK Ref: CC4/III16002728/Fwa3 Accident on 11/02/2016 involving XD 4882PG (India) and SJF 4806R (TP)

Dear Lalitha.

We refer to the above matter.

Be informed that till date TP's repairer had finalised with our surveyor since 17/02/2016 after inspection .

TP's repairer did not submit the LOD until now. In view of no further development, we will proceed to temporary close the file and submit the report to your office.

If any new development in future, we will keep you informed for an update and follow up the matter accordingly.

Thank you

Best Regards,

Vivian Lau | Case Handler

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