

REF: CS3/ASM18023223/Esd3-1<sup>021</sup>

Special Instruction:

H/s: \$6100.00

*Third Parties:*

**Claimant:**

Surveyor: C. L. Apprizer Ale. H. d.

Workshop: TeamWork Garage

ASSIGNMENT (Office)

From (Person): Xin Yi of Seckhong Date/Time: 13/3/19 @ 10.54am  
 Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SJP 3157J Insured: SJY 8477E  
at Workshop m/s Teamwork Garage Tel: 68442475  
of 53 Ubi Ave 1 #01-25

Policy No: \_\_\_\_\_ Claim No: 19-26604 PD-0

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 23/12/2018  
(Client's Record)


(Client's Record) 11/04/2019 @ 2pm

H.O.D. Endorsement/Date: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN / OUT \_\_\_\_\_

Date/Time: 11/16 Confirmed with \_\_\_\_\_ Final Fig \_\_\_\_\_ days (Red \$ \_\_\_\_\_ / \_\_\_\_\_ %; Original 6 days)

Date/Time: 15/04/19 Submit Final Fig \$2,400/-, 4 days (Red \$3,700/- 61 %; Original 6 days)

Date/Time	Action/Instruction
	SIP 3157 T - CS3/AS118023223/ECd3ed JVA: 23/12/2018
	SJY 6477 E - CS3/AS118023223/ECd3ed JVA: 23/12/2018
	Steve, Pls see me.
	 12/4

Para(1) : Parts found not replaced	(To highlight <i>R or UB, LR, Etc</i> )
------------------------------------	---

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)
--

RECEIVED 15 APR 2019

**Para(3) : Nett Value**

Market Value : \_\_\_\_\_

Salvage Value :

Nett Value  $\frac{1}{2}$

Inspected/  
Evaluated by:

*Fee Charged:*

Basic & Add	
Transport	
Photos	
Others	
Total	

Date: \_\_\_\_\_

150

19

1) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

## 2) Date/Time

File Return to

3) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

#### 4) Date/Time

File Return to

5) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

6) Date/Time

File Return to

DATE: 26/6/08

REF: \_\_\_\_\_

### ASSIGNMENT

From \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop n/s \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_

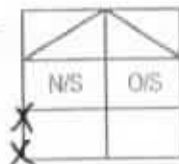
Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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



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

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SJP 3157J Yt Regn: 26/6/08

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda Civic

C.C. 1998

Colour: White

A/C: Insured / Std / NI / NA

Sp. Reading: 209533

T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: FD2-1403887

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/45 R17

R: 17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 4 mm

R/Bal. 4 mm

L/Bal. 4 mm

L/Bal. 4 mm

D.O.A. 23/12/18

D.O.I. 11/4/19

Survey held at Teamwork

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

Rear LH

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

*James To*  
 12/4/2019

Date / Time \_\_\_\_\_ Action / Instruction \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Add Fee: ☐ Site Insp (\$)

☐ Interview (\$)

☐ Tech. Invs (\$)

☐ Weekend (\$)

Survey Fee:

Transportation:

) S + P.S. (\$)

) Photo

) Other

)

TOTAL

Report Format :

Lump Sum / L.B.I: (\$)

## Nivitha (LKK Auto)

---

**From:** Xin Yi <xinyi@seahong.com.sg>  
**Sent:** Wednesday, 13 March 2019 10:54 AM  
**To:** 'Admin-D (LKKAuto)'; 'Admin A'  
**Cc:** 'Chee Kiong'; samson@seahong.com.sg; amanda@seahong.com.sg; sharon@seahong.com.sg  
**Subject:** SJP 3157J [Our file ref: 19.26604 PD-O]  
**Attachments:** SJP3157J TP GIA.PDF; TPPD LITIGATION LOD ONG SENG LOON.pdf; OI GIA.pdf

Dear Nivita,

**CLAIMANT :** ONG SENG LOON  
**VEHICLE NUMBER :** SJP 3157J  
**ALLEGED ACCIDENT DATE :** 23 DECEMBER 2018  
**AXA VEHICLE NUMBER :** SJY 8477E

We act for AXA Insurance Pte Ltd for the above matter.

We understand that you were engaged to survey the claimant's vehicle.

The claimant has issued their LOD and their surveyor's report is attached. A copy is enclosed.

Please let us hear from you on the following: -

- a. If you have conducted post-repair inspection already, please let us have your survey report urgently.
- b. If you have not conducted post-repair inspection, please let us arrange for inspection with the claimant's solicitor and let us have your survey report in due course.

May we hear from you on the above soonest.

Thanks & Best Regards

**Heng Xinyi**

(Secretary to Mr Tan Chee Kiong)

Seah Ong & Partners LLP

36 Robinson Road

#12-03 City House

Singapore 068877

Tel: 6536 5369

Fax: 6536 5811

This message is intended for the recipient named above. It may contain confidential or privileged information. If you are not the intended recipient, please notify the sender immediately by replying to this message and then delete it from your system. Do not read, copy, use or circulate this communication. Thank you.

Disclaimer: Internet communications are not secure. While every reasonable effort has been made to ensure that this communication has not been tampered with, Seah Ong & Partners LLP cannot be responsible for alterations made to the contents of this message without its express consent. If you wish to receive a hard copy of this message for comparison or should you require any other form of confirmation of the contents of this message, please contact the sender. Opinions, conclusions and other information in this message that do not relate to the official business of the company shall be understood as neither given nor endorsed by Seah Ong & Partners LLP.

## Nivitha (LKK Auto)

---

**From:** Xin Yi <xinyi@seahong.com.sg>  
**Sent:** Thursday, 4 April 2019 10:21 AM  
**To:** 'Admin-D (LKKAuto)'; 'assignments'  
**Cc:** 'Chee Kiong'; samson@seahong.com.sg; amanda@seahong.com.sg  
**Subject:** SJP 3157J [Our file ref: 19.26604 PD-O]

Dear Nivita,

<b>CLAIMANT :</b>	<b>ONG SENG LOON</b>
<b>VEHICLE NUMBER :</b>	<b>SJP 3157J</b>
<b>ALLEGED ACCIDENT DATE :</b>	<b>23 DECEMBER 2018</b>
<b>AXA VEHICLE NUMBER :</b>	<b>SJY 8477E</b>

We refer to the above and to the tele-conversation between our goodselves this morning.

The Claimant's vehicle is now available for RI, details of which are as follows:-

Date: 11 April 2019, Thursday

Time: 2pm

Location: Teamwork Garage Pte Ltd, 53 Ubi Avenue 1 #01-24 Paya Ubi Industrial Park Singapore 408934

As spoken we confirm that your surveyor will attend the same. Thanks!

Thanks & Best Regards

**Heng Xinyi**

(Secretary to Mr Tan Chee Kiong)

Seah Ong & Partners LLP

36 Robinson Road

#12-03 City House

Singapore 068877

Tel: 6536 5369

Fax: 6536 5811

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---

**From:** Admin-D (LKKAuto) <admin-d@lkkauto.com>  
**Sent:** Wednesday, 13 March 2019 4:27 PM  
**To:** 'Xin Yi' <xinyi@seahong.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** 'Chee Kiong' <cheekiong@seahong.com.sg>; samson@seahong.com.sg; amanda@seahong.com.sg; sharon@seahong.com.sg  
**Subject:** RE: SJP 3157J [Our file ref: 19.26604 PD-O]

Dear Xin Yi,

2200/2000

ASS. REC. BY:

REF

CS3/ASM/8023223/Ecd307

Special Instruction:

Surveyor

Steve

ASSIGNMENT (Office)

From (Person):

Wang Peter

of

ASM (AXA)

Date/Time: 27/12/18 @ 3:15pm

Estimated Cost:

Bill to:

OI/TT/WS/TT RES / OD RES / EVA / INV / MV / CS

To inspect Vehicle No:

9P3157J

Insured:

SJY8477E

at Workshop in/s

Teamwork Garage

Tel:

68442475

of

53 ubi Ave 1 # 01-24

Policy No:

Claim No:

88M01854

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

23/12/18

CA / REV / REP. / REV 24 HRS <sup>1up</sup>

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Jen

Vehicle:

IN/OUT

Date/Time

Action/Instruction (X) Estimate

SJP3157J - X.

SJY8477E - X.

Dismantle: 17/1/2019.

Steve

REF: (A9M) AXA

PRS

SINGAPORE

From

Date: 16/01/2019

Job No.

SJP 3157J

Vt Regn

26/06/2008

Estimated Cost:

Type: ☒ M Car / ☐ M Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /OD: ☒ TP / ☐ WS / ☐ TP RES / ☐ OD RES / ☐ EVA / ☐ INV / ☐ MV

Truck / Trailer or

To inspect Vehicle No:

SJP 3157J

Make: Honda Civic Type R

CC: 2.0

At Workshop with

Teamwork Garage

Colour

A/C

Insured / Std / NI / NA

at 33 Ubi Ave 1 #01-24

Sp. Reading: 203567

T/Radio: Insured / Std / NI / NA

Insured

Eng/No

Policy No

C/No

F02-1403887

Claims No

Gen. Cond: Good / ☒ Fair / Poor / Burnt

Sure Insured

Excess:

Steering: ☒ Horde / ☐ Jammed / ☐ Leaked / ☐ Burnt or

(Client's Record)

Brake: ☒ Horde / ☐ Jammed / ☐ Leaked / ☐ Burnt or

Make of Veh:

Mod: Nil / ☒ R/Rim / STD A/Rim or

(Policy Condition)

Tyre Size

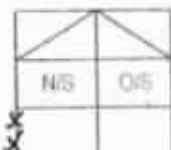
F:

225/45 R17

R:

225/45 R17

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

☒ BS / ☐ DUN / ☐ EXNOVA / ☐ GY / ☐ FS / ☐ LIZA / ☐ MIC / ☐ OHTSU / ☐ PIR / ☐ SUMI /

TOYO / YOKO or

Est. or Market Value:

Front

Rear

IDAC Accident Report

Consistent? : Yes or No

R/Bal 4

mm

R/Bal 4

mm

GIA / PR Seen

Consistent? : Yes or No

L/Bal 4

mm

L/Bal 4

mm

Est. Repair:

5

days

Res: Yes or No

D.O.A. 23/12/18

D.O.I

16/1/19 @ 0105PM

Lump Sum

3 Val. Yes or No

Survey held at

Teamwork Garage

CA / REV / REP. / 24 HRS (up)

Dist. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or

Rear LH

Date:

Person Contacted:

Vehicle: IN / OUT

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

(per page) 3K-4K

22/1/2019

Date/Time, File Pass 511

☐

Preli. Report

Days Of Repair:

5

Vt

☐

Final Report

Resurvey No. of Trip:

1

Survey Fee:

Date/Time, File Return to:

Completion:

Vt

Add Fee:

☐

Side Imp. 1\$

☐

Front Imp. 1\$

☐

Rear Imp. 1\$

☐

Other 1\$

Report Format:

PRG

Lump Sum / LB 1.1

100
100

A copy each of the following supporting document has been sent to your insurer:

60138507

- 1) Our client's GIA report with six (06) copies of coloured scanned photographs;
- 2) LTA search and invoice on vehicle number SJY 8477E;
- 3) Repair bill;
- 4) Rental invoice;
- 5) Survey report + invoice;
- 6) Thirty-four (34) copies of scanned coloured photographs showing damage to 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 to your insurer.

Please note that you should send us an acknowledgement of receipt of this letter **within 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 have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents **within 8 weeks** of your receipt of this letter.

Yours faithfully,



cc. Client (SJP 3157J)



**Daniel Poon & Co.**Advocates & Solicitors  
Commissioners for OathsDaniel Poon Choon Kow  
LL. B. (Hons), LL.M133 New Bridge Road  
#11-02 Chinatown Point  
Singapore 059413  
Tel: +65 6227-2469  
Fax: +65 6225-2579  
Email: law@dpco.com.sg  
(UEN: 53130838C)

Our Ref: DP.sl.10888.19.TG

Your Ref: -----

Please quote our reference number when replying

DATE: 11 MAR 2019

M/S AXA INSURANCE (S) PTE LTD  
8 SHENTON WAY  
#27-01  
AXA TOWER  
SINGAPORE 068811  
**ATTN: MOTOR CLAIMS DEPARTMENT****WITHOUT PREJUDICE**  
**PDX 8176 (by hand)**

Dear Sir,

**ONG SENG LOON (OWNER OF SJP 3157J)**  
**BLK 262 SERANGOON CENTRAL DRIVE**  
**#02-87**  
**SINGAPORE 550262****ACCIDENT ON 23 DECEMBER 2018 INVOLVING SJP 3157J AND SJY 8477E**  
**AT BLK 576 WOODLANDS DRIVE 16**

We are instructed by the above named to claim damages (only material damage on our client's vehicle and without prejudice to our client's injuries, if any.) against you/your driver in connection with the above road traffic accident.

We are instructed that the accident was caused by you/your driver's negligent driving and/or management of you/your driver's vehicle no **SJY 8477E**. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:

1. Repair costs	\$ 6,527.00
2. Rental	\$ 840.00
3. Survey fee	\$ 579.00
4. Cost at this stage	\$ 700.00
5. GIA/ LTA/ROC/ police search fee &/reports	\$ 36.49
6. Postages, transport and other incidentals	\$ 50.00
	<b><u>\$ 8,732.49</u></b>

... 2/-

A copy each of the following supporting document has been sent to your insurer:

- 1) Our client's GIA report with six (06) copies of coloured scanned photographs;
- 2) LTA search and invoice on vehicle number SJY 8477E;
- 3) Repair bill;
- 4) Rental invoice;
- 5) Survey report + invoice;
- 6) Thirty-four (34) copies of scanned coloured photographs showing damage to 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 to your insurer.

Please note that you should send us an acknowledgement of receipt of this letter **within 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 have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents **within 8 weeks** of your receipt of this letter.

Yours faithfully,



cc. Client (SJP 3157J)

## 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	24/12/2018 12:12
Date Of Accident	23/12/2018 22:00
Exact Location Of Accident	BLK 576 WOODLANDS DRIVE 16
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJP3157J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG SENG LOON
NRIC No	S1397306G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96815165
Alternative Phone No	OTHERS-96815165
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	CIVIC-2.0 TYPE-R (M)
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
<b>Insurance Company</b>	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA352294/1
Cover Note Number	
<b>Driver</b>	
Name of Driver	JONATHAN ONG SWEE HEAN
NRIC No	S9219917G
Date Of Birth	09/06/1992
Occupation	INDOOR
Date Of Driving Pass	19/08/2011
Driving Experience	7 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93396096
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 262 SERANGOON CENTRAL DRIVE #02-87 SINGAPORE
Postcode	550262
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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.	YES
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 THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

#### 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	SJY8477E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HE XIAOHUA
NRIC/Passport Number	S8584822D
Contact Number	
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 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 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.

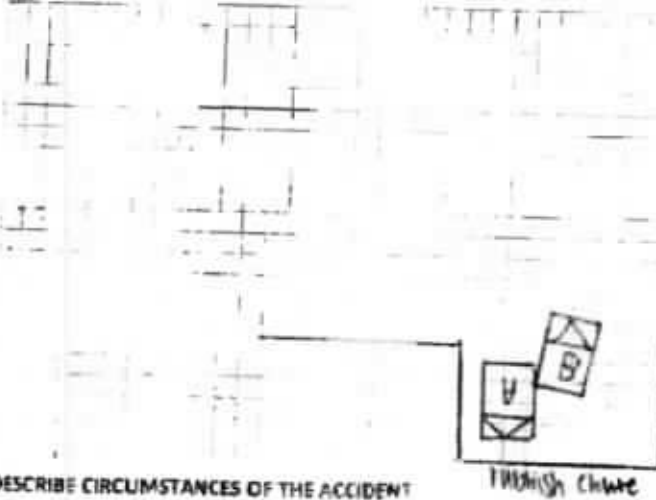
Policyholder's Signature  
Date & Time:

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

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

# Sketch Plan #2

SKETCH PLAN

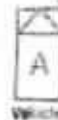


Vehicle No

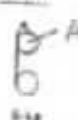
A: SJ3157J

B: SJY8447E

Legend



Vehicle



Vehicle

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was parked at the rubbish chute waiting for my girlfriend to come down. While I was waiting, suddenly I felt an impact at the rear portion of my vehicle. When I got down of my vehicle, I realised vehicle B had collided onto the rear portion of my vehicle. The driver of vehicle B had wrote a statement stating that he had collided onto my vehicle.

## DECLARATION

I/We declare the foregoing particulars are true in every respect. Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

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.:

STATEMENT OF THE POLICYHOLDER

Common Statement

ACCIDENT STATEMENT (Part X)

Recovery Centre Progressive Automotive Pte Ltd

11A & 11B are statements of fact only, not a summary of evidence and facts which will appear on the statement of facts.

11A Date of accident: 23/01/2013, 10pm  
11B Exact location of accident: Woodlands Drive 16 Block 576

11C To be checked for accident damage:  
11C1 Vehicle A: ☒ Yes ☐ No  
11C2 Vehicle B: ☒ Yes ☐ No

11D Witness' name, address and tel no. to be included in letter to insurer in vehicle A or vehicle B: \_\_\_\_\_

12A Insurance No. (VEHICLE A): SJP3873  
12B Insured / Policyholder (for vehicle A): NG SENG LOON  
12C Address: Block 262 Serangoon Central Drive #02-41  
12D NRIC / Passport no.: S13928069  
12E Tel no. (Home / Office / Mobile): 96815165  
12F Age: \_\_\_\_\_  
12G Vehicle: Honda Civic Type-R  
12H Make, type: \_\_\_\_\_  
12I Insurance company: AXA  
12J Does the policy cover damage to vehicle A?  
12K Policy No. (if available): GA352294/1  
12L Driver (See driving license): JONATHAN ONG SNEE  
12M (If different from insured A above): \_\_\_\_\_  
12N License (capital letters): \_\_\_\_\_  
12O NRIC / Passport no.: S12199179  
12P Does it cover B?  
12Q Gender: Male ☒ Female ☐

12 CIRCUMSTANCES

12.1 To cross (X) in each of the 10/2 rows (rows applicable to your vehicle)

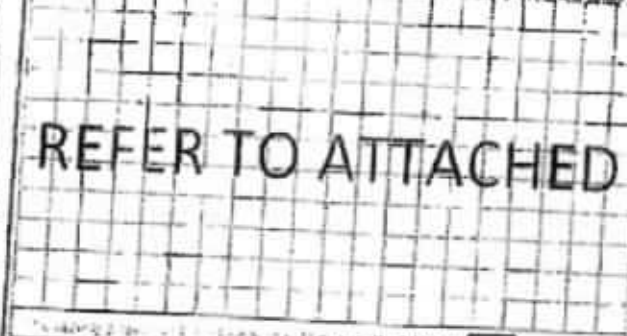
- 12.1.1 Collision
- 12.1.2 Collision with object
- 12.1.3 Collision with pedestrian
- 12.1.4 Collision with vehicle
- 12.1.5 Collision with object
- 12.1.6 Collision with object
- 12.1.7 Collision with object
- 12.1.8 Collision with object
- 12.1.9 Collision with object
- 12.1.10 Collision with object

12A Insurance No. (VEHICLE B): SJP8477F  
12B Insured / Policyholder (for vehicle B): HE XIAOHUA  
12C Address: Block 576 Woodlands Drive 16 #14-512 BL 230576  
12D NRIC / Passport no.: S84849230  
12E Tel no. (Home / Office / Mobile): 91096903  
12F Age: \_\_\_\_\_  
12G Vehicle: Mitsubishi Lancer  
12H Make, type: \_\_\_\_\_  
12I Insurance company: \_\_\_\_\_  
12J Does the policy cover damage to vehicle B?  
12K Policy No. (if available): \_\_\_\_\_  
12L Driver (See driving license): \_\_\_\_\_  
12M (If different from insured B above): \_\_\_\_\_  
12N License (capital letters): \_\_\_\_\_  
12O NRIC / Passport no.: \_\_\_\_\_  
12P Does it cover A?  
12Q Gender: Male ☐ Female ☐

12.2 State TOTAL number of bones involved with a cross

12.3 Show an accident scene diagram sketched

1. Name of car 2. Point of impact 3. Direction of travel 4. Direction of travel 5. Direction of travel



12.4 Vehicle damage to vehicle A

12.5 Vehicle damage to vehicle B

12.6 Signatures of driver

Signature of driver: \_\_\_\_\_

12.7 Signatures of driver

Signature of driver: \_\_\_\_\_

Do not alter anything in the statement when signing. Signatures, names and dates must be included.

Do not alter anything in the statement when signing. Signatures, names and dates must be included.

For insurer's statement (Part II) see contact - 5

# Individual Statement

*Reporting Guide: Progressive Automobile Plan 1.1*

## INDIVIDUAL STATEMENT (Part II)

Use Workshop form / copy over *(10/11/11) @ 10/11/11*

To be completed and submitted within 24 hours to your insurer at home or workplace (use a separate sheet of paper where necessary)

<b>Insured</b>	1 Occupation (if not a driver one, state all)		2 Make	
	7 Vehicle registration no. <u>STP3152 J</u>		CC	
	3 Is driver the owner? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If not, state relationship of driver with owner		4 Commercial vehicle state possible carrying capacity	
	5 State the vehicle number and name of owner of driver's own vehicle (where applicable)		500	
Of which vehicles are you the owner? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	6 Exact purpose for which vehicle was being used at time of accident: <input checked="" type="checkbox"/> Private use <input type="checkbox"/> Commercial use <input type="checkbox"/> Hire & reward <input type="checkbox"/> Police hire			
	7 Is the vehicle still in use? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If no, state where it is at present			
	8 Are you covering under your own insurance policy for repair to your vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If no, state action to be taken: <input type="checkbox"/> Third Party <input type="checkbox"/> Reporting Only <input checked="" type="checkbox"/> Third Party (Own Workshop)			
Driver or person in charge of vehicle at time of accident (including insured)	9 Date of birth: <u>09/06/1982</u>		10 Date of license pass: <u>19/08/2011</u>	
	Indoor <input checked="" type="checkbox"/> Outdoor <input checked="" type="checkbox"/>		Was vehicle driven with the insured's permission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
	11 Give details of any pre-existing impairment of sight or hearing and of any other disability		12 Was driver an employee of the insured's company? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
	13 Give details of all driving convictions including pending prosecutions in the last 36 months			
Injured person	14 Name(s), address(es) and occupation (if any)		15 Injury sustained	
	16 Vehicle registration no. or details of property		17 Name and date of accident	
	18 Name of driver		19 Was driver covered by insurance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
	20 Name of driver		21 Name of driver	
Damage to property & vehicles (other than vehicles A and B)	22 Name(s) and address(es) of owner(s)		23 Vehicle registration no. or details of property	
	24 Name of driver		25 Name of driver	
	26 Name of driver		27 Name of driver	
	28 Name of driver		29 Name of driver	
Police action	30 Was the accident reported to the Police? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please state which Police station			
	31 Was notice of intended prosecution given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, against whom?			
Accident details	32 Weather conditions: <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Rain <input type="checkbox"/> Other			
	33 Road surface: <input checked="" type="checkbox"/> Wet <input type="checkbox"/> Dry <input type="checkbox"/> Other			
	34 Speed of vehicle: A <input type="checkbox"/> km/hr B <input type="checkbox"/> km/hr			
	35 What warnings were given by driver or other party?			
Description	36 Were street lights illuminated? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>			
	37 Were lights worn displayed on your vehicle/other vehicle(s)?			
	38 If your vehicle is commercial, state weight of load carried at time of accident			
	39 State how accident happened, width of road, speed limits, etc (diagram is attached)			
40 State number of Passengers (including Driver) <input type="checkbox"/>				
41 We declare the foregoing particulars are true in every respect				
Policyholder's signature _____ Date _____				
Driver's signature (if driver is not the policyholder) _____ Date _____				



redefining / insurance

AXA Insurance Pte Ltd  
 1800 880 4638 (Within Singapore)  
 (88) 0480 4638 (International)  
 (88) 6880 4730  
 customer.care@axa.com.sg  
 www.axa.com.sg

## Certificate of Insurance

Account number  
 05579

Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 188) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1987 - Road Transport Act, 1987 (Malaysia)  
 Motor Vehicles (Third-Party Risks) Rules, 1989 (Malaysia)

### Policy details

Policyholder name	ONG SENG LOON	Certificate number	GA582254 / 1
Cover	Comprehensive	Chassis number	FD21403687
Plan name	Essential	Engine number	K20A5824015
NCD applicable	0%		
Vehicle registration number	SIP21571		
Period of insurance	from 10/05/2018 to 09/05/2019 (both dates inclusive)		
Finance less company	KENBO LEASING PTE LTD		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder  
 (b) Any person who is driving on the Policyholder's order or with their 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.

### Limitation 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, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.  
 \* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 188) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 500.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed Authorized Driver
2. S\$500 for declared Young and Inexperienced Driver
3. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

### Additional clauses & endorsements to your policy

Nil

We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 188) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorized signatory

### Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 188).  
 The Premium Waiver Clause requires the premium to be paid in full within a specific period following which there would be no liability under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903812M)  
 8 Shenton Way, #24-01, AXA Tower,  
 Singapore 068811  
 Customer Centre, #B1-01

1 of 3




SINGAPORE ARMY		SINGAPORE ARMY	
NRIC No/Class		S9219917G P8K	
Name		JONATHAN ONG SWEI HEAN	
Race		CHINESE	
Date of Birth		19 Jun 1982	
Country of Birth		SINGAPORE	
Service Status		MILITARY EXPERT	
Address		801 263 SERANGOON CENTRAL DRIVE #03-07 SINGAPORE 550262	
Blood Group		O (+)	
Sex		M	


SINGAPORE ARMY		SINGAPORE ARMY	
Class 3		Motor Cars < 2000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2000kg	
Valid Until		19 Aug 2011	
License No		S9219917G	
HP 438A			

STATEMENT BY TP DRIVER Pg. 1

I HENRI HUA REVERSED AND HIT INTO  
PARKED CAR SJP 31573 HONDA CIVIC TYPE R.  
WITH MY CAR SJP 8477E MITSUBISHI LANCER.  
AT TIME 1003PM 23 DEC 2018 AT LINDSAY DRIVE  
BLOCK 570.

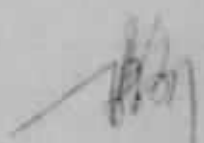
THE PARKED CAR SJP 31573 WITHMY PUT ON  
THE HAZARD LIGHT.

  
SJP 9917G  
93396096

  
SJP 8477E  
91096803

AUTHORIZATION LETTER

I, Ong Seng Loon, S13973064 hereby  
authorised, Jonathan Ong Swee Heng, S92199176  
to proceed with the claims and insurance  
for SJP3157J

  
Ong Seng Loon

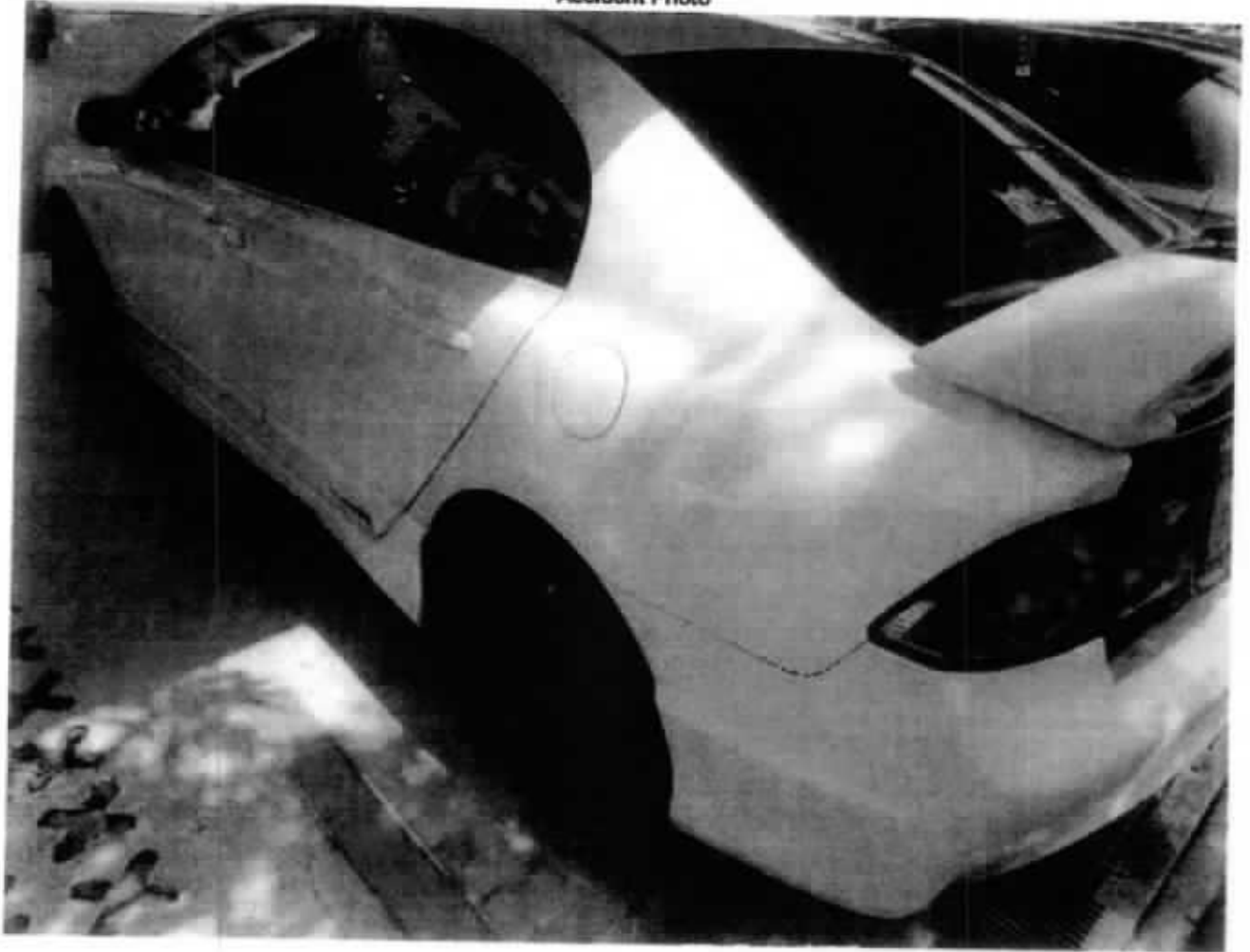
Accident Photo



Accident Photo



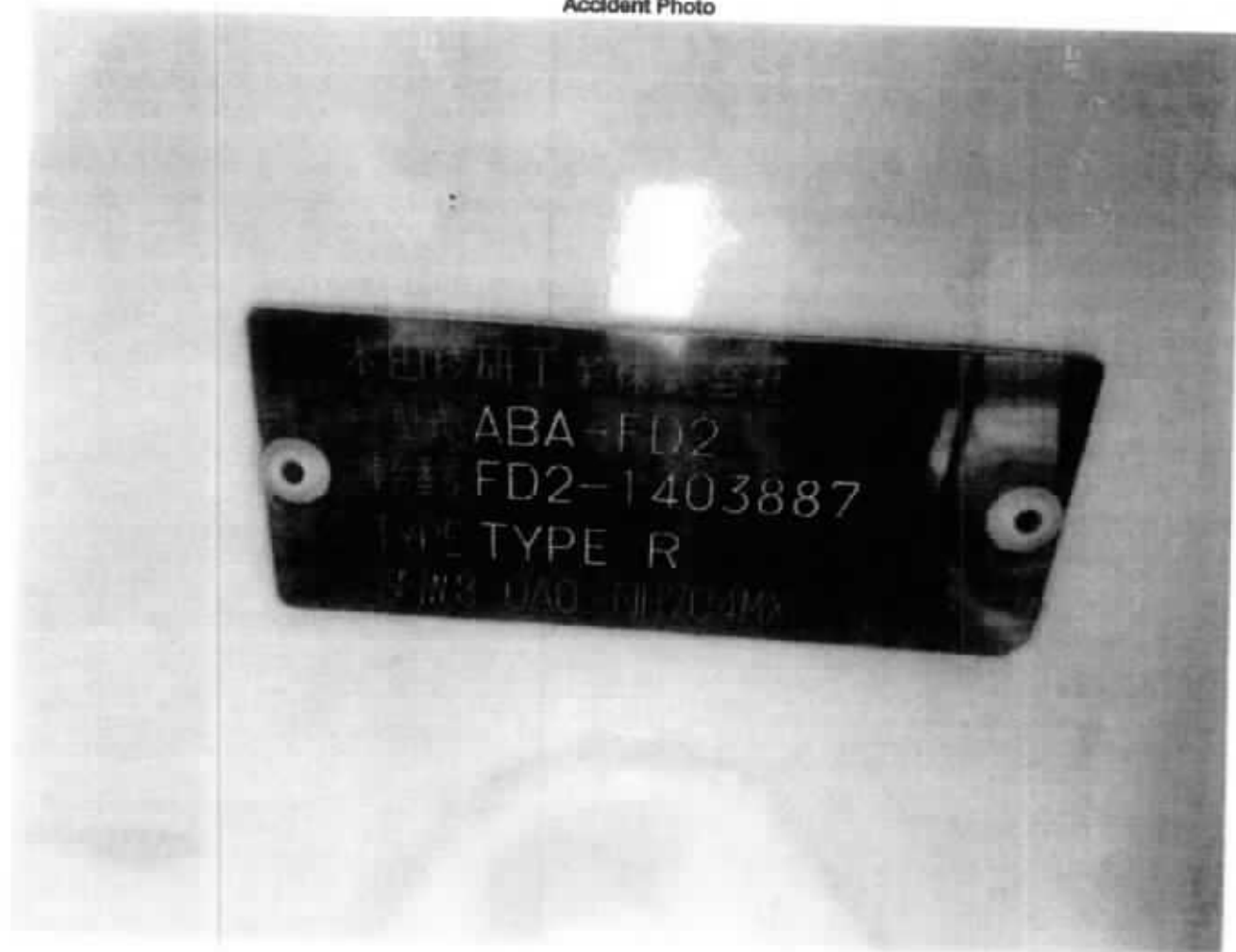
Accident Photo



Accident Photo



Accident Photo



Accident Photo





redefining / insurance

AXA Insurance Pte Ltd  
 1800 880 4888 (Within Singapore)  
 (65) 6880 4888 (International)  
 (65) 6880 4740  
 customer.care@axa.com.sg  
 www.axa.com.sg

## Certificate of Insurance

account number  
 05579

Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 - Road Transport Act, 1987 (Malaysia)  
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

### Policy details

Policyholder name	ONG SENG LOON	Certificate number	GA352264 / 1
Cover	Comprehensive	Chassis number	FD21403887
Plan name	Essential	Engine number	K20A5824018
RCD applicable	0%		
Vehicle registration number	SJP3157J		
Period of insurance	from 10/05/2018 to 09/05/2019 (both dates inclusive)		
Finance loan company	KENSO LEASING PTE LTD		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder
- (b) Any person who is driving on the Policyholder's order or with their 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.

### Limitation 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, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.  
 \* Limitations rendered inoperative by Section 5 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 800.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorized Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

### Additional clauses & endorsements to your policy

Nil

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

AXA Insurance Pte Ltd

Authorized signature

### Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189). The Premium Warranty Clause requires the premium to be paid in full within a specific period falling which there would be no liability under the policy, renewal certificate, endorsement etc.

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 26 Dec 2018 / 10:29:46

Receipt Date/Time : 26 Dec 2018 / 10:29:46

## Tax Invoice/Receipt

Receipt No. : ITNET-00000-181226-000766

Previous Receipt No. :

### S/N Item Description/

Business Transaction Reference  
No.

Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
-------------------------------	------------------------	------------------------------

Result of Insurance Enquiry - SJY8477E

As at 23 Dec 2018/22:00:00

Insurance Co: AXA INSURANCE PTE LTD

Insurance Co: LIBERTY INS P L

1 Insurance Enquiry - SJY8477E

Enquiry Fee

20181226102900361460

7.00	0.49	7.49
------	------	------

Sub-Total

7.00	0.49	7.49
------	------	------

Total Before Rounding

7.00	0.49	7.49
------	------	------

Rounding Difference

0.04

Total Amount Payable

7.45

Paid By

xxxxxxxxxxxx4633 Credit Card:  
Visa/MasterCard

7.45

Total

7.45

Cash Change

0.00

Tendered Amount

7.45

Excess Refundable Amount

0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF

> Back to OneMotoring

## Enquire Road Tax Payable / Prerequisite(s) To Fulfil

### Please Note :

- The information contained herein is correct as at 24 Dec 2018.

#### Vehicle Particulars

Vehicle No.:	SJP3157J
Current Road Tax Expiry Date:	25 Jun 2019
New Road Tax Start Date:	26 Jun 2019
New Road Tax Expiry Date:	25 Dec 2019

#### Prerequisites (Updating of records may take about 3 working days)

Sufficient Insurance Coverage :	No
Vehicle Inspection Required :	Yes

#### Net Road Tax Amount

Amount  
(S\$)

726.00

726.00

Road Tax Amount:

Nett Road Tax Amount:

Amount Payable

Amount Before GST  
(S\$)

GST Amount  
(S\$)

Amount After GST  
(S\$)

Nett Road Tax  
Amount: 726.00

726.00

Total Amount  
Payable

726.00

#### Late Renewal Fees Payable From

Late Renewal Fees  
(S\$)

Total Amount with  
Late Renewal Fee  
(S\$)

26 Jun 2019 30.00

756.00

26 Jul 2019 80.00

806.00

09 Sep 2019 100.00

826.00

26 Sep 2019 250.00

976.00

Previous

OK

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 7306G

### Vehicle Details

Vehicle No.: SJP3157J  
Vehicle to be Exported: No  
Intended Deregistration Date: 27 Dec 2018  
Vehicle Make: HONDA  
Vehicle Model: CIVIC TYPE-R 2.0 M/T ABS D/AIRBAG 2WD  
Primary Colour: White  
Manufacturing Year: 2008  
Engine No.: K20A5824018  
Chassis No.: FD21403887  
Maximum Power Output: 165.0 kW (221 bhp)  
Open Market Value: \$28,449.00  
Original Registration Date: 26 Jun 2008  
First Registration Date: 26 Jun 2008  
Transfer Count: 6  
Actual ARF Paid: \$28,449.00

### Intended PARF Rebate Details

PARF Eligibility: Forfeited  
PARF Eligibility Expiry Date: -  
PARF Rebate Amount: \$0.00

### Intended COE Rebate Details

COE Expiry Date: 31 May 2028  
COE Category: B - Car (1601cc & above)  
COE Period(Years): 10  
PQP Paid: \$38,712.00  
COE Rebate Amount: \$36,495.00  
**Total Rebate Amount: \$36,495.00**

The information contained herein is correct as at 24 Dec 2018

OK



**TeamWork Garage Pte Ltd**  
 53 Ubi Avenue 1 #01-23/24 Spore 408934  
 Paya Ubi Industrial Park  
 Tel : 6844 2475 Fax : 6844 2474  
 E-mail : [claims@teamworkgarage.com](mailto:claims@teamworkgarage.com)  
 GST registered number : 201015366H

## PROFOMA INVOICE - PI-1584

**ONG SENG LOON**  
 C/O 53 Ubi Avenue 1 #01-24  
 Paya Ubi Industrial Park  
 Singapore 408934

Date : 27-Feb-19  
 Vehicle number : SJP3157J  
 Make Model : HONDA TYPE-R  
 Accident date : 23-Dec-18  
 Reference number : 1812-34

Description		Amount SGD\$
Inclusive of supplying parts, labour, panel beating and spray painting		
Lump sum repair	:	6,100.00
7% GST	:	427.00
Grand total	:	6,527.00
Singdollars: SIX THOUSANDS FIVE HUNDRED AND TWENTY SEVEN DOLLARS ONLY		



Teamwork Garage Pte Ltd

# K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park  
Singapore 408934  
Tel: 6844 5938 Fax: 6285 5228  
Email: kntcars@gmail.com  
Itz Reg. No.: 53208965X

## VEHICLE RENTAL AGREEMENT

NO.: KT-03864

Veh. No.: SJP3157T	Replace Veh. No.: SKU5551P
Veh. M / M: Honda Type-R	Replace Veh. M / M: NISSAN SYLPHY

HIRER'S PARTICULAR		<input type="checkbox"/> SAME AS HIRER DRIVER'S PARTICULAR	
Name: CNG SENG LOON		Name: JONATHAN ONG SWEET HOON	
Address: BIK 262 Serangoon Central Drive #02-87 S(550262)		Address: BIK 262 Serangoon Central Drive #02-87 S(550262)	
IC: S13973066	D.O.B:	IC: S92199174	D.O.B: 9/6/1992
Contact: 96815165	Pass Date:	Contact: 93396096	Pass Date: 19/8/2011

	A - ACCIDENT	Hirer's acceptance
	C - CRACKED	
	D - DENTS	Driver's acceptance
	S - SCRATCHES	

RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	15/11/2019		Date In	21/1/2019	
Time Out	12:45		Time In	5PM	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES					PETROL / DIESEL LEVEL					
Daily	@ \$	120	<u>7</u> Days @ \$	840	OUT	E	¼	½	¾	F
Weekly	@ \$		_____ Wks @ \$							
Monthly	@ \$		_____ Mth @ \$		IN	E	¼	½	¾	F
Hours	@ \$		_____ Hrs @ \$							
*Inclusive of additional charges (if any)			Amt payable* \$	840	Petrol Charges		YES	NO	AMT: _____	
					CDW		YES	NO	AMT: _____	
Payment: <input type="checkbox"/> CASH <input type="checkbox"/> NETS <input type="checkbox"/> CHQ <input type="checkbox"/> VISA <input type="checkbox"/> MAST					Security Deposit		YES	NO	AMT: _____	
Bank / Cheque No.:					Advance Payment		YES	NO	AMT: _____	

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tender accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true and accurate.

### IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)

- Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- In view of all accident, the hirer will bear the full responsibility for the SGD\$3,500/- excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT	
 Signature of hirer / driver (company stamp if any) X	 For and on behalf of K & t CARS (authorised signature only)

# K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934  
Tel: 6844 5938 Fax: 6285 5228 Email : kntcars@gmail.com  
Biz Reg. No.: 53208965X

No.: 2756

## OFFICIAL RECEIPT

Date: \_\_\_\_\_

Received from ONG SENG LOON

The Sum of Dollars EIGHT HUNDRED AND FORTY DOLLARS

Being payment of SKUDJIC NISSAN SYLPHY 15/1/2019 - 21/1/2019

S 840

K & t Cars

Cheque No.: \_\_\_\_\_



Authorised Signature

# CL APPRAISER PTE LTD

24 Peshurst Place, Singapore 556440  
Email: [clappraiser@yahoo.com](mailto:clappraiser@yahoo.com) Hp: 9068 8689 Fax: 6452 9783  
Reg No: 201000228E

## INVOICE

Ong Seng Loon  
C/o: Teamwork Garage Pte Ltd  
53 Ubi Avenue 1 #01-24  
Paya Ubi Industrial Park, Singapore 408934

Invoice No: CL/190119  
Ref No: TWG/01/1905/TP  
Date: 28 January 2019

### DESCRIPTION

### AMOUNT

#### OUR SERVICE FEE CHARGES:

- SURVEY INSPECTION FOR VEHICLE NO. SJP 3157 J
- RESURVEY INSPECTION
- DIGITAL PHOTOGRAPHS SERVICES  
(INCLUSIVE OF STORAGE AND SUBMISSION OF DIGITAL PHOTOGRAPHS)
- TRANSPORTATION

**GRAND TOTAL**

**SS 579.00**

E & O. E

All cheque payment should be "Crossed" and made payable to "CL APPRAISER PTE LTD"

We shall be grateful if you could forward our payment at your early convenience.



CL Appraiser Pte Ltd

# CL APPRAISER PTE LTD

24 Peshurst Place, Singapore 556440  
Email: clappraiser@yahoo.com Hp: 9068 8689 Fax: 6452 9783  
Reg No: 201000228E

## VEHICLE INSPECTION REPORT

To: Ong Seng Loon  
C/o: Teamwork Garage Pte Ltd  
53 Ubi Avenue 1 #01-24  
Paya Ubi Industrial Park, Singapore 408934

Date : 28 January 2019  
Our ref : TWG/01/1905/TP

Accident Date : 23 December 2018  
Inspection Date : 15 January 2019  
Repairer Name : Teamwork Garage Pte Ltd  
53 Ubi Avenue 1 #01-24  
Paya Ubi Industrial Park, Singapore 408934

Type of Survey : Third Party

### PARTICULARS OF VEHICLE

Registration No : SJP 3157 J  
Make / Model : Honda Civic Type -R  
Chassis No : FD21403887  
Engine No : K20A5824018  
Year / Capacity : 2008 / 1998 cc  
Colour : White  
Mileage : 203566

### CONDITION OF TYRES

	Make	Size	Thread Balance	Rim
Front Nearside	: Bridgestone	225/45 R17	5 mm	Sport
Front Offside	: Bridgestone	225/45 R17	5 mm	Sport
Rear Nearside	: Bridgestone	225/45 R17	5 mm	Sport
Rear Offside	: Bridgestone	225/45 R17	5 mm	Sport

### GENERAL DESCRIPTION OF DAMAGE VEHICLE

The impact damages sustained on the vehicle at the time of inspection is on the n/s rear portion.  
(Details refer to the photographs attached)

Enclosed number of photographs: 34 copies

### REMARKS

This inspection was conducted entirely on a "WITHOUT PREJUDICE" basis  
and we have not given authorization and instruction to the repairer to proceed with the repair

### RECOMMENDATIONS

We have thoroughly inspected each and every item on the estimate against the physical damage found on the vehicle and we have listed the breakdown of our finding and our recommendation.

The repairer has agreed to undertake the job at a **Lump Sum of \$ 6,100.00** on a contractual basis.

Under normal circumstances, the repair period would be about 6 (Six) working days.

Vehicle Registration No: SJP 3157 J

Our Ref No: TWG/01/1905/TP

Qty	Description	Conditions	Repairer's Estimate	Revised Amount
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## SPARE PARTS - LIST ITEMS

1	Rear windscreen moulding	Intact	\$ 98.50	X	
1	Rear n/s door	Damage	\$ 985.00	\$ 985.00	/ 798
1	Rear n/s door rubber	Necessary	\$ 94.50	\$ 94.50	/
1	Rear bumper	Repair	\$ 785.00	X	
1	Rear n/s fender	Repair	\$ 886.50	X	
1	Rear n/s wheel hub c/w bearing	Damage	\$ 284.40	\$ 284.40	/ BT
1	Rear n/s shock absorber	Damage	\$ 398.60	\$ 398.60	/ BT
1	Rear n/s knuckle arm	Damage	\$ 390.40	\$ 390.40	/ BT
1	Rear n/s top arm	Damage	\$ 275.00	\$ 275.00	X NN
1	Rear n/s trailing arm	Damage	\$ 446.50	\$ 446.50	X NN
			<b>\$ 4,644.40</b>	<b>\$ 2,874.40</b>	
		Less 20%	\$ 928.88	\$ 574.88	1965.90
	<b>Total Cost - List Items</b>		<b>\$ 3,715.52</b>	<b>\$ 2,299.52</b>	- 20% 1572-72

## SPECIAL NETT ITEMS

1	Rear windscreen sealant	Intact	\$ 80.00	X	
1	N/s rocker panel side skirt	Damage	\$ 750.00	\$ 750.00	X R
1	Rear n/s door protector	Damage	\$ 450.00	\$ 450.00	X R
1	Rear bumper clip (1 set)	Necessary	\$ 45.00	\$ 45.00	X NN ✓
1	Rear n/s tyre (Depreciation)	Damage	\$ 450.00	\$ 225.00	X NN
1	Rear n/s sport rim	Damage	\$ 1,500.00	\$ 1,500.00	X NN R
	<b>Total Cost - Special Nett items</b>		<b>\$ 3,275.00</b>	<b>\$ 2,970.00</b>	

**Total cost of parts**

**\$ 6,990.52 \$ 5,269.52**

Vehicle Registration No: SJP 3157 J

Our Ref No: TWG/01/1905/TP

S/No	Description	Repairer's Estimate	Revised Amount
	<b>Total cost of parts c/f</b>	<b>\$ 6,990.52</b>	<b>\$ 5,269.52</b>

## LABOUR

1	To remove, refit, replaced damaged lamps and check up rear electrical wiring	\$ 80.00	\$ 50.00 / 30
2	To remove and refit inner garnishes, inner trim to assist repair.	\$ 150.00	\$ 120.00 X
3	To remove and refit rear undercarriage.	\$ 400.00	\$ 300.00 200/
4	To conduct wheel alignment.	\$ 150.00	\$ 120.00 60/
5	To remove and refit doors complete fittings and replace damaged parts, transfer all fittings to new door.	\$ 150.00	\$ 120.00 50/
6	To apply undercoating on repaired and replaced panel.	\$ 100.00	\$ 60.00 30/
7	To provide labour charges, workmanship to dismantle above damaged parts, repair including cut and weld ; re-align body structure and damaged consistent to the accident.	\$ 1,000.00	\$ 750.00 400/
8	To respray painting include polishing and waxing on the changed body parts, repaired portions where consistent to the accident.	\$ 1,200.00	\$ 880.00 600/

## **GRAND TOTAL**

<b>\$ 10,220.52</b>	<b>\$ 7,669.52</b>	1390
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2962-72  
 L/S - 2370-17  
 = 2400

4 days

Vehicle Registration No: SJP 3157 J

Our Ref No: TWG/01/1905/TP

The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a **Lump Sum Repair Contract of : S 6,100.00**

By accepting to carry out the repairs on a contract lump sum basis, the repairer has the discretion to replace the damaged parts with used, reconditioned or new parts, or to repair it to a roadworthy condition.

Note: The revised estimate was made from a visual inspection. Should there be any discrepancy or unseen damage / item in this survey, kindly notified the company within seven (7) from the date hereof. Otherwise, the revised amount shall be deem to be valid.

**Disclaimer**

*The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicle and/or other accident in other legal proceedings.*

**C L APPRAISER PTE LTD**



Cheong K. H  
Automotive Appraiser

## 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	24/12/2018 12:12
Date Of Accident	23/12/2018 22:00
Exact Location Of Accident	BLK 576 WOODLANDS DRIVE 16
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJP3157J
Insured/Policyholder	
Name Of Registered Owner	ONG SENG LOON
NRIC No	S1397306G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96815165
Alternative Phone No	OTHERS-96815165
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC-2.0 TYPE-R (M)
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA352294/1
Cover Note Number	
Driver	
Name of Driver	JONATHAN ONG SWEE HEAN
NRIC No	S9219917G
Date Of Birth	09/06/1992
Occupation	INDOOR
Date Of Driving Pass	19/08/2011
Driving Experience	7 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93396096
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 262 SERANGOON CENTRAL DRIVE #02-87 SINGAPORE
Postcode	550262
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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.	YES
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 THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

#### 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	SJY8477E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HE XIAOHUA
NRIC/Passport Number	S8584822D
Contact Number	
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 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, dispose 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:

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

	<p><b>Vehicle No</b></p> <p>A - SJ03167J</p> <p>B - SJY 8497E</p>
<p>DESCRIBE CIRCUMSTANCES OF THE ACCIDENT</p>	<p><b>Legend</b></p> <p> A Vehicle</p> <p> B Bike</p>

I was parked at the rubbish chute waiting for my girlfriend to come down. While I was waiting, suddenly I felt an impact at the rear portion of my vehicle. When I got down of my vehicle, I realised vehicle B had collided onto the rear portion of my vehicle. The driver of vehicle B had wrote a statement stating that he had collided onto my vehicle.

### DECLARATION

I/We declare the foregoing particulars are true in every respect. Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

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.:

Witness, Sketch Plan #2

# Common Statement

## ACCIDENT STATEMENT (Part I)

Reporting Centre: Progressive Automotive Pte Ltd

This is NOT an admission of blame / liability, but a summary of incident and facts which will speed up the settlement of claims

1 Date of accident: 23/12/2015 10pm  
 2 Exact location of accident: Woodlands Drive 1b Block 576  
 To be signed by BOTH drivers  
 3 Signature even if slight  
 No ☒ Yes ☐  
 4 Material damage:  
 To vehicle other than vehicle A and B: No ☐ Yes ☒  
 To objects other than vehicles: No ☐ Yes ☐  
 5 Witness' name, address and tel no. (to be undertaken if vehicle is passenger in vehicle A or vehicle B)  
 Vehicle Value: No ☒ Yes ☐

Registration No. (VEHICLE A) SJP357J  
 6 Insured / policyholder (see insurance card)  
 Name: ONG SENG LOON  
 Address: Block 262 Serangoon Central Drive #02-41  
 HRC / Passport no. S13923066  
 Tel no. (from then tel type) 96815165  
 7 Vehicle  
 Make, type: Honda Civic type-R  
 8 Insurance company: AXA  
 Does the policy cover damage to vehicle A? No ☐ Yes ☒  
 Policy No. GA35229411  
 9 Driver: ☐ Same as Owner  
 Name: JONATHAN ONG SNEE  
 Address: HEAN  
 HRC / Passport no. S42199199  
 Class of licence: 3  
 Gender: Male ☒ Female ☐

### 10 CIRCUMSTANCES

11 Tick (X) in each of the (a) - (m) boxes applicable to your vehicle

- (a) Collision
- (b) Collision with object
- (c) Collision with stationary object
- (d) Collision with moving vehicle
- (e) Collision with pedestrian
- (f) Collision with property
- (g) Collision - Change/Over lane
- (h) Collision - Cross boundary
- (i) Collision - Head on collision
- (j) Collision - Head to Rear
- (k) Collision - Rear/Over time
- (l) Collision - Queueing Stop at traffic light
- (m) Collision - Roadwork
- (n) Collision - Wrong Way on Highway
- (o) Collision - Roadside
- (p) Collision - Wrong Way on Highway
- (q) Collision - Roadwork
- (r) Collision - Roadwork
- (s) Collision - Roadwork
- (t) Collision - Roadwork
- (u) Collision - Roadwork
- (v) Collision - Roadwork
- (w) Collision - Roadwork
- (x) Collision - Roadwork
- (y) Collision - Roadwork
- (z) Collision - Roadwork

Registration No. (VEHICLE B) SJY8477F  
 12 Insured / policyholder (see insurance card)  
 Name: HE XIAOHUA  
 Address: Block 576 Woodlands Drive 1b #14-512 B130476  
 HRC / Passport no. S85848229  
 Tel no. (from then tel type) 91096803  
 13 Vehicle  
 Make, type: Mitsubishi Lancer  
 14 Insurance company: ☐ C ☐ TPT ☐ IPO  
 Does the policy cover damage to vehicle B? No ☐ Yes ☐  
 Policy No. (if available)  
 15 Driver (See driving licence) (if different from insured B above)  
 Name:   
 Address:   
 HRC / Passport no.   
 Class of licence   
 Gender: Male ☐ Female ☐

16 State TOTAL number of boxes marked with a cross

17 Sketch of accident when impact occurred

18 Draw the road: 1. layout of the road - 2. the direction of vehicles A and B with arrows - 3. the position of the impact - 4. the road signs - 5. position of the objects or road

19 Indicate the point of initial impact with an arrow (→)

20 Indicate the point of initial impact with an arrow (→)



REFER TO ATTACHED

21 Visible damage to vehicle A

22 Visible damage to vehicle B

23 Only remarks

24 Signature of driver A

25 Only remarks

A

B

26 In this block of space, as the extent of damage to property other than to vehicles A and B, give information proper

27 Do not enter anything in the statement after signing. Subsequently, each driver should take one copy.

28 For driver's Individual Statement (Part II) see annex - 2

# Individual Statement

Reporting Centre Progressive Automobiles Pte Ltd

INDIVIDUAL STATEMENT (Part II)					
To be completed and submitted within 24 hours to your insurer or sales or authorised workshop (Use a separate sheet of paper where necessary)					
Insured	1. Description (if more than one, state all)				
	2. Vehicle registration no. <u>SJP153 J</u>		3. If commercial vehicle, state permit/carrying capacity		
	3. Is driver the owner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		4. State the vehicle number and name of insurer of driver's own vehicle (where applicable)		
	4. Exact purpose for which vehicle was being used at time of accident <input checked="" type="checkbox"/> Private use <input type="checkbox"/> Commercial use <input type="checkbox"/> Hire & reward <input type="checkbox"/> Private hire				
	5. Is the vehicle still in use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Of which vehicle are you the owner?	6. Are you claiming under your own insurance policy for repair to your vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	7. If no, state action to be taken: <input type="checkbox"/> Third Party <input type="checkbox"/> Reporting Only <input checked="" type="checkbox"/> Third Party (Own Workshop)				
	7. Date of birth: <u>09/06/1992</u> Occupation: <u>Indoor</u> Date of license pass: <u>19/08/2011</u>				
	8. Have details of any pre-existing impairment of sight or hearing and of any other disability				
	9. Full details of all driving convictions including pending prosecutions in the last 36 months				
Driver or person in charge of vehicle at the time of accident (including insured)	10. Name(s), address(es) and address(es) age(s)				
	11. Injured material				
	12. If vehicle occupants, state in which vehicle				
	13. Were seat belts being worn?				
	14. Were injured conveyed to hospital by ambulance?				
Injured persons	15. Name(s) and address(es) of owner(s)				
	16. Vehicle registration no. or details of property				
	17. Nature of damage				
	18. Insurer's name and address (if known)				
	19. Was the accident reported to the Police? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Police action	20. If yes, please state which Police station				
	21. Was notice of intended prosecution given? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	22. If yes, against whom?				
	23. Weather conditions: <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Rain <input type="checkbox"/> Other				
	24. Road surface: <input checked="" type="checkbox"/> Wet <input type="checkbox"/> Dry <input type="checkbox"/> Other				
Accident details	25. Speed of vehicle: A <input type="checkbox"/> km/hr B <input type="checkbox"/> km/hr				
	26. What warnings were given by driver or other party?				
	27. Were street lights illuminated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	28. What lights were displayed on your vehicle/the other vehicle(s)?				
	29. If your vehicle is commercial, state weight of load carried at time of accident				
Declaration	30. State how accident happened, width of road, speed limits, etc (Refer to attached)				
	31. State number of Passengers (including Driver)				
	32. I/We declare the foregoing particulars are true in every respect				
	33. Policyholder's signature: <u>[Signature]</u> Date: <u>                    </u>				
	34. Driver's signature (if driver is not the policyholder): <u>[Signature]</u> Date: <u>                    </u>				



redefining / insurance

AXA Insurance Pte Ltd  
 1800 680 4888 (Within Singapore)  
 (65) 6880 4888 (International)  
 (65) 6880 4740  
 customer.care@axa.com.sg  
 www.axa.com.sg

## Certificate of Insurance

account number  
 05379

Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990 - Road Transport Act, 1987 (Malaysia)  
 Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysia)

### Policy details

Policyholder name	ONG SENG LOON	Certificate number	GA352294 / 1
Cover	Comprehensive	Chassis number	FD21403887
Plan name	Essential	Engine number	K20A5824018
RCD applicable	0%		
Vehicle registration number	SRP1157J		
Period of insurance	from 10/05/2018 to 09/05/2019 (both dates inclusive)		
Finance lease company	KENSO LEASING PTE LTD		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder  
 (b) Any person who is driving on the Policyholder's order or with their 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.

### Limitation 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, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

\* Limitations rendered inoperative by Section 5 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 800.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed Authorized Driver
2. S\$500 for declared Young and Inexperienced Driver
3. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

### Additional clauses & endorsements to your policy

Nil

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

AXA Insurance Pte Ltd

Authorized signatory

### Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189). The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903512M)  
 8 Shenton Way, #24-01, AXA Tower,  
 Singapore 068811  
 Customer Centre, #B1-01

1 of 3 \*

DRIVER NRIC & LICENSE Pg. 1

**SINGAPORE ARMED FORCES**  
**IDENTITY CARD**

Name  
**JONATHAN ONG SWEET HEAN**

NRIC No  
**S9219917G**

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

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

**JONATHAN ONG SWEET HEAN**

DOB: 09 Jun 1992  
EXP: 19 Aug 2015

001992934C

NRIC No/Colour  
**S9219917G/ PINK**

Race  
**CHINESE**

Date Of Birth  
**09/06/1992**

Service Status  
**REGULAR**

Address  
**BLK 352 BERANGOOD CENTRAL DRIVE  
#02-67 SINGAPORE 550262**

Special Group  
**O (M)**

Country Of Birth  
**SINGAPORE**

Military Rank Status  
**MILITARY EXPERT**

Sex  
**M**

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

**Class 2** Motor Cars < 3500kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 3500kg

**EFFECTIVE DATE**  
**19 Aug 2011**


**NP 425A**


**License No: S9219917G**

STATEMENT BY TP DRIVER Pg. 1

I, HENRY HUA, REVERSED AND HIT INTO  
PARKED CAR SSP 31573 WONTA CIVIC TYPE R  
WITH MI CAR SS48477E MITSUBISHI LANCER.  
AT TIME 12:03 PM 23 DEC 2018 AT WOODLANDS DR 16  
FLOR 576.

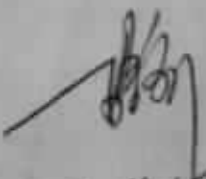
THE PARKED CAR SSP 31575 WITHOUT PUT ON  
THE HAZARD LIGHT.

  
SS48477E  
93396096

  
SS48477E  
91096803

AUTHORIZATION LETTER

I, Ong Seng Loon, S13973064 hereby  
authorised, Jonathan Ong Swee Hean, S92199174  
to proceed with the claims and insurance.  
for SJP3157J

  
Ong Seng Loon

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



## 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	27/12/2018 17:34
Date Of Accident	23/12/2018 22:00
Exact Location Of Accident	BLK 576 WOODLANDS DR 16 RUBBISH CHUTE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJY8477E
Insured/Policyholder	
Name Of Registered Owner	HE XIAOHUA
NRIC No	S8584822D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91096803
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER 1.6 GLX AUTO ABS
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA354610/1
Cover Note Number	17/05/2018 TO 16/05/2019
Driver	
Name of Driver	HE XIAOHUA
NRIC No	S8584822D
Date Of Birth	27/07/1985
Occupation	INDOOR
Date Of Driving Pass	05/01/2016
Driving Experience	2 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91096803
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	NOEMAIL

Address	APT BLK 576 WOODLANDS DR 16 #04-512
Postcode	730576
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 - MAJOR/MINOR RD
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	1
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?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACH POLICE REPORT NO. T/20181224/2077 DD.24/12/2018

#### 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	SJP3157J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JONATHAN ONG SWEE HEAN
NRIC/Passport Number	S9219917G
Contact Number	93396096
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

ACK

Vehicle: SJY  
8477E

- 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.

Anthe 27/12/14

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



Reporting Centre Personnel's Signature  
Name: Andy  
NRIC/FIN No.: 2712110

Sketch Plan Pg. 2

Date of accident: 28/12/2018 Time: 2200 HRS Location: 576 Woodlands Drive 16 Rubbish chute  
 My Vehicle A: 87Y 8477 E Vehicle B: 87P 3157 J Vehicle C: /

SKETCH PLAN

A: 87Y 8477 E  
 B: 87P 3157 J



576 Woodlands Drive 16 Rubbish chute

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☒ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop: Supreme Auto Service Pte Ltd

Email address: admin@supreme.sg

& myself:

Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

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 / Ah Lim Motor's Signature

Name:

NRIC/FIN No.:



AH LIM MOTOR COMPANY


**SINGAPORE  
POLICE FORCE**


T/20181224/2077

1 of 4

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

Report No. T/20181224/2077

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/12/2018 15:09		Vide Report No.:		Station Diary No.: 97
<b>Name of Informant:</b> HE XIAOHUA				
<b>Address:</b> APT BLK 576 WOODLANDS DRIVE 16 #04-512 SINGAPORE 730576				
<b>ID Type / ID No.:</b> NRIC NO / S8584822D		<b>Contact No.:</b> Home/Office: Mobile: 91096803		
<b>Nationality:</b> SINGAPORE CITIZEN		<b>Email:</b>		
<b>Sex:</b> Female	<b>Age:</b> 33	<b>Date of Birth:</b> 27/07/1985	<b>Type of Informant:</b> Driver	
<b>Race:</b> Chinese		<b>Language:</b> English	<b>Institution / School Name:</b>	
<b>Occupation:</b> TRAINER		<b>Driving Licence Information:</b> Class: 3A Date of Expiry:		

<b>Type of Accident:</b>	Non-Injury	<b>Drink Drive:</b> No	<b>Date/Time of Accident:</b> 23/12/2018 22:00	<b>Type of Location:</b> RUBBISH CHUTE
<b>Location:</b> Along Road 1 WOODLANDS DRIVE 16  BLK 576 WOODLANDS DR 16 RUBBISH CHUTE				
<b>Weather:</b>		<b>Road Surface:</b>	<b>Road Speed Limit:</b>	
<b>Traffic Flow:</b>		<b>Traffic Control:</b>	<b>Traffic Volume:</b>	
<b>Type of Collision:</b> Moving Vehicle Against - Parked Vehicle				<b>Anyone conveyed by ambulance:</b> No

SJP3157J	Car				Slightly Damaged	0
SJY8477E	Car	MITSUBISHI	LANCER 1.8 GLX AUTO ABS AIRBAG 2WD 4DR	Silver	Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20181224/2077

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

2 of 4

Report No. T/20181224/2077

## CONTINUATION OF REPORT

SJY8477E	AXA INSURANCE SINGAPORE PTE LTD	GA354610	17/05/2018	18/05/2019
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Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	JONATHAN ONG SWEE HEAN	ID No.	S9219917G
Related Vehicle	SJP3157J (Car)	Contact No.	93396096
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
Name	HE XIAOHUA	ID No.	S8584822D
Related Vehicle	SJY8477E (Car)	Contact No.	91096803
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 23/12/2018 at about 2200hrs, I wanted to parked my vehicle bearing SJY8477E on the lot of the rubbish chute of Blk 578 Woodlands Dr 16 to pick my children up. As I was reversing, I suddenly heard a sound and found out that I collided onto a car bearing SJP3157J which was parked at the said lot. I did not see the car at it was dark and the other car's headlight was not turned on.

As a result of the accident, my car suffered small scratches on left rear bumper. Meanwhile, the car suffered small scratches on the left rear door. No one was injured. No police was at scene.

Initially, the other driver wanted me to pay S\$600/- privately for the damages however I felt that the cost should be borne by both parties as it was clearly stated that no parking is allowed at the said lot. Therefore I suggested that we settle the damages through our insurance companies and he agreed. I am making this report as I felt that it was wrong for the other driver to park at the said lot. That is all.



**SINGAPORE  
POLICE FORCE**



T/20181224/2077

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

3 of 4

Report No. T/20181224/2077

CONTINUATION OF REPORT



**SINGAPORE  
POLICE FORCE**



T/20181224/2077

4 of 4

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

Report No. T/20181224/2077

## 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: SN 136		Signature Of Informant:	
L / AHMAD OZUN SANI BIN ABDUL RAZAK			
Signature :			
Signature Of Interpreter: Not applicable		Date/Time: 24/12/2018 15:09	
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151		Classification Of Case:	
Authentication Stamp NP188			



redefining / insurance

AXA Insurance Pte Ltd  
 ☎ 1800 880 4888 (Within Singapore)  
 (65) 6880 4888 (International)  
 ☎ (65) 6880 4740  
 ✉ customer.care@axa.com.sg  
 🌐 www.axa.com.sg

account number  
 18139

## Certificate of Insurance

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960-Road Transport Act, 1987 (Malaysia)  
 -Motor Vehicles (Third-Party Risks) Rules, 1969 (Malaysia)

### Policy details

Policyholder name	HEXIADHUA	Certificate number	GA354610 / 1
Cover	Comprehensive	Chassis number	JMYSRCS3MAJ000415
Plan name	Essential	Engine number	431BKD4525
NCD applicable	0%		
Vehicle registration number	SJY8477E		
Period of Insurance	from 17/05/2018 to 16/05/2019 (both dates inclusive)		
Finance loan company	MAYBANK		

### Persons or classes of persons entitled to drive\*

- (a) The Policyholder  
 (b) Any person who is driving on the Policyholder's order or with their 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.

### Limitation 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, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

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

**EXCESS** Basic Own Damage Excess  
 Windscreen Excess

An Additional Excess is applicable as follows:

1. S\$500 for unnamed Authorised Driver
2. S\$500 for declared Young and Inexperienced Driver
3. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if you have chosen AXA Premium Workshops.

### Additional clauses & endorsements to your policy

Nil

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

AXA Insurance Pte Ltd

Authorised signatory

### Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189).  
 The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903512M)  
 8 Shenton Way, #24-01, AXA Tower,  
 Singapore 068811  
 Customer Centre, #B1-01

1 of 3

Policy Holder-Driver's Particulars Pg. 2



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. 88584822D

Name  
HE XIAOHUA  
何曉華

Race  
CHINESE

Date of Birth  
27-07-1982

Sex  
M

Country/Place of Birth  
CHINA

IC COLLECTION SLIP FOR NEW SINGAPORE CITIZEN

NRIC NO: 88584822D (PINK IC) FEES: \$10.00

NAME HE XIAOHUA

DATE OF ISSUE: 09/07/2018

REGISTRATION OFFICER: K Parameswari

DOCUMENTS ARE TO BE PRESENTED AT GRC CITIZENSHIP CEREMONY



Class 3A Motor cars without clutch pedals (A/C) with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight <= 2500kg

05 Jan 2018

NP 425A

License No 88584822D

88584822D

NRIC No: 88584822D

Nationality  
CHINESE

Date of Birth  
27-07-1982

APT BLK 518 WOODLANDS DRIVE 18  
#04-512  
SINGAPORE 730518

Policy Holder-Driver's Particulars Pg. 3



redefining / insurance

Date: 27/12/2018

To: Owner of Vehicle Number: SJY 84 TFC

The following has been advised to you via your workshop, Ah Lim Motor Co through their staff, Mei

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☐ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☐ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☐ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☐ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated waiting time for the spare parts to arrive is \_\_\_\_\_ . The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
- ☐ For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☐ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- ☒ Others Reporting only

Signed and acknowledge by:

Name and signature of policyholder/authorised driver

Name and signature of workshop personnel including company stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





# 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				
AXA INSURANCE PTE LTD		Ref : CS3/ASM18023223/Esd3e2-1		
C/O: SEAH ONG & PARTNERS LLP 36 ROBINSON ROAD #12-03 CITY HOUSESINGAPORE 068877		Date : 16-04-2019		
		Code : ASM		
<b>1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)</b>				
Insured Veh.	SJY 8477E	Veh. Inspected	SJP 3157J	
Policy No.	GA354610/1	Coverage (\$)	0.00	
Claim No.	19.26604 PD-O	Excess (\$)	0.00	
Assign From	XIN YI	Assign Date	13/03/2019	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HONDA CIVIC	c.c	1998	
Engine No.	HIDDEN	Year of Reg.	2008	
Chassis No.	FD21403887	Colour	WHITE	
Odometer	209533	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	225/45 R17	BRIDGESTONE	4 mm	
L/H Front Tyre	225/45 R17	BRIDGESTONE	4 mm	
R/H Rear Tyre	225/45 R17	BRIDGESTONE	4 mm	
L/H Rear Tyre	225/45 R17	BRIDGESTONE	4 mm	
<b>4. Description of Damages</b>				
THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. REPAIR CONDITION SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	23/12/2018	Inspection Date	11/04/2019	
Survey held at	TEAMWORK GARAGE PTE LTD 53 UBI AVENUE 1 #01-24 SINGAPORE 408934.			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>4 Working Days</b>		



# 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 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJP 3157J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR WINDSCREEN MOULDING	INTACT	98.50	-
1	REAR N/S DOOR	REPLACED	985.00	798.00
1	REAR N/S DOOR RUBBER	REPLACED	94.50	94.50
1	REAR BUMPER	REPAIRED SEE LABOUR	785.00	-
1	REAR N/S FENDER	REPAIRED SEE LABOUR	886.50	-
1	REAR N/S WHEEL HUB C/W BEARING	REPLACED	284.40	284.40
1	REAR N/S SHOCK ABSORBER	REPLACED	398.60	398.60
1	REAR N/S KNUCKLE ARM	REPLACED	390.40	390.40
1	REAR N/S TOP ARM	NOT NECESSARY	275.00	-
1	REAR N/S TRAILING ARM	NOT NECESSARY	446.50	-
	LESS 20% DISCOUNT		-928.88	-393.18
			3,715.52	1,572.72
<b>SPECIAL NETT ITEMS</b>				
1	REAR WINDSCREEN SEALANT (SN)	INTACT	80.00	-
1	N/S ROCKER PANEL SIDE SKIRT (SN)	REPAIRED SEE LABOUR	750.00	-
1	REAR N/S DOOR PROTECTOR (SN)	REPAIRED SEE LABOUR	450.00	-
1	SET REAR BUMPER CLIP (SN)	REPLACED	45.00	30.00
1	REAR N/S TYRE (SN)	NOT NECESSARY	450.00	-
1	REAR N/S SPORT RIM (SN)	REPAIRED SEE LABOUR	1,500.00	-
			3,275.00	30.00
<b>LABOUR</b>				
	TO REMOVE, REFIT, REPLACED DAMAGED LAMPS AND CHECK UP REAR ELECTRICAL WIRING.		80.00	30.00
	TO REMOVE AND REFIT INNER GARNISHES, INNER TRIM TO ASSIST REPAIR.	NOT NECESSARY	150.00	-
	TO REMOVE AND REFIT REAR UNDERCARRIAGE.		400.00	200.00
	TO CONDUCT WHEEL ALIGNMENT.		150.00	60.00
	TO REMOVE AND REFIT DOORS COMPLETE FITTINGS AND REPLACE DAMAGED PARTS, TRANSFER ALL FITTINGS TO NEW DOOR.		150.00	50.00
	TO APPLY UNDERCOATING ON REPAIRED AND REPLACED PANEL.		100.00	30.00

Report Ref No. CS3/ASM18023223/Esd3e2-1



## 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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO PROVIDE LABOUR CHARGES, WORKMANSHIP TO DISMANTLE ABOVE DAMAGED PARTS, REPAIR INCLUDING CUT AND WELD; RE-ALIGN BODY STRUCTURE AND DAMAGED CONSISTENT TO THE ACCIDENT. INCLUSIVE OF THE REPAIR OF REAR BUMPER, REAR N/S FENDER, N/S ROCKER PANEL SIDE SKIRT, REAR N/S DOOR PROTECTOR AND REAR N/S SPORT RIM.		1,000.00	400.00
	TO RESPRAY PAINTING INCLUDE POLISHING AND WAXING ON THE CHANGED BODY PARTS, REPAIRED PORTIONS WHERE CONSISTENT TO THE ACCIDENT.		1,200.00	600.00
			3,230.00	1,370.00
GRAND TOTAL			10,220.52	2,972.72
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,400.00

Report Ref No. CS3/ASM18023223/Esd3e2-1

CHEN TSUE YEE

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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