

22/03/2002

ASS. REC. BY:

REF: CS3/LPC/18017916/Rlr d30

Special Instruction:

Surveyor: PerulASSIGNMENT (Office)From (Person): Ong Ili

of

LPCDate/Time 3/10/18 @ 12.31pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKR 1927U

Insured:

GU 1222B

at Workshop m/s

N-51 Automotive

Tel:

68420051

of

2 Kaki Bukit Ave 2 # 01-17

Policy No:

Claim No:

18/18/18/VL05/020976

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

2/10/18

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

2:34pm @ 3/10/18

Person Contacted:

MelodyVehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	SKR 1927U - NA / EQT 18017897/h4
	GU 1222B - X
	Submit PRS report

DOA: 3/10/18

(08/11/13)

REF:

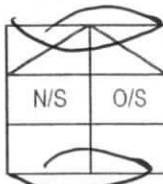
95411

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SKR 19274
 at Workshop m/s N-51 Automotive
 of 2, Kame Bunkit Ave 2, #61-17
 Insured: LPC
 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: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKR 19274 Yr Regn: 2015 / Jan
 Type: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda Vezel 1.5i c.c. 1496Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 085376 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: RU11016050Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60R16
R: _____

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

TOYO / YOKO or

LONG LONG

Front

Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 02/10/18 D.O.I. 03/10/18 @ 0245 PMSurvey held at N-51Des. of Damages: Front / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

RECEIVED 24 OCT 2018

Date/Time, File Pass to?

1) typist

Date/Time, File Return to?

2) _____



: Preli. Report



: Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)Survey Fee: 450

Transportation: _____ \$ + RS. _____ SI

Photos

Others

TOTAL

450Report Format : PPS

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

Nivitha (LKK Auto)

From: ONG LI LI <llong@lonpac.com>
Sent: Wednesday, 3 October 2018 12:31 PM
To: Chin Hui Xin; assignments@lkkauto.com; 'Nivitha (LKK Auto)'
Cc: MT_Claim_SG
Subject: RE: Our Ref: To be advised RE: SKR1927U & GU1222B - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS
Attachments: 03102018114532-0001.pdf

Without Prejudice
Save as to Costs

Dear Sir/Mdm

We are not agreeable with your proposed list of surveyors and we shall appoint LKK Auto Consultants Pte Ltd for the survey.

Dear Catherine/Nivitha

fya

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: Chin Hui Xin [mailto:huixin@n51.com.sg]
Sent: Wednesday, 3 October, 2018 12:28 PM
To: ONG LI LI
Cc: MT_Claim_SG
Subject: Re: Our Ref: To be advised RE: SKR1927U & GU1222B - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

Dear Sir/Madam,

We refer to your list of motor surveyors proposed.

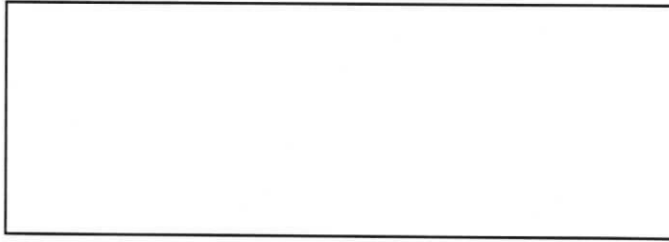
We do not agree to your list of motor surveyors.

Please see attached.

Thanks

Regards,
Melody Chin
N-51 Automotive Pte Ltd

Office : 6842 0051
Fax : 6741 0510
www.n51.com.sg



On Wed, Oct 3, 2018 at 12:10 PM ONG LI LI <llong@lonpac.com> wrote:

Without Prejudice

Save as to Costs

Dear Sir/Mdm

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the following list to conduct the joint pre-repair survey as a single joint expert.

No.	Name	Please tick <input checked="" type="checkbox"/>
1	Kalvin Ang	
2	Xing Guo Qiang	
3	Mohamad Taufikh	
4	Bryan Ang	
5	Adrian Ling	
6	Mohammed Rasul	
7	Marcus Chua	
8	Kenneth Kong	
9	Muhammad Nazril Bin Abdullah	
10	Sathya Sai Kathirrasen	

Please let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

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: Chin Hui Xin [mailto:huixin@n51.com.sg]

Sent: Wednesday, 3 October, 2018 11:48 AM

To: MT_Claim_SG

Subject: SKR1927U & GU1222B - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

Dear Sir/Madam,

As per above subject,

Please refer attachment and:-

Kindly propose / provide your 10 surveyors.

Thank you...

Regards,

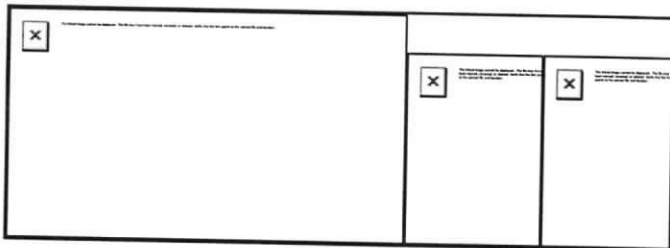
Melody Chin

TWINCAR Automotive Pte Ltd

Office : 6842 0051

Fax : 6741 0510

www.n51.com.sg



TwinCar AUTOMOTIVE PTE LTD

Kaki Bukit Autohub

2 Kaki Bukit Ave 2, #01-17

Singapore 417921

Tel No. : +65 6744 0510 / 6842 0051 Fax No. : +65 6741 0510

Company Reg. No. : 200714616M

GST Registration No. : 200714616M

Our Ref: **SKR 1927 U**

Your ref: **GU 1222 B**

03 October 2018

LONPAC INSURANCE BHD

100 BEACH ROAD

#19-00 SHAW TOWER

SINGAPORE 189702

Attn: Motor Claims Department

BY EMAIL mt_claim@lonpac.com ONLY

Dear Sir/Madam,

DATE OF ACCIDENT: 02 Oct 2018

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by **LIM SOK MEI** to notify you of a road traffic accident on **02 Oct 2018** at about **17:30 HOURS** At **KJE TWDS BKE B4 EXIT 1** involving our client's vehicle **SKR 1927 U & GU 1222 B** driven by you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



.....
Twincar Automotive Pte Ltd

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	03/10/2018 14:55
Date Of Accident	02/10/2018 17:30
Exact Location Of Accident	KJE (BKE) BEFORE EXIT 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR1927U
Insured/Policyholder	
Name Of Registered Owner	LIM SOK MEI
NRIC No	S7014541C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98531570
Alternative Phone No	OFFICE-98531570

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5G
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	5087314668-01
Cover Note Number	

Driver

Name of Driver	LIM SOK MEI
NRIC No	S7014541C
Date Of Birth	01/05/1970
Occupation	INDOOR
Date Of Driving Pass	26/11/1990
Driving Experience	27 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98531570
Fax Number	
Contact Number	OFFICE-98531570
Email Address	NOEMAIL

Address	BLK 277C COMPASSVALE LINK #06-294
Postcode	543277
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
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: : - GENDER: : FEMALE

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?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GU1222B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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 PC4927U
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category BUS
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 3

Vehicle Registration Number SGS4052R
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)

DETAILS OF INJURED PERSON 1

Name LIM SOK MEI
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SKR1927U
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Accident Sketch Plan

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 Authorized 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 **rescind 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.

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 making 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

02 Oct 18

Driver's Signature

(if driver is not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

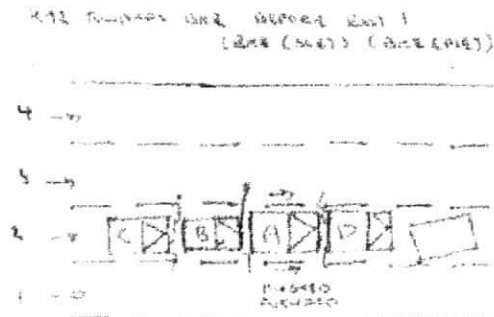
Name

NRIC/FIN No.

Accident Sketch Plan

SKETCH PLAN

VEHICLE A - SKR 1927U
 VEHICLE B - GU 1222 B
 VEHICLE C - PC 4927U
 VEHICLE D - SAS 4052 R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG K32 TOWARDS BRK, I WAS ON THE 2ND LANE.
WHILE HEADING TOWARDS K32 EXIT 1 (BRK (SLE)) (BRK (PIE)) DUE TO THE HEAVY TRAFFIC, THE VEHICLE IN FRONT BRAKE TO COMPLETE STOP, AND SO I TOO APPLIED BRAKE TO COMPLETE STOP. SHORTLY, AFTER A FEW SECONDS I FELT A GREAT IMPACT FROM THE REAR OF MY VEHICLE, AND THE IMPACT WAS SO GREAT THAT PUSHED ME FORWARD AND HIT INTO THE VEHICLE IN FRONT.
ALIGHTED FROM MY VEHICLE AND REALIZED IT WAS A VEHICLE WITH LICENSE PLATE NUMBER PC 4927U THAT COLLIDED TO THE REAR OF MY VEHICLE. AT THE MOMENT OF ACCIDENT I FELT 2 IMPACT BEFORE I HIT ONTO THE VEHICLE IN FRONT.
THE WHOLE ACCIDENT FOOTAGE WAS CAPTURED BY MY IN-CAR CAMERA.
<div style="display: flex; justify-content: space-between;"> VEHICLE A - SKR 1927U VEHICLE C - PC 4927U </div> <div style="display: flex; justify-content: space-between;"> VEHICLE B - GU 1222 B VEHICLE D - SAS 4052 R </div>

DECLARATION

(We declare the foregoing particulars are true in every respect)

Policyholder's Signature
 Date & Time 2/04/18

Driver's Signature
 (If driver is not the policyholder)
 Name

Reporting Centre Personnel's Signature
 Name

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 4541C

Vehicle Details

Vehicle No.: SKR1927U
Vehicle to be Exported: No
Intended Deregistration Date: 03 Oct 2018
Vehicle Make: HONDA
Vehicle Model: VEZEL 1.5G
Primary Colour: Blue
Manufacturing Year: 2014
Engine No.: L15B3516066
Chassis No.: RU11016050
Maximum Power Output: 96.0 kW (128 bhp)
Open Market Value: \$16,657.00
Original Registration Date: 22 Jan 2015
First Registration Date: 22 Jan 2015
Transfer Count: 0
Actual ARF Paid: \$6,657.00
Intended PARF Rebate Details
PARF Eligibility: Yes
PARF Eligibility Expiry Date: 21 Jan 2025
PARF Rebate Amount: \$4,992.00
Intended COE Rebate Details
COE Expiry Date: 21 Jan 2025
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$66,010.00
COE Rebate Amount: \$41,575.00
Total Rebate Amount: \$46,567.00

The information contained herein is correct as at 03 Oct 2018

OK



Police Station Of Origin:
Hougang NPP
357 Hougang Avenue 7 #01-805
SINGAPORE 530357
Tel No: 1800-2869999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/10/2018 21:25	Vide Report No.:	Station Diary No.: 87
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Informant's Particulars

Name of Informant: LIM SOK MEI			Address: APT BLK 277C COMPASSVALE LINK #06-294 SINGAPORE 543277		
ID Type / ID No.: NRIC NO / S7014541C			Contact No.: Home/Office: Mobile: 98531570		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 48	Date of Birth: 01/05/1970	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PRODUCT MANAGER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 02/10/2018 17:30	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 KRANJI EXPRESSWAY BUKIT TIMAH EXPRESSWAY BEFORE EXIT ONE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GU1222B	Van				Slightly Damaged	0
PC4927U	Bus/Coach/Mi nibus				Slightly Damaged	0
SGS4052R	Car				Slightly Damaged	0
SKR1927U	Car	HONDA	VEZEL 1.5G	Blue	Slightly Damaged	1



Police Station Of Origin:
Hougang NPP
357 Hougang Avenue 7 #01-805
SINGAPORE 530357
Tel No: 1800-2869999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKR1927U	NTUC Income Insurance Co-Operative Limited	5087314668-01	22/01/2018	21/01/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	ONG JUN JIE		ID No.	S9233793F
Related Vehicle	GU1222B (Van)		Contact No.	96731422
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	JASRI BIN MOHAMED		ID No.	S8203151J
Related Vehicle	PC4927U (Bus/Coach/Minibus)		Contact No.	87674927
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	STEVEN		ID No.	NIL
Related Vehicle	SGS4052R (Car)		Contact No.	86844998
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



Police Station Of Origin:
Hougang NPP
357 Hougang Avenue 7 #01-805
SINGAPORE 530357
Tel No: 1800-2869999

CONTINUATION OF REPORT

Driver			
Name	LIM SOK MEI	ID No.	S7014541C
Related Vehicle	SKR1927U (Car)	Contact No.	98531570
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 02/10/2018 at about 1730hrs, I was travelling along KJE towards BKE, on lane 2 of a 4 lane road. While heading towards KJE Exit One, due to the heavy traffic, the vehicle in front (SGS4052R) brake to complete stop and so I too, applied brake to complete stop. Suddenly, after a few seconds, I felt a great impact from the rear of my vehicle, and the impact was so great that pushed me forward and hit onto the vehicle in front.

Alighted from my vehicle and realized it was a vehicle with licence plate number PC4927U that collided to the rear of the chain collision. At the moment of accident, I felt 2 impacts before I hit onto the vehicle in front. The whole accident footage was captured by my in-car camera.

After which, we exchanged our particulars and moved off individually. No Traffic Police or Ambulance came down to the accident scene prior my departure.



**SINGAPORE
POLICE FORCE**



T/20181002/2187

4 of 4

Police Station Of Origin:
Hougang NPP
357 Hougang Avenue 7 #01-805
SINGAPORE 530357
Tel No: 1800-2869999


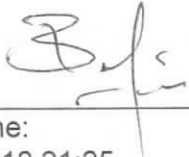
Report No. T/20181002/2187


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: F / Staff Sgt TAN YEOW CHONG 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 02/10/2018 21:25
Officer In Charge Of Case: TP / AEIT / Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172 Authentication Stamp NP168	Classification Of Case:




**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

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT			
LONPAC INSURANCE BHD 300 BEACH ROAD #17-04/07 THE CONCOURSE SINGAPORE 199555		Ref: CS3/LPC18017916/R1rd3e2 Date: 01-11-2018 Code: LPC2	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	GU 1222B	Veh. Inspected	SKR 1927U
Policy No.		Coverage (\$)	0.00
Claim No.	18/18/18/VC05/020976	Excess (\$)	0.00
Assign From	ONG LI LI	Assign Date	03/10/2018
2. Vehicle Particulars & Condition			
Make & Model	HONDA VEZEL 1.5G	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	RU11016050	Colour	BLUE
Odometer	85376 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	215/60 R16	LING LONG	6 mm
L/H Front Tyre	215/60 R16	LING LONG	6 mm
R/H Rear Tyre	215/60 R16	LING LONG	6 mm
L/H Rear Tyre	215/60 R16	LING LONG	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION.			
5. General Information			
Accident Date	02/10/2018	Inspect Date / Time	03/10/2018 (02:45 PM)
Survey held at	N-51 AUTOMOTIVE PL 2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921		
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.			

Report Ref No. CS3/LPC18017916/R1rd3e2

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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