

ASS. REC. BY: _____ REF: CS3/UOI18010693/Uz4d354 Special Instruction: _____

Surveyor: Marcus ASSIGNMENT (Office)

From (Person): Jenny Lew of UOI Date/Time: 12/6/18 @ 9:31am

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SJE 6437P Insured: YM 1857Z

at Workshop n/a: Alpha Car Services Tel: 6509 8258

of BKIC, Kaki Bukit Ave 6 # 01-59

Policy No: _____ Claim No: PO/02/1800960

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 8/06/2018
(Client's Record)

CA / REV / REP. / REV 24 HRS ^{wp} H.O.D. Endorsement: _____

Date/Time: 10:06am @ 12/6/18 Person Contacted: Cui ling Vehicle IN / OUT

Date/Time	Action/Instruction (X) Estimate
	SJE 6437P - X
	YM 1857Z - X
12/6/18	Dismantled

Garage (Name)

REF: UOI

ASSIGNMENT

From: _____ Date: 12/6/18

Estimated Cost: _____

OD TP WS TP RES OD RES EVA INV MV

To Inspect Vehicle No: SJE 6437P

at Workshop m/s Alpha Car Services

of Blk C, Koki Bkt Ave 6 # 01-59

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

Veh No: SJE 6437P Yr Regn: 1 of 08

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or CA /

Make: Toyota Vios c.c. 1497

Colour: Grey A/C: Insured / Std / NI / NA

Sp. Reading: 96523 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR0534/932525814

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/55-R15 R: _____

N/S	O/S

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO

Front	Rear
R/Bal. 6 mm	R/Bal. 6 mm
L/Bal. 6 mm	L/Bal. 6 mm
D.O.A.	D.O.I. 12/6/18 12.53

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or Rear

The U/C / Chassis frame / Body Structure affected due to collision.

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS ^{1up}

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Date / Time | Action / Instruction

no settlement a 1.05 per. ask repairer for GIA?

2/6/18 submit PRS Report.

Date/Time: File Pass to? : Preli. Report

1) : Final Report

Date/Time: File Return to?

2)

Report Format : _____

Lump Sum / I.B.I: (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

_____ \$ + RS _____ \$

Photos _____

Other _____

TOTAL _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Insp (\$ _____)

: Weekend (\$ _____)

TOTAL



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			
UNITED OVERSEAS INSURANCE LTD		Ref : CS3/UOI18010693/Uz4d3	
3 ANSON ROAD #28-01 SPRINGLEAF TOWER SINGAPORE 079909		Date : 12-06-2018	
		Code : UOI2	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	YM 1857Z	Veh. Inspected	SJE 6437P
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	JENNY LEW	Assign Date	12/06/2018
2. Vehicle Particulars & Condition			
Make & Model	c.c		
Engine No.	Year of Reg.		
Chassis No.	Colour		
Odometer	Steering		
Brakes	Modification		
General			
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. Description of Damages			
5. General Information			
Accident Date	08/06/2018	Inspection Date	
Survey held at			
5a. Remarks			

Nivitha (LKK Auto)

From: LEW JENNY <jennylew@uoi.com.sg>
Sent: Tuesday, 12 June 2018 9:31 AM
To: Margaret Lim; assignments; SUR
Cc: LEE KATIE; alphacarservices@hotmail.com; friendlyang@yahoo.com.sg; elleen@satwantlaw.com; Danny Lim
Subject: RE: URGENT - Accident involving SJE6437P & YM1857Z on 08/06/18 (Our Ref: PD/DL/1800968)
Attachments: 2nd PRS Letter to UOI 11062018.zip

WITHOUT PREJUDICE

Dear Margaret,

We refer to your email dated 11.6.2018.

We are not agreeable to your proposed motor Surveyors as a "Single Joint Expert" from your list.

Our Surveyors from M/s LKK Auto Consultants Pte Ltd will proceed to conduct the Pre-Repair Inspection (PRI) on without prejudice basis under the Protocol.

In addition, our Surveyors will also conduct a Post-Repair Survey/Inspection under the Protocol.

We reserve all our rights in this matter.

Thank you.

Warmest Regards

Jenny Lew

Claims Department

United Overseas Insurance Limited

3 Anson Road, #28-01 Springleaf Tower, Singapore 079909
Main • (65) 6222 7733 | DID • (65) 6490 9329 | Fax • (65) 6327 3869 | Email • jennylew@uoi.com.sg

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From: Margaret Lim [mailto:MargaretLim@satwantlaw.com.sg]
Sent: Monday, 11 June, 2018 6:16 PM
To: LEW JENNY <jennylew@uoi.com.sg>
Cc: LEE KATIE <katielee@uoi.com.sg>; alphacarservices@hotmail.com; friendlyang@yahoo.com.sg; elleen@satwantlaw.com; Danny Lim <limdanny@satwantlaw.com.sg>
Subject: Re: URGENT - Accident involving SJE6437P & YM1857Z on 08/06/18 (Our Ref: PD/DL/1800968)

WITHOUT PREJUDICE

Hi Jenny,

We have instructions to reject your surveyors and propose to engage a surveyor from the list below:-

1. Chang Fuh Keong, Dave
2. Lee Kok Weng
3. Lim Yong Tian, Sebastian
4. Ong Ah Keng, Kent
5. Ong Poh Meng
6. Cheong Kim Hin, Alan
7. Ananda K Biswas Marc

Kindly see attached our letter and the workshop details as below:-

Workshop: Alpha Car Services Pte Ltd

Address: Blk C Kaki Bukit Ave 6 @ KB #01-59 Singapore 417883

Contact: Ah Hwa (HP: 9136 8884) or Cailing (Tel: 6509 8258)

Kindly liaise directly with the workshop for the PRS on an urgent basis. Thank you.

Thank you & Best Regards
Margaret Lim (Branch Office)
Secretary

For and on behalf of

SATWANT & ASSOCIATES

Advocates & Solicitors | Notary Public | Commissioner for Oaths

Main Office: No. 3 Jalan Bingka, Singapore 588896 | tel: 6299 9470 | fax: 6299 5541

Branch Office: 450 Lorong 6 Toa Payoh #02-03 Harsing Centre Singapore 319394 | tel: 6221 6114 | fax: 6266 6925

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From: LEW JENNY <jennylew@uoi.com.sg>

Sent: Monday, June 11, 2018 5:39:34 PM

To: Margaret Lim

Cc: LEE KATIE; alphacarservices@hotmail.com; friendlyang@yahoo.com.sg; elleen@satwantlaw.com; Danny Lim

Subject: RE: URGENT - Accident involving SJE6437P & YM1857Z on 08/06/18 (Our Ref: PD/DL/1800968)

WITHOUT PREJUDICE

Dear Margaret,

We refer to your email dated 11.6.2018.

Pursuant to the amended Pre-action Protocol for Non-Injury Motor Accident (NIMA), we enclose a list of our Surveyors, for your attention.

In this case, we propose to appoint M/s LKK Auto Consultants Pte Ltd.

Please revert to the undersigned within **two (2) working days** whether you have any objections to the appointment of any of our Surveyors, failing which we shall proceed to carry out the survey of your client's vehicle by our appointed Surveyors.

Please forward us a copy of the estimated cost of repair and accident report.

We reserve all our rights in this matter.

Thank You.

Warmest Regards

Jenny Lew

Claims Department

United Overseas Insurance Limited

3 Anson Road, #28-01 Springleaf Tower, Singapore 079909

Main • (65) 6222 7733 | DID • (65) 6490 9329 | Fax • (65) 6327 3869 | Email • jennylew@uoi.com.sg

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From: Margaret Lim [<mailto:MargaretLim@satwantlaw.com.sg>]

Sent: Monday, 11 June, 2018 5:10 PM

To: LEE KATIE <katielee@uoi.com.sg>

Cc: alphacarservices@hotmail.com; friendlyang@yahoo.com.sg; elleen@satwantlaw.com; Danny Lim <limdanny@satwantlaw.com.sg>

Subject: URGENT - Accident involving SJE6437P & YM1857Z on 08/06/18 (Our Ref: PD/DL/1800968)

Importance: High

WITHOUT PREJUDICE

Hi,

Kindly see attached our PRS request letter for your urgent attention. Thank you.

Thank you & Best Regards
Margaret Lim (Branch Office)
Secretary

For and on behalf of

SATWANT & ASSOCIATES

Advocates & Solicitors | Notary Public | Commissioner for Oaths

Main Office: No. 3 Jalan Bingka, Singapore 588896 | tel: 6299 9470 | fax: 6299 5541

Branch Office: 450 Lorong 6 Toa Payoh #02-03 Harsing Centre Singapore 319394 | tel: 6221 6114 | fax: 6266 6925

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Satwant & Associates

Advocates & Solicitors | Notary Public | Commissioner for Oaths

Main Office: No. 3 Jalan Bingka, Singapore 588896 | tel: 6299 9470 | fax: 6299 5541

Conveyancing: Blk 186 Toa Payoh Central #02-420, Singapore 310186 | tel: 6635 7493 | fax: 6635 7494

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Satwant Singh
Pritam Singh
Khong Zi-Wei



CONVEYANCING OFFICE:
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Singapore 319394
Tel: 6221 6114
Fax: 6266 6925
www.satwantlaw.com.sg
(Fax not for service
of documents)

An Official Member of The Lawyer Network, an international network of law firms

(Please quote our Ref. when replying)

Your Ref: To be advised
Our Ref: PD/DL/1800968 (ml) – Toa Payoh Office
(margaretlim@satwantlaw.com.sg)

11 June 2018

United Overseas Insurance Limited
3 Anson Road
#28-01 Springleaf Tower
Singapore 079909

BY EMAIL ONLY

Attention: Motor Claims Department

Dear Sir/Mdm,

**ACCIDENT INVOLVING SJE6437P & YM1857Z ALONG WOODLANDS AVENUE 3 ON
08/06/2018 @ 21:02**

We refer to your email dated 11 June 2018 confirming your intention to conduct a pre-repair survey on our client's vehicle SJE6437P.

Please be informed that said vehicle can be inspected at:

Workshop: Alpha Car Services Pte Ltd
Location: Blk C Kaki Bukit Ave 6 @ KB #01-59 Singapore 417883
Contact Person: Ah Hwa (HP: 9136 8884) or Cailing (Tel: 6509 8258)

In the event you fail to conduct the pre-repair survey within the next 2 working days, excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you.

Yours faithfully,

SATWANT & ASSOCIATES

cc client

For Surveyor: To initial after Completion

1st Inspection
Appointed surveyor
(Name & Siganature)

Date & Time

2nd Inspection
Appointed surveyor
(Name & Siganature)

Date & Time

3rd Inspection
Appointed surveyor
(Name & Siganature)

Date & Time

NB: Any Settlement of offer is on the express condition that this settlement is in respect of our client's claim for property related damaged only and shall not preclude out client from claiming injury-related damages arising from this accident. This document is intended for the addressee(s) only and may contain confidential information and/or may be subject to legal privilege. If you have received this is error, please contact us immediately and destroy the original message.

Uz4b

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the 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	11/06/2018 16:24
Date Of Accident	08/06/2018 21:05
Exact Location Of Accident	WOODLANDS AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJE6437P
Insured/Policyholder	
Name Of Registered Owner	LENG SERVICES PTE LTD
Co Reg No	200300608D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90000000

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	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	5100494876
Cover Note Number	

Driver

Name of Driver	KOK KOOI YOONG
Passport No/FIN	F0117010N
Date Of Birth	27/09/1964
Occupation	OUTDOOR
Date Of Driving Pass	07/08/1990
Driving Experience	27 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82311243
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	8 KAKI BUKIT ROAD 2 #04-08 RUBY WAREHOUSE COMPLEX
Postcode	417841
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	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	2
Was any body injured in the Accident?	NO
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)	2
Passenger 1	NAME: : TEE TEIN YONG GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO BELOW STATEMENT/SKETCH PLAN

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	YM1857Z
Vehicle Make/Model/Colour	MITSUBISHI CANTER
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NOR ZAIRI BIN NOR ZAHID
NRIC/Passport Number	S9634948C
Contact Number	86203947
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

- 1. This form is strictly for use in the event of an accident involving the claimant's policy.
- 2. The information is completed by the Subjected to and/or the Authorised Driver.
- 3. Information provided on this form should be truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow the insurance company to repudiate policy liability.
- 4. The issue of the acceptance of the insurance claim by the insurance company based on an admission of policy liability on the part of the insurance company.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the command of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) 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 wherever.

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 purposes 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, where such involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of self-posted mail packages; and/or
 - (v) complying with applicable law in relation to processing, handling and/or dealing with my claims (collectively the "Purposes").
- (b) My insurer, workshop and/or credit repair 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 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 may be disclosed and used by the Insurers, for example, claims history for the purpose of fraud detection and/or to assist in the investigation, assessment and settlement of my claims.
- (e) My Personal Information may be disclosed to:
 - (i) my financial institution;
 - (ii) my health insurance provider;
 - (iii) my employer and/or other relevant parties that assist in evaluating, investigating, controlling or managing my and my employer's, business and/or government agencies as reasonably required for the purposes stated; or
 - (iv) any other relevant government agency/authority, lawyers or court orders.

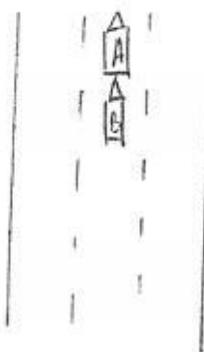

 The Insured
 11/6/18


 Leng Services Pte Ltd
 11/6/18


 The Insurer
 11/6/18

IDAC KAKI BUKIT (VAC)
 23 Kaki Bukit Ave 4
 Reporting Centre Personnel Services
 Singapore 415933
 Tel: 67416697 Fax: 67492305
 Email: vackb@singnet.com.sg

Woodland Ave 3



Vehicle A : SJE 6437P

Vehicle B : YM 1857Z

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above mentioned Date / Time 8/6/18 @ 21:02 hrs, I was Travelling along Woodland Ave 3. The Traffic light was Yellow and I slow down my vehicle. My Vehicle came to a complete stop. The Traffic light became red. Vehicle B wasnt to Break in time thus Collided on to my rear portion of vehicle.

DECLARATION SERVICES

[Signature]
 11/6/18

[Signature] 11/6/18
 I declare that the information provided is true and correct to the best of my knowledge.

YAC KAKI BUKIT (YAC)
 23 Kaki Bukit Ave 3
 Singapore 415033
 Phone: 67416697 Fax: 67492308
 Email: yac@yac.com.sg



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

PRE-REPAIR INSPECTION REPORT			
UNITED OVERSEAS INSURANCE LTD		Ref:	CS3/UOI18010693/Uz4d3s2
3 ANSON ROAD #28-01		Date:	22-06-2018
SPRINGLEAF TOWER SINGAPORE 079909			
		Code:	UOI2
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	YM 1857Z	Veh. Inspected	SJE 6437P
Policy No.		Coverage (\$)	0.00
Claim No.	PD/DL/1800968	Excess (\$)	0.00
Assign From	JENNY LEW	Assign Date	12/06/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA VIOS	c.c	1497
Engine No.	HIDDEN	Year of Reg.	2008
Chassis No.	MR053HY9305058114	Colour	GREY
Odometer	96523 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/55R15	YOKOHAMA	6 mm
L/H Front Tyre	195/55R15	YOKOHAMA	6 mm
R/H Rear Tyre	195/55R15	YOKOHAMA	6 mm
L/H Rear Tyre	195/55R15	YOKOHAMA	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
5. General Information			
Accident Date	08/06/2018	Inspect Date / Time	12/06/2018 (12:53 PM)
Survey held at	ALPHA CAR SERVICES PTE LTD BLK C, KAKI BUKIT AVE 6 #01-59 KAKI BUKIT AUTOBAY SINGAPORE 417883		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.			

Report Ref No. CS3/UOI18010693/Uz4d3s2

Inspected By

CHUA KANG SENG

Licensed Appraiser

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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