* DIS CASE OWNE	IR.	cc 3/ [11 180 9	912, eas LKK:
ourveyor:		ASSIGNMEN DOI:	Date/Time: \/1\/18
			Registered in Merimen:
Pre-assign / CCI	J/FIE b 7.0	1.	
Insured Vehicle N	10. 1 /C 5°	140L 1	No.
Name of Insured	2 10	vo D 0 1	Jaim No. ;
K_M	- Car (10- / Dx/f)	(1 P)	olicy No.
Insured Tel No.		IP: M	fake / Model :
Excess Sec II :SS		D.O.A: 7/10/18 P	lace of Accident :
Is driver the owner	17 (YES/(NO))	Nature of Accident :	***
If NO, Driver Na		-21-21	10.00
Driver Tel			OF GIA REPORT: YES NO; TP GIA REPORT: YES NO ISUITED LIABILITY: % Final? Yes / No
(Val 802)	Q 1.	(112)	nsured Liability: % Final? Yes / No
SKN 993	8 17		
INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP; Tel: Liability RMKS:		INSRS: WSP: Tel: Liability: RMKS: INSRS: WSP: Tel: Liability: RMKS:
Date/ Time	- C1		
$-A_{\mathbf{v}}$	Chrod38 P- X	6 30160 T-X	STAGE DATE/PIC
7			Non-Reporting ltr (1st):
BI W			Non-Reporting ltr (2nd): Non-Reporting ltr (Final):
13. 11. 10	0		Notification ltr (if non-pickup):
13.11.18	SEEK MANDERE FOR LIA	BeTun	Call OI:
23.11.18	MANORIE APPROVE TO RELE	IT TO CLAWS	After call ltr to OI: Documentation Check List: Handler Typist
	100000000000000000000000000000000000000	and of Colonia	Notification ltr (if non-pickup)
23-11-15	EMBA WAS TO REJECT	TP CURING.	After call itr to OI:
		A) 11 1	LW Authorisation To Act:
		A cerelled	Release Voucher:
		24/1/100	Æ Final Repair Bill:
			Car Rental Invoice: Towing Invoice
			LTA/GIA:
			Medical Bill:
			PIR:
			Mandate/Reject Instruction;
			LOD
PRELIMINARY ADVICE	Date/Time:	See The	Payment Breakdown Form;
	Se 0000 1 10010;	Sent By:	Post-Repair Photos;
FINALIZATION	Date/Time:	Confirm with:	Others: Confirm by:
Repair Cost:	S\$ (days) Reduction: %	
FINAL SETTLEMENT	Date/Time: C	onfirm with	Email Call Call
Final Liability:	% 0 (Agreed / A	ssessed) BOLA S/N No. ; 10	If NO or B 28, Ass. Lia:
Repair Cost:	SS		TO MAIN ROAD HIT TO.
Loss of Rental (LOR):	SS (days)	
Loss of Use (LOU): Loss of Income (LOI):	S\$ (\$ x S\$ -(\$ x	days)	
LOR only LOU only		days)	
GIA/LTA Search	S\$	+LOI [Tick only one]	
Medical:	SS		1) Claim to A.
Disbursement;	SS	(e.g. Tow/ Independent)	Claim status: Normal/Reject/Private Settle Report Format:
Legal Cost	22		3) Survey fee:
Total:	The second secon	lobal Sum SS;	
FINAL PAYMENT	0/2	onfirm with:	Email Call
Payee 2: (Strike if N.A.)		ame 1:	
Payee 3: (Strike if N.A.)		ame 2:	
	124	Marie J.	No. of Control of Cont

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 <u>truthful and accurate</u> 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	29/10/2018 12:24	
Date Of Accident	27/10/2018 13:25	
Exact Location Of Accident	COMPUTING DRIVE	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKN9938G/	
Insured/Policyholder		
Name Of Registered Owner	LIM YUN NA RACHEL	
NRIC No	S1801052F	
Email Address	RACHELTAN2006@YAHOO.COM.SG	
Mobile Phone No	(LOCAL) +65-96877853	
Alternative Phone No	OTHERS-96877853	
Vehicle Particulars		
Manufacturer	BMW	
Model	316	
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE	
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	

B27588965SMP

Driver

Policy Number

Cover Note Number

Name of Driver ALFRED TAN WEI RU

 NRIC No
 \$1745707A

 Date Of Birth
 08/05/1966

 Occupation
 INDOOR

 Date Of Driving Pass
 13/10/1984

Driving Experience 34 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97601328

Fax Number

Contact Number OTHERS-96877853

EMail Address TANBOX2002@YAHOO.COM.SG

Sketch Plan Pg. 2

SKETCH PLAN	CONTROL OF THE SECURIOR PROPERTY OF THE SECURIOR SECTION OF THE SECURIOR SE	reference and the control of the con
	BUS AZ Computing	Drive
	a Mus Guild House Go	park
DESCRIBE CIRCUMSTAN	ICES OF THE ACCIDENT	
On 27 act 2	018. I was driving out of	NUSS Guild Hase Carpark. 1
saw a oran	se NUS internal bus	: Az on the rund outside the
Carpark. 1	stopped my car and	
The state of the s	through passing my	
scrapping &		
my frient	1 1 .	the road, and the
front of	My car (SEN9938	8, white RMW 316) scrapped
and paint-	off! I saw the s	
the bus ,	assistant come dow	
harf had	a large stratch	mark running towards
As rear.		cane down and we
exchanged	defails. He is a	dower with Confort Delyn
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this happener		ull cruite House, turning
04 -10 6	computing Dive, or	F Kent Figge Drive
CLARATION		NOCE ASSE
(177) · 7) 1 · 7/2 · 7/3 · 7/3 · 7/4	rticulars are true in every respect.	Performance Microsoft Lenited 20 11 333 Absorbus Shed 20 11 Sing Darky Performance Clenite 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Sholder's Signature	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

290ct 2018

Page 4 of 16

Address 28 DALVEY ESTATE #03-30

Postcode 259548

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION

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?

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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?

Circumstances of Accident

REFER TO ATTACH.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

YES

NO

NO

1

NO

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number PC3940L

Vehicle Make/Model/Colour VOLVO B9L / ORANGE (NUS) (COMFORT DELGRO)

Details Of Properties

Vehicle Category BUS

Name of Driver PEH HOCK SIEW

NRIC/Passport Number S0227227Z

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage LEFT

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.
- 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.
- 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.
- 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 the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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:
 - 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:
 - 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:

290ct 2018

1130am

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

Date & Time:

Reporting Centre Personnel's Signature

GARY FOH CHAI HOON Performance Monra Limited 303 Alexandra Road Simo Darby Performance Option Signature 15924

Name:

NRIC/FIN No.:





* e-Services (/content/policehubhome/homepage.html)

Log in ♣

Status of Driving Licence

Qualified Driving Licence

Qualified Driving Licence Number

S0227227Z

Status of Qualified Driving Licence

Valid

Class(es) of Qualified Driving Licence

3,4,5

Expiry Date

Valid for life unless revoked, suspended or disqualified

Provisional Driving Licence

You are not a valid Provisional Driving Licence Holder.

HOME (https://www.police.gov.sg/)
ABOUT US (https://www.police.gov.sg/about-us)
SGSECURE (https://www.police.gov.sg/sgsecure)
I-WITNESS (https://www.police.gov.sg/iwitness)
COMMUNITY PROGRAMMES (https://www.police.gov.sg/community-programme)
RESOURCES (https://www.police.gov.sg/resources)
NEWS & PUBLICATIONS (https://www.police.gov.sg/news-and-publications)
JOIN US (https://www.police.gov.sg/join-us)
FAQS (https://va.ecitizen.gov.sg/cfp/CustomerPages/SPF/explorefaq.aspx)
CONTACT US (https://www.police.gov.sg/content/contact-us)
E-FEEDBACK (/content/policehubefeedback/efeedback.html)
SITEMAP (https://www.police.gov.sg/sitemap)

Privacy Statement (https://www.police.gov.sg/content/privacy-statement) | Terms of Use (https://www.police.gov.sg/content/terms-of-use) | Rate this Service (https://form.gov.sg/forms/spf/5b90934f64567e000fb2d9a6) . © 2018 Singapore Police Force. A Member of The Home Team (https://www.mha.gov.sg).

Print Received Message

This mail is associated with:

*SKN9938G (MC2018/2896) [PC3940L] TP

LIM YUN NA RACHEL Oct 27 2018 1:00PM [COMFORTDELGRO BUS PTE LTD] Performance Motors Limited

From

India International Insurance Pte Ltd (HQ) (III_SG), sent on 20/11/2018 15:30 PM.

То

KK HO

Subject

Alert - Adj Mandate Maintained - SKN9938G - Claim Handler: Lalitha Krishnan

Maintained: We agree with your views you may deny liability		

Asher Sng (LKKAuto)

From:

Asher Sng (LKKAuto)

Sent:

Friday, 23 November 2018 2:22 PM

To:

PBSP

Cc:

Admin A

Subject:

RE: REQUEST FOR DIRECT SETTLEMENT - SKN9938G & PC3940L (INDIA) ON

27/10/2018 *** LKK REF: CC3/III18019912/ea3

Attachments:

OI SKETCH PLAN.pdf

'WITHOUT PREJUDICE' SAVE AS TO COSTS

Hi Sir/Mdm,

We refer to the above matter.

We attached here with a copy of our insured's accident statement for your easy reference.

Our principal has reiterated that the accident was caused due to the entire negligence of your client exit from the minor road and collided into our insured vehicle.

We are of the opinion that liability is not in your client's favor.

Under such a circumstances, we regret to inform you that we have our principal instruction to deny liability and unable to look into your client's claim.

Thank You.

Best Regards,

Asher Sng | Case Handler

LKK Auto Consultants Pte Ltd

phone: 6841-6051 | email: <u>ashersng@lkkauto.com</u> | fax: 6741-4108 Blk 51. Paya Ubi Industrial Park. Ubi Avenue 1, #02-25 | \$(408933)

From: Vivian Lau (LKKAuto)

Sent: Tuesday, 20 November 2018 11:35 AM

To: PBSP <pml-pbsp@simedarby.com.sg>; Asher Sng (LKKAuto) <AsherSng@lkkauto.com>

Cc: Admin A <admin-a@lkkauto.com>

Subject: RE: REQUEST FOR DIRECT SETTLEMENT - SKN9938G & PC3940L (INDIA) ON 27/10/2018 *** LKK REF:

CC3/III18019912/ea3

'WITHOUT PREJUDICE' SAVE AS TO COSTS

Dear Caroline.

Thank you for the email,.

Dear Asher.

Kindky assist CC3/III18019912/ea3

Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement.

In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement.

Thank you Best Regards,

Vivian Lau| Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-8625 | email: <u>Vivianlau@lkkauto.com</u>] fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: PBSP [mailto:pml-pbsp@simedarby.com.sg]
Sent: Tuesday, 20 November, 2018 11:30 AM
To: Vivian Lau (LKKAuto) < vivianlau@lkkauto.com>

Subject: Re: REQUEST FOR DIRECT SETTLEMENT - SKN9938G & PC3940L (INDIA) ON 27/10/2018 *** LKK REF:

CC3/III18019912/ea3

Dear Sirs,

Kindly reply on liability.

Thank you.

Regards, Caroline C/o Performance Motors Limited - Body and Paint 303 Alexandra Road Singapore 159941 DID: 6319 0174 Fax: 6479 4601

From: Vivian Lau (LKKAuto) < vivianlau@lkkauto.com > Sent: Monday, 12 November 2018 10:53:00 AM

To: PBSP

Subject: Automatic reply: REQUEST FOR DIRECT SETTLEMENT - SKN9938G & PC3940L (INDIA) ON 27/10/2018 *** LKK REF: CC3/III18019912/ea3

Hi,

Thank you for your email.

I will be back on 14 November.

I will look into your email when I am back.

For urgent matters, please contact Ms. Thin Thin at 6841-2360 or write to cs-a@lkkauto.com

Thank you.

Vivian