Turyour - MUNNIN	Naz	ASSIGN	18014046/NZ4d	302 mid the reprine
From (Person Estimated Co		of	CTI Bill to	DeterTime 18118 0 4:54pm
To Inspect V		SU 404	la lus	ared (\$17.4746H)
of	ashoow F	8 parago os Ave 104	01-10	Tel 9नेवन 6477
Sum Insured	MPCSN 3009	131800	Claim No: SNI Excess:	n18003732C02
Make of Veli (Client's Recer	il)	Longe		D.O.A. 30 07 2018
CA / REV Date/Time	1 KEP. / REV 24 H 0: >60m0>(6)	RS (UP) (C Person Contacte	Edward	Vehicle IN JOUT
Date/Time	Action/Instruction SM 4041J ST 4746		te	

. Surreupe N92 REF:	8
	SSIGNMENT
From: Date:	Veh No: SJJ YoY J Yr Regn: Sep (Poop) Type: M.Car J M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover)
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: HONDA STREAM C.C 1799
at Workshop m/s	Colour PED A/C: (nsured) Std / NI / NA
of	Sp.Reading 306 340 T/Radio (Insured) Std / NI / NA
Insured:	Eng/No:
Policy No.	CINO: DBA - RN6 -
Claims No.	Gen. Cond: Good (Fair / Poor / Burnt
Sum Insured: Excess:	Steering (norder+Jammed / Leaked / Burnt or
(Client's Record)	Brake: (Inorder/ Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 215/45 R17
(Policy Condition)	R: 1)
Remark: The veh had commenced its N/S O/S	BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent? ; Yes or No	L/Bal. C mm L/Bal. C mm
Est Repairs: S days Res.: Yes or No	D.O.A. D.O.I. 2/9/18
Lum Sum: % 3 Val.: Yes or No	Survey held at 8 PARAGON
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
The state of the s	Pe \$15,000 - \$19,000
	1 11 11 11 11
	homite
	29/8/208
	1
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
	Resurvey No. of Trip: Survey Fee: (5)
Date/Time, File Return to?	Transportation;
Add Fee	: Site Insp (\$)_s+Rs_si
	: Interview (\$) Photos
Report Format :	: Tech, Invs (\$) Others
Lump Sum / I.B.I: (\$:Weekend (\$
	TOTAL IGD

...CLAIM SUBFOLDER...(New Assignment)

Case	Notified	Est Submitted	Ad) Assigned	Alt: Rot	Adj Sol	bettim:	Ins Auth'ed	Status	
Main	31 Jul 2018		01 Aug 2018 16:54 Assign					New Ass Cancel C	ignment ase
	Main	Re	ference		Claim Details		Docume	nts	Show All
CLAIM S	UBFOLDER DE	TAILS				[Creat	ed by insurer]		
Insured:	THAM KE	ANG YEN, ID: 57	7211982G						
Main Claimant:	AZWIN IS	SKANDAR HAIRO	N						
Vehicle Re No.;	g. SJJ4041	SJJ4041J			Date of Loss:	30/07/2	0/07/2018 17:00 - :59		
Claim Type	: TP / SNM18D03732C02			Policy/Cover Note No.:	DMPCSN3009131800 (Comprehensive)				
Vehicie Re No. (Insured):	SLT47461	4			Policy No. (Claimant):				
					Excess:	5\$0.00			
Repairer:	8 Paragor	n Pte Ltd (HQ) 71	WOODLANDS A	VE 10 #01-	10 WOODLANDS	INDUST	RIAL XCHANGE, 73	37743 Woodla	nds - Tel:
Handling Insurer:	China Tai	ping Insurance (Singapore) Pte	Ltd. (HQ)	- Tel: 6389 611	1 [Har	ndled by Irene Ta	y Hul Ping -	638986192]
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Final Rpt	due 13/	(08/2018]		
Adj Asg. Remarks:	NO EST, CA	ASE W/O SJE.							
ASSOCIA	TED MAIL RE	CEIVED						View All C	Compose Case Ma
There are	no mail for this	case.							
ALL ASS	OCIATED TAS	KS⊟				View A	III Search Tasks	Create New	Task Complet
Due Dat	COLUMN TO STATE OF THE STATE OF	Type Task	Group Subj	ect Han	dler Assign	ned By	Completed O		ed On Done

CHIAS ARUL LLC

ADVOCATES & SOLICITORS UEN201330709H

ARULCHELVAN S . A. RAVIDASS

Our ref:

SJJ 4041 J (Iz)

Your ref:

SLT 4746 H

31 July 2018

China Taiping Insurance (Singapore) Pte Ltd Singapore

Dear Sirs.

NOTICE TO INSURANCE TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION PROTOCOL FOR NIMA CASE

ACCIDENT INVOLVING MOTOR VEHICLES SJJ 4041 J AND SLT 4746 H ON 30 JULY 2018

We act for owner of motor vehicle SJJ 4041 J which has appointed us to act on his behalf to claim against your insured's vehicle no. SLT 4746 H in regards to the road traffic accident on 30 July 2018.

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

8 Paragon Pte Ltd 72 Woodlands Avenue 10 #01-10 Woodlands Industrial Singapore 737743

Kindly contact Mr Edward at 9794 6477 to make the necessary arrangements.

If you fail to conduct the pre-repair inspection 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,

MR ARULCHELVAN S



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

CH	INA TAIPING INSU	RANCE (S) PTE LTD	Ref : CS3/CTI18014	046/Nz4d3			
	NSON ROAD #16-0 RINGLEAF TOWER	00 RSINGAPORE 079909	Date: 02-08-2018 Code: CTI				
1.		Policy Particula	rs :- (THIRD PARTY CLA	IM)			
	Insured Veh.	SLT 4746H	Veh. Inspected	SJJ 4041J			
	Policy No.	DMPCSN3009131800	Coverage (\$)	0.00			
	Claim No.	SNM18D03732C02	Excess (\$)	0.00			
	Assign From	MERIMEN (IRENE TAY)	Assign Date	02/08/2018			
2.		Vehicle P	articulars & Condition	A A STATE OF THE S			
	Make & Model		c.c	0			
	Engine No.	HIDDEN	Year of Reg.				
	Chassis No.		Colour				
	Odometer -		Steering				
	Brakes		Modification				
	General						
3.		Con	ditions of Tyres	SHE OF THE RESERVE			
		Size	Make	Balance			
	R/H Front Tyre			mm			
	L/H Front Tyre			mm			
	R/H Rear Tyre			mm			
	L/H Rear Tyre			mm			
4.	LIEVEN OF THE	Descri	ption of Damages				
5.							
	Accident Date		eral Information	0010010040			
_	Survey held at	30/07/2018	Inspection Date	02/08/2018			
	Survey neid at						
5a.	Geografia -		Remarks	Control of the last of the las			
	B) THE REPAIR ES THE REPAIRER W	ON WAS CONDUCTED ON A STIMATE WAS NOT PRESENT AS TOLD TO PREPARE THE EASE FIND DAMAGED VEHIC	"WITHOUT PREJUDICE" BAS TED AT THE TIME OF INSPE ESTIMATE.	SIS. CTION.			

MSYH18099482 / Sin Yew Hup Auto Pte Ltd - HQ ENTRY DATE & TIME: 01/08/2018 16:05 SUBMITTED BY: Lim Jing Yee

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 01/08/2018 16:46

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.

ACCIDENT STATEMENT

Date Of Report 01/08/2018 16:05 30/07/2018 17:00 Date Of Accident

CTE 300M BEFORE YIO CHU KANG EXIT Exact Location Of Accident

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

SLT4746H Vehicle Registration Number

Insured/Policyholder

THAM KEANG YEN Name Of Registered Owner

NRIC No S7211982G Email Address NOEMAIL

Mobile Phone No. (LOCAL) +65-93832330

Alternative Phone No Office-93832330

Vehicle Particulars

Manufacturer MERCEDES-BENZ

Model E200

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

THIRD PARTY If No. Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

DMPCSN3009131800 Policy Number

Cover Note Number

Driver

Name of Driver THAM KEANG YEN

S7211982G NRIC No 03/04/1972 Date Of Birth OUTDOOR Occupation 14/12/1994 Date Of Driving Pass

E-FILE 8/7/2018

23 YEARS AND 7 MONTHS Driving Experience

MALE Gender "

(LOCAL) +65-93832330 Mobile Number

Fax Number

OFFICE-93832330 Contact Number

NOEMAIL EMail Address

BLK 55 EDGEDALE PLAINS #08-12 Address

828679 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 Road Surface DRY

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) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : THAM HOCK ZHONG

> Gender: : Female

Passenger 2 Name: : LIU QINGLEI

> : Female Gender:

> > Female

Passenger 3 : GU LAY MEE Name:

Gender:

Details of Police Action

Was the accident reported to the police? YES

If Yes Please state which Police Station

HOUGANG NEIGHBOURHOOD POLICE CENTRE Police Station Name

ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE Police Station Address

TEL NO: 1800-4890999 - FAX NO: 63128989 Police Station Contact

NO Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO DOCUMENTS ATTACHED.

Attachment(s)

E-FILE 8/7/2018

Are accident photos available for attachment? YES NO Was there any video captured by Car Camera?

NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHB5928K

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJJ4041J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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2/ 3

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the dains process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as trushful and accurate as possible. Any wilful misrepresentation or withholding of material
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 5. 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
- 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
- Consent under the Personal Data Protection Act (FDPA)

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)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or deating with my instructions or responding to any enquiries by mes
 - (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
- (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 Purposas; and
- my Personal Information may/can be disclosed by any of the Insurers and/or SIA 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.
- my Personal information will also be collected and used to compile claims history for the purpose of fraud detection,
- (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.

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

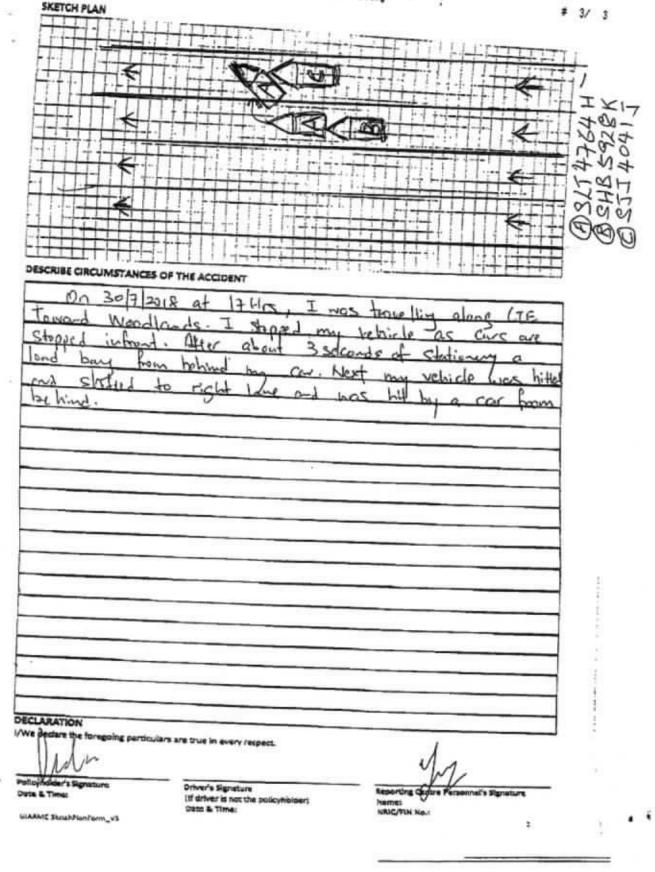
Reporting Carry

GIARMS SimulationSmin VI

Sketch Plan #2

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Police Station Of Origin:

Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

1 of 3 Report No. T/20180731/2014

Date/Tim	e Report M 18 02:24		Vide Report No.: F/20180730/0178	Station Diary No. 23		
Informa	it's Particu	dars		了这种的地位,只有一种一种		
Name of Informant: THAM KEANG YEN			Address: APT BLK 55 EDGEDALE PLAINS #08-12 SINGAPORE 828679			
ID Type / ID No.: NRIC NO / S7211982G			Contact No.: Home/Office: Mobile: 93832330			
Nationality: SINGAPORE CITIZEN		Email:				
Sex: Age: Date of Birth: Male 46 03/04/1972		Type of Informant: Driver				
Race: Chinese		Language:	institution / School Name:			
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:			

Seneral Inform	mation of the Accident	NOTE SHAPE SHAPE		AND DESIGNATION OF THE PERSON	
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/07/2018 16:35	Type of Location Flyover	
CTE(SLE) 14	XPRESSWAY	Road Surface:		Road Speed Limit:	
Weather: Clear		Dry		20	
Traffic Flow: Tra		Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Colli Between Mo		Anyone conveyed by ambulance: No			

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SHB5928K	Car				Seriously Damaged	1
SJJ4041J	Car				Slightly Damaged	3
SLT4746H	Car	MERCEDES BENZ	E 200	Blue	Seriously Damaged	

Details of Vehicle Insurance	BUILD OF STREET		Of the Court of the Court
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date

POLICE REPORT





Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

2 of 3 Report No. T/20180731/2014

CONTINUATION OF REPORT

	ehicle insurance		MITS-U. The	III STEP UN
Vehicle No.	Insurance Company	Insurance No	Effective	Expery Date
SLT4746H	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.	DMPCSN30091318	30/01/2018	29/01/2019

Details of Perso Any Pedestrian I		100			Walte.		
No. of Pedestrian			Use of Per	destriar	Cross	ing: NA	
Driver		September 1980		C. Maria	01000	HINGS THE STREET	
Name	THAM KEANG YEN			ID No		S7211982G	
Related Vehicle	SLT4746H (Car)			Contact No.		93832330	
Hospital/Clinic	RAFFLES HOSPITAL			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	30/07/2018 Date I			harge	_	72018	
No. of Days gran	ted Medical Leave	03	Degree of				

Brief Details.

On 30/07/2018 at about 1630hrs, I was on my back home driving my vehicle bearing license plate number: SLT4746H along CTE(SLE). During that point in time, it was heavy traffic as such the traffic was moving very slowly that eventually came to a stop. Suddenly, I felt a huge impact from the rear of my vehicle and that's where I realized that one taxi bearing license plate, SHB5928K had collided with the rear of my vehicle. I made a check with the passengers on board and everyone seem to be okay. We all alighted from the vehicle and that was where I saw my vehicle was badly damaged. Someone else called ambulance for us and I insisted on calling the traffic police.

Moments later, traffic police arrived at scene to make a check. They interviewed all involved parties and provided me with a case card and advised me to lodge a traffic police report. My domestic helper who was in the vehicle informed paramedics at scene that she was feeling unusual pain and was conveyed via ambulance. Myself and the remaining passengers all followed the tow truck back to the workshop as my vehicle was unable to operate anymore. It was back at the work shop where they informed me that my vehicle was very badly damaged.

Subsequently, I start to feel pain on my upper back, right elbow and left leg and as such I decided to make a visit to the doctor where I was subsequently given 3 days worth of MC.

As such, I made my way to Hougang NPC to lodge this traffic accident report. I wish to inform that I do not have any in-vehicle camera on board of my vehicle.

POLICE REPORT





3 of 3 Report No. T/20180731/2014

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

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 F / Sgt 2 KOH YEW WEI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 31/07/2018 02:24
Officer in Charge Of Case: TP / GIT / SI YEO CHUN JIAN Contact No.: 65476213	Classification Of Case:
Authentication Stamp	Cipm and Section 200

CERTIFICATE OF INSURANCE

CERTIFICATE OF INSURANCE

Page 1 01 4



CERTIFICATE No.	DHLCRK3008737800	Engine Ho :X7186330372447 Charsis No:WEQ2130482A538744
Index Mark and Registration Number of Vehicle	SUT4746H	
2. Name of Policy Holder	PEAK HEARS YEN	
Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Ensormans		HAMED DRIVERS BE SECT. E
4. Data of Expiry of Insurance	29 JAHUARY 2019	EX DECY. 1 - ARE <- 2x
5. Parsons or Clasess of Persons entitled to drive "		RX OH NINDOCRAFA
(A) THE COLICINATES.		
(B) ANY OTHER PERSON WHO IS DRIVING OF	THE POLICYMOLOGI	'S CADER OR WITH HIS PERHISSION.
ARGULATIONS TO DRIVE THE MOTOR VEHICLS	OR HAC BEEN BO	MANCE NITH THE LICEMENNE ON OTHER LAWS ON SENSITED AND IS NOT DISCOLLIFIED BY GADER OF A SELECTION THAT BEHALF FROM DRIVING THE MOTOR VEHICLE.
6. Elementums us to uso: " USE FOR ESCIENT, DOMESTIE AND PERAGURA THE POLICY DOES NOT COVER USE FOR HIME THAN SPRIN-THEN, "TOO CANELAGE OF DR USE FOR ANY PURITOD IN CONSECTION Y	OM NEWARD TUTTED	H DATYING TEST BACTHG PACE-HARING, HHLIAHILLYY SAMPLES IN COMMISSION WITH ANY TRACK OR HUSINESS
ENCESE WHICHEVER IS APPLICABLE FOR LOS		SINGAPONE (CONGTRUCTIVE TOTAL LOGS/THEFT)
WIFE HAVER OF EXCESS FOR THE FIRST ONE TIME HAVER OF EXCESS FOR THE FIRST OF UMB SAMACE CLAIM AT OUR ASSESSED		PLY TO THE INSURED AND MOMED DRIVERS IN THE EVENT R POLICY YEAR.
HUNE PUNCHAGE CO. : TUNED CENTURE LEAS **Limitations randoms incomercing by Section	ING (8) PTE LYO	s (Third-Perly Risks and Compansation) Act (Chapter 189)

I/We hereby Certify that the policy to which this Certify provisions of the Motor Vehicles (Third-Perly Risks and Compensatio Road Transport Act, 1867 (Makryala) y to which this Certificate relates is issued in accordance wit fix and Componestion) Act (Chapter 182) and Part IV of the

For CHINA TAIPING INSURANCE (BINDAPORE) FTE. LTD.

Terry's Office 38 Parkwy Avenue *04-02 \$467034 Tel/WatsApp : 9127 8514

Countersigned By:

Aumprised Officer

3 Anson Road #18-00 Springleaf Tower Singapore 070909 Tel: \$389 8111 Fax: 6225 3592 Website: www.ag.orsalping.co

http://sgportal.cntaiping.com//chinainsB2B/Spool/AN0584A-SLT4746H-DMPCSN300... 30/1/2018 PAGE. 2 ATLANTIC AUTOMOBILE 31.07.2018 12:42 61186069

RECEIVED 13/08/2018 02:18

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

Fax Number Contact Number EMail Address

Gender

- 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 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.

- 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

	ACCIDENT STATEMENT
Date Of Report	31/07/2018 13:53
Date Of Accident	30/07/2018 16:30
Exact Location Of Accident	ALONG CTE TWDS SLE
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJJ4041J
Insured/Policyholder	
Name Of Registered Owner	AZWIN ISKANDAR BIN HAIRON
NRIC No	S8308199F
Email Address	SAUDADE_18@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81820721
Alternative Phone No	OTHERS-81820721
Vehicle Particulars	
Manufacturer	HONDA
Model	STREAM-1.8 RSZ (A)
Exact Purpose for which vehicle was being used at time of accident	PTE 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	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPC17S013804
Cover Note Number	11/09/17 - 10/09/18
Driver	
Name of Driver	AZWIN ISKANDAR BIN HAIRON
NRIC No	S8308199F
Date Of Birth	28/02/1983
Occupation	INDOOR
Date Of Driving Pass	03/06/2008

10 YEARS AND 1 MONTH

(LOCAL) +65-81820721

SAUDADE 18@YAHOO.COM

MALE

Address

BLK 848 WOODLANDS ST.82 #07-173

Postcode

730848

OWNER

Was driver an employee of the Insured's Company NO

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

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

YES

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

5

Passenger 1

NAME:

: WIFE

: FEMALE

Passenger 2

NAME:

: SON

GENDER:

GENDER:

: MALE

Passenger 3

NAME:

: DAUGHTER

GENDER:

: FEMALE

Passenger 4

NAME:

: DAUGHTER

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station Police Station Name

WOODLANDS EAST N.P.C

Police Station Address

ROAD: 3 WOODLANDS DRIVE 63, POSTCODE: 737890, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

SD CARD WITH TRAFFIC POLICE

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLT4746H

Vehicle Make/Model/Colour

BLUE MERC BENZ E200

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

THAM KEANG YEN

NRIC/Passport Number

S7211982G

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SHB5928K

Vehicle Make/Model/Colour

TOYOTA PRIUS SMRT TAXI

Details Of Properties

Vehicle Category

TAX

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

HILWA BINTE MOHAMED(WIFE)

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SJJ4041J

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

SON

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SJJ4041J

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

Sketch Plan

SKETCH PLAN

VEHICLE NO .: 513 40413

INSURER : ERE

DATE & TIME: 36 7118 @ 16-30

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 wriful 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.
- 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)

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 insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' Jawyers/Jaw 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); 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 lewyers/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
 - (iii) 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:

NRIC/FIN No.:

Sketch Plan #2

KETCH PLAN	. 4.1.4.1.1.1	
1	1414 1414	A= S30 40413
		8= SLT4746H
		C: 5HB 59×8K
Refer to Po	S OF THE ACCIDENT	T/2018 0731/2053
under your own co		ne Frame for you to submit an Own Damage Claim
licyholder's Signature ite & Time:	Driver's Signature (if driver is not the policyholde Date & Time:	According Contro Forward's Signature Name: (\\S)
	laim Own Policy () Claim Thir Claim OE/TP at other workshop ()	d Party () Reporting Only





Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999 1 of 3 Report No. T/20180731/2053

REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made: Vide Report No.: Station Diary No. 31/07/2018 12:30 133 Name of Informant: Address: AZWIN ISKANDAR BIN HAIRON APT BLK 848 WOODLANDS STREET 82 #07-173 SINGAPORE 730848 ID Type / ID No. Contact No. NRIC NO / \$8308199F Home/Office: Mobile: 81820721 Nationality Email: SINGAPORE CITIZEN Sex Age Date of Birth Type of Informant Male 35 28/02/1983 Driver Race: Language Institution / School Name Malay Occupation: Driving Licence Information: Technician Class: 2,3 Date of Expiry:

Type of Accident:	Injury Conveyed By Ambula	Drink Drive: No	Date/Time of Accident 30/07/2018 16:3	Type of Loca Straight Roa	
Location: Along Road 1 CENTRAL EX SELETAR EX	70 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
Classic		Road Surface Dry		Road Speed Limit	
Traffic Flow: Traffic		Traffic Control Not Controlled		Traffic Volume: Moderate	
Type of Collis	ion: ing Vehicles - Side Swipe -			Anyone conveyed	

Details of V	Petails of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passence	
SHB5928K	Car	TOYOTA	PRIUS TAXI (SMRT)			0	
SJJ4041J	Car	HONDA	STREAM 1.8 RSZ A	Red		4	
SLT4746H		MERCEDES BENZ	E 200	Blue		0	

Details of Vehicle Insu	rance	STREET, STREET, S. O.	A STATE OF THE PERSON NAMED IN	
Vehicle No. Insurance	Company	Insurance No	Effective	Expiry Date





Police Station Of Origin Woodlands East N.P.C.

2 of 3 Report No. T/20180731/2053

3 Woodlands Drive 63 SINGAPORE 737890 Tel No. 1800-7679999

CONTINUATION OF REPORT

Details of V	shicle Insurance	Application of the	STATE OF THE PARTY OF	
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SJJ4041J	SHC INSURANCE PTE. LTD.	DMPC17S013804		
			000000000000000000000000000000000000000	15,25,52,16

Details of Perso Any Pedestrian I		40	-	38	56	-
No. of Pedestrian			Use of Peo	destriar	Cross	ing NA
Driver		-100-1	AFFE SUP	Townson,	The same	CONTRACTOR OF THE PARTY OF THE
Name	AZWIN ISKANDAR BIN HAIRON			ID No		S8308199F
Related Vehicle	SJJ4041J (Car)			Conta	ct No.	81820721
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 2.3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	The state of the s		
Driver		The state of			-	
Name	THAM KEANG YEN			ID No		S7211982G
Related Vehicle	SLT4746H	SLT4746H		Contact No.		NIL
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class NIL Date of Expiry NIL
Date Treatment	NIL		Date Disc	the second second	NIL	
No of Days gran	ted Medical Leave	NIL	Degree of			

Brief Details.

On the above mentioned date and time, I was driving along CTE towards SLE on lane 1. I was driving SJJ4041J. While driving. I briefly saw a taxi (SHB5928K) hit onto the rear of a car (SLT4746H) on the second lane. Due to the impact, SLT4746H swerved to his right side and hit on the left side of my vehicle. applied brakes during the impact. My car swerved slightly to the right and hit onto the divider. There was damages on the whole left portion of my vehicle and few scratches and dents on the front right side of my vehicle. 2 of my passengers mainly, my wife (Hilwa Binte Mohamed) and my son was conveyed by ambulance. My son received 2 days of mc.





Police Station Of Origin: Woodlands East N.P.C 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999 3 of 3 Report No. T/20180731/2053

CONTINUATION OF REPORT

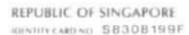
Sketch Plan

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 Reco J / Sgt 2 MUHAMMAD SYAM MOHD MASHARUDIN		Signature Of Informant	
Signature Of Interpreter. Not applicable	7	Date/Time: 31/07/2018 12:30	
Officer in Charge Of Case TP / GIT / SI YEO CHUN JIAN Contact No: 65476213	e.	Classification Of Case:	
Authentication Stamp	(9)	SN 130	
	Singapore Po		

IC & DL







AZWIN ISKANDAR BIN HAIFON

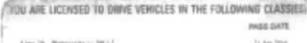
MALAY JR. 02 1963 M

SHIGAFORE









Fine 1 Management and E Fine 2 Management - Ambiguity - Appendix colonical 1 No. 200 2 No. 200 2 No. 200

AP COS

1.7 No. 9000078771

Accident Photo















> Back to OneMotoring

Enqu	IFO	FORCE	O.F.	-00
		11 41151		

Vehicle Details			
Vehicle No.	5JJ4041J		
Vehicle Type:	P10 - Passenger Motor Car		
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme:	Normal		
Vehicle Make:	HONDA		
Vehicle Model:	STREAM 1.8 RSZ A		
Chassis No.:	RN61077370		
Propellant:	Petrol		
Engine No.:	R18A1786055		
Engine Capacity:	1799 cc		
Maximum Power Output:	103.0 kW (138 bhp)		
Maximum Laden Weight:	1755 kg		
Unladen Weight:	1370 kg		
Year Of Manufacture :	2008		
Original Registration Date :	11 Sep 2008		
Lifespan Expiry Date:			
COE Category :	B - Car (1601cc & above)		
Quota Premium:	\$13,890.00		
COE Expiry Date :	10 Sep 2018		
Road Tax Expiry Date:	10 Sep 2018		
PARF Eligibility Expiry Date:	10 Sep 2018		
Inspection Due Date :	10 Sep 2019		
Intended Transfer Date	29 Aug 2018		
CO2 Emission :	-		
CO Emission :	3		
HC Emission:	*		
NOx Emission :			
PM Emission:			
Late renewal fee(s) will be impose	ed if road tax / lay up has expired. Please use Enqui	re Road Tax Payable for fee(s) pays	ible.
Road tax, including Over Paymen Amount Payable	t (if any), of a vehicle will follow the vehicle to the	new registered owner when its own	ership is being transferred.
a management of the state of th	Amount Before GST	GST Amount	Amount After GST

	Amount Before GST (5\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00		25.00
Total Amount Payable :			25.00

You may print this page for reference.

OK Print

Merimen e-Claims Page 1 of 1

...CLAIM SUBFOLDER...(Pending for Survey Report)

LAIM SUB	FOLDER TRA	CKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status		
Main	31 Jul 2018		01 Aug 2018 16:54 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case		
	Main	R	eference	Claim De	tails	Documents		Show All	
CLAIM SU	BFOLDER D	ETAILS			[Created	by insurer]			
Insured:	THAM KE	ANG YEN, ID: S	7211982G		110				
Main Claimant:	AZWIN I	SKANDAR HAIRO	IN						
Vehicle Reg No.:	SJJ404	1.3		Date of		8 17:00 - :59 hs and 19 Days Fr	om LTA Reg D	ate (Man Yr)]	
Claim Type	TP / SN	TP / SNM18D03732C02			over DMPCSN30	DMPCSN3009131800 (Comprehensive)			
Vehicle Reg No. (Insured):		SLT4746H			o. nt):				
				Excess:	S\$0.00	1035100			
Repairer:	8 Parago	n Pte Ltd (HQ) 7	1 WOODLANDS AVE	10 #01-10 WOODL	ANDS INDUSTRIAL	L XCHANGE, 73774	3 Woodlands -	Tel:	
Handling Insurer:	III COMMONICO	Marie Control of the		td. (HQ) - Tel: 638					
Adjuster:	13/08/2		Ltd (HQ) - Tel: 62	56-3561 [Handle	d by Muhammad	Nazril Bin Abdul	lah][Fina	Rpt due	
Adj Asg. Remarks:	NO EST, O	CASE W/O SJE.							
ASSOCIAT	TED MAIL RE	CEIVED				Vie	w All Comp	ose Case Mail	
There are n	o mail for this	case.							
ALL ASSO	CIATED TA	sks ⁼			View All	Search Tasks C	reate New Task	Complete	
Due Dat No results.	e Priority	Type Task	Group Subject	t Handler	Assigned By	Completed On	Created	On Done?	

Merimen e-Claims Page 1 of 4

Claim Documents

*SJJ4041J (SNM18D03732C02)

[SLT4746H]

TP

AZWIN ISKANDAR HAIRON
Jul 30 2018 5:00PM

[THAM KEANG YEN]

8 Paragon Pte Ltd

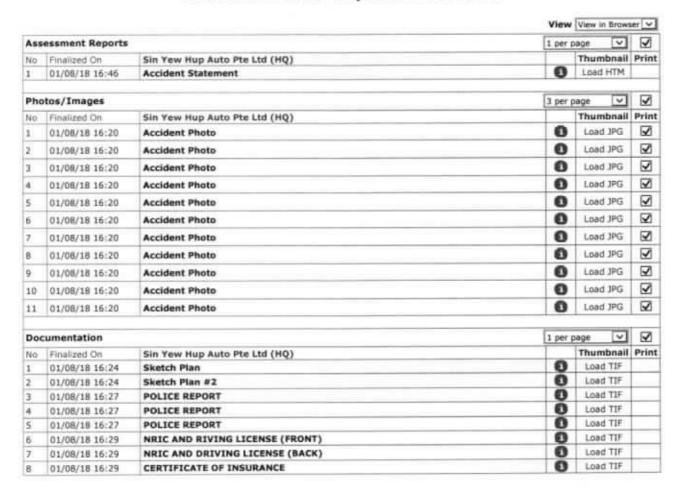
Ass	essment Reports		1 per p	age V	V
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1	01/08/18 16:46	Accident Statement	0	Load HTM	
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3	01/08/18 16:20	Accident Photo [Linked Accident Report Documents]	0	Load 3PG	☑
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9	01/08/18 16:20	Accident Photo [Linked Accident Report Documents]	0	Load JPG	Ø
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11	01/08/18 16:20	Accident Photo [Linked Accident Report Documents]	0	Load JPG	V
No.	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	
1	04/08/18 01:13	General View	0	Load JPG	V
2	04/08/18 01:13	General View	0	Load JPG	V
3	04/08/18 01:13	General View	0	Load JPG	S
4	04/08/18 01:13	General View	0	Load JPG	V
5	04/08/18 01:13	General View	0	Load JPG	V
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8	04/08/18 01:13	General View	0	Load JPG	W
9	04/08/18 01:13	General View	0	Load JPG	~
10	04/08/18 01:13	General View	0	Load JPG	2
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12	04/08/18 01:13	General View	0	Load JPG	V
13	04/08/18 01:13	General View	0	Load 3PG	2
14	04/08/18 01:13	General View	0	Load JPG	V
15	04/08/18 01:13	General View	0	Load JPG	50
16	04/08/18 01:13	General View	0	Load JPG	V
17	04/08/18 01:13	General View	0	Load JPG	2
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Ass	essment Reports		1 per pi	age V	V
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24	04/08/18 01:14	General View	0	Load JPG	Y
25	04/08/18 01:14	General View	0	Load JPG	V
26	04/08/18 01:14	General View	0	Load JPG	✓
27	04/05/18 01:14	General View	0	Load JPG	V
28	04/08/18 01:14	General View	0	Load JPG	Z
29	04/08/18 01:14	General View	0	Load JPG	V
30	04/08/18 01:14	General View	0	Load JPG	V
31	04/08/18 01:14	General View	0	Load JPG	V
32	04/08/18 01:14	General View	0	Load JPG	Ø
33	04/08/18 01:14	General View	0	Load JPG	V
34	04/08/18 01:14	General View	0	Load JPG	V
35	04/08/18 01:14	General View	0	Load JPG	V
36	04/08/18 01:14	General View	0	Load JPG	V
37	04/08/18 01:14	General View	0	Load JPG	V
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42	04/08/18 01:14	General View	0	Load JPG	W
43	04/08/18 01:14	General View	0	Load JPG	V
44	04/08/18 01:14	General View	0	Load JPG	∀
45	04/08/18 01:14	General View	0	Load JPG	V
46	04/08/18 01:14	General View	0	Load JPG	V
47	04/08/18 01:14	General View	0	Load JPG	V
48	04/08/18 01:14	General View	0	Load JPG	V
49	04/08/18 01:14	General View	0	Load JPG	V
50	CONTRACTOR CONTRACTOR	General View	0	Load JPG	V
	04/08/18 01:14	General View	0	Load JPG	V
51	04/08/18 01:14	General View	0	Load JPG	V
52	04/08/18 01:14	General View	0	Load JPG	V
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58	04/08/18 01:14	General View	0	Load JPG	V
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60	04/08/18 01:14	General View	0	Load JPG	2
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62	04/08/18 01:14	General View	0	Load JPG	2
63	04/08/18 01:14	General View		LUBU JFU	36
Doc	cumentation		1 per p	age V	Z
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)		Thumbnail	-
1	01/08/18 16:24	Sketch Plan	0	Load TIF	
2	01/08/18 16:24	[Linked Accident Report Documents] Sketch Plan #2	0	Load TIF	_

Page 3 of 4 Merimen e-Claims

Assessment Reports		1 per	page V	V	
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)		Thumbnail	Print
3	01/08/18 16:27	POLICE REPORT [Linked Accident Report Documents]	0	Load TIF	
4	01/08/18 16:27	POLICE REPORT [Linked Accident Report Documents]	0	Load TIF	
5	01/08/18 16:27	POLICE REPORT [Linked Accident Report Documents]	0	Load TIF	
6	01/08/18 16:29	NRIC AND RIVING LICENSE (FRONT) [Linked Accident Report Documents]	0	Load TIF	
7	01/08/18 16:29	NRIC AND DRIVING LICENSE (BACK) [Linked Accident Report Documents]	0	Load TIF	
В	01/08/18 16:29	CERTIFICATE OF INSURANCE [Liriked Accident Report Documents]	0	Load TIF	
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	01/08/18 16:53	PRS	0	Load PDF	

Linked Accident Report Documents



Documents Checklist

DOCUMENTS CHECKLIST	Reset	5ave	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
			^

Merimen e-Claims Page 4 of 4

LKK Auto Consultants Pte Ltd (Co.Reg. No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS3/CTI18014046/NZ4D3E2

Date:

30/08/2018

REFERENCE

Handling Insurer:

China Taiping Insurance

(Singapore) Pte. Ltd.

Policy No:

DMPCSN3009131800

Claimant Vehicle

SJJ4041J

Insured Vehicle No:

SLT4746H

Date of Loss:

30/07/2018

Nature of Claim: TP

Claim No:

SNM18D03732C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

No:

SJJ4041J

Make & Model:

HONDA STREAM, 1.8 RSZ (A) 11/09/2008 (Man. Year: 2008)

Engine No: Chassis No: Odometer:

R18A1786055 RN61077370

306346 km

Reg. Date: Colour:

Engine Capacity: Market Value/New Car Price:

1799 cc N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

215/45 R17

Rear Tyre Size:

215/45 R17

Front Left Side:

Bridgestone 6 mm

Rear Left Side:

Bridgestone 6 mm

Front Right Side:

Bridgestone 6 mm

Rear Right Side:

Bridgestone 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:

01/08/2018

Date Inspected:

02/08/2018 Inspected At:

8 Paragon Pte Ltd (HQ)

71 WOODLANDS AVE 10 #01-10 WOODLANDS INDUSTRIAL XCHANGE

Singapore 737743

Estimated Period of Repair:

15.0 days

Adjuster:

Muhammad Nazril Bin Abdullah

Manager: Ho Zhao Tian

Adjuster Report Page 2 of 5

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

Adjuster Report Page 3 of 5

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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$15,000.00 -\$19,000.00

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REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 30 Aug 2018)

Parts: M1-MPV HONDA STREAM 1.8 RSZ (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SJJ4041J)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

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Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >