

ASST. DIR. (TTC)

REF: CSB/lpc19005703/R15d302

Special Instruction:

Surveys) Rasul

ASSIGNMENT (Office)

From (Pcs no) 0ng hti

of

tpc

Date/Time:

09/3/19 @ 9.48am

Estimated Cost:

Bill to:

OD / WS / TT RES / OD RES / EVA / INV / MV / CN

To Inspect Vehicle No:

8KW 58154

Insured:

SJJ 3411G

at Workshop no/

Freelion Automotive

Tel:

G702 3533

of

25 katei Bukit Rd 4 #03-33

Policy No:

Claim No:

18/19/19/vpos/021592

Sum Insured:

Recent:

Make of Veh:

(Client's Record)

D.O.A

27/03/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement

Date/Time:

12:37pm 14/19

Person Contacted:

Henry

Vehicle IN OUT

Date/Time

Action/Instruction (X) Estimate

8KW 58154-X

SJJ 3411G-X

Prave

REF:

ASSIGNMENT

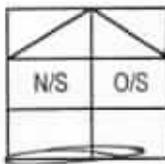
COE REF: 2023/DEC

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SKW 58454
 at Workshop m/s: FREESION AUTOWORKS
 of: 25, KAKI BUKKI RD #03-33
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SKW 58454 Yr Regn: 2008 / DEC
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: TOYOTA WISH 1.8A cc: 1794
 Colour: GREY A/C: Insured / Std / NI / NA
 Sp. Reading: 135367 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JTDER12W803001009
 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: 185/65R15
 R: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____
 IDAC Accident Report: _____ 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
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front R/Bal. 5 mm L/Bal. 5 mm
 Rear R/Bal. 5 mm L/Bal. 5 mm
 D.O.A. 27/03/19 D.O.I. 01/04/19
 Survey held at FREESION
 Des. of Damages: Frt / Rear / OIS / N/S / U/C / Rooftop or _____
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
08/05/19	Confirmed Submit HS \$ 1,650/- @ 4 days (\$ 4,050/- Red - 71%)
	Paper Survey
	RECEIVED 08 MAY 2019
	<i>[Signature]</i> 8/5/2019

Date/Time, File Pass to? 08/05/19
 1) Types
 Date/Time, File Return to? _____
 2) _____
 Report Format: Paper Survey
 Lump Sum / I.B.I.: (\$ 1,650/- L/S)

Days Of Repair: 4
 Resurvey No. of Trip: 2
 Add Fee: Site Insp (\$)
 Interview (\$)
 Tech. Invs (\$)
 Weekend (\$)
 Survey Fee: 450
 Transportation: \$ + RS \$
 Photos _____
 Others _____
 TOTAL 450

Nivitha (LKK Auto)

From: ONG LI LI <llong@lonpac.com>
Sent: Friday, 26 April 2019 11:14 AM
To: Admin-D (LKKAuto); assignments
Cc: MT_Claim_SG; SUR
Subject: RE: Our Ref: 18/19/19/VP05/021592 Notification of Accident Involving SKW5845U & SJJ3411G [External Confidential]
Attachments: 21592 TPD SURVEY REPORT.pdf

Lonpac External - Confidential

Dear Nivitha

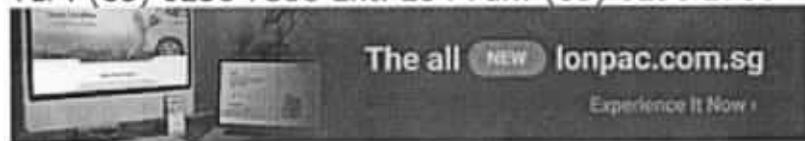
Attached is the TP survey report.

Please let us have your surveyor's review/report.

Regards,

Ong Li Li

Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706



Lonpac External - Confidential data is for use by authorised external parties only.

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]
Sent: Monday, 1 April, 2019 12:43 PM
To: ONG LI LI; assignments
Cc: MT_Claim_SG; SUR
Subject: RE: Our Ref: 18/19/19/VP05/021592 Notification of Accident Involving SKW5845U & SJJ3411G [External Confidential]

Dear Sir/Mdm,

Thank you for the assignment.

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: ONG LI LI [mailto:llong@lonpac.com]
Sent: Friday, 29 March 2019 9:48 AM

Nivitha (LKK Auto)

From: ONG LI LI <llong@lonpac.com>
Sent: Friday, 29 March 2019 9:48 AM
To: Irene; assignments@lkkauto.com; Admin-D (LKKAuto)
Cc: MT_Claim_SG; freesionautodrive@gmail.com
Subject: RE: Our Ref: 18/19/19/VP05/021592 Notification of Accident Involving SKW5845U & SJJ3411G [External Confidential]

12:34pm @ 1/4/19
vehicle in
Huny.

Lonpac External - Confidential

Without Prejudice
Save as to Costs

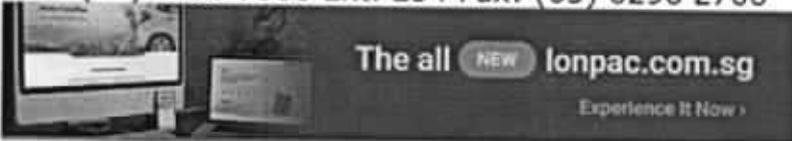
Dear Sir/Mdm

We are not agreeable with your list of proposed surveyor and we shall appoint LKK Auto Consultants Pte Ltd to conduct the survey.

Dear Nivitha

FYA

Regards,
Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706



Lonpac External - Confidential data is for use by authorised external parties only.

From: Irene [mailto:motor@iaconsultingsg.com]
Sent: Friday, 29 March, 2019 9:24 AM
To: GERALD POH WEE BIN
Cc: MT_Claim_SG; freesionautodrive@gmail.com
Subject: RE: Notification of Accident Involving SKW5845U & SJJ3411G [External Confidential]

Dear Gerald,

We refer to your email below.

We regret to inform you that our client will not appoint any of the surveyors from your list provided.

However, we are pleased to provide below a list of ten surveyors for your consideration.

Gilbert Leow
Impact Analysis Consultant

Andy Ho
Impact Analysis Consultant

Shandy Loh
Impact Analysis Consultant

Michael Yap
Mccoy Pte Ltd

Joshua Ong
Delta-V Consultant

James Ong
Delta-V Consultant

Nick Ng
Delta-V Consultant

Loo Yee Khang
Cozon Engineers

Alex Teo
Cozon Engineers

Pal's Appraiser Pte Ltd
Denise Yap

Kindly let us know if you agree or disagree to appointing any of the above surveyors within the timeline stipulated under the NIMA protocol.

Thank you.

Regards,
Lee Mei

From: GERALD POH WEE BIN [<mailto:geraldpoh@lonpac.com>]
Sent: Thursday, 28 March 2019 5:31 PM
To: Irene
Cc: MT_Claim_SG
Subject: RE: Notification of Accident Involving SKW5845U & SJJ3411G [External Confidential]

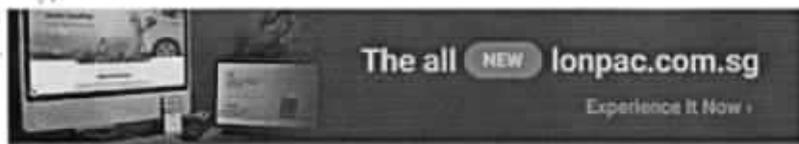
Lonpac External - Confidential
WITHOUT PREJUDICE

Dear Irene,

We attached a copy of the list of motor surveyors from LKK Auto Consultants Pte Ltd for your attention.

Please revert.

Best Regards
Gerald Poh
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706



Lonpac External - Confidential data is for use by authorised external parties only.

From: Irene [<mailto:motor@iaconsultingsg.com>]
Sent: Thursday, 28 March, 2019 5:08 PM
To: MT_Claim_SG
Cc: freesionautodrive@gmail.com
Subject: FW: Notification of Accident Involving SKW5845U & SJJ3411G

Dear Sir/Madam,

Re-send.

We refer to the above matter.

Our Ref: SKW5845U

Notification of Accident Involving SKW5845U & SJJ3411G At Junction of Yishun Ave 5 on 27.03.2019

Please arrange for pre-repair inspection.

Kindly let us have your list of **Ten** surveyors for our consideration.

Please acknowledge upon receipt of the Notification of Accident during office hours
(Mon - Fri, 9:00am - 6:00pm)

From: Freesion Autodrive [<mailto:freesionautodrive@gmail.com>]
Sent: Thursday, 28 March 2019 4:24 PM
To: motor@iaconsultingsg.com
Subject: Fwd: Notification of Accident Involving SKW5845U & SJJ3411G

Amylia Wong
Sent from my iPhone

Begin forwarded message:

From: Freesion Autodrive <freesionautodrive@gmail.com>
Date: 27 March 2019 at 11:36:19 PM MYT
To: bkchew@lonpac.com
Subject: Notification of Accident Involving SKW5845U & SJJ3411G

Our Ref: SKW5845U

**Notification of Accident Involving SKW5845U & SJJ3411G At Junction of Yishun Ave
5 on 27.03.2019**

Please arrange for pre-repair inspection.

Kindly let us have your list of **Ten** surveyors for our consideration.

Please acknowledge upon receipt of the Notification of Accident during office hours
(Mon - Fri, 9:00am - 6:00pm)

Our reference: 19-4-8201

Date: 5/4/2019

c/o Freesion Autodrive
25 Kaki Bukit Road 4
Synergy @ KB #03-33
Singapore 417800

Dear Sirs

RE: Road Traffic Accident on 27/3/2019
Lima Limo Transport Services

In accordance with your instructions received in this office on 1/4/2019, we made arrangements to examine the vehicle on 1/4/2019 at above-mentioned address. The following data was recorded:

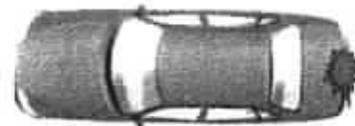
Vehicle details

Make	Toyota	Registration	SKW5845U
Model	Wish 1.8A	Chassis	JTDER12W803001009
Colour	Grey	Gearbox	Auto
Odometer	135365km	Paintwork	Good
Steering	In order	Brakes	In order
Condition	Good		

Tyre Depths

Front left	195/65R15	85% Dunlop
Front right	195/65R15	85% Dunlop
Rear left	195/65R15	85% Dunlop
Rear right	195/65R15	85% Dunlop

Impact Direction & Area of Damage:



Status	REPAIRABLE
Magnitude	Medium
Legal status	Unroadworthy

Following our examination of the accident damage, we have calculated repair times and method, which are detailed on page 2 & 3. We would recommend a sum of \$5,700.00 and 7 working days for repair, which is sufficiently lower than the pre accident value to render the vehicle an economically and physically reliable proposition.

Subsidiaries of Impact Analysis Consultant:

- Impact Analysis Consulting Pte Ltd
 - Impact Analysis Academy Pte Ltd
 - IA Racking Solutions Pte Ltd
 - IA Accounting & Consultancy Pte Ltd
 - Infoknights International Services (Philippines)
 - IABN Pte Ltd
- www.iaconsulting.com

Our reference 19-4-8201
Date 5/4/2019
Page 2

Section A: Damaged Parts Assessment

Part's Description	Qty	Condition/As Inspected	Repairer's Estimate	Our Adjustment
--------------------	-----	------------------------	---------------------	----------------

List Items:

Tail gate	1	repair.refinish	1150.60	0.00
Tail gate inner lock	1	damaged	388.40	388.40 X SVC
Tail gate weather strip	1	serviceable	280.60	0.00
Tail gate logo	1	necessary	68.50	68.50 56
Tail gate outer moulding	1	serviceable	225.00	0.00
Rear bumper	1	deformed	1125.40	1125.40 545.20
Rear bumper bracket @\$65.80	X/PC	bent	131.60	131.60 65.80
Rear bumper side retainer @\$59.90	X/PC	necessary	119.80	119.80 59.90
Tail lamp @\$318.60	2	holder damaged	637.20	637.20 X SVC
Tail lamp panel @\$285.10	2	repair	570.20	0.00
Rear end panel	1	bent	589.80	589.80 repair
Rear end panel top garnish	1	deformed	265.60	265.60
Rear bumper reflector @\$89.50	2	holder damaged	179.00	179.00 X AN
Sub- Total costs			5731.70	3505.30
Percentage discount : 25%			1432.93	876.33
Sub-Total costs for parts			4298.78	2628.98

Special Nett Items:

Rear bumper clips @\$5.00	8	necessary	40.00	40.00 ✓
Rear end panel top garnish clips @\$5.00	3	necessary	10.00	10.00 X AN 240
Reverse sensor	1	malfunction	250.00	250.00 200 ✓
Sub-Total costs for parts			300.00	300.00

Parts Repair

*			0.00	0.00
Sub- Total costs			0.00	0.00
Total costs for parts			4598.78	2928.98

Subsidiaries of Impact Analysis Consultant:

• Impact Analysis Consulting Pte Ltd • Impact Analysis Academy Pte Ltd • IA Racking Solutions Pte Ltd
• IA Accounting & Consultancy Pte Ltd • Infoknights International Services (Philippines) • IABN Pte Ltd
www.iaconsulting.sg.com

Our reference 19-4-8201

Date 5/4/2019

Page 3

Section B: Labour Cost Calculation

	Hourly rate	Manhr. Req.	Total
To dismantle, replace, cut, weld, knock out dents to straighten accident parts as-mentioned on the 'Parts Repair' column inclusive of replacement parts.	\$ 45.00	28	\$ 1,260.00 400
Putty & Spray painting to adjacent panels. Job allowance. Paint / material.	Sub-contract work.		\$ 1,000.00 600
Apply rust proofing on the adjacent panels.	Sub-contract work.		\$ 1,000.00 40
Wiring and bulb checking	\$ 45.00	0.5	\$ 22.50 XAN
Remove and replace rear bumper reverse sensor & conduct distance safety setting.	\$ 45.00	1.7	\$ 76.50 60
			\$ -
Total labour cost			\$ 3,359.00 1100

Manhour rate and the number of manhours required for each repairing task are formulated based on individual workshop's operating cost and in-house @ IA Research Guidelines respectively.

744.37
240.00
1100.00
2084.37
20%
1667.49
43-1,650
4 days

2957.77

Subsidiaries of Impact Analysis Consultant:

- Impact Analysis Consulting Pte Ltd • Impact Analysis Academy Pte Ltd • IA Racking Solutions Pte Ltd
 - IA Accounting & Consultancy Pte Ltd • Infoknights International Services (Philippines) • IABN Pte Ltd
- www.iaconsultingsg.com

Our reference 19-4-8201

Date 5/4/2019

Section C: Summary Table of Total Repair Cost

Description		Cost	
Damaged Parts Assessment (See section A)		\$2,928.98	
Further discount	20%	\$585.80	
Recommended cost of parts replacement		\$2,343.18	(1)
Labour Cost Calculation (See section B)		\$3,359.00	(2)
Total Repair Cost (Round off to hundred)		\$5,700.00	(1) + (2)

We would recommend a sum of \$5,700.00 and 7 working days for repair.
No further items will be approved without our expressed written agreement. Any significant additional items will be subject to a supplementary report.



Mechanical Engineer, Accident Expert Witness, Licensed Appraiser (Automobile)
B.Eng. (Hons, NUS)
Diploma.Mechanical Engineering
NTC-2 Automovite Technology
Sr.MIES, Institution of Engineers, Singapore (#20100091)
MATAI, Maryland Association of Traffic Accident Investigators
IAARS, International Association of Accident Reconstruction Specialists
PMC of Singapore Business Advisors & Consultants Council
ACTA certified Trainer, Singapore
SPRING- Recognised Certification for Management Consultants

Subsidiaries of Impact Analysis Consultant:

- Impact Analysis Consulting Pte Ltd • Impact Analysis Academy Pte Ltd • IA Racking Solutions Pte Ltd
 - IA Accounting & Consultancy Pte Ltd • Infoknights International Services (Philippines) • IABN Pte Ltd
- www.iaconsultingsg.com

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	27/03/2019 14:09
Date Of Accident	27/03/2019 07:30
Exact Location Of Accident	JUNCTION OF YISHUN AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW5845U
Insured/Policyholder	
Name Of Registered Owner	LIMA LIMO TRANSPORT SERVICES
Co Reg No	53204251D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-93691537
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH
Exact Purpose for which vehicle was being used at time of accident	HIRER 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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106596093
Cover Note Number	
Driver	
Name of Driver	MOHAMAD HANAFI BIN MOHAMED YUNOS
NRIC No	S1721393H
Date Of Birth	07/05/1965
Occupation	INDOOR
Date Of Driving Pass	23/07/1991
Driving Experience	27 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93691537
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 121 YISHUN ST 11 # 10-461
Postcode	760121
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - DRIVER
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?	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)	2
Passenger 1	NAME: : UNKNOWN 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 ATTACHED

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	SJJ3411G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KELVIN LEE
NRIC/Passport Number	
Contact Number	92349964
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to reassess 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 GI& Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodging of this report to the Insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/zan 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.

Lim Lino
Transport Services
Reg No: S202210
ms@mstransport@gmail.com

Policyholder's Signature
Date & Time:

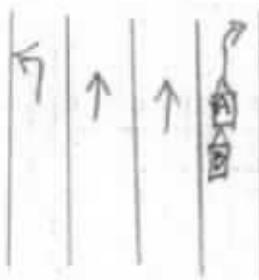
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Sketch Plan #2

SKETCH PLAN

Vehicle A: S E W 584 E U
B: S J J 3411 G 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

1.

on 27.3.2019 at about 0720hrs. I was travelling along yishun Ave 5 and I was stopping at the junction of yishun Ave 5 and yishun Ave 2. The traffic light was red. Suddenly + was my car was hit at the rear by a car.

DECLARATION

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

Lima Limo
Transport Services

Reg No: 53204251D

limalimo@transpdt@gmail.com

Date & Time:


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


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

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	28/03/2019 11:57
Date Of Accident	27/03/2019 07:35
Exact Location Of Accident	AT YISHUN AVENUE 5 TURNING INTO YISHUN AVENUE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ3411G
Insured/Policyholder	
Name Of Registered Owner	LEE KIM SIM KELVIN
NRIC No	S8441790D
Email Address	KELVIN2712@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92349964
Alternative Phone No	OFFICE-92349964

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA AXIO-1.5 (A)
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05019610
Cover Note Number	29/07/2018 - 28/07/2019

Driver

Name of Driver	LEE KIM SIM KELVIN
NRIC No	S8441790D
Date Of Birth	27/12/1984
Occupation	INDOOR
Date Of Driving Pass	18/07/2008
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92349964
Fax Number	
Contact Number	OFFICE-92349964
Email Address	KELVIN2712@GMAIL.COM

Address	BLK 909 HOUGANG STREET 91 #10-94
Postcode	S530909
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 - 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?	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)	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

PLEASE REFER TO REPORT ATTACHED.

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	SKW5845U
Vehicle Make/Model/Colour	NA
Details Of Properties	NA
Vehicle Category	PRIVATE CAR
Name of Driver	MOHAMAD HANAFI BIN MOHAMAD YUNOS
NRIC/Passport Number	
Contact Number	93691537
Address	NA
	NA
Postcode	NA
Insurance Company Name	
Nature Of Damage	NA
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any willful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation**.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodging of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

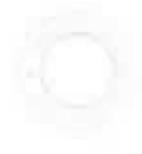
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes").
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes;
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and Management in present and all future claims;
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time: 280319
1205


Driver's Signature
(if driver is not the policyholder)
Date & Time: 280319
1205


Reporting Centre Personnel's Signature
Name:
NIC/TIN No:

Accident Sketch Plan

SKETCH PLAN



A- SJJ3411G

B- SKW5845U

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On that day, I was driving along Yishua Ave 5 toward Yishua ave 2, the traffic light was a bit heavy. It was red light green arrow, so I approach forward. The front vehicle was braking and due to the sun glare, I wasn't able to judge the front vehicle was braking and I applied E-Brake. Unfortunately, my vehicle hit with SKW5845U and it was not a hard hit.

Insured Co. <u>Low P.C.C.</u>
Vehicle No. <u>SJJ3411G</u> Date of Accident <u>27/03/2017</u>
<input checked="" type="checkbox"/> Reporting Only
<input type="checkbox"/> Own Damage Claim
<input type="checkbox"/> Third Party Claim

DECLARATION

(We declare the foregoing particulars are true in every respect)

[Signature]
 Policyholder's Signature
 Date & Time: 28/03/17
1205

[Signature]
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 28/03/17
1205

[Signature]
 Reporting Centre Personnel's Signature
 Name:
 NRC/IRN No.:

REPUBLIC OF SINGAPORE DRIVING LICENCE

SR441790D

LEE KIM SIM KELVIN
(LI JINSEN KELVIN)

Birth Date: 27 Dec 1984
Pass Date: 18 Jul 2008

001629442H



SINGAPORE ARMED FORCES

IDENTITY CARD

Name: LEE KIM SIM KELVIN

NRIC No: SR441790D



This card is the property of the Singapore Armed Forces. Any person losing this card is requested to forward it without delay to Central Manpower Base or any Police Station.

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

	PASS DATE
3 Motor Cars < 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 3500kg	18 Jul 2008

NP 428A

Licence No: SR441790D



SR441790D/PINK

SR441790D/PINK

NRIC No/Colour	Blood Group	Sex
SR441790D/PINK	A (+)	M
Race	Country Of Birth	
CHINESE	SINGAPORE	
Date Of Birth	Military Rank Status	
27/12/1984	WARRANT OFFICER	
Service Status		
REGULAR		
Address		
818 808 HOLIDAY STREET #1		
210-84 SINGAPORE 530908		





LONPAC INSURANCE BHD (598FC5623C)

(Incorporated in Malaysia)

Singapore Office: 350, Beach Road #17-04/07, The Concourse, Singapore 199555

Tel: (65) 6297 7388 Fax: (65) 6296 3797 Website: www.lonpac.com.sg

GST Reg No.: PD-0025635-C

M00

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 169) REPUBLIC OF SINGAPORE.
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1990 (REPUBLIC OF SINGAPORE).
 ROAD TRANSPORT ACT 1987 (MALAYSIA).
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No. : Z13VP06019610

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

TOYOTA COROLLA AXIO 1.5
- 8JJ3411G

2. Name of Policy Holder

LEE KIM SIM KELVIN (LI JENSEN KELVIN)

3. Effective Date of the Commencement of Insurance for the purpose of the Act

29/07/2016

4. Date of Expiry of the Insurance

29/07/2019

5. Persons 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
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Excess : S\$ 500.00 (SECTION 1) INSURED / NAMED DRIVERS

S\$ 1,500.00 (SECTION 1) UNNAMED DRIVERS

S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS

S\$ 100.00 WINDSCREEN EXCESS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS

* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 169) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 169) Republic of Singapore.

H.P. Owner : EPZZ3G CREDIT PTE LTD

Aneke

 CHIEF EXECUTIVE
 (Singapore Branch)

User ID: HWEEBOON
 Date Issued: 29/07/2016

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident scene



Accident scene





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			
LONPAC INSURANCE BHD		Ref : CS3/LPC19005703/R1sd3e2	
300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Date : 10-05-2019	
		Code : LPC2	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SJJ 3411G	Veh. Inspected	SKW 5845U
Policy No.		Coverage (\$)	0.00
Claim No.	18/19/19/VP05/021592	Excess (\$)	0.00
Assign From	ONG LI LI	Assign Date	29/03/2019
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA WISH 1.8 A	c.c	1794
Engine No.	HIDDEN	Year of Reg.	2008
Chassis No.	JTDER12W803001009	Colour	GREY
Odometer	135367	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	185/65 R15	DUNLOP	5 mm
L/H Front Tyre	185/65 R15	DUNLOP	5 mm
R/H Rear Tyre	185/65 R15	DUNLOP	5 mm
L/H Rear Tyre	185/65 R15	DUNLOP	5 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	27/03/2019	Inspection Date	01/04/2019
Survey held at	FREESION AUTODRIVE 25 KAKI BUKIT ROAD 4 SYNERGY @ KB #03-33 SINGAPORE 417800		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKW 5845U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	TAIL GATE	TO REPAIR SEE LABOUR	1,150.60	-
1	TAIL GATE INNER LOCK	SERVICEABLE	388.40	-
1	TAIL GATE WEATHER STRIP	SERVICEABLE	280.60	-
1	TAIL GATE LOGO	NECESSARY	68.50	56.00
1	TAIL GATE OUTER MOULDING	SERVICEABLE	225.00	-
1	REAR BUMPER	DEFORMED	1,125.40	545.20
2	REAR BUMPER BRACKET @\$65.80	BENT-1PC ONLY	131.60	65.80
2	REAR BUMPER SIDE RETAINER @\$59.90	NECESSARY-1PC ONLY	119.80	59.90
2	TAIL LAMP @\$318.60	SERVICEABLE	637.20	-
2	TAIL LAMP PANEL @\$285.10	TO REPAIR SEE LABOUR	570.20	-
1	REAR END PANEL	TO REPAIR SEE LABOUR	589.80	-
1	REAR END PANEL TOP GARNISH	DEFORMED	265.60	265.60
1	REAR BUMPER REFLECTOR @\$89.50	NOT NECESSARY	179.00	-
	LESS 25% DISCOUNT		-1,432.93	-248.13
			4,298.77	744.37
SPECIAL NETT ITEMS				
8	REAR BUMPER CLIPS @\$5.00 (SN)	NECESSARY	40.00	40.00
3	REAR END PANEL TOP GARNISH CLIPS @\$5.00 (SN)	NOT NECESSARY	10.00	-
1	REVERSE SENSOR (SN)	MALFUNCTION	250.00	200.00
			300.00	240.00
LABOUR				
	TO DISMANTLE, REPLACE, CUT, WELD, KNOCK OUT DENTS TO STRAIGHTEN ACCIDENT PARTS AS-MENTIONED ON THE 'PARTS REPAIR' COLUMN INCLUSIVE OF REPLACEMENT PARTS. INCLUSIVE OF THE REPAIR OF TAIL GATE, TAIL LAMP PANEL AND REAR END PANEL.		1,260.00	400.00
	PUTTY & SPRAY PAINTING TO ADJACENT PANELS. JOB ALLOWANCE. PAINT / MATERIAL.		1,000.00	600.00
	APPLY RUST PROOFING ON THE ADJACENT PANELS.		1,000.00	40.00
	WIRING AND BULB CHECKING.		22.50	-



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REMOVE AND REPLACE REAR BUMPER REVERSE SENSOR & CONDUCT DISTANCE SAFETY SETTING.		76.50	60.00
			3,359.00	1,100.00
GRAND TOTAL			7,957.77	2,084.37
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,650.00

Report Ref No. CS3/LPC19005703/R1sd3e2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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