

ASS. REC. BY:

REF:

C1 | TP | 7023247 | De

Special instruction:

Surveyor :

ASSIGNMENT (Office)

From (Person): Goh Wee Dek

of Premier Automotive

Date/Time: 22/11/2017

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SHB 8971P

Insured:

at Workshop m/s

Tel:

of

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:
(Client's Record

D.O.A. 21/11/2017

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: _____

Person Contacted:

Vehicle IN/OUT

Date/Time

Action/Instruction ()	Estimate
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SHB 8971P-X

Bryan Ang (LKKAUTO)

From: Goh Wee Dek <weedek.goh@premiertaxi.com>
Sent: Wednesday, 22 November 2017 1:33 PM
To: SUR
Cc: Lawrence Ong; Ben Chua; Wong Zhi Xiang; Gary Shi; Yee Wing Kong; Karene Lim
Subject: SHB8971P- FIRE INSPECTION

Dear All

We would like to engage LKK Auto to conduct a fire inspection on our vehicle and provide a report.

The vehicle is now present at our premises, please arrange to survey soonest possible. Thanks

Regards

Goh Wee Dek
Assistant Claims Manager
Premier Automotive Services Pte Ltd

500/-


Address: 23 Changi South Ave 2, #01-02 Singapore 486443
Tel: 6214 8880 Ext 068 | DID: 6544 6682 | Fax: 6214 1511
Visit us at: www.premiertaxi.com.sg

Confidentiality Notice | This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential or proprietary information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, immediately contact the sender by reply e-mail and destroy all copies of the original message.

 Please Consider Your Environmental Responsibility Before Printing This E-mail. SAVE OUR TREES and REDUCE POLLUTION

Dear Bryan,

I am okay with the report. Do take note that it should be spelt as DPF (Diesel Particulate Filter) and not PDF.

Additional, please amend the report to UK Cool Pte Ltd instead of Premier Automotive Services Pte Ltd.

Let me know if you have any query.

Thank you.

Regards,

Lawrence Ong
Senior Manager
Premier Automotive Services Pte Ltd

Address: 23 Changi South Ave 2, #03-02 Singapore 486443

Tel: 6214 8880 EXT: 222 | DID: 6410 0932

Visit us at: www.premiertaxi.com.sg

From: Bryan Ang (LKKAUTO) [<mailto:bryanang@lkkauto.com>]

Sent: Thursday, 7 December, 2017 12:50 PM

To: Lawrence Ong

Subject: RE: SHB8971P

Dear Lawrence

Attached is a draft copy of my report.

Please let me know your comments if any.

Best Regards,

Bryan Ang

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: bryanang@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Lawrence Ong [<mailto:lawrence.ong@premiertaxi.com>]

Sent: Monday, 4 December 2017 11:17 AM

To: Bryan Ang (LKKAUTO) <bryanang@lkkauto.com>

Subject: SHB8971P

Dear Bryan,

Enclosed copies of the services history and some additional photos after dismantling of the dashboard.

Let me know if you have any query.

Thank you.

Regards,

Lawrence Ong
Senior Manager
Premier Automotive Services Pte Ltd

Bryan Ang (LKKAuto)

From: Lawrence Ong <lawrence.ong@premiertaxi.com>
Sent: Thursday, 7 December 2017 6:03 PM
To: Bryan Ang (LKKAuto)
Subject: RE: SHB8971P

Yes. They are our in-house contractor.



UK Cool Pte Ltd (

Main Workshop : No. 23 Changi
SPC Bukit Merah : 2800 Jalan Bu
SPC Balestier : 482 Balestier F
SPC Hougang : 120 Hougang /
Register Address : Blk 1002 Bukit
Website: www.ukcool.com.sg E
GST Reg. No. 20-0305281M

Regards,

Lawrence Ong
Senior Manager
Premier Automotive Services Pte Ltd

Address: 23 Changi South Ave 2, #03-02 Singapore 486443
Tel: 6214 8880 EXT: 222 | DID: 6410 0932
Visit us at: www.premiertaxi.com.sg

From: Bryan Ang (LKKAuto) [<mailto:bryanang@lkkauto.com>]
Sent: Thursday, 7 December, 2017 2:46 PM
To: Lawrence Ong
Subject: RE: SHB8971P

UK Cool registered address at Bukit Merah?

Best Regards,
Bryan Ang
LKK Auto Consultants Pte Ltd
phone: 6256-3561 | email: bryanang@lkkauto.com | fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Lawrence Ong [<mailto:lawrence.ong@premiertaxi.com>]
Sent: Thursday, 7 December 2017 2:31 PM
To: Bryan Ang (LKKAuto) <bryanang@lkkauto.com>
Subject: RE: SHB8971P

Address: 23 Changi South Ave 2, #03-02 Singapore 486443

Tel: 6214 8880 EXT: 222 | DID: 6410 0932

Visit us at: www.premiertaxi.com.sg

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	21/11/2017 15:49
Date Of Accident	21/11/2017 13:20
Exact Location Of Accident	BISHAN PLACE - BISHAN ST 13
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHB8971P
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

Vehicle Particulars	
Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI

Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

Driver	
Name of Driver	MOHAMMAD ASRIN BIN AMIN
NRIC No	S7535420G
Date Of Birth	20/11/1975
Occupation	OUTDOOR
Date Of Driving Pass	22/05/1996
Driving Experience	21 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97466969
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 355 #04-1810 YISHUN RING ROAD
Postcode	760355
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	FIRE, EXPLOSION OR LIGHTNING
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?	NO
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	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

VEH. A - NO PAX VEHICLE NOT PRESENT. NO PHOTOS TAKEN . . . 1/ TO ATTACH POLICE REPORT DATED 21/11/2017

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the 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 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. 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 upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

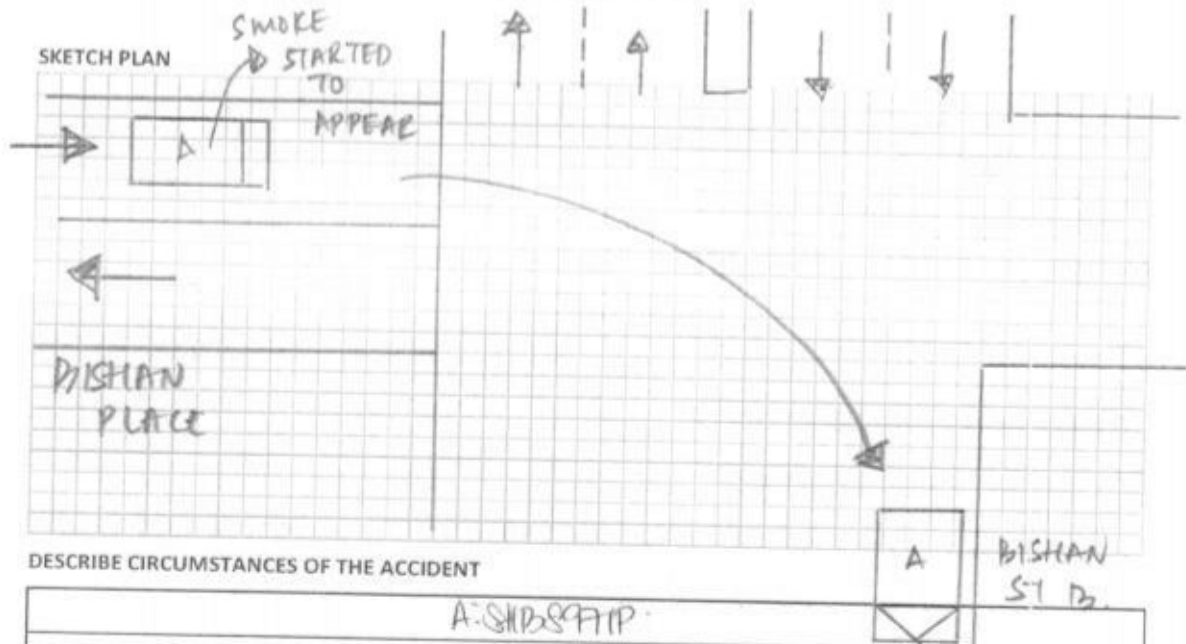


Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2



DECLARATION

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

Policyholder's Signature
Date & Time:



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

875354206

21 NOV 2017

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



Describe Circumstance of the Accident.

I - **MOHAMMAD ASRIN BIN AMIN - S7535420G**, HIRER DRIVER OF **SHB 8971 P**, WOULD LIKE TO REPORT THE FOLLOWING.

ON 21/11/2017 @ 1320HRS, I WAS DRIVING MY TAXI (**SHB 8971 P**) ALONG BISHAN PLACE.

WHILE STATIONARY, SUDDENLY I NOTICED SOME SMOKE APPEARED ON THE FRONT PORTION OF MY TAXI.

I THEN MOVED AHEAD - MADE A RIGHT TURN INTO THE JUNCTION OF BISHAN ST 13 & STOPPED MY TAXI (AS NOT TO OBSTRUCT THE ROAD @ BISHAN PLACE) - WITH THE ASSISTANCE FROM A PASSERBY WHO HELPED TO PUT OFF THE FIRE WITH A FIRE EXTINGUISHER.

SOON FIREMAN -THE CIVIL DEFENCE & POLICE OFFICERS CAME & MANAGED TO PUT OFF THE FIRE.

NO INJURIES INVOLVED.

NO PASSENGERS ONBOARD MY TAXI.

NO GOVERNMENT PROPERTIES/OTHER VEHICLES INVOLVED.

DAMAGES FOUND ON VEHICLE A



ON
FIRE

PREMIER TAXI

Driver's Signature & NRIC Number
Tuesday, November 21, 2017 @ 4:02:40 PM

(attended by)

Sketch Plan Pg. 4

PREMIER TAXIS	HIRER / RELIEF / SUPER RELIEF
VEHICLE NO.	SHB 8971P
CONTACT NO.	97466969
NEW MAILING ADDRESS (if any)	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7535420G



Name
MOHAMMAD ASRIN BIN AMIN

Race
MALAY
Date of birth
20-11-1975
Country of birth
SINGAPORE

Sex
M

S7535420G



IRIC No S7535420G



Date of issue
11-01-2012

Address
**APT BLK 355 YISHUN RING ROAD
#04-1810
SINGAPORE 760355**

REPUBLIC OF SINGAPORE		DRIVING LICENCE
	Licence Number	S7535420G
	Name	MOHAMMAD ASRIN BIN AMIN
	Birth Date	20 Nov 1975
	Issue Date	26 Dec 2012

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS:

Class 2B Motorcycles not exceeding 200 cc
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 3500 kilograms

PASS DATE

31 Dec 2014
22 May 2015
1996

NP 428A



Land Transport Authority

VOCATIONAL LICENCE

Licence No: **S7535420G**

Name: **MOHAMMAD ASRIN BIN AMIN**

Issue Date: **12/8/2013**

Please visit www.lta.gov.sg to check the status of this vocational licence



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MPAS17154118 Vehicle Registration No: SHB 8971P
Name(as shown in NRIC) : PREMIER TAXIS PTE LTD NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 23 CHANGI SOUTH AVE 2, #01-02. S (486443) Singapore: (_____)
Contact (Tel) : 6214 8880 Mobile No. : _____
Email Address : _____
Date of Accident : 21.11.2017 Time of Accident : 1320 HRS
Place of Accident : BISHAN ST 13
Insurance Company : NTUC INCOME INSURANCE CO-OPERATIVE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To attach police report dated
21.11.2017



Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature:
Name:
NRIC/FIN No.:
Date: 17 NOV 2017



**SINGAPORE
POLICE FORCE**



F/20171121/2216

1 of 2

POLICE REPORT (NP299)

Report No. F/20171121/2216

Police Station Of Origin
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Date/Time Report Made 21/11/2017 20:37	Vide Report No. E/20171121/0078	Station Diary No. 174
Name Of Informant MOHAMMAD ASRIN BIN AMIN	Address APT BLK 355 YISHUN RING ROAD #04-1810 SINGAPORE 760355	
ID Type / ID No. NRIC NO / S7535420G	Contact No. Home/Office Mobile 97466969	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Taxi driver	Sex Male	Age 42
	Date of Birth 20/11/1975	Race Malay
Institution/School Name	Language	
Date/Time Of Incident 21/11/2017 13:20 - 21/11/2017 13:20	Location Of Incident BISHAN STREET 13 SINGAPORE	

Brief details.

I am currently working as a taxi driver under PREMIER Taxi Company.

On the 21/11/2017 at around 1320hrs , I was driving my taxi , veh no SHB 8971 P , along Bishan Place and while stationary at the junction , suddenly I noticed there was smoke coming from the front car hood of my taxi. I then proceeded to make a right turn into the junction of Bishan Street 13 and stopped my vehicle. I alighted from my vehicle and realized the fire had started burning at the front portion of my vehicle. I sought assistance from passer bys to put out the fire with fire extinguisher. The SCIDF and

Signature Of Officer Recording The Report: F / Staff Sgt ZENG ZHIMIN, KEVIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/11/2017 20:37
Officer In-Charge Of Case: F / Yishun North N.P.C / Sgt 2 FARDHAN SHAH BIN JUFFREY Contact No.: 68529999	Classification Of Case:

Authentication Stamp





**SINGAPORE
POLICE FORCE**



F/20171121/2216

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20171121/2216

Police arrived shortly after and managed to put out the fire completely. I did not suffer any injury and there was no passenger in my taxi when the fire happened. No government property was damaged at all. I was told by my Taxi company to lodge a Police Report for their reference. I wish to add in that 2 cash cards, Bluetooth headset and my spectacles were damaged in the fire as I couldn't retrieve them from the fire.

Signature Of Officer Recording The Report: F / Staff Sgt ZENG ZHIMIN, KEVIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/11/2017 20:37
Officer In-Charge Of Case: F / Yishun North N.P.C / Sgt 2 FARDHAN SHAH BIN JUFFREY Contact No.: 68529999	Classification Of Case:

Authentication Stamp