

Surveyor

REF: C81 / LAW 180 16463 / G65

Special Instruction:

ASSIGNMENT (Office)

HS: \$ 6100.00

From (Person): Laura Ngiam of Khattar Wong Date/Time: 05/9/2018

Third Parties:

Estimated Cost: Bill to:

Claimant:

Surveyor: MC-WY Appraisers & Formteam

Workshop: H S Automotive

OD/TP Re-inspection / (Evaluation)

To Inspect Vehicle No: SJT 4592H Insured: YP 5879T

at Workshop m/s H S Automotive

of Blk 2 Kaki Bukit Ave 2 #02-25

Policy No: Claim No: PYK / LN / KW 00007-221

Sum Insured: Excess:

Make of Veh: D.O.A. 04.10.2017

(Client's Record)

SJE

H.O.D. Endorsement/Date:

Date/Time: Person Contacted: Vehicle IN / OUT

Date/Time: Confirmed with Final Fig, days (Red \$ / %; Original 8 days)

Date/Time: 18/9/18 Submit Final Fig 2950, 6 days (Red \$ 7150, 35%; Original 8 days)

Date/Time	Action/Instruction
	SJT 4592H - NA / Ach 17019015 / 24
	YP 5879T - X
	DEF: 04.10.2017
	RECEIVED 18 SEP 2018
	18/9/2018

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

Para(3) : Nett Value

Market Value : _____	Inspected/ Evaluated by:	Fee Charged:	Date:				
Salvage Value : _____		Basic & Add	<table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				
Nett Value : _____	Transport						
	Photos						
	Others						
	Total						

- 1) Date/Time _____ File Pass to _____
- 2) Date/Time _____ File Return to _____
- 3) Date/Time _____ File Pass to _____
- 4) Date/Time _____ File Return to _____
- 5) Date/Time _____ File Pass to _____
- 6) Date/Time _____ File Return to _____

Catherine Chong (LKK Auto)

From: Ngiam, Laura <LauraNgiam@witherskhattarwong.com>
Sent: Wednesday, 5 September, 2018 9:01 AM
To: 'Celine Fong (LKKAuto)'; assignments
Cc: Lin, Jasmine; 'juseq@singnet.com.sg'; 'NTUC Income Insurance Co_Operative _ Accident Involving SJT 4592H _ YP 5879T At 71 Pioneer Road O KW00007_2121 3_ Documents'
Subject: RE: (XING GUO QIANG APPOINTED AS SJE) MC SUIT NO. 1348 OF 2018 (Part 1/2) [W-KW.FID148391] [WVOV-KW.FID148394]
Attachments: McCoy survey report.nrl; FormTeam Survey report (2).nrl; FormTeam Survey report (1).nrl; Plaintiff_s GIA_pdf.nrl; Photographs depicting the damage to plaintiff_s motor vehicle.nrl; Defendant_s GIA report.nrl
Importance: High

Dear Celine / Catherine,

Thank you for your email.

Please find attached the following:

1. GIA report by driver of SJT 4592H;
2. GIA report by driver of YP 5879T;
3. McCoy Appraisers survey report;
4. Photographs of damage to SJT 4582H; and
5. FormTeam Consultancy survey report (Parts 1 and 2).

Kindly forward the attached documents to Mr. Xing Guo Qiang for his attention and perusal in the preparation of the SJE paper re-survey report.

When producing his SJE report, we would be most obliged if Mr. Xing could:

1. Comment on the condition of the parts listed in the survey reports;
2. Provide an estimate for the repairs or replacements to the said parts; and
3. Recommend a sum for the cost of repairs to SJT 4592H to restore it to its pre-accident condition.

We would be most obliged if Mr. Xing could provide reasons, with reference to any photographs (if possible), for preferring one surveyor's estimation over the other's.

We look forward to receiving the said report. Thank you.

Kind regards,

Laura Ngiam
Legal Associate
Litigation
t +65 6238 3086 f +65 6535 3010
withersworldwide.com

Secretary: Azmi bin Kasman t +65 6238 3354

Withers KhattarWong
KhattarWong LLP, 80 Raffles Place, #25-01 UOB Plaza 1, Singapore 048624

From: Celine Fong (LKKAuto) [mailto:celinefong@lkkauto.com]
Sent: Friday, 24 August 2018 9:18 AM
To: Ngiam, Laura <LauraNgiam@witherskhattarwong.com>; assignments <assignments@lkkauto.com>

Cc: Lin, Jasmine <jasminelin@witherskhattarwong.com>

Subject: RE: (XING GUO QIANG APPOINTED AS SJE) MC SUIT NO. 1348 OF 2018 (Part 1/2) [W-KW.FID148391]

Dear Laura,

Thank you for the email.

In preparing of our SJE report, we need both parties of survey reports, colour photographs and GIA reports.

Dear Catherine (Assignment Team),

Please assist to follow up the matter.

Best Regards,

Celine Fong

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ngiam, Laura <LauraNgiam@witherskhattarwong.com>

Sent: Tuesday, 21 August 2018 5:10 PM

To: Celine Fong (LKKAuto) <celinefong@lkkauto.com>

Cc: Lin, Jasmine <jasminelin@witherskhattarwong.com>

Subject: (XING GUO QIANG APPOINTED AS SJE) MC SUIT NO. 1348 OF 2018 (Part 1/2) [W-KW.FID148391]

Importance: High

Your ref: TBA

Our ref: PYK/L2N/KW00007.2121

Dear Celine,

MC SUIT NO. 1348 OF 2018

REQUEST FOR PAPER RE-SURVEY AND SJE REPORT ON VEHICLE NO. SJT 4592H

We refer to the above matter.

We are pleased to inform you that Mr. Xing Guo Qiang has been appointed as the single joint expert ("SJE") for the abovecaptioned matter and to conduct an independent assessment in respect of the cost of repairs to SJT 4592H.

In this regard, we would be most obliged if Mr. Xing could conduct a paper re-inspection of the Plaintiff's vehicle no. SJT 4592H from the 2 survey reports furnished in our previous email. Unfortunately, SJT 4592H is no longer available for a physical re-inspection.

Please let us know if Mr. Xing requires us to re-send the 2 survey reports by Mc-Coy Appraisers and FormTeam Consultancy.

When producing his SJE report, we would be most obliged if Mr. Xing could:

1. Comment on the condition of the parts listed in the survey reports;
2. Provide an estimate for the repairs or replacements to the said parts; and
3. Recommend a sum for the cost of repairs to SJT 4592H to restore it to its pre-accident condition.

We would be most obliged if Mr. Xing could provide reasons, with reference to any photographs (if possible), for preferring one surveyor's estimation over the other's.

Please note as the SJE appointed by the Court, Mr. Xing's primary duty is to the Court and that he is required to give a fair and reasonable assessment of the cost of repairs of SJT 4592H. In this regard, Mr. Xing's attention is drawn to Order 40 of the Rules of Court.

Further, Mr. Xing's costs have been ordered at **\$700.00** (being the costs of the SJE report from a paper re-survey) to be borne equally between the parties.

Kindly let us have a copy of the SJE report at your earliest convenience. Thank you.

Kind regards,

Laura Ngiam

Legal Associate

Litigation

t +65 6238 3086 f +65 6535 3010

withersworldwide.com

Secretary: Azmi bin Kasman t +65 6238 3354

Withers KhattarWong

KhattarWong LLP, 80 Raffles Place, #25-01 UOB Plaza 1, Singapore 048624

From: Celine Fong (LKKAuto) [<mailto:celinefong@lkkauto.com>]

Sent: Tuesday, 3 July 2018 12:07 PM

To: Ngiam, Laura <LauraNgiam@witherskhattarwong.com>

Subject: RE: REQUEST FOR CV & SJE REPORT FEES - MC SUIT NO. 1348 OF 2018 (Part 1/2) [W-KW.FID148391]

Dear Laura,

Attached herewith CV of our surveyor Mr. Xing Guo Qiang for your attention.

We are pleased to submit our Professional Fee Charges (Single Joint Expert) as follows:

Paper Survey - \$700.00

Physical Re-inspection - \$1,000.00

Court Attendance Expert Witness Fee:

(a) State Courts

i) Half day: \$400.00

ii) Full day: \$800.00

All above charges are subject to GST 7%.

Best Regards,

Celine Fong

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ngiam, Laura [<mailto:LauraNgiam@witherskhattarwong.com>]

Sent: Wednesday, 27 June 2018 8:10 PM

To: Celine Fong (LKKAuto) <celinefong@lkkauto.com>

Subject: RE: REQUEST FOR CV & SJE REPORT FEES - MC SUIT NO. 1348 OF 2018 (Part 1/2) [W-KW.FID148391]

Importance: High

Your ref: TBA
Our ref: PYK/L2N/KW00007.2121

Dear Sirs,

**MC SUIT NO. 1348 OF 2018
REQUEST FOR CV & SJE FEES FOR SJE REPORT ON VEHICLE NO. SJT 4592H**

We act for **NTUC INCOME INSURANCE CO-OPERATIVE LIMITED** ("our clients") and refer to the above matter, which concerns a claim for property damage.

We have our clients' instructions to recommend one of your company's motor surveyors to be appointed as the single joint expert ("SJE") for this Suit.

The Suit involves a dispute over the Plaintiff's claim for costs of repairs for and loss of use of his vehicle no. SJT 4592H. The Plaintiff is claiming \$6,100.00 (lump sum basis) for the costs of repairs as surveyed by McCoy Appraiser. FormTeam Consultancy had inspected the Plaintiff's vehicle both before, during and after repairs, and the costs of repairs was adjusted to \$2,350.00 (lump sum basis).

Both parties are unable to agree to a Single Joint Expert to give his opinion on the reasonable costs of repairs to the Plaintiff's vehicle and the number of days it would have been laid up for repairs. In due course, parties will have to nominate experts for the Court to consider when appointing the SJE.

In deciding on the appointment SJE, the Court will look at factors such as the relevant experience of the nominee and his proposed fees for the SJE report as well as for attendance trial.

Please kindly let us have the CV of one of your company's motor surveyors for us to nominate as the SJE, his proposed fees to prepare the SJE report as well as proposed fees for attendance at trial.

We await your favourable reply. Thank you.

Kind regards,

Laura Ngiam
Legal Associate
Litigation
t +65 6238 3086 f +65 6535 3010
withersworldwide.com

Secretary: Azmi bin Kasman t +65 6238 3354

Withers KhattarWong
KhattarWong LLP, 80 Raffles Place, #25-01 UOB Plaza 1, Singapore 048624

Khattarwong LLP - 80 Raffles Place, #25-01 UOB Plaza 1, Singapore 048624

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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 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	04/10/2017 13:45
Date Of Accident	04/10/2017 09:00
Exact Location Of Accident	NO 71 PIONEER RD (OPEN SPACE CARPARK)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT4592H
Insured/Policyholder	
Name Of Registered Owner	SHAW LING LEE
NRIC No	S0067794I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97501124
Alternative Phone No	OFFICE-97501124

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS E AUTO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100168115-08
Cover Note Number	

Driver

Name of Driver	MOHD HAFIZ BIN ABDULLAH NOBORU @ BEN NOBORU
NRIC No	S6946996E
Date Of Birth	17/03/1969
Occupation	OUTDOOR
Date Of Driving Pass	25/11/2011
Driving Experience	5 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81681311
Fax Number	
Contact Number	OFFICE-81681311
EMail Address	NOEMAIL

Address	BLK 8 LORONG 37 GEYLANG #07-02
Postcode	387906
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT.

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	YP5879T
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	LIM KWEE KOON/PETER
NRIC/Passport Number	S1462400G
Contact Number	96961001
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

This form is to be completed by the Policyholder and/or the Authorized Driver.

It should be filled out truthfully and accurately as possible to help determine appropriate policy liability.

Any false reporting may be referred to the Police for investigation.

This form is provided for your information and is not intended to constitute an offer of insurance.

Consent under the Personal Data Protection Act (PDPA):

I hereby consent to the collection, use and disclosure of my personal information for the purposes stated below.

Personal Information: Name, address, telephone number, email address, date of birth, gender, marital status, occupation, education, and other information.

Insurers: The name of the insurer(s) and the policy number(s).

Purpose: To provide information to the insurer(s) for the purpose of determining policy liability.

Retention: The information will be retained for a period of 12 months from the date of completion of this form.

Disclosure: The information may be disclosed to the insurer(s) and other parties involved in the accident.

Consent: I consent to the collection, use and disclosure of my personal information for the purposes stated above.

Signature: The signature of the Policyholder and/or the Authorized Driver.

Date: The date of completion of this form.

Witness: The name and contact information of a witness to the completion of this form.

Remarks: Any additional information or comments.

Other: Any other information or comments.

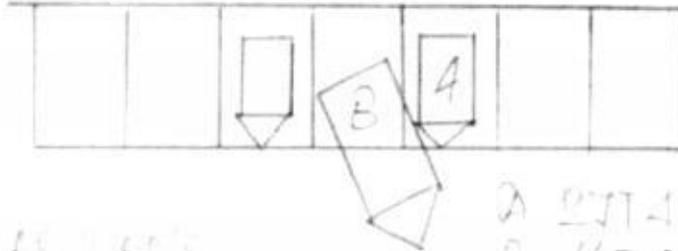
[Handwritten Signature]

[Handwritten Signature]

Name: _____
Address: _____
Telephone: _____

Accident Sketch Plan

SKETCH PLAN



ISLAND
 NORTH DIRECTION
 TRUCK AHEAD

A BIT OF
 E. Y. PERIST

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

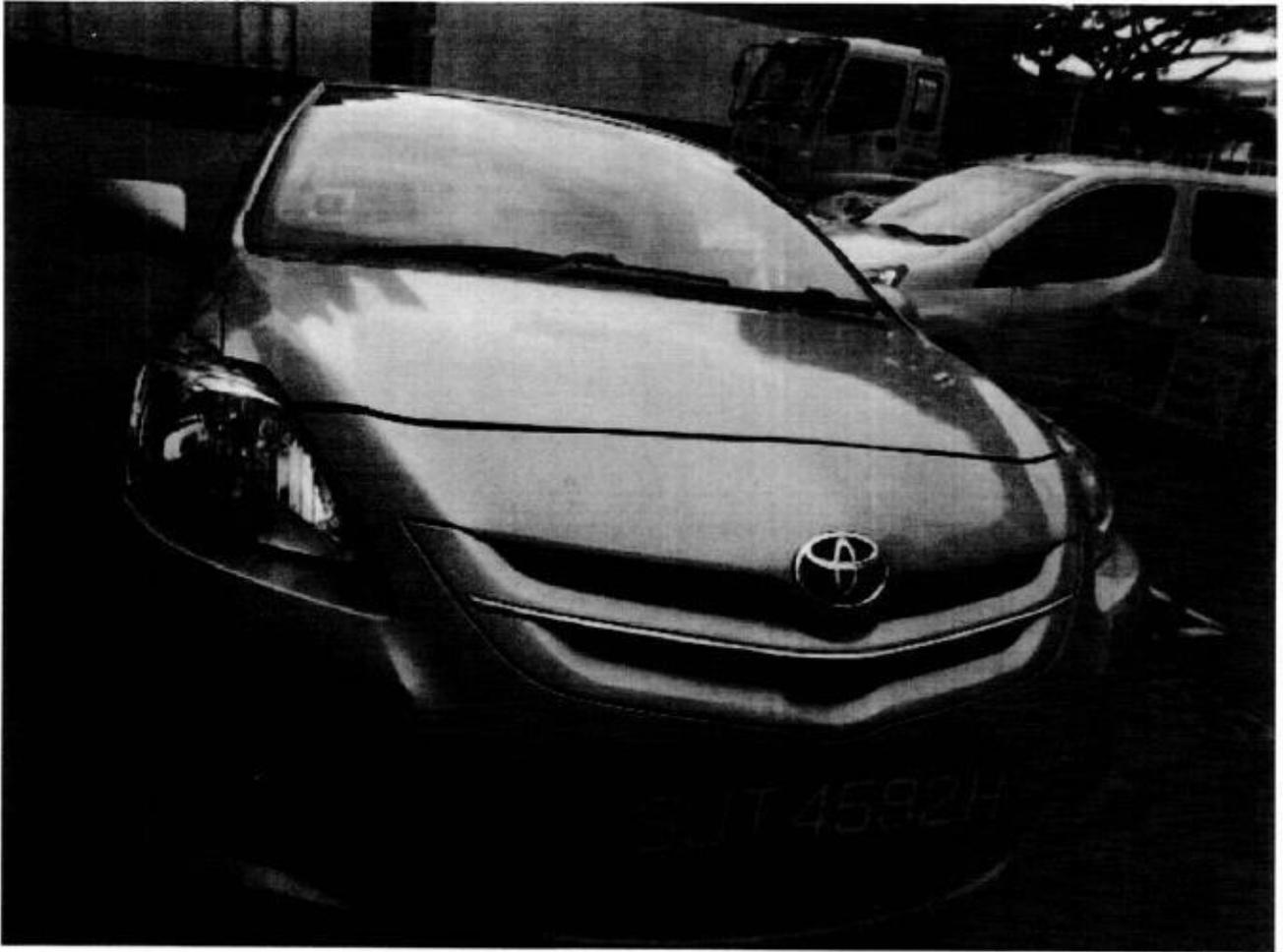
I PARKED MY CAR AT CAR PARKED LOT THE TRUCK.
 CAME OUT FROM THE CAR PARK AND HIT ONTO MY CAR
 RH FRONT PORTION

DECLARATION

We declare that the information provided is true and correct.

[Signature] *[Signature]*

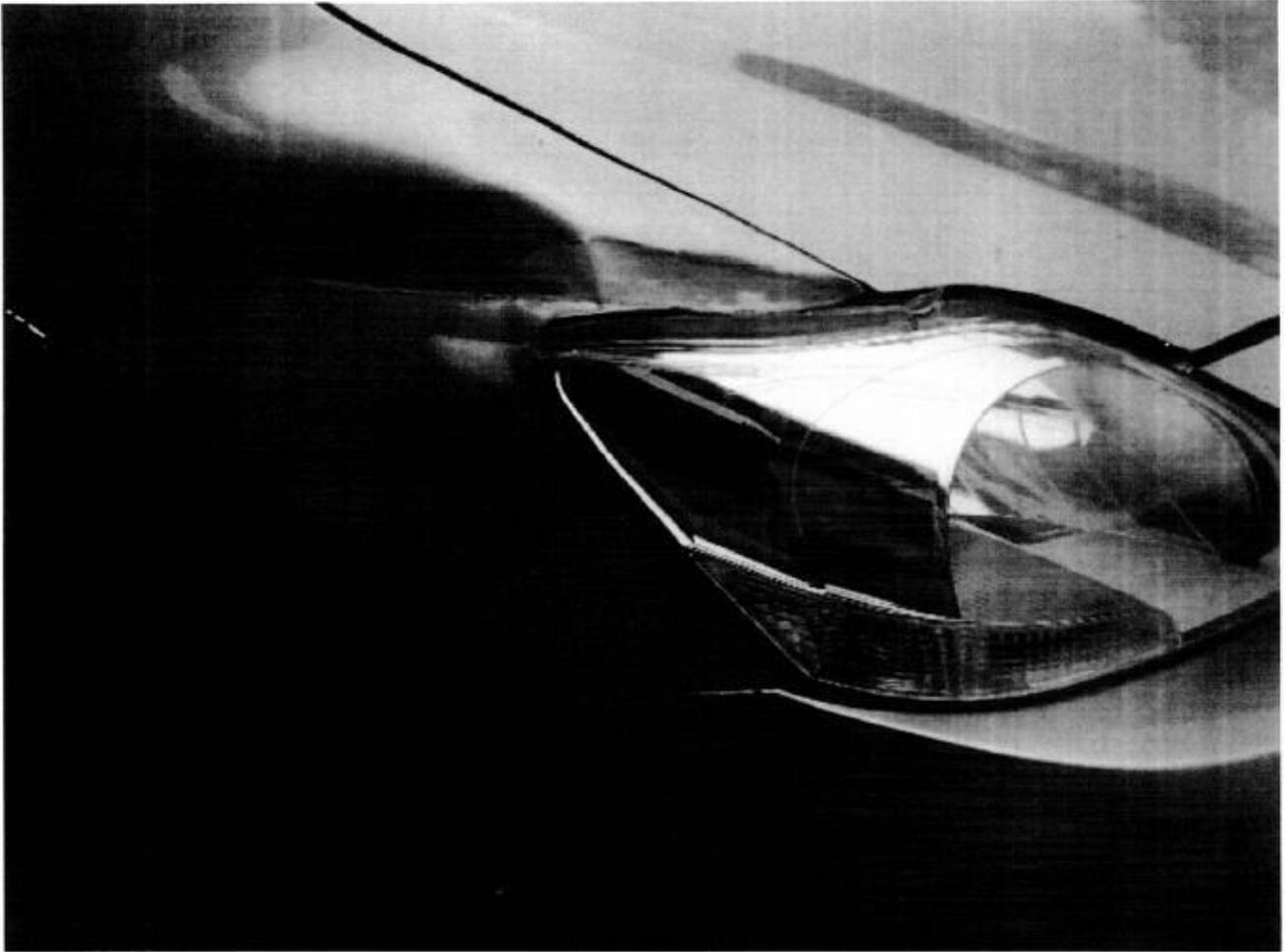
Accident Photo



Accident Photo



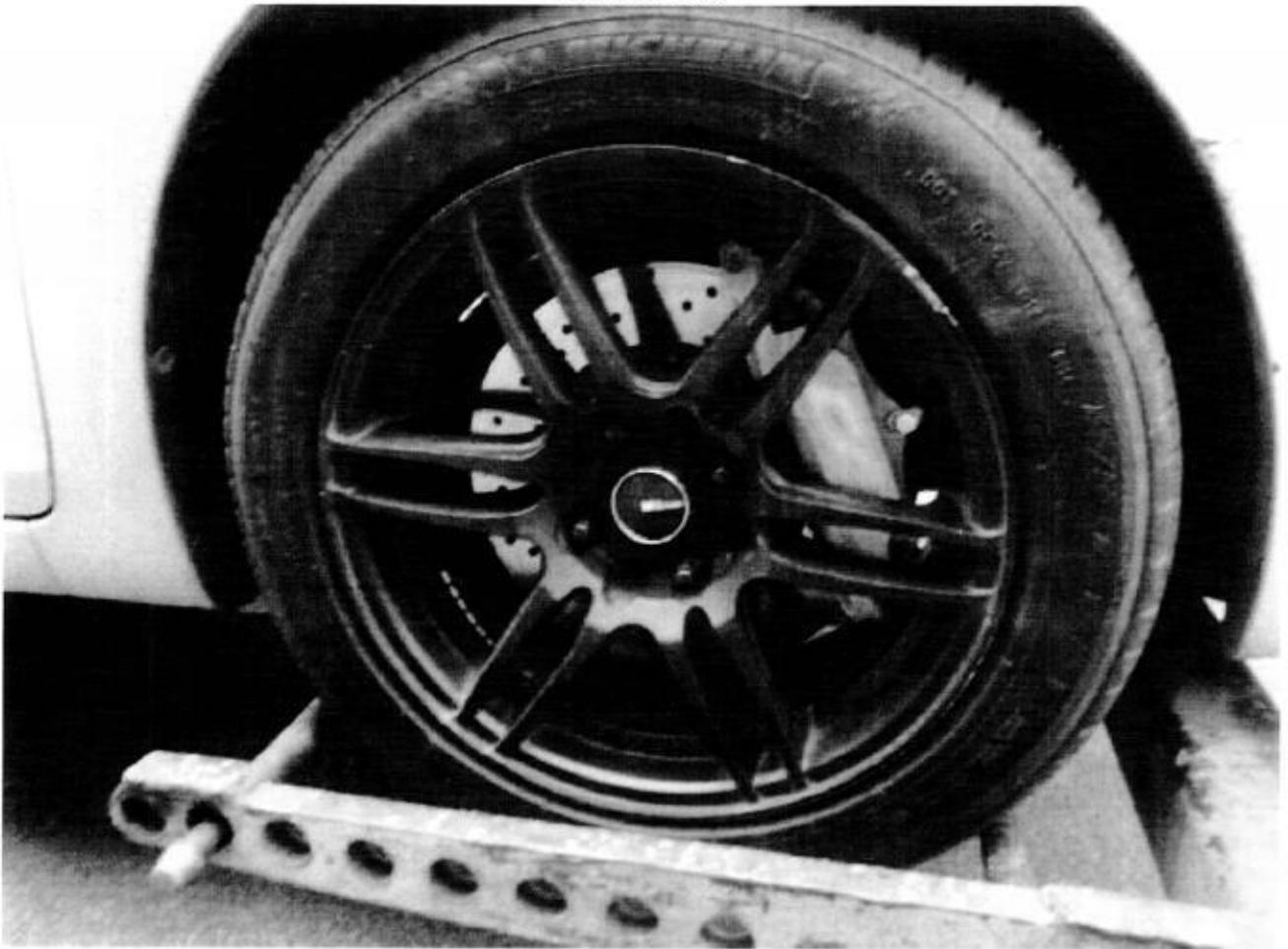
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



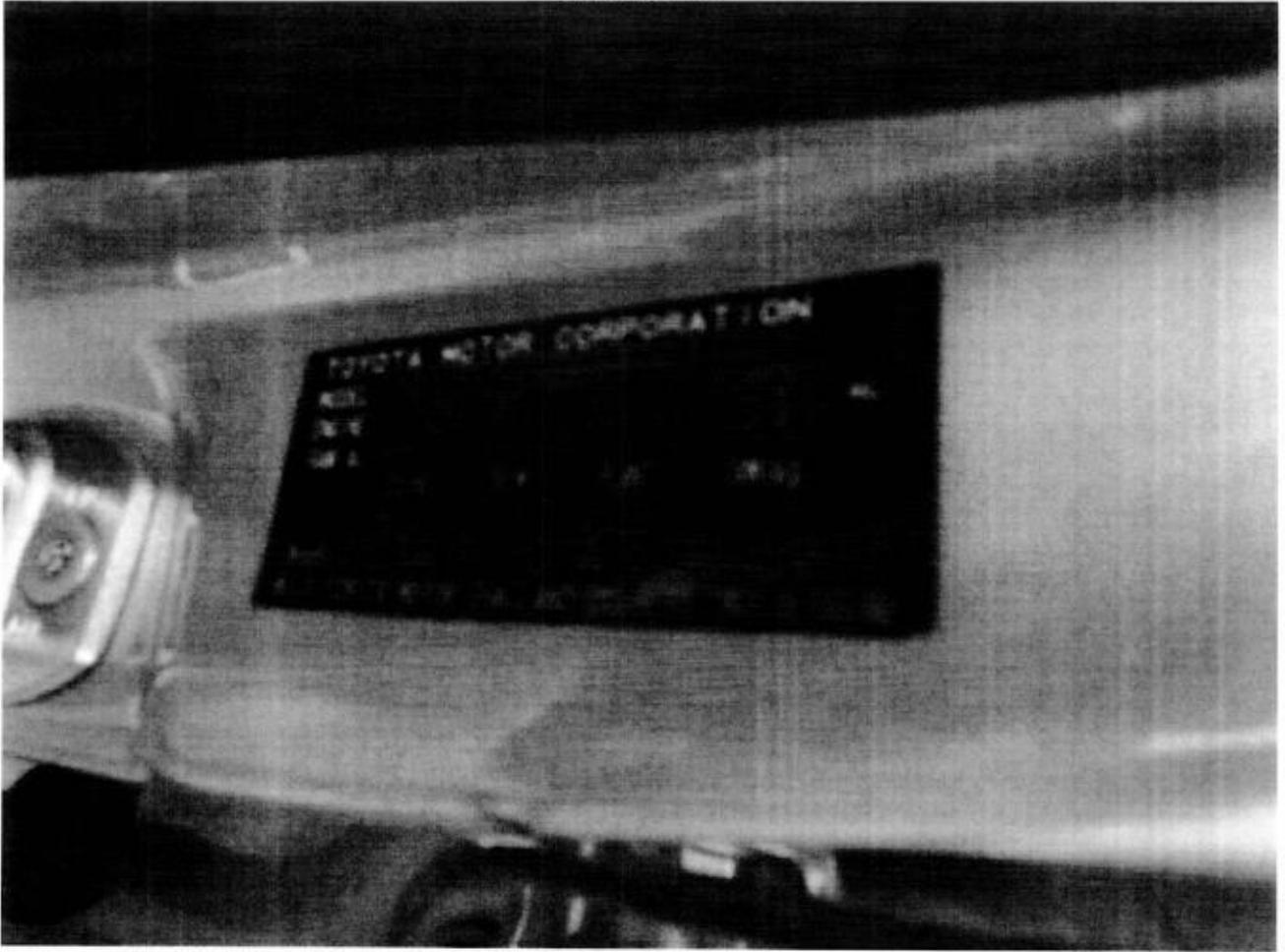
Accident Photo



Accident Photo



Accident Photo



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 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	04/10/2017 12:39
Date Of Accident	04/10/2017 09:00
Exact Location Of Accident	TUAS AMENITIES CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP5879T
Insured/Policyholder	
Name Of Registered Owner	REGIONAL MARINE & ENGINEERING SERVICES PTE LTD
Co Reg No	199507378R
Email Address	PETERLIM1001@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-96961001

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER LORRY
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5089355489
Cover Note Number	

Driver

Name of Driver	LIM KWEE KOON, PETER
NRIC No	S1462400G
Date Of Birth	27/09/1961
Occupation	OUTDOOR
Date Of Driving Pass	02/09/1985
Driving Experience	32 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96961001
Fax Number	
Contact Number	
EEmail Address	PETERLIM1001@GMAIL.COM

Address	BLK 52 STRATHMORE AVENUE #24-241
Postcode	141052
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER ATTACHED

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	SJT4592H
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	MOHD HAFIZ BIN NOBORU@ BEN NOBORU
NRIC/Passport Number	
Contact Number	97177996
Address	
Postcode	
Insurance Company Name	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan Pg. 1

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.:

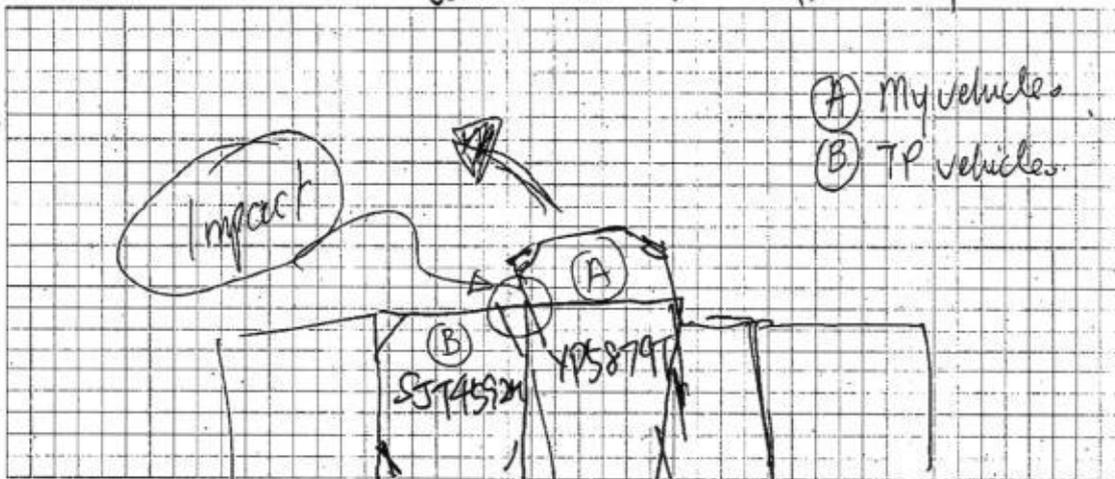
[Handwritten Signature]
11-10-20



[Handwritten Signature]
Name: RUMERLY WOODWARD
NRIC/FIN No.: S125 2169 A

SKETCH PLAN

THAT AMOUNTS CAR PART



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I coming out of car park ^{lot} did not notice a car was parked on my left. I scratched SJT 4592H.

DAMAGED TO SJT 4592H
 left fender dent
 left bumper slight dent
 front right rim damaged.

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: 4/10/17
 11.10am



Reporting Centre Personnel's Signature _____
 Name: RUMARD V WOODWARD
 NRIC/FIN No.: S1257161/5

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



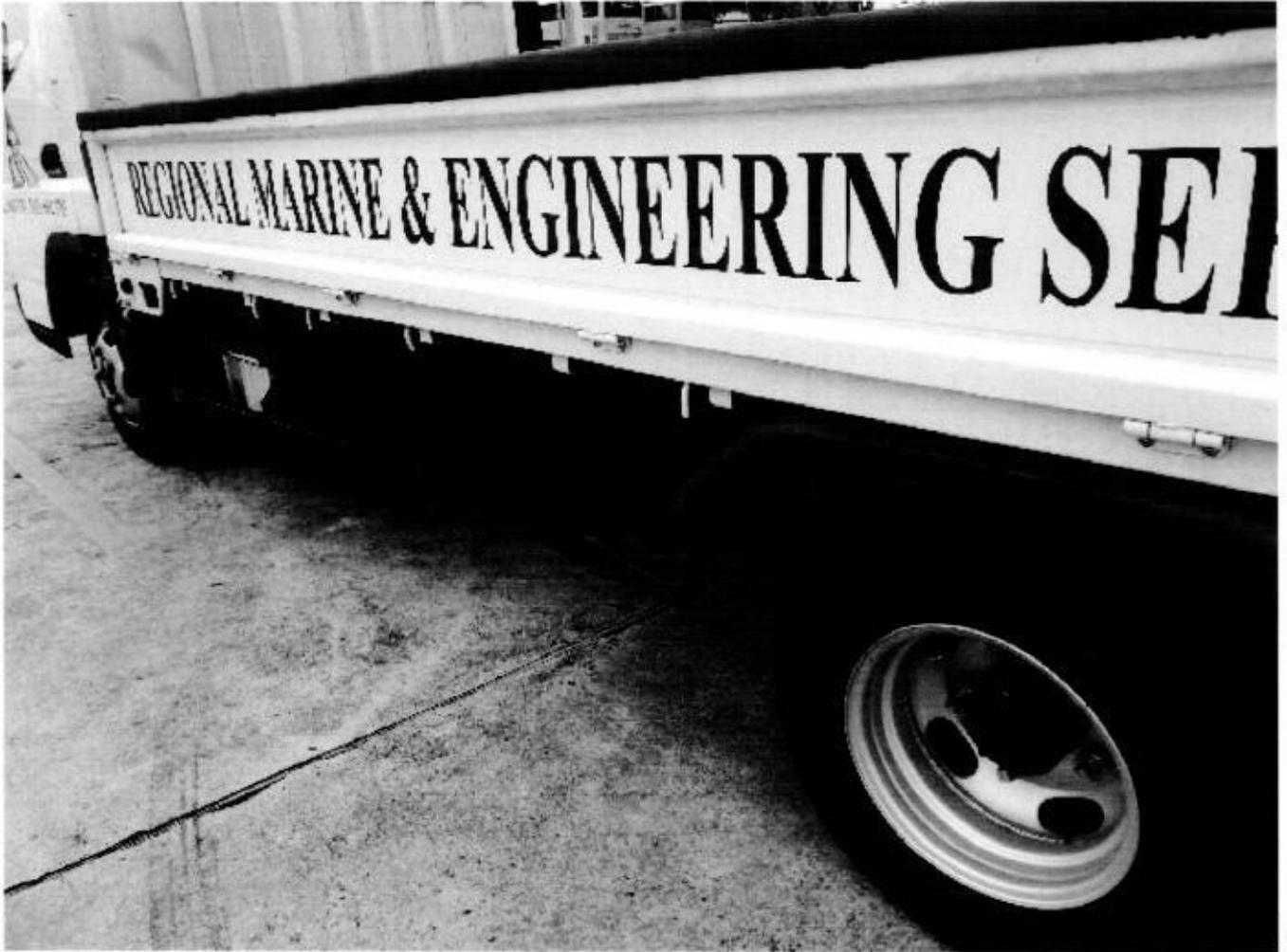
Accident Photo



Accident Photo



Accident Photo



Accident Photo

