4SS. REC. BY:		REF: CS /ASM	118008659/Kr	ber Special lins	truction:	
sman dam	Kenruh.	ASSIGN	MENT (Office)			
From (Person)	Kitty TRO	of	Asm	Date/	Time: 11.052018	9.19am
Estimated Cos	t:		Bill to:			
To Inspect Ve	STTP RESTOD RE	CHIOS TES		Insured:		
at Workshop i	n/sA	h Lim Molu		Tel:	6483 1244	
of	SIK	10 AMK Ind	Park 2A #0			
Policy No:				SOMOFCY		
Sum Insured:				\$400.00		
Make of Veh: (Client's Record				D.O.A	24042018	
CA / ICE	REP. / REV 24 H				D. Endorsement:	
Date/Time:	11.052018 9316	M_ Person Contacte	ed: Zila	Vehicle	IN OUT	
Date/Time	Action/Instruction	(1) Estim	ate			
	STT SOIL TE	6/AXA 130126			DIA: 1017713	
	Revert Ham	Smurt claim				
14/5/18		case under in	vestigation			
81/11/12	2ila said th	e vehicle 15	already to	oved out.		

		3501	CAMENI	20 22		
rom.	Date	11.052018	Veh No:	SJT 8014	J Yr Regn	00
stimated Cost.			Type M.Car J.	A.Cycle / Bus / Van /	Lorry / Taxi / Prime Mov	/er/
OV TP / WS / TP RES	OD RES / EVA / INV / I	MV	Truck /	Trailer or		
Inspect Vehicle No:	^	30147	Make:	Pensed	207 00	13,
Workshop m/s	An Lim	Myr	Colour	Red		Std / NI / NA
Tronsomp IIII	Blk 10 AMK	0 1 0	Sp.Reading	_	T/Radio Insured /	Std / NI / NA
sured	ork to may	#01-09	Eng/No:			181
olicy No.				VF 3WCK	KFUC 9WG	07360
laims No.				ood Fair, Poor / Bur		
um Insured	Excess	\$ 1400.000		er / Jammed / Leake		
(Client's Record)	EX0633.	4 400	-	er / Jammed / Leake		
ake of Veh.				S/Rim / STD A/Rim		
and of vert			Tyre Size:	F:	185/65R.	
Application of the second		KI ST	yie size	R:	763/	2
(Policy Condition)	commoneed its	N/S O/S	DE LEVILLE		A / MIC / OHTSU / PIR /	SUMU
Remark: The veh had c repair at the t	ime of inspection.	VIII 013	TOYO / YOK		A / MIG / OH I SU / PIR /	SOM17
	8 19,000			0 01	Poor	
al, or Market Value:	-	Vac or No	Front R/Bal.	7	Rear R/Bal	6
AC Accident Rport:	Consistent?:		The second	5 mm	L/Bal	4
IA / PR Seen:	Consistent?:			14/4/18		15118
st. Repairs:		Yes or No		7 110 20 10 10 10	0.0.1. 77	13110
um Sum:	% 3 Val.:	Yes or No	Survey held at			
A / REY / REP.	1 24 HRS		Des. of Damag	ges: Frt / Rear / O/	S / N/S / U/C / Rooft	op or
Date:	Person Contacted	Vehicle: IN / OUT	The IUC I		ody Structure affected of	lue to collision
	n / Instruction		The U/C /	A CONTRACTOR OF THE PARTY OF TH	ouy offucture anostes o	uc to sometor
14/5 Kul Submit mv: \$	Extensive . f. 19,000.00 ,1	otal loss 27A \$ 11,331.02	> , NV : \$ T	1669.00		
		RE	CEIVED	9 NOV 2018		
Date/Time_File Pass to?	: Preli. Repor	t	Days Of Rep	air:		
Lypist	: Final Repor	t	Resurvey No	. of Trip: -	Survey Fee.	200
late/Time. File Return to?				(\$	Transportation	
		Add Fee		13p (\$)S+RSSI	
4	C.	•	-	EW (\$) Photos	
Report Format :	OD		_	Invs (\$) Others	
ump Sum / I.B.I: ((3 -		Week	end 1\$		
					TOTAL	200

Menu



Service Request Details

Claim

S8M00FCY

Reference

None 🔊

Loss Date

April 24, 2018

Request Date

May 11, 2018

Due Date

May 18, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (OD)

Type of Loss

Own Damage

Services

Accelerated workshop survey

Actions			
Next Step Agree to perform service			
	Decline Work	Accept Work	

Vehicle Information

Incident Vehicle Registration # SJT8014J

Make

PEUGEOT

Menu

Service Address

10 Ang Mo Kio Ind. Park 2A, , , 568047

Primary Contact/Insured

KWANG OMAR OSMAN BLK 103 #04-1457, ANG MO KIO AVE 3, 560103, Singapore 62205051 CONTACTUS@INSMART.SG

Claim Handler

TEO Kitty 6568804602 kitty.teo@axa.com.sg

Additional Instructions

EXCESS \$400

Messages Invoices History Documents Assessment Metrics Notes

New Message



Immediate Advice

To: AXA Insurance Pte Ltd

Survey details

Date of loss	24.04.2018	
Date of appointment	11.05.2018	
Date of survey	11.05.2018	
Location of survey	AH LIM MOTOR COMPANY	

Vehicle Details:

Claim Type:	Own Damage	
Vehicle number	SJT 8014J	
Make and Model	PEUGEOT 207 1.4 2 TRONIC SPORT	
Date of registration	30-Oct-09	
Excess	\$400.00	
Market Value	\$19,000.00	
Parf Rebate	\$11,331.00	
Nett Loss	\$7,669.00	

Repair details

Initial Estimate	Total Loss	

Proposed/Revised repair cost:

Parts	Total Loss
Labour	
Total	
Lump Sum(if applicable)	

A CONTRACTOR OF THE CONTRACTOR	
Number of days of repair	0

Remarks:

The vehicle sustained damages at the front portion and n/s body.
The undercarriage and body structure affected due to collision.

We have not authorise repair.

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 4142A

Vehicle Details

Vehicle No.: SJT8014J

Vehicle to be Exported: No

Intended De-registration Date: 10 May 2018

Vehicle Make: PEUGEOT

Vehicle Model: 207 1.4 2 TRONIC SPORT

Primary Colour: Red Manufacturing Year: 2009

Engine No.: 10FE040537445

Chassis No.: VF3WCKFUC9W073603

Maximum Power Output: 65.0 kW (87 bhp)

\$15,560.00 Open Market Value:

Original Registration Date: 30 Oct 2009 First Registration Date: 30 Oct 2009

Transfer Count: 4

Actual ARF Paid: \$15,560.00

Intended PARF Rebate Details

PARF Eligibility: Yes

29 Oct 2019 PARF Eligibility Expiry Date:

PARF Rebate Amount: \$8,558.00

Intended COE Rebate Details

COE Expiry Date: 29 Oct 2019

COE Category: E - Open Category

COE Period(Years): 10

OP Paid: \$19,901.00 COE Rebate Amount: \$2,773.00 Total Rebate Amount: \$11.331.00

The information contained herein is correct as at 10 May 2018

MV - \$ 19 1C

OK

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 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.

By the lodgement of this report to the insurers, you hereby consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	10/05/2018 11:54
Date Of Accident	24/04/2018 16:45
Exact Location Of Accident	BALMORAL RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJT8014J
Insured/Policyholder	
Name Of Registered Owner	OMAR OSMAN KWANG
NRIC No	S0384142A
Email Address	OMARKWANG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97393909
Alternative Phone No	OTHERS-97393909
Vehicle Particulars	
Manufacturer	PEUGEOT
Model	207-1.4 2-TRONIC SPORT (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA094432
Cayor Note Number	20/04/2049 20/04/2040

Cover Note Number 30/04/2018 - 29/04/2019

Driver

Name of Driver OMAR OSMAN KWANG

NRIC No S0384142A Date Of Birth 01/04/1947 Occupation **INDOOR** Date Of Driving Pass 18/03/1986

Driving Experience 32 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97393909

Fax Number

Contact Number OTHERS-97393909

EMail Address OMARKWANG@GMAIL.COM Address BLK 103 ANG MO KIO AVE 3

#04-1457

Postcode 560103

Was driver an employee of the Insured's Company NC

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Incurance Company of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLIDED INTO PROPERTY

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? YES

Was any injured conveyed to hospital by

ambulance?

YES

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes.Please state which Police Station

ii res,i lease state willeit i olice c

Police Station Name ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)

NO

YES

Police Station Address ROAD: 51 ANG MO KIO AVENUE 9, POSTCODE: 569929, COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 1800-2180000 - FAX NO: 64814246

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

WITH TRAFFIC POLICE

Remarks/ Reasons:

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBC7534R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

DETAILS OF INJURED PERSON 1

Name

OMAR OSMAN KWANG

Approximate Age

Injuries Sustain

RIGHT HAND, EXPLOROTANY LAPAROTOMY, SMALL BOWEL

RESECTION

Injured person in which vehicle?

SJT8014J

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

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

7

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Selfter er onnel's Signature

NRIC/FIN No.:

/ Vehicle A: Sull Voci	14J Vehicle B: GBC7531	ion: Balmoral Pd YR Vehicle C: —
Vehicle A: STT 60	venicle B. Wisc 27	veriicie C:
		1014
		water
	> 1>	
LA D-		
	<u> </u>	
CRIBE CIRCUMSTANCE	S OF THE ACCIDENT	
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	and the selection	
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Claim OD) TP at Ah	Lim Motor	er workshop Reporting Only
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emarks: Please forwar ly workshop: mail address: myself: 6Mar mail address: mocho ote: Please take note to ou own policy. Kindly co	d a copy of my efile accident report to: Ewang Qquail.com 2. jcan Qquail.com hat your insurer have 14 days timeframe for heck with your own insurer for more infor	or you to submit own damage claim under
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emarks: Please forwar My workshop: mail address: myself: 6Mar mail address: moch lote: Please take note to ou own policy. Kindly cl	d a copy of my efile accident report to: Ewang Qquail.com 2. jcan Qquail.com hat your insurer have 14 days timeframe for heck with your own insurer for more infor	or you to submit own damage claim under
Remarks: Please forwar My workshop: Imail address:	d a copy of my efile accident report to: Ewang @gmail.com a. jcan@gmail.com hat your insurer have 14 days timeframe for heck with your own insurer for more inforticulars are true in every respect.	or you to submit own damage claim under mation.
Remarks: Please forwar My workshop: Imail address: Imail address: Mar Imail address: Mocho Note: Please take note to the coulown policy. Kindly co	d a copy of my efile accident report to: Ewang Qquail.com 2. jcan Qquail.com hat your insurer have 14 days timeframe for heck with your own insurer for more infor	or you to submit own damage claim under

A'H LIM MOTOR COMPANY





1 of 3

Report No. F/20180508/7041

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Police Divisional HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No:1800-2180000

	oort No.		Station Diary No.
Address			
APT BLK 103 ANG MO KIO A		MO KIO AVENUE	3 #04-1457
SINGAP	ORE 56010	03	
Contact	No.		
Home/O	ffice:	Mobile: 97393909	93235524
Email Address			
omarkwang@gmail.com			
Sex	Age	Date of Birth	Race
Male	71	01/04/1947	Malay
Language English			
Location Of Incident			
BALMORAL ROAD NIL SINGAPORE 259797		259797	
	APT BLE SINGAP Contact Home/O Email Ad omarkwa Sex Male Languag English Location	APT BLK 103 ANG SINGAPORE 56010 Contact No. Home/Office: Email Address omarkwang@gmail. Sex Age Male 71 Language English Location Of Incident	APT BLK 103 ANG MO KIO AVENUE SINGAPORE 560103 Contact No. Home/Office: Mobile: 97393909 Email Address omarkwang@gmail.com Sex Age Date of Birth Male 71 01/04/1947 Language English Location Of Incident

24th April, Tuesday

Around 4:45PM

I was on the way to pick my grandson up from school at the Forum Shopping Mall.

I would normally arrive around 5pm.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/05/2018 12:10
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp





2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180508/7041

I could only remember, along Balmoral Road, there was a lorry in front hogging the traffic.

I moved to the right slightly, to try and see what was in front of the lorry that was hogging the traffic.

After this point, I cannot recall anything further.

The next thing I knew, I was already carried out of the car and laid on the grass verge.

There was a lady who helped me to retrieve my phone and pouch, and also helped me to call home.

I was unable to recall the number of people who helped me, except for that lady.

That is all.

Subjects Involve	d			
Victim				
Person Name	me OMAR OSMAN KWANG			
ID Type	NRIC NO	ID No	S0384142A	
Gender	Male	Age	71	
Race	Malay	Language	English	
Occupation	Retiree	Address Type		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 08/05/2018 12:10		
Officer In-Charge Of Case:	Classification Of Case:		
TO SECURE OF THE PERSON			

Authentication Stamp





3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180508/7041

Address	APT BLK 103 ANG MO KIO AVENUE 3 #04-1457 SINGAPORE 560103	Mobile No	97393909	
Is Informant A Victim?	Yes			
Person Name	OMAR OSMAN KWANG (Info	rmant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 08/05/2018 12:10		
Officer In-Charge Of Case:	Classification Of Case:		

Authentication Stamp

68427855



OMAR OSMAN KWANG 103 404-1457 ANG MO KIO AVENUE 3

SINGAPORE 560103

redefining / insurance



AXA Insurance Singapore Pte Ltd 2 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 5880 4740 acustomer.core@axa.com.sg R www.axa.com.sg

New business

10/03/2016

your servicing distributor INSMART (INSURANCE) AGENCY PTE LTD / 08198

your servicing distributor contact 6842 0766

Policy Schedule

Your SmartDrive Comprehensive EssentialPlus

Your policy snapshot

Policyholder name Ported of Incurance

Cover

OMAR OSMAN KWANG

Policy number Comprehensive FIN / NRIC

VA1 / GA094432 503841424

Websites 200 American

from 10/03/2016 to 29/04/2017 (both dates inclusive)

30/04/2015-29/04/19

Premium breakdown's

Gross Premium after 50% NCD

Total Discounts 7% GST Final Premium

SGD 900,96 SGD 134.63 SGD 53.67 SGD 820.00

Your benefits highlights

- Legal Liability
- 24/7 Towing & Transportation in Singapore or Overseas
- Whosereen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- Dally Transport Allowance of \$100 for a maximum of 10 days
- Guaranteed Repairs for twelve (12) Months
- Delivery of Repaired Car
- Modical and sental expenses up to \$1,000 per person for you, your named drivers and your immediate family members
- Car Protector

Address Betterfits

Personal accident benefit of up to \$50000 for you and your named drivers

Vehicle detalls

Make & Model of Vehicle Vohicle registration number

Body type Seating capacity (excl driver) Off-Peak car

PEUGEOT 207 1.4 SJT8014J

HATCHB No

10年1月2日,北京社会大学发展了1980年 Year of manufacture Type of Use

Engine capacity (c.c.) Engine number Chassis number

2009 Private use 1360

10FE040537445 VF3WCKFUC9W073603

Insured's Estimated Market Value Limitation to use Finance Loan Company

Market Value at the time of Loss (including accessories and spare parts) As per Certificate of Insurance

MAYBANK

Excess applicable (refer to Pollcy Wording for other applicable Excesses)

Hasio Own Damage Excess Windscreen Excess

SGD 400.00 BED. SGD 100.00

AXA Insurance Singapore Pte Ltd (M2-0009922-2) 8 Shenton Way, #27-01. AXA Tower, Singapore 068811 Customer Care Department, #B1-01

1 of 2

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S0384142A



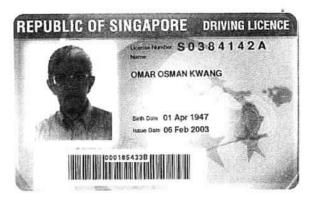
4111



OMAR OSMAN KWANG

عمر عسسال کوان همد MALAY (هاد of Sm) کوه (ماد O1-04-1947 M

SINGAPORE



D/C 14,44y - PH, Camera - 1P 1pc.

exploration, laparotorny, small borel resertion-



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

18 Mar 1986

NP 428A

Licence No: S0384142A

LBS AUTOMOTIVE APPRAISAL PTE LTD

Company Registration Number 201408536E

Correspondence Address: Block 8 Kensington Park Drive #01-07 Kensington Park Singapore 557323

Telephone: 65-62816690 Facsimile: 65-62818748

30 April, 2018

KWANG OMAR OSMAN BLK 103 #04-1457, ANG MO KIO AVE 3, 560103, Singapore

Dear Sir.

OUR REF

: S8MOOFCY

YOUR REF

: SJT8014J

ACCIDENT INVOLVING SJT8014J & GBC7534R ALONG BALMORAL TOWARDS STEVEN ROAD ON 24.04.2018

We write to inform you that we are the appointed loss adjuster by your motor insurer, AXA insurance Singapore Pte Ltd to deal with the third party claim against your motor policy.

We refer to the above subject matter. We have received third party claim(s) against your motor insurance policy.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We highlight that this accident has not been reported to your insurer. Under the Motor Claims Framework (MCF), you are required to report any accident with the accident vehicle (whether damaged or not) within 24 hours or by the next working day after the accident. The primary purpose of this reporting is to provide your version of the accident to AXA. Omission to report the accident will result in a loss of your No Claim Discount (NCD) upon renewal of your policy, and will prejudice any claim(s) by or against you. We would appreciate it if you could urgently file a report at the approved reporting centre.

The report has to be lodged at any of AXA Premium Workshops or reporting centres (subject to your policy). For the list of AXA Premium Workshops conveniently located throughout Singapore, please refer to the back of your Certificate of Insurance or the accompanying folder, or visit https://www.axa.com.sg/customer-care/personal/motor/owndamageaccidentreporting.

Your full co-operation is required. Kindly submit the following when lodging the report which list is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- · Driver's driving license or foreign driving license (if any)
- · Coloured photographs of accident scene (if any)
- · Coloured photographs of damage to all vehicles involved (If any)
- · Video footage of accident (if any)
- · Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without your insurer's prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to them immediately. You may email it to cst@axa.com.sg or deliver it by hand to AXA Insurance Singapore Pte

You should also IMMEDIATELY forward to your insurer by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition, your insurer shall have full discretion in the process and settlement of the said third party claim subject to the merits of the case and according to the rights afforded under the policy.

Your NCD (No Claim Discount) will be reduced by 30% (20% for motorcycle/ commercial vehicles) if a claim is made under your policy.

To enable your insurer to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, your insurer reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact us at 62816690 if you have any further enquiries.

Yours sincerely,

This is a computer generated letter and no signature is required.

AKA	redefining / insurance
Date: _	oglor118
To: Owi	ner of Vehicle Number: \$57 &0145
	owing has been advised to you via your workshop, Ah Lim Motor Company through their Lila Eileen / Mui Hong.
Please t	tick the applicable box if you had been advice on the content as seen below:
1	You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
()	You had been advised by the workshop on the liability and merits of the case accordingly.
1	You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
1	There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
()	There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
1	The estimated waiting time for the spare parts to arrive is TBA The estimated arrival time does not include the repair period.
()	You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
V	For vehicles below Three (3) years old, your insurance Company will use only genuine original parts to repair your vehicle.
	For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using <i>any combination</i> of genuine original parts and/or original equipment manufacturer (OEM) parts.
()	You had been advised by the workshop of the Twelve (12) months warranty for $\underline{\text{Own Damage}}$ repairs on workmanship related to the accident.
()	For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
M	Others Claim own range
Signed	and acknowledge by:
Name a	and signature of policyholder/authorised driver
Name a	and signature of varishop personnel including company stamp

AH LIM MOTOR COMPANY

No. 10, Ang Mo Kio Industrial Park 2A #01-09 AMK Autopoint Singapore 568047 Tel: 6483 1244 Fax: 64836170 GST Reg No: M9-0007732-A

Your Ref:

Date: 10/05/2018

Our Ref:

VEHICLE NO. SJT8014J

MODEL: PEUGEOT 207 1.4 2 TRONIC SPORT

SURVEYOR COPY

M/S AXA INSURANCE (S) PTE LTD 143, CECIL STREET #01-01, GB BUILDING SINGAPORE 069542

IKK

11/5/19 Ex & GOOD
WHE TILOS,

Attention: - Motor Claims Department Own Damage

Dear Sirs

Accident involving Your insured Vehicle No. SJT8014J accident on 24/04/2018

We refer to the above matter

Vehicle sustained extensive damage and car was registered in 30/10/2009.

We are not putting up the estimate for the time being and kindly arrange for survey soonest possible. After the survey if there is a need, we will furnish the estimate accordingly.

Thank You.

Yours faithfully,

Zila Ah Lim Motor Company

LKK Auto Consultants hence notify the Repairer of owing: . To resurvey before/ama spray painting • To display damage: art a during resurvey Parts prices are s pest to confirmation Third party survey is a "Without Prejudice" basis No illegal mour amon(s) is allowed Supplementary (s) surveyed and is subject to final arc. ansur. see Company Acknowledged by Repairer Signature: Date:



51 UBI AVE 1, #01/02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 6256 3561 FAX: (065) 6256 4315

Your Ref : S8M00FCY

Date: 05th Dec 2018

Our Ref

: CS/ASM18008659/Krbe2

M/s Axa Insurance Pte Ltd

8 Shenton Way #24-01 Axa Tower Singapore 068811 (The Motor Claims Department)

Attn: Kitty Teo

Dear Sirs/Madam,

AUTOMOBILE INSPECTION REPORT OF ACCIDENT VEHICLE SJT 8014J ACCIDENT ON 24/04/2018

Instruction was received to inspect the vehicle Reg. No. SJT 8014J. The inspection was conducted on 11/05/2018 at the premises of M/s Ah Lim Motor Co, No 10 Ang Mo Kio Ind Pk 2A, #01-09 AMK Autopoint, Singapore 568047.

The following vehicle information was recorded:

Registration Number

: SJT 8014J

Make/Model

: Peugeot 207 1.4 2 Tronic Sport

Year of Registration

: 2009

Body Colour

: Red

Chassis Number

: VF3WCKFUC9W073603

Engine Capacity

: 1360 cc

The Vehicle Sustained Damages At The N/S Body And Front Portion. The Undercarriage And Body Structure Affected Due To Collision. (Details see photographs enclosed)



51 UBI AVE 1, #01/02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 6256 3561 FAX: (065) 6256 4315

In view of this, we are of the opinion that it would be **uneconomical** to proceed with the repairs due to extensive repair cost and recommend it to be written off as "**Total Loss**".

Market Value	S\$	19,000.00
Less: LTA Reimbursement Value (RV)	(S\$	11,331.00)
NEWSTER HER	O.O.	7.660.00

Nett Liability S\$ 7,669.00

Vehicle Inspected By:

KONG SENG CHEONG

Licensed Appraiser

K.K.LAU

MSc(Eng M), B Eng(Hons), Peng(UK), MASME(USA), B Bus(Aust),MBA(UK), IEng(UK), MIIE(mech), MinstAEA, MFIEA, MIRTE,MIMI,MSAE,MCIArd, AM,NIJAAR(USA), AM CATARI(CAN),M.MATA(USA),M.MdATA(USA), Licensed Appraiser

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