1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883 TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg Co. Reg. No. 201300201N GST Reg. No. 201300201N

Our Ref

: KCR0520188260AIG

Your Ref

: SLE3283L

Date

2 6 SEP 2018

WITHOUT PREJUDICE

AIG Asia Pacific Insurance Pte Ltd C/O LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Pk Singapore 408933 Attention: Motor Claim Department

Dear Sirs.

Accident involving SKT8260C and SLE3283L on 18.05.2018 along Hougang Ave 5.

We refer to the above accident. On our record showed that you are the insurer of motor vehicle SSLE3283L.

We are instructed that the accident was caused by your insured's negligent driving and/or management of his vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense.

On behalf of and as authorized by Mr Ong Teck Wee, the owner of motor-vehicle no: SKT8260C, we submit his claim to you:

 Cost of repairs (Inclusive of 7% GST)
 \$ 8,453.00

 Loss of use
 (7 days (6 +1Sunday)x \$100.00)
 \$ 700.00

 LTA search by law firm
 \$ 10.00

Enclosed herewith are copies of the following documents in support of our client's claim:

- 1) Tax invoice no: KCR-INV1800571
- 2) GIA report and certificate insurance of SKT8260C
- 3) Police Report No: T/20180519/7002
- 4) LTA search fee & invoice from A C Syed & Partners

We hope to receive your early reply soon.

Thank you,

Yours faithfully, KANG CAR REPAIRERS PTE LTD



1 KAKI BUKIT AVE 6 #02-06 AUTOBAY@KAKI BUKIT SINGAPORE 417883 TEL: 67477636, 67473005 FAX: 67485071 Email: kangcar@singnet.com.sg Co. Reg. No. 201300201N GST Reg. No. 201300201N

FAX: 68357416

M/S: AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY #07-16

AIG BUILDING, SINGAPORE 079120

64193000 TEL:

ATTN: Motor Claim Department

Your Ref No: Claim Type:

SLE3283L **Third Party**

Accident Date: 18/05/2018 TP Veh Reg No: SLE3283L

Final No:

KCR-INV1800571

Claim No:

EST1800154

Date:

25 Sep 2018

Policy No:

1700079711

Veh Reg No:

SKT8260C

Make/Model:

AUDI A3 SEDAN

1.0TFSI

Chassis No:

WAUZZZ8V1J1013737

Engine No:

CHZ531218

Reg. Date:

28/10/2017

Tax Invoice to Vehicle No :SKT8260C

			PAGE:1
Description	Quantity	List Price	Amount
		<u>S\$</u>	<u>S\$</u>

As recommended by surveyor to proceed repair at total cost/lumpsum cost

S\$ 7,900.00

Add GST @ 7%

553.00

Total Amount payable

S\$ 8,453.00

TOTAL: SINGAPORE DOLLAR EIGHT THOUSAND FOUR HUNDRED FIFTY THREE ONLY

For Kang Car Repairers Pte Ltd

E. & O. E.

AUTHORISED SIGNATURE

MSME18065299 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 19/05/2018 14:21 SUBMITTED BY: Farida Wen

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 <u>truthful</u> and <u>accurate</u> 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.

atoresaid.		
	ACCIDENT STATEMENT	
Date Of Report	19/05/2018 14:21	
Date Of Accident	18/05/2018 18:00	
Exact Location Of Accident	HOUGANG AVE 5.	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKT8260C	
Insured/Policyholder		
Name Of Registered Owner	ONG TECK WEE	

NRIC No S8109829H
Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-94555521

Alternative Phone No OFFICE-94555521

Vehicle Particulars

Manufacturer AUDI Model A3

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken
Vehicle Category

THIRD PARTY
PRIVATE CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 1700079711

Cover Note Number

Driver

 Name of Driver
 ONG TECK WEE

 NRIC No
 \$8109829H

 Date Of Birth
 10/04/1981

 Occupation
 INDOOR

 Date Of Driving Pass
 22/03/2000

Driving Experience 18 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-94555521

Fax Number

Contact Number OFFICE-94555521

EMail Address NOEMAIL

Address

BLK 269B PUNGGOL FIELD #10-197

Postcode

822269

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

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

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

NO

Nas 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)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact Was notice of intended Prosecution given? TEL NO: 65470000 - FAX NO:

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO POLICE REPORT NO.T/20180519/7002.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLE3283L

Vehicle Make/Model/Colour

Details Of Properties

VEHICLE B

Vehicle Category

PRIVATE CAR

Name of Driver NRIC/Passport Number LI SU HUO

S6870935J

Contact Number

91069500

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

ONG TECK WEE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SKT8260C

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

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.
- 3. 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>.
- 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:

19.5.18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

19.5.12

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

Housang AN 5



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

See	attachd	Police	Report No: T/20180519/7002.

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

Policyholder's Signature

Date & Time: 19.5.18

Driver's Signature

(If driver is not the policyholder) Date & Time: $\{ \varphi \cdot Y \cdot \chi \}$

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No :





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20180519/7002

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/05/2018 11:29		Vide Report No.:	Station Diary No.			
Informa	nt's Partic	ulars	A STATE OF THE STA			
Name of Informant: ONG TECK WEE			Address: APT BLK 269B PUNGGOL FIELD #10-197 SINGAPORE 822269			
ID Type / ID No.: NRIC NO / S8109829H			Contact No.: Home/Office:	Mobile: 94555521		
Nationality: SINGAPORE CITIZEN		Email: andreas_ong@yahoo.c	om.sg			
Sex: Male	Age:	Date of Birth: 10/04/1981	Type of Informant: Driver			
Race: Chinese		Language: Institution / School Na English				
Occupation: CIVIL SERVANT.		Driving Licence Informa Class: 3	ation: Date of Expiry:			

Type of Accident	Injury Others	Drink Drive: No	Date/Time of Accident: 18/05/2018 18:0	Type of Location: hougang Ave 5 road
Location: HOUGANG A before the car	VENUE 5 park @ blk 309-319	9 Hougang Ave 5.		
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis Between Mov	ion: ing Vehicles - Head	To Rear		Anyone conveyed by ambulance:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKT8260C	Саг	AUDI	A3	Grey		0
SLE3283L	Car	HONDA	vezel	White		0

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SKT8260C	AIG ASIA PACIFIC INSURANCE PTE.	1700079711	28/10/2017	27/10/2018		



T/20180519/7002

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20180519/7002

CONTINUATION OF REPORT

Details of Perso	n Involved					112
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Ped	destriar	Cross	sing: NA
Driver				- 14.	100	
Name	ONG TECK WEE			ID No		S8109829H
Related Vehicle	SKT8260C (Car)			Contact No.		94555521
Hospital/Clinic	KHOO TECK PUAT I	HOSPITAL		Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	18/05/2018	Date Disc	harge	18/05	5/2018	
No. of Days granted Medical Leave 03			Degree of	Injury	Serio	us

Brief Details.

I was driving along Hougang Ave 5 and it was raining and traffic was slow. The vehicle in front stopped and I also followed to stop. Suddenly the rear vehicle, SLE 3283L, driven by Mdm Li Su Huo (S6870935J) cannot stopped in time and hit the back of my car, SKT8260C causing damage. Due to the impact after the accident, I felt uncomfortable and went to Khoo Teck Puat Hospital for consultation and was given 3 days MC.



Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



3 of 3

Report No. T/20180519/7002

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Interpreter: Not applicable

Signature Of Officer Recording The Report:

Officer In Charge Of Case: TP / TPIB / TANG SIEW PING Contact No.: 65476430

Authentication Stamp
NP168

Not applicable

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time: 19/05/2018 11:29

Classification Of Case:

Enquire Vehicle & Owner Information (Vehicle No. SLE3283L As At 18 May 2018 / 18:00:00)

Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

ACS.KC.LTA.05.18

Current Owner Details

Owner ID Type:

Company

Owner ID:

201624597K

Owner Name:

LCRF PTE LTD

Registered Address Type: Private Residential (non-Condo Apt / non-House)

Registered Block/House No.:60

Registered Street Name: ANSON ROAD

Registered Unit No.:

#11-01

Registered Building Name: MAPLETREE ANSON

Registered Postal Code:

079914

Current Vehicle Details

Vehicle No.:

SLE3283L

Make Description/Model: HONDA / VEZEL 1.5X CVT

Insurance Company Name: AIG ASIA PACIFIC INSURANCE PTE. LTD.

A.C. SYED & PARTNERS

ADVOCATES & SOLICITORS COMMISSIONER FOR OATHS

101A UPPER CROSS STREET, #13-23 PEOPLE'S PARK CENTRE, SINGAPORE 058358

TEL - 6538 7411 & FAX : 6534 1011

TEL: 8338 7411 & FAX: 8334 1011		
TO : KANG CAR REPAIRERS PTE LTD	BILL NO: B048	/2018
YOUR REF:		
OUR REF : ACS.KC.LTA.MAY.2018	DATE: 7/6/18	
TO OUR PROFESSIONAL CHARGES for acting for you in the above m	atter including	
where necessary perusals, attendance preparation examination of docu	ments	
relating thereto; correspondence, attendance, perusais, telephone calls,	searches	
and all other incidental works not specifically mentioned herein to enable	us to carry	
out the work entrusted to us inclusive of all advice.		
LTA SEARCHES FOR THE MONTH MAY 2018		
1. GBD 5711D as at 2.5.18	\$	10.00
2. SLE 3283L as at 18.5.18 SKT 8260C	\$	10.00
3. SLP 6590Y as at 2.5.18	\$	10.00
4, SLQ 5744Y as at 29.5.18	\$	10.00
5, EW 8833E as at 19.5.18	\$ \$	10.00 10.00
6, YN 2829T as at 31,5.18	D.	10.00
Total:	\$	60.00
[SINGAPORE DOLLARS; SIXTY ONLY.]		
M/s A C SYED & PARTNERS ADVOCATES & SOLICITORS		
SINGAPORE		
We reserved the right to forward a subsequent bill for any disbursements omitted herein.		