

ASS. REC. BY:

REF:

CS3/LPC/8014544 Ksd3

Special Instruction:

Surveyor:

GQ

ASSIGNMENT (Office)

From (Person):

Ong Li Li

of

LPC

Date/Time:

8/6/18 @ 3:24pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKH1213Z

Insured:

SJV 8599C

at Workshop m/s

Derrick Motor Works

Tel:

9633 3593

of

BLK9002 tempires st. 93 # 01-72

Policy No:

Claim No:

17/18/18/vp15/020807

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

4/6/18

CA / REV / REP. / REV 24 HRS

Lup

H.O.D. Endorsement:

Date/Time:

9:26am 6/6/18

Person Contacted:

Jeremy

Vehicle ☒ IN ☐ OUT

Date/Time

Action/Instruction (x) Estimate

SKH1213Z - CS/FCI 17006168/Kgh3n2

DOA: 25/3/17

SJV 8599C - CVI/VAL 18014329/BV

DOA: -

(02/11/13) wef

A&S. REC. BY:

REF:

LPC

ASSIGNMENT

From: Date: 10/8/18

Estimated Cost:

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

To Inspect Vehicle No: SKH 1213Z

at Workshop m/s

of 8169002, Tempires 81-93 # 01-72

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs: 21 days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

SKH 1213Z

Yr Regn:

21 Apr 2010

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Volkswagen Golf c.c. 1984

Colour:

Grey

A/C: Insured / Std / NI / NA

Sp. Reading

127927

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WUW 222 1K8 9W 551126

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

225/40ZR18

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal.

6 mm

R/Bal.

6 mm

L/Bal.

6 mm

L/Bal.

6 mm

D.O.A.

D.O.I.

10-08-18

Survey held at

w/s

11:40AM

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

Rear d/s

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

\$20K - \$25K.

Submit PRS report.

RECEIVED 15 AUG 2018

Date/Time, File Pass to?

☐

Preli. Report

1)

15/08/18

Typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

450

450

Report Format: PRS - TP

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

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

Weekend (\$)

Nivitha (LKK Auto)

From: ONG LI LI <llong@lonpac.com>
Sent: Wednesday, 8 August 2018 3:24 PM
To: Prestina Moh; assignments@lkkauto.com; Nivitha (LKK Auto)
Cc: MT_Claim_SG
Subject: RE: **PRE-REPAIR SURVEY** Our Ref: 17/18/18/VP05/020807
Attachments: 20180808150815.pdf

Without Prejudice
Save as to Costs

Dear Prestina

As spoken, you did not comply with the NIMA protocol to provide a list of at least 10 surveyors. Therefore, we urge you to use our surveyor as a Single Joint Expert.

We shall proceed to appoint our surveyor to conduct the survey, please let us have the workshop name and location.

Dear Nivitha

Please assign any of your surveyors to survey the TP vehicle.

Regards,
Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

From: Prestina Moh [mailto:prestinamoh@visionlawllc.com]
Sent: Wednesday, 8 August, 2018 3:10 PM
To: ONG LI LI; GERALD POH WEE BIN
Subject: **PRE-REPAIR SURVEY**

WITHOUT PREJUDICE
Our ref: SKH 1213 Z

Dear Sir/Mdm

Please refer to our reply as attached.

Regards,

Prestina Moh (Secretary)
Vision Law LLC
133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413
Tel: 6534-2811 (Ext. 146)
Fax: 6535-6802

VISION LAW LLC

Advocates & Solicitors

(Incorporated with limited liability)

Unique Entity No. 200721148H

Head Office: 133 New Bridge Road #18-01/02 Chinatown Point, Singapore 059413

Branch: 490 Lorong 6 Toa Payoh #03-11 HDB Hub (Biz 3 Lobby 1), Singapore 310490

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VISION LAW LLC

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Agents for Trade Marks
(Incorporated with limited liability)

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RAYNEY WONG KENG LEONG
AUDREY WONG SU-HSIEN
PAUL YAP TAI SAN
ANJALLI D/O MUNIANDY
SEGA PARAM
TIWARY ANURADHA
ONG BOCK KEE
DIANE ANG KIM NOI
RAVENDRA KRISHNASAMY
TAY HAO RAN
JANICE HAN JIA LIN
SELWYN TAN YINGXIAN

Unique Entity Number: 200721148H

✓ HEAD OFFICE

133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413

Branch: 490 Toa Payoh Lorong 6
#03-11 HDB Hub
Singapore 310490

✓ HEAD OFFICE

TEL : (65) 65342811 (Hunting)
FAX : (65) 65356802 (General)
✓ : (65) 65355905 (Litigation)
E-mail : yvonnelim@visionlawllc.com

BRANCH

TEL : (65) 63580703
FAX : (65) 63580448 (Conveyancing)

WHEN REPLYING PLEASE QUOTE OUR REFERENCE – PLEASE REPLY TO HEAD OFFICE FOR THIS MATTER

Our Ref : SKH 1213 Z (PM)
Your Ref : SJV 8599 C

08 August 2018

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

BY EMAIL ONLY

Dear Sirs,

**ACCIDENT INVOLVING MOTOR VEHICLE SKH 1213 Z & SJV 8599 C ON 04 AUGUST 2018 ALONG TAMPINES EXPRESSWAY AT ABOUT 0120 HOURS
(NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES)**

We refer to your email of even date whereby parties are not agreeable to each other's list of motor surveyors.

Under the circumstances, no Single Joint Expert has been agreed for this matter.

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

Messrs Derrick Motor Works
Blk 9002 Tampines St 93
#01-72, Tampines Ind Park A
Singapore 528836
Attention: Mr Jeromy – HP 9633 3593

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

JANICE HAN
(HEAD OFFICE)

cc: SKH 1213 Z – By email only

FOR SURVEYOR

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

Appointed surveyor :
(Name & Signature)

Date & Time of Inspection :

CONFIDENTIALITY

THE INFORMATION CONTAINED IN THESE DOCUMENTS MAY BE PRIVILEGED AND CONFIDENTIAL AND IS INTENDED FOR THE EXCLUSIVE USE OF THE ADDRESSEE DESIGNATED ABOVE. If you are not the addressee, any disclosure, reproduction, distribution or other dissemination or use of this communication is strictly prohibited. If you have received this transmission in error please contact us immediately by telephone so that we can arrange for its return.



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

LONPAC INSURANCE BHD

Ref : CS3/LPC18014544/Gsd3

300 BEACH ROAD
#17-04/07 THE CONCOURSE SINGAPORE 199555

Date : 10-08-2018



Code : LPC2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SJV 8599C	Veh. Inspected	SKH 1213Z
Policy No.		Coverage (\$)	0.00
Claim No.	17/18/18/VP05/020807	Excess (\$)	0.00
Assign From	ONG LI LI	Assign Date	10/08/2018

2. Vehicle Particulars & Condition

Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--	--

5. General Information

Accident Date	04/08/2018	Inspection Date	10/08/2018
Survey held at	DERRICK MOTOR WORKS BLK 9002 #01-72 TAMPINES ST 93 SINGAPORE 528836		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.
--

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	1266G
Vehicle Details	
Vehicle No.:	SKH1213Z
Vehicle to be Exported:	No
Intended De-registration Date:	13 Aug 2018
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	GOLF GTI 2.0L AT 5DR 5K19V3
Primary Colour:	Grey
Manufacturing Year:	2009
Engine No.:	CCZ013873
Chassis No.:	WVWZZZ1KZ9W551126
Maximum Power Output:	155.0 kW (207 bhp)
Open Market Value:	\$32,082.00
Original Registration Date:	21 Apr 2010
First Registration Date:	21 Apr 2010
Transfer Count:	2
Actual ARF Paid:	\$32,082.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Apr 2020
PARF Rebate Amount:	\$17,645.00
Intended COE Rebate Details	
COE Expiry Date:	20 Apr 2020
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$23,889.00
COE Rebate Amount:	\$4,027.00
Total Rebate Amount:	\$21,672.00

The information contained herein is correct as at 13 Aug 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

ACCIDENT STATEMENT

Date Of Report	06/08/2018 16:15
Date Of Accident	04/08/2018 01:20
Exact Location Of Accident	TAMPINES EXPRESSWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH1213Z
Insured/Policyholder	
Name Of Registered Owner	MATTHEW LIM JUN HO
NRIC No	S9211266G
Email Address	MATTHEWLIMJH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91398998
Alternative Phone No	OFFICE-91398998

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF GTI 2.0L AT 5DR 5K19V3
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA298018/1
Cover Note Number	28/11/2017-27/11/2018

Driver

Name of Driver	MATTHEW LIM JUN HO
NRIC No	S9211266G
Date Of Birth	01/04/1992
Occupation	INDOOR
Date Of Driving Pass	17/08/2011
Driving Experience	6 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91398998
Fax Number	
Contact Number	OFFICE-91398998
EMail Address	MATTHEWLIMJH@GMAIL.COM

Address	5 TANAH MERAH KECHIL ROAD
Postcode	466665
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	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	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : ONG QI WEI
	GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , 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 ATTACHMENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJV8599C
Vehicle Make/Model/Colour	ALFA ROMEO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	AMRAN
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

SHD3409U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

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

ONG QI WEI

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SKH1213Z

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

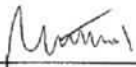
IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

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


I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

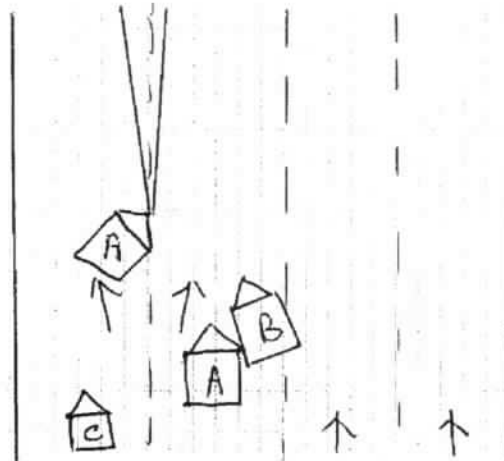
Driver's Signature
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN



A: SKH 1213Z
B: SV 8599C
C: SHD 3409U


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

<p>You have been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.</p>	Reporting Only
	Claim OD
	Claim TP
	<input checked="" type="checkbox"/> Claim OD / TP at other workshop

DECLARATION

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


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:



**SINGAPORE
POLICE FORCE**



T/20180806/7011

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 4

Report No. T/20180806/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/08/2018 15:45		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MATTHEW LIM JUN HO			Address: 5 TANAH MERAH KECHIL ROAD #05-06 SINGAPORE 466665		
ID Type / ID No.: NRIC NO / S9211266G			Contact No.: Home/Office: Mobile: 91398998		
Nationality: SINGAPORE CITIZEN			Email: matthewlimjh@gmail.com		
Sex: Male	Age: 26	Date of Birth: 01/04/1992	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Management consultant			Driving Licence Information: Class:		Date of Expiry:

General information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/08/2018 01:20	Type of Location: Straight Road
Location: TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD3409U	Car		Taxi	Blue		0
SJV8599C	Car	ALFA ROMEO		Black	Seriously Damaged	0
SKH1213Z	Car	VOLKSWAGO N	GOLF GTI 2.0L AT 5DR 5K19V3	Grey	Totally Damaged	1



**SINGAPORE
POLICE FORCE**



T/20180806/7011

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 4

Report No. T/20180806/7011

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SKH1213Z	AXA INSURANCE SINGAPORE PTE LTD	GA298018	29/11/2017	27/11/2018

Details of Person Involved			
Any Pedestrian Involved: No			
No., of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Frankie Yeung	ID No.	NIL
Related Vehicle	SHD3409U (Car)	Contact No.	97346998
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Driver			
Name	Amran	ID No.	NIL
Related Vehicle	SJV8599C (Car)	Contact No.	96912254
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Driver			
Name	MATTHEW LIM JUN HO	ID No.	S9211266G
Related Vehicle	SKH1213Z (Car)	Contact No.	91398998
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL



**SINGAPORE
POLICE FORCE**



T/20180806/7011

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 4

Report No. T/20180806/7011

CONTINUATION OF REPORT

Passenger			
Name	Ong Qi Wei	ID No.	S9133453D
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	04/08/2018	Date Discharge	04/08/2018
No. of Days granted Medical Leave	01	Degree of Injury	Serious

Brief Details.

I was traveling along TPE on the 3rd lane before Punngol exit when Vehicle SJV8599C swerve into my lane of travel and hit my Vehicle SKH1213Z at the front right portion pushing my vehicle into the divider crash barrier. Upon collision, my Vehicle SKH1213Z rear end spun out and was hit by oncoming Vehicle SHD3409U. Police was at the scene. Investigation Officer in charge is Lim Hong Lee DID 65476438.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20180806/7011

4 of 4

Report No. T/20180806/7011

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
MOHAMMED FADZLY BIN ABDUL AZIZ
Contact No.: 65476355

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
06/08/2018 15:45

Classification Of Case:



redefining / insurance

Date: 06/08/18

To: Owner of Vehicle Number: SKH 12132

The following has been advised to you via your workshop, staff, Jonathan



through their

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☒ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☒ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☒ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☒ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☒ The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- ☒ You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
- ☒ For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.
- ☒ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☒ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- ☐ Others _____

Signed and acknowledge by:

Name and signature of policyholder/authorised driver

Name and Signature of workshop personnel including company stamp



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo




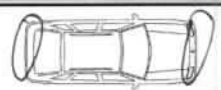
**LKK Auto Consultants Pte Ltd**

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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PRE-REPAIR INSPECTION REPORT				
LONPAC INSURANCE BHD		Ref: CS3/LPC18014544/Gsd3e2		
300 BEACH ROAD #17-04/07 THE CONCOURSE		Date: 16-08-2018		
SINGAPORE 199555				
Code: LPC2				
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SJV 8599C	Veh. Inspected	SKH 1213Z	
Policy No.		Coverage (\$)	0.00	
Claim No.	17/18/18/VP05/020807	Excess (\$)	0.00	
Assign From	ONG LI LI	Assign Date	08/08/2018	
2. Vehicle Particulars & Condition				
Make & Model	VOLKSWAGEN GOLF	c.c	1984	
Engine No.	HIDDEN	Year of Reg.	2010	
Chassis No.	WWWZZZ1KZ9W551126	Colour	GREY	
Odometer	127927 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	225/40Z R18	MICHELIN	6 mm	
L/H Front Tyre	225/40Z R18	MICHELIN	6 mm	
R/H Rear Tyre	225/40Z R18	MICHELIN	6 mm	
L/H Rear Tyre	225/40Z R18	MICHELIN	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT, REAR O/S AND UNDERCARRIAGE PORTION.				
5. General Information				
Accident Date	04/08/2018	Inspect Date / Time	10/08/2018 (11:40 AM)	
Survey held at	DERRICK MOTOR WORKS BLK 9002 #01-72 TAMPINES ST 93 SINGAPORE 528836			
5a. Remarks				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		21 Working Days		

Report Ref No. CS3/LPC18014544/Gsd3e2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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