

CSI / LAW 18017629 / Avb52

Special Instruction:

UG: \$ 33950.00

Third Parties:

Claimant:

Surveyor: Prominent Appraiser

Workshop: New Hack Tool

From (Person): Fiza of Lee Shergill Date/Time: 27/09/2018
Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / (Evaluation)

To Inspect Vehicle No: 5JH 999 Insured: WSX 9617

at Workshop m/s New Hook Tecks Tel: 6747 9241

of Blk 1 Kaki Bukit Ave 6 #01-43

Policy No: CF-LHP-60.1334.17-bst Claim No: LSP/RSS/11049/17/ff

Sum Insured: _____ Exposure: _____

Make of Veh: _____ D.O.A. 19-03-2015

(Client's Record)

SJE

H.O.D. Endorsement/Date: _____

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: 10/1/18 Confirmed with 10/1/18 Final Fig 10/1/18, 10 days (Red \$ 10 / 10 %; Original 10 days)

Date/Time: 20/11/18 Submit Final Fig IS 221C, 103 days (Red \$ 11950/35 %; Original 103 days)

Date/Time	Action/Instruction
-----------	--------------------

SJH 94P - X
WSX 9617 - X

WSX 9617 -X

RECEIVED 22 NOV 2018

Para(1) : Parts found not replaced	(To highlight <i>R or UB, LR, Etc</i>)
------------------------------------	---

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

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value :

Inspected/
Evaluated by:

Fee Charged:

Date: _____

Basic & Add

Transport

Photos

Others

Total

1) Date/Time 21/11- typist File Pass to

3) Date/Time _____ File Pass to _____

5) Date/Time _____ File Pass to _____

2) Date/Time _____ File Return to _____

4) Date/Time File Return to

6) Date/Time _____ File Return to _____

Catherine Chong (LKK Auto)

From: Fiza <fiza@leeshergill.com>
Sent: Thursday, 27 September, 2018 6:08 PM
To: Admin-d@lkkauto.com
Subject: Our Ref: LSP/RSS/11049/17/ff - SJE report for SJH 919P
Attachments: lkk ltr.pdf

Importance: High

IMMEDIATE ATTENTION

Dear Catherine,

MC/MC 11338/2017

PERSONAL INJURY & PROPERTY DAMAGE CLAIM ARISING FROM ACCIDENT INVOLVING SJH 919P AND WSX 9617 ALONG JUNCTION OF SOMARAH ROAD AND CHANGI SOUTH AVENUE 1 ON 19.03.2015 AT 1130 HRS

We refer to your email dated 11 January 2018.

We attach herein our letter dated 27 September 2018 for your attention.

As the enclosures consist of coloured photos and we are not able to email the same, we will forward it by post.

We would be grateful if you could acknowledge receipt of the posted letter with enclosures upon receiving the same via mail.

Regards,
Fiza Fazakir
For **Mr Raj Singh Shergill/Ms Chia Aileen**

LEE SHERGILL LLP

Advocates & Solicitors
(In association with Bajwa & Co)
111 North Bridge Road
#07-07 Peninsula Plaza
Singapore 179098
Tel: 6535 1376
Fax: 6535 5362

Internet Email Confidentiality

Important : This message is intended for the recipient(s) addressed above. It may contain privileged and confidential information. If you are not the intended recipient(s), kindly notify the sender immediately by replying to this message and then delete it from your system. You must not read, copy, use, or disseminate this communication in any form.
Thank you.

Lee Shergill LLP

Advocates & Solicitors

Raj Singh Shergill LLB Hons (NUS) Chia Aileen LLB Hons (NUS)

Service of court documents by facsimile and/or email is not accepted

111 North Bridge Road
#07-07 Peninsula Plaza
Singapore 179098
Tel: +65 6535 1376
Fax: +65 6535 5362

URL: <http://www.leeshergill.com>

27 September 2018

LKK Auto Consultants Pte Ltd
Blk 51 Paya Ubi Industrial Park
Ubi Avenue 1 #02-25
Singapore 408933
Attention: Mr Adrian Ling Wai Ping
Your Reference: Please advise

IMMEDIATE ATTENTION

BY EMAIL & POST
admin-d@lkkauto.com

No. of page(s) including this page:
2+enclosures

Our Reference: LSP/RSS/11049/17/ff

Dear Sirs,

MC/MC 11338/2017

We refer to the above matter.

We act for Azahari Andreassen Mohan s/o Rani (Claimant) and M/s Tan Kok Quan Partnership act for Wan Kah Fai (Defendant) in the above captioned matter. The claim is in respect of personal injury and damage to motor vehicle registration number SJH 919P which was damaged in a road traffic accident on 19 March 2015 involving motor vehicle registration number WSX 9617 (driven by the Defendant).

Pursuant to Order 108 of the Rules of Court, parties have agreed to appoint you as the Single Joint Expert.

We enclose hereto copies of:

- a) The accident reports of the respective drivers involved;
- b) The survey report of Prominent Appraiser Services Pte Ltd (Claimant's surveyor);
and
- c) Repair bill no. NPI1505-0122 from New Hock Teck Motor Workshop.

Kindly let us have your views on the matter setting out fair cost of repair and downtime.

Please be informed that the claimant's vehicle has since been sold. Hence, it will not be possible to conduct a physical survey of the vehicle.

Privileged/confidential information may be contained in this letter and is intended only for the use of the addressee. If you are not the addressee, or person responsible for delivering to the person addressed, you may not copy or deliver this to anyone else. If you receive this letter by mistake, please notify us immediately by telephone and destroy this. Thank you.

In association
with Bajwa & Co

**B
&
C**

Lee Shergill LLP

Advocates & Solicitors

Our Reference : LSP/RSS/11049/17/ff

Given your appointment as Single Joint Expert, please copy M/s Tan Kok Quan Partnership (Ref: CF.LHP.so.1334.17-bis) in your correspondence.

Yours Faithfully



LEE SHERGILL LLP

Email : raj@leeshergill.com ; aileen@leeshergill.com ; fiza@leeshergill.com

cc. **M/s Tan Kok Quan Partnership**
Ref: CF.LHP.so.1334.17-bis

BY PDX ONLY

27 September 2018

LKK Auto Consultants Pte Ltd

Blk 51 Paya Ubi Industrial Park

Ubi Avenue 1 #02-25

Singapore 408933

Attention: Mr Adrian Ling Wai Ping

Your Reference: Please advise

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Lee Shergill LLP

Advocates & Solicitors

Our Reference : LSP/RSS/11049/17/ff

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Yours Faithfully



LEE SHERGILL LLP

Email : raj@leeshergill.com ; aileen@leeshergill.com ; fiza@leeshergill.com

cc. **M/s Tan Kok Quan Partnership**
Ref: CF.LHP.so.1334.17-bis

BY PDX ONLY

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	20/03/2015 17:23
Date Of Accident	19/03/2015 11:30
Exact Location Of Accident	SOMAPAH RD (CHANGI BUSINESS PARK VISTA)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJH919P
Insured/Policyholder	
Name Of Registered Owner	AZAHARI ANDREASEN MOHAN S/O SANI
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93360369
Alternative Phone No	Office-93360369

Vehicle Particulars

Manufacturer	HONDA
Model	FIT-1.3 G (A)
Vehicle Category	Private Car

Insurance Company

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MX005206
Cover Note Number	

Driver

Name of Driver	AZAHARI ANDREASEN MOHAN S/O SANI
NRIC No	S8422824I
Address	BLK 273A PUNGGOL PLACE #02-860

General Information of the Accident

Type Of Accident	Collision- Head to Side
Weather Conditions	Clear

Other Information

Was any foreign vehicle involved in this accident?	Yes
Foreign Vehicle Registration Number	WSX9617 (Private Car)
Was any body injured in the Accident?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1

Circumstances of Accident

REFER TO POLICE REPORT: T/20150319/2119.

Attachment(s)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera? No

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number WSX9617

Vehicle Make/Model/Colour

Name of Driver

Insurance Company Name

DETAILS OF INJURED PERSON 1

Name AZAHARI ANDREASEN MOHAN S/O SANI

Injured person in which vehicle? SJH919P

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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

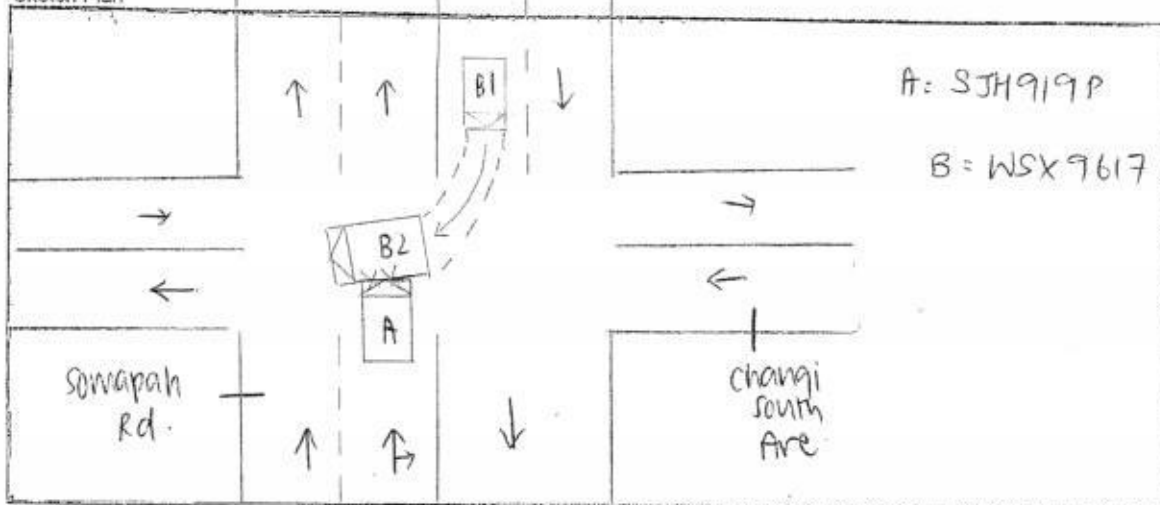
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my Insurer (collectively the "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' law firms/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan





Describe Circumstances of the Accident

Please refer to police report T/20150319/2119.

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

Witnessed by Reporting
Centre Personnel

Insurance Co. :

Vehicle NO. :

TORIO MARINE

30H9191P

Date of Accident:

19 / 03 / 2015

☐ Reporting Only

☐ Own Damage

☒ Third Party Claim NEW FLOOR TACK

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999



T/20150319/2119

1 of 3

Report No. T/20150319/2119

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/03/2015 16:01	Vide Report No.:	Station Diary No.: 41
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Informant's Particulars

Name of Informant: AZAHARI ANDREASEN MOHAN S/O SANI	Address: APT BLK 273A PUNGGOL PLACE #02-860 SINGAPORE 821273		
ID Type / ID No.: NRIC NO / S8422824I	Contact No.: Home/Office: Mobile: 93360369		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 30	Date of Birth: 25/07/1984	Type of Informant: Driver
Race: Indian	Language:		Institution / School Name:
Occupation: Other chemical engineering technicians	Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 19/03/2015 11:30	Type of Location: X-Junction
Location: Along Road 1 SOMAPAH ROAD CHANGI BUSINESS PARK VISTA				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Tampines NPC
6 Tampines Avenue 4

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJH919P	Car	HONDA	FIT 1.3G A	Blue		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SJH919P	TOKIO MARINE INSURANCE SINGAPORE LTD.	MX005206	25/07/2014	24/07/2015

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

WSX 9617

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999



T/20150319/2119

2 of 3

Report No. T/20150319/2119

CONTINUATION OF REPORT

Driver			
Name	AZAHARI ANDREASEN MOHAN S/O SANI	ID No.	S84228241
Related Vehicle	SJH919P (Car)	Contact No.	93360369
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/03/2015	Date Discharge	19/03/2015
No. of Days granted Medical Leave (MC)	06	Degree of Injury	NIL

Brief Details.

On the mentioned date and time, I was travelling along Somapah Road heading straight. While I was travelling, on the opposite end, suddenly there were one foreign vehicle (blue Honda vehicle) which was turning right towards Changi Business Park Vista. As such, I then hit onto the left passenger portion of the foreign vehicle as I did not managed to break in time. However I wish to state that I have the right of way at all times. Traffic Police and Ambulance was at scene in which I was then being conveyed to Changi General Hospital. I only managed to speak to Traffic Police officer briefly before being conveyed to CGH.

I wish to state that I was unable to get hold of the foreign vehicle plate number as I was being conveyed to CGH immediately.

Sketch Plan #5 Pg.1

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999



T/20150319/2119

3 of 3

Report No. T/20150319/2119

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 Report:

G / IBRAHIM BIN CHEN
ONG KIM SOON KENNY

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

19/03/2015 16:01

Officer In Charge Of Case:

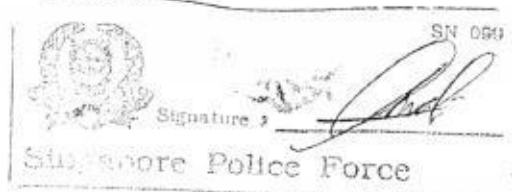
TP / GIT /

Classification Of Case:

Contact No.:

Authentication Stamp

NP168



INSURANCE Pg.1

20-03-15:12:09

+65 64400798

1/ 1

To: Mr Chai
From: Aida

TOKIO MARINE INSURANCE SINGAPORE LTD.
Company Reg. No.: 102300014M GST Reg. No.: M2-00000234
20 McCallum Street
#09-01 Tokio Marine Centre
Singapore 099048
Tel: 8221 8111 Fax: (65) 8221 4355 / (65) 8224 0895
Email: tmis@tokiomarine.com.sg
Website: www.tokiomarine.com.sg

Certificate of Insurance

FORM MX1

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1969

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: MX005206 (Private Car)

- | | | |
|--|--|------------------------|
| 1. Index Mark and Registration Number of Vehicle | SJH919P | Chassis No: GE61090049 |
| 2. Name of Policyholder | AZAHARI ANDREASEN MOHAN S/O SANI | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 25/07/2014 (00:00:00) | |
| 4. Date of Expiry of Insurance | 24/07/2015 | |
| 5. Persons or Class of Persons entitled to drive* | (a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his permission. | |

* Provided that the Person driving is entitled in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any attachment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost or destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account No: 1879DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 800.00	(Original Excess : SGD 800.00)
	(Additional Excess) Unnamed Driver(s)	SGD 500.00	
	(Additional Excess) Young, Elderly or Inexperience Driver(s)	SGD 3,500.00	
	WindScreen Excess	SGD 100.00	
Financial Interest:	DBS BANK LTD		

TOKIO MARINE INSURANCE SINGAPORE LTD.

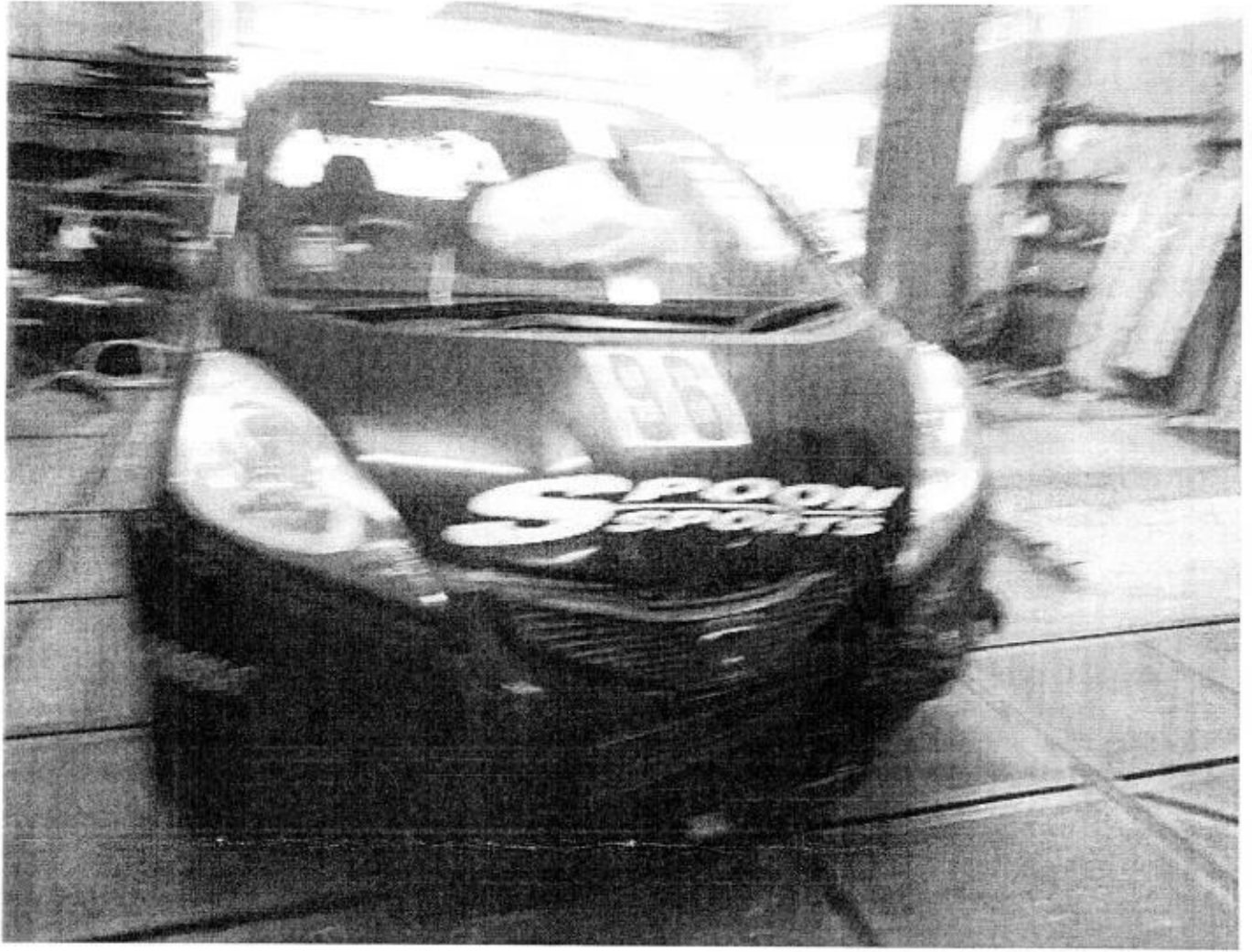
Authorised Signature

Page No. 8
Unable to disclose
NRIC / driving license

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg.1

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE : Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MSME15032708 Vehicle Registration No : 5JH 919 P
Name(as shown in NRIC): AZAHARI ANDREASEN MOTTAN S/O RANI
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No : S8422824I
Address : BLK 273A PUNGOOL PLACE #02-850 S(821273)
Contact (Tel) : _____ (H/P) : 93360369
(Email) : _____
Date of Accident : 19/03/2015 Time of Accident : 11:30
Place of Accident : SOMAPATI RD (CHANNI BUSINESS PARK VISTA)
Insurance Company : TOKIO MARINE

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

- VEHICLE NUMBER SHOULD BE '5JH 919 P'

Signature of Vehicle Owner / Driver

Date: