From (Person): Keven 10	ASSIGNMENT (Office	Date/Time 4.47pm@10
Estimated Cost	Bill to:	1.1/2.01.01
OD TP WS/TP RES/OD	RES/EVA/INV/MV7CS	•
To Inspect Vehicle No:	PC 2993R	Insured: SH 8976P
at Workshop m/s		Tel: 6559 8973
of	& Gul Circle	3 6 1 3
Policy No:		DI 9 000 DI 9 MPH
Sum Insured:	Excess	
Make of Veh:	Lincoln	D.O.A. 08/01/2019
(Client's Recerd) CA / REV / REP. / REV 2	HRS (up)	11/01/20190
Date/Time 4 54pm 10/	119 Person Contacted: MS	GOO Vehicle IN OUT
	on (v) Estimate call c	hen@her reach @ 9299 412
SH8976		
	p.m. revised PA to	

Exercise REF:	2721M
. 4	SSIGNMENT
rom Date:	Veh No. PC 2432 Yr Regn 2014 869 Type: M.Car / M.Cycle (Bus / Van / Lorry / Taxi / Prime Mover /
DD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
o Inspect Vehicle No. 7 C 2943 F	Make: Yukonh 2K 6126HGA ac : 6690
Workshop m/s W73 CHLINGRIPH	Colour MWT A/C Insured / Std / NI / NA
9 Cut stalls	Sp.Reading 256(12 T/Radio: Insured / Std / NI / NA
sured FCI	Eng/No:
	Citio: LZYTAGE 6761016783
alicy No.	Gen. Cond: Good I Fay Poor I Burnt
laims No.	Steering: Morder / Jammed / Leaked / Burnt or
um insured: Excess.	Brake horder / Jammed / Leaked / Burnt or
(Client's Record)	Modi AiP / S/Rim / STD A/Rim or
take of Veh:	A DESCRIPTION OF STREET STREET
9am	Tyre Size: F: 275/1-822.5
(Folicy Condition).	R: 1 PIR / SUMI / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Remark: The veh had commenced its N/S O repair at the time of inspection.	
repair at the time of inspection.	TOYO/YOKO OF GOODTYRE
al, or Market Value:	Front Rear
DAC Accident Rport: Consistent? : Yes or No	R/Bal. 8 mm R/Bal. 8 mm
SIA / PR Seen: Consistent? : Yes or No	11.
st Repairs: days Res. Yes or No	D.O.A. 08/61/19 D.O.I. 11/01/19
um Sum: % 3 Val.: Yes or No	Survey held at WTS
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / 0 Person Contacted:	
ONTE NUMBEROOMS	The U/C / Chassis frame / Body Structure affected due to collision
OB/03/19 Confined als \$ 13,500 with Rasul _	1- @ 10 less monto
(\$ 9,330.00 Red - HI	72
	VED 1 1 MAR 2019
interfirme. File Pass to? Prell. Report	Days Of Repair: 10 12×15=
Cutto/Time File Return to?	Resurvey No. of Trip: Survey Fee 1701 180
Add	Fee: Site Insp (\$ 1_5+Rs_SI 50
	Interview (\$) From (\$ \$7
Report Format :	Tech Invs (\$) Gler (1.2 / 1/2)
Report Format : .ump Sum / 1.8.1: (5 / 3,500/- 4/5)	Vectord (\$) Glen (\$)



MS First Capital Insurance Limited (1.8% No. 195000106C CST Nog. No. M2 0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #15-01 City House Singapore 068877 Tel. (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

09-01-2019

Our Ref No. D19000299MFSH

Accident Date

08-01-2019

Claim Type. Third Party

Insured Vehicle

SH8976P

Third Party Vehicle. PC2993R

Survey Location

8 GUL CIRCLE

Contact Person.

KENJI LEE

Contact No.

6559 8988/ 0

Fax No. 6898 2394

Survey Type

WITHOUT PREJUDICE:

Appointed

LKK AUTO CONSULTANTS PTE LTD

Surveyor

NA

Fax No. 68416315

Contact Person Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

WTS ENGINEERING PTE

Attention, NIL

Cc : TP Solicitor

LTD NA

TP Solicitor Fax No. NA

Officer Incharge

KARENT

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

Shirley Hiew (LKK Auto)

From:

Rasul (LKKAuto) < Rasul@lkkauto.com>

Sent:

Monday, 11 March 2019 9:45 AM

To:

Shirley Hiew (LKK Auto)

Subject:

FW: PC2993R and WC1325T

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315 Blk 51, Pava Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

IKK Save the Earth Print only when necessary

From: Chan Soo Lye [mailto:slchan@woodlandstransport.com.sg]

Sent: Thursday, 7 March, 2019 5:48 PM

To: Rasul (LKKAuto)

Subject: RE: PC2993R and WC1325T

Dear Rasul,

Confirmed.

Thank you.

Best Regards

Chan Soo Lye

Service Executive WTS Engineering Pte Ltd



Woodlands Transport Service Pte Ltd

8, Gul Circle, Singapore 629564

Direct Line: +65 6559 8984

Fax

: +65 6862 2163

www.woodlandstransport.com.sg ()

Group of Companies:

WTStravel &



CASHBOX

From: Rasul (LKKAuto) [mailto:Rasul@lkkauto.com]

Sent: Thursday, 7 March, 2019 9:30 AM

To: Chan Soo Lye

Subject: RE: PC2993R and WC1325T

Hi Mr Chan,

Kindly assist finalise

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)





LKK Save the Earth Print only when necessary

From: Rasul (LKKAuto)

Sent: Tuesday, 5 March, 2019 11:43 AM

To: 'Chan Soo Lye'

Subject: RE: PC2993R and WC1325T

Mr Chan,

Close at 13500. Your supplementary already given more on stickers

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)





IKK Save the Earth Print only when necessary

From: Rasul (LKKAuto)

Sent: Tuesday, 5 March, 2019 10:24 AM

To: 'Chan Soo Lye'

Subject: RE: PC2993R and WC1325T

Hi Mr Chan,

Refer to attachment

As spoken the other day, my supervisor had written down the labour that need to be adjusted on PC 2993R Finalise amount is \$ 13,400 / 10 days lump sum Kindly confirm

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>Rasul@lkkauto.com</u> | fax: 6841-4315 Blk 54, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

LKK Save the Earth Print only when necessary

From: Chan Soo Lye [mailto:slchan@woodlandstransport.com.sg]

Sent: Tuesday, 19 February, 2019 9:00 AM

To: Rasul (LKKAuto)
Cc: Lee Tong Ren kenji

Subject: FW: PC2993R and WC1325T

Dear Mr Rasul,

For your reminder, please advise PC2993R and WC1325T final repair cost.

Thank you.

Best Regards

Chan Soo Lye Service Executive WTS Engineering Pte Ltd



Woodlands Transport Service Pte Ltd

8, Gul Circle, Singapore 629564

Direct Line: +65 6559 8984

Fax :+65 6862 2163

www.woodlandstransport.com.sg 6

Group of Companies:

wistravel &



CASHBOX

From: Chan Soo Lye [mailto:slchan@woodlandstransport.com.sg]

Sent: Monday, 11 February, 2019 1:00 PM

To: Rasul (rasul@lkkauto.com)

Cc: Lee Tong Ren kenji (kenjilee@woodlandstransport.com.sg); Goo Lee Ping; Rahman; 'Jeff Lum Wei Keong';

Coleen Leong Lai Yee (coleenleongly@woodlandstransport.com.sg)

Subject: PC2993R and WC1325T

Dear Rasul,

As spoken please advise us PC2993R and WC1325T final repair cost ASAP.

Thank you.

Best Regards

Chan Soo Lye Service Executive

WTS Engineering Pte Ltd



Woodlands Transport Service Pte Ltd

8, Gul Circle, Singapore 629564

Direct Line: +65 6559 8984

Fax

: +65 6862 2163

www.woodlandstransport.com.sg 6

Group of Companies: WTS travel



Shirley Hiew (LKK Auto)

From:

Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>

Sent:

Tuesday, 15 January 2019 2:45 PM 'Karen Tan'; 'CWS Motor Claims'

To:

SUR; Admin-D (LKKAuto); assignments

Subject:

RE: SURVEY ASSESSMENT - D19000299MFSH/1

Attachments:

PC 2993R - Preli Advise.pdf

Dear Karen,

Enclosed preliminary revised of vehicle PC 2993R.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | 5(408933)

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]

Sent: Thursday, 10 January 2019 5:00 PM

To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Karen Tan' <karentan@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D19000299MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed repairer agreed survey on 11/01/2019.

BEST REGARDS.

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims [mailto:cwsmotorclaims@msfirstcapital.com.sg]

Sent: Thursday, 10 January 2019 4:47 PM To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg>; Karen Tan < karentan@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D19000299MFSH/1

Dear Sir/Mdm,

We refer to the above reference. Please find attached the necessary documents for survey. Kindly submit your report via CWS within the next 14 days.

Note: All the accident reports are uploaded into CWS for your perusal.

Best Regards, Admin Team Claim Workflow System Motor Claims Department MS First Capital Insurance Limited

Tel: 6507 3848 Fax: 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.

This email has been checked for viruses by AVG antivirus software.
www.avg.com



51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D19000299MFSH

Date: 15 January 2019

Our Ref: CS/FCI19000641/R1sd3

The Motor Claims Department First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. PC 2993R .

Please be informed that we had conducted the inspection of the abovementioned vehicle on 11/01/2019 at the premises of M/s <a href="https://www.wrs.er/wrs.er

Workshop Estimate Amount	: SS	20,460.00
Revised Estimate Amount	: SS	17,210.00
"Check" Items Amount	: SS	
Market Value	: SS	
LTA Reimbursement Value	: SS	
Nett Value	: SS	

Description of Damage:

The vehicle sustained damages at the rear o/s portion.



Comments/ Present Status:

Damages Consistent. Some parts items pending parts prices Repair days: 7 Days

Yours faithfully, Mohammed Rasul Automotive Assessor

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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 <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.
- 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	08/01/2019 17:16	
Date Of Accident	08/01/2018 04:05	
Exact Location Of Accident	PIE TOWARDS AIRPORT	
Country/State of Loss	SINGAPORE	

- 0	37	ΔII	9 0	IF I	\circ	им х	VEH	ıcı	F
_		-15	_	-		-		_	-

Vehicle Registration Number PC2993R

Insured/Policyholder

Name Of Registered Owner WOODLANDS TRANSPORT SERVICE PTE LTD

 Co Reg No
 198102721M

 Email Address
 NOEMAIL

 Mobile Phone No
 (LOCAL) +65-98383481

 Alternative Phone No
 OFFICE-65598954

Vehicle Particulars

Manufacturer YUTONG
Model ZK6126HGA A

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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company LIBERTY INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number SD18V07062

Cover Note Number

Driver

 Name of Driver
 KAM LYE HOCK

 NRIC No
 \$1229014D

 Date Of Birth
 20/04/1957

 Occupation
 OUTDOOR

 Date Of Driving Pass
 12/05/1979

Driving Experience 38 YEARS AND 7 MONTHS

Gender MALE

 Mobile Number
 (LOCAL) +65-98613222

 Fax Number
 (LOCAL) +65-68982394

 Contact Number
 OFFICE-65598954

EMail Address NOEMAIL

Address BLK 265 TOH GUAN ROAD #09-15

Postcode 600265

Was driver an employee of the Insured's Company YES

If No. Relationship of the Driver with the Insured

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 (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

YES

ambulance?

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)

Details of Police Action

Was the accident reported to the police?

YES

If Yes Please state which Police Station

POLICE STATION NAME [OTHER]

JURONG WEST NPC

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

On 08/01/2019, at about 04:03 hrs, I was drving my vehicle along PIE towards airport in lane 3 at around 50Km/hr. The weather was clear with dry road surfaces at that point of time. As I was traveling within my lane, I felt an impact coming from the rear of my vehicle. Subsequently, I stopped my vehicle by the roadside and made a check. I discovered that a vehicle SH8976P was already at the side of the road and had collided onto the railings. I attended to the driver who was not responding and called for the police. He was conveyed to the hospital. As a result, my bus sustained damages on the rear.

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 SH8976P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SH8976P

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

KETCH PLAN		
_	A -PC2993R	
	B -SH8976P	
1 23	PIE TOWARD	S AIRPORT
1 i		
3 I I		
1 2 2 1 1	P.L	
ESCRIBE CIRCUMSTANCES	DE THE ACCIDENT	Chicago ist an extraction is
ESCHIBE CIRCUIVISTANCES	OF THE ACCIDENT	
ECLARATION	Cristary and true to august respect	()
we declare the dregoing part	iculars are true in every respect.	V
DA /	hanna	\h
elicuheldur's Superture	Driver's Spelliture	Reporting Centre Personnel's Signature
olicyholder's Signature ute & Time:	(If driver is not the policyholder)	Name:
	Date & Time:	NRIC/FIN No.:

Sketch Plan #2 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.

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)

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 :
 - 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 invoive 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
 - 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.

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

Date & Time:

Reporting Centre Personnel's Signature

Nume:

NRIC/FIN No.:

POLICE REPORT Pg. 1





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

1 of 3 Report No. T/20190108/2011

REPORT OF A TRAFFIC ACCIDENT

	ne Report N 019 08:22	Made:	Vide Report No.: G/20190108/0039	Station Diary No.: 28	
Informa	nt's Partic	ulars			
	Informant: E HOCK		Address: APT BLK 265 TOH GUAN RO	OAD #09-15 SINGAPORE 600265	
	/ ID No.: D / S12290	14D	Contact No.: Home/Office:	Mobile: 98613222	
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 61	Date of Birth: 20/04/1957	Type of Informant Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Bus driver			Driving Licence Information: Class: 3,4,5 Date of Expiry:		

Type of Accident	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 08/01/2019 04:05	Type of Location Straight Road
	EXPRESSWAY			
Weather. Clear	J. 11001. 270	Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by

Details of V	ehicle Involved		THE WAR	DESTAL			ASSESSED
Vehicle No.	Туре	Make	Model	Color	Condition	No.	Passenger
PC2993R	Bus/Coach/Mi nibus				Seriously Damaged	0	Chironas i g
SH8976P	Car				Seriously Damaged	0	

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

POLICE REPORT Pg. 1





Police Station Of Origin: Jurong Visct N.P.C

700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

2 of 3 Report No. T/20190108/2011

CONTINUATION OF REPORT

Driver	TATE OF THE REAL PROPERTY.	0.00	THE STREET		Ola la		20				
Name	KAM LYE HOCK			ID No	8	S1229014D					
Related Vehicle	NIL			NIL		NIL		Conta	ct No.	98613222	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 3,4,5 Date of Expiry: NIL	- 12				
Date Treatment	NIL Date Dis			harge	NIL						
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL						

Brief Details.

On 8/1/2519 at about 4.03am, I was driving my vehicle bearing plate number PC2993R at about 50km/hr along PIE towards Airport and was on the slowest lane when suddenly I felt an impact coming from my back. I then managed to stop my vehicle and made a check. I discovered a Comfort blue taxi bearing plate number, SH8976P, was already at the side of the road and had collided onto the railings. There was no traffic during the incident. I attended to the taxi driver who was not responding and subsequently called for the police. He was conveyed to the hospital. My vehicle rear was seriously damaged due to the incident.

10

POLICE REPORT Pg. 1





Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999 CONTINUATION OF REPORT

3 of 3 Report No. T/20190108/2011

Sketch Plan

(d)

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report J / Sgt 1 NURAQILAH BINTE ABDUL HAMID	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 08/01/2019 08:22
Officer In Charge Of Case: TP / GIT / Staff Sgt MOHAMED SUFIAN BIN MOHAMED	Classification Of Case:
Staff Sgt MOHAMED SUFIAN BIN MOHAMED JUNID Contact No.: 65476247	

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have





Accident Photo







Accident Photo





9001068

Surveyor Name:

Surveyor Sign:

Amount S\$

Cost per Unit

Quotation

DATE

08/01/19

Company Registration Number: 200505706E

VEHICLE NO:

WTS Engineering Pte Ltd

PC2993R

DRIVER:

S/N

KAM LYE HOCK

8 Gul Circle, Singapore 629564 Tel: 65598984 Fax: 68622163

ATTENTION TO:

PREPARED BY:

Description

Signature of Workshop Dpt

Chan Soo Lye

LOCATION:

Gul Workshop

Q REF No:

Q19/01/974

DEPARTMENT:

WTS Bus Department

ACCIDENT DATE: 08/01/19

REF No:

JW-0119-143

Qty

Signature of Claim Department

	International Control			
202.0	Spare Parts		i seemal	CONTRACTOR OF THE PARTY OF THE
1	REAR BUMPER METAL CENTRE D1/	1	1800	1,800.0
2	REAR BUMPER METAL RHS 84/	1	450	450.0
3	REAR BUMPER METAL STRUCTURE FRAME	1	1500	1,500.0
4	REAR ENGINE COVER. 51	1	2800	2,800.0
5	REAR BUMPER LAMP RH CAA	1	35	35.0
6	REAR RHS CORNER PILLAR	1	2500	2,500.0
7	REAE RHS CORNER LAMP CRA	-1	35	35.0
- 8	REAR RHS ENGINE SIDE COVER #	- 1	1850	1,850.0
9	STICKER 60KM/H	1	10	10.0
10	STEERING PIPE Card	1	280	280.0
	Labour Costs			
ustered 7	TO REMOVE DAMAGED PARTS AND REPLACE REAR BUMPER, REAR ENGINE COVER, METAL STRUCTURE FRAME, STEERING PIPE, REAR RHS COVER, RADIATOR, RADIATOR FAN FOR FACILITATOR REPAIR TO CHECK RADIATOR, RADIATOR FAN CONDITION SYSTEM, WELD OR REPLACE DAMAGED PARTS TO KNOCK AND STRAIGHTEN REAR CROSS MEMBER. MEMBER AND CHASSIS FRAME.	1	4700	2,480.0
2	TO REMOVE AND REFIT REAR WINDSCREEN GLASS AND SIDE BODY GLASS FOR FACILITATE REPAIR REAR RHS CORNER PILLAR	1	1000	786 1,000.0
3 3 ■ 4 ■ 4 ■ 4 ■ 5 ■ 5 ■ 5 ■ 6 ■ 7 ■	TO REPLACE REAR BUMPER, REAR ENGINE COVER, REAR RHS CORNER PANEL AND SIDE GOVER STICKER.	1	2000	600 2,000 m
1	MATERIAL, WELD AND CUT FABRICATE REAR UNDER ENGINE PORTION STRUCTURE FRAME AND SIDE COVER UNDER STRUCTURE FRAME.	1	2000	1000 ×1000
	Spray Paint			
.1	Spray Painting TO SPRAY PAINTING REAR BUMPER, REAR ENGINE COVER, REAR RHS CORNER PILLAR AND SIDE COVER.	1	1800	1600 1.8000
-	Radigter Fan - 1 pv - cut 100 Auto Consultants hence	olify	TOTAL:	20,460.0
	the Repairer of the following:		Total Amount	SGD 20,460.0
Remar	ks: Toward - 100 *Toward - 100 *Toward performance p	enurvey tion Prejudice" b	19512	22830
	8 1119 Control to trust approved from the	aveyed so	f pany	,

Signature of Department Head



WTS Engineering Pte Ltd

8 Gul Circle, Singapore 629564 Tel: 65598984 Fax: 68622163

Company Registration Number: 200505706E

Quotation

DATE:

08/01/19

VEHICLE NO:

PC2993R

DRIVER:

KAM LYE HOCK

ATTENTION TO:

PREPARED BY: Chan Soo Lye

LOCATION:

Gul Workshop

Q REF No:

Q19/01/974

DEPARTMENT:

WTS Bus Department

ACCIDENT DATE: 08/01/19

REF No:

JW-0119-143



WTS Engineering Pte Ltd

8 Gul Circle, Singapore 629564 Tel: 65598984 Fax: 68622163

Company Registration Number: 200505706E

Quotation

DATE:

17/01/19

VEHICLE NO:

PC2993R

DRIVER:

KAM LYE HOCK

ATTENTION TO:

PREPARED BY:

Chan Soo Lye

LOCATION:

Gul Workshop

Q REF No:

Q19/01/978

DEPARTMENT:

WTS Bus Department

ACCIDENT DATE: 08/01/19 REF No:

JW-0119-143

S/N	Description	Qty	Cost per Unit	Amount S
	Spare Parts			
1	RADIATOR FAN	1	450	450.0
	Labour Costs			
1	CURRILY LARGUE AND MATERIAL TO BERLACE BEAG ENGINE	fickes ¹	1800	1500 1,880.0
2	TOWING SERVICE.	1	120	120.0
			TOTAL:	2,370.0
			Total Amount	SGD 2,370.0

Remarks:

SUPPLEMENTARY QUOTATION.

Signature of Workshop Dpt

Signature of Department Head

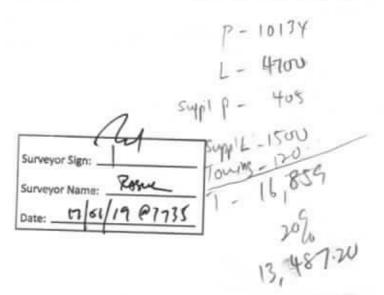
Signature of Claim Department

LKK Aufe Consultants have a mostly the Recairer of the following:

- · Torrest tribution or a new point
- . To discour de reges de la late concrety
- · Parts program of minutes a confirmation
- . Third party covery is on a "Wiscout Presurior" bests
- * No Direct Control of the Street
- Supplementary emit is must be reserved and is subject to lines approved from measures Company

Admosfedged by Repairer

Signature



13,487.20 L1)-13,500



雙摩麥拖車服務 TENG MOTOR TOWING SERVICE

No. 12646

Blk 5, 395-F, Woodlands Road, Yew Tee Industrial Estate, Singapore 677987 Tel: 6769 7777 Fax: 6763 2376 Reg. No. 218618/00W

H/P: 93663752 & 96857140

M/s NIS	大生	Date,	8/1/19
数 並 Quantity	PARTICULARS	單 俊 Rate	维 Amount 製
Chong;	North cres to 941 circle PC2993R	le \$120f	
	PC2993R		
		TOTAL :	#1201
## # pued By:	收货员 Good Received By:		.00

toward at owner a risk, The company accepts no responsibility for damages or other misdemeanour to your vehicle, whilst being towards.





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

		nationale Des Experts En Autom	
MS FIRST CAPITAL II	NSURANCE LTD	Ref : CS/FCI1900064	41/R1sd3e2
36 ROBINSON ROAD #16-01 CITY HOUSES		Date: 13-03-2019 Code: FCI2	
1.	Policy Particul	ars :- THIRD PARTY CLAI	M
Insured Veh.	SH 8976P	Veh. Inspected	PC 2993R
Policy No.		Coverage (\$)	0.00
Claim No.	D19000299MFSH	Excess (\$)	0.00
Assign From	KAREN TAN	Assign Date	10/01/2019
2.	Vehicle P	articulars & Condition	
Make & Model	YUTONG ZK6126HGA	c.c	6690
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	LZYTAGE67E1016783	Colour	MULTI COLOUR
Odometer	256612	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3.	Cor	ditions of Tyres	
	Size	Make	Balance
R/H Front Tyre	275/70 R22.5	GOODTYRE	8 mm
L/H Front Tyre	275/70 R22.5	GOODTYRE	8 mm
R/H Rear Tyre	275/70 R22.5 (D)	GOODTYRE	8/8 mm
L/H Rear Tyre	275/70 R22.5 (D)	GOODTYRE	8/8 mm
4.	Descr	iption of Damages	
THE VEHICLE SU	ISTAINED DAMAGES AT THE	REAR O/S PORTION.	
DAMAGES SEE D	DETAILS.		
5.	Gen	eral Information	The state of the s
Accident Date	08/01/2019	Inspection Date	11/01/2019
Survey held at	WOODLANDS TRANSPOR	T SERVICE PTE. LTD.	
	8 GUL CIRCLE SINGAPORE 629564		
5a.		Remarks	STATE OF STREET
B)THE INSPECTI	NSISTENT TO ACCIDENT RE ON WAS CONDUCTED ON A ICE TO YOUR INSTRUCTION	"WITHOUT PREJUDICE" BAS	
5b.		ate Days of Repair	
ESTIMATED NOR	RMAL PERIOD FOR REPAIR:	10 Working Da	iys



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Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No. 1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. PC 2993R

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER METAL CENTRE	BENT	1,800.00	1,800.00
1	REAR BUMPER METAL RHS	BENT	450.00	450.00
1	REAR BUMPER METAL STRUCTURE FRAME	BENT	1,500.00	1,500.00
1	REAR ENGINE COVER	BENT	2,800.00	2,800.00
1	REAR BUMPER LAMP RH	CRACKED	35.00	35.00
1	REAR RHS CORNER PILLAR	BUCKLED	2,500.00	2,500.00
1	REAR RHS CORNER LAMP	CRACKED	35.00	35.00
- 1	REAR RHS ENGINE SIDE COVER	BENT	1,850.00	1,850.00
1	STICKER 60KM/H	NECESSARY	10.00	10.00
1	STEERING PIPE	CUT	280.00	280.00
-1	RADIATOR FAN (ADDITIONAL)	SCRATCHED	450.00	450.00
	LESS 10% DISCOUNT			-1,171.00
			11,710.00	10,539.00
	LABOUR			
	TO REMOVE DAMAGED PARTS AND REPLACE REAR BUMPER, REAR ENGINE COVER, METAL STRUCTURE FRAME, STEERING PIPE, REAR RHS COVER, RADIATOR, RADIATOR FAN FOR FACILITATOR REPAIR. TO CHECK RADIATOR, RADIATOR FAN CONDITION SYSTEM, WELD OR REPLACE DAMAGED PARTS. TO KNOCK AND STRAIGHTEN REAR CROSS MEMBER. MEMBER AND CHASSIS FRAME.)		2,400.00	2,100.00
	MATERIAL, WELD AND CUT FABRICATE REAR UNDER ENGINE PORTION STRUCTURE FRAME AND SIDE COVER UNDER STRUCTURE FRAME.)		2,000.00	/-
	TO REMOVE AND REFIT REAR WINDSCREEN GLASS AND SIDE BODY GLASS FOR FACILITATE REPAIR REAR RHS CORNER PILLAR.		1,000.00	500.00
	TO REPLACE REAR RHS CORNER PANEL.		2,000.00	500.00
	TO SPRAY PAINTING REAR BUMPER, REAR ENGINE COVER, REAR RHS CORNER PILLAR AND SIDE COVER.		1,800.00	1,600.00
	SUPPLY LABOUR AND MATERIAL TO REPLACE REAR ENGINE COVER, REAR BOTH SIDE CAP, REAR BUMPER AND RHS REAR SIDE COVER STICKER. (ADDITIONAL)		1,800.00	1,500.00

Report Ref No. CS/FCI19000641/R1sd3e2



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TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	TOWING SERVICE. (ADDITIONAL)		120.00	120.00
	And a series of the second control of the se		11,120.00	6,320.00
	GRAND TOTAL		22,830.00	16,859.00

RECOMMENDED COST OF LUMP SUM REPAIRS	13,500.00
(TO ITS PRE-ACCIDENT CONDITION)	

Report Ref No. CS/FCI19000641/R1sd3e2

MKB

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

St. S.

ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M.MATAI

Licensed Appraiser

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