	From (Person	Shin	rlenc	400	of			SPF		Date	Time:	28032018	11
	Estimated Co.						В	ill to:					
	To Inspect Ve			D RES /		r BP			Insure	od:	TOB	MFBJF	
	at Workshop	m/s			TR	BI	nyur		T	el:	6458	0296	
	of			B	Ik Itol	o Si	n Ming	D(16	#08-0	3			
-	Policy No:						~	Claim N	0;			10100	
	Sum Insured:							Excess	\$.				
	Make of Veh (Client's Recor									_ D.O	.A	20132018	
	CA / REV Date/Time:			24 HRS		n Cont	icted;	J	udy		/ 1	OUT	
	Date/Time	Action	/Instru	ction (1)	Esti	mate		D0 N	of fino	ilite	1	
		OLQ.	367	11 - x									
		T-66	763	şm -x									
	10 5 18	To		ubmit	ф	250	<u> </u>						

ennerh	ASSIGNMENT
Family 1	ASSIGNMENT
From: Date:	Veh No: SLQ 867814 Yr Regn: 07, 17
0	Type, M.Car/M.Cycla/Pus/Vs=//
OD/TP/WS/TP RES/OD RES/EVA/INV/M	Y Truck/Trailer or A) MOV
To Inspect Vehicle No:	Make 7 Soul
at Workshop m/s	Column 1 23
of	
Insured	Sp.Reading 3 932 T/Radio: Insured / Std / NI / NA Eng/No:
Policy No.	CNO: ACR 50 . 71337
Claims No.	Gen. Cond: Good Fair Poor Burnt
Sum Insured: Excess:	Steering: Inorder-/ Jammed / Leaked / Burnt or
(Client's Record)	Brake: Incoder/ Jammed / Leaked / Burnt or
Make of Veh:	Brake: Inorder / Jammed / Leaked / Burnt or
	Modi: NII / S/Rim / STD A/Rim or
(Policy Condition)	Tyre Size: F: 225/50R18
Remark: The veh had commenced its	N/S O/S BS/FOUNTENANCE
repair at the time of inspection.	N/S O/S BS/ PUN EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or
Bal. or Market Value:	
IDAC Accident Rport: Consistent? : Yes	er No.
GIA / PR Seen: Consistent?: Yes (mm R/Bal. mm
Est. Repairs: O1 days Res.: Yes	mm UBal.
Lum Sum: /By % 3 Val.: Yes of	0.01. 28/3/18
	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date:Person Contacted:	renicie: IN/OUT
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
28/3 Fle pass to Cothe	in len not need
	- in in in in it is a second of the interest o
RECEIVE	J 1 U MAT 2018
to/Time, File Pass 107 : Prell. Report	Days Of Repair:
: Final Report	Postura III and S
to/Time, File Return to?	180
10/5- typust	Add Fee: : Site Insp (\$)
or organic	
	I I INTONIOU /
port Format : TP	: Interview (\$) Photos
port Format : TP mp Sum / I.B.I: (S >50 2	Tech Invs (\$) Photos Weekend (\$



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 AUTOMOTIVE ENGINEERING & MGT DIVISION Ref: CS/SPF18005750/Kvb ACCIDENT CLAIM SECTION (SINGAPORE POLICE FORCE) Date: 28-03-2018 1 MOUNT PLEASANT ROAD BLK 8 OLD POLICE ACADEMYSINGAPORE 298333 Code: SPF 1. Policy Particulars :- THIRD PARTY CLAIM Insured Veh. FBB 7687M Veh. Inspected **SLQ 8679H** Policy No. Coverage (\$) 0.00 Claim No. 0.00 Excess (\$) Assign From SHIRLENE YEO Assign Date 28/03/2018 2. Vehicle Particulars & Condition Make & Model c.c 0 HIDDEN Engine No. Year of Reg. Chassis No. Colour Odometer Steering Brakes

	General		1				
3.	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.		Transition Contract	Description of Damages				

Modification

5.	General Information					
	Accident Date	20/03/2018	Inspection Date	28/03/2018		
	Survey held at	160 SIN MING DRIVE #08-03 T & B MOTOR REPAIRS SERVICES PTE LTD				
	Repairer					
5a.	Ignació certal		Remarks			

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

Catherine Chong (LKK Auto)

From:

Celine Fong (LKKAuto) <celinefong@lkkauto.com>

Sent:

Wednesday, 28 March, 2018 12:12 PM

To:

Shirlene YEO (CNB); assignments; SUR

Cc:

Olivia Lau (LKKAuto); Sylvester QUAH (CNB); Muhammad Asyraf ANUAR (CNB);

Evelyn NAH (CNB)

Subject:

RE: Assessment of 3rd Party Vehicle SLQ 8679H

Dear Shirlene,

Thank you for the email.

Dear Catherine (Assignment Team),

Please arrange accordingly.

Best Regards,

Celine Fong

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: <u>celinefong@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Shirlene YEO (CNB) [mailto:Shirlene_YEO@cnb.gov.sg]

Sent: Wednesday, 28 March 2018 11:48 AM

To: Celine Fong (LKKAuto) <celinefong@lkkauto.com>

Cc: Olivia Lau (LKKAuto) <olivialau@lkkauto.com>; Sylvester QUAH (CNB) <Sylvester_QUAH@cnb.gov.sg>;

Muhammad Asyraf ANUAR (CNB) <Muhammad_Asyraf_ANUAR@cnb.gov.sg>; Evelyn NAH (CNB)

<Evelyn_NAH@cnb.gov.sg>

Subject: Assessment of 3rd Party Vehicle SLQ 8679H

Message Classification: Restricted

Hi Celine

Please be informed that we are engaging Mr Kenneth Kong (as nominated by the 3rd party) of LKK Auto Consultants Pte Ltd to conduct the pre-repair survey of the damage to the 3rd party vehicle (SLQ5679H) arising from accident SLQ 8679 H and FBB 7687 M (CNB's vehicle) on 20/3/2018 along North Buona Vista Road.

Please contact Mr Tay at 6458 0296 from T & B Motor Repairs Services Pte Ltd, Blk 160 Sin Ming Drive #08-03 Sin Ming Auto City Singapore 575722 for the said arrangement on an urgent basis.

As our FY is closing and unable to raise a purchase order now, we will follow-up with the purchase order of \$280 (before GST, see attached email) in 1st week of Apr 18. Thanks.

Please update us on the status of this assessment.

Thanks.

cc. Asyraf, please follow-up on the PO next week. Thanks.

Shirlene Yeo (Ms) Manager, Logistics Unit Corporate Services Division Central Narcotics Bureau DID: (65) 6325 6626







Keeping Singapore Drug-Free

Central Narcotics Bureau W cnb.gov.sg FB fb.com/CNB.DrugFreeSG IG Instagram.com/cnb.drugfreesg

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.

- Any false reporting may be referred to the Police for investigation.
 This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

	ACCIDENT STATEMENT	
Date Of Report	21/03/2018 13:03	
Date Of Accident	20/03/2018 08:05	
Exact Location Of Accident	ALONG NORTH BUONA VISTA ROAD	
Country/State of Loss	SINGAPORE	

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLQ8679H

Insured/Policyholder

PANG SZE CHEW Name Of Registered Owner

S8185146H NRIC No.

REGINEPSC@GMAIL.COM Email Address (LOCAL) +65-92360813 Mobile Phone No.

OFFICE-92360813 Alternative Phone No

Vehicle Particulars

TOYOTA Manufacturer

ESTIMA AERAS Model

Exact Purpose for which vehicle was being used at PRIVATE

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

THIRD PARTY If No. Please state action to be taken

Vehicle Category

PRIVATE CAR

Insurance Company

ERGO INSURANCE PTE, LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO. Fleet Policy

DMPC17S014292 Policy Number

Cover Note Number

Driver

PANG SZE CHEW Name of Driver

S8185146H NRIC No 14/04/1981 Date Of Birth INDOOR Occupation 26/05/2012 Date Of Driving Pass

5 YEARS AND 9 MONTHS Driving Experience

FEMALE Gender

(LOCAL) +65-92360813 Mobile Number

Fax Number

OFFICE-92360813 Contact Number

REGINEPSC@GMAIL.COM **EMail Address**

Address

BLK 21 HOLLAND DRIVE #22-415 SINGAPORE 271021

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

4

Passenger 1

NAME:

: PHIL VIET PHAM

GENDER:

: MALE

: MALE

Passenger 2

NAME: GENDER: : CHRIS

Passenger 3

NAME:

; KARA PHAN

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

BUONA VISTA NPP

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20180320/2184. ON 20/03/2018 @ 0805 HRS, I WAS DRIVING ALONG NORTH BUONA VISTA ROAD TOWARDS AYE WHEN I REACHED NEAR TO CIVIL SERVICE COLLEGE, MY CAR WAS STATIONARY AS I WAS WAITING FOR THE TRAFFIC LIGHTS TO TURN GREEN. AT THIS MOMENT, THERE WAS A BIKE RIDING ON MY LEFT SIDE OF MY VEHICLE TRAVELLING AT QUITE FAST SPEED. THE 1ST BIKE OVERTOOK MY VEHICLE ON THE LEFT FOLLOWED BY THE SECOND BIKE WHICH ALSO TRIED TO DO SAME THING BUT DIDN'T MANAGE TO OVERTAKE MY VEHICLE. THE MOTORBIKE THEN HIT MY VEHICLE LEFT SIDE FRONT PORTION OF THE VEHICLE THAT CAUSED A DENT AND SOME SCRATCHES TO IT. HE THEN PICKED UP HIS MOTORBIKE FBB 7687M AND WHEN HE SAW THE 3RD BIKE CAME, HE THEN SIGNALED THE 3RD BIKE TO CHASE THE FIRST BIKE AS HE THINK THAT THE FIRST BIKE MIGHT HAVE CAUSED HIM TO FALL. SUBSEQUENTLY, THE 2ND BIKE WHICH FELL, HAD ALSO PICKED UP HIS BIKE AND GIVE CHASE TO THE 1ST AND 3RD BIKE. I MANAGED TO TAKE PICTURES OF THE 2ND BIKE WHO KNOCKED ONTO MY VEHICLE.

Attachment(s)

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

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

FBB7687M

HONDA/CB400/RED

MOTORCYCLE

UNKNOWN RIDER

SKETCHFLAN

IMPORTANT NOTICE

1.

- Please report correctly me details of the account to speed up the claims process.
 This Form must be completed by the Policyholder and/or the Authroised Driver.

- 2. This Form must be completed by the Policyholder and/or the Authroised Driver.
 3. Information provided must be as truthful and accurate as possible. Any wiful misrepresentation or withholding of material faces may allow miscratic completes to reputate policy liability.
 4. The sales and adoption of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
 5. Any takes reporting may be referred to the Police for investigation.
 6. The record will be insuranced by the insurance of this insurance Association of Singapore (GuA) for arthriving and may books of this report will for a few be made available application by informated patries.
 7. By the odgement of this record to the insurance, you hereby consent to the archiving of this report at the centre and to copies of the report being made available application and to copies of the report being made available attributed.
- 5. Consert under the Personal Data Protection Act (PDPA)

I understand acknowledge, agree and consent that

(a) My insure: my workshop and the General Insurance Association of Singapore ("GIA") may are permitted to collect, use, disclose analysis.

(b) Insure: my workshop and the General Insurance Association of Singapore ("GIA") may are permitted to collect, use, disclose analysis. process my dersonal data personal information set out in this [form] and any other personal information provided by me or possessed by present information or personal information to all insurers) who have insured vehicles; involved in this accordent part formation and decrease and transfer such Personal information to all insurers) who have insured vehicles; involved in this accordent shall be collectively referred to as the financial information are presented by the results. The results awayers law time the Monetany Authority of Singapore and any relevant government agencylauthority (such as

- processing handling ansior dealing with my claims including the sedienent of the claims and any necessary investigations relating to

- The carries

 (ii) mestigating the account ansion my claims

 (iii) carrying out and/or dealing with my instructions or responding to any enguines by me.

 (iv) administrating my claims (including the making of correspondence, statements, incloses, reports or notices to me, which could involved account of cartain personal care about me to bring about delivery of the serve as wed as on the external cover of envelopes/ittalians.
- (x) complying with applicable low in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all microstry for increases (in the process) overlied in this accident and the insurers lawyers have firms, may are permitted to collect, use decides and/or process my Personal information for one or more of the above Purposes, and (c) my Personal information may can be decided by any of the insurers and/or GIA to their third party service providers or agents (regulating their lawyers have firms), which may be stad outside of Singapore, for one or more of the above Purposes.

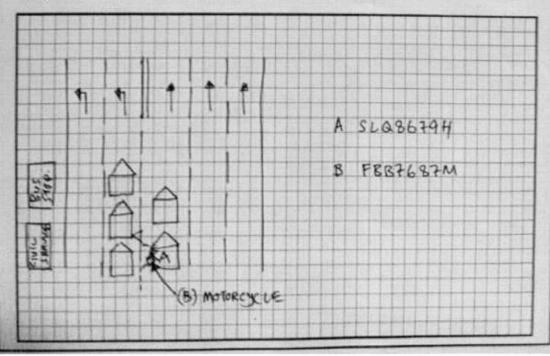
B 21/3/13

Policyhodeck Signature / Date & Time Druer's Signature (if driver a not the policyhoder) / Date & Time Witnessed by Reporting Centre

VERIFIED BY AJAX MARS REPORTING OFFICER

Mond Azaly Sin Abdullah

Sketch Plan



T & B MOTOR REPAIRS SERVICES PTE LTD

160 SIN MING DRIVE #08-03 SIN MING AUTOCITY SINGAPORE 575722

Tel No.: 6458 0296 / 6454 8007 Fax No.: 6554 2640

E-Mail: tbmotor@hotmail.sg Buss. Reg. No.: 199001597D

WITHOUT PREJUDICE

PANG SZE CHEW BLK 21 HOLLAND DRIVE #22-415 SINGAPORE 271021

Attention: Motor Claim Department

Estimate: ES003308

Date: 21/03/2018

Vehicle Num. : SLQ8679H Make/Model : TOYOTA ESTIMA AERAS

Chassis/Eng#:

Accident Date: 20/03/2018

Claim No.: Reference:

Policy No.: DMPC17S014292

S/N	Quantity	Particular	Unit Price	Am	ount S\$	
1. 2. 3. 4. 5.	1 1 1 12 1	LIST ITEMS: FRONT BUMPER FRONT BUMPER SIDE RETAINER LH FRONT BUMPER SIDE RETAINER RH FRONT BUMPER CLIPS REAR FENDER SIDE ARC GARNISH List Total S\$: 25.00% Discount S\$:	5.50		,413.12 91.89 91.89 66.00 348.12 2,011.02 502.76	}
				1,	,508.26	
		LABOUR: 1. CHECK & REPAIR WIRING 2. SPRAY PAINTING ON AFFECTED PORTIONS 3. LABOUR CHARGE FOR REPAIRING AD MISTING KNOCKING	19	Na	60,00 580.00	x 2501
		3. LABOUR CHARGE FOR REPAIRING, ADJUSTING, KNOCKING, WELDING THE DAMAGED PARTS, STRAIGHTEN THE ABOVE		v	380.00	X
		Labour Total S\$:		1,	,020.00	

SingDollars: Two Thousand Five Hundred Twenty-Eight & Cents Twenty-Six Only

E. & O.E.

Total S\$:

2,528.26 ========

for T & B MOTOR REPAIRS SERVICES PTE LTD

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:



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

AUTOMOTIVE ENGINEERING & MGT DIVISION

Ref : CS/SPF18005750/Kvbe2

ACCIDENT CLAIM SECTION (SINGAPORE POLICE FORCE)

Date: 10-05-2018



MC	OUNT PLEASANT	ROAD	Date: 10-05-2018	
LK	8 OLD POLICE AC	ADEMYSINGAPORE 298	3333 Code: SPF	
		Policy Particu	lars :- THIRD PARTY CLAI	M
	Insured Veh.	FBB 7687M	Veh. Inspected	SLQ 8679H
	Policy No.		Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From	SHIRLENE YEO	Assign Date	28/03/2018
2.	Charles Link	Vehicle F	Particulars & Condition	
	Make & Model	TOYOTA ESTIMA (A)	c.c	2362
	Engine No.	HIDDEN	Year of Reg.	2017
	Chassis No.	ACR507133718	Colour	METALLIC BLACK
	Odometer	5932	Steering	IN ORDER
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
	General	GOOD		
3.		Co	onditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	225/50 R18	DUNLOP	9 mm
	L/H Front Tyre	225/50 R18	DUNLOP	9 mm
	R/H Rear Tyre	225/50 R18	DUNLOP	9 mm
	L/H Rear Tyre	225/50 R18	DUNLOP	9 mm
4.			cription of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT TH	HE N/S FRONT PORTION.	
	DAMAGES SEE D	ETAILS.		
5.		G	eneral Information	
	Accident Date	20/03/2018	Inspection Date	28/03/2018
	Survey held at	160 SIN MING DRIVE #08	3-03	
	Repairer	T & B MOTOR REPAIRS	SERVICES PTE LTD	
5a.			Remarks	
	A)THE INSPECTI	ON WAS CONDUCTED ON	A"WITHOUT PREJUDICE" BA ONS, WE HAVE NOT AUTHOR	ISIS. ISED REPAIRS.
5b.			imate Days of Repair	
OD.		RMAL PERIOD FOR REPAIR	?: 1 Working Da	ays



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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLQ 8679H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	TO REPAIR SEE LABOUR	1,413.12	187
1	FRONT BUMPER SIDE RETAINER LH	SERVICEABLE	91.89	19
1	FRONT BUMPER SIDE RETAINER RH	SERVICEABLE	91.89	
12	FRONT BUMPER CLIPS @\$5.50	NOT NECESSARY	66.00	
1	REAR FENDER SIDE ARC GARNISH	SERVICEABLE	348.12	
	LESS 25% DISCOUNT		-502.76	15
			1,508.26	
	LABOUR			
	CHECK & REPAIR WIRING.	NOT NECESSARY	60.00	
	SPRAY PAINTING ON AFFECTED PORTIONS.		580.00	250.00
	LABOUR CHARGE FOR REPAIRING,ADJUSTING,KNOCKING, WELDING THE DAMAGED PARTS,STRAIGHTEN THE ABOVE.	NOT NECESSARY	380.00	1,5
			1,020.00	250.00
	GRAND TOTAL		2,528.26	250.00

RECOMMENDED COST OF REPAIRS	250.00
-----------------------------	--------

Report Ref No. CS/SPF18005750/Kvbe2

KONG SENG CHEONG

Licensed Appraiser

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