s REC.BY	REF:	CS/AWA18013576/RIQU	3 special harmedian
om (Person) Hu	1566) whee Fong	ASSIGNMENT (Office)	Date/Times 24/7/1604.08pm
Cost Cost Cost Cost Cost Cost Cost Cost	RES/OD RES/EV	A/INV/MV7CS	Insured: Tel: 6773 7377
Mill Million vo.	ppsB0426	Hong & Credit Rd East #01-67 6041706 Claim No:	\$1557361/BT \$500.00 (maived) \$00.00 23/07/2016
Date/Time: 5.2		Person Contacted. 11000	25 7 18 H.O.D. Endorsement:
06/11/80	ction/Instruction (SJS 57 36 J 1230pu coah CREN \$ 1031,	-x med with Michael	L5 & 2500, 6 days.

ASSIGNMENT

From:	Date: 350	810cP	Veh No			Yr Regn: 200		745
Estimated Cost:			_		/ Van / Lorry	/ Taxi / Prime Mo	ARI I	
TP WS TP RES	OD RES / EVA / INV / MV		Truck	/ Trailer or	1	21/1		
To Inspect Vehicle No:	573 57362		Make.	Hyunon	y grown	1€ 1.6A ==	159	l
at Workshop m/s	Wah Hong		Colour	ción		A/C: Insured /	Std / Ni	INA
of	36 Joh Guan Rd	FCS+ #01-57	Sp.Reading	110110)	T/Radio: Insured	Std / N	1 / NA
Insured			Eng/No:	VALUE	Luca	u801378		
Policy No.			C/No:			+-001210		
Claims No.		112.41	The state of the s	Good Fall Po		urnt or		
Sum Insured:	Excess.	Waikd		rde / Jammed				
(Client's Record)				order / Jammed		urnt of		
Make of Veh:			Modi: Nil	S/Rim / STD		11		
			Tyre Size:	F:	185	65RIS		
(Policy Condition)				R:	٠	•		
Remark. The veh had o		N/S O/S	BS / DUN / F	EXNOVA / GY /	FS / LIZA N	HON OHTSU / PIR	/ SUMI	1
repair at the t	time of inspection.		TOYOTYC	KO or				
Bal, or Market Value:	13K		Front	_		Rear	_	
IDAC Accident Rport:	Consistent? : Yes	s or No	R/Bal.	5	mm	R/Bal.	>	mm
GIA / PR Seen:	Consistent? : Yes	s or No	L/Bal.	5,	mm	L/Bal.	5,	mm
Est. Repairs:	6 days Res.: Yes	s or No	D.O.A. 3	23/07/18		D.O.I. 25	07/18	,
Lum Sum:	% 3 Val.: Yes	s or No	Survey held	at	WAH IT	on4	1	
CA/I REV / REP.	O.	1	Des. of Dan	nages Fro / Re	ear / O/S /	N/S / U/C / Roo	ftop or	
Date:	Person Contacted:	Vehicle: IN / OUT	The U/C	/ Chassis fra	me / Body S	Structure affected	due to	collision.
	on / Instruction							
	_							
Date/Time, File Pass to?	: Preli. Report		Days Of R	epair:	6			
1) 06 9 Aux 49 Date/Time, File Return to?	: Final Report		Resurvey	No. of Trip:		Survey Fee: Transportation		40
2)		Add Fe	e: Sit	e Insp (\$)S+RSS		
		22	Inte	erview (\$) Photos		
Report Format :	OD	*	Te	ch. Invs (\$) Others		
Lump Sum / I.D.1	(S 7500):	- V//«	sekend (\$)		
	1150/		Name and A			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

ALL	IED WORLD ASSU	JRANCE COMPANY LTD	Ref : CS/AWA18013	576/R1qd3		
60 A MAF	IGAPORE BRANC ANSON ROAD #08 PLETREE ANSON GAPORE 079914		Date: 26-07-2018			
			Code: AWA			
1.		Policy Partic	ulars :- OWN DAMAGE			
	Insured Veh.		Veh. Inspected	SJS 5736J		
	Policy No.	AVPPSB0426041706	Coverage (\$)	0.00		
	Claim No.	SJS5736J/BT	Excess (\$)	500.00		
	Assign From	HEW LEE FONG	Assign Date	26/07/2018		
2.		Vehicle Par	rticulars & Condition			
	Make & Model		c.c	0		
	Engine No.	HIDDEN	Year of Reg.			
	Chassis No.		Colour			
	Odometer		Steering			
	Brakes		Modification			
	General					
3.		Cond	litions 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.		Descrip	otion of Damages			
5.		Gene	eral Information			
	Accident Date	23/07/2018	Inspection Date	25/07/2018		
	Survey held at	WAH HONG & CREDIT PTE				
	•	38 TOH GUAN ROAD EAST #01-57 ENTERPRISE HUB SINGAPORE 608581				
5a.			Remarks			

Nivitha (LKK Auto)

			경 및 경상 및	75 75 752	
From:	Hew L	eeFong	<leefong.hew@awac.com></leefong.hew@awac.com>	on behalf	of Motorsurvey

<Motorsurvey@awac.com>

Sent:

Tuesday, 24 July 2018 4:08 PM

To:

'assignments'

Cc:

'SUR'

Subject:

OD survey assignment for SJS 5736J - DOA: 23/07/2018 Our Ref: SJS 5736J/BT

The above captioned accident refers. Please conduct an "OWN DAMAGE" survey on the following:

	nsured Vehicle		SJS 5736 J				
	Policy Number		AVPPSB0426041706		Account Code:	A466SD0	
	Policy Excess		\$ 500.00	(Allied World waived \$ 500.00) (Insured to pa		(Insured to pay \$ 0.00)	
٧	oluntary Excess		\$ NA	NA (No waiver)			
	Sum Insured		Market Value	with COE & PA	RF		
	Make / Model		Hyundai HD	Avante 1.6 A / 20	009		
Na	ame of Workshop		Wah Hong Motors & Credit Pte Ltd				
Contact Number			6773 7377				
Person to Contact			Michael Tee				
Estim	ated Cost of repairs		\$ 3,778.17				
(x)	Please take photog vehicle is equipped	graphs	of the front wir		om inside to ascerta	in whether the insured	
(×)	Please authorize re	epair c	on lump sum bas	sis			

Regards, Claims Division

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail

in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

Shiau Chan (LKKAuto)

From:

Michael Tee <michael@wahhong.sg>

Sent:

Thursday, 6 September 2018 12:30 PM

To:

Shiau Chan (LKKAuto)

Cc:

SUR

Subject:

Re: FINALISE OF VEHICLE SGZ 152S (FWD-OD) & SJS 5736J (AWA-OD)

OK SGZ 152A (FWD) FOR LUMP SUM AT \$9,950.00 Before Excess & GST and 9 Days Repair Days And SJS5736J (AWA) FOR LUM SUM AT \$2,500.00 Before GST and 6 Repair Days

On 6 Sep 2018, at 11:40 am, Shiau Chan (LKKAuto) < siewsc@lkkauto.com > wrote:

Dear Michael,

WITHOUT PREJUDISE

SGZ 152A (FWD) – Offer Lump Sum \$9,950.00 before excess \$2,500.00 & GST and 9 repair days; SJS 5736J (AWA) – Offer Lump Sum \$2,500.00 before GST and 6 repair days.

Kindly confirm.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>siewsc@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933) MWHM18095456 / Wah Hong Motors & Credit Pte Ltd - HO ENTRY DATE & TIME: 24/07/2018 13:08 SUBMITTED BY: Sunny Tee Nam Sang

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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.

ACC	DENT	CTAT	r = m	EΝ	ш
ACC	DEN	2	-11		

Date Of Report 24/07/2018 13:08

23/07/2018 15:30 Date Of Accident

ALONG CHANGI ROAD TOWARDS PIE / KAKI BUKIT Exact Location Of Accident

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

SJS5736J Vehicle Registration Number

Insured/Policyholder

LEE KET CHING Name Of Registered Owner

S00904891 NRIC No

KCL2641@HOTMAIL.COM Email Address (LOCAL) +65-97861149 Mobile Phone No OFFICE-97861149 Alternative Phone No

Vehicle Particulars

HYUNDAI Manufacturer

AVANTE-1.6 (A) Model

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

Are you claiming under your own insurance policy

YES for repair to your vehicle?

If No, Please state action to be taken

PRIVATE CAR Vehicle Category

Insurance Company

ALLIED WORLD ASSURANCE COMPANY, LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

AVPPSB0426041706 Policy Number

Cover Note Number

Driver

LEE KET CHING Name of Driver

S0090489I NRIC No 17/01/1954 Date Of Birth INDOOR Occupation

21/06/1974 Date Of Driving Pass

44 YEARS AND 1 MONTH Driving Experience

MALE Gender

(LOCAL) +65-97861149 Mobile Number

Fax Number

OFFICE-97861149 Contact Number

KCL2641@HOTMAIL.COM **EMail Address**

BLOCK 411 WOODLANDS STREET 41 Address

#12-33

730411 Postcode

Was driver an employee of the Insured's Company NO

OWNER 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

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions

DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

2 Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

NO

2

: LEE KET TONG

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

Please refer to the attached Sketch Plan and the accident details

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

SKZ2448L

Vehicle Make/Model/Colour

PORCHE WHITE

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

CHIN LEE KIAN

NRIC/Passport Number

S7400119Z

Contact Number

96889632

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE



- 1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for effling,
- 2. Please report correctly the details of the accident to speed up the claims process.
- 3. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 4. 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.
- 5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

6. Any laise reporting may be referred to the Traffic Police Dep	artment for investigation.		
ACCIDENT STATEMENT			
Date and Time of Accident	Date: 24/1/2018 Time: 4/100 3:30 pm		
Exact Location of Accident	Along changi Road		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	E STS 5736I.		
INSURED / POLICYHOLDER (OWN VEHICLE)			
Name of Registered Owner (See Insurance Cert.)	LEE KET CHING		
Personal Identification - NRIC (Singaporean/PR)	800904891		
- FIN/Passport Number			
- Not Applicable			
VEHICLE PARTICULARS (OWN VEHICLE)			
Vehicle Make / Model	Manufacturer Hywadan Model Quanto 1.69		
Type of Vehicle*	Saloon MPV ORV Van Lorry Bus Mycycle Others.		
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?	くいしない Yes No (If No,PIs select: ○ Third Party ○ Reporting)		
Vehicle Category*	Private Commercial Motorcycle		
INSURANCE COMPANY (OWN VEHICLE)			
Name of Insurance Company *	DUIS World		
Type of Policy	Comphensive		
Fleet Policy	O Yes Q No		
Policy Number	NV8628045PO 4120P		
Motor CI			
DRIVER	Same as Insured above		
Name of Driver	Lee Ket ching		
Personal Identification - NRIC (Singaporean/PR)	5 00904891		
- FIN/Passport Number	1011		
Date of Birth	17 dd/ 01 mm/ 54 /yy		
Driving Date Pass	21 dd/ 06 mm/74 /yy		
Year of Driving Experience	لولو Year(s) \ Month(s)		
Occupation	Indoor Outdoor		
Gender	du Os		
	Male Female		

Sketch Plan Pg. 2

Address of Driver	BLK 41, Woodland St 41
	" 12-33 Postcode (72041)
Email Address	Kel 2641@ hot mail. wm
Was driver an employee of the Insured's Company?	O Yes O No
If No, Relationship of the Driver with the Insured	,
Vehicle Registration Number of Driver's Own	Ø Yes ○ No
Vehicle Registration Number of Driver's Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Collision (Eg. Chain collison, Head-On collision, Side Swipe, Front to Rear)	Head to Rear
Weather Conditions	Oclear O Raining Others,
Road Surface	Ony O Wet Others
OTHER INFORMATION	,
Was any foreign vehicle involved in this accident?	O Yes O No
Was any body injured in the accident?	O Yes O No
Was any other vehicle or property damaged?	Yes No
Was there any video captured by Car Camera?	O Yes (V) No
Number of Passengers (Including Driver)	2 - Lee Ket Tong (Mole)
DETAILS OF POLICE ACTION	1 (10)
Was the Accident reported to the Police?	Yes No (If Yes, please state which Police Station.)
Police Station Name	
Police Station Address	
Police Station Contact	Tel No. Fax No.
Was notice of intended Prosecution given?	Yes No (If Yes, sgainst whom?)
DETAILS OF OTHER VEHICLE / PROPERTY 1	
Vehicle Registration Number	2KZ 2448L
Vehicle Make/ Model/ Colour	Porche public
Details of Properties	(0.000
Name of Driver	chin Lee Kian (chen Lijuan)
Personal Identification - NRIC (Singaporean/PR)	8 7400119Z
- FIN/Passport Number	7
Contact Number	9688 9632
Address	
Name of Insurance Company	
Nature of Damage	
No. of Passenger (Including Driver)	\
(Note - Please use page 6 if you need to add more vehicles)	

Sketch Plan Pg. 3

Details of Witness 1	
Name	
Phone	
Email Address	
Details of Witness 2	
Name	
Phone Front Address	
Email Address	
Details of Injured Person 1	
Name	
Address	
Approximate Age	
Injuries Sustained	
If vehicle occupants, state in which vehicle?	
Were seat belts worn?	○ Yes ○ No
Was injured conveyed to hospital by ambulance?	O Yes O No
Details of Injured Person 2	
Name	
Address	
Address Approximate Age	
Approximate Age	
Approximate Age Injuries Sustained	O Yes O No
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle?	○ Yes ○ No ○ Yes ○ No
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle? Were seat belts worn?	
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle? Were seat belts worn? Was Injured conveyed to hospital by ambulance?	
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle? Were seat belts worn? Was Injured conveyed to hospital by ambulance? Details of Injured Person 3	
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle? Were seat belts worn? Was Injured conveyed to hospital by ambulance? Details of Injured Person 3 Name	
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle? Were seat belts worn? Was Injured conveyed to hospital by ambulance? Details of Injured Person 3 Name Address	
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle? Were seat belts worn? Was Injured conveyed to hospital by ambulance? Details of Injured Person 3 Name Address Approximate Age	
Approximate Age Injuries Sustained If vehicle occupants, state in which vehicle? Were seat belts worn? Was Injured conveyed to hospital by ambulance? Details of Injured Person 3 Name Address Approximate Age Injuries Sustained	

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.
- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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.

Policyholder's Signature Date & Time	U20asy Driver's S Date & Ti	signature (if driver is not the policy holder) ime	Witness by Reporting Centre Personnel
Sketch Plan	Shell d		
Cy sombre	Servin Komous	Bus stop	H- 818 213P1
77.			B, SKI 14481
T	\longrightarrow	The state of the s	
C	wang. Ro	a.d.	Page 4

Describe Circumstances of the Accident

On July 23, 2018 at about 3.30 pm, I was driving my vehicle (A) bearing registration number SJS5736J along Changi Road towards PIE/Kaki Bukit

The traffic was slightly heavy and I was travelling on the 3rd lane following some vehicles in-front. When the vehicles started to more off, I started to move my vehicle however the vehicle (B) bearing registration number SKZ2448L which was in front me moved slowly and as a result my vehicle collided onto his rear bumper damaging its Number Plate.

As there was no injury to all parties, we exchange particulars as follows:

Third Party Vehicle No. SKZ2448L (B)

Name of Driver: Chin Lee Kian

Identity Card No: S7400119Z

Contact Number: 96889632

I have a passenger in my vehicle and he is Mr. Lee Ket Tong (Male)

Important note

Under General Condition - Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

Declaration

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

Policyholder's Signature

Driver's Signature (if driver is not the policy holder)

Personnel

Witness by Reporting Centre

Date & Time

Date & Time

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

04891

Vehicle Details

Vehicle No.:

SJS5736J

Vehicle to be Exported:

No

Intended De-registration

25 Jul 2018

Date:

Vehicle Make:

HYUNDAI

Vehicle Model:

HD AVANTE 1.6 A

Primary Colour:

Beige

Manufacturing Year:

2009

Engine No.:

G4FC9U680686

Chassis No.:

KMHDU41BR9U801378

Maximum Power Output: Open Market Value:

89.7 kW (120 bhp)

Original Registration Date:

\$11,224.00

25 Aug 2009

First Registration Date:

25 Aug 2009

Transfer Count:

0

Actual ARF Paid:

\$11,224.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

24 Aug 2019

PARF Rebate Amount:

\$6,173.00

Intended COE Rebate Details

COE Expiry Date:

24 Aug 2019

COE Category:

E - Open Category

COE Period(Years):

QP Paid:

\$10,046.00

COE Rebate Amount:

\$1,068.00

Total Rebate Amount:

\$7,241.00

The information contained herein is correct as at 24 Jul 2018

OK



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

wner ID Type:	Singapore NRIC
wher ID Type.	04891
	04071
/ehicle Details /ehicle No.:	SJS5736J
/ehicle to be Exported:	No
ntended De-registration Date:	25 Jul 2018
/ehicle Make:	HYUNDAI
/ehicle Model:	HD AVANTE 1.6 A
Primary Colour:	Beige
Manufacturing Year:	2009
Engine No.:	G4FC9U680686
Chassis No.:	KMHDU41BR9U801378
Maximum Power Output:	89.7 kW (120 bhp)
Open Market Value:	\$11,224.00
Driginal Registration Date:	25 Aug 2009
First Registration Date:	25 Aug 2009
Fransfer Count:	0
Actual ARF Paid:	\$11,224.00
ntended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Aug 2019
PARF Rebate Amount:	\$6,173.00
ntended COE Rebate Details	200Y DDZ DDDLAGO-MA
COE Expiry Date:	24 Aug 2019
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$10,046.00
COE Rebate Amount:	\$1,068.00
Total Rebate Amount:	\$7,241.00

The information contained herein is correct as at 25 Jul 2018

REPUBLIC OF SINGAPORE. IDENTITY CARD NO. S00904891





Name

LEE KET CHING

李克楨

Race

CHINESE

Date of birth

Sex

M

Country/Place of birth

SINGAPORE

17-01-1954

S00904891

5599559







Date of issue

27-04-2016

Address

APT BLK 411 WOODLANDS STREET 41 #12-33 SINGAPORE 730411

REPUBLIC DES DRIVING LICENCE

Licence Number: \$00904891

Name:

LEE KET CHING

Birth Date: 17 Jan 1954

Issue Date: 02 Oct 2003



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 21 Jun 1974



NP 428A

CERTIFICATE OF INSURANCE

MXI

R SB

A466SD0

Cov. Type: C

KUKLYSB

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE

THE BOAD TRANSPORT ACT 1987 OF MALAYSIA

THE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975 THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (MALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED IS JANUARY 1968 ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

CERTIFICATE No.

AVPPSB0426041706

Chano: KMHDU41BR9U801378

1. Index Mark and Registration Number of Vehicle

SJS 5736 J

97861149

2. Name of Policyholder

LEE KET CHING

3. Effective Date of Commencement of Insurance for the purposes of the Ordinance

25 August 2017

24 August 2018

kel 2641 @ hofmail, com

4. Date of Expiry of Insurance

5. Persons or Classes of Persons entitled to drive* (For certificate references MX1 and MX4, see overleaf)

A. THE POLICYHOLDER.

THE POLICYHOLDER MAY ALSO DRIVE A MOTOR CAR NOT BELONGING TO OR HIRED (UNDER A HIRE PURCHASE AGREEMENT OR OTHERWISE) TO HIM OR TO HIS EMPLOYER OR HIS PARTNER.

B. ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to Use^a (For certificate reference MX1, see overleaf)

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER :

1. USE FOR HIRE OR REWARD.

2. USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.

3. USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.

4. USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Estimated Value : MARKET VALUE WITH COE/PARF

Hire Purchase Owner :

Type of Cover : Comprehensive

Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor-Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

I/WE HEREBY CERTIFY that the policy to which this certificate relates is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and The Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Republic of Singapore)



mined fly

Name: LEE KET CHING

Address: Blk 411 Woodlands Street 41 #12-33 Singapore 730411

Policy Number:

AVPPSB0426041706

Quotation for Reinstste / Repairs for vehicle

Date :

24/7/18

Vehicle No:

SJS5736J

Parts Replacement - Cost Price

	The second
ost	Price
C 10 22 1	11100

1 Pc	Front Support Panel		S	350.00 CRA /
1 Pc	Front Bonnet		S	360.00 Buy
1 Pc	Front R/H Bonnet Hinge		\$	35.00
1 Pc	Front Bonnet Lock		\$	45.00 181
1 Pc	Front Bumper		S	260.00 TURN
1 Pc	Front R/H Side Bumper Retainer		S	23 00 × 500
1 Pc	Front L/H Side Bumper Retainer		\$	23.00 per
1 Pc	Front Grille Base		\$	220.00
1 Pc	Front L/H Headlamp	Doerel	\$	255.00
1 Pc	Front L/H Fender	Kusuc	S	100 00 24
1 Pc	Front Grille Chrme	1. 000 100 14	S	115.00 7
1 Pc	Air Duct	Ap 90010068	\$	95.00 CRA-
		6 daws		aft)

EXCER: waived

Authorised

Reary afor april's

1,961.00

MISC & Labour & Charges

remove & replace all the parts mentioned above knocking straighten up 1 job

necessary affected

spray painting on affected areas 1 job

S 720.00 G

Labour's Total: \$ 1.570.00

3,531.00 Sub-Total: \$ GST 7%: S 247.17

Grand Total: \$ 3,778.17

Thank You Your Faithfully,

Michael Tee

Wah Hong Motors & Credit Pte Ltd

Tel: 6773 7377 Fax: 6896 6321

Email: michael@wahhong.sg

LKK Auto Consultants hence notify

- To resurvey before/after spray painting To display damaged part(s) during resurvey
- · Parts prices are subject to confirmation
- Third party survey is on a "Without Projudice" 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



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			
ALLIED WORLD ASSURANCE COMPANY LTD	Ref :	CS/AWA18013576/R1qd3s2	

(SINGAPORE BRANCH)

60 ANSON ROAD #08-01 (8th FLOOR)

Date: 06-09-2018

	LETREE ANSON APORE 079914		Date: 00-03-2010	
5,140	OIL 0/0014		Code: AWA	
1.		Policy Partic	culars :- OWN DAMAGE	
	Insured Veh.		Veh. Inspected	SJS 5736J
	Policy No.	AVPPSB0426041706	Coverage (\$)	0.00
	Claim No.	SJS5736J/BT	Excess (\$)	500.00
	Assign From	HEW LEE FONG	Assign Date	24/07/2018
2.		Vehicle Pa	articulars & Condition	
	Make & Model	HYUNDAI AVANTE 1.6 A	c.c	1591
	Engine No.	HIDDEN	Year of Reg.	2009
	Chassis No.	KMHDU41BR9U801378	Colour	GOLD
	Odometer	110110	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	FAIR		
3.		Conc	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	185/65R15	MICHELIN	5 mm
	L/H Front Tyre	185/65R15	MICHELIN	5 mm
	R/H Rear Tyre	185/65R15	MICHELIN	5 mm
	L/H Rear Tyre	185/65R15	MICHELIN	5 mm
4.		Descri	ption of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE F	FRONT PORTION.	
	DAMAGES SEE DETAILS.			
5.		Gene	eral Information	
	Accident Date	23/07/2018	Inspection Date	25/07/2018
	Survey held at	WAH HONG & CREDIT PTE	LTD	
		38 TOH GUAN ROAD EAST #01-57 ENTERPRISE HUB SINGAPORE 608581		
5a.			Remarks	
	A)THE MARKET V B)IN ACCORDANG	ALUE IS S\$13,000.00(EST. AV CE TO YOUR INSTRUCTIONS	(ERAGE) , WE HAVE AUTHORISED F	REPAIRS.
5b.		Estima	ate Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	6 Working Da	ys



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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJS 5736J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT SUPPORT PANEL	CRACKED	350.00	350.00
1	FRONT BONNET	BUCKLED	360.00	360.00
1	FRONT R/H BONNET HINGE	BENT	35.00	35.00
1	FRONT BONNET LOCK	BENT	45.00	45.00
1	FRONT BUMPER	TORN	260.00	260.00
1	FRONT R/H SIDE BUMPER RETAINER	SERVICEABLE	23.00	
1	FRONT L/H SIDE BUMPER RETAINER	NECESSARY	23.00	23.00
1	FRONT GRILLE BASE	CRACKED	220.00	220.00
1	FRONT L/H HEADLAMP	CRACKED	255.00	255.00
1	FRONT L/H FENDER	BENT	180.00	180.00
1	FRONT GRILLE CHRME	SERVICEABLE	115.00	
1	AIR DUCT	CRACKED	95.00	95.00
			1,961.00	1,823.00
	LABOUR			0
	REMOVE & REPLACE ALL THE PARTS MENTIONED ABOVE KNOCKING STRAIGHTEN UP NECESSARY AFFECTED.		850.00	750.00
	SPRAY PAINTING ON AFFECTED AREAS.		720.00	600.00
			1,570.00	1,350.00
	GRAND TOTAL		3,531.00	3,173.00

RECOMMENDED COST OF LUMP SUM REPAIRS	2,500.00
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)	2,50

Report Ref No. CS/AWA18013576/R1qd3s2

MOHAMMED RASUL BIN MOHD YUNUS

ADRIAN LING WAI PING

Automotive Assessor

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

Licensed Appraiser

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