

Your Ref: SGJ8781R
Our Ref : 180383/06

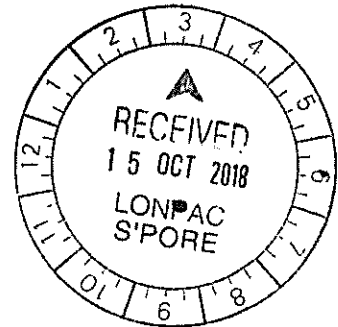
17/18/18/VPO5/020661

M/s Dreamzwork Work Creation

Correspondence address :

c/o M/s K. Kim Hin Auto Pte Ltd
160 Sin Ming Drive #02-20
Sin Ming AutoCity
Singapore 575722

Date : 15 OCT 2018



Lonpac Insurance Bhd
Motor Claims Dept
300 Beach Road #17-04/07
The Concourse
Singapore 199555

Dear Sir/Madam

**ACCIDENT INVOLVING SGY 7368 D AND SGJ 8781 R ALONG UPPER
SERANGOON ROAD ON 08 JUNE 2018**

I am the owner of the m/vehicle SGY 7368 D which was involved
in the above accident.

My vehicle sustained damages as a result of the said accident and
I am now claiming against you for the followings:-

1. Costs of repairs	\$ 7,329.50
2. Loss of use of vehicle at \$	(\$100.00)	
per day for 15 day(s)	\$ 1,500.00
3. Police documents/Search fees	\$ 2.00
4. Surveyor report fee	
Total:		\$ 8,831.50

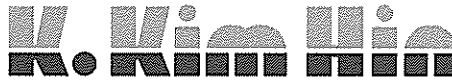
Please advise whether you are prepared to settle my claim as
outlined above. As I have yet to settle my repair bill with my
repairers, I hereby authorise my repairers and/or their
representatives to negotiate/compromise settlement of above claim
on my behalf.

Looking forward to hear from you soon.

Yours faithfully,

enc1.

Please note that driver and passenger
were injured in the accident and are
claiming for injuries thru their lawyers

**金興(龔)汽車私人有限公司**

160 Sin Ming Drive, #02-20,
Sin Ming AutoCity, Singapore 575722
Tel: 6452 7018 Fax: 6458 3895
Email: service@kkimhin.com.sg

No. : 23679

Vehicle Insured : SGJ 8781 R
Accident Date : 08-Jun-2018

Date : 25-Jun-2018

Our Ref : 180383 (LONPAC) / MARGARET

PAGE : 1

DREAMZWORK WORK CREATION
Singapore

COST OF REPAIR FOR HONDA JAZZ 1.4A (2007) SGY7368D
=====

To supply spare parts

To tow accident vehicle to workshop
by normal towing

To remove, cut out damaged parts,
panel beating, welding, align,
refix and to renew affected parts.

To remove and refit rear windscreen
glass and conduct water leak test

To remove and refit reverse sensor
assy.

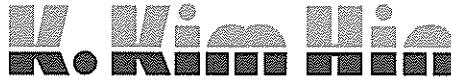
To apply undersealing

To check and realignment on chassis
member.

To remove and renew exhaust
silencer box

To remove and refit rear upholstery
trimming, roof lining, seats,
speaker board in order to
facilitate repairing works

Con't Page 2 ...



CO. REG. NO: 199402370D

GST NO: M2-0123250-3

AUTO PTE LTD

金興(龔)汽車私人有限公司

Vehicle Insured : SGJ 8781 Sin Ming Drive, #02-20,
Our Ref : 180383 Sin Ming AutoCity, Singapore 575722
Tel: 6452 7018 Fax: 6458 3895
Email: service@kkimhin.com.sg

Page : 2
No. : 23679

To remove aircon condenser, pipes
and driers. Vaccum and recharge gas

To putty and respray on affected
portions.

To focus Headlamps and Taillamps.

To check front and rear lighting
operation and rewiring

	6,850.00
Add 7% GST :	479.50

Total :	S\$ 7,329.50
	=====

Singapore Dollars Seven Thousand Three Hundred
and Twenty Nine and Cents Fifty Only

金興(龔)汽車私人有限公司
K. KIM HIN AUTO PTE LTD

Third Party Insurer Enquiry

Our Ref No: GR-18-088482
Date of Request: 09/06/2018

Your Ref No: Online Purchase

K Kim Hin Auto Pte Ltd
160 Sin Ming Drive #02-20
Sin Ming AutoCity
Singapore 575722

Dear Sir/Madam,

Enquiry Date 09/06/2018
Enquiry By Wong Shu Man
TP Vehicle No. SGJ8781R
Accident Date 08/06/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGJ8781R	Lonpac Insurance Bhd	15/12/2017-14/12/2018	+65 62507388

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

TAX INVOICE

Our Ref No: GR-18-088482
Date of Request: 09/06/2018

Your Ref No: Online Purchase

K Kim Hin Auto Pte Ltd
160 Sin Ming Drive #02-20
Sin Ming AutoCity
Singapore 575722

Dear Sir/Madam,

Enquiry Date 09/06/2018
Enquiry By Wong Shu Man
TP Vehicle No. SGJ8781R
Accident Date 08/06/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

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 10:50
Date Of Accident	08/06/2018 10:05
Exact Location Of Accident	UPPER SERANGOON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGY7368D
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Insured/Policyholder

Name Of Registered Owner	DREAMZWORK WORK CREATION
Co Reg No	53323734C
Email Address	HAZELCHONGSOOJIA@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-92294883

Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ-1.4 (A)

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	NO
Policy Number	5090932581-01
Cover Note Number	

Driver

Name of Driver	CHONG SOO JIA, HAZEL
NRIC No	S8324623E
Date Of Birth	04/08/1983
Occupation	INDOOR
Date Of Driving Pass	05/12/2002
Driving Experience	15 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92294883
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 245 SERANGOON AVE 2 #03-107
Postcode	550245
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : ALVIN SERIA GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KOLAM AYER NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 72 GEYLANG BAHRU #01-3038 , POSTCODE: 330072 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2969999 - FAX NO: 62937659
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO 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	SGJ8781R
Vehicle Make/Model/Colour	HONDA CIVIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM CHU QIANG
NRIC/Passport Number	S9124418G
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHA4517A
Vehicle Make/Model/Colour TOYOTA I40
Details Of Properties
Vehicle Category TAXI
Name of Driver LAM SIEW FOO
NRIC/Passport Number S1539970H

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name HAZEL CHONG SOO JIA

Approximate Age

Injuries Sustain

Injured person in which vehicle? SGY7368D

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

DETAILS OF INJURED PERSON 2

Name ALVIN SERIA

Approximate Age

Injuries Sustain

Injured person in which vehicle? SGY7368D

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

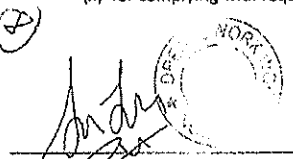
SKETCH PLAN


IMPORTANT NOTICE

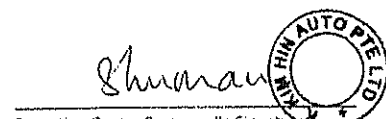
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy 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:

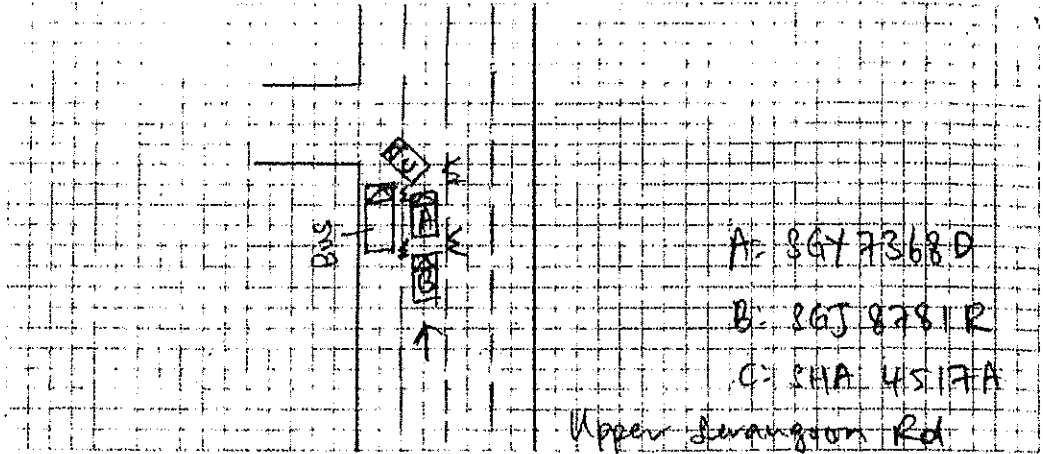
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my Insurer (collectively the "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")
- (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:


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name: 9/6/18 @
NRIC/FIN No.: 12-50pm

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report -

* Accident scene photo was taken after vehicle shifted -

DECLARATION

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

[Signature]
Policyholder's Signature

Date & Time:

Company Chop (if applicable)



[Signature]
Driver's Signature
(If driver is not the policyholder)

Date & Time:

[Signature]
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

9/6/16 @

12-50pm



**SINGAPORE
POLICE FORCE**



T/20180609/2114

1 of 4

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

Report No. T/20180609/2114

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/06/2018 17:21	Vide Report No.:	Station Diary No.: 51
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Informant's Particulars			
Name of Informant: CHONG SOO JIA, HAZEL		Address: APT BLK 245 SERANGOON AVENUE 2 #03-107 SINGAPORE 550245	
ID Type / ID No.: NRIC NO / S8324623E		Contact No.: Home/Office: Mobile: 92294883	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 34	Date of Birth: 04/08/1983	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Self Employed		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 08/06/2018 10:10	Type of Location: Straight Road
Location: Along Road 1 SERANGOON ROAD				
Near to bus stop (B15), before junction of Jalan Taman				
Weather: Heavy rain		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGJ8781R	Car				Slightly Damaged	0
SGY7368D	Car				Slightly Damaged	1
SHA4517A	Taxi				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20180809/2114

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

2 of 4

Report No. T/20180809/2114

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Lim Chuqiang	ID No.	S9124418G
Related Vehicle	SGJ8781R (Car)	Contact No.	-
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CHONG SOO JIA, HAZEL	ID No.	S8324623E
Related Vehicle	SGY7368D (Car)	Contact No.	92294883
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	08/08/2018	Date Discharge	08/06/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	Alvin Seria	ID No.	-
Related Vehicle	SGY7368D (Car)	Contact No.	92448903
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/06/2018	Date Discharge	08/06/2018
No. of Days granted Medical Leave	02	Degree of Injury	Slight



**SINGAPORE
POLICE FORCE**



T/20180809/2114

3 of 4

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

Report No T/20180809/2114

CONTINUATION OF REPORT

Driver		ID No.		S1539970H	
Name	Lam Siew Foo			Contact No.	-
Related Vehicle	SHA4517A (Taxi)			Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Hospital/Clinic	NIL			Date Treatment	NIL
No. of Days granted Medical Leave			NIL	Date Discharge	NIL
			Degree of Injury	NIL	

Brief Details.

On 08/06/2018 at about 1008hrs, I was driving my vehicle bearing registration number: SGY7368D along Serangoon Road towards Potong Pasir at lane 3. The taxi bearing registration number: SHA4517A which was in front of me was seen overtaking one bus along bus lane and make a left turn into Jalan Taman. As the bus was trying to move off, the taxi then jammed break and I managed brake on time. One vehicle bearing registration number: SGJ8781R which was behind me banged onto my rear causing my vehicle inched forward. It resulted my front left bumper hit onto the taxi rear right bumper. My passenger and I alighted from my vehicle to check what had happened. As I felt pained on my head, neck and back as such I called for ambulance. My passenger then assisted me to check the damage by taking photo and identity of the other two drivers. The taxi sustained scratches on the rear right bumper, my vehicle sustained dent on front left bumper and the rear bumper while the last vehicle sustained front bumper crack and loose with the number plate broken. The other drivers did not complain of any pain. Ambulance and Traffic Police arrived at scene shortly. My passenger and I felt pained as such ambulance conveyed us to Tan Tock Seng Hospital. My passenger was issued with 2 days medical leave and I was issued with 3 days medical leave. I would like to state that the last vehicle and the taxi had a in car camera while my in car camera was faulty. I believed that the bus camera captured the incident however I did not managed to take down the bus service number. That is all.



**SINGAPORE
POLICE FORCE**



T/20180609/2114

4 of 4

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2989999

Report No. T/20180609/2114

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:

A /

Sr Staff Sgt THAM KOK LEONG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI NORASHIKIN BINTE DAUD

Contact No.: 65476439

Signature Of Informant:

Date/Time:

09/06/2018 17:21

Classification Of Case:

Authentication Stamp

NP108



Signature

Singapore Police Force

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business
Owner ID: 3734C

Vehicle Details

Vehicle No.: SGY7368D
Vehicle to be Exported: No
Intended De-registration Date: 11 Jun 2018
Vehicle Make: HONDA
Vehicle Model: JAZZ 1.4A
Primary Colour: White
Manufacturing Year: 2007
Engine No.: L13A54002992
Chassis No.: JHMGD18507S228404
Maximum Power Output: 60.0 kW (80 bhp)
Open Market Value: \$13,611.00
Original Registration Date: 08 Oct 2007
First Registration Date: 08 Oct 2007
Transfer Count: 3
Actual ARF Paid: \$14,973.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 30 Sep 2022
COE Category: A - Car (1600cc & below)
COE Period(Years): 5
PQP Paid: \$22,041.00
COE Rebate Amount: \$18,967.00
Total Rebate Amount: \$18,967.00

Message

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 11 Jun 2018

OK