ASS, REC. B  SUPPLYOF  From (Person  Estimated Co	Bryan Eilien Lie	ASSIGNMENT (OTHER	e)	17105 180 5:40 pr
To Inspect V at Workshop of	sst 17 RES / OD RES / EV / Schicle No: SG m/s Lim Ho Sin Ming Drive	4 33 9 0 K Tan Motor # 03-09		452 0893
Policy No: Sum Insured Make of Veh (Client's Recor CA / REV Date/Time: 5		Excess	D.O.A	13/05/2018
) Date/Time	Action/Instruction (  3GU 3340 K - a	) Estimate C6 (A×A 1102 1571) LINCO 9 0 1 2 1 9 6 / Y	Khdc 1	D. 0.A: 15/10/2011 DOA: 29/15/2019

riverity is	1.0
A551	(OE April 2022
From: Date	WHITE SGUBBOOK WREED 2007 May
Estimated Ozea	Type: M.Co / M. Sycle / Bus / Van / Corry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To inspect Vehicle No.	Make Toyota Viss 1497
at Workshop mis-	Colour Black A/C Insured / Std / NI / NA
of a	Str Fleading 261515 T/Radio Insured / Std / NI / NA
Insumal	Eng/No 1HZX 520640
Policy No.	MRU53HY 4204217940
Claims No.	Gen. Cond. (A) / Fair / Poor / Burnt
Sum Insured Excess	Steering Inder / Jammed / Leaked / Burnt or
(Client's Record)	Brake In Ger / Jammed / Leaked / Burnt or
Make of Veh.	Modi Nil / SRm / STD A/Rim or
	Tyre Size: F: 185 65 7.14
(Policy Condition)	R:
Remark: The veh had commenced its N/S 0/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO OF Ling Long
Bal, or Market Value:	Front Rear
IDAC Accident Rport Consistent? Yes or No	R/Bal \$ mm R/Bal \$ mm
GIA / PR Seen. Consistent? Yes or No	L/Bal \$ mm L/Bal \$ mm
Est Repairs 5 days Res. Yes or No	D.O.A 13  05  2018
Lum Sum. 20 % 3 Val. Yes or No	Survey held at Lim Ton Ank
CA / REV / REP. / 24 HRS	Des. of Damages Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle IN / OUT	Re~ 1,74
Date Person Contacted .	The U/C / Chassis frame / Body Structure affected due to collision.
Pirst Cap SHC 8438H	
11121 127 112 04384	
MV 25K	
LTA 19.7K	
19/4/18 Jum 1/5 3600/- with	6 day 2 1/2 ~:
19/4/18 Jum 1/5 3600/- with cred: 2/2	97/279)
RECEIVED 2 0	
D. Half Time, File Pass 107 : Preli. Report	Days Of Repair: 5
DON (UPIET Final Report	Resurvey No. of Trip: Survey Fee 40
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MS First Capital Insurance Limited co.Reg. No. 195000106C GST Reg. No. MZ-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

#### MOTOR SURVEY ASSIGNMENT

Date

15-05-2018

Our Ref No. D18003869MFSH

Accident Date

13-05-2018

Claim Type. Third Party

Insured Vehicle

SHC8438H

Third Party Vehicle. SGU3390K

**Survey Location** 

BLK 176 SIN MING DRIVE #03-09/10/06 SIN MING AUTOCARE

Contact Person.

MANDY LIM

Contact No.

64520893/64520893

Fax No. 64589127

Survey Type

DIRECT SETTLEMENT:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

#### FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

# THIRD PARTY SURVEY REQUEST

Cc: Workshop

LIM TAN MOTOR PTE

Attention, NIL

Cc: TP Solicitor

LTD NA

TP Solicitor Fax No. NA

Officer Incharge

EILEEN LEE

### IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.



Job Sheet (/0	ClaimWS/Surveyor/JobSheet/	240342) 🕌 PF	RI Documents 🕙 Close 🗶					
			PRI Header Details					
Claim No	D18003869MFSH	Policy No	D-18088936MFSH	Claimant S.No & Name	1 & LIM TAN I			
Workshop Name	LIM TAN MOTOR PTE LTD (Contact Person : MANDY LIM)	Survey Location & Contact Details	BLK 176 SIN MING DRIVE # Mobile: 64520893 , Phone EmailId: MANDY@LTM.SG					
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	DIRECT SETTLEMENT:					
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC8438H	TP Vehicle No	SGU3390K			
PRI Recieved Date	16-05-2018 07:15:30 PM	Surveyor Appointed Date	17-05-2018 05:39:44 PM	Surveyor Accept Date	17-05-2018 0			
		is a	Survey Report Upload	·				
Surveyor Inspection Date *:	MIN.	Surveyor Report Date	17-05-2018	Upload Survey Report *:	Choose File			
			Vehicle Particulars					
Make	Please Select Make ▼	Model	Please Select Model ▼	Year	Select Year			
Chasis No		Engine No		Mileage				
Color		Cubic Capacity						
Multiple Documents Upload								
		Upload Multiple	Documents					
File Nam	File Name							
Surveyor J	ob Remarks				N			
Remarks				Save				



# Denise Tay (LKKAuto)

From:

Denise Tay (LKKAuto)

Sent:

Wednesday, 23 May 2018 2:21 PM

To:

Admin-D (LKKAuto); 'Claim Workflow System'; assignments

Cc:

EILEENLEE@MSFIRSTCAPITAL.COM.SG; SUR RE: SURVEY ASSESSMENT - D18003869MFSH/1

Subject:

PRELI ADVISED SGU 3390K.pdf

Dear Sir/Madam,

Attachments:

Enclosed preliminary revised of vehicle SGU 3390K

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

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

From: Admin-D (LKKAuto)

Sent: Thursday, 17 May 2018 5:44 PM

To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: EILEENLEE@MSFIRSTCAPITAL.COM.SG; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D18003869MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

BEST REGARDS,

G.Nivitha | Admin

#### LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Claim Workflow System [mailto:cwsmotorclaims@msfirstcapital.com.sg]

Sent: Thursday, 17 May 2018 5:39 PM To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; EILEENLEE@MSFIRSTCAPITAL.COM.SG

Subject: PRI: SURVEY ASSESSMENT - D18003869MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey. Kindly submit your report via CWS within the next 14 days.

Best Regards, Admin Team Claim Workflow System

THE PERSON NAMED IN SOME	Olho				(9 ( <sub>b</sub> )		5) Frell. Report: Final Report:
vey Fee: Date:	2,70	Part Prices Che			(2)		1
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REF:



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Your Ref: D18003869MFSH

Date: 23/5/2018

Our Ref: CS/FCI18009054/Dtd3

The Motor Claims Department First Capital Insurance Ltd

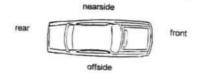
Dear Sir/Madam,

# INITIAL INSPECTION REPORT OF VEHICLE NO. SGU 3390K.

Please be informed that we had conducted the inspection of the abovementioned vehicle 18/05/2018 at the premises of M/s Lim Tan Motor and have the following to report: -

Workshop Estimate Amount	: <u>S</u> \$	5,779.70
Revised Estimate Amount	: S\$	4,848.63
"Check" Items Amount	: S\$	
Market Value	: S\$	
LTA Reimbursement Value	: S\$	
Nett Value	: S\$	

Description of Damage: The vehicle sustained damages at the rear n/s portion.



# Comments/ Present Status:

Damages Consistent.

Yours faithfully Bryan Automotive Assessor

Assessor:

	_				
	_	_			
	_	_			
_	$\vdash$	-			
_	+	-	Sticker	\$7066	9811
_	+	_	Fuel Tank Float		1524
_	+	-	Fuel Tank Bracket		1523
_	+	-+	Fuel Tank		1252
_	+	$\rightarrow$	Fuel Neck		1521
_	+	-	Fuel Lid		1250
	-	-			_
	1		Rear Fender Air Grille		1549
			Third Brake Light		1248
			Rear Windscreen Sealant		1247
				196866	1546
				926866	1245
				693949	1244
			Rear Fender 1/4 Glass Sealant		1243
			Rear Fender 1/4 Glass Rubber		1242
			Rear Fender 1/4 Glass		1241
			Rear Fender Inner Top Garnish		1240
			Rear Fender Extension Panel RH	104566	1239
T	$\top$		Rear Fender Extension Panel LH	791566	1238
$^{\dagger}$	$^{+}$	$\neg \uparrow$	Кеаг Р.Н Туте		1237
+	+	$\neg$	Rear RH Rim Cover	570766	1236
+	+		Rear RH Wheel Rim		1532
+	+	$\neg$	Rear RH Mudflap		1234
+	+	$\neg$	Rear RH Fender Inner Shield		1233
+	+	-	Rear RH Fender Inner Garnish		1232
+	+	-	Rear RH Fender Inner Trim		1231
+	+	-	Rear RH Fender Inner Panel		1230
+	+	_	Rear RH Fender Protector		1559
+	+	_	Rear RH Fender		1228
+	-		Rear LH Tyre		1227
+	+		Rear LH Rim Cover		1526
+	+		Rear LH Wheel Rim		1225
+	+		Rear LH Mudflap		
+	-		Rear LH Fender Inner Shield		_
+	-				
+	-		Rear LH Fender Inner Garnish		
+	_		Rear LH Fender Inner Trim	_	_
+	_	_	Rear LH Fender Inner Panel		_
1	_		Rear LH Fender Protector		_
1			Rear LH Fender		_
1			Rear RH Chassis Member		_
			Rear LH Chassis Member		_
			Sear Exhaust Heat Shield		_
			Sear Exhaust Mounting		
			Sear Exhaust Chrome Pipe		
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+		+	994604 Tailgate Glass Moulding	5611	
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			994602 Tailgate Glass	1193	
			994555 Tailgate Wiper Motor	1192	
4		_	994679 Tailgate Wiper Nozzle	1611	
-	-	-	994676 Tailgate Wiper Arm 994677 Tailgate Wiper Blade	0611	
-	-	+	994646 Tailgate Protector	8811	
_	-	+	994549 Tailgate Lamp	1187	
			994648 Tailgate Reflector	9811	
			994545 Tailgate Garnish	1182	
			994640 Tailgate Moulding	1184	
	_	$\perp$	994643 Tailgate Outer Handle	1183	
	╄	-	991328 Tailgate Emblem	1187	
+	╀	+	993877 Bootlid Spoiler Pailgate	1181	
+	+	-	990382 Bootlid Hinge	6411	
+	+		990377 Bootlid Rubber	8711	
1			995243 Bootlid Lock	<i>LL</i> 11	
			992899 Bootlid Lamp RH	9411	
	1		995222 Bootlid Lamp LH	SLII	
_	+	-	990376 Bootlid Reflector	1174	
+	+	-	990356 Bootlid Handle 995250 Bootlid Moulding	7711	
-	+	-	991328 Bootlid Emblem	1711	
-	+	$\neg$	992895 Bootlid	0411	
$\neg$	$\top$		993554 Rear Apron Panel	6911	
			993859 Rear RH Taillamp Panel	8911	
_	1	10	993853 Rear RH Taillamp Garnish	2911 9911	P3.555
-	1	BK	993859 Rear LH Taillamp Panel (100) 1993 Per RH Taillamp		Sol
-	+	10	993853 Rear LH Taillamp Carnish		
_	+		993851 Rear LH Taillamp		
			990333 Boot Compartment Inner Trim		1
			993333 Rear End Panel Inner Trim		1
	1		993339 Rear End Panel Top Garnish		ł
-	+		994023 Reverse Sensor Reat End Panel		-
-	+		993023 Rear Bumper Lower Spoiler		
-	+		993044 Rear Bumper Reflector	_	1
	$\top$		93026 Rear Bumper Moulding		1
			93036 Rear Bumper Pad		]
			93040 Rear Bumper Protector		4
$\perp$	_		93077 Rear Bumper Sponge Bran Bumper Sponge	_	4
$\vdash$	-	-	193033 Rest Bumper Beam		1
$\vdash$	+		93045 Rear Bumper Reinforcement		1
$\vdash$	+		93068 Rear Bumper Side Retainer		1
$\vdash$	+		92976 Rear Bumper Bracket		
$\vdash$			92341 Rear Bumper Clips		1
			93103 Rest Bumper Tow Cover		-
			93054 Rear Bumper Side		-
H			93017 Rear Bumper Upper	_	-
H		15			60,084
H	5	12	93632 Rear Number Plate Lamp		_
	2		93630 Rear Number Plate Gamish		
	/	18	33627 Rear Number Plate Base Fractor		- 4
(45)	1	00	33626 Rear Number Plate		
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MOTORCAR (Rear)

(1)Replace (V) (2)Repaid() (3)Check (!)
(4)Not Consistent (V)

Vehicle No: F

Condition (COM)
(2) Dented (3)Distorted (4)Cracked (5)Cut (6)Scratched (10)Broken (11)Necessary (11)

#### 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.
- 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.

<ul> <li>by the loagement of this report to the insurers, you hereby consistences.</li> </ul>	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	14/05/2018 15:13
Date Of Accident	13/05/2018 01:45
Exact Location Of Accident	CTE TOWARDS BRADDELL
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGU3390K
Insured/Policyholder	
Name Of Registered Owner	FAMILY CAR RENTAL PTE LTD
Co Reg No	200703924M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64515120
Vehicle Particulars	· · · · · · · · · · · · · · · · · · ·
Manufacturer	TOYOTA
Model	VIOS-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE & REWARD
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

**Insurance Company** 

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number 5089453597-01

Cover Note Number

Driver

Name of Driver MUHAMMAD FIRDAUS BIN ABDUL LAJIS

 NRIC No
 \$8623015A

 Date Of Birth
 19/08/1986

 Occupation
 OUTDOOR

 Date Of Driving Pass
 13/06/2013

Driving Experience 4 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-86784066

Fax Number

Contact Number

EMail Address FYEZ86@LIVE.COM

Address

BLK 302B ANCHORVALE LINK #02-188

Postcode

542302

Was griver an employee of the Insured's Company NO

If No Relationship of the Driver with the Insured

OTHER - PRIVATE HIRE DRIVER

Vehicle Registration Number of Driver's Own

Venicle

Insurance Company of Driver's Own Vehicle

# General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

YES

Was any body injured in the Accident? Was any injured conveyed to hospital by

ambulance?

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)

Passenger 1

NAME:

: FARAH

GENDER:

: FEMALE

### **Details of Police Action**

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

SENGKANG NPC

Police Station Address

ROAD: 2 SENGKANG SQUARE #01-02, POSTCODE: 545025, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

#### Circumstances of Accident

ON 13/05/2018 AT ABOUT 0145 HRS, AS I WAS WORKING AS GRAB DRIVER, I WAS DRIVING MY VEHICLE SGU3390K AND WAS TRAVELLING ALONG CTE TOWARDS BRADDELL INTENDING TO HEAD TOWARDS TOA PAYOH, I HAD A FEMALE PASSSENGER SEATED ON THE REAR BACK SEAT. I WAS ON THE 2ND LANE AND DRIVING STRAIGHT. SUDDENLY, THERE WAS A TAXI SHC8438H SUDDENLY COLLIDED ONTO THE LEFT BONNET ('SHOULD BE BOOT') OF MY VEHICLE. MY VEHICLE CAME TO A STOP AND THE NEXT MOMENT, I SAW THE TAXI ALREADY AT THE ROAD SHOULDER. AS SUCH, I WENT OVER TO STOP AT THE ROAD SHOULDER AND ALIGHTED FROM MY VEHICLE AND WANTED TO ASK THE TAXI DRIVER WHAT HAD HAPPENED. HOWEVER, THE TAX DRIVER JUST ASKED ME TO CLAIM INSURANCE. THE PARTICULARS OF THE TAXI DRIVER AS FOLLOWS: SIM KIAN WEE, S7604075C, 93836001. MY FEMALE PASSENGER INFORMED ME THAT SHE IS NOT INJURED. I DOES NOT HAVE ANY IN CAR CAMERA, NO GOVERNMENT PROPERTY DAMAGED. I WAS GIVEN 5 DAYS OUTPATIENT SICK LEAVE FROM 13/05/2018 TO 17/05/2018.

### Attachment(s)

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

### **Details of Witness 1**

Name FARAH Phone Number 98062713

Email Address

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number Vehicle Make/Model/Colour

SHC8438H BLUE CAB

Details Of Properties

FRONT LEFT

Vehicle Category

TAXI

Name of Driver

SIM JIAN WEE

NRIC/Passport Number

S7604075C

Contact Number

93836001

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# **DETAILS OF INJURED PERSON 1**

Name MUHAMMAD DIRDAUS BIN ABDUL LAJIS

Approximate Age

Injuries Sustain PAIN, MUSCLE, SWELLING

Injured person in which vehicle? SGU3390K

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

ambulance

BLK 302B ANCHORVALE LINK #02-188

Address Postcode

542302



### SKETCH PLAN

# IMP ORTANT NOTICE

- 1. Pleise 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. In formation 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.
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- 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")
- 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
- 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 Signatur 14 MAY 2018 Date & Time:

Driver's Signature

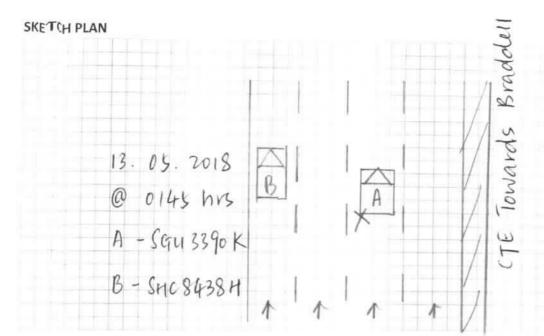
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: LIM LI CHO

NRIC/FIN No.:



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

		0				,	
PI	ease re	eler p	olice r	eport	No.	T/20180	513/2094.
		1					/
En	closed	some	Scene	s pho	105.		

DECLARATION

Date & Time:

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

Policyhol der's Signature Date & Time: 1 4 MAY 2018

Driver's Signature

(If driver is not the policyholder) Date & Time: 1 4 MAY 2018

Reporting Centre Personnel's Signature
Name: UM U ()

NRIC/FIN No .: \$1032011 H





1 of 3

Report No. T/20180513/2094

Police Station Of Origin:

Sengkang N.P.C

2 Sengkang Square #01-02 SINGAPORE

545025

Tel No: 1800-343 8999

REPORT	OF A	TRAFFIC	ACCIDENT
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Date/Time 13/05/201		fade:	Vide Report No.:	Station Diary No.: 88			
Informan	t's Partici	ılars 🤍 🐰					
Name of I MUHAMM LAUIS		AUS BIN ABDUL	Address: APT BLK 302B ANCHORVALE LINK #02-188 SINGAPORE 542302				
IL Type / N. IC NO		15A	Contact No.: Home/Office: Mobile: 87424658				
Nationality		EN	Email:				
Sex: Male	Age: 31	Date of Birth: 19/08/1986					
Race: Malay			Language: English	Institution / School Name:			
Occupation Grab Drive			Driving Licence Information: Class: Date of Expiry:				

General Inform	ation of the Accide	ent				<b>新加州公民的首张</b>
Type of Accident:	Non-Injury		nk ve:	Date/Time of Accident: 13/05/2018 01:45		Type of Location: Expressway
Location: Along Road 1 CENTRAL EXI Along CTE tow						
Weather: Clear		Road Surfa Dry	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Traf			raffic Control: ot Controlled		Traffic Volume: Light	
Tope of Collision:  Between Moving Vehicles - Head To Side					Anyone conveyed by ambulance:	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SGU3390K	Car			5000		0
SHC8438H	Taxi					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Tel No: 1800-343 8999



Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

CONTINUATION OF REPORT

2 of 3 Report No. T/20180513/2094

Driver		A PARTIE				
Name	MUHAMMAD FIRDAUS BIN ABDUL LAJIS			ID No		S8623015A
Related Vehicle	SGU3390K (Car)				ct No.	87424658
Hospital/Clinic	KHOO TECK PUAT	L	Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	13/05/2018	Date Disc	harge	13/05	5/2018	
No. of Days gran	ted Medical Leave	05	Degree of		NIL	

### Brief Details.

On 13/05/2018 at about 0145hrs, as I was working as a Grab driver, I was driving my vehicle SGU 3390K and was travelling along CTE towards Braddell intending to head towards Toa Payoh. I had a female passenger seated on the rear back seat.

I was on the 2nd lane and driving straight. Suddenly, there was a taxi SHC 8438H suddenly collided onto the left bonnet of my vehicle. My vehicle came to a stop and the next moment, I saw the taxi already at the road shoulder.

As such, I went over to stop at the road shoulder and alighted from my vehicle and wanted to ask the taxi driver what had happened. However, the taxi driver just asked me to claim insurance.

The particulars of the taxi driver as follows: Sim Kian Wee, S7604075C, 93836001. My female passenger informed me that she is not injured. I does not have any in car camera.

No government property damaged. I was given 5 days outpatient sick leave from 13/05/2018 to 17/05/2018.







Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999 3 of 3 Report No. T/20180513/2094

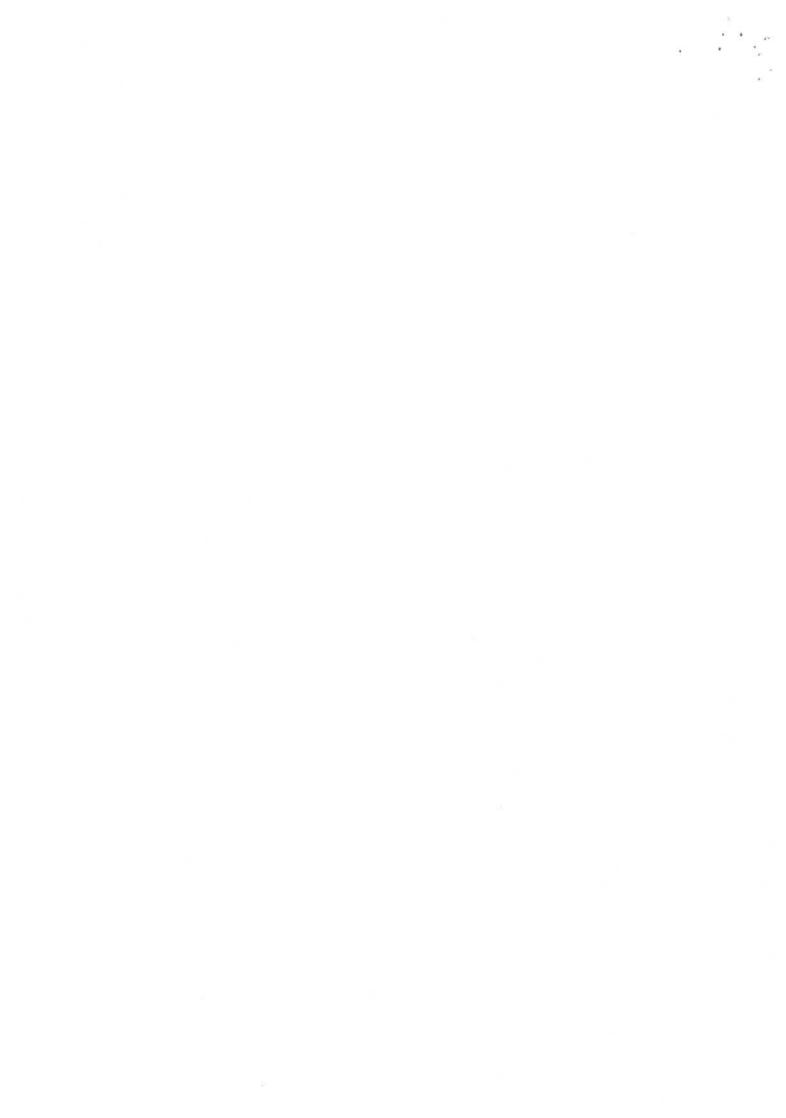
CONTINUATION OF REPORT

# Sketch Plan

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 / Staff Sgt CHEE SI WEI, FELIX	Signature Of Informant:	
Signature Of Interpreter: Not applicable	Date/Time: 13/05/2018 19:34	
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No. 65476430re:	Classification Of Case:	





Singapore

General Info | Application Help | Feedback | Contact Info

Session Date: 18 Aug 2017 User Name: Family Car Rental Pte Ltd

My Account | My Notices | Vehicle Hub |

Licensing

Ownership Text size +

# **Enquire Vehicle Information**

Vehicle No.

Vehicle No.:

SGU3390K

Vehicle Details

Vehicle Type:

Private Hire (Chauffeur) Motor Car

Vehicle Attachment 1:

No Attachment

Make / Model:

TOYOTA / VIOS 1.5E A

Primary Colour.

Black

Year of Manufacture:

2006

Maximum Laden Weight:

1480 kg

Unladen Weight.

1020 kg

No. Of Axles:

Engine No.:

1NZX520640

Chassis No.:

MR053HY4204217940

Engine Capacity:

1497 cc

Maximum Power Output:

80.0 kW (107 bhp)

IU Label No.:

1121116099

Propellant:

Petrol

Passenger Capacity:

Original Registration Date:

11 May 2007

First Registration Date:

11 May 2007

Open Market Value

\$12.237.00

Additional Registration Fee Rate

110.00 %

Actual ARF Paid

\$13,461.00

PARF Eligibility:

Forfeited

Minimum PARF Benefit:

COE No.:

2007050101000782R

COE Category

A - Car (1600cc & below)

COE Expiry Date:

30 Apr 2022

Quota Premium (QP):

\$14,000.00

PQP Paid:

\$25,115.00

OPC Cash Rebate Eligibility

QP during COE Bidding Exercise:

\$14,000.00

Private Hire Vehicle Decal No.

A045533 (Issued on 03 Jul 2017)

....



# Certificate of Insurance

MOTOR	VEHICLES	(THIRD	PARTY	RISKS	AND	COMPENS	SATION)	ACT (CH	APTER	189)
	VEHICLES									
	RANSPORT									

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5089453597-01 Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : SGU3390K

Chassis Number : MR053HY4204217940

2. Name of Policyholder : FAMILY CAR RENTAL PTE LTD

3. Effective Date of Insurance : 11 May 2018

4. Expiry Date of Insurance : 10 May 2019

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission. Provided that the person driving is permitted 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 or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

#### This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation)
Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1) : \$\$2,000

EXCESS (SECTION 2) : \$\$1,500

WINDSCREEN EXCESS : \$\$100

ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE : YES NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** · NO PRIMARY DRIVER : N/A NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : WAH SOON HENG VEHICLE TRADING

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS.

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : AUTOSHIELD PTE. LTD. (00000573469)

Date of Issue : 26 Apr 2018 13:14 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

man

Countersigned By:

Chief Executive

**Authorised Officer** 



# **ESTIMATE TO REPAIR**

VEHICLE NO. : SGU 3390 K

MAKE

: TOYOTA

MODEL

: VIOS 1.5 AUTO

YEAR

: 2006

CHASSIS NO : MR053HY4204217940

SURVEYOR NAME

DATE OF SURVEY TIME OF SURVEY

DATE

: 15-May-18

DATE OF ACCIDENT: 13-May-18

THIRD PARTY REF : SHC 8438 H / FIRST CAPITAL

No.	Parts Description/ Labour	Туре	Unit Price	Nett Item Amt	Amount
4					<b>*</b> F00.70
1 pc	rear bumper braker		±42 F0		\$589.70
2 ps	rear bumper bracket %C	wlo .	\$42.50		\$85.00
2 ps	rear bumper retainer NS baker	B S SV	\$40.40		40.40 \$80.80
1 pc	rear end panel Dested				595.85\$786.70 \$102.70
1 pc	rear end panel garnish SYC				\$102.70
1 pc	n/s taillamp broker				76658\$987.50
1 pc		1			
1 pc	n/s rear fender air duct garnish 🙏	rlango			\$157.70
1 pc	rear boot lid 15+				\$687.70
1 pc	rear boot rubber defend				\$68.70
1 pc	rear boor lock 15+				\$70.40
1 pc	rear boot CENTRE emblem He c			21120211	\$65.70
1 pc	rear boot 1.5 emblem huc			3438.74	\$77.11
1 pc	rear boot VVTI emblem 14.0			3438.74	\$55.20
1 pc	rear windscreen moulding			25 19.05	\$98.00
					\$4,079.61
	Less 25%				\$1,019.91
					\$3,059.70
1 set	rear bumper reverse sensor Deva	S Nett			\$200.00
1 tube	rear windscreen sealant	S.Nett		240/-	\$40.00
1 tube	real wildscreen sediant ple	J.Nett		,	φ+0.00
	To putty & spray paint.				\$1,200.00
					1.00
	To remove & refix rear windscreen	glass.			\$1,20.00
		ا ا			
	To remove & refix fuel tank.				\$80.00
	To only much			a. 1	±00.00
	To anti-rust.			17201-	\$80.00
	Labour charges. 18 05 24 9 e	1500	~	4177	\$1,000.00
	Labour charges.				\$2,000.00
G-ML/-	Total 1 Sm	~			\$5,779.70
K Auto Cons	BARBITIS NUNCE NOTITY				
Repairer of	the following:	50	015 21-1	- 1	4539.05
a office for a Marine	reminent spray perinting	e 5	ays ?man	Jon ryn	
arte nelana ara a		lotor Pte Lt	d	9	4539.05 4 53600
hird party survey	vis on a Wilhout Blk 176 Sin Ming Drive #03-09 Sin N	Aing Autoc	are Singapore 57	5721	1> > 900
o illegal modifica	ation 65-64520893 Fax:65-64589127 Email edit	nund@LTN	1.sg Wei	bsite www.LTM.sg	
upplementary its	em(s) must be (29 Reg No. 199307277D		T Reg No M2-00		
SUDJECT to Fool.	inemailustricusencerCoduces, in whole or in part, or	rdisclosed	to third party or o	arties without the nri	nr written

Acknowledged by Repairer

Signature:

Date:

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray paining
- . 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 Internati	onale Des Experts En Automo	bile
FIRS	ST CAPITAL INSUI	RANCE LTD	Ref : CS/FCI18009054	I/Dtd3e2
	OBINSON ROAD 01 CITY HOUSES	INGAPORE 068877	Date: 27-06-2018 Code: FCI2	
1.		Policy Particulars	:- THIRD PARTY CLAIM	
	Insured Veh.	SHC 8438H	Veh. Inspected	SGU 3390K
	Policy No.	D-18088936MFSH	Coverage (\$)	0.00
	Claim No.	D18003869MFSH	Excess (\$)	0.00
	Assign From	EILEEN LEE	Assign Date	17/05/2018
2.		Vehicle Part	iculars & Condition	
	Make & Model	TOYOTA VIOS	c.c	1497
	Engine No.	HIDDEN	Year of Reg.	2007
	Chassis No.	MR053HY4204217940	Colour	BLACK
	Odometer	261515	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
		Condi	tions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	185/65 R14	LING LONG	5 mm
	L/H Front Tyre	185/65 R14	LING LONG	5 mm
	R/H Rear Tyre	185/65 R14	LING LONG	5 mm
	L/H Rear Tyre	185/65 R14	LING LONG	5 mm
		Descript	ion of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE RI	EAR N/S PORTION.	
	DAMAGES SEE D	ETAILS.		
i		Genera	al Information	
Ξ	Accident Date	13/05/2018	Inspection Date	18/05/2018
	Survey held at	LIM TAN MOTOR PTE LTD		
		BLK 176 SIN MING DRIVE #03-09 SIN MING AUTOCARE SINGAPORE 575721		a
ia.		A PARTICIPATION F	Remarks	
	B)THE INSPECTIO	ISISTENT TO ACCIDENT REPO ON WAS CONDUCTED ON A'WI CE TO YOUR INSTRUCTIONS, N	THOUT PREJUDICE" BASIS	S. ED REPAIRS.
b.			Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	5 Working Days	



# 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 2

# ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGU 3390K

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	BROKEN	589.70	589.70
2	REAR BUMPER BRACKET @\$42.50	SERVICEABLE	85.00	-
2	REAR BUMPER RETAINER @\$40.40	N/S BROKEN / O/S SERVICEABLE	80.80	40.40
1	REAR END PANEL	DENTED	786.70	595.85
1	REAR END PANEL GARNISH	SERVICEABLE	102.70	-
1	N/S TAILLAMP	BROKEN	166.70	166.70
1	N/S REAR FENDER	DENTED	987.50	765.58
1	N/S REAR FENDER AIR DUCT GARNISH	DEFORMED	157.70	157.70
1	REAR BOOT LID	BENT	687.70	687.70
1	REAR BOOT RUBBER	DEFORMED	68.70	68.70
1	REAR BOOT LOCK	BENT	70.40	70.40
1	REAR BOOT CENTRE EMBLEM	NECESSARY	65.70	65.70
1	REAR BOOT 1.5 EMBLEM	NECESSARY	77.11	77.11
1	REAR BOOT VVTI EMBLEM	NECESSARY	55.20	55.20
1	REAR WINDSCREEN MOULDING	NECESSARY	98.00	98.00
	LESS 25% DISCOUNT		-1,019.90	-859.69
			3,059.71	2,579.05
	SPECIAL NETT ITEMS			
1	SET REAR BUMPER REVERSE SENSOR (SN)	DAMAGED	200.00	200.00
1	TUBE REAR WINDSCREEN SEALANT (SN)	NECESSARY	40.00	40.00
			240.00	240.00
	LABOUR			
	TO PUTTY & SPRAY PAINT.		1,200.00	800.00
	TO REMOVE & REFIX REAR WINDSCREEN GLASS.		120.00	80.00
	TO REMOVE & REFIX FUEL TANK.	NOT NECESSARY	80.00	15
	TO ANTI-RUST.		80.00	40.00
	LABOUR CHARGES.		1,000.00	800.00
			2,480.00	1,720.00
	GRAND TOTAL		5,779.71	4,539.05

Report Ref No. CS/FCI18009054/Dtd3e2



Page No.:2 of 2

RECOMMENDED COST OF LUMP SUM REPAIRS	3,600.00
(TO ITS PRE-ACCIDENT CONDITION)	

Report Ref No. CS/FCI18009054/Dtd3e2

MARKET VALUE: \$25,000.00 (EST)-LTA REIMBURSEMENT VALUE: \$19,700.00=NETT VALUE: \$5,300.00

1

ANG BRYAN TANI

Automotive Assessor / Investigator

St. S.

ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M. MATAI

Licensed Appraiser

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