

REF: CS/ATG18021211/Gvber

Special Instructions:

From (Person): Marivel of Alh Date/Time: 21/12/2018
Estimated Cost: _____ Bill to: _____

48: \$ 29000.00

Third Parties:

Claimant:

Surveyor: ST Appraisal

Workshop: Hunt 'N' Hook.

OD/TP Re-inspection) / Evaluation

To inspect Vehicle No: SL 7858H Insured: SLW 8991 Z
at Workshop m/s Huat Hock Motor Tel: 8161 6988 (David)
of Blk 3012 Bedok North Ave 4 # 01-2054

Policy No: _____ Claim No: 906258 02556003

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 16052018

(Client's Record)

28-11-2018 (Wednesday) @ 1:30pm

H.O.D. Enrolment/Date: _____

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

Date/Time: 12/12 Confirmed with \$12.12 Final Fig 12.12, 12 days (Red \$ 12.12 / 12 %; Original 12 days)

Date/Time: 17/1/19 Submit Final Fig 14550, 10 days (Red \$ / %; Original days)

Date/Time	Action/Instruction
	SL 7353H - NBA / INK15045115/Y SW 3791Z - X 17/1/20

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

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:

Basic & Add

Transport

Photos

Others

Total

Date _____

200

240

1) Date/Time 22/1- typist File Pass to

2) Date/Time

File Return to

3) Date/Time _____ File Pass to _____

4) Date/Time

File Return to

5) Date/Time _____ File Pass to _____

6) Date/Time

File Return to

REF:

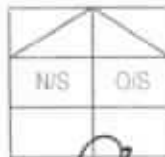
ASSIGNMENT

(-2021)

From _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TR RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop n/s: _____
 of _____
 Insured _____
 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: \$40k.
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 18 24 10 days Res: Yes or No
 Lump Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SL7858H To Regn: 12 Mar 1965
 Type: M Car / M Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or

Make: Volkswagen 1200 cc 1192
 Colour: Red A/C Insured / Std / NI / NA
 Sp. Reading: 80876 T/Radio: Insured / Std / NI / NA

Eng No: _____
 C No: 115427254

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/55 R15
 R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or

Front: _____ Rear: _____
 R/Bal: 6 mm R/Bal: 6 mm
 L/Bal: 6 mm L/Bal: 6 mm

D.O.A. _____ D.O.I. 28-11-18

Survey held at: w/s 1230 pm

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time Action / Instruction

Date/Time: File Pass to?

☐ : Prel. Report

Days Of Repair:

11

☐ : Final Report

Resurvey No. of Trip:

Date/Time: File Return to?

Survey Fee

12

Transportation

Add Fee: ☐ Site Insp (\$

) 1 - 1000

☐ Interview (\$

) 1000

☐ Tech. Insp (\$

) 1000

☐ Wash-end (\$

) 1000

Report Format :

Lump Sum / L.B. / (\$

TOTAL

17/11/2019

Catherine Chong (LKK Auto)

From: Hsiao Tong (LKKAuto) <chewht@lkkauto.com>
Sent: Wednesday, 21 November, 2018 3:11 PM
To: Olea, Maricel
Cc: Admin A; assignments; Vic (LKKAuto); SUR; jenniferguay@visionlawllc.com
Subject: RE: #9062580925SG003#023# Your Ref: AW 1-jgv-ins-H40-106786-18Gw - PD claim
Attachments: 9062580925SG_PD part 1.pdf

Hi Maricel.

Thank you for your assignment.

We will arrange accordingly.

By copy to Assign Team.

Kindly assist (TPRI)

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Olea, Maricel <Maricel.Olea@aig.com>
Sent: Wednesday, 21 November 2018 3:00 PM
To: Jennifer Guay <jenniferguay@visionlawllc.com>; Hsiao Tong (LKKAuto) <chewht@lkkauto.com>; Admin A <admin-a@lkkauto.com>; Vic (LKKAuto) <vicalpeh@lkkauto.com>
Subject: RE: #9062580925SG003#023# Your Ref: AW 1-jgv-ins-H40-106786-18Gw - PD claim

WITHOUT PREJUDICE

SAVE AS TO COSTS

(Please reply through this correspondence)

Dear Jennifer,

Thank you for your response.

Dear Hsiao Tong / LKK,

Refer to attached survey report **(Part 1 of 3)**.

Please arrange with your surveyors to conduct physical re-inspection of TP vehicle SL7858H, details as follows:-

- (a) Date : 28 November 2018 (Wednesday)
- (b) Time : 1.30pm.
- (c) Place : M/s Huat Hock Motor Motor Workshop
Blk 3012 Bedok North Ave 4 # 01-2054
Bedok Industrial Park E
Singapore
- (d) Tel : 81616988 (David)

Kindly let us have your report by 12th December (Wed).

Best Regards,

Maricel Olea

AIG

Senior Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1826 | Fax +(65) 6835 7416

maricel.olea@aig.com | www.aig.com.sg

AIG Asia Pacific won General Insurance Company of the Year at the 22nd Asia Insurance Industry Awards.
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From: Jennifer Guay [<mailto:jenniferquay@visionlawllc.com>]

Sent: Wednesday, November 21, 2018 1:52 PM

To: Olea, Maricel

Subject: RE: #9062580925SG003#023# Your Ref: AW 1-jgv-ins-H40-106786-18Gw - PD claim

Importance: High

CLAIMANT : OW TAI CHUN

ACCIDENT INVOLVING SL 7858 H & SLW 8991 Z ON 16th MAY 2018 AT ALONG BEDOK SOUTH AVENUE 1 TOWARDS BEDOK CENTRAL AT ABOUT 20:15 HRS

Dear Sirs

Refer to your email of 8 November 2018.

We have made an arrangement for our client's vehicle **SL7858H** to be available for re-inspection on the following date, time and venue.

- (a) Date : 28 November 2018 (Wednesday)
- (b) Time : 1.30pm.
- (c) Place : M/s Huat Hock Motor Motor Workshop
Blk 3012 Bedok North Ave 4 # 01-2054

Bedok Industrial Park E
Singapore

(d) Tel : 81616988 (David)

Please let us have your confirmation and ensure that your appointed surveyor attends to the above without fail. Thank you.

Regards

Jennifer Guay

(Secretary)

VISION LAW LLC

133 New Bridge Road #18-01

Chinatown Point

Singapore 059413

Tel : 6534 2811 (Ext 116)

Fax : 6535 6802

From: Olea, Maricel [<mailto:Maricel.Olea@aig.com>]

Sent: Thursday, 8 November, 2018 4:04 PM

To: Jennifer Guay (jenniferguay@visionlawllc.com)

Subject: #9062580925SG003#023# Your Ref: AW 1-jgv-ins-H40-106786-18Gw - PD claim

Importance: High

WITHOUT PREJUDICE

SAVE AS TO COSTS

(Please reply through this correspondence)

Dear Jennifer,

We refer to the above matter.

Strictly without admission of liability, please be advised that we are requesting to conduct physical re-inspection of your client's vehicle.

In this regard please advise the place, date and time to enable us to make the necessary arrangement with our assessor.

We shall be grateful if you could hold your hands in the meantime.

Best Regards,

Maricel Olea

AIG

Senior Complex Claims Examiner

Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1826 | Fax +(65) 6835 7416

maricel.olea@aig.com | www.aig.com.sg

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VISION LAW LLC

Advocates & Solicitors

(Incorporated with limited liability)

Unique Entity No. 200721148H

Head Office: 133 New Bridge Road #18-01/02 Chinatown Point, Singapore 059413

Branch: 490 Lorong 6 Toa Payoh #03-11 HDB Hub (Biz 3 Lobby 1), Singapore 310490

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> Back to OneMotoring

D.O.A. 16/5/2018
Bal. = 3yrs 1.5mths

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	7469H
Vehicle Details	
Vehicle No.:	SL7858H
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Jan 2019
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	1200
Primary Colour:	Red
Manufacturing Year:	1965
Engine No.:	RVS12116
Chassis No.:	115427254
Maximum Power Output:	-
Open Market Value:	\$0.00
Original Registration Date:	12 Mar 1965
First Registration Date:	12 Mar 1965
Transfer Count:	4
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	30 Jun 2021 /
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$44,234.00
COE Rebate Amount:	\$11,872.00
Total Rebate Amount:	\$11,872.00

The information contained herein is correct as at 17 Jan 2019

OK

► Volkswagen 1200 Used Vehicle List (4 vehicles)

Car Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Company	Availabi
Volkswagen Beetle 1200 (COE till 08/2028)	\$36,800	\$3,850 /yr	11-May-1965	1,192 cc	56,879 km	Prem Roy Motoring	Availabl
Consignment Unit! Loan And Insurance Available! Trade In Welcome! Call Now For Viewing Appointment! Office No. - 66028046 Zin - 90025579 Kana - 96435365 Ash - 98896985							
Volkswagen Beetle 1200 (COE till 04/2019)	\$50,000	-	28-Jan-1972	1,192 cc	-	360 VR Cars	Availabl
Viewing By Appointment Only. Office No. - 69310005 Don Ong - 87764896 James Tan - 90700005 Albi Dang - 96966813							
Volkswagen Beetle 1200 (New 10-yr COE)	\$70,800	\$7,070 /yr	09-May-1973	1,192 cc	-	Prem Roy Motoring	Availabl
Comes With 10 Years New COE! Car Has Been With The Current Owner For About 20 Years, Original Paintwork For Dark Metallic Green! Car In A Very Excellent Condition! View To Believe! On Normal Plate ... Office No. - 66028046 Raj - 98474881 Ash - 98896985							
Volkswagen Beetle 1200 (COE till 07/2021)	\$49,999	\$19,710 /yr	29-Nov-1973	1,192 cc	-		Availabl
1973 Well Maintained Beauty That Will Never Go Down In Value. Dependable Collectible Item. New Paintwork, Engine Recently Overhaul In 2017 With Invoice As Proof. Call To Arrange For Viewing. Only ... Office No. - - Stan - 81213003							

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Add to Shortlist
 Add to Compare
 Add a Note
 Report Error
 More Actions

Car Details

Price	\$49,999	
Depreciation	\$19,710 /yr	?
Reg Date	29-Nov-1973 (2yrs 6mths 14days COE left)	
Manufactured	1973	?
Mileage	-	
Transmission	Manual	
Engine Cap	1,192 cc	
Features	Normal Scheme Volkswagen Beetle With 1973 EC Plate, Excellent And Dependable Daily Ride With Working Aircon.	
Accessories	Optional: Many Original Spares Parts And Accessories, Doors, Fenders, Front And Rear 1960s Bumper, Cushion Seats, Etc.	
Description	1973 Well Maintained Beauty That Will Never Go Down In Value. Dependable Collectible Item. New Paintwork, Engine Recently Overhaul In Dec 2017 With Invoice As Proof. Call To Arrange For Viewing. Only Looking For Genuine And Sincere Enquiry. Price Negotiable. Thanks!	
COE	\$47,105	?
OMV	-	?
Dereg Value	\$11,950 as of today (change)	?
No. of Owners	3	?
Type of Veh	Others	
Category	COE Car, Direct Owner Sale	
Availability	Available	DIRECT OWNER

Add to Shortlist
 Add to Compare
 Add a Note



Seller Information

Contact Person(s) St
Contact No. 81

USEFUL FORMS

- » Indemnity form
- » Receipt
- » Ownership Transfer
- Instructions on how consumer deal
- Regardless of buying handle your paperwork for **FREE**.

Compare

Posted on: 26-Dec-2018 | Last Updated on: 16-Jan-2019



發 福 摩 哆 車 房
HUAT HOCK MOTOR WORKSHOP

BLOCK 3012, BEDOK NORTH AVE 4, #01-2054,
BEDOK INDUSTRIAL PARK E, SINGAPORE 489978.
Tel / Fax: 6445 2934 Hp: 8161 6988
BUSINESS REG NO. 37565400C

17 September 2018

OW TAI CHUN
C/o Block 3012 Bedok North Ave 4
#01-2054
Singapore 489978

REPAIR COST FOR VEHICLE NO. SL7858H

Date of Accident : 16 MAY 2018

Agreed Repair Cost

\$29,000.00

Grand Total

\$29,000.00

=====



ST Appraisal Services

Insurance Loss Adjusters & Licensed Appraisers

Insurance Claim Investigator

Business Address: 60 Arab Street Singapore 199757

Tel: 66523352 / 98586761; Fax: 6297 0270

E mail - ttrajan@singnet.com.sg

Mailing Address: 161 Alexandra Post Office Singapore 911506

Invoice No : 05780

ORIGINAL

INVOICE

Date : 2 Aug 2018

Our Ref : TP / HHM SL7858H/ 05.16/18

Your Ref :


CUSTOMER PARTICULARS

Name	:	Mr Ow Tai Chun
Address	:	C/o Blk 3012 Bedok North Ave 4
		#01-2054
		Singapore 489978

ASSIGNMENT

TP Motor Claims by SL 7858 H

DESCRIPTION	AMOUNT CHARGEABLE
A set of Survey Report, correspondence & consultation. Other disbursements incurred. Transport charges.	\$1,350.00
TOTAL	\$1,350.00
Terms of payment: 7 days from date of invoice All Payments please make payment to "ST Appraisal Services"	


Authorised Signature

ST Appraisal Services

Insurance Loss Adjusters & Licensed Appraisers

Insurance Claim Investigator

Business Address: 60 Arab Street Singapore 199757

Tel: 66523352 / 98586761; Fax: 62970270

Mailing Address : 161 Alexandra Post Office Singapore 911506

Date : 2nd Aug 2018

Our Ref : TP / HHM SL7858H/ 05.16/18

Your Ref :

Mr Ow Tai Chun
C/o Blk 3012 Bedok North Ave 4
#01-2054
Singapore 489978

DAMAGED VEHICLE (SL 7858 H) INSPECTION REPORT (WITHOUT PREJUDICE)

Detailed accounts of our inspection are as follows:

(A) Reference

Name of Claimant	: Mr Ow Tai Chun	Date of Request	: 18 th May 2018
		Referred By	: Insured
Policy No.	: Please Advice	Date of Inspection	: 18 th May 2018
Claim No.	: Please Advice	Date of Re-inspection	: -
Accident Date	: 16 th May 2018	Sum Insured	: NA
Repairer	: HUAT HOCK MOTOR WORKSHOP	Excess Amount	: NA
	Blk 3012 Bedok North Ave 4	3 rd Party Vehicle	: Please Advice
	#01-2054 Singapore 489978	3 rd Party Insurer	: Please Advice

(B) Particulars of Vehicle

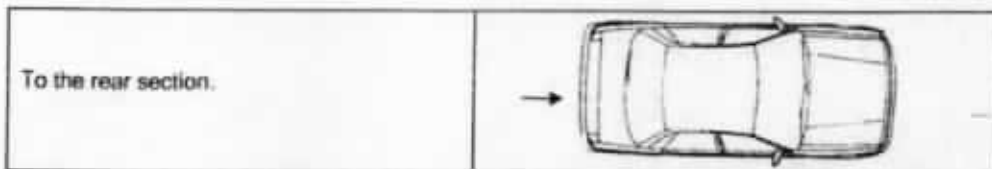
Registration No	: SL 7858 H	Mileage	: 75802 Km
Make & Model	: VOLKSWAGEN 1200	Engine No	: RVS12116
Date of Registration	: 12 th Mar 1965	Chassis No.	: 115427254
Colour	: Red	Engine Capacity	: 1,192 cc

(C) Pre-Accident Condition (Static Test Only)

Steering	: In order	Paint Work	: Good
Foot-brake	: In order	Modification	: NIL
Hand-brake	: In order	General Condition	: Good

(D) Tyre Condition

	Tread Depth	Make	Size
Front Left	60 %	BRIDGESTONE	195/55 R15
Front Right	60 %	BRIDGESTONE	195/55 R15
Rear Left	60 %	BRIDGESTONE	195/55 R15
Rear Right	60 %	BRIDGESTONE	195/55 R15

(E) Point of Impact**(F) General Description of Damages**

The impact of the collision has damaged/affected the rear bumper, hood cover, rear end panel and etc.

Please refer to the Annex for a detailed account of the damages and photographs taken.

(G) Recommendation

We have inspected thoroughly the actual damages found on the vehicle, before we arrived at our recommendation as to whether the parts needed replacement or repairs.

Our adjusted cost of lump sum repair is \$29,000.00 and an estimated 26 days is required to complete the repair. Please refer to the Annex for a detailed account of the cost estimates.


(H) Remarks

We have not authorised the repairs. However for information, under normal circumstances, the repairs should not exceed 26 days.

This inspection was conducted on a "without prejudice" basis.

We are pleased to advise that the inspection work was carried out accordingly, and hereby submit our Appraisal Report, which includes evidence photographs.

ST Appraisal Services


T T RAJAN
MVI, ITC (Mechanical), NTC (Motor Vehicle)
ASIET, MSAAA, Assessor/Appraiser

ASSESSMENT OF REPAIRS AND SPARE PARTS COSTS FOR VEHICLE NO: SL 7858 H

Adjustment of Spare Parts Costs for Repairs					
Item	Qty	Vehicle parts description	Condition / Remark	Estimated by workshop	Disc. (%) Adjusted cost (\$S)
1	1	Hood cover	dented	1126.00	5 1069.70
2	2	Hood cover hinge	distorted	268.10	5 254.70
3	1	Hood cover lock	bent	122.94	5 116.79
4	1	Hood cover rubber seal	cut	179.65	5 170.67
5	1	Hood cover outer garnish	damaged	154.50	5 146.78
6	1	Hood cover outer garnish inner lamp	damaged	97.20	5 92.34
7	1	Rear windscreen	damaged	920.70	5 874.67
8	1	Rear windscreen moulding	necessary	188.50	5 179.08
9	2	Taillamp assembly	damaged	654.10	5 621.40
10	1	Rear bumper assembly	dented	922.15	5 876.04
11	2	Rear bumper bracket	dented	284.60	5 270.37
12	2	Rear bumper bracket rubber	cut/damaged	164.00	5 155.80
13	2	Rear mudguard	dented	1396.40	5 1326.58
14	2	Rear mudguard dust cover	damaged	378.00	5 359.10
15	2	Rear mudguard rubber seal	cut	196.40	5 186.58
16	2	Rear mudguard inner panel / wheelhouse	to repair	1244.00	100 0.00
17	2	Rear mudguard inner chrome panel	dented	442.00	5 419.90
18	1	Engine inner ventilator panel	dented	362.10	5 344.00
19	1	Rear lower panel	dented	642.00	5 609.90
20	1	Rear lower panel inner seal	damaged	113.20	5 107.54
21	1	Air con compressor	distorted	1227.20	5 1165.84
22	1	Air con compressor V-belt	cut	144.60	5 137.37
23	1	Air con compressor belt tensioner	distorted	92.85	5 88.21
24	1	Ignition coil	damaged	189.00	5 179.55
25	1	Dynamo charger	distorted	511.00	5 485.45 X H N Δ
26	1	Starter motor	distorted	392.10	5 372.50 X H N Δ
27	2	Rear shock absorber	distorted	596.40	5 566.58 } N N
28	2	Rear link arm	distorted	219.60	5 208.62 } N N
29	1	Exhaust muffler	distorted	422.30	5 401.19
30	2	Engine inlet manifold	cracked	978.40	5 929.48
31	1	Gear box assembly	damaged	4500.00	5 4275.00 Repair
32	1	Gear box mounting	distorted	185.00	5 175.75
33	1	Gear box bearing	affected	157.20	5 149.34 X H N Δ
34	1	Gear box oil seal	necessary	164.50	5 156.28 / 15.11 Δ
35	1	Gear box shaft	distorted	482.00	5 457.90 X H N Δ
36	1 set	Gear shaft bush	necessary	278.50	5 264.58 X H N Δ
37	1	Gear box clutch plate	necessary	250.00	5 237.50 } X H N Δ
38	1	Gear box clutch disc	necessary	200.00	5 190.00 }
39	1	Gear box clutch fork	necessary	100.00	5 95.00 }
40	1	Gear box clutch bearing	necessary	58.00	5 55.10 }
41	2	Engine mounting	distorted	330.00	5 313.50

ST Appraisal Services

Annex

42	1	Engine mounting bracket	distorted	189.70	5	180.22	
43	1	Rear wheel shaft RH	distorted	497.20	5	X 472.34	
44	1	Rear wheel shaft LH	distorted	497.20	5	X 472.34	
45	2	Rear wheel shaft support arm	distorted	360.00	5	X 342.00	
46	2	Rear wheel bearing	necessary	226.00	5	214.70	
47	1	Engine overhaul kit	necessary	320.00	5	304.00	X
48	1	Oil cooler housing	damaged	246.20	5	233.89	
49	1	Engine block head	damaged	2124.00	5	X 2017.80	Repair
50	1	Engine main pulley	distorted	385.00	5	365.75	
51	1	Engine oil cooler	damaged	447.00	5	424.65	
Special Nett Items							
1	1	Air con compressor support	distorted	350.00		340.00	220
2	1	Air con compressor tensioner bracket	distorted	180.00		170.00	120
3	1	Rear licence plate label	necessary	45.00		40.00	30
4	1	Rear body panel sealant	necessary	210.00		190.00	120
5	1	Engine oil	necessary	120.00		100.00	X
6	1	Gear box oil	necessary	100.00		85.00	X
7	1	Rear floorboard insulation	damaged	160.00		120.00	90
8	2	Rear fender inner trim lining	cut/damaged	550.00		500.00	400
9	2	To remove/retify both front seat assembly.	damaged	800.00		750.00	250
10	1	Rear third brake light	detached	120.00		110.00	80
Total parts				29262.49		26519.32	1310

Adjustment of Labour Costs for Repairs

To remove/replace hood cover, rear fender, rear end panel, rear bumper, taillamps & etc. To repair/reshape rear chassis frame, rear upper panel & etc.	2160.00	1980.00	1000
Supply paint material and to respray replaced and affected panels (hood cover, rear end panel, rear mudguard, rear floor panel, rear upper panel & etc.	1800.00	1650.00	1000
To supply parts and carry out engine overhaul. To replace necessary seals and gaskets where necessary.	2400.00	2200.00	XNN
Send engine to machine shop for repair job.	450.00	380.00	XNN
To supply parts and carry out gear box overhaul. To replace necessary seals and gaskets where necessary.	1800.00	1600.00	XNN
To install rear windscreen. To conduct water leak test.	140.00	120.00	/
To remove and replace rear suspension. To realign replacement parts.	180.00	120.00	/
To remove/reconnect wiring at the damaged section to facilitate repair.	120.00	80.00	30
To remove/replace air-con compressor. To vacuum and charge in gas.	150.00	120.00	/
To remove/replace interior fittings and trimmings.	200.00	160.00	120
To carry out anti rust treatment on affected panel.	150.00	100.00	/
Total labour	9550.00	8510.00	266

Adjustment Parts and Labour Costs of Repairs

	Estimated by workshop	Adjusted cost
TOTAL PARTS COSTS	29262.49	26519.32
TOTAL LABOUR COSTS	9550.00	8510.00
TOTAL REPAIR COSTS	38812.49	35029.32

ADJUSTED REPAIR COST**29000.00**

16967.1
20% 13550

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	18/05/2018 15:20
Date Of Accident	16/05/2018 20:15
Exact Location Of Accident	BEDOK SOUTH AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SL7858H
Insured/Policyholder	
Name Of Registered Owner	OW TAI CHUN
NRIC No	S1507469H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96410119
Alternative Phone No	Office-96410119

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	1200

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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	GA056881
Cover Note Number	

Driver

Name of Driver	OW LEANN THERESE
NRIC No	S8740543E
Date Of Birth	02/12/1987
Occupation	INDOOR
Date Of Driving Pass	24/09/2009
Driving Experience	8 YEARS AND 7 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96550119
Fax Number	
Contact Number	
Email Address	LEANNOW@HOTMAIL.COM
Address	44 JALAN TANJONG
Postcode	468049
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	CHANGI N.P.C
Police Station Address	ROAD: 9 SIMEI STREET 2 , POSTCODE: 529914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20180517/2001.

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	SLW8991Z
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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 OW LEANN THERESE
Approximate Age
Injuries Sustain
Injured person in which vehicle? SL7858H
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report accurately 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 willful misrepresentation or withholding of material facts may allow insurance companies to void/void 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 to the Disasters 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) 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/also 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 (a) 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:

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

Reporting Centre Personnel's Signature
Name:
NIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report

DECLARATION

(We declare the following particulars are true in every respect.)


Policyholder's Signature

Date & Time:
18/5/18


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

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/ID No.:



**SINGAPORE
POLICE FORCE**



T/20180517/2001

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

1 of 3

Report No: T/20180517/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/05/2018 00:01		Vide Report No.: G/20180516/0183		Station Diary No.: 1	
Informant's Particulars					
Name of Informant: OW LEANN THERESE			Address: 44 JALAN TANJONG SINGAPORE 468049		
ID Type / ID No.: NRIC NO / S8740543E			Contact No.: Home/Office: Mobile: 96550119		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 30	Date of Birth: 02/12/1987	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: MARKETING MANAGER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident: Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/05/2018 20:15	Type of Location: Straight Road
Location: Along Road 1 BEDOK SOUTH AVENUE 1 TOWARDS BEDOK CENTRAL			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SL7858H	Car	VOLKSWAGO	1965 Beetle	Red	Seriously Damaged	0
SLW8991Z	Car	MITSUBISHI	Outlander	Blue	Slightly Damaged	0

Details of Person Involved

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

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180517/2001

2 of 3

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

Report No: T/20180517/2001

CONTINUATION OF REPORT

Driver			
Name	OW LEANN THERESE	ID No.	S8740543E
Related Vehicle	SL7858H (Car)	Contact No.	96550119
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	16/05/2018	Date Discharge	16/05/2018
No. of Days granted Medical Leave	02	Degree of Injury	Slight

Brief Details.

On 16/05/2018 between 8.15pm - 8.30pm I was driving my car (SL 7858H) along Bedok South Ave 1, I just exited the slip road and was driving slowly shortly after my car's engine stalled. While I was restarting my engine I felt a strong impact from the rear, a car had collided into me from the rear. I contacted my brother for assistance, he contacted the ambulance and got the other driver's details. I was in shock and was conveyed to Changi General Hospital by ambulance.

Particulars of Driver

Sharifah Gamar Bte Alam Albahar
S7416140E
H/p: 9186 7757



**SINGAPORE
POLICE FORCE**



T/20180517/2001

3 of 3

Report No. T/20180517/2001

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

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 /
Sgt 2 RANDY RONALD MINJOOT

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/05/2018 00:01

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt IRMAN BIN MOHAMAD SAID
Contact No.: 65476365

Classification Of Case:

Authentication Stamp
NP155



Driving License

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8740543E



Name

OW LEANN THERESE

區慕蓮

Race

C-MLE

Age

33-12-1987

Date of Birth of MR.

SINGAPORE



Sex

F

S8740543E



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1507469H

OW TAI CHUM

區大駿

Race

CHINESE

Date of Birth

09-08-1985

Place of Birth

SINGAPORE



NO. S8740543E



Date of Issue

13-12-2007

Address

44 JALAN TAYLOR
SINGAPORE 110699

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CATEGORIES

Class 2 Motor Cycle (200kg and over) (passenger, no rider) - 24 Sep 2008
of the Motor and other motor vehicles in Class 2



374054



NO. S1507469H

Date of Issue

10-11-1999

Address
44 JALAN TAYLOR
SINGAPORE 110699



INSURANCE



redefining / insurance

AXA Insurance Pte Ltd
 ☎ 1800 888 4888 (Within Singapore)
 ☎ (65) 6888 4888 (International)
 ☎ (65) 6888 4700
 ✉ customerservice@axa.com.sg
 🌐 www.axa.com.sg

Policy Number
 03088

Certificate of Insurance

Motor Vehicles (Third-Party Risks and Compensation) Act, Chapter 180; Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990 (Revised); Insurance Act, 1967 (Malaysia); Motor Vehicles (Third-Party Risks) Act, 1989 (Malaysia)

Policy details

Policyholder name	070140 CHUN	Certificate number	0A330881 / 1
Owner	Third Party Only	Contract number	115471234
Plan name	Third Party	Engine number	WV115115
NGO applicable	40%		
Vehicle registration number	SL18588		
Period of insurance	From 24/06/2017 to 23/06/2018 (not inclusive)		
Insurance cover category	M1		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
- (b) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the standing 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 punishment or prohibition in that behalf from driving the Motor Vehicle.

Limitation as to use*

Use only for local, domestic and overseas purposes and for the Policyholder's business.
 The policy does not cover use for hire or reward, racing, prize-winning, liability trial, speed testing, the carriage of goods other than your direct connection with any trade or business or use for any purpose in connection with trade or when the Motor Car, other equipment, in use or that is used, is or has a racing track, circuit, road, course or any other track by whatever name called that are typically used for racing, speed-testing or such similar purposes.

* Limitations here not intended to be taken into account for the Motor Vehicle (Third-Party Risks and Compensation) Act, 1989 (Malaysia) and Section 10 of the Road Transport Act, 1987 (Malaysia) and is not intended to be taken into account.

An Amount Excess is applicable as follows:

1. \$5,000 for Licensed / Authorized Driver
2. \$5,000 for Licensed / Authorized / Unlicensed Driver
3. \$10,000 for Licensed / Authorized / Unlicensed Drivers. This additional excess is reduced to \$2,500 if the driver is over 25 years old.

Additional clauses & endorsements to your policy

Additional Clause 1

Coverage Certificate

(We hereby certify that the policy to which this Certificate relates is issued in accordance with the conditions of the Motor Vehicles (Third-Party Risks and Compensation) Act, Chapter 180 and Part IV of the Road Transport Act, 1987 (Malaysia).)

AXA Insurance Pte Ltd

Authorized signatory

Important note

Policyholder is advised that on the issue of a motor vehicle insurance policy, the Certificate of Insurance and the policy of the insurance company, if the Certificate of Insurance is not issued, or if it is not a validly issued, the validity of the insurance cover is not affected. The Motor Vehicle (Third-Party Risks and Compensation) Act, 1989 (Malaysia) and Section 10 of the Road Transport Act, 1987 (Malaysia) and is not intended to be taken into account.

eTAY

No. 1 Penang Road
 #10-01 One Penang
 Singapore 076151
 Tel: 6294 8988 Fax: 6294 4333

AXA Insurance Pte Ltd (10900381234)
 8 Raffles Quay, #24-01, AXA Tower
 Singapore 048881

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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	17/05/2018 10:21
Date Of Accident	16/05/2018 20:15
Exact Location Of Accident	BEDOK SOUTH AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW8991Z
Insured/Policyholder	
Name Of Registered Owner	CARLESATER ALF ISTVAN HARALD
NRIC No	S2708918F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91867757
Alternative Phone No	Others-91867757

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	OUTLANDER-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL TRANSPORTATION
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800021780
Cover Note Number	

Driver

Name of Driver	SHARIFAH GAMAR BINTE ALAM ALBAHAR
NRIC No	S7416140E
Date Of Birth	12/05/1974
Occupation	INDOOR
Date Of Driving Pass	27/10/1994
Driving Experience	23 YEARS AND 6 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-91867757
Fax Number	
Contact Number	
EMail Address	GAMAR.ALBAHAR@GMAIL.COM
Address	32 PARBURY AVENUE #01-02
Postcode	467301
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 - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 15 BEDOK SOUTH ROAD #01-117 , POSTCODE: 460015 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2419999 - FAX NO: 64431687
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

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	SL7858H
Vehicle Make/Model/Colour	VW/RED
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	OW LEANN THERESE
NRIC/Passport Number	S8740543E
Contact Number	96550119
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR DAMAGE
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	OW LEANN THERESE
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SL7858H
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

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 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 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 lodging 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 & Time:

Driver's Signature

(if driver is not the policyholder)

Date & Time:

17/05/2018

9am

Reporting Centre Personnel's Signature

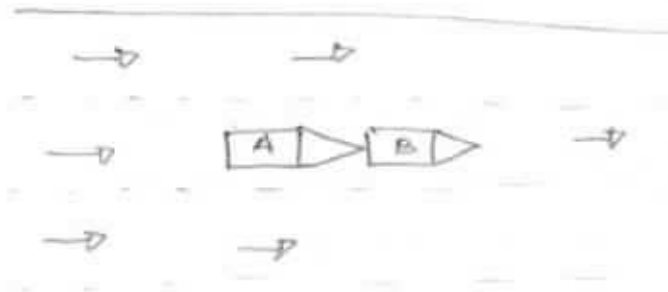
Name:

NRIC/FIN No.

SKETCH PLAN

Bedok South Ave 1

A: My Vehicle
B: Other Vehicle



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report.

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: 17/12/18

0900

Reporting Centre Personnel's Signature
Name:
NRIC/ID No:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



1001800192176

Police Station Of Origin:
Bedok NPP
15 Bedok South Road #01-117 SINGAPORE
400015
Tel No: 1800-241-9996

Page 4
Report No: 1001800192176

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 16/05/2018 22:04	Video Report No:	Station Clery No.: 33
Informant's Particulars		
Name of Informant: SHARIFAH GAMAR BINTE ALAM ALBAHAR	Address: 32 PARBURY AVENUE #01-02 SINGAPORE 487301	
ID Type / ID No.: NRIC NO: S7418140E	Contact No.: Home/Office: Mobile: 91867757	Email:
Nationality: SINGAPORE CITIZEN		
Sex: Female	Age: 44	Date of Birth: 12/05/1974
Type of Informant: Driver		
Race: Arab	Language: English	Institution / School Name:
Occupation: Real estate agent	Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/05/2018 22:16	Type of Location: Straight Road
Location: Along Road 1 BEDOK SOUTH AVENUE 1 A LONG BEDOK SOUTH AVENUE 1 AFTER THE RIGHT TURN FROM UPPER EAST COAST ROAD			
Weather: Clear	Road Surface: Dry	Road Speed Limit: Moderate	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passengers
SL7858H	Car	VOLKSWAGEN		Red	Slightly Damaged	0
SLW8991Z	Car	MITSUBISHI	OUTLANDE R	Blue	Slightly Damaged	0

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



1021805150115

Police Station Of Origin:
Bedok NPP
15 Bedok South Road #01-117 SINGAPORE
480015
Tel No: 1800-2410000

2 of 4
Report No: 1021805150115

CONTINUATION OF REPORT

Driver			
Name	OW LEANN THERDSE	ID No	S6740543E
Related Vehicle	SL7856H (Car)	Contact No	91790115
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	18/05/2018	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	SHARIFAH GAMAR BINTE ALAM ALBAHAR	ID No	ST415140E
Related Vehicle	SLW8991Z (Car)	Contact No	81867757
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 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 the 18/05/2018 at about 2015hrs, I was traveling along Upper East Coast Road in my vehicle (SLW8991Z) when I made a right turn to Bedok South Ave 1. After turning into Bedok South Ave 1, I slowly shifted into the middle lane (of 3 lane) and continued driving when I suddenly felt an impact from the front portion of my vehicle.

I alighted from my vehicle and made a check. I then noticed my vehicle had collided with another vehicle (SL7856H). I later found out later from the driver that her vehicle was actually stalled in the middle of the road.

I noticed that there were no other passengers in the car aside from the female driver who was seated at the driver's seat at the point in time. I was also alone in my vehicle at the point in time. I did not feel any pains from the impact. The impact caused the rear window of the other vehicle to be dislodged and also caused almost the whole rear portion of the vehicle to be dented.

The impact also caused the front bumper of my vehicle to be dislodged and also some dents to my vehicle's front portion. The driver of the other vehicle and I then took photos of the damages to our vehicle and exchanged particulars.

She complained of head and neck pains and later called for ambulance and was conveyed to Changi General Hospital. Police also attended to the incident and advised both parties to lodge a report vide G201805150115.

I wish to state that my vehicle has a front facing in-vehicle camera and that it was functioning properly at

Police Report



**SINGAPORE
POLICE FORCE**



1-001801162-178

Police Station Of Origin:
Bedok MP
15 Bedok South Road #01-117 SINGAPORE
480015
Tel No: 1800-2419999

3 of 4

Report No: 1-231801162-178

CONTINUATION OF REPORT

At the time of incident, I am lodging this report as required by Traffic Police and also for insurance purposes.

Police Report



**SINGAPORE
POLICE FORCE**



1/021625102/16

4 of 4

Police Station Of Origin:
Bedok NPP
15 Bedok South Road #01-117 SINGAPORE
480015
Tel No: 1800-2419999

Report No: 100193518/21/16

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 65474665 stating the report number as reference.

Signature Of Officer Recording The Report G / Sgt 2 MUHAMMAD NURULIMARALI BIN SUPRAT	Signature Of Informant
Signature Of Interpreter Not applicable	Date/Time 16/05/2018 22:04
Officer In Charge Of Case TP / GIT / Sr Staff Sgt IRWAN BIN MOHAMAD SAID Contact No: 65474355	Classification Of Case
Authentication Stamp N198	

Identification Card






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			
AIG ASIA PACIFIC INSURANCE PTE LTD		Ref : CS/AIG18021211/Gvbe2	
78 SHENTON WAY #08-16 CHARTIS BUILDING SINGAPORE 079120		Date : 22-01-2019	
ATTN : MARICEL		Code : AIG	
1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)			
Insured Veh.	SLW 8991Z	Veh. Inspected	SL 7858H
Policy No.		Coverage (\$)	0.00
Claim No.	9062580925SG003	Excess (\$)	0.00
Assign From	MARICEL	Assign Date	21/11/2018
2. Vehicle Particulars & Condition			
Make & Model	VOLKSWAGEN 1200	c.c	1192
Engine No.	HIDDEN	Year of Reg.	1965
Chassis No.	115427254	Colour	RED
Odometer	80876	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/55 R15	BRIDGESTONE	6 mm
L/H Front Tyre	195/55 R15	BRIDGESTONE	6 mm
R/H Rear Tyre	195/55 R15	BRIDGESTONE	6 mm
L/H Rear Tyre	195/55 R15	BRIDGESTONE	6 mm
4. Description of Damages			
THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. REPAIR CONDITION SEE DETAILS.			
5. General Information			
Accident Date	16/05/2018	Inspection Date	28/11/2018
Survey held at	HUAT HOCK MOTOR WORKSHOP BLK 3012 BEDOK NORTH AVE 4 BEDOK INDUSTRIAL PARK E #01-2054 SINGAPORE 489978		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		10 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SL 7858H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	HOOD COVER	REPLACED	1,126.00	1,126.00
2	HOOD COVER HINGE	REPLACED	268.10	268.10
1	HOOD COVER LOCK	REPLACED	122.94	122.94
1	HOOD COVER RUBBER SEAL	REPLACED	179.65	179.65
1	HOOD COVER OUTER GARNISH	REPLACED	154.50	154.50
1	HOOD COVER OUTER GARNISH INNER LAMP	REPLACED	97.20	97.20
1	REAR WINDSCREEN	REPLACED	920.70	920.70
1	REAR WINDSCREEN MOULDING	REPLACED	188.50	188.50
2	TAILLAMP ASSEMBLY	REPLACED	654.10	654.10
1	REAR BUMPER ASSEMBLY	REPLACED	922.15	922.15
2	REAR BUMPER BRACKET	REPLACED	284.60	284.60
2	REAR BUMPER BRACKET RUBBER	REPLACED	164.00	164.00
2	REAR MUDGUARD	REPLACED	1,396.40	1,396.40
2	REAR MUDGUARD DUST COVER	REPLACED	378.00	378.00
2	REAR MUDGUARD RUBBER SEAL	REPLACED	196.40	196.40
2	REAR MUDGUARD INNER PANEL / WHEELHOUSE	REPAIRED SEE LABOUR	1,244.00	-
2	REAR MUDGUARD INNER CHROME PANEL	REPLACED	442.00	442.00
1	ENGINE INNER VENTILATOR PANEL	REPLACED	362.10	362.10
1	REAR LOWER PANEL	REPLACED	642.00	642.00
1	REAR LOWER PANEL INNER SEAL	REPLACED	113.20	113.20
1	AIR CON COMPRESSOR	REPLACED	1,227.20	1,227.20
1	AIR CON COMPRESSOR V-BELT	REPLACED	144.60	144.60
1	AIR CON COMPRESSOR BELT TENSIONER	REPLACED	92.85	92.85
1	IGNITION COIL	REPLACED	189.00	189.00
1	DYNAMO CHARGER	NOT NECESSARY	511.00	-
1	STARTER MOTOR	NOT NECESSARY	392.10	-
2	REAR SHOCK ABSORBER	NOT NECESSARY	596.40	-
2	REAR LINK ARM	NOT NECESSARY	219.60	-
1	EXHAUST MUFFLER	REPLACED	422.30	422.30
2	ENGINE INLET MANIFOLD	REPLACED	978.40	978.40

Report Ref No. CS/AIG18021211/Gvbe2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	GEAR BOX ASSEMBLY	REPAIRED SEE LABOUR	4,500.00	-
1	GEAR BOX MOUNTING	REPLACED	185.00	185.00
1	GEAR BOX BEARING	NOT NECESSARY	157.20	-
1	GEAR BOX OIL SEAL	NOT NECESSARY	164.50	-
1	GEAR BOX SHAFT	NOT NECESSARY	482.00	-
1	SET GEAR SHAFT BUSH	NOT NECESSARY	278.50	-
1	GEAR BOX CLUTCH PLATE	NOT NECESSARY	250.00	-
1	GEAR BOX CLUTCH DISC	NOT NECESSARY	200.00	-
1	GEAR BOX CLUTCH BEARING	REPLACED	58.00	58.00
1	GEAR BOX CLUTCH FORK	NOT NECESSARY	100.00	-
2	ENGINE MOUNTING	REPLACED	330.00	330.00
1	ENGINE MOUNTING BRACKET	REPLACED	189.70	189.70
1	REAR WHEEL SHAFT RH	NOT NECESSARY	497.20	-
1	REAR WHEEL SHAFT LH	NOT NECESSARY	497.20	-
2	REAR WHEEL SHAFT SUPPORT ARM	NOT NECESSARY	360.00	-
2	REAR WHEEL BEARING	REPLACED	226.00	226.00
1	ENGINE OVERHAUL KIT	NOT NECESSARY	320.00	-
1	OIL COOLER HOUSING	REPLACED	246.20	246.20
1	ENGINE BLOCK HEAD	REPAIRED SEE LABOUR	2,124.00	-
1	ENGINE MAIN PULLEY	REPLACED	385.00	385.00
1	ENGINE OIL COOLER	REPLACED	447.00	447.00
	LESS 5% DISCOUNT		-	-686.69
			26,627.49	13,047.10
	SPECIAL NETT ITEMS			
1	AIR CON COMPRESSOR SUPPORT (SN)	REPLACED	350.00	220.00
1	AIR CON COMPRESSOR TENSIONER BRACKET (SN)	REPLACED	180.00	120.00
1	REAR LICENCE PLATE LABEL (SN)	REPLACED	45.00	30.00
1	REAR BODY PANEL SEALANT (SN)	REPLACED	210.00	120.00
1	ENGINE OIL (SN)	NOT NECESSARY	120.00	-
1	GEAR BOX OIL (SN)	NOT NECESSARY	100.00	-
1	REAR FLOORBOARD INSULATION (SN)	REPLACED	160.00	90.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR THIRD BRAKE LIGHT (SN)	REPLACED	120.00	80.00
2	REAR FENDER INNER TRIM LINING (SN)	REPLACED	550.00	400.00
			1,835.00	1,060.00
	LABOUR			
	TO CARRY OUT ANTI RUST TREATMENT ON AFFECTED PANEL		150.00	100.00
	TO REMOVE / RETIFY BOTH FRONT SEAT ASSEMBLY		800.00	250.00
	TO REMOVE / REPLACE HOOD COVER, REAR FENDER, REAR END PANEL, REAR BUMPER, TAILLAMPS & ETC.		2,160.00	1,000.00
	TO REPAIR / RESHAPE REAR CHASSIS FRAME, REAR UPPER PANEL & ETC. INCLUSIVE OF THE REPAIR OF REAR MUDGUARD INNER PANEL / WHEELHOUSE, GEAR BOX ASSEMBLY AND ENGINE BLOCK HEAD			
	SUPPLY PAINT MATERIAL AND TO RESPRAY REPLACED AND AFFECTED PANELS(HOOD COVER, REAR END PANEL, REAR MUDGUARD, REAR FLOOR PANEL, REAR UPPER PANEL & ETC.)		1,800.00	1,000.00
	TO SUPPLY PARTS AND CARRY OUT ENGINE OVERHAUL TO REPLACE NECESSARY SEALS AND GASKETS WHERE NECESSARY.	NOT NECESSARY	2,400.00	-
	SEND ENGINE TO MACHINE SHOP FOR REPAIR JOB.	NOT NECESSARY	450.00	-
	TO SUPPLY PARTS AND CARRY OUT GEAR BOX OVERHAUL TO REPLACE NECESSARY SEALS AND GASKETS WHERE NECESSARY.	NOT NECESSARY	1,800.00	-
	TO INSTALL REAR WINDSCREEN. TO CONDUCT WATER LEAK TEST.		140.00	120.00
	TO REMOVE AND REPLACE REAR SUSPENSION. TO REALIGN REPLACEMENT PARTS.		180.00	120.00
	TO REMOVE / RECONNECT WIRING AT THE DAMAGED SECTION TO FACILITATE REPAIR.		120.00	30.00
	TO REMOVE / REPAIR AIR-CON COMPRESSOR. TO VACUUM AND CHARGE IN GAS.		150.00	120.00
	TO REMOVE / REPLACE INTERIOR FITTINGS AND TRIMMINGS.		200.00	120.00
			10,350.00	2,860.00
	GRAND TOTAL		38,812.49	16,967.10
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				13,550.00

Report Ref No. CS/AIG18021211/Gvbe2



Report Ref No. CS/AIG18021211/Gvbe2

XING GUO QIANG

M.MATAI, AMSAE-A

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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