

ASS. REC. BY:

REF:

093/LPC17022727/T146

Special Instruction:

Surveyor:

Taufik

ASSIGNMENT (Office)

From (Person):

ERIC WOO

of

PC

Date/Time:

04.12.2017 11.16am

Estimated Cost:

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

FBA 841K

Insured:

SKC 6949C

at Workshop m/s

Motor Point Trading

Tel:

6776 0058

of

17 Jinmas Puteh

Policy No:

Claim No:

17/17/17/VP05020241

Sum Insured:

Excess:

Make of Veh:

D.O.A.

24.11.2017

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

04.12.2017 11.29am

Person Contacted:

Jy

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

FBA 841K - X

SKC 6949C - 093 / LPC16010887 / KHT3C3-1

QA: 10062016

5/12-

dismante

7/12-

after repair.



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 Internationale Des Experts En Automobile

LONPAC INSURANCE BHD

Ref : CS3/LPC17022927/T1tb

300 BEACH ROAD

#17-04/07 THE CONCOURSESINGAPORE 199555

Date : 04-12-2017



Code : LPC2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SKC 6949C	Veh. Inspected	FBA 841K
Policy No.		Coverage (\$)	0.00
Claim No.	17/17/17/VP05020241	Excess (\$)	0.00
Assign From	ERIC WOO	Assign Date	04/12/2017

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

3. Conditions 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. Description of Damages

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5. General Information

Accident Date	24/11/2017	Inspection Date	04/12/2017
Survey held at	MOTOR POINT TRADING 17 JALAN MAS PUTEH SINGAPORE 128622		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.
--

Catherine Chong (LKK Auto)

From: ERIC WOO JUN KIAT <ericwoo@lonpac.com>
Sent: Monday, 4 December, 2017 11:16 AM
To: assignments@lkkauto.com
Cc: MT_Claim_SG
Subject: Our Ref: 17/17/17/VP05020241 Accident involving SKC6949C & FBA841K along Corporation Rd on 24/11/17
Attachments: 04122017110954.pdf

Dear Catherine,

Kindly refer to our attachment.

Please proceed to conduct a survey of the vehicle FBA 841K on without Prejudice Basis.

We look forward to receiving your report soon.

Thank you.

Best Regards,
Eric Woo
Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6279 9253 | Fax: (65) 6296 3767

LAWRENCE LEE & CO

Advocates & Solicitors

李伟平律师楼

UEN: 53159236K

Your ref: please advise

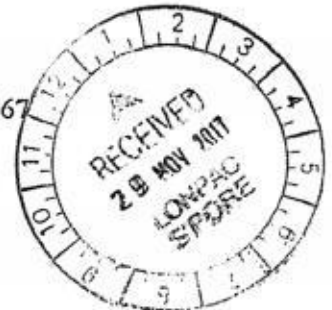
Our ref: LWP/MPT/3828A/17/sm

29 November 2017

133 New Bridge Road #13-05
Chinatown Point Singapore 059413
tel: 6533 3680 fax: 6533 3689

Lonpac Insurance Bhd

FAX: 6296 3767



Dear Sirs

NOTICE OF ACCIDENT PURSUANT TO THE NIMA PROTOCOL ACCIDENT ALONG CORPORATION RD ON 24.11.17 INVOLVING FBA841K & SKC6949C

We are instructed by Mr Kalaiselvan S/O Jayaraman to notify you of the abovementioned road traffic accident involving our client's vehicle registration number FBA841K and vehicle registration number SKC6949C owned and driven by your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

We do hereby notify you that our client's damaged vehicle may be inspected at the workshop at M/s Motor Point Trading at 17 Jalan Mas Puteh Singapore 128622 (contact person: Joy, tel: 6776 0058).

Kindly revert within two (2) working days by fax only. Please do not email.

Yours faithfully

LEE WEE PENG LAWRENCE

Cc client

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 withholding 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.

ACCIDENT STATEMENT

Date Of Report	27/11/2017 11:26
Date Of Accident	24/11/2017 20:30
Exact Location Of Accident	ALONG COOPERATION ROAD TOWARDS JLN BOON LAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBA841K
Insured/Policyholder	
Name Of Registered Owner	KALAISELVAN S/O JAYARAMAN
NRIC No	S8536346H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90538754
Alternative Phone No	OFFICE-90538754

Vehicle Particulars

Manufacturer	YAMAHA
Model	SPARK 135 M
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MC/00199605/03
Cover Note Number	

Driver

Name of Driver	KARUPPIAH JAYARAMAN
NRIC No	S1181555C
Date Of Birth	18/07/1956
Occupation	INDOOR
Date Of Driving Pass	22/11/1985
Driving Experience	32 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90538754
Fax Number	
Contact Number	OFFICE-90538754
E Mail Address	JK18071956@GMAIL.COM

Address
 Postcode
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured PARENT
 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
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Was any body injured in the Accident? YES
 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] JURONG WEST NPC
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20171125/2134. ON 24/11/2017 AT ABOUT 8.30PM (FBA841K) WAS RIDING ALONG CORPORATION RD AND WAS ON THE LEFT LANE OF A TWO LANE ROAD AND GOING TOWARDS BOON LAY DR. I WAS APPROACHING A CROSS JUNCTION BEFORE JURONG WEST STADIUM AND THERE WAS A WHITE VOLKSWAGEN SKC6949C ON MY RIGHT. THERE WERE A FEW CARS INFRONT OF THE WHITE VOLKSWAGEN. SUDDENLY, THE WHITE CAR JUST CUT TO THE LANE INFRONT OF ME. I BRAKED HOWEVER COULD NOT STOP IN TIME AND THE CAR COLLIDED ONTO ME. I THEN FALL TO THE GROUND. THE CAR THEN STOPPED AND RENDERED ASSISTANCE TO ME AND BROUGHT ME TO THE CLINIC FOR TREATMENT. ON 25/11/2017, I STILL FELT PAIN ON MY RIGHT LEG AND WENT TO NATIONAL UNIVERSITY HOSPITAL AND RECEIVED 7 DAYS MC. THE DRIVER HAD GIVEN ME THE FOOTAGE OF THE INCIDENT.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKC6949C
 Vehicle Make/Model/Colour VOLKSWAGEN/JETTA 1.4
 Details Of Properties
 Name of Driver OOI SENG QIONG
 NRIC/Passport Number S8523558C
 Contact Number 90217912
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver) 1

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name

KARUPPIAH JAYARAMAN

Approximate Age

Injuries Sustain

FELT PAIN ON RIGHT LEG

Injured person in which vehicle?

FBA841K

Were seat belts worn?

NO

Was injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

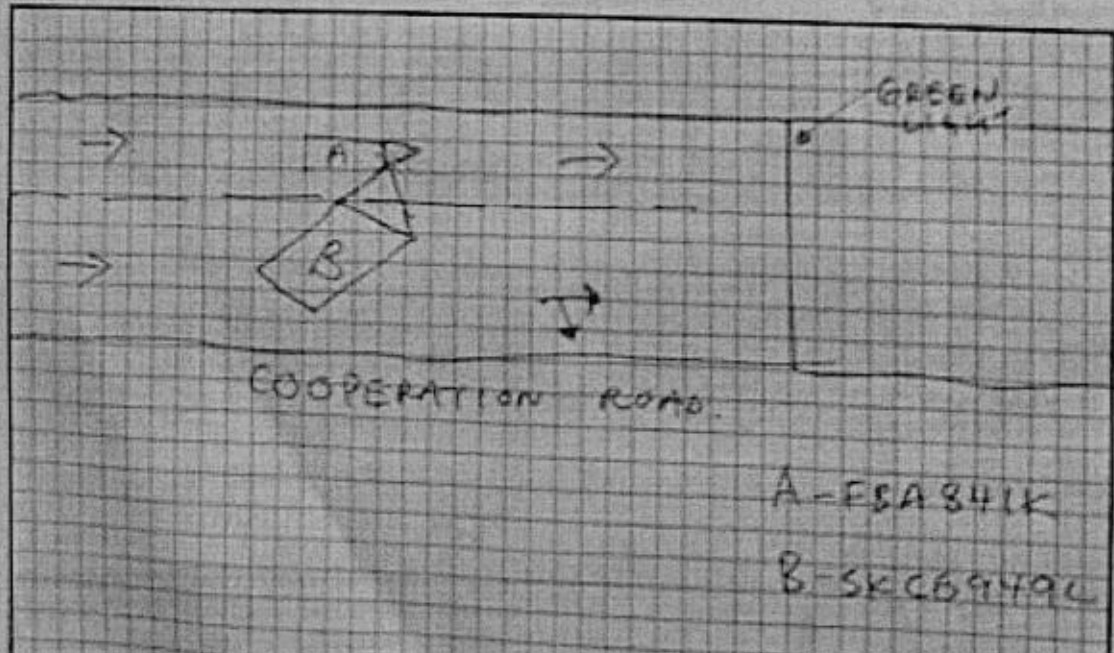
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The 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 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)
 - (a) I understand, acknowledge, agree and consent that:
 - (i) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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 me, including but not limited to the "Personal Information" and disclose and transfer such Personal Information to all insurers who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my obligations 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 third parties outside of the same as well as on the external cover of envelopes/postal packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims, collectively the "Purposes";
 - (ii) all insurers who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 - (iii) my Personal Information may not be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms, which may be sited outside of Singapore, for one or more of the above Purposes).

Policyholder Signature / Date & Time

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

VERIFIED BY AJAX MARKS
REPORTING OFFICER
Mohammad Azaly Bin Abdullah
Witnessed by Reporting Centre
Personnel

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

Pls refer to Police Report T/20171125/2134

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
MOHAMMAD AZALY BIN ABDULLAH

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

27 November 2017 at 10:02 AM

Date/Time:

27 November 2017 at 10:02 AM

Police Report



**SINGAPORE
POLICE FORCE**



T201711252134

1 of 3

Report No: T201711252134

Police Station Of Origin
Jurong West N.P.C.
700 Corporation Road SINGAPORE 649618
Tel No: 1800-2889999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 25/11/2017 23:02		Vide Report No.		Station Diary No. 173	
Informant's Particulars					
Name of Informant KARUPPIAH JAYARAMAN		Address APT BLK 282 BOON LAY DRIVE #05-565 SINGAPORE 642652			
ID Type / ID No. NRIC NO / S11B1555C		Contact No. Home/Office		Mobile: 90538754	
Nationality SINGAPORE CITIZEN		Email			
Sex Male	Age 81	Date of Birth 18/07/1956	Type of Informant Rider		
Race Indian		Language		Institution / School Name	
Occupation Driver		Driving License Information Class		Date of Expiry	

General Information of the Accident

Type of Accident	Injury Others	Drink Drive No	Date/Time of Accident 24/11/2017 20:30	Type of Location X-junction
Location Along Road 1 CORPORATION ROAD				
JUNCTION BEFORE JURONG WEST STADIUM				
Weather Clear		Road Surface		Road Speed Limit
Traffic Flow		Traffic Control		Traffic Volume
Type of Collision Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBA541K	Motorcycle				Slightly Damaged	0
SKC69492	Car					0

Details of Person Involved

Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: Nil			

Police Report



**SINGAPORE
POLICE FORCE**



T00171125/2134

2 of 3

Police Station Of Origin
Jurong West N.P.C.
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2680999

Report No: T20171125/2134

CONTINUATION OF REPORT

Rider			
Name	KARUPPIAH JAYARAMAN	ID No.	S11B1555C
Related Vehicle	FBA841K (Motorcycle)	Contact No.	90538754
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	25/11/2017	Date Discharge	25/11/2017
No. of Days granted Medical Leave	07	Degree of Injury	Slight
Driver			
Name	OOI SENG QIONG	ID No.	S8523558C
Related Vehicle	SKC6949C (Car)	Contact No.	90217912
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24/11/2017 at about 8.30pm, I (FBA841K) was riding along Corporation Rd and was on the left lane of a two lane road and going towards Boon Lay Dr. I was approaching a cross junction before Jurong West Stadium and there was a white Volkswagen SKC6949C on my right. There were a few cars in front of the white Volkswagen. Suddenly, the white car just cut to the lane in front of me. I braked however could not stop in time and the car collided onto me. I then fell to the ground. The car then stopped and rendered assistance to me and brought me to the clinic for treatment.

On 25/11/2017, I still felt pain on my right leg and went to National University Hospital and received 7 days MC. The driver had given me the footage of the incident.

Police Report



SINGAPORE
POLICE FORCE

Police Station Of Origin
Jurong West N.P.C.
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20171125/2134

3 of 3

Report No: T/20171125/2134

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Police Report

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

2/

Sgt 1 NURAQILAH BINTE ABDUL HAMID

Signature Of Interpreter
Not applicable

Officer In Charge Of Case
TP / AEIT /
SSI 2 YEO GEAK ENG CECILIA
Contact No: 65476404

Authentication Stamp
S1125

Signature Of Informant

Date/Time
25/11/2017 23:02

Classification Of Case:

Enquire Transfer Fee



Vehicle Details			
Vehicle No. :	FBA841K		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	YAMAHA		
Vehicle Model :	SPARK 135 M		
Chassis No. :	5YP705612		
Propellant :	Petrol		
Engine No. :	5YP705612		
Engine Capacity :	135 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	-		
Unladen Weight :	-		
Year Of Manufacture :	2005		
Original Registration Date :	24 Jan 2006		
Lifespan Expiry Date :	-		
COE Category :	D - Motorcycle		
PQP Paid :	\$3,169.00		
COE Expiry Date :	23 Jan 2021		
Road Tax Expiry Date :	23 Jul 2018		
Inspection Due Date :	23 Jan 2019		
Intended Transfer Date :	31 Jan 2018		
CO2 Emission :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	6346H
Vehicle Details	
Vehicle No.:	FBA841K
Vehicle to be Exported:	No
Intended De-registration Date:	31 Jan 2018
Vehicle Make:	YAMAHA
Vehicle Model:	SPARK 135 M
Primary Colour:	Purple
Manufacturing Year:	2005
Engine No.:	5YP705612
Chassis No.:	5YP705612
Maximum Power Output:	-
Open Market Value:	\$1,755.00
Original Registration Date:	24 Jan 2006
First Registration Date:	24 Jan 2006
Transfer Count:	4
Actual ARF Paid:	\$264.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	23 Jan 2021
COE Category:	D - Motorcycle
COE Period(Years):	5
PQP Paid:	\$3,169.00
COE Rebate Amount:	\$1,887.00
Total Rebate Amount:	\$1,887.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 31 Jan 2018



PRE-REPAIR INSPECTION REPORT			
LONPAC INSURANCE BHD 300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Ref: CS3/LPC17022927/T1tbs2 Date: 06-02-2018 Code: LPC2	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SKC 6949C	Veh. Inspected	FBA 841K
Policy No.		Coverage (\$)	0.00
Claim No.	17/17/17/VP05020241	Excess (\$)	0.00
Assign From	ERIC WOO	Assign Date	04/12/2017
2. Vehicle Particulars & Condition			
Make & Model	YAMAHA	c.c	135
Engine No.	HIDDEN	Year of Reg.	2006
Chassis No.	5YP705612	Colour	BLACK
Odometer	29633 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	80/90R17	BRIDGESTONE	5 mm
L/H Front Tyre			mm
R/H Rear Tyre	90/80R17	BRIDGESTONE	5 mm
L/H Rear Tyre			mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION AND O/S BODY.			
5. General Information			
Accident Date	24/11/2017	Inspect Date / Time	04/12/2017 (12:00 PM)
Survey held at	MOTOR POINT TRADING 17 JALAN MAS PUTEH SINGAPORE 128622		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.			

Report Ref No. CS3/LPC17022927/T1tbs2

Inspected By



MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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