

We do not accept service of Court documents by fax **60146661**

Our ref: AP/2019/001027

SEBASTIAN ROY S/O MANOHAR

Blk 428 Woodland Street 41
#03-240
Singapore 730428

AXA Insurance Pte Ltd
Insurer of YP7965P

8 Shenton Way
#24-01 AXA Tower
Singapore 068811
Attn: Motor Claim Department
(your ref: to be advised)

WITHOUT PREJUDICE

By Certificate of Posting

3 0 1 9 6 4 0 8 9 9 - - -

By Hand



Dear Sirs,

**PROPERTY DAMAGE CLAIM ARISING FROM A ROAD TRAFFIC ACCIDENT ON 5 MARCH 2019
AT ABOUT 18:45HRS INVOLVING MOTOR VEHICLES NO(S). YP7965P & FBB654D ALONG
JUNCTION OF LOR 23 GEYLANG**

We refer to the above matter.

We act for LEE KWONG JIN, the owner of FBB654D.

We are instructed by our clients to claim damages against you in connection to the above-mentioned road traffic accident involving our clients' vehicle and your vehicle bearing registration number YP7965P.

We are instructed that the above-mentioned road traffic accident was caused by the negligence of your authorised driver in the driving, management and/or control of your vehicle.

As a result of the abovementioned road traffic accident, our clients' vehicle was damaged and our clients has been put to loss and expense, particular of which are as follows:

Costs of repair	\$ 4,300.00
Towing fee	\$ 60.00
Loss of use	\$ 850.00
- Pre-repair	\$ 400.00
(8 days including intervening weekend x50.00 per day)	
- During repair works	\$ 450.00
(9 days including intervening weekend x \$50.00 per day)	
Our Legal Costs	\$ 1,500.00
Disbursements (incurred to-date)	\$ 593.00
- Survey report fees	\$ 406.00
- GIA/LTA search/document fee	\$ 37.00
- Other Incidentals	\$ 150.00

Total \$ 7,303.00

23 April 2019

AP/2019/001027

A copy each of the following supporting documents is enclosed:

- (a) Singapore Accident Statement of FBB654D;
- (b) Motor surveyor's report by WG Appraisal Services;
- (c) Survey report invoice;
- (d) Towing fee invoice

In compliance with the pre-action protocol under the State Courts' Practice Direction 37, we had on 23 April 2019 notified your insurer AXA Insurance Pte Ltd, of the above-mentioned road traffic accident and to the best of our knowledge, your insurer had arranged for the pre-repair inspection of our client's vehicle.

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

Please note that you or your insurer should send to us an acknowledgement of receipt to us within fourteen (14) days of your receipt of this letter, failing which, our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.

Please also note that if you a counterclaim against our client arising out of the above-mentioned accident, you are required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within eight (8) weeks of your receipt of this letter.

Yours faithfully,



Charles Hoon
enc.

c.c. clients

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	06/03/2019 15:05
Date Of Accident	05/03/2019 18:45
Exact Location Of Accident	JUNC GEYLANG LOR 23 & SIMS AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBB654D
Insured/Policyholder	
Name Of Registered Owner	LEE KWONG JIN
NRIC No	S1261646E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92295633
Alternative Phone No	OFFICE-92295633

Vehicle Particulars

Manufacturer	YAMAHA
Model	T135
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5037834599-09
Cover Note Number	

Driver

Name of Driver	LEE KWONG JIN
NRIC No	S1261646E
Date Of Birth	28/10/1957
Occupation	OUTDOOR
Date Of Driving Pass	28/05/1979
Driving Experience	39 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92295633
Fax Number	
Contact Number	OFFICE-92295633
EMail Address	NOEMAIL

Address	BLK 29A CHAI CHEE AVENUE #02-82
Postcode	461029
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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	3
Was any body injured in the Accident?	YES
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)	1

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 STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP7965P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMJ4410S
Vehicle Make/Model/Colour	
Details Of Properties	
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	LEE KWONG JIN
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	FBB654D
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please inform promptly the details of the accident to speed up the claims process.
2. The form must be completed by the Driver, Officer involved in the Accident and Bystander.
3. Information provided must be correct and accurate as possible. Any willful misrepresentation or furnishing of material facts may result in insurance coverage to potentially apply liability.
4. The issue and completion of this form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any late information may be referred to the Polling for Insurance.
6. The report will be forwarded by the insurers of the GSA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report and form may be made available upon application by interested parties.
7. By the submission 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 to third parties.
8. Consent under the Personal Data Protection Act (PDPA)
 - a. I, the undersigned, acknowledge, agree and warrant that:
 - (i) my insurer, my witnesses and the General Insurance Association of Singapore ("GIA") may be 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 (yourself) who have insured vehicle(s) involved in this accident (all insureds) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insureds", the Insurers' lawyers/law firms, the regulatory authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) assessing, handling and/or dealing with my claims including the settlement of the claim and any necessary investigations relating to the claim;
 - (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 making of correspondence, statements, invoices, reports or debits to me, which could involve disclosure of certain personal data about me to bring about delivery of the claim as well as on the external cover of envelopes/air mail packages); and/or
 - (v) complying with applicable laws in ascertaining, assessing, handling and/or dealing with my claim (collectively the "Purposes");
 - (ii) all Insureds (who have insured vehicle(s) involved in the accident and the Insurers' lawyers/law firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 - (iii) 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 used outside of Singapore, for one or more of the above Purposes;
 - (iv) my Personal Information will/ be collected and used to complete claims history for the purpose of fraud detection, investigation and risk management in present and future claims;
 - (v) my Personal Information collected under (i) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulatory, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulation, law or court orders;

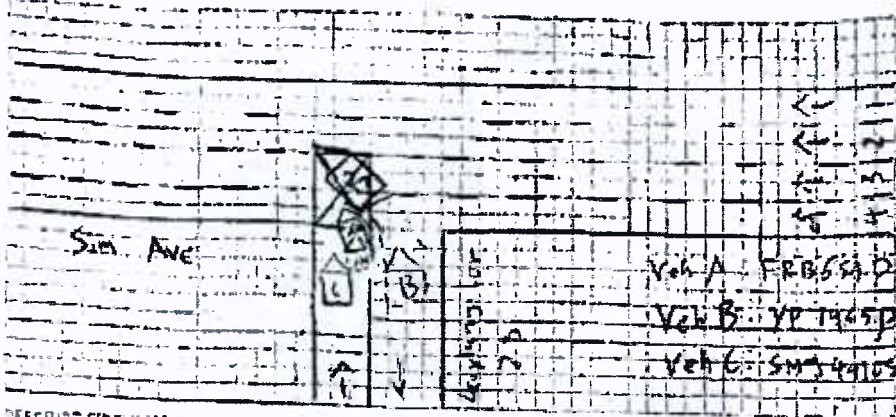
Witness's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated time and date,
I was riding my motor-cycle (Veh A: FB5654D) riding
along Lorry L3 to Sim Ave where I was waiting the
left turn to exit a lorry (Veh B: YP 746TP) turned left
from the right side of me and collided onto me which
caused my vehicle to hit another car (Veh C: SM5410S).
I wish to state that the lorry is turning out from
the entrance which is a opposite direction flow for the
road.

DECLARATION

I hereby declare that the information provided is true and correct.

Signature of Driver
Date & Time

Signature of Driver
(If driver is not the policyholder)
Date & Time

Signature of Reporting Centre Person
Name
Position

Scanned by CamScanner

Accident Photo



Accident Photo



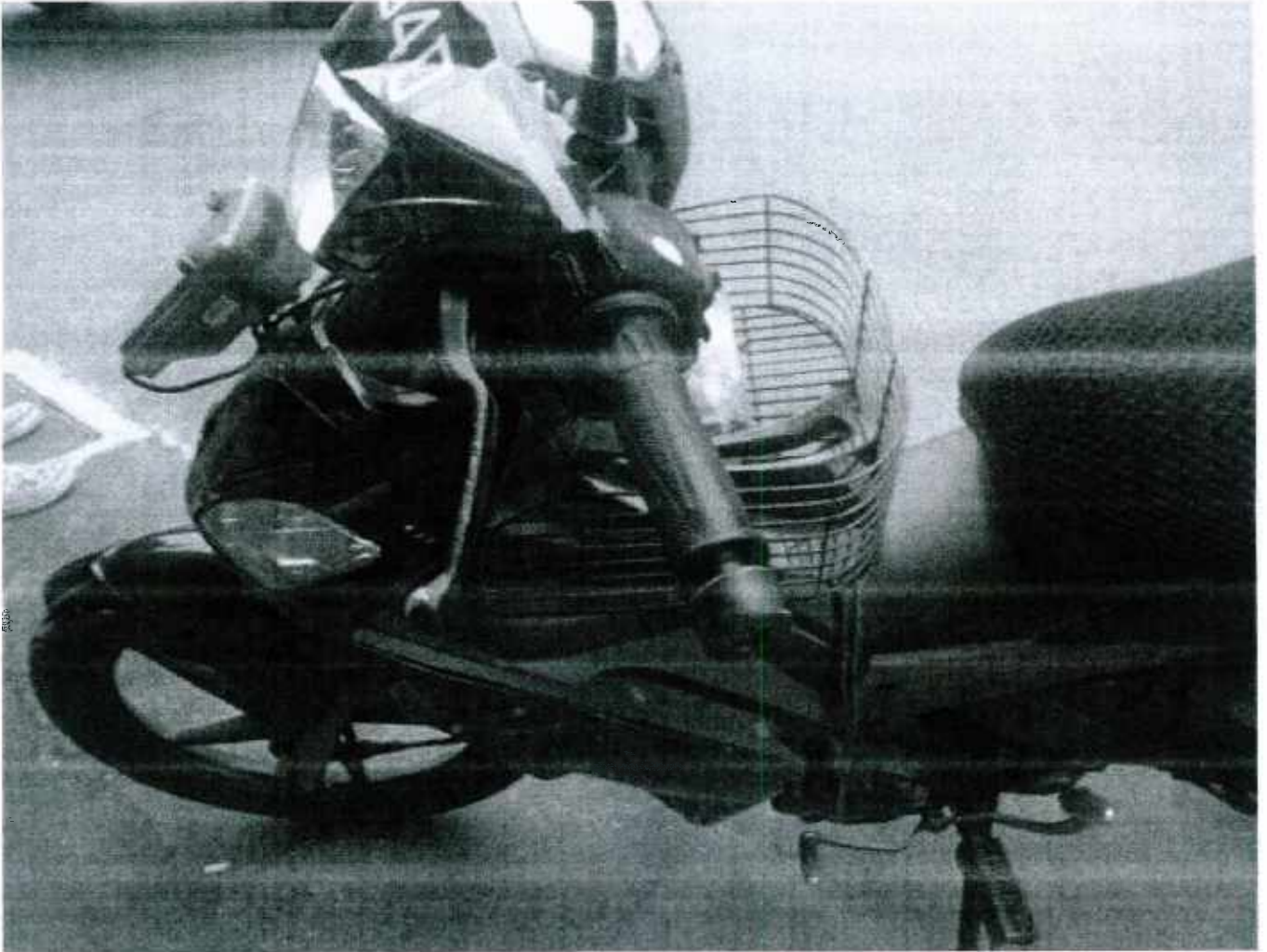
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Accident Photo



Accident Photo



Accident Photo



Accident Photo



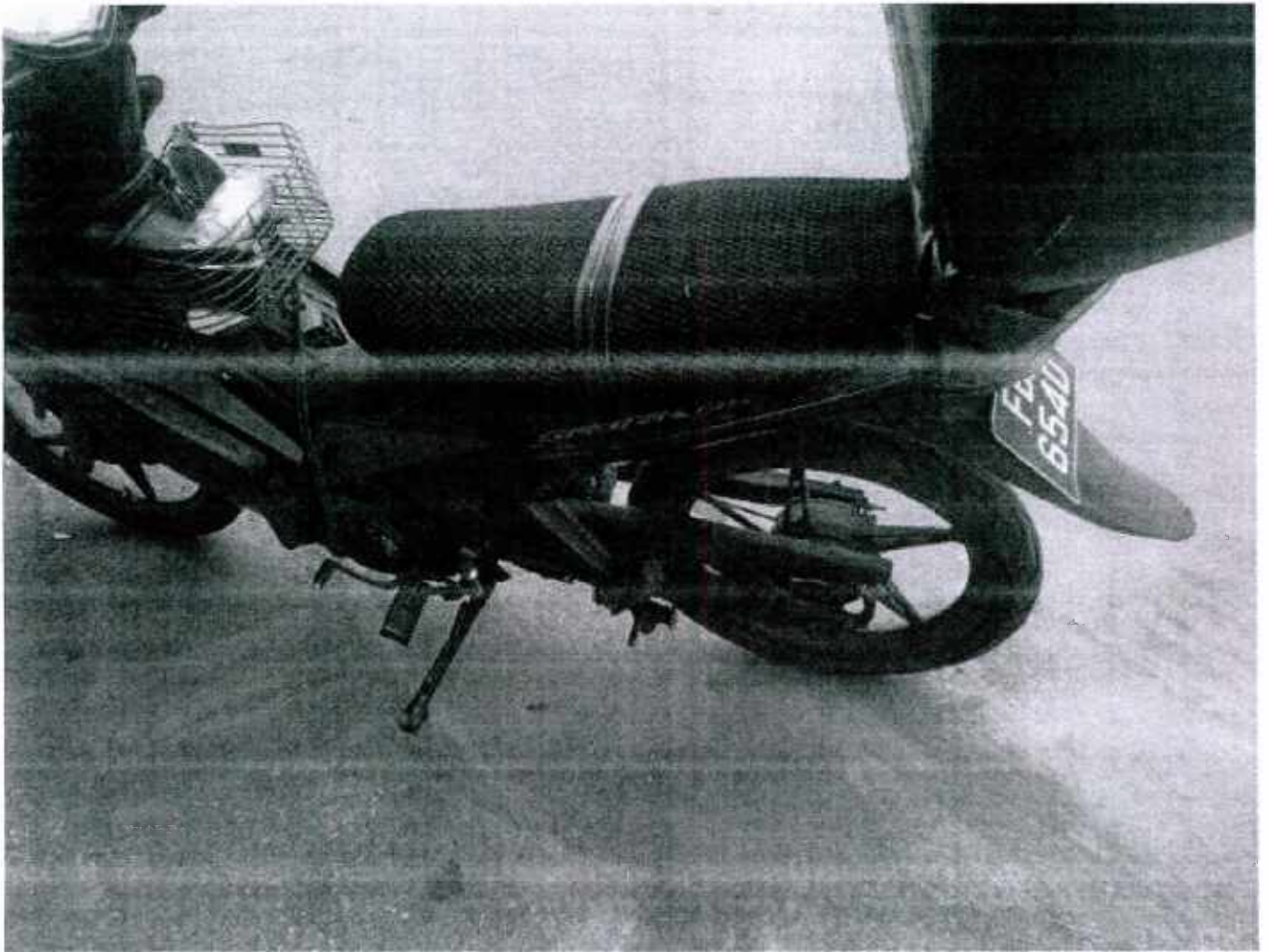
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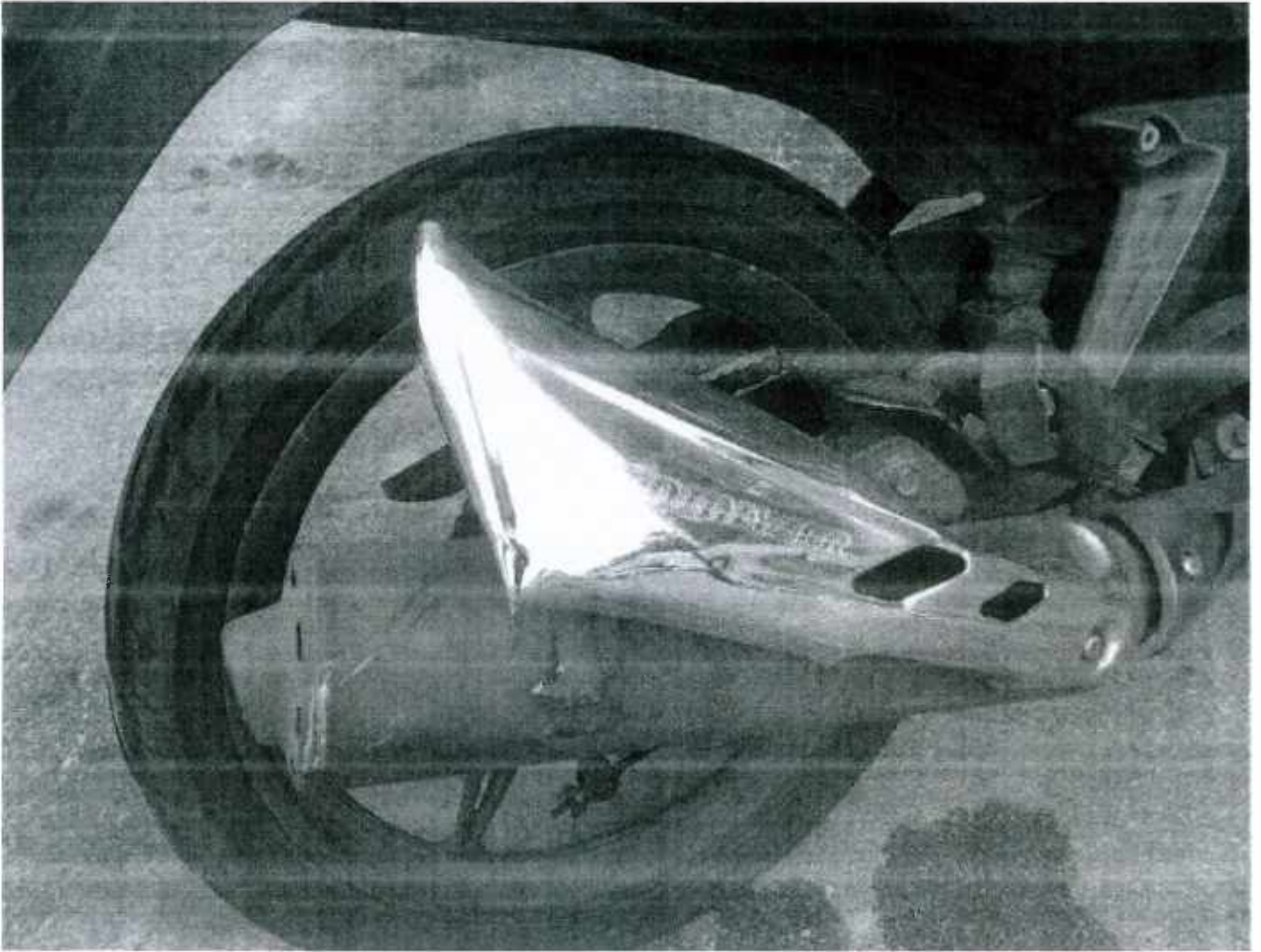
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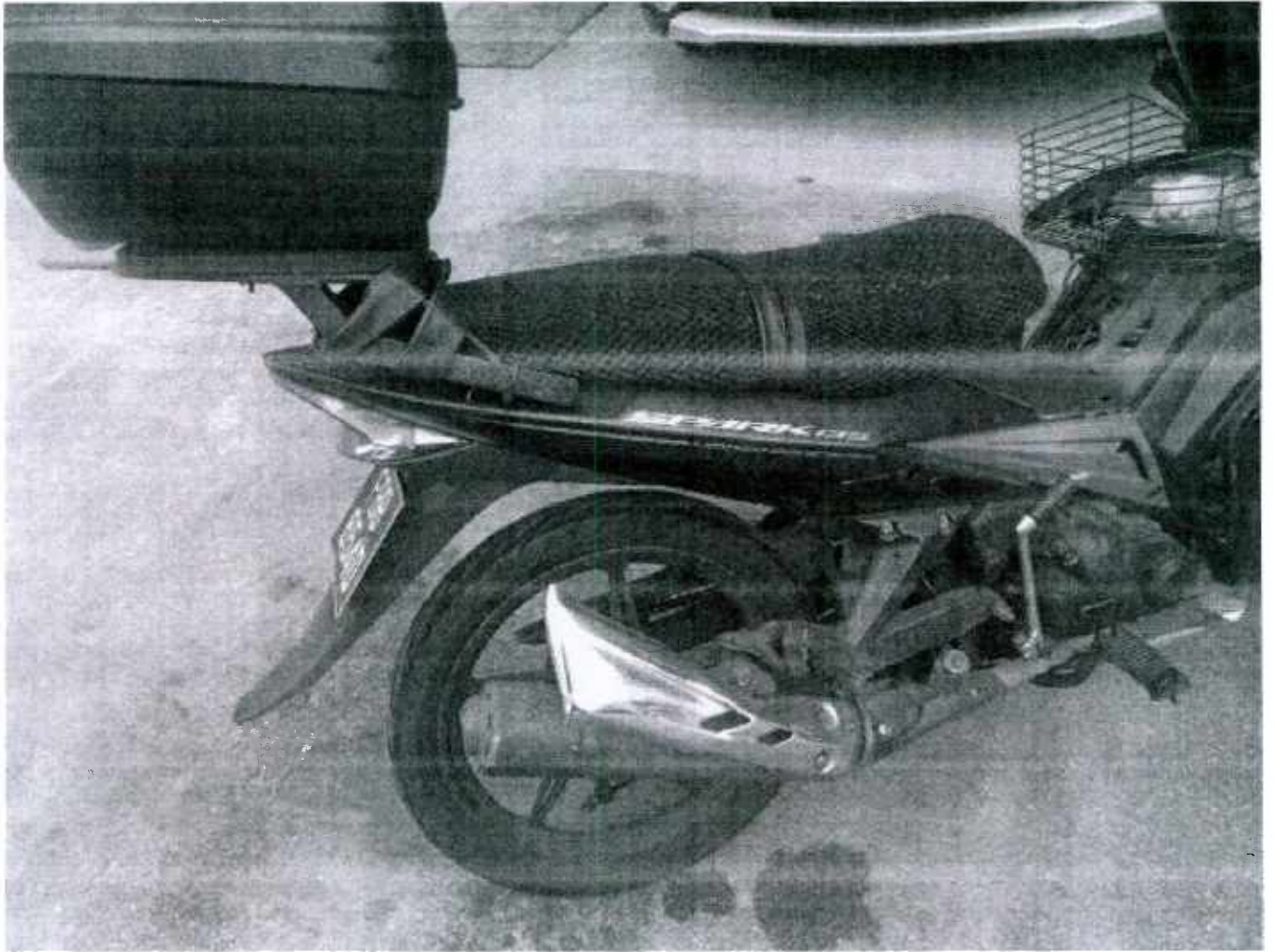
Accident Photo



Accident Photo



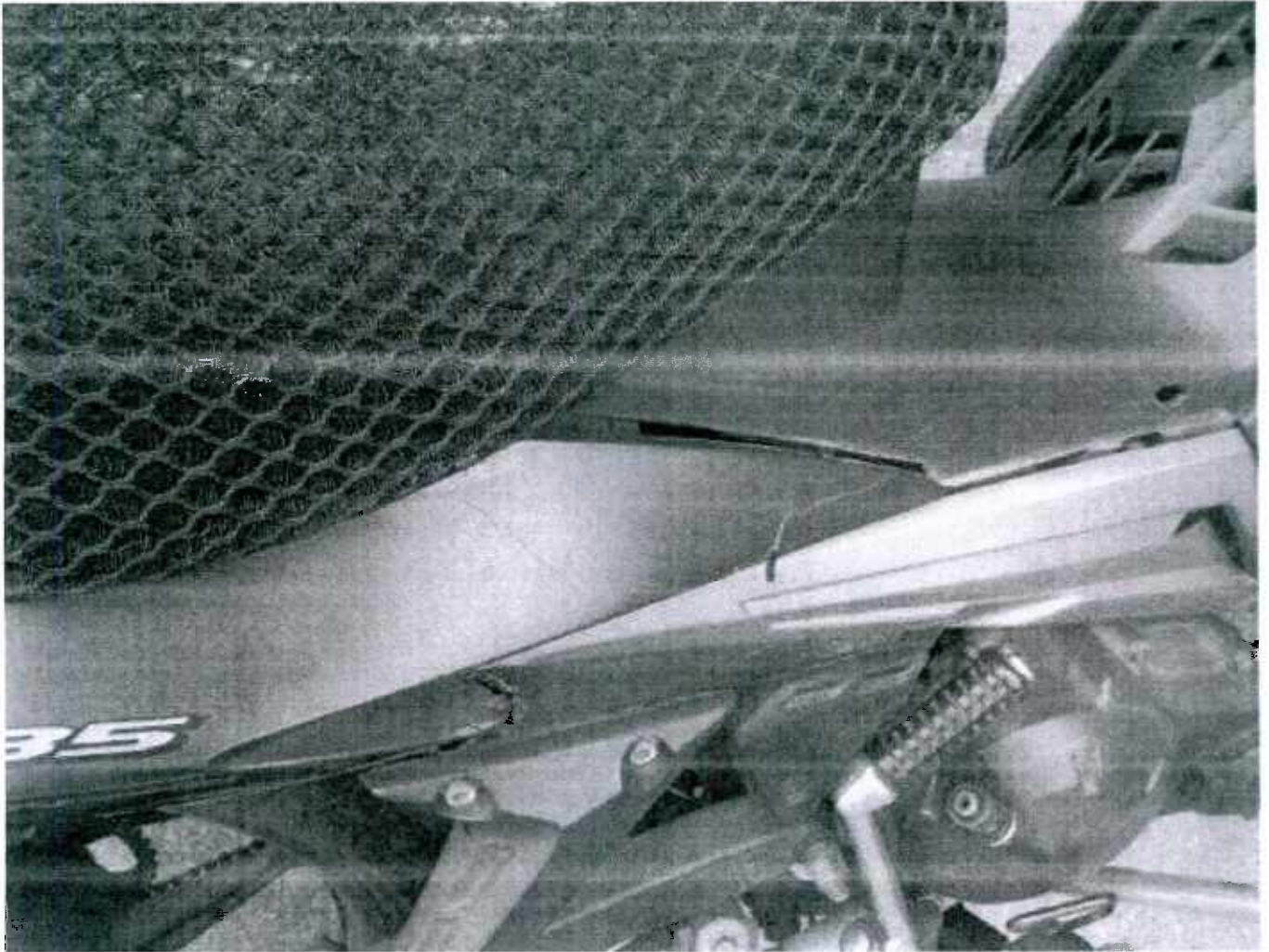
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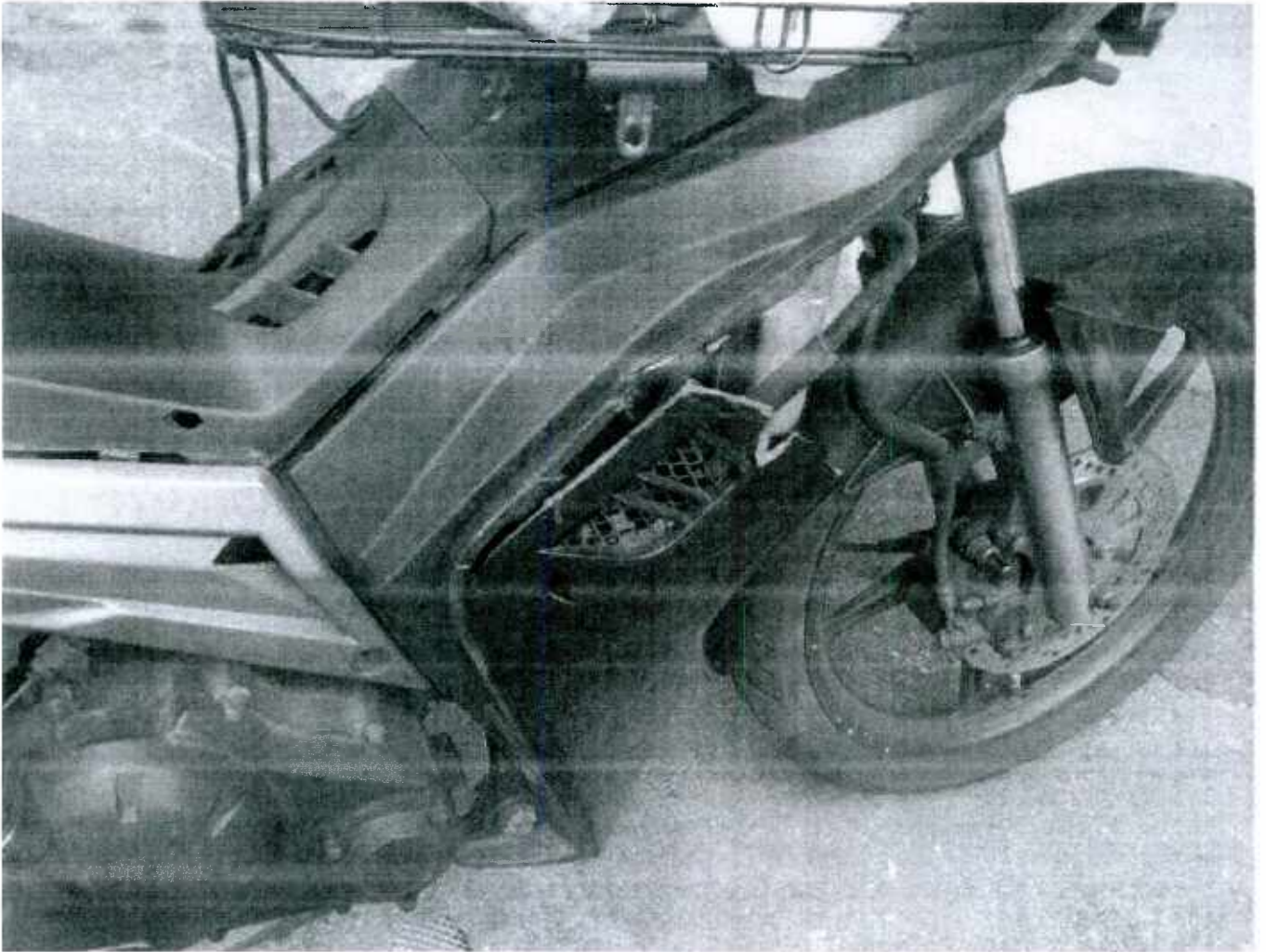
Accident Photo



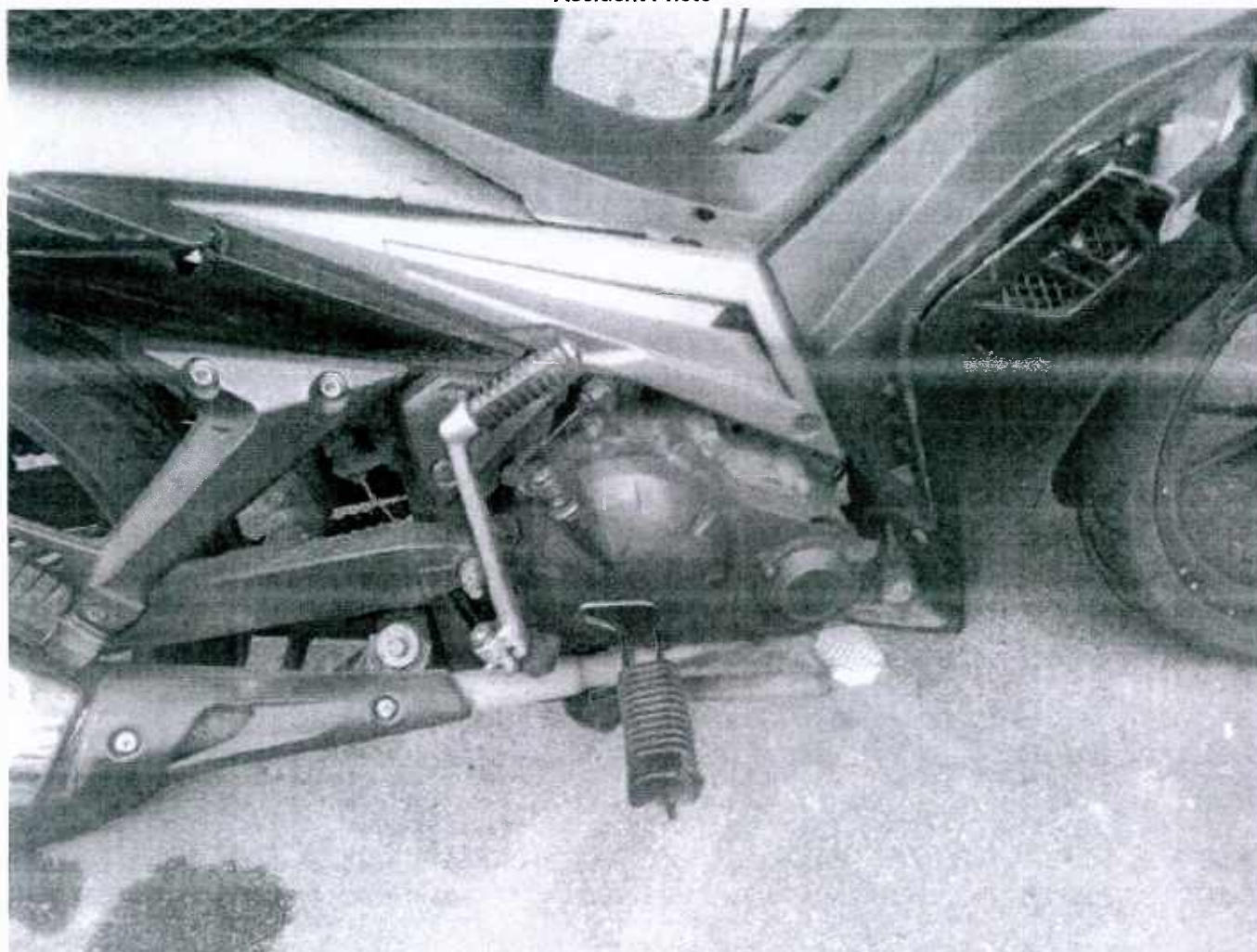
Accident Photo



Accident Photo



Accident Photo



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Acc dent Photo



My Car Consultant Pte Ltd

53, Ubi Avenue 1, Paya Ubi Industrial Park
#01-33, Singapore 40934

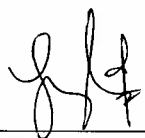
HP:9888 8885 (Jeremy)

INVOICE

LEE KWONG JIN

Invoice No.	MYCAR/19/112
Our Ref.	FBB654D
Your Ref.	-
Date	01 April 2019

No.	Description	Qty	Unit Price	Total
1	To supply labour and materials to repair below mentioned vehicle to its pre-accident condition. Vehicle: FBB654D Make/Model: Yamaha/T135 Accident Date: 15 March 2019			
			Amount Due	\$4,300.00



Authorised Signatory

WG APPRAISAL SERVICES

Blk 224B, Compassvale Walk, #07-647, Singapore 542224

Email: Winsongkk@hotmail.com Contact: 9747 0063

Company Register No. 53326249J

Our Ref:	WG/TP/2019-112	Date 01 April 2019
Invoice No:	TP/TWG/2019-112	
Vehicle No:	FBB654D	
Attn:	LEE KWONG JIN	
Company:	MY CAR CONSULTANT PTE LTD	
Address:	53 Ubi Ave 1, #01-33, Paya Ubi Industrial Park . Singapore 408934	

Invoice

Surveyor Fee:	S\$250
Re-inspection Fee:	S\$50
Transport:	S\$50
Photographs:	S\$56/- (@ \$1 per photo, total 56 photos)
Total:	S\$406

Surveyor:	
Signature:	
Date:	1 April 2019

WG APPRAISAL SERVICES

Blk 224B, Compassvale Walk, #07-647, Singapore 542224
Email: winsongkk@hotmail.com Contact: 9747 0063
Company Register No. 53326249J

ACCIDENT DAMAGED VEHICLE INSPECTION REPORT

M/S LEE KWONG JIN
C/O MY CAR CONSULTANT PTE LTD
53 Ubi Ave 1, #01-33, Paya Ubi Industrial Park
Singapore 408934

Date : 01 April 2019
Our Ref : WG/TP/2019-112

REFERENCE PARTICULARS

Date of Accident : 05 March 2019
Date of Inspection : 11 March 2019

Type of Inspection : Third Party Claim
Date of Re-Inspn : 12 March 2019

VEHICLE PARTICULARS

Registration No : FBB654D
Make : YAMAHA
Model : 1135
Year : 2006

Engine No : 5YP205177
Chassis No : 5YP205177
Odometer : 22311km
Colour : Black

CONDITION OF VEHICLE (STATIC CHECKS AT TIME OF INSPECTION ONLY)

Engine condition : Good
Foot Brake : Serviceable
Hand Brake : Serviceable

General Body Work : Good
Steering : Serviceable
Lightings : Serviceable

TYRE CONDITION (Remaining estimated life of tyre in mm)

	Make	Size
Front Side	: Yokohama	100/80-15
Rear side	: Yokohama	100/80-15

Thread Balance
5mm
5mm

GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained damage at the right side portion.
For details, refer to assessment for repairs and photographs attached.

ASSESSMENT SUMMARY

Our assessment of the repair costs to pre-accident condition was **S\$4,300.00** nett at lump sum basis. (Subject to GST if applicable)

Under normal circumstances, estimated period required for repairs : Seven (07) working days.

Enclosed One hundred and Fifty-six (56) photographs depicting damage to the vehicle.

Inspection conducted at : MY CAR CONSULTANT PTE LTD
53 Ubi Ave 1, #01-33, Paya Ubi Industrial Park . Singapore 408934

In accordance to your instruction, we have **not** authorise repairs and inspection was conducted strictly on a "**WITHOUT PREJUDICE BASIS**".

VEHICLE NO : FBB654D
MODEL : T135

Our Ref : WG/TP/2019-112

ASSESSMENT OF REPAIRS AND SPARE PARTS COSTS

DESCRIPTION OF PARTS AND NATURE OF REPAIRS

SPARE PARTS	QTY PC/SET	ASSESSED CONDITION	ORIGINAL QUOTATION	REVISED QUOTATION
1 FRONT FENDER	1	GRAZED	\$ 120.00	\$ 120.00
2 FRONT LH FORK ASSY	1	BENT	\$ 350.00	\$ 350.00
3 FRONT RH FORK ASSY	1	BENT	\$ 350.00	\$ 350.00
4 STEERING HEADCROWM	1	BENT	\$ 150.00	\$ 150.00
5 STEERING STEM UNDERBRACKET	1	NECESSARY	\$ 125.00	\$ 125.00
6 STEERING STEM BEARING	2	NECESSARY	\$ 90.00	\$ 90.00
7 FRONT RH SINGAL LAMP	1	NOT NECESSARY	\$ 150.00	\$ -
8 SIDE MIRROR	1 SET	GRAZED	\$ 120.00	\$ 120.00
9 HANDLE GRIP	1 SET	GRAZED	\$ 35.00	\$ 35.00
10 BALANCER	1 SET	GRAZED	\$ 40.00	\$ 40.00
11 BRAKE LEVER	1	BENT	\$ 39.00	\$ 39.00
12 HEAD FAIRING ASSEMBLY	1	CRACKED	\$ 145.00	\$ 145.00
13 HEADLAMP ASSY	1	CRACKED	\$ 350.00	\$ 350.00
14 HEADLAMP BRACKET	1	NECESSARY	\$ 175.00	\$ 175.00
15 FRONT RH FAIRING INNER GARNISH	1	CRACKED	\$ 150.00	\$ 150.00
16 RIGHT FRONT FOOTREST	1	TORN	\$ 75.00	\$ 75.00
17 RIGHT FRONT FOOTREST HOLDER	1	BENT	\$ 135.00	\$ 135.00
18 REAR RH SIDE FARING	1	CRACKED	\$ 310.00	\$ 310.00
19 RADIATOR	1	BENT	\$ 550.00	\$ 550.00
20 RH SIDE FAIRING	1	CRACKED	\$ 350.00	\$ 350.00
21 MUFFLER CHROME PROTECTOR	1	GRAZED	\$ 110.00	\$ 110.00
22 MUFFLER COMP	1	GRAZED	\$ 550.00	\$ 550.00
			\$ 4,469.00	\$ 4,319.00
		Less 10%	\$ 446.90	\$ 431.90
			\$ 4,022.10	\$ 3,887.10

B) S/NETT ITEM

23 REAR BOX	1	GRAZED	\$ 390.00	\$ 250.00
24 FRONT NUMBER PLATE	1	NECESSARY	\$ 40.00	\$ 30.00
			\$ 430.00	\$ 280.00

Parts Total :

\$ 4,452.10	\$ 4,167.10
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C) LABOUR CHARGES & MISC

25 REPLACE , REALIGN AND ADJUST ABOVE DAMGE PARTS AND CHECK WIRING AND LIGHTNING SYSTEM			\$ 600.00	\$ 400.00
26 TO KNOCK, STRAIGHTEN CHASSIS AND BODY BALANCING			\$ 380.00	\$ 300.00
27 TO REMOVE/REFT, REPLACE FRONT FORK TUDES			\$ 180.00	\$ 130.00
28 SPRAY PAINTING			\$ 380.00	\$ 300.00
29 TOWING SERVICE			\$ 150.00	\$ 120.00

Labour Total :

\$ 1,690.00	\$ 1,250.00
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Total Parts and Laboure :

\$ 6,142.10	\$ 5,417.10
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FINAL LUMP SUM ADJUSTMENT

\$ 4,300.00

POINT OF IMPACT

The impact was confined to the right portion of the vehicle.
The damages appeared to be consistent as per the accident report statement.
Please refer the attached schedule and photographs for details.

ADJUSTMENT/RECOMMENDATIONS

We have thoroughly inspected each and every item on the repairer's estimates against the actual damaged found on the vehicle. We have listed the breakdown of our findings and recommendations as per assessment above.

CONCLUSION

The repairer has agreed to undertake repair the vehicle at a lump sum basis of **\$4,300.00 nett** corresponding to replacement of parts, spray painting and labour charges. We now revert for your decision on the above claim.

Yours faithfully
WG APPRAISAL SERVICES



Winson Goh
Automotive Appraiser











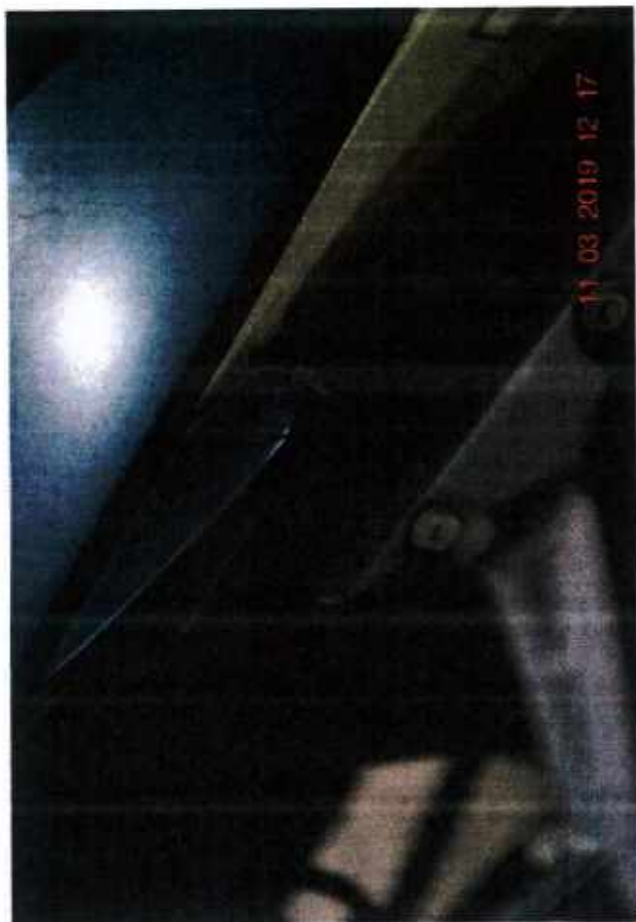




















TRUST TOWING

Biz. Reg. No.: 53380183D

LEON H/P: 8180 1361

CASH SALE

No.: 1426

M/s MCC

Date: 15/03/2019

Item	Description	Quantity	Unit Price	Amount
01	Towing - PBB654D Bike	01	\$60	\$60
				7
TOTAL				\$60/-

E. & O. E.

Authorised Signature

Received By