ASŞ. REC. BY		REF. CS3 LF	218012069	71gd3ez	tion:
Surveyor	A 1		MENT (Office)	182 182	
From (Person		of	LPC	Date/Lim	3/7/2018 8
Estimated Co			Bill to		
OD (TP) W	S/TP RES/OD R	ES/EVA/INV/M	V7CS		
To Inspect Ve	chicle No:	SDK 26	62×	Insured: S	JR 8089D
at Workshop	in/s Lency	Yong Moto	r	Tel: 6265	59421
of	MUI AFG	Yong Moto	#01-28		
Policy No	J	J	Claim No:	12 18/18/V	pos/026725
Sum Insured.			Excess:	14 110 1101 4	202020402
Make of Veh: (Client's Record			DAVOS.	D.Q.A.	02/07/2018
CA / REV /	REP. / REV 24 I	IRS CAN		04/0	810c F
Date/Time 3	48pm@3/7/18	Person Contacte	Ms. See	Vehicle IN	LOUT
Date/Time		(X) Estimo			
	3DK 2663		14E		
	31R 80891				
		after paint			
02/1/18	Suprast PA				
2/01/2	survert 11	()			

ASS, REC. BY: Twith REF: LPC	397 X
	SIGNMENT
Estimated Cost: On (P) WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: SDK 2662 × at Workshop m/s Leng Yong Motor of 27A jurong Port Rd # 01-28 Insured:	Veh No: SDK 2662X Yr Regn: 2011 Feels. Type: (A. Gar / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or Make: Nissan Temp c.c 1992 Colour Silver A/C: Insured / Std / NI / NA Sp. Reading 76952 T/Radio: Insured / Std / NI / NA Eng/No:
Policy No.	C/No: JN/BD43322009587
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder/ Jammed / Leaked / Burnt or
Make of Veh: Ms-See @ 62659421	Modi: Nil / S/R)m / STD A/Rim or Tyre Size: F: 215 60 61.
(Dellar Condition)	Tyre Size: F: 215 60 C/1 -
(Policy Condition) Remark: The veh had commenced its 1 N/S 0/S	7
repair at the time of inspection.	TOYO / YORD OF
Bal. or Market Value:	Front Rear
DAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm
est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 4/7/18 P/2
um Sum: % 3 Val.: Yes or No	Survey held at Leny your New for
CA / REV / REP. / 24 HRS 147)	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OU Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	The O/C / Chassis frame / Body Structure anected due to comsion.
RECEIVED 0 2 AU	9 2018
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
1) 07/8 AND : Final Report Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee: 450
2) Add Fe	
	: Interview (\$) Photos
Report Format:	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$: Weekend (\$
	TOTAL 450



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

LON	IPAC INSURANCE	BHD	Ref : CS3/LPC1801:	2069/T1ad3	
		. 5115			
	BEACH ROAD		Date: 03-07-2018		
#17-	-04/07 THE CONC	OURSESINGAPORE 199555			
			Code: LPC2	14-X	
1.			:- (THIRD PARTY CLA		
	Insured Veh.	SJR 8089D	Veh. Inspected	SDK 2662X	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	17/18/18/VP05/020725	Excess (\$)	0.00	
	Assign From	GERALD POH	Assign Date	03/07/2018	
2.		Vehicle Parti	culars & Condition		
	Make & Model		c.c	0	
	Engine No.	HIDDEN	Year of Reg.		
	Chassis No.		Colour Steering		
	Odometer	•			
	Brakes		Modification		
	General				
3.		Condit	ions 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.		Descripti	on of Damages		
5.		Genera	I Information		
	Accident Date	02/07/2018	Inspection Date		
	Survey held at	LENG YONG MOTOR WORKS	HOP		
		27-A JURONG PORT ROAD #01-28 JTC IND SERVICE CENTRE			
		SINGAPORE 619101			
5a.		R	emarks		
	B) THE REPAIR E	ON WAS CONDUCTED ON A "W STIMATE WAS NOT PRESENTED AS TOLD TO PREPARE THE ES	O AT THE TIME OF INSPE		



LONPAC INSURANCE BHD(S98FC5635C)

300 Beach Road #17-04/07 The Concourse Singapore 199555 Tel No.62507388 Fax No.62962706

To

03-07-18:14:49

: Ms Nivitha

Date

: 3/7/2018

Company

: LKK Auto Consultants Pte Ltd

Fax No

: 62564315

From.

: Gerald

No.of pages

Our Ref

: 17/18/18/VP05/020725

Your Ref

If copies are not well received, please call us immediately

ACCIDENT INVOLVING SJR8089D & SDK2662X ON 2.7.2018

We refer to the above accident.

We enclose a copy of the third party 's fax dated 3 July 2018 for your attention.

Kindly proceed to conduct a pre-repair survey accordingly.

Yours faithfully

Gerald Poh

Senior Executive (Claims)

Email: mt_claim@lonpac.com



883 North Bridge Road #19-05 Southbank Singapore 198765 T: 6292 5838 F: 8292 5938 (UEN No. 201333127N) (GST Reg No: 201333127N)

Our Ref

03-07-18:14:49

CY(LY)SDK2662X(hh)

Please email to helen@yoga-legal.com

Your Ref

Your insured vehicle SJR8089D

3rd July 2018

Lonpac Insurance Berahd The Motor Claims Department 100 Beach Road #19-00 Shaw Towers Singapore 189702



BY FAX (62963767 / 62962706)

Dear Sirs

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION ACCIDENT INVOLVING SDK2662X & SJR8089D ON 02/07/2018 @ 08:35 HRS ALONG ENTRANCE OF BUKIT BATOK POLYCLINIC

We refer to your email of even date.

Please be informed that we are not agreeable to your proposed motor surveyors. Instead we propose M/s, Precision Appraisal Services to conduct a Pre-Repair inspection.

Please be informed that the said vehicle can be inspected at:

Name of workshop

M/s. Leng Yong Motor Workshop

Address

27A Jurong Port Road #01-28

Contact person

JTC Industrial Service Centre, Singapore 619101

Miss See

Telephone number

62659421

Fax number

62657834

Please be informed that if we do not hear from you within 2 working days from the date hereof, we will assume, as per the Protocol, that you have no objections to our abovenamed motor surveyor you will be deemed to have agreed as a "single joint expert".

If you object to our motor surveyor, we will accordingly inform the claimant to instruct their choice of motor Surveyor to conduct the pre-repair survey.

Yours faithfully,

For Surveyor

Please initial here after completion of pre-repair inspection. Thank you.

Name:

c.c. client , Ang Jing Cai

Bignature:

c/o M/s. Leng Yong Motor Workshop

Date & Time of Pre-repair inspection:

Confidentiality & Privilege: This message is intended for the recipient to whom it is addressed. It may contained confidential or privileged information, if you are not the intended recipient, please notify the sender immediately by replying to this message and then delete it from your system. Do not read, copy, use or circulate this communication. Disclaimer: Mail/Fax/Internet communications are not secure. While every reasonable affort has been made to ensure that this communication has been accuracy transmitted and not been tampered with. C. Yogarajah LLC cannot be responsible for alternations made to the contents of this message without its express consent. If you wish to receive a hard copy of this communication for comparison or should you require any other form of confirmation of this contents of this measage, please contact the sender. Opinions, conclusions and other information in this message, that do not releas to the official business of the firm shall be understood as neither given nor endorsed by C. Yogarajah LLC Advocates & Solicitors. Thank you.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	9247A
Vehicle Details	
Vehicle No.:	SDK2662X
Vehicle to be Exported:	No
Intended De-registration Date:	02 Aug 2018
Vehicle Make:	NISSAN
Vehicle Model:	TEANA 2.0L CVT ABS D/AIRBAG 2WD
Primary Colour:	Silver
Manufacturing Year:	2010
Engine No.:	MR20944599A
Chassis No.:	JN1BDUJ32Z0001587
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$26,097.00
Original Registration Date:	28 Feb 2011
First Registration Date:	28 Feb 2011
Transfer Count:	0
Actual ARF Paid:	\$26,097.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Feb 2021
PARF Rebate Amount:	\$15,658.00
Intended COE Rebate Details	
COE Expiry Date:	27 Feb 2021
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$64,900.00
COE Rebate Amount:	\$16,090.00
Total Rebate Amount:	\$31,748.00

The information contained herein is correct as at 02 Aug 2018

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

A C C				
AUU		IT STAT	-101	CNI
	Appropriate the last of the la			

Date Of Report

03/07/2018 09:37

Date Of Accident

02/07/2018 08:35

Exact Location Of Accident

ENTRANCE OF BUKIT BATOK POLYCLINIC

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SDK2662X

Insured/Policyholder

Name Of Registered Owner

ANG JING CHAI

NRIC No

S2549247A

Email Address

JCANGRIB@GMAIL.COM

Mobile Phone No

(LOCAL) +65-96656998

Alternative Phone No

OFFICE-96656998

Vehicle Particulars

Manufacturer

NISSAN

Model

TEANA

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE USE

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5053161948-06

Cover Note Number

Driver

Name of Driver ANG JING CHAI

NRIC No S2549247A Date Of Birth 23/03/1952 Occupation INDOOR

Date Of Driving Pass 20/06/1983

Driving Experience 35 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96656998

Fax Number

Contact Number OFFICE-96656998

EMail Address

JCANGRIB@GMAIL.COM

Address

9 HUME AVE

#02-01

Postcode

598722

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 - MAJOR/MINOR RD

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

MATERIAL AND STREET

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:

: GOH LI KIANG

GENDER:

: FEMALE

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 ATTACHED STATEMENT. PASSENGER FOR VEHICLE B IS JEILANI (FATHER OF THE DRIVER). HIS CONTACT NUMBER 81891569. HIS DAUGHTER WAS THE DRIVER

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

SJR8089D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

PRIVATE CAR

NEIGH

NA

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Belijt Bartok West Ale 3.
1
<i>→</i>
30
4
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT DESCRIBE CIRCUMSTANCES OF THE ACCIDENT DESCRIBE CIRCUMSTANCES OF THE ACCIDENT DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
(BBPC) - travelling along Britis Batok West Ave 3.
Keeping on the left lane to turn into polydinic,
but saw a stationary car just before the entrance of
the clinic. It's hazard light was on, and a man was alighting. the stationary
As I don't have any idea how long the car is going to stop there,
So, I changed lane to turn into the clinic. There Suddenly vehicle B moved and hit my
car on the front left passenger side.
got down wanted to take the particulars and
accident scene photos, but the diver was adviced
by the alighted they father) to drive off. the gave me
this particulars but his daughter's (who was the
ps. notice the road (BBWAre3) has a double-yellow line.
I/We declare the foregoing particulars are true in every respect.
Mur
Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Timer (If driver is not the policyholder) Name:
2/7/18 12:11 pm Date & Time: NRIC/FIN No.:

Sketch Plan

a shriawa

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all Insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); anti/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:
 - 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:

2/7/18 12:11 pm

Driver's Signature (If driver is not the polloyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.



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

ON	DAC INCLIDANCE	9 /// Walleto VIDA SOR SOR SOR	Ref: CS3/LPC1801206	D/T1ad2a2
LONPAC INSURANCE BHD 300 BEACH ROAD #17-04/07 THE CONCOURSE SINGAPORE 199555				
			Date: 03-08-2018	
<u> </u>		Code: LPC2		
1.		Policy Particular	s :- (THIRD PARTY CLAIN	1)
	Insured Veh.	SJR 8089D	Veh. Inspected	SDK 2662X
	Policy No.		Coverage (\$)	0.00
	Claim No.	17/18/18/VP05/020725	Excess (\$)	0.00
	Assign From	GERALD POH	Assign Date	03/07/2018
2.		Vehicle Par	rticulars & Condition	
	Make & Model	NISSAN TEANA	c.c	1997
	Engine No.	HIDDEN	Year of Reg.	2011
	Chassis No.	JN1BDUJ32Z0001587	Colour	SILVER
	Odometer	76952 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Cond	litions of Tyres	WHELE YELLOW IN
		Size	Make	Balance
	R/H Front Tyre	215/60 R16	YOKOHAMA	6 mm
	L/H Front Tyre	215/60 R16	YOKOHAMA	6 mm
	R/H Rear Tyre	215/60 R16	YOKOHAMA	6 mm
Т	L/H Rear Tyre	215/60 R16	YOKOHAMA	6 mm
4.		Descrip	tion of Damages	
	THE VEHICLE SU	USTAINED DAMAGES AT THE N/S BODY.		
5.		Gene	ral Information	
	Accident Date	02/07/2018	Inspect Date / Time	04/07/2018 (12:50 PM)
	Survey held at	LENG YONG MOTOR WORKSHOP		
		27-A JURONG PORT ROAD # JTC IND SERVICE CENTRE S		
5a.			Remarks	
	B) THE REPAIR E THE REPAIRER V	ON WAS CONDUCTED ON A "V STIMATE WAS NOT PRESENTE VAS TOLD TO PREPARE THE E EASE FIND DAMAGED VEHICL	ED AT THE TIME OF INSPECT STIMATE.	

Report Ref No. CS3/LPC18012069/T1qd3e2

Inspected By

prefine

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A
Automotive Assessor

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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