REF: (\$3 /LPC)	019319/Grbez Spec	ial Instruction:	
Surveyor GD ASSIGNM	ENT (Office)		1
From (Person): Gerald Poh of	LPC I)ate/Time:	24.102018 936am
Estimated Cost:	Bill to:	_	
To Inspect Vehicle No: SLJ 4177 (SS Insured:	9:	J61264T
at Workshop m/s & Speed Autow	ukz Tel:	8 533	2434
of 68 Kuki Bukit			
Policy No:		18/18/VI	PUS /021045
Sum Insured:	Excess:		10-(-)
Make of Veh: (Client's Record)	I	1	810501.0
CA / REV / REP. / REV 24 HRS Wp Date/Time: 340 208 1055am Person Contacted:	Sun Sun Ve	H.O.D. Endors	Sement:
Date/Time Action/Instruction (X) Estimate			
STG DUT-X			
14/11/18 Submit PRS report		***	

ANYMING XAL. REF. CPC			5756t	/
,	ASSIGNMENT			
rom. Date:	Veh No:	51.741770	Yr Regn: 09	Decre
stimated Cost:		,	.orry / Taxi / Prime Move	
D. I P WS / TP RES / OD RES / EVA / INV / MV	Truck / Tr	ailer or		
o Inspect Vehicle No:	Make	Toyota u	rish as	757
t Workshop m/s 6 speed Antowe	Colour	Black	A/C: Insured / S	(/ /
f speed Antowe	Sp.Reading	27260	T/Radio: Insured / S	td/NI/NA
nsured	Eng/No:	01		
Policy No.	C/No:	ZA620	6029689	
Claims No.		d / Fair / Poor / Buri		
		r / Jammed / Leake		
		r / Jammed / Leake		
(Client's Record) Make of Veh:		Righ / STD A/Rim		
wake of ven.				
(Dallar Gridler)	1 1/10 0120.	ř: US/	1508RD	
(Policy Condition) Remark: The veh had commenced its			A / MIC OHTSU / PIR / S	CLIMAL /
repair at the time of inspection.	TOYO / YOKO		A / MIC/OHISO/PIR/S	SUMIT
		01	Page	
Bal. or Market Value:	Front P/Rel	,	R/Bal. 6	
DAC Accident Rport: Consistent? : Yes or No	R/Bal.	, mm	L/Bal.	mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal.	D mm	D.O.I. 7 W -	mm / /C
Est. Repairs: days Res.: Yes or No	D.O.A.	14/	lc book of	10-18
Lum Sum: % 3 Val.: Yes or No	Survey held at		7	- Fin
CA / REV / REP. / 24 HRS		s: Frt / Rear / O/	S / NIS) U/C / Roofto	p or •
Vehicle Date: Person Contacted:	The Wick I	hassis frame / Ro	ody Structure affected d	ue to collision
Date / Time Action / Instruction	The program	,	ay otherwise amostos s	30 10 001110101
\$7000 - \$8006				
RE	CEIVED 1 5 NOV	2018		
-				
21				
Date/Time, File Pass to? Preli Report	Davis Of Davis	iri		
. Tren. Report	Days Of Repa		Curvey For	IIED
1) typ: 4 Final Report Date/Time, File Return to?	Resurvey No.	or rrip:	Survey Fee:	450
	Add Fee: : Site In	sp (\$)S + RSSI	
-1	Intervie) Photos	
Report Format :	: Tech.) Others	
		and (\$		
Lump Sum / I.B.I: (\$	1. M/OOM	-13(1 1.p)	1	

Nivitha (LKK Auto)

From:

GERALD POH WEE BIN <geraldpoh@lonpac.com>

Sent:

Wednesday, 24 October 2018 9:56 AM

To:

Admin-D (LKKAuto)

Cc:

MT_Claim_SG

Subject:

PRE-REPAIR SURVEY OF SLJ4177C

Attachments:

24102018095344.pdf

Our Pof : 18/18/18/VP05/021045

Dear Catherine,

Please see attached and proceed with the pre-repair survey.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

CATHERINE LIM LLC

林 ADVOCATES & SOUCITORS

翠 NOTARY PUBLIC-公证官

珍 COMMISSIONER FOR OATHS- 宜餐官

BY CATHERINE C.L.LIM

馆 DIRECTOR

LL.B (HONS) SINGAPORE-法律系-律師 M.B.A. (BUSINESS LAW)- 防业系-硕士

20 Havelock Road #83-81 Central Square Singapore 059765 UEN No. 201310922K GST Registration No. 201310922K Tel: (65) 6438 5500 Fax: (65) 6438 0111 www.catherinelimiic.com Email: Info@catherinelimilc.com CATHERINE LIM LLC is a law corporation with limited liability

RECEIVED 3 OCT 2018

Our Ref. CL/181064/T/SAW Your Ref: SJG 1264T

23 October 2018

M/s Lonpac Insurance Berhad 300 Beach Road #17-04/07 The Concourse Singapore 199555 Attn: Motor Claims Dept

Yeow Chan Soon Blk 862A Tampines Street 83 #06-422

Singapore 521882

Dear Sir

CERTIFICATE OF POSTING (Please be informed that all supporting documents have been forwarded to your insurer.)

via fax: 6296 2706 only

RE: NOTICE TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PRE-ACTION PROTOCOL FOR NON-INJURY MOTOR ACCIDENT CLAIMS (NIMA)

ACCIDENT INVOLVING SLJ 4177C / SJG 1264T ON 20.10.2018 ALONG LAVENDER TOWARDS BALESTIER

We are instructed by Klimmimmuan Tanaporn Mrs Ong Tanaporn to notify you of a road traffic accident on 20.10.2018 involving our client's vehicle No SLJ 4177C and vehicle No. SJG 1264T driven by you at the material time. A copy of the Singapore Accident Statement and/or Police Report is enclosed.

As a result of the accident, our client's motor vehicle has been damaged. Before our client proceed to repair the damaged motor 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 motor 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 let us know your appointed surveyor.

6 Speed Autowerkz Pte Ltd 68 Kaki Bukit Ave 6 #02-05 ARK @ KB Singapore 417896

Contact: Np 85332934 (Sun Sun) tel: 63847037 fax: 63847039

Enc ca: client

aithfully

MSME18137510 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 23/10/2018 13:25 SUBMITTED BY: Chia Pei Ying

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 23/10/2018 15:26

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 witholding 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. 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	23/10/2018 13:25
Date Of Accident	20/10/2018 15:20
Exact Location Of Accident	LAVENDER TOWARDS BALESTIER
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLJ4177C
Insured/Policyholder	
Name Of Registered Owner	KLINNIMNUAN TANAPORN MRS ONG TANAPORN
NRIC No	S6885756B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93861318
Alternative Phone No	OFFICE-93861318
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH
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	ECICS LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MPC17A00620900
Cover Note Number	
Driver	
Name of Driver	ONG LYE HENG
NRIC No	S1721110B
Date Of Birth	14/01/1965
Occupation	INDOOR
Date Of Driving Pass	15/12/2008
Driving Experience	9 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93861318
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address

BLK 23 HOUGANG AVE 3 #05-301

Postcode

530023

...

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

NO

SPOUSE

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

The arry foreign verticle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO NO YES

NO

3

NO

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

I WAS TRAVELLING ALONG LAVENDER STREET AT THE ABOVE MENTIONED DATE AND TIME. WHILE I WAS CHANGING FROM LANE 4 TO LANE 3, A VEHICLE BEARING NUMBER (SJG1264T) CAME OUT FROM BEATTY ROAD AND KNOCKED ONTO MY LEFT PORTION.

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

SJG1264T

Vehicle Make/Model/Colour

VEHICLE B

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

YEOW CHAN SOON

NRIC/Passport Number

Contact Number

97803003

Address

Postcode

Page 2 of 16

Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 2. 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 willul misrepresentation of withholding of material
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- S. 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.
- 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
- 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)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary
 - (ii) Investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by ma;
 - (12) 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
- 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
- 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.
- 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 suture 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:

(If driver is not

Reporting Centre Personnel's Sine

6SPEED AUTO

Sketch Plan #2 Pg. 1

SKETCH PLAN	Lavende	1 towards	Balesties
			Venicle & STG
DESCRIBE CIRCUMSTANCES OF THE	ACCIDENT	LLLILLI	
Mentioned date lane 4 to lane SSG 12647 Knocked onth	and time. 3 a	idel offeet of while I we remote bear. Your Beat.	as changing tiam re number ty road and
CLARATION a declare the inregoing particulars are tru 4. Time: (If drive)	e in every respect. When is not the policyhologatime:	27 let) Nam	10/18 5 35PM



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$1721110B





ONG LYE HENG

CHINESE Date of Birth 14-01-1965 Country of Birth SINGAPORE



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIF PASS DATE

Class 2B Motorcycles =< 200 CC
Class 3 Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg

02 Apr 1990 15 Dec 2008

S1721110B

S/No. 9000091078

Licence No: S1721110B

NP 428A

NRIC No. S1721110B

Blood Group Date of issue 0+- 02-06-1994

APT BLK 23 HOUGANG AVENUE 3 #05-301

SINGAPORE 530023

NRIC No:_\$1721110B

Date: 13-09-2003 No: 4718475

2087566



CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

E-DRIVE PREMIER (ANY WORKSHOP)

MZ300A COMPREHENSIVE ORIGINAL

CERTIFICATE NO: MPC17A00620900

Chassis No: ZGE206029689

Agency Name:

ALPINE INSURANCE AGENCY PTE LTD

Engine No: 2ZR1718697

Agency Code:

1. Index Mark and Registration Number of Vehicle:

SI_J4177C

2. Name of Policyholder:

KLINNIMNUAN TANAPORN MRS ONG TANAPORN (NOT DRIVING)

3. Period of Insurance (both dates inclusive): 09 December 2017 to 08 December 2018

4. Persons or Classes of Persons entitled to drive

a) All Named Drivers declared under the policy except the Policyholder.

b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted 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 enactment or regulation in that behalf from driving the Motor Vehicle.

Named Drivers

1. ONG LYE HENG

5. Limitations as to use

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward, tuition, driving test, race, pace-making, reliability trial, speed-testing, 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.

6. EXCESS APPLICABLE

WINDSCREEN

SECTION I - NAMED DRIVER

SGD 100.00 SGD 500.00

ADDITIONAL EXCESS OTHER THAN NAMED DRIVERS:

SECTION I - AGE <=25, AGE >70 OR DRIVING EXP <2 YEARS OLD

SGD 3,000.00

7. Hire Purchase Company:

MAYBANK

Signed for and on behalf of ECICS Limited

Chief Executive Officer

Important Notice:

i) Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid insurance under the Act.

ii) On the sale of a motor vehicle, Policyholders must surrender all insurance papers issued including the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).

iii) The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.

iv) The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5756B
Vehicle Details	
Vehicle No.:	SLJ4177C
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Oct 2018
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8X A
Primary Colour:	Black
Manufacturing Year:	2016
Engine No.:	2ZR1718697
Chassis No.:	ZGE206029689
Maximum Power Output:	105.0 kW (140 bhp)
Open Market Value:	\$18,749.00
Original Registration Date:	09 Dec 2016
First Registration Date:	09 Dec 2016
Transfer Count:	0
Actual ARF Paid:	\$18,749.00
Intended PARF Rebate Details	建筑是是"MBD DDDA"。
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	08 Dec 2026
PARF Rebate Amount:	\$14,061.00
Intended COE Rebate Details	
COE Expiry Date:	08 Dec 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$53,001.00
COE Rebate Amount:	\$43,030.00
Total Rebate Amount:	\$57,091.00

The information contained herein is correct as at 25 Oct 2018

OK



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

Will		PRE-REPAIR INS	SPECTION REPORT	
LON	LONPAC INSURANCE BHD		Ref: CS3/LPC18019319/Grbe2	
	300 BEACH ROAD #17-04/07 THE CONCOURSE SINGAPORE 199555		Date: 16-11-2018	
			Code: LPC2	
1.		Policy Particulars	s :- (THIRD PARTY CLAIN	()
	Insured Veh.	SLG 1264T	Veh. Inspected	SLJ 4177C
	Policy No.		Coverage (\$)	0.00
	Claim No.	18/18/18/VP05/021045	Excess (\$)	0.00
	Assign From	GERALD POH	Assign Date	24/10/2018
2.		Vehicle Par	rticulars & Condition	
	Make & Model	TOYOTA WISH	c.c	1797
	Engine No.	HIDDEN	Year of Reg.	2016
	Chassis No.	ZGE206029689	Colour	BLACK
	Odometer	27260 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Cond	litions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	215/50 ZR17	MICHELIN	6 mm
	L/H Front Tyre	215/50 ZR17	MICHELIN	6 mm
	R/H Rear Tyre	215/50 ZR17	MICHELIN	6 mm
	L/H Rear Tyre	215/50 ZR17	MICHELIN	6 mm
4.	Description		otion of Damages	
		STAINED DAMAGES AT THE N/S BODY.THE E AFFECTED DUE TO COLLISION.		
5.	General Information			
	Accident Date	20/10/2018	Inspect Date / Time	24/10/2018 (04:00 PM)
	Survey held at	6 SPEED AUTOWERKZ - 68 K	AKI BUKIT AVE 6 #02-05	
	Repairer			
5a.			Remarks	
	B) THE REPAIR E	ON WAS CONDUCTED ON A "V STIMATE WAS NOT PRESENTE VAS TOLD TO PREPARE THE E EASE FIND DAMAGED VEHICL	ED AT THE TIME OF INSPEC STIMATE.	

Report Ref No. CS3/LPC18019319/Grbe2

Inspected By

v0

XING GUO QIANG

M.MATAI, AMSAE-A
Automotive Assessor

L

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES: This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.