



Our Reference: SMG6484G/7015426
Your Reference: SKA6531J

By Email / Mail

05 March 2019

CHINA TAIPING INSURANCE (SINGAPORE) PTE.C/O LKK AUTO
Attn: Third Party Claim Department -

ACCIDENT INVOLVING SMG6484G & SKA6531J O0
04 Feb 2019.

Dear Officer,

We wish to inform you that the repairs to our client vehicle have been completed.

We hereby submit the claims as follows:

Details	Remarks	Amount (SGD)
Cost of Repairs		6,300.88
Loss Of Rental	139.10 x 6 days	834.60
Others		
TOTAL		7,135.48

Kindly let us have your offer to Christine.yow@wearnes.com

Your soonest reply is much appreciated. Thank you.



Yours faithfully
Christine Yow
D (65) 6430 4899
Wearnes Automotive Pte Ltd
Bodyshop and Paint Division
249 Alexandra Road
Singapore 159935

This is a computer generated printout, no signature is required.

(PAYMENT BREAKDOWN)

Vehicle No	: Smb 6484 G (Insd veh)	Model	: Volvo XC40
	: SKA 65312 (TP veh)		
Date of Accident	: 04.02.19		

Global Sum Settlement	: <input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Liability	: 100 %	(Agreed/Assessed)	

Repair Estimate	: \$ 10751.80		
Final Repair Cost	: \$ 6300.88		
Loss of Use	: \$	days at \$	per day
Rental (if any)	: \$ 834.60	06 days at \$ 139.10	(incl of GST) per day
Others	: \$		
	: \$		
	: \$		
	: \$		
Final Settlement Sum	: \$ 7135.48		

Remarks: _____

Payment Instruction: Payee's Breakdown			
1)	w/owned Automotive P/L	:	\$ 7135.48
2)		:	\$
3)		:	\$
4)		:	\$



SERVICE TAX INVOICE

0 - C00010	SL: CHINA TAIPING INSURANCE (SINGAPORE)
CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD	GST Reg.No:M28920628X
3 ANSON ROAD	Inv.No. . : B&P 7015426 Page 1
#16-00, SPRINGLEAF TOWER	Inv.date. : 25/02/2019
SINGAPORE 079909	WIP No. . : 52544
	Veh.In/Out: 18/02/2019 25/02/2019
	*Tel.No. . : 63896111
	Reg.No. . : SMG6484G
Closed by : Derek Oh Siong Wee	Reg.date .. : 27/12/2018
Svc Consultant : ACC	Mileage .. : 326
Remarks : Ms Chow Siow Nghoh	Chassis No: YV1XZ16ACK2074545

Parts/Op.No	Description	Mech	Qty	Price	Disc%	Pkg	Amount	G
802	TO REPLACE REAR RH DOOR,REAR RH DOOR TRIM,REAR RH FENDER,ETC	0		2000.00	0		2,000.00	S
800	TO PUTTY SPRAY PAINT ON REAR RH DOOR,REAR RH FENDER,ETC	0		700.00	0		700.00	S
031	TO REPLACE REAR RH RIM	0		50.00	0		50.00	S
10	COMPUTERISED WHEEL ALIGMENT	0		280.00	0		280.00	S
280	TO CHECK WIRING INCLUDE	0		450.00	0		450.00	S
RESETTING OF ALL ELECTRICAL MODULES								
031448329	MUDGUARD WIDENER REA	1.0	EA	94.10	10		84.69	S
031650265	ALLOY RIM 7,5x18" 5-	1.0	EA	807.90	10		727.11	S
031663160	BUMPER COVER REAR XC	1.0	EA	1169.90	10		1,052.91	S
030640541	BUMPER CLIP GREEN S6	10.0	EA	4.80	10		43.20	S
000987282	EXPANDING NUT XC40 1	10.0	EA	5.40	10		48.60	S
031364290	ADHESIV CHEMICAL	1.0	EA	334.20	10		300.78	S
031395455	EXTERIOR ADHESIVE GL	1.0	EA	142.20	10		127.98	S
031278603	SPRING NUT ST4 8*1 X	10.0	EA	2.60	10		23.40	S

Gross Total. 5,888.67

Labour Total	3,480.00	Net.....	5,888.67
Parts Total	2,408.67	GST @ 7.0%	412.21
Package Total	0.00	Total.....	6,300.88
		Paid.....	0.00
		Please Pay..	6,300.88

GST: S=StdRated; O=OutOfScope; Z=ZeroRated
 Enquiries must be lodged within 14 days from the invoice date
 This is a computer generated invoice. No signature is required.

Derek Oh Siong Wee

From: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Sent: Wednesday, 13 February, 2019 12:48 PM
To: Derek Oh Siong Wee; assignments@lkkauto.com
Cc: Chong Boon Sen; Alfred Toh; Chee So Chow
Subject: DIRECT SETTLEMENT FOR SMG6484G AND SKA6531J - SNM19D200640C02/1
Attachments: 2918_001.pdf

Importance: High

Without Prejudice

Your Ref: SMG6484G

Our Ref: **SNM19D200640C02/1 (SKA6531J)**

Dear Derek

We refer to your email of 12 February 2019 pertaining to the above matter.

Liability is in clear and we are prepared to go for Direct Settlement, subject to consistency of damages, based on LKK Auto Consultants Pte Ltd's findings, with supporting documents.

Aside to M/s LKK Auto Consultants Pte Ltd., please assist to arrange for survey.

Merimen folder shall be created shortly.

Aside to Boon Sen, please assist to follow up on the matter.

Best Regards

Alfred Toh

Senior Executive

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Tel (65) 6389 6183

Fax (65) 6224 7478

Email: claimsdept@sg.cntaiping.com

alfred.toh@sg.cntaiping.com

Website: www.sg.cntaiping.com

Disclaimer :

This message is confidential; its contents do not constitute a commitment by China Taiping Insurance (Singapore) Pte. Ltd. except where provided for in a written agreement between you and China Taiping Insurance (Singapore) Pte. Ltd. Any unauthorized disclosure, use or dissemination, either in whole or partial, is prohibited. If you are not the intended recipient of the message, please notify the sender immediately.

From: Derek Oh Siong Wee [<mailto:derek.oh@wearnes.com>]

Sent: Tuesday, 12 February, 2019 1:56 PM

To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Subject: DIRECT SETTLEMENT FOR SMG6484G AND SKA6531J - SNM19D200640C02/1

Importance: High

Hi

Please refer to the above attachment and check if possible for direct settlement

Best Regards,

Derek Oh
Service Consultant
Bodyshop & Paint



Wearnes Automotive Pte Ltd
249 Alexandra Road Singapore 159935
D (65) 6430 4895 M (65) 9818 7217
www.wearnes.com derek.oh@wearnes.com

*This email, including any attachment, is confidential and may also be privileged.
If you have received it in error, please notify us immediately by reply email and then delete this message from your system.
Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you.*

AUTHORIZATION TO ACT

I, Chow Siow Ngok ("the third party Claimant")
of B. 99C Lor 2 Paa Payok #0519 S(312099) (address),
owner of SMG 64846 (vehicle no.)
hereby authorize Wearnes Automotive P/L ("The workshop")
to act for me with respect to my claim for repair costs and / or rental and / or loss of use
("claim") for my Vehicle No. SMG 64846 that was damaged
pursuant to the accident which occurred on 04/02/19 (date) along
Lor Chuan Road Braekell rd (location)
involving Vehicle No/s SKA 6531J ("The accident").

I further authorize the workshop to sign the discharge voucher on my behalf to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver / owner / insurers of the other vehicle/s is concerned.

Date this 07 day of 02 (month) 20 19 (year)



Signed by "the third party claimant"



Signed by "the workshop"

**Wearnes Automotive Pte. Ltd.**

Co Reg No. 199501400R / GST Reg No. M28920628X
28 Leng Kee Road, Singapore 159105
Telephone: +65 6876 5063
www.wearnesleasing.com

China Taiping Insurance (Singapore)
3 Anson Road
#16-00
Springleaf Tower
Singapore 079909

Tax Invoice

Inv No. : R1900367
Inv Date : 25 Feb 2019
Ref :
Terms : 90 Days

Rental Information

Agreement No. : RA19/00223
Billing Period : 18/02/2019 09:45 - 24/02/2019 09:45
Driver Name : Chow Siow Ngoh

Car Information

Registration No. : SKN3443G
Make : VOLVO
Model : XC60 T5

#	Description	Qty	UOM	Unit Price	Amt
1	Being Rental Payment for the Period Stated Above	6.00	Days	130.00	780.00

Remarks:

SMG6484G_China Taiping_Derek

Payment method:

Interbank Giro: deduction will take place between 9th to 13th of the month.
Credit Card payments: deduction will take place between 5th to 10th of the month.

Cheque payments: all cheques should be crossed and made payable to "Wearnes Automotive Pte Ltd".

Bank Transfers:

Oversea-Chinese Banking Corporation Limited

Bank Code: 7339

Branch Code: 501

Bank Account Name: Wearnes Automotive Pte Ltd

Bank Account: 296727-001

SWIFT CODE: OCBCSGSG

Subtotal : S\$ 780.00
GST 7.0% : S\$ 54.60
Total : S\$ 834.60

Please note that late payment interest will be imposed at a rate of 2% per month commencing from the date the payment is due, compounded daily, plus an administrative fee of \$50 each time.

This is a computer generated document. No signature is required.

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 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	07/02/2019 20:51
Date Of Accident	04/02/2019 21:45
Exact Location Of Accident	LOR CHUAN TWDS BRADDELL RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG6484G
Insured/Policyholder	
Name Of Registered Owner	CHOW SIOW NGOH
NRIC No	S7605080E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98777748
Alternative Phone No	OTHERS-98777748

Vehicle Particulars

Manufacturer	VOLVO
Model	XC40-2.0 T5 MOMENTUM (A)
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	WINNIE CHOW CHONG NGOH
NRIC No	S7401760F
Date Of Birth	24/01/1974
Occupation	INDOOR
Date Of Driving Pass	31/05/1994
Driving Experience	24 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98777748
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 99C LOR 2 TOA PAYOH #05-19
 Postcode 312099
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured SIBLING
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident SIDE SWIPE
 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? NO
 Was any injured conveyed to hospital by ambulance? NO
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 4
 Passenger 1 . NAME: : CHOW SIOW NGOH
 GENDER: : FEMALE
 Passenger 2 NAME: : CHOW TAK NEO
 GENDER: : MALE
 Passenger 3 NAME: : LEONG PAK MOON
 GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? NO
 If Yes,Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes,against whom?

Circumstances of Accident

REFER TO ATTACH

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 SKA6531J
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver
 NRIC/Passport Number
 Contact Number

WEARNES AUTO PROTECTOR (VOLVO) PRIVATE VEHICLE

Name of Policyholder : CHOW SIOW NGOH (ZOU XIAO'E)
Period of Insurance : 27 Dec 2018 To 26 Dec 2020
Engine No. : B4204T182743726
Chassis No. : YV1XZ16ACK2074545

Vehicle No. : SMG6484G
Policy No. : 1800155280
Endorsement No. :
Issued Date : 04 Jan 2019

ABOUT THE COVER

Make/Model : VOLVO XC40 T5 Momentum
Engine Capacity/Tonnage : 1,969.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

- a) The Policyholder
 - b) Any other person who is driving on the Policyholder's order or with his/her permission.
- This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
 This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

CHOW SIOW NGOH (ZOU XIAO'E) - \$800 (Own Damage), CHOW TAK NEO - \$800 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Wearn's Automotive Pte Ltd Add: 249 Alexandra Road Singapore 159935 64304890 63789350

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OVERSEA-CHINESE BANKING CORPN LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503485745

WEARNES AUTOMOTIVE - FML (V)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

Irene-AL Tan

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7605080E**

Name: **CHOW SIOW NGOH (ZOU XIAO'E)**

Birth Date: **20 Feb 1976**

Issue Date: **08 Dec 2003**

001041729H

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7605080E**

Name: **CHOW SIOW NGOH (ZOU XIAO'E)**

Race: **CHINESE**

Date of Birth: **20-02-1976**

Sex: **F**

Country of Birth: **SINGAPORE**

S7605080E

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7401760F**

Name: **WINNIE CHOW CHONG NGOH**

Birth Date: **24 Jan 1974**

Issue Date: **12 Sep 2003**

0008266558

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7401760F**

Name: **WINNIE CHOW CHONG NGOH**

邱家焯

Race: **CHINESE**

Date of Birth: **24-01-1974**

Sex: **F**

Country of Birth: **SINGAPORE**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 2	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	05 Dec 1994

NP 428A

Licence No: S7605080E

3887630

Barcode

NRIC No: **S7605080E**

Date of Issue: **17-03-2006**

APT BLK 99C LORONG 2 TOA PAYOH #05-19 SINGAPORE 312099

NRIC No: **S7605080E** Date: **16/06/2014**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	05 Dec 1994
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	31 May 1994

NP 428A

Licence No: S7401760F

3368747

Barcode

NRIC No: **S7401760F**

Blood Group: **-** Date of Issue: **14-07-2003**

APT BLK 99C LORONG 2 TOA PAYOH #05-19 SINGAPORE 312099

NRIC No: **S7401760F** Date: **16/06/2014**

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for filing.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorised Driver.
4. 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.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

ACCIDENT STATEMENT

Date and Time of Accident	Date: 04.02.19 Time: 2145
Exact Location of Accident	20V Luan Road Pradelle rd

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SM6 6484G
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INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert.)	Chow Siow Ngok
Personal Identification - NRIC (Singaporean/PR)	S7605080F
- FIN/Passport Number	
- Not Applicable	

VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model	Manufacturer <u>Volvo</u> Model <u>X240</u> <u>ES</u>
Type of Vehicle*	<input type="radio"/> Saloon <input type="radio"/> MPV <input checked="" type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> M/cycle <input type="radio"/> Others, _____
Exact Purpose for which vehicle was being used at time of accident	social
Are you claiming under your own insurance policy for repair to your vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If No, Pls select: <input checked="" type="radio"/> Third Party <input type="radio"/> Reporting)
Vehicle Category*	<input checked="" type="radio"/> Private <input type="radio"/> Commercial <input type="radio"/> Motorcycle

INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company *	AGU
Type of Policy	<input checked="" type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only
Fleet Policy	<input type="radio"/> Yes <input checked="" type="radio"/> No
Policy Number	1800155280
Motor CI	

DRIVER

	<input checked="" type="radio"/> Same as Insured above	
Name of Driver	Winnie Chow Chong Ngok	
Personal Identification - NRIC (Singaporean/PR)	S7401760F	
- FIN/Passport Number		
Date of Birth	24 dd/ 01 mm/ 1974yy	
Driving Date Pass	31 dd/ 05 mm/ 1994yy	
Year of Driving Experience	Year(s)	Month(s)
Occupation	<input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor	
Gender	<input type="radio"/> Male <input checked="" type="radio"/> Female	
Contact Number / Mobile Phone / Fax No.	98777748	

Address of Driver	3. 99C Lor 2 Toa Payoh	
	# 05-19	Postcode (312088)
Email Address	no email	
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
If No, Relationship of the Driver with the Insured	sister	
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Vehicle Registration Number of Driver's Own Vehicle (if applicable)		
Insurance Company of Driver's Own Vehicle (if applicable)		
GENERAL INFORMATION OF THE ACCIDENT		
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	side swipe	
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others, _____	
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others, _____	
OTHER INFORMATION		
Was any foreign vehicle involved in this accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Was any body injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No how slow motion (F)	
Was any other vehicle or property damaged?	<input checked="" type="radio"/> Yes <input type="radio"/> No how Tak Neo (M)	
Was there any video captured by Car Camera?	<input type="radio"/> Yes <input checked="" type="radio"/> No long Tak moon (F)	
Number of Passengers (Including Driver)	04	
DETAILS OF POLICE ACTION		
Was the Accident reported to the Police?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, please state which Police Station.)	
Police Station Name		
Police Station Address		
Police Station Contact	Tel No.	Fax No.
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, against whom?)	
DETAILS OF OTHER VEHICLE / PROPERTY 1		
Vehicle Registration Number	SKA 65 31 J	
Vehicle Make/ Model/ Colour		
Details of Properties		
Name of Driver		
Personal Identification - NRIC (Singaporean/PR)		
- FIN/Passport Number		
Contact Number		
Address		
Name of Insurance Company	China	
Nature of Damage		
No. of Passenger (Including Driver)		
(Note - Please use page 6 if you need to add more vehicles)		

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 ruthful 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.

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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

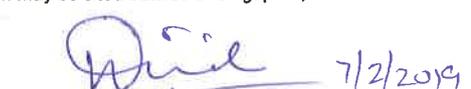
- (i) processing, handling and/or dealing w ith my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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 w ell as on the external cover of envelopes/mail packages); and/or
- (v) complying w ith applicable law in administering, processing, handling and/or dealing w ith 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

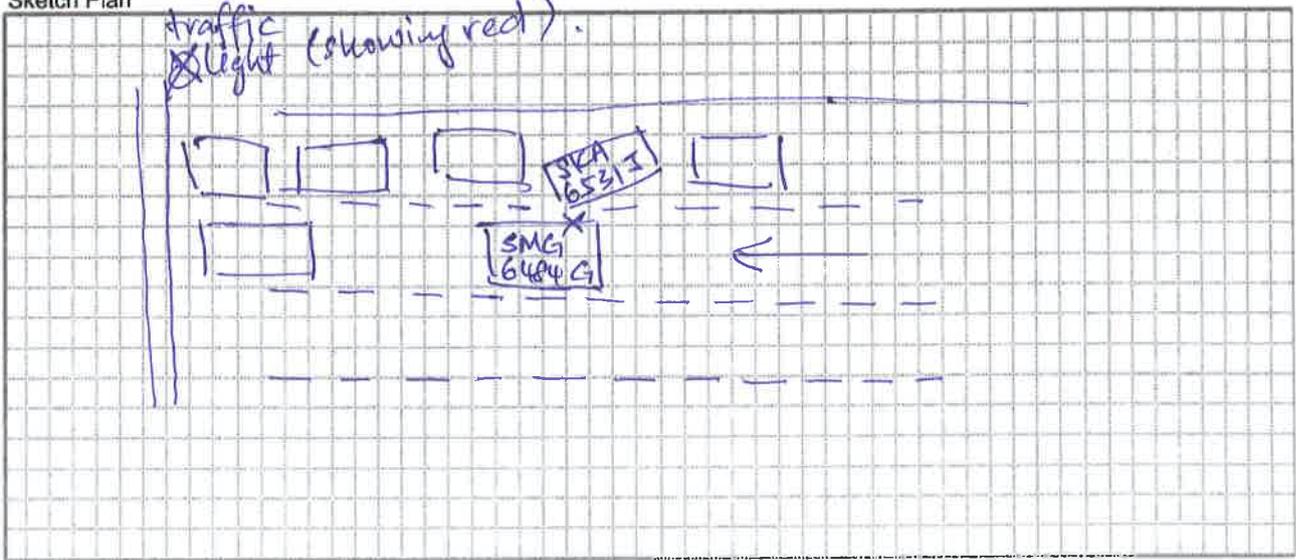
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


7/2/2019
Policyholder's Signature / Date & Time


7/2/2019
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstance of the Accident

My ~~vehicle~~ vehicle (SMG 6484G), coming to a slowdown as near to traffic light showing red (for Cluan towards braddell road).

Suddenly bump on the right back wheel / bumper.

I felt a 

I, S8997476, GARY LIM, driver of SKA6531J failed to properly check blind spot prior to changing lanes and ~~acc~~ struck SMG 6484G's right rear.

I take liability for the accident.


Gary LIM

IMPORTANT NOTE

Under General Condition – Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

Declaration

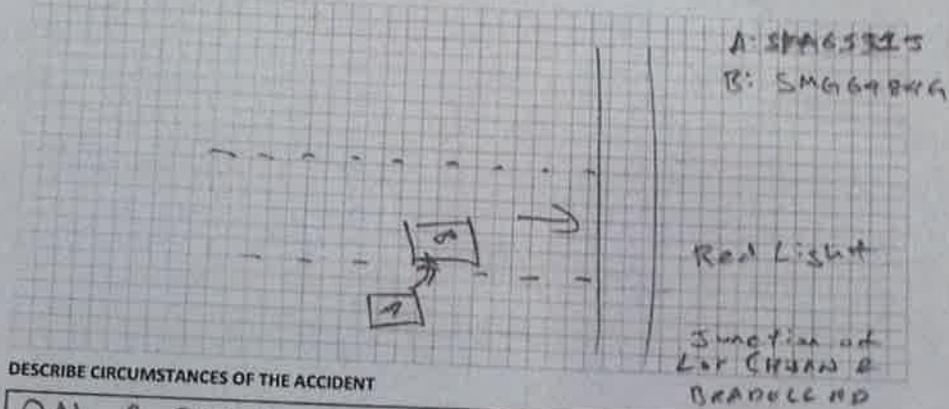
I/We declare the foregoing particulars are true in every respect.


7/2/2019
Policyholder's Signature / Date & Time


7/2/2019
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 9 FEB 2017 AT APPROXIMATELY 2145HRS I (DRIVER OF SPAG 3315) WAS IN THE RIGHTMOST LANE OF THE JUNCTION OF LOR CHUAN TOWNSHIP ROAD.

I INTENDED TO SWITCH LANES TO THE LEFT AND DID NOT PROPERLY CHECK MY BLIND SPOT

SMG69846 WAS MOVING FORWARD AT A LOW SPEED AND I STRUCK SMG 69846 IN THE RIGHT REAR SIDE

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:

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

Reported on 7/2/2019
@ 16:30 HRS

✓ ACCIDENT STATEMENT

ACCIDENT DATE: 04 / 02 / 2019 (DD/MM/YYYY). TIME: 21 : 45 (HH:MM)
LOCATION: LOR CHUAN, TOWARDS BRADDELL RD

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKA 6531 J ✓
- b) INSURANCE COMPANY: _____
- c) POLICY NUMBER: _____
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
- e) MAKE & MODEL: _____
- f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
- g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
- h) PURPOSE OF USING AT ACCIDENT TIME: _____
- i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) ✓
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: LEE XIMOLEI CHARLOTTE (MALE / FEMALE)
- B) NRIC/FIN/PASSPORT: S8940957E CONTACT: 87254222
- C) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: LIM YEW HOONG GARY (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: S8939392G CONTACT: 91882754 ✓
- c) ADDRESS: 438 TAMPIERES ST # 12-169 552097E

* No of passenger
(including driver)
(1) ✓

* d) DATE OF BIRTH: 10 / 11 / 1989 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR) ✓

f) YEARS OF DRIVING EXPERIENCE: 1

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) ✓ *Friend*
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) ✓

b) ROAD SURFACE: (DRY / WET / OTHERS) ✓

6. WAS ANYBODY INJURED (YES / NO) ✓

7. a) REPORTED TO POLICE (YES / NO) ✓

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMG 6484G MODEL: VOLVO XC40
- b) DRIVER'S NAME: WINNIE CHOW
- c) NRIC/FIN/PASSPORT: _____ CONTACT: 98977998

* No of passenger
(including driver)
(4)

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
- e) DRIVER'S NAME: _____
- f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
(including driver)
()

✓ Email = STE4LTH@gmail.com

fax = Ste4Lth@gmail.com ✓

VIDE.O =

✓
in 180219

SERVICE ESTIMATE

99438 - C00001 SL: SERVICE SALES - PC

Ms Chow Siow Ngoh
Blk 99C Lorong 2 Toa Payoh
#05-19

Singapore 312099

Closed by : Derek Oh Siong Wee
Svc Consultant :
Remarks : Ms Chow Siow Ngoh

GST Reg.No:M28920628X
Inv.No. . : B&P 0 Page 1
Inv.date. : 12/02/2019
WIP No. . : 52544
Veh.In/Out: 07/02/2019
*Tel.No. . : Home: 90229800
Reg.No. . : SMG6484G
Reg.date .: 27/12/2018
Mileage .. : 0
Chassis No: YV1XZ16ACK2074545

Op.No Description Mech Qty Price Disc% Pkg Amount G

Op.No	Description	Mech	Qty	Price	Disc%	Pkg	Amount	G
802	TO REPLACE REAR RH DOOR,REAR RH DOOR TRIM,REAR RH FENDER,ETC	0		3200.00	0		3,200.00	\$ 2000
800	TO PUTTY SPRAY PAINT ON REAR RH DOOR,REAR RH FENDER,ETC	0		2100.00	0		2,100.00	\$ 700
031	TO REPLACE REAR RH RIM	0		50.00	0		50.00	\$
10	COMPUTERISED WHEEL ALIGNMENT	0		280.00	0		280.00	\$
280	TO CHECK WIRING INCLUDE RESETTING OF ALL ELECTRICAL MODULES	0		450.00	0		450.00	\$
1	MUDGUARD WIDENER REA	1.0	EA	94.10			94.10	\$
2	ALLOY RIM 7,5x18" 5-	1.0	EA	807.90			807.90	\$
3	DOOR TRIM MOULDING R	1.0	EA	184.60			184.60	\$
4	DOOR ATTACH SEAL REA	1.0	EA	72.80			72.80	\$
5	GUIDE MOULDING REAR	1.0	EA	168.70			168.70	\$
6	DOOR WAIST SEAL REAR	1.0	EA	168.70			168.70	\$
7	EXTERIOR ADHESIVE GL	1.0	EA	142.20			142.20	\$
8	ADHESIV CHEMICAL	1.0	EA	334.20			334.20	\$

Ram
4p 90010068
6 days
18/02/19 @ 1210
Reg by part

SERVICE ESTIMATE

99438 - C00001 SL: SERVICE SALES - PC

Ms Chow Siow Ngoh

Blk 99C Lorong 2 Toa Payoh

#05-19

Singapore 312099

Closed by : Derek Oh Siong Wee

Svc Consultant :

Remarks : Ms Chow Siow Ngoh

GST Reg.No:M28920628X

Inv.No. . . : B&P 0 Page 2

Inv.date. : 12/02/2019

WIP No. . . : 52544

Veh.In/Out: 07/02/2019

*Tel.No. . . : Home: 90229800

Reg.No. . . : SMG6484G

Reg.date. : 27/12/2018

Mileage . . : 0

Chassis No: YV1XZ16ACK2074545

Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
9	BUMPER COVER REAR XC <i>SC</i>	1.0 EA	1169.90			1,169.90	S
10	BUMPER PAD REAR RH X	1.0 EA	281.00			281.00	S
11	BUMPER BRACKET REAR X	1.0 EA	40.90			40.90	S
12	SCREW X	10.0 EA	2.70			27.00	S
13	TOW COVER REAR XC40 X	1.0 EA	73.90			73.90	S
14	PROTECTING PLATE REA X	1.0 EA	221.50			221.50	S
15	BUMPER CLIP GREEN S6 <i>SC</i>	10.0 EA	4.80			48.00	S
16	SPRING NUT ST4 8*1 X <i>SC</i>	10.0 EA	2.60			26.00	S
17	SIX PT SOCKET SCREW <i>SC</i>	10.0 EA	2.70			27.00	S
18	SIX POINT SOCKET S <i>SC</i>	10.0 EA	2.60			26.00	S
19	EXPANDING NUT XC40 1 <i>SC</i>	10.0 EA	5.40			54.00	S

Gross Total. 10,048.40

Labour Total 6,080.00
 Parts Total 3,968.40
 Package Total 0.00

Net..... 10,048.40
 GST @ 7.0% 703.39
 Total..... 10,751.80
 Paid..... 0.00
 Please Pay.. 10,751.80

GST: S=StdRated; O=OutOfScope; Z=ZeroRated