| indimun From (Person): KHU TOO | ASSIGNMI | ENT (Office) | DataTime | 15-032017 4-119 pm |
|-----------------------------------|---------------------|--------------|-------------|----------------------|
| Estimated Cost: | | Bill to: | Date/Time:_ | 13-03-201 1 4-11-1PM |
| OD /TP+WS/TP RES/OD R | ES/EVA/INV/MV/C | is | | |
| T- Inspect Vehicle No: | SDT 3530P | | Insured: | |
| at Workshop m/s | Alpine Mulurs | | Tel: 8248 1 | 3933 |
| of | No. 7 Ubi Close | L | | |
| Policy No: GA 105 II | f | 'Claim No: | (OH24691 |) |
| Sum Insured: | | Excess: | \$300.00 | |
| Make of Veh: (Client's Record) | | N. Bross | D.O.A. 2 | F102.QU-8 |
| Date/Time: 18032017 3140 | M Person Contacted: | Suhaimi | H.O.D. Endo | ^ |
| Date/Time Action/Inst- | | | | |
| Date/Time Action/Instruction | | | | |

| | 0 | ASSIGNMENT |
|---------------------|--|---|
| From: | Date: | Veh No:S DT35302 Yr Regn: 20151 May . |
| Estimated Cost: | | Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / |
| D/TP/WS/T | TP RES / OD RES / EVA / INV / MV | Truck / Trailer or |
| o Inspect Vehic | de No: | Make: Opel Corsa. c.c 1398 |
| t Workshop m/s | | Colour Bhe A/C: Insured / Std / NI / NA |
| f | | Sp.Reading 27292 T/Radio: Insured / Std / NI / NA |
| nsured: | | Eng/No: |
| Policy No. | | C/No: WOLOXEP68F4069128 |
| Claims No. | | Gen. Cond: Good / Fair / Poor / Burnt |
| Sum Insured: | Excess: | Steering: Inorder / Jammed / Leaked / Burnt or |
| (Client's Recor | rd) | Brake: Inorder / Jammed / Leaked / Burnt or |
| Make of Veh: | | Modi: Nil / S/Rim / STD A/Rim or |
| _ | | Tyre Size: F: 185/65 £15 |
| (Policy Conditi | ion) | R: (85/65R15. |
| Special and section | 2000 a | I/S O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / |
| repair | at the time of inspection. | TOYO/YOKO or Continental |
| Bal. or Market V | /alue: 75 K . | Front Rear |
| DAC Accident F | | R/Bal. 06 mm R/Bal. 06 mm |
| GIA / PR Seer | 12 02002 | o Libai. 00 mm Dbai. Illin |
| Est. Repairs: | days Res.: Yes or N | D.O.A. D.O.I. 17/03/17 |
| Lum Sum: | % 3 Val.: Yes or N | Survey held at Auto Geganany. |
| CA I BEV I | REP. / 24 HRS | Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or |
| CA I REV I | Vehi | cle: IN/OUT Franks |
| Date: | Person Contacted: | The U/C / Chassis frame / Body Structure affected due to collision. |
| Date / Time | Action / Instruction | |
| | 00 AX1. | |
| | | |
| | | • |
| | AND THE RESEARCH STORY | |
| | RECEIVED 2.7 | 1.07 2017 |
| | | |
| | | |
| Date/Time, File Pas | ss to? : Preli. Report | Days Of Repair: |
| PHITU | Final Report | Resurvey No. of Trip: Survey Fee: 250 |
| Date/Time, File Re | | Transportation: |
| 2) | and the state of t | Add Fee: : Site Insp (\$)8+R\$,\$I |
| 7 | | : Interview (\$) Photos |
| Report Form | nat: OD- Preli | : Tech. Invs (\$) Others |
| Lump Sum | Caleinay cycles | : Weekend (\$ |
| | | 2074 |



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

| ^ V ^ | INSURANCE PTE | LTD | Ref : CS/AXA170052 | 237/Atb | |
|---|-------------------------|--------------------------------|---------------------------------|------------|--|
| HAAA | NO INCOLVINGE I TE ET D | | | | |
| 3 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 | | Date: 15-03-2017 Code: AXA2 | | | |
| 1. | | Policy Partic | culars :- OWN DAMAGE | | |
| | Insured Veh. | | Veh. Inspected | SDT 3530P | |
| | Policy No. | GA105117 | Coverage (\$) | 0.00 | |
| | Claim No. | C0424696 | Excess (\$) | 300.00 | |
| | Assign From | MERIMEN (KITTY TEO) | Assign Date | 15/03/2017 | |
| 2. | | Vehicle Pa | articulars & Condition | | |
| 19-120 | 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 | | |
| 5. | athering No. | Gen | eral Information | | |
| | Accident Date | 26/02/2017 | Inspection Date | 17/03/2017 | |
| | Survey held at | 7 UBI CLOSE | | | |
| | Repairer | ALPINE MOTORS PTE LTD | | | |
| 5a. | Gerolate | | Remarks | | |
| | A)THE MARKET V | ALUE IS S\$(EST. A | VERAGE) S WE HAVE AUTHORISED | REPAIRS. | |

...CLAIM SUBFOLDER...(New Assignment)

VNI

| AIM SUE | BFOLDER TRAC | | Adj Assigned | Adi Rpt | Adj Submitted | Ins Auth'ed | Status | |
|-----------|--|---------------|--------------------------------|------------------------|------------------------|--|---------------------------|---------------|
| Case | Notified 13 Mar 2017 | Est Submitted | 15 Mar 2017 16:49 Assign | | | | New Assign Cancel Case | |
| | Main | Re | ference | Clair | n Details | Docum | nents | Show All |
| | UBFOLDER DE | TATLS | estinguisti sotti | CHAPTER STATE STATE OF | NAME OF TAXABLE PARTY. | | by insurer] | |
| Insured: | | TAN KHIM YO | NG, ID: 513293 | 382A, Tel: +65 | 97245506, Em | ail: khim@sph.com.s | sg | |
| | Reg. No.: | SDT3530P | | Da | te of Loss: | | 7 12:00 - :59 | |
| | -200 | OD / C0424 | 696 | Pol | licy/Cover Note | And the second s | 7 (Comprehensive) | |
| Claim Ty | pe: | | | | cess: | S\$300.00 | ********* | |
| Danales | | Alpine Motor | s Pte Ltd (HQ) N | lo. 7 Ubi Close, | Alpine Centre, 40 | 8604 Ubi - Tel: 6844 | 4 1985 | |
| Repairer | Insurer: | | De- Ltd /HO) | - Tel- 6338 728 | R THandled by | Kitty 160 - 0000 H | 0021 | |
| Adjuster | THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLUMN T | LKK Auto Col | sultants Pte Ltd | 1 (HQ) - Tel: 62 | 56-3561 [FIII | al Rpt due 24/0 | 3/201/] | |
| | Custodian: | TAN KHIM YOU | NG (), NRIC: S1 | 329382A, Tel: | +6597245506 | | | |
| | | | Grand 101/00/100 | W. C. C. | | View | All Comp | ose Case Mail |
| ASSOCI | ATED MAIL RE | CEIVED | | | | Viev | | |
| There are | e no mail for this | case. | | | | | | |
| THE C OF | e no man for one | | | | | | | |
| | | | | | | | | F 50 1748 |
| 8 | SOCIATED TAS | .vs | | | View All | Search Tasks | Create New Task | Complete |
| Due D | ate Priority | | Group Subje | ect Handler | Assigned B | y Completed | On Create | ed On Done |

Text size + -

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

9382A

Vehicle Details

Vehicle No.:

SDT3530P

Vehicle to be Exported: No

Intended De-registration 17 Mar 2017

Vehicle Make:

OPEL

Vehicle Model:

CORSA 5DR 1.4 A/T

Primary Colour:

Blue

Manufacturing Year:

2015

Engine No.:

B14XER19GK4860

Chassis No.:

W0L0XEP68F4069128

Maximum Power

Output:

66.0 kW (88 bhp)

Open Market Value:

\$14,632.00

Original Registration Date:

27 May 2015

First Registration Date:

27 May 2015

Transfer Count:

0

Actual ARF Paid:

\$5,000.00

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry

26 May 2025

PARF Rebate Amount: \$3,750.00

Intended COE Rebate Details

COE Expiry Date:

26 May 2025

COE Category:

A - Car (up to 1600cc & 97kW (130bhp))

COE Period(Years):

10

QP Paid:

\$66,590.00

COE Rebate Amount:

\$54,542.00

Total Rebate Amount: \$58,292.00

The information contained herein is correct as at 17 Mar 2017

Land Transport Authority

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 alter the results of the transactions.

Best viewed with IE 6.0 SP3 and above. 1024 X 768 resolution

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Denise Tay (LKKAuto)

From:

Sent:

Denise Tay (LKKAuto) Friday, 17 March, 2017 3:15 PM Kelvin.chew@alpinemotors.sg

To:

Cc: Subject:

SDT 3530P OWN DAMAGE AXA

Dear Kelvin,

As instructed by our client Insurance Company, please proceed to repair the insured vehicle SDT 3530P(excess \$300/-).

If there are any check items or supplementary items please inform our office's Assignment Team at : 6741 8434 to arrange our surveyor for inspection.

Any supplementary items are subjected to further approval from our client.

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: denisetay@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Denise Tay (LKKAuto)

From:

Kelvin Chew <Kelvin.chew@alpinemotors.sg> Friday, 24 November, 2017 3:13 PM

Sent:

To: Cc: Denise Tay (LKKAuto)

suhaimi@firstautoworks.com.sg

Subject:

fw: re: SDT3530P - Loss of use use cheque

Hi Denise,

for your info.

owner has cancel OD claim.

thanks.

from.

kelvin chew

From: "Suhaimi" <suhaimi@firstautoworks.com.sg>

Sent: Friday, November 24, 2017 1:40 PM

To: kelvin.chew@alpinemotors.sg

Subject: fw: re: SDT3530P - Loss of use use cheque

FYI

Thanks & Regards

Suhaimi Ong

Service Executive

1st Autoworks Pte Ltd

23 Kaki Bukit Ave 4,

#04-01 (South Wing)

S'pore 415933

Tel: 6844 1985

Fax: 6844 5185

From: "Wilson Teo" <wilson.teo@autogermany.sg>

Sent: Wednesday, 12 April, 2017 2:40 PM

To: "TEO Kitty" < kitty.teo@axa.com.sg>, "suhaimi@alpinemotors.sg" < suhaimi@alpinemotors.sg>,

khim@sph.com.sg

Subject: re: SDT3530P - Loss of use use cheque

Dear Ms Kitty, AXA Ins,

Duly noted with thanks.

Suhaimi,

FYI .

Dear Ms Tan (Owner SDT3503P),

Please send back the cheque which you have received for the Loss of Use to AXA Insurance as soon as possible, Motor Claims Dept, for your car Own Damaged Case closing

Thank you.

Warmest Regards!

Wilson Teo

Alpine Motors Pte Ltd / Auto Germany Pte Ltd

Claims Officer

7 Ubi Close,

Singapore 408604

Tel: 6511 3022

E-mail: wilson.teo@alpinemotors.sg / wilson.teo@autogermany.sg

From: "TEO Kitty" < kitty.teo@axa.com.sg> Sent: Wednesday, April 12, 2017 9:35 AM

To: "wilson.teo@autogermany.sg" <wilson.teo@autogermany.sg>

Subject: SDT3530P - Loss of use use cheque

Hi Wilson,

We refer to your email dated 10.04.17.

Please get insured to return the cheque to us so that we can close off the case.

Thank you.

Best Regards

Kitty Teo | Specialist, Motor Claims Department AXA Insurance Pte Ltd | 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 | www.axa.com.sg Email:kitty.teo@axa.com.sg Customer Care No. 1800 8804741 Press 3

| × | **** | |
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Please consider the environment before printing this message

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Denise Tay (LKKAuto)

From:

Kelvin Chew <Kelvin.chew@alpinemotors.sg>

Sent:

Friday, 24 November, 2017 3:13 PM

To:

Denise Tay (LKKAuto)

Cc:

suhaimi@firstautoworks.com.sg

Subject:

fw: re: SDT3530P - Loss of use use cheque

Hi Denise,

for your info.

owner has cancel OD claim.

thanks.

from.

kelvin chew

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Sent: Friday, November 24, 2017 1:40 PM

To: kelvin.chew@alpinemotors.sg

Subject: fw: re: SDT3530P - Loss of use use cheque

FYI

Thanks & Regards

Suhaimi Ong

Service Executive

1st Autoworks Pte Ltd

23 Kaki Bukit Ave 4,

#04-01 (South Wing)

S'pore 415933

Tel: 6844 1985

Fax: 6844 5185

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To: "TEO Kitty" <kitty.teo@axa.com.sg>, "suhaimi@alpinemotors.sg" <suhaimi@alpinemotors.sg>,

khim@sph.com.sg

Subject: re: SDT3530P - Loss of use use cheque

Dear Ms Kitty, AXA Ins,

Duly noted with thanks.

Suhaimi,

FYI

Dear Ms Tan (Owner SDT3503P),

Please send back the cheque which you have received for the Loss of Use to AXA Insurance as soon as possible, Motor Claims Dept, for your car Own Damaged Case closing

Thank you.

Warmest Regards!

Wilson Teo

Alpine Motors Pte Ltd / Auto Germany Pte Ltd

Claims Officer

7 Ubi Close,

Singapore 408604

Tel: 6511 3022

E-mail: wilson.teo@alpinemotors.sg / wilson.teo@autogermany.sg

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To: "wilson.teo@autogermany.sg" <wilson.teo@autogermany.sg>

Subject: SDT3530P - Loss of use use cheque

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Please get insured to return the cheque to us so that we can close off the case.

Thank you.

Best Regards

Kitty Teo | Specialist, Motor Claims Department AXA Insurance Pte Ltd | 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 | www.axa.com.sg Email:kitty.teo@axa.com.sg Customer Care No. 1800 8804741 Press 3

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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.

| CONTRACTOR AND | ACCIDENT STATEMENT |
|--|----------------------------------|
| Date Of Report | 27/02/2017 14:59 |
| Date Of Accident | 26/02/2017 12:40 |
| Exact Location Of Accident | DUNEARN ROAD AFTER GILSTEAD ROAD |
| Country/State of Loss | Singapore |
| | DETAILS OF OWN VEHICLE |

| | DETAILS OF OWN VEHICLE | THE RESERVE OF THE PARTY OF THE |
|-----------------------------|------------------------|--|
| Vehicle Registration Number | SDT3530P | |
| Insured/Policyholder | | |
| Name Of Registered Owner | TAN KHIM YONG | |
| NRIC No | S1329382A | |
| Email Address | khim@sph.com.sg | |
| Mobile Phone No | (LOCAL) +65-97245506 | |
| Alternative Phone No | Others-97245506 | |
| Vehicle Particulars | | |
| | | |

| Manufacturer | OPEL |
|--|---------------------|
| Model | OPEL CORSAL 1.4 A/T |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE USE |

No for repair to your vehicle? Third Party If No, Please state action to be taken Private Car

Are you claiming under your own insurance policy

Vehicle Category **Insurance Company** AXA Insurance Pte Ltd Name of Insurance Company Comprehensive Type Of Coverage

No Fleet Policy

GA105117/1 Policy Number

Cover Note Number

Driver TAN KHIM YONG Name of Driver NRIC No S1329382A Date Of Birth 09/09/1958 Indoor Occupation 02/07/1983 Date Of Driving Pass 33 Years And 7 Months **Driving Experience** Female Gender

(Local) +65-97245506 Mobile Number Fax Number

Contact Number Others-97245506 khim@sph.com.sg **EMail Address**

Address

Postcode

Was driver an employee of the Insured's Company No

If No, Relationship of the Driver with the Insured

Owner

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

Side Swipe- Same Direction

Weather Conditions

Clear

Road Surface

Dry

Other Information

Was any foreign vehicle involved in this accident?

No

Was any body injured in the Accident?

No

Was any other material or property damaged?

Yes

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

No

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

Yes

If Yes, Please state which Police Station

Police Station Name [Other]

SERANGOON N.P.C

Was notice of intended Prosecution given?

No

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?

Yes

Was there any video captured by Car Camera?

No.

Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMB3603B SMRT BUS

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

SKETCH PLAN

MPORTANT NOTICE

- Please report entractly the details of the applicance speed up the claris process.
- ? This Formmust be completed by the Policyholder and/or the Authorised Privet.
-) information provided must be as truthful and accurate as possible. Any wiful misrepresentation or withholding of material facts may those insurance companies to repudiate policy hability.
- The assign and acceptance of the Form by insurance companies is not an admission of policy tability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation
- 5. The report will be forwarded by the incurers of the GW Records Management Centre established by the Centre in Survivae Association
- or Singapere (GM) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the odgoment of this report to the insurers, you hereby consent us the archiving of this report at the continued to copies of the report being made available aforeseld.
- 5. Consent under the Personal Data Protection Act (PDPA)

Lundurstand, advanaw widge, agree, and consent that

- to) My insurer , my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, discoise and/or process By personal data/personal information set out in this (form) and any other personal information powered by one or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to at insurer(s) ways have insured vehicle(s) involved in this accident shall be callectively referred to as the "Insurers"; the insurers (awyers/twicking, 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.
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by the :
- (w) administering my claims (including the mating of correspondence, statements, evolutes, reports or notices to mo, which could involve disclosure of certain personal data about mo to bridg about delivery of the same as well as on the external crush of envelopes man packages); ansion
- (v) complying with applicable law in additionering, processing, handing processing with my courts

(colectively the 'Purposes')

- (b) all insurer(s) who have insuted vehicle(s) involved in this accident and the insurers' lawyers have firms, havylore permitted to option, use, disclose and/or process my Personal information for one or more of the above Purposess, and
- (c) my Porsonal information may can be disclosed by any of the insurers endlor GA to their third party service provide is or agents (including their law yers/lew fires.), which may be said subset of Singapore, for one or more of the above Purposes.

Publisher's Signature (Cate & Driver's

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

Witnessed by Recording Centre

Sketch Plan

time

| Refer place refer t/20176-2+/2030. De claration We decline the foregoing particulars are true in every respect. | | n | | | | |
|---|--------------------------------|-----------------|--|-------|-----------|-----------|
| De claration We destruct the foregoing particulars are true in every respect. | | Keter D | elice of Pert | T/201 | 7-127-120 | 3.30 |
| We declare the foregoing particulars are true in every respect. | | 1 | | 1 | | |
| We declare the foregoing particulars are true in every respect. | | | | | | |
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| We declare the foregoing particulars are true in every respect. | | | | | | |
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| Mon. 5/4/5. 10/1 | We declare i | ne foregoing pa | rticulars are from in every res | peci | | |
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SDT3530P - POLICE REPORT





Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129 CONTINUATION OF REPORT Tel No 1800-4880999

3013 Report No. 1/20170227/2030

Sketch Plan

NP168

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference

| Signature Of Officer Recording The Report: F / Sgt MUHAMMAD RAIMIE BIN ABDULKARIM | Signature Of Informant: |
|--|--------------------------------|
| Signature Of Interpreter: Not applicable . | Date/Time: 27/02/2017 11:28 |
| Officer In Charge Of Case TP / GIA / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368 | Classification Of Case: |

SDT3530P - POLICE REPORT





2 of 3

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE

Report No. T/20170227/2030

556129

Tel No: 1800-4880999

CONTINUATION OF REPORT

| Details of Perso | n Involved | 200 CH-5 | | | 1057 | and the second second second |
|-------------------|------------------------------|----------------|--------------------|---|-----------|-----------------------------------|
| Any Pedestrian Ir | volved: No | | | | | |
| No. of Pedestrian | s Injured: NIL | | Use of Ped | estrian | Cross | ing: NA |
| Driver | | 对性工程的工程 | - 1 | W. C. SW | | |
| Name | TAN KHIM YONG | | ID No. | | S1329382A | |
| Related Vehicle | SDT3530P (Car) | | | Conta | ct No | 97245506 |
| Hospital/Clinic | NIL | | | Class Drivin Licent Expiry | g :e & | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge NIL | | | |
| No. of Days gran | ted Medical Leave | NIL | Degree of | Injury | NIL | |
| | | | | | | |
| Name | Unknown | | | ID No | | NIL |
| Related Vehicle | SMB3603B (Bus/Coach/Minibus) | | | Contact No. | | NIL |
| Hospital/Clinic | NIL | | | Class of Driving Licence & Expiry Date | | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | | Date Disci | narge | NIL | |
| No. of Days gran | ted Medical Leave | NIL | Degree of | Injury | NIL | |

Brief Details.

My car was stationary before yellow box. The traffic light was red. Traffic in front of yellow box moved, so I moved very slowly, keeping to my lane. Bus on my left came unexpectedly quickly into the yellow box in front of me into my lane and I braked to avoid hitting the bus. I remained stationary but the bus continued. The rear right of the bus hit the front left of my car above the wheel, denting the metal and pulling out my car's bumper as it continued moving. I horned a few times but the bus did not stop. The bus continued past Newton Circus to the other side, Bukit Timah Road, to the next bus stop. I followed him, took a photo of the bus number (SMRT Bus No.960) and licence plate (SMB3603B). Traffic was heavy. I do not remember if the bus had right hand signal on before coming into my lane.





1 of 3

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129 Report No. T/20170227/2030

Tel No: 1800-4880999

| REPORT OF A | TRACEIC | ACCIDENT |
|-------------|---------|----------|
| REPORT DE A | IRAFFIC | ALCIDER |

| Date/Time Report Made: 27/02/2017 11:28 | | | Vide Report No.: | Station Diary No. 25 | |
|--|-------------|------------------------------|---|---|--|
| Informan | t's Particu | ulars | THE REPORT OF THE PARTY OF THE | (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| Name of Informant: TAN KHIM YONG | | | Address: 81 CARDIFF GROVE SINGAPORE 558947 | | |
| ID Type / ID No.: NRIC NO / S1329382A | | 32A | Contact No.: Home/Office: | Mobile: 97245506 | |
| Nationality: SINGAPORE CITIZEN | | | Email | | |
| Sex: Female | Age: 58 | Date of Birth: 09/09/1958 | Type of Informant: Driver | | |
| Race: Chinese | | • | Language: English | Institution / School Name: | |
| Occupation: Journalist | | | Driving Licence Information: Class: 3 Date of Expiry: | | |

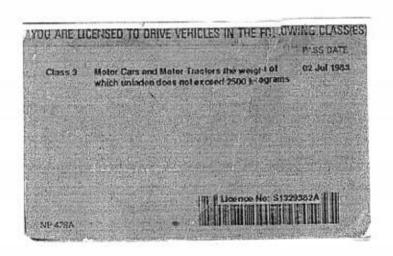
| Type of Accident: | Non-Injury | Drink Drive: No | Date/Time of Accident: 26/02/2017 12:40 | Type of Location Straight Road | |
|---|-------------------------|-----------------------|---|-----------------------------------|--|
| Location: Along Road DUNEARN F AFTER THE | | TEAD ROAD | | Road Speed Limit: | |
| Weather: Clear | | Road Surface: Dry | | | |
| Traffic Flow: One Way | | Traffic Control: | | Traffic Volume: Heavy | |
| Type of Colli | sion: Same Direction | | | Anyone conveyed by ambulance: | |

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenge |
|-------------|--------------|------|-----------|-------|----------------------|----------------|
| SDT3530P | Car | OPEL | CORSA 5DR | Blue | Seriously Damaged | |
| SMB3603B | Bus/Coach/Mi | | | | | 0 |

| Details of V | ehicle Insurance | | HE WHAT IS NOT THE WAY | 4 0000000000000000000000000000000000000 |
|--------------|-----------------------------|--------------|------------------------|---|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SDT3530P | AXA INSURANCE SINGAPORE PTE | GA105117 | 27/05/2016 | 26/05/2017 |

SDT3530P - OWNER DRIVING LICENSE





٥





Certificate number

Chassis number

Engine number

AYA Insurance Singapare Pte Ltd. 2 1800 860 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 S customer.care@axa.com.sg St. mos. exe. www 🗆

account number

GA105117 / 1

W0L0XEP68F406912B

614XEF19GK4860

03095

Certificate of Insurance

Motor Non-Closifind Party Risks and Companisation (Act, (Chapter 188) - Meter Vehicles | Third Party Risks and Companisation) Rules, 1986. Accad transport Act, 1987 (Mislaysia) Motor venedos (Tries-Party Risks i Pyllos, 3959 (Millaysia)

Policy details

Policyholder name

Cover Plan name NCD applicable

Vehicle registration number Period of Insurance

Finance Ioan company

Comprehensive Private 50%

S013530P

from 27/05/2016 to 26/05/2017 (both dates inclusive)

TAN KHIM YONG

Persons or classes of persons entitled to drive*

is: The Policyholder

Provided that the person driving is permished in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law at by reason of any enauthiers or regulation in that behalf from driving the Motor Vehicle.

Limitation as to use*

Use day for social, domestic and pleasure purposes and for the Policyholden's business.

The policy does not cover-use for hire or reward, raping, pose-making, reliability trial, speed testing, the carrying of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on. a roong track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

Auminations remained inequalities for the Example of the Mater both dissiftens Parts Repland Compensation Act. (Drapter 1854 and Section 195 of the Pices Transport Act. 1887) Marajarah, are not to be included united these dendings.

EXCESS

Basic Own Damage Excess

Windscreen Excess

SGD 300.00 SGD 100.00

Additional clauses & endorsements to your policy

I'We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Trind Party Risks and Componentions Act. (Chapter 199) and Part IV of the Road Transport Act. 1987 (Malaysia).

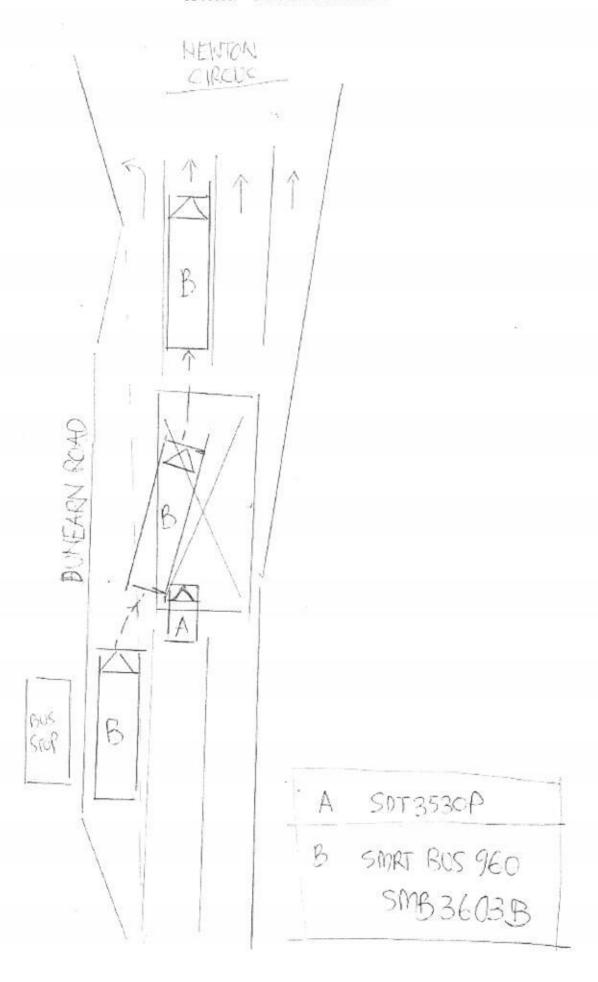
AXA Insurance Singapore Pte Ltd

Authorised signature

Important note

Policyhologia are warned that an the sale of a motor vehicle they must exhibit the Cortificate of hourance and the Policy to the inturance concern, if the Cortificate of Programme has been lost or distrigued a Statisticy Declaration to the effect must be must. Fallers to comply with this contract in an efforce under the More Senicle (Thire Fact, Payer and Compensation Act (Cap. 189)

The Prenault Warranty Classe regulars the prenaum to be paid in full within a specific period falling which there would be no liability under the policy, renewal certificate,







Repair Estimate

Date:13/03/2017

Reference: OPEL

Make: CORSA

To Whom It May Concern

Dear Sir.

RE: VEHICLE .: SDT3530P

CHASSIS NO.: WOLOXEP68F4069128 ENGINE NO.: B14XER19GK4860

Name of insured .: TAN KHIM YONG

Date of accident.: 26/02/2017

We append hereunder the estimated cost of repairs to be carried out to the above vehicle.

Parts

| No. | Qty | Part Description | Price (SGD) |
|-----|-----|---------------------------------|-------------|
| 1 | 1 | FRT BUMPER DEC | \$ 1,900.00 |
| 2 | 1 | FRT BUMPER SIDE RETAINER LH //~ | \$ 110.00 |
| 3 | 1 | FRT BUMPER FOG LAMP LH ". | \$ 270.00 |
| 4 | 1 | FRT BUMPER FOG LAMP COVER LH 3 | \$ 120.00 |
| 5 | 1 | LH HEADLAMP ? | S 1,250.00 |
| 6 | 1 | FRT FENDER INNERSHIELD LH ~~~ | \$ 110.00 |
| 7 | 1 | ERT FENDER LH Deutel | \$ 1,300.00 |
| 8 | 10 | FRT BUMPER CLIP ~ NPA | |
| | | | |

LKK Auto Consultants hence notify

- the Repairer of the following: To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis No illegal modification(s) is allowed.
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:



Parts Total: \$

5.060.00

Less10%: \$ Wir le 506.00 os. Total: \$

4,554.00

Labour

| No. | Labour Description | Price | e (SGD) | |
|-----|--|-------|----------|------|
| 1 | To dismantle / renew the accident damaged portion,to panel beating,reshape,straighten,orientate and align repair /replacement parts. | s | 2,600.00 | 975 |
| 2 | Carry out spray painting on affected area, FRT BUMPER, FRT FENDER LH, FRT DOOR LH, LH WING MIRROR | S | 2,400.00 | 1100 |
| 3 | To disconnect front wire harness of electrical component to facilitate repairs, reconnect and check electrical function after repair | \$ | 220.00 | 120 |

Labour Total: \$

5,220.00

Dales (CCD)

Others

Other Description

| No | | Pric | ce (SGD) |
|------------|------------------|---------------------|--------------------|
| <u>No.</u> | FRT NUMBER PLATE | S | 65.00 + |
| | | Other Total: | 65.00 |
| | | TOTAL: GST (7%): | 9,839.00 688.73 |
| | | GRAND TOTAL: | 10,527.73 |

NB: THIS IS ONLY AN ESTIMATE AND SHOULD ADDITIONAL WORK BE FOUND NECESSARY TO BE CARRIED OUT IN THE COURSE OF REPAIRS, EXTRA MATERIALS AND LABOUR COST WILL BE CHARGED ACCORDINGLY WHICH HOWEVER, YOU WILL BE INFORMED PRIOR TO ACTION TAKEN. PARTS PRICES ARE SUBJECT TO CHANGES.

Yours faithfully

WILSON TEO CLAIMS OFFICER

DID: 6511 1675

P/P Adria Li 17/03/17.

...CLAIM SUBFOLDER...(Pending for Survey Report)

| Case | Notified | Est Submitted | Adj Assigned | Ad | i Rpt | Adi Submitter | d Ins Auth'ed | Status |
|-----------|-----------------|-----------------|--------------------------------------|-----------|--------------------|-------------------------|---------------------|---|
| Main | 13 Mar 2017 | Est Submitted | 15 Mar 2017 16:49 Edit Adj Rpt | S\$5, | 505.00 stimates | S\$5,505.00 View Rpt | 37130.338.338.33 | Pending for Survey Report Cancel Case |
| | Main | Refer | ence | c | laim Deta | ils \ | Documents | Show All |
| CLAIM S | UBFOLDER DET | AILS | | | | | [Created by in | nsurer] |
| Insured: | | TAN KHIM YO | NG, ID: S13293 | 382A, | Tel: +6597 | 245506, Emai | l: khim@sph.com.sg | |
| Vehicle F | Reg. No.: | SDT3530P | | | Date of L | oss: | 26/02/2017 12: | 00 - :59 |
| Claim Ty | | OD / C0424696 | | | Policy/Co | over Note No.: | GA105117 (Com | nprehensive) |
| | , , | 02, 00.2. | | | Excess: | | S\$300.00 | |
| Repairer | | Alpine Motors | Pte Ltd (HQ) N | lo. 7 Ubi | Close, Alpi | ne Centre, 4086 | 504 Ubi - Tel: 6844 | 1985 |
| | Insurer: | AXA Insurance | e Pte Ltd (HQ) | - Tel: 63 | 338 7288 | . [Handled by K | itty Teo - 6880 460 | 02] |
| Adjuster | 7. | 24/03/2017] | | 300 1000- | | | ed by ADRIAN LIN | G] [Final Rpt due |
| Driver/C | custodian: | TAN KHIM YON | G (), NRIC: S1 | 329382 | A, Tel: +6 | 5597245506 | | |
| ASSOCI | ATED MAIL REC | EIVED | | | | | View All | Compose Case Mail |
| • AXA_S | G (27/03/2017): | Please resend a | uthorization sn | ns to ins | sured | | | |
| ALL ASS | SOCIATED TASK | | oup Subject | Hand | View All | | | w Task Complete Created On Done? |

Claim Documents

*SDT3530P (C0424696)
OD
Feb 26 2017 12:00PM
[TAN KHIM YONG]
Alpine Motors Pte Ltd

| | Upload Documents | Upload Photos Compose New Letter | V | ew Use Viewe | |
|-----|-------------------------------|--|---------|--------------|-------|
| Ass | essment Reports | | 1 per j | page 🔻 | 7 |
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| 4 | 13/03/17 11:11 | SDT3530P - QUOTATION FOR REPAIR_0002_ABS | 0 | Load JPG | V |
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| There are no document checklists configured. | | | | |
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| Show Remarks To: Handling Insurer Note: Remarks are private unless you show it to other parties. | | | | |

LKK Auto Consultants Pte Ltd (Co.Reg. No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

AXA Insurance Pte Ltd

8 Shenton Way #24-01, AXA Tower

Singapore 068811

Our File No:

CS/AXA17005237/ATBE2

Date:

06/12/2017

REFERENCE

Date of Loss:

Insured/Claimant:

TAN KHIM YONG

26/02/2017

Policy No: Nature of Claim: GA105117

OD

Claim No:

27292 km

C0424696

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SDT3530P

Make & Model:

OPEL CORSA-D, 1.4 (A) 27/05/2015 (Man. Year: 2015) Engine No: Chassis No: Odometer: B14XER19GK4860 W0L0XEP68F4069128

Reg. Date: Colour:

Blue

1398 cc

Market Value/New Car Price:

\$\$75,000.00

Sum Insured (S\$):

Engine Capacity:

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

No Pre-accident Condition:

res

CONDITION OF TYRES

Front Tyre Size:

185/65 R15

Rear Tyre Size: Rear Left Side: 185/65 R15

Front Left Side: Front Right Side: Continental 6 mm Continental 6 mm

Rear Right Side:

Continental 6 mm

The above values represent the remaining tyre treads depth

| COST OF CLAIMS | Repairer's | Adjuster's | Difference | Diff % |
|------------------------------|------------|------------|------------|--------|
| Parts | 5,125.00 | 3,310.00 | 1,815.00 | 35.41 |
| Miscellaneous Items | 0.00 | 0.00 | 0.00 | |
| Labour | 5,220.00 | 2,195.00 | 3,025.00 | 57.95 |
| Paintwork Labour | 0.00 | 0.00 | 0.00 | |
| Towing | 0.00 | 0.00 | 0.00 | |
| Calculated Gross Total (S\$) | 10,345.00 | 5,505.00 | 4,840.00 | 46.79 |
| - Excess (S\$) | 300.00 | 300.00 | 0.00 | 0.00 |
| (S\$) | 10,045.00 | 5,205.00 | 4,840.00 | 48.18 |
| + GST 7.00/7.00% (S\$) | 703.15 | 364.35 | 338.80 | 48.18 |
| Nett Amount (S\$) | 10,748.15 | 5,569.35 | 5,178.80 | 48.18 |

INSPECTION

Date of Assignment:

15/03/2017

Date Inspected:

17/03/2017

Inspected At:

Alpine Motors Pte Ltd (HQ) No. 7 Ubi Close, Alpine Centre

Singapore 408604

Estimated Period of Repair:

4.0 days

Adjuster: ADRIAN LING

Manager: DENISE TAY KWEE CHENG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

(REPAIR COST NOT CONCLUDE)
(EXCLUDE CHECK ITEMS \$\$1,640.00 NETT)

REPAIR DETAILS

Reference
Part Source: MRM-SG Version: 1.0 (Last Synchronised: 05 Dec 2017)

Parts: 144 OPEL CORSA-D 1.4 (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SDT3530P)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

| Recommended | Parts |
|-------------|-------|
|-------------|-------|

| No. | Qty | Part No. | Particulars | Condition | Repairer's | Amount |
|-------|---------|--------------|---|-------------------|--------------|--------------------|
| 1 | 1 | | *FRT BUMPER (CONSISTENT) | Deformed | 1,900.00 F | *1,900.00 F |
| 2 | 1 | | *FRT BUMPER SIDE RETAINER LH (CONSISTENT) | Necessary | 110.00 F | *110.00 F |
| 3 | 1 | | *FRT BUMPER FOG LAMP LH (CONSISTENT) | * Check | 270.00 F | *-F |
| 4 | 1 | | *FRT BUMPER FOG LAMP COVER LH (CONSISTENT) | * Check | 120.00 F | *-F |
| 5 | 1 | | *LH HEADLAMP (CONSISTENT) | * Check | 1,250.00 F | *-F |
| 6 | 1 | | *FRT FENDER INNER SHIELD LH (CONSISTENT) | Not Necessary | 110.00 F | *-F |
| 7 | 1 | | *FRT FENDER LH (CONSISTENT) | Dented | 1,300.00 F | *1,300.00 F |
| 8 | 1 | | *FRT BUMPER CLIP (NPA) (CONSISTENT) | Repair | • | - |
| 9 | 1 | | *FRT NUMBER PLATE (CONSISTENT) | Not Necessary | 65.00 FS | *- FS |
| F=Fra | anchise | part. S=SpcN | Nett. | | DOWN AND DAY | 890000 28000 14000 |
| | | | | Total Parts (S\$) | 5,125.00 | 3,310.00 |

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

| No | Particulars | Lab.Type | Repairer's | Amount |
|------|--|-------------------|------------|----------|
| Labo | our Items | | | |
| 1 | TO DISMANTLE / RENEW THE ACCIDENT DAMAGED PORTION, TO PANEL BEATING, RESHAPE, STRAIGHTEN, ORIENTATE AND ALIGN REPAIR / REPLACEMENT PARTS | New | 2,600.00 | 975.00 |
| 2 | CARRY OUT SPRAY PAINTING ON AFFECTED AREA, FRT BUMPER, FRT FENDER LH, FRT DOOR LH, LH WING MIRROR | New | 2,400.00 | 1,100.00 |
| 3 | TO DISCONNECT FRONT WIRE HARNESS OF ELECTRICAL COMPONENT TO FACILITATE REPAIRS, RECONNECT AND CHECK ELECTRICAL FUNCTION AFTER REPAIR | New | 220.00 | 120.00 |
| | Gross Labour | Cost (S\$) | 5,220.00 | 2,195.00 |
| | Report was unsubmitted durin | g this print-out. | | |

< END OF ESTIMATES >