



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

FIRST CAPITAL INSURANCE LTD

Ref : CS3/FCI18017393/R1cd3

36 ROBINSON ROAD
#16-01 CITY HOUSESINGAPORE 068877

Date : 25-09-2018



Code : FC12

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SHA 1797C	Veh. Inspected	SGL 2522B
Policy No.		Coverage (\$)	0.00
Claim No.	D18007025MFSH	Excess (\$)	0.00
Assign From	CWS (JOANNE YONG)	Assign Date	25/09/2018

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

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5. General Information

Accident Date	21/09/2018	Inspection Date	
Survey held at	AUTOWERKE AUTOMOTIVE-8 KAKI BKT RD 4#05-01		
Repairer	-		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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MOTOR SURVEY ASSIGNMENT

Date	25-09-2018	Our Ref No. D18007025MFSH
Accident Date	21-09-2018	Claim Type. Third Party
Insured Vehicle	SHA1797C	Third Party Vehicle. SGL2522B
Survey Location	8 KAKI BUKIT AVENUE 4#05-01/02 PREMIER BUILDING	
Contact Person.	ALEX BEH	
Contact No.	90910000/ 0	Fax No. 0
Survey Type	WITHOUT PREJUDICE: NO EST. COR	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	AUTOWERKE AUTOMOTIVE PTE LTD	Attention. NIL
Cc : TP Solicitor	ALLISTER LIM & THRUMURGAN	TP Solicitor Fax No. NA
Officer Incharge	JOANNEY	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

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	24/09/2018 16:33
Date Of Accident	22/09/2018 21:30
Exact Location Of Accident	GEYLANG ROAD(OUTSIDE LRG 9)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGL2522B
Insured/Policyholder	
Name Of Registered Owner	TOH JIA XING
NRIC No	S9213135A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91479669
Alternative Phone No	OTHERS-91479669

Vehicle Particulars

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

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5102944799
Cover Note Number	

Driver

Name of Driver	TOH JIA XING
NRIC No	S9213135A
Date Of Birth	11/04/1992
Occupation	INDOOR
Date Of Driving Pass	21/10/2010
Driving Experience	7 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91479669
Fax Number	
Contact Number	OTHERS-91479669
Email Address	NOEMAIL

Address	BLK 272 #08-114 YISHUN STREET 22
Postcode	760272
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	2
Was any body injured in the Accident?	NO
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)	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 BELOW STATEMENT/SKETCH PLAN

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	SHA1797C
Vehicle Make/Model/Colour	HYUNDAI I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
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)	

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 regulate 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 & Times

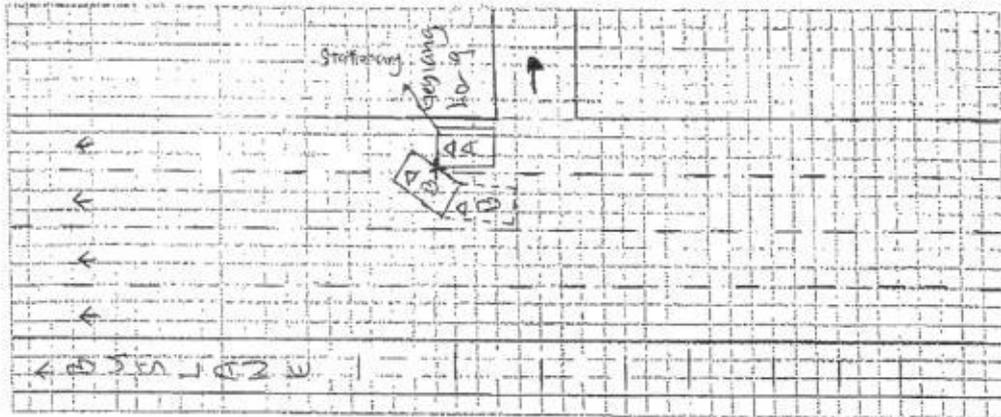
Driver's Signature
(If driver is not the policyholder)
Date & Times

IDAC KAKI BUKIT (VAC)
23 Kaki-Bukit Ave 4
Reporting Centre Personnel's Signature
Singapore 415933
Name:
Tel: 67416697 Fax: 67492305
NRIC/FRNS:
Email: vackb@singnet.com.sg

Sketch Plan #2 Pg. 1

Along Geylang Road
 Veh A: SGL 2522B
 Veh B: SHA 1797C

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I was driving my car (Veh A: SGL 2522B) along Geylang Road. I stopped my car nearby Lor 9 entrance for my 'GRAB' passenger to alight my car to fetch his mother. After being in stationary position for about 1-2 minutes, I felt an impact on the front left of my car. I realised that a taxi (Veh B: SHA 1797C) had tried to turn right into the parallel parking lot in front of us and collided his right side of his vehicle onto my front left bumper while he is executing his parking. Veh B's driver and myself alighted to discuss on this matter. Initially, he admitted that he had caused the accident and proposed a private settlement fee of \$500. However, after he made a phone call, he changed his mind and said that we should report to our respective insurance to claim against each other instead. I wish to state that I overheard him speaking to the unknown person over phone that I had no in-car camera before he changed his words.

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:

IDAC KAKI BUKIT (VAC)
 23 Kaki Bukit Ave 4
 Reporting Centre Personnel's 24 Hours
 Singapore 415933
 Name:
 Tel: 67416697 Fax: 67492305
 NRIC/PR No:
 Email: vackb@singnet.com.sg

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	3135A
Vehicle Details	
Vehicle No.:	SGL2522B
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Oct 2018
Vehicle Make:	HONDA
Vehicle Model:	CITYVTEC CVT
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	L15A14806993
Chassis No.:	MRHGD86506P040420
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$16,695.00
Original Registration Date:	08 Sep 2006
First Registration Date:	08 Sep 2006
Transfer Count:	3
Actual ARF Paid:	\$12,209.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Aug 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$25,759.00
COE Rebate Amount:	\$15,012.00
Total Rebate Amount:	\$15,012.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 01 Oct 2018

OK

Honda City Used Vehicle List (2 vehicles)

Car Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Company	Availability
Honda City 1.5A (COE till 09/2023)	\$25,400	\$5,160 /yr	11-Sep-2008	1,497 cc	109,000 km		Available
New Paintwork Will Be Provided, New Wind Screen Will Be Replaced, Red Plate Converted To Normal Plate. Call Now For Viewing.							
Office No. - - Ng Yu Rui - 98711104							
Honda City 1.5M VTEC (COE till 05/2021)	\$14,838	\$5,620 /yr	12-Jun-2006	1,497 cc	141,000 km	Hoe Beng Auto Trading	Available

Tip Top Condition, Just Arrived! Excellent Condition Assured And Peace Of Mind. Very Well Maintained, Trade In Welcome, Act Fast Before It's Gone! Low Down Payment! 100% In House Loan Available.GST In...

Office No. - 67450138 / 65523003

Eric - 83538778 | Agnes - 93680138 | Lee - 98300138

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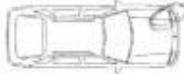
LKK Auto Consultants Pte Ltd

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TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

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PRE-REPAIR INSPECTION REPORT			
FIRST CAPITAL INSURANCE LTD 36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Ref: CS3/FCI18017393/R1cd3s2 Date: 12-10-2018 Code: FCIZ	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SHA 1797C	Veh. Inspected	SGL 2522B
Policy No.		Coverage (\$)	0.00
Claim No.	D18007025MFSH	Excess (\$)	0.00
Assign From	JOANNE YONG	Assign Date	26/09/2018
2. Vehicle Particulars & Condition			
Make & Model	HONDA CITYVTEC	c.c	1497
Engine No.	HIDDEN	Year of Reg.	2006
Chassis No.	MRHGD86506P040420	Colour	SILVER
Odometer	133316 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	185/60R16	GOODYEAR	5 mm
L/H Front Tyre	185/60R16	GOODYEAR	5 mm
R/H Rear Tyre	185/60R16	GOODYEAR	5 mm
L/H Rear Tyre	185/60R16	GOODYEAR	5 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION.			
5. General Information			
Accident Date	22/09/2018	Inspect Date / Time	26/09/2018 (04:43 PM)
Survey held at	AUTOWERKE AUTOMOTIVE-8 KAKI BKT RD 4#05-01		
Repairer	-		
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. D) MARKET VALUE: \$16,000.00			

Report Ref No. CS3/FCI18017393/R1cd3s2

Inspected By

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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