

CS REP. BY

SA Veyan

Admin

REF CS/SPF19004638/Asd 302

Special Instruction

ASSIGNMENT (Office)

From (Person)

Haffzul Fahren

of

SPF

Date/Time

14/3/19 @ 11:03am

Estimated Cost

Bill to:

OD / (TP) WS / TP RES / OD RES / EVA / INV / MY / CS

To Inspect Vehicle No.

SH 70332

Insured

TP 516

at Workshop m/s

J-Mark Motor

Tel:

63430934

of

Blk 5 Deft Lane 10 # 10-578

Policy No.

Claim No.

Sum Insured

Excess:

Make of Veh.

D.O.A.

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement

Date/Time:

11:12am @ 14/3/19

Person Contacted:

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SH 70332 - X

13/09/19

@ 10:09 am checked with J-Mark, repair days inclusive Saturday.

Surveyor

REF: SPF

ASSIGNMENT

From: _____ Date: 14/3/19
 Estimated Cost: _____
 OD/TP/WS/TP RES/OD RES/EVA/INV/MV
 To Inspect Vehicle No: SJH 7033Z
 at Workshop m/s J-Mart
 of Blk 5 Defu lane 10 # 10-578
 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.

N/S	O/S

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS ^{up}

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SJH7033Z Yr Regn: 2008, Agust
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Honda Stream C.C 1799
 Colour: Black A/C: Insured / Std / NI / NA
 Sp. Reading: 171474 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JHMRN684085201568
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 205/55R17.
 R: 205/55R17.

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

Front Rear
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. D.O.I. 14/03/19.

Survey held at J-Mart.

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

Front N/S.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

TP SPF

COE Expiry: 19/08/28.

Do Not Finalise

Estimated Repair Range: \$1.5K - \$2.5K

My
 Next

Submit HS \$1,900/-, 4 Days (1 weekends) = 5 days

RECEIVED 13 SEP 2019

Date/Time, File Pass to?

1) 13/09/19

Typist

Date/Time, File Return to?

2)

☐ : Preli. Report
☒ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Invs (\$)
☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

220

220

Report Format :

Lump Sum / I.B.I. (\$) \$1,900/- C/S

Nivitha (LKK Auto)

From: Hafizul Farhan RAHMAT (SPF) <Hafizul_Farhan_RAHMAT@spf.gov.sg>
Sent: Thursday, 14 March 2019 11:03 AM
To: Admin-D (LKKAuto); assignments
Cc: Olivia Lau (LKKAuto); SUR; Frankie THAY (SPF)
Subject: Pre-repair inspection SJH7033Z

Hi,

Please conduct per-repair inspection on **SJH7033Z**.

The vehicle is currently at:
J-Mart Motor Pte Ltd
Blk 5 Defu Lane 10 #10-578
Defu Industrial Park C
Singapore 539186
Tel: 63430934

Thank you.

Best Regards,

Hafizul Farhan Bin Rahmat

AEMD / PLD

Singapore Police Force

DID: (65) 6478 4840 / FAX: (65) 6478 4850



HOME TEAM
TRANSFORMATION 2025
One Home, One Team
Building Our Future Together

WARNING: "Privileged/Confidential information may be contained in this message. If you are not the intended addressee, you must not copy, distribute or take any action in reliance thereon. Communication of any information in this email to any unauthorized person is an offence under the Official Secrets Act (Cap 213). Please notify the sender immediately if you receive this in error."

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	12/03/2019 15:26
Date Of Accident	25/02/2019 08:30
Exact Location Of Accident	LOR 41 GEYLANG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJH7033Z
Insured/Policyholder	
Name Of Registered Owner	ADELINE KOH KAI QUN
NRIC No	S8433786B
Email Address	SILVERKOH71@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90290843
Alternative Phone No	OFFICE-90290843

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01003319
Cover Note Number	

Driver

Name of Driver	ADELINE KOH KAI QUN
NRIC No	S8433786B
Date Of Birth	08/11/1984
Occupation	INDOOR
Date Of Driving Pass	08/03/2005
Driving Experience	13 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90290843
Fax Number	
Contact Number	OFFICE-90290843
Email Address	SILVERKOH71@GMAIL.COM

Address

BLK 761 BEDOK RESERVIOR VIEW #05-325 S470761

Postcode

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 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?

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 [OTHER] BEDOK NORTH NPC

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED REPORT

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number TP51G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver NA

NRIC/Passport Number

Contact Number NA

Address NA

Postcode NA

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

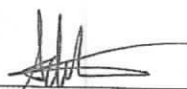
SKETCH PLAN

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.
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 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:
 - (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:

12 MAR 2019
12:40 pm


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

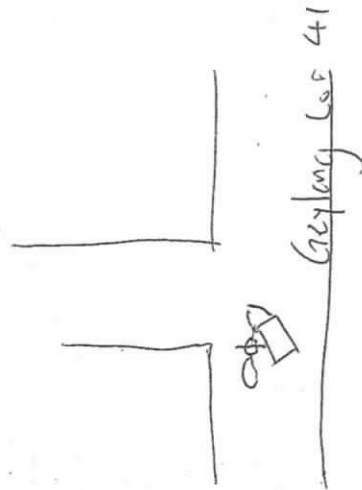
12 MAR 2019
12:40 pm



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

Accident Sketch Plan Pg. 1

SKETCH PLAN



DOA: 25/2/19
A: SJH 7033Z
B: TP 51C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref to Police Report

DECLARATION

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

[Signature]

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.:



**SINGAPORE
POLICE FORCE**



T/20190226/2004

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

1 of 3

Report No. T/20190226/2004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/02/2019 00:47	Vide Report No.: G/20190225/0059	Station Diary No.: 12
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Informant's Particulars			
Name of Informant: ADELINE KOH KAI QUN		Address: APT BLK 761 BEDOK RESERVOIR VIEW #05-325 SINGAPORE 470761	
ID Type / ID No.: NRIC NO / S8433786B		Contact No.: Home/Office: Mobile: 90290843	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 34	Date of Birth: 08/11/1984	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: ADMINISTRATOR		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 25/02/2019 08:30	Type of Location: T-Junction
Location: Along Road 1 LORONG 41 GEYLANG ALONG LORONG 41 GEYLANG				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJH7033Z	Car	HONDA	STREAM SUNROOF 1.8L A	Black	Slightly Damaged	0
TP51G	Motorcycle					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20190226/2004

2 of 3

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20190226/2004

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJH7033Z	TENET SOMPO INSURANCE PTE. LTD.	D19MTPV0100331 9	20/02/2019	19/02/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	ADELINE KOH KAI QUN		ID No.	S8433786B
Related Vehicle	NIL		Contact No.	90290843
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

On 25/02/2019 at about 8.30am I was driving along Lorong 41 Geylang in the middle lane. I signaled left to turn into the road where my office is located. I slowed down because there was a pedestrian who was crossing towards the road that I was turning to and she was walking in the middle of the road. Suddenly, a Traffic Police motorcycle overtake from my left and side swiped the left side of my front bumper near the tire area. The traffic police officer alighted a few meters ahead and approached me. I was not injured so no ambulance was activated.

I was then given a case card and was advised to lodge a police report regarding the matter. My front in-car camera memory card was taken by the traffic police officer for investigation purpose.



**SINGAPORE
POLICE FORCE**



T/20190226/2004

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

3 of 3

Report No. T/20190226/2004

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 3 ANWAR MUSHADAD BIN ABDUL
RAHMAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

26/02/2019 00:47

Officer In Charge Of Case:

TP / GIA /

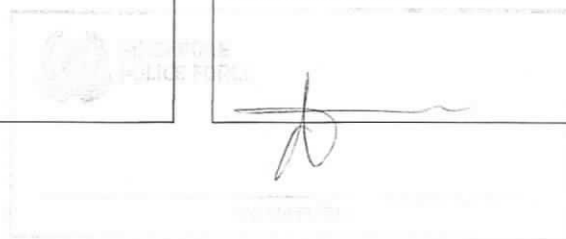
Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168



J-MART MOTOR PTE LTD

Block 5, Defu Lane 10, #01-578,
Defu Industrial Park C, Singapore 539186
Tel : 6343-0934 Fax : 6343-0921
Email : jmartauto@gmail.com
Registration No: 201400246D
GST Reg. No: 201400246D

12-Mar-19

Our ref : TP/4657/19

Adeline Koh Kai Qun

TPSPF
Shirley

RE : estimate cost for vehicle no : SJH 7033Z

1 pc	frt bumper <i>torn</i>	\$	635.60	✓
5 pcs	frt bumper clips <i>m</i>	1469.20	19.50	✓
1 pc	frt bumper lh retainer <i>m</i>		24.10	✓
1 pc	lh headlamp <i>ct</i>	1175.36	790.00	✓
1 pc	frt lh fender <i>repis</i>		576.10	✓
			2,045.30	
		less 20%	409.06	
			1,636.24	
1 pc	frt bumper lower spoiler <i>ct</i>	480	800.00	snett 480
Panel beating.			500.00	300
Spray painting.		730	700.00	400
Wiring.			30.00	✓
			3,666.24	
		Plus 7% GST	256.63	
			3,922.87	

SD : Three thousand nine hundred twenty-two & cents eighty-seven only.

Adrian Lim total: 2385.36
2/s 14/03/19. 4/s: 1.8k ✓
07 Days.

LKK Auto Consultants hence notify

the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:



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

AUTOMOTIVE ENGINEERING & MGT DIVISION

Ref : CS/SPF19004638/Asd3e2

ACCIDENT CLAIM SECTION (SPORE POLICE
FORCE) 1 MOUNT PLEASANT ROAD BLK 8 OLD
POLICE ACADEMYSINGAPORE 298333

Date : 02-10-2019



ATTN : HAFIZUL FARHAN

Code : SPF

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	TP 51G	Veh. Inspected	SJH 7033Z
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	HAFIZUL FARHAN	Assign Date	14/03/2019

2. Vehicle Particulars & Condition

Make & Model	HONDA STREAM	c.c	1799
Engine No.	HIDDEN	Year of Reg.	2008
Chassis No.	JHMRN68408S201568	Colour	BLACK
Odometer	171474	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/55 R17	YOKOHAMA	6 mm
L/H Front Tyre	205/55 R17	YOKOHAMA	6 mm
R/H Rear Tyre	205/55 R17	YOKOHAMA	6 mm
L/H Rear Tyre	205/55 R17	YOKOHAMA	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	25/02/2019	Inspection Date	14/03/2019
Survey held at	J-MART MOTOR PTE LTD BLK 5 DEFU LANE 10 #01-578 DEFU INDUSTRIAL PARK C SINGAPORE 539186		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJH 7033Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRT BUMPER	TORN	635.60	635.60
5	FRT BUMPER CLIPS	NECESSARY	19.50	19.50
1	FRT BUMPER LH RETAINER	NECESSARY	24.10	24.10
1	LH HEADLAMP	CUT	790.00	790.00
1	FRT LH FENDER	TO REPAIR SEE LABOUR	576.10	-
	LESS 20% DISCOUNT		-409.06	-293.84
			1,636.24	1,175.36
SPECIAL NETT ITEMS				
1	FRT BUMPER LOWER SPOILER (SN)	CUT	800.00	480.00
			800.00	480.00
LABOUR				
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF FRT LH FENDER.		500.00	300.00
	SPRAY PAINTING.		700.00	400.00
	WIRING.		30.00	30.00
			1,230.00	730.00
GRAND TOTAL			3,666.24	2,385.36
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,900.00

Report Ref No. CS/SPF19004638/Asd3e2

NOTES : THE ESTIMATED UPPER RANGE OF REPAIR COST FOR THE DAMAGED VEHICLE IS IN THE REGION OF \$1,500-\$2,500

RECOMMENDED REPAIR DAYS : 4
WEEKEND : 1
TOTAL DAYS : 5

ADRIAN LING WAI PING

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

Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.