ASS. REC. BY:) REF: OS	FCI1900 8772/Asd3 Special instruction:
CWS From (Person): 81 WAYM of Estimated Cost:	FCI Detertime: 9.460m@ 1715/19
of Wiederhau - /	SIE9713Y Insured: SHC 7933B AUTHOLOTION Tel: G8441184
Policy No: Sum Insured: Make of Veh: (Client's Record)	Claim No: D19003267 MFSH Excess: D.o.A 4 5 20 6
CA / REV / REP. / REV 24 HRS up) Date/Time: 10-42am@ 1715 11 Person (Contacted: Vehicle IN JOUT
	Known we are pointing estimate from repaire

Resurrey Date/Time, File Return to? Date/Tirre, File Pass to? Part Prices Check: Oate: Survey Fee: 31/08/20 IN OUT Basic & Add. _S +RS, _SI Photos Preli. Report: Others Final Report: 2,90% 45

TOTAL



Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msftrstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

16-05-2019

Our Ref No. D19003267MFSH

Accident Date

14-05-2019

Claim Type. Third Party

Insured Vehicle

SHC7933B

Third Party Vehicle. SJE9713Y

Survey Location

13 KAKI BUKIT ROAD 4 BARTLEY BIZ CENTRE#03-29 & #03-30

Contact Person.

JENNY / SHU WEN

Contact No.

68441184/96572134

Fax No. 0

Survey Type

WITHOUT PREJUDICE:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

ACE AUTOLUTION PTE

Attention, NIL

Cc : TP Solicitor

LTD NA

TP Solicitor Fax No. NA

Officer Incharge

SITHARA

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

Shiau Chan (LKKAuto)

From:

Shiau Chan (LKKAuto)

Sent:

Tuesday, 21 May 2019 11:47 AM

To:

'CWS Motor Claims'; assignments

Cc:

'Sithara'; SUR

Subject:

RE: SURVEY ASSESSMENT - D19003267MFSH/1

Dear Sithara,

Please be informed that we have inspected the vehicle SJE 9713Y on 17/05/2019.

We are pending for estimate from repairer.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>siewsc@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto)

Sent: Friday, 17 May 2019 10:47 AM

To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Sithara' <Sithara@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>

Subject: RE: SURVEY ASSESSMENT - D19003267MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

Best Regards,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims [mailto:cwsmotorclaims@msfirstcapital.com.sg]

Sent: Friday, 17 May 2019 9:46 AM To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg>; Sithara < Sithara@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D19003267MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

> Back to OneMotoring

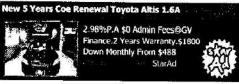
Enquire PARF/COE Rebate for Registered Vehicle

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Owner ID Type:	Singapore NRIC				
Owner ID:	0087G				
	1000				
Vehicle No.:	SJE9713Y				
Vehicle to be Exported:	Yes				
Intended Deregistration Date:	17 May 2019				
Vehicle Make:	HONDA				
Vehicle Model:	FIT 1.3G A				
Primary Colour:	Red				
Manufacturing Year:	2008				
Engine No.:	L13A4068751				
Chassis No.:	GE61062133				
Maximum Power Output:	73.0 kW (97 bhp)				
Open Market Value:	\$11,957.00				
Original Registration Date:	14 May 2008				
First Registration Date:	14 May 2008				
Transfer Count:	1				
Actual ARF Paid:	\$6,002.00				
PARF Eligibility:	Forfeited				
PARF Eligibility Expiry Date:	A 1. 27 .				
PARF Rebate Amount:	\$0.00				
COE Expiry Date:	30 Apr 2028				
COE Category:	A - Car (1600cc & below)				
COE Period(Years):	10				
PQP Paid:	\$38,655.00				
COE Rebate Amount:	\$34,606.00				
Total Rebate Amount:	\$34,606.00				
e information contained herein is correct as at 17 May 2019					

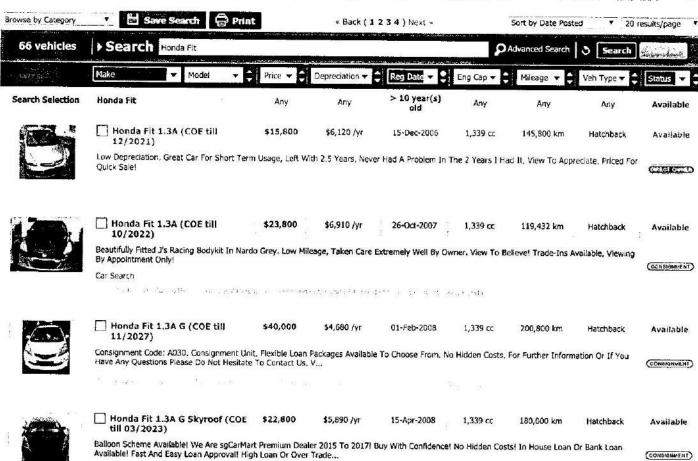
ОК













Is your COE expiring? Let us help you renew it!

Getting your COE renewed is easy, fast and affordable, We'll help you renew your COE and get a loan for it. Get the cheapest loan in town and an approval in 2 days without effort! Enquire today.



Honda Fit 1.3A GF Skyroof \$45,800 \$5,160 /yr 06-May-2008 1,339 € 95,000 km Hatchback Available (COE till 03/2028)

Market State of the property

100% Loan Approval With Low Interest Ratel Interest As Low As 3.18%, Definitely Not The Cheapest But For Sure One Of The Better Unit, Quality Is The Key For COE Cars Not Price! High Paper Value Of \$35...



Honda Fit 1.3A G (COE till \$48,000 \$5,310 /yr 30-May-2008 1,339 cc 108,000 km Hatchback Available 05/2028)

Honda's Signature Compact And Nimble VTEC Hatchback In Factory Black Exterior And Red On Black Leather Upholstery, Buy With A Peace Of Mind. Always Parked Under Shelter. Regularly Serviced At Reputabl...

Monster Motors Pte Ltd

(CONSIGNMENT)



Honda Fit 1.3A G (COE till 05/2023)

\$24,800

Residu Oz Mills 2 13 - The Colorador 2000 total (2) tompoly assign media in Figure 1900;

\$6,140 /yr

31-May-2008

1,339 cc

85.000 km

Hatchback

Available

MVE 19063062 / VAC - Bukit Batok EATRY DATE & TIME: 15/05/2019 11:55 SUBMITTED BY: SUSAN SEAH SOH ENG

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 witholding of material facts may allow insurance companies to repudiate policy fiability.
- 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

	ACCIDENT STATEMENT
Date Of Report	15/05/2019 11:55
Date Of Accident	14/05/2019 19:30
Exact Location Of Accident	JURONG WEST ST 92 CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJE9713Y

Insured/Policyholder

Name Of Registered Owner

NURHIDAYAH BINTE MOHAMED AKBAR

NRIC No

S8700087G

Email Address

NOEMAIL

Mobile Phone No

(LOCAL) +65-90282386

Alternative Phone No

OFFICE-90282386

Vehicle Particulars

Manufacturer

HONDA

Model

FIT-1.3 (A)

Exact Purpose for which vehicle was being used at

time of accident

NO

Are you claiming under your own insurance policy for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5099934812-01 (CLASSIC)

Cover Note Number

Driver

Name of Driver NURHIDAYAH BINTE MOHAMED AKBAR

NRIC No S8700087G Date Of Birth 02/01/1987 Occupation **INDOOR** Date Of Driving Pass 18/04/2008

11 YEARS AND 0 MONTHS **Driving Experience**

Gender

FEMALE

Mobile Number

(LOCAL) +65-90282386

Fax Number

Contact Number

OFFICE-90282386

EMail Address

NOEMAIL

837 JURONG WEST STREET 81

#12-79

.code

jS

\$640837

as driver an employee of the Insured's Company NO

f No, Relationship of the Driver with the Insured

PAID DRIVER

Vehicle Registration Number of Driver's Own

Vehicle

SHOLE

-

Insurance Company of Driver's Own Vehicle

8

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?

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

I have been approached by unknown person(s soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

NANYANG N.P.C

Police Station Address

ROAD: 2 JURONG WEST AVE 5, POSTCODE: 649482, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-7929999 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE SEE ATTACHED POLICE REPORT

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO FROM ANOTHER VEHICLE

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC7933B

Vehicle Make/Model/Colour

CITYCAB

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)

Lunderstand, 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)
 - (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, involces, 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.

15 MAY 2019

Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg
Reporting Centro Personnel's Signature

IDAC BUKIT BATOK (7AC) 511 Built Batok Street 23

Policyholder's Signatural
Date & Time:

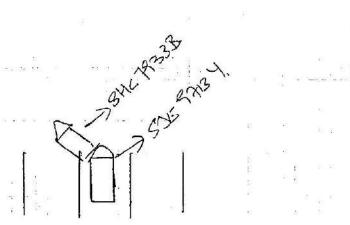
Driver's Signature

(If driver is not the policyholder)

Date & Time:

Name: NRIC/FIN No.:

SKET	CH	PI	Δ	N



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

	<u> </u>
	/
	<u> </u>
	No.
	10%
	*
and one	/
——————————————————————————————————————	
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×C.	
T	

DECLARATION

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

15 MAY 2019

TDAC BURIT BATOR (VAC)
511 Bukit Batok Street 23
Singapore 650505
Tel: 6560 3312 Fax: 6569 0722
Einail: vachb@singnet.com.sg

Policyholder's Signature Date & Time: 1516

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

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





1 of 3

Report No. T/20190514/2191

plice Station Of Origin: Janyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

REPORT OF A TRAFFIC ACCIDENT

14/05/2019 22:47			Vide Report No.:	Station Diary No.: 153	
Informan	t's Partic	ulars			
Name of Informant: NURHIDAYAH BINTE MOHAMED AKBAR			Address: APT BLK 837 JURONG WE SINGAPORE 640837	EST STREET 81 #12-79	
ID Type / ID No.: NRIC NO / S8700087G			Contact No.: Home/Office: Mobile: 90282386		
Nationalit SINGAPO	y: DRE CITIZ	ĽEN	Email:		
Sex: Age: Date of Birth: Female 32 02/01/1987			Type of Informant: Driver		
Race: Malay			Language	Institution / School Name:	
Occupation: OPERATION EXECUTIVE			Driving Licence Information Class:	Date of Expiry:	

General Information of the Accident				2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 14/05/2019 19:30	Type of Location: Car Park
At the open c	ST STREET 92 arpark in between of Blk			
Weather: Raining		Road Surface: Wet	F	Road Speed Limit:
Traffic Flow: Two Way			Traffic Volume:	
Type of Collis Moving Vehic	sion: ele Against - Parked Vehic	cle		Anyone conveyed by ambulance: No

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHC7933B	Yellow Comfort Taxi					0
SJE9713Y	Car	HONDA	FIT 1.3G A	Red	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJE9713Y	NTUC Income Insurance Co-Operative Limited	5099934812-01	14/05/2019	13/05/2020





2 of 3

Report No. T/20190514/2191

rice Station Of Origin: anyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

CONTINUATION OF REPORT

Any Pedestrian I	nvolved: No					A CONTRACTOR OF THE STREET
No. of Pedestrian	ns Injured: NIL		Use of Pe	destria	Cross	ing: NA
Driver		. Art.	7 030 011 C	uestra	Closs	ing. NA
Name	NURHIDAYAH BIN	TE MOHAN	MED AKBAR	ID No		S8700087G
Related Vehicle	NIL		Conta	ict No.	90282386	
Hospital/Clinic	NIL			Class Drivin Licend Expire	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	- (Karana)	Date Disc		NIL	
No. of Days grant	ed Medical Leave	NIL	Degree of		NIL	

Brief Details.

On 14/05/2019 at about 2030hrs, I discovered a note was placed on my windscreen. The note state as follows: "Taxi reverse hit you. Call me at 96417443 for footage", Dixon. I made a checked on my vehicle. red Honda Fit, SJE9713Y and discovered dented front left bumper and cracked on my right rear bumper. I parked my vehicle in a lot at open space carpark in between of Blk 928 and Blk 929 Jurong West Street 92 at about 1845hrs and everything was in tact. I called up Dixon and asked him what happen. He told me everything about the hit and run accident and sent me the footage. Dixon vehicle has a in build camera and it recorded the whole accident. After viewing the footage, I saw a yellow city cab, SHC7933B hit my parked vehicle while reversing. The taxi driver did not stopped and leave a note however he just went off even after Dixon horned at him. There is no CCTV at the carpark.





3 of 3 Report No. T/20190514/2191

olice Station Of Origin: lanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

MPORTANT: Please/attach a copy of your vehicle	e's Insurance Certificate to this report. If you don't have
the certificate with yo⊎now, please fax a copy to 6	55474885 stating the report number as reference.
MA ->	
Signature Of Officer Recording The Report:	Signature Of Informant:

J/ Staff Sgt TITY SUMARNI BINTE ABDUL GHANI Signature Of Interpreter:

Not applicable Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE Contact No.: 65476079

Authentication Stamp NP168

Date/Time: 14/05/2019 22:47

Classification Of Case: