rom (Person): IVY RUTTIA	ASSIGNME of AG1	ANT (Office)	25/19
Estimated Cost:	01	Bill to:	Date/Time;
OD TP / WS / TP RES / OD RES To Inspect Vehicle No: SLW	EVA/INV/MV/CS	S	. SJV 9814A
at Workshop m/s Zolar Author Primier @ Kaki Buki			Tel: 91461186
Policy No:		Claim No. (10	003345/JW
Sum Insured:		Excess:	7500
Make of Veh:(Client's Record)			D.O.A. 24.6. 2019
CA / REV / REP. / REV 24 HR. Date/Time: 25.6.19 1.17 p. 10.	S Person Contacted: _	mark	H.O.D. Endorsement:
Date/Time Action/Instruction (X) Estimate.		
SJV 9814A:			4
SLW 11205;	/	-	
	141		
Dismantle: 26	11. 13010		

Taufilet 1811:	
0	VOLUMENT OPC VOLUME SLW 1/208 WHOME -
	Vehille SLW 1/208 million -
Tronc. Date:	Type VLCartM.Cycle/Bus/Van/thory/Tard/Prime Mover/
1 slimated Cost	Truck/Trailer or
ODT FPT W57 FPT (LS TOD BLS T CVATINY I MV	Miller Toyota Sierte 1496
To luspect Vehicle Ho:	Make Toyota Sierte 1496 Colon Burnze M. Insued/Tal/HI/NA
at Worl-shop me	Sp.Reading 2980 - T/Radio linaured7 Std7HL/NA
al .	2/10
heaned	CHO. MHFZ28H3Z00047629
Policy No.	Gen. Cond. Co. / Fair / Poor / Burnt
Claims No	Steering: Ingred / Lammed / Leaked / Burnt - or
Sam Insured Excess:	
(Client's Record)	Ä
Make of Veh	10, 10000
	Tyre Size F: (8)/
(Policy Condition)	R:
Remark: The velt had commenced its M/S	O/S BS/DOW/EXNOVA/GY/FS/LIZA/MIC/OITSU/PIR/SUMI/
repair at the time of inspection.	TOYO / YOKO OI
Dat or Market Value;	Front
IDAC Accident Rport: Consistent? : Yes or No.	RABAL & min RABAL 6 . min
GIA / PR Seen Consistent? Yes or No.	L/Bal. 6 mm L/Bal C mm
Est. Repairs.	DOL 25/6/17
Lum Sum: % 3 Val: Yes or No	Survey hold at Zolgr Puto #26-21
CA / REV / REP. / 24 HR5 - P 1057	Dos. of Damages . Frt. / Rep. Y O/S / N/S / U/C / Roottop or
Vehicle	IN / OUT
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction No G1A	
- Estimated repair 1	range \$2,000 -\$3,300. Inhat
35,1) (40
	- 1 class
RECEIVED 2	21/8/
1,41:44	
Date/Ume, File Pass 107 : Proli. Report	Days Of Repair: 14
; Final Report	Resurvey No. of Trip: 2 Survey Fee: 100
Date/Time_Ulle Reform to?	Transportation 60
2).	Add Fee: Site Insp. (\$) 3 (19), 19 60
	Interview (\$) radio
Roport Format PRS	Tools Inva (\$) ottos

Nivitha (LKK Auto)

From:

lvy Ratilla <ivy.r@budgetdirect.com.sg>

Sent:

Tuesday, 25 June 2019 12:10 PM

To: Cc: Admin-D (LKKAuto) SUR; Justin Wong

Subject:

TPPD Survey: Claim ref:C10003345/JW || OI- SJV9814A (Red) TP- SLW1120S ||

Est:0.00 | Zolar Auto Services

Attachments:

Zolar - Pre-Repair Notice (AUTO & GENERAL)(SLW1120S).pdf

Hi Team,

We would like to arrange TP PRS for SLW1120S please. OI GIA report and estimates are not available yet.

Venue:

Zolar Auto Services

Address:

Premier@Kaki Bukit

#06-21

Singapore 415875

Contact:

Pamela @ 9146 1186

Please confirm.

Regards,

Ivy

Admin Executive, Claims

T +65 6540 2185 F +65 6725 0853

E ivy.r@budgetdirect.com.sg



Trusted Service Award

Customer Care +65 6221 2111 Claims +65 6221 2199

Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01 Singapore Shopping Centre Singapore 239924 budgetdirect.com.sq



Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as <u>Budget</u> <u>Direct Insurance</u>.

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From: Ivy Ratilla

Sent: Tuesday, 25 June 2019 11:27 AM

To: 'Hui Ting' < huiting@crossbordersllc.com >; Claims < claims@budgetdirect.com.sg >

Cc: Corene <corene@crossbordersllc.com>; Justin Wong <justin.wong@budgetdirect.com.sg>

Subject: RE: Our client's vehicle no. SLW1120S (ZOLAR); Your insured's vehicle no. SJV9814A - PRI | C10003345/JW

WITHOUT PREJUDICE

Dear Hui Ting,

We regret to inform that we are not agreeable to the mentioned surveyor. We will be sending our appointed surveyor and will contact the workshop soon.

Regards,

Ivy Admin Executive, Claims

T +65 6540 2185 F +65 6725 0853 E ivy.r@budgetdirect.com.sq



Customer Care +65 6221 2111 Claims +65 6221 2199 Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01 Singapore Shopping Centre Singapore 239924 budgetdirect.com.sq

auto 🗟 general

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From: Hui Ting < huiting@crossbordersllc.com>

Sent: Tuesday, 25 June 2019 11:04 AM

To: Ivy Ratilla < ivy.r@budgetdirect.com.sg>; Claims < claims@budgetdirect.com.sg>

Cc: Corene < corene@crossbordersllc.com >; Justin Wong < justin.wong@budgetdirect.com.sg >

Subject: RE: Our client's vehicle no. SLW1120S (ZOLAR); Your insured's vehicle no. SJV9814A - PRI | C10003345/JW

Your attention is drawn to the CONFIDENTIALITY NOTICE below.

WITHOUT PREJUDICE

Dear Ivy

- We refer to your email dated 25 June 2019.
- Our client objects appointing your surveyors as a single joint expert.
- 3. We propose one of the motor surveyors named in the list below to conduct the joint pre-repair survey as a single joint expert:-

a)	Marc Ananda	United Appraisal and Management Pte Ltd
b)	Dennis Yap	PAL'S Appraiser Pte Ltd
c)	Yap Teck Lee	LCW Appraiser Pte Ltd
d)	Yap Teck Chye	MC-Coy Appraiser Pte Ltd
e)	Dixon Yeo	Treasure Appraiser Pte Ltd
f)	Andrew How	Prominent Appraiser Services
g)	Alan Cheong K.H.	C L Appraiser Pte Ltd
h)	T.T. Rajan	ST Appraisal Services
i)	Sebastian Lim	Constanct Appraiser Services
j)	Aeon Auto Consultants	s LLP

4. Please let us know within two (2) working days whether you are agreeable to the appointment of any of the above motor surveyors as a single joint expert.

Thank You.

Regards Huiting

TEL: 6438 1323 ext 2006

CrossBorders LLC 133 New Bridge Road #23-03/04/05 Chinatown Point Singapore 059413

Tel: (65) 6438 1323 Fax: (65) 6438 2313

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CrossBorders LLC DOES NOT ACCEPT SERVICE OF COURT DOCUMENTS OR NOTICE OF ANY PROCEEDINGS BY FACSIMILE OR EMAIL

From: Hui Ting < huiting@crossbordersllc.com >

Sent: Tuesday, 25 June 2019 9:28 AM

To: Claims <<u>claims@budgetdirect.com.sg</u>>
Cc: Corene <<u>corene@crossbordersllc.com</u>>

Subject: Our client's vehicle no. SLW1120S (ZOLAR); Your insured's vehicle no. SJV9814A - PRI

Your attention is drawn to the CONFIDENTIALITY NOTICE below.

Tour attention is drawn to the CONFIDENTIALITY NOTICE below.

WITHOUT PREJUDICE

Dear Sirs

- 1. Please find attached our PRI notice dated 25 June 2019 for your kind attention.
- 2. Please reply email to corene@crossbordersllc.com & huiting@crossbordersllc.com & huiting@crossbordersllc.com

Thank You.

Regards Huiting

TEL: 6438 1323 ext 2006

CrossBorders LLC 133 New Bridge Road #23-03/04/05 Chinatown Point Singapore 059413

Tel: (65) 6438 1323 Fax: (65) 6438 2313

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CROSSBORDERS LLC

Advocates & Solicitors | Commissioner for Oaths | Notary Public

Our Ref:

AJ.tk.Zolar (SLW1120S)

Your Ref:

SJV9814A

25 June 2019

Auto & General Insurance (Singapore) Pte Ltd

190 Clemenceau Avenue

#03-01 Singapore Shopping Centre

Singapore 239924

Attn: Motor Claims Department

Dear Sirs

URGENT

BY FAX: 6725 0853 & EMAIL

SEND ALL CORRESPONDENCES TO THE MAIN OFFICE

#03-12 NEW WORLD CENTRE SINGAPORE 209037

MAIN OFFICE 133 NEW BRIDGE ROAD

#23-03/04/05 CHINATOWN POINT SINGAPORE 059413 TEL: 6438 1323

FAX: 6438 2313

BRANCH OFFICE I JALAN BERSEH

WE DO NOT ACCEPT SERVICE BY FAX

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION CLAIMANT: NOR BAIZURAH BINTE ABU BAKAR TRAFFIC ACCIDENT ON 24 JUNE 2019 AT 10:30 HRS ALONG PIE (TUAS) EUNOS FLYOVER INVOLVING VEHICLES NO. SLW1120S & SJV9814A

We are instructed by Nor Baizurah Binte Abu Bakar to notify you of a road accident 24 June 2019 at about 10:30 hrs along PIE (Tuas) Eunos Flyover involving our client's vehicle registration number SLW1120S and vehicle registration number SJV9814A driven by your insured at the material time. A copy of the Singapore accident statement/traffic police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days (excluding any intervening Saturday, Sunday and Public Holiday) of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be informed that the said vehicle can be inspected at:

Venue:

Zolar Auto Services

Address:

Premier@Kaki Bukit

#06-21

Singapore 415875

Contact:

Pamela @ 9146 1186

Please liaise with the above workshop directly.

Yours faithfully

Crossborders LLC

Email: corene@crossbordersllc.com /

rossborder Whe

huiting@crossbordersllc.com

encs

PLEASE LET US KNOW THE DATE OF THE PRE-REPAIR INSPECTION

CONFIDENTIALITY CAUTION

THIS DOCUMENT IS FOR THE ADDRESSEE(S) ONLY AND MAY CONTAIN CONFIDENTIAL INFORMATION AND/OR MAY BE SUBJECT TO LEGAL PRIVILEGE. IF YOU HAVE RECEIVED THIS IN ERROR, PLEASE CONTACT US IMMEDIATELY.

CROSSBORDERS LLC

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

/ehicle Owner Particulars	C: NDIC
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	02591
/ehicle No.:	SLW1120S
√ehicle to be Exported:	No
ntended Deregistration Date:	15 Jul 2019
Vehicle Make:	TOYOTA
Vehicle Model:	SIENTA 1.5 CVT STD
Primary Colour:	Brown
Manufacturing Year:	2017
Engine No.:	2NRX253652
Chassis No.:	MHFZ28H3200047629
Maximum Power Output:	79.0 kW (105 bhp)
Open Market Value:	\$16,746.00
Original Registration Date:	30 Jan 2018
First Registration Date:	30 Jan 2018
Transfer Count:	0
Actual ARF Paid: OPC Cash Rebate Details	\$16,746.00
OPC Cash Rebate Eligibility:	No
OPC Cash Rebate Eligibility Expiry Date:	•
OPC Cash Rebate Amount: Intended PARF Rebate Details	•
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Jan 2028
PARF Rebate Amount: Intended COE Rebate Details	\$12,559.00
COE Expiry Date:	29 Jan 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$25,339.00
COE Rebate Amount:	\$21,633.00
Total Rebate Amount:	\$34,192.00

The information contained herein is correct as at 15 Jul 2019

OK

1/1

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 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.

ACCID	1-11	officer and the	-	CAT
		III. A Fact	- N	1

Date Of Report

25/06/2019 16:52

Date Of Accident

24/06/2019 10:30

Exact Location Of Accident

PIE TOWARDS TUAS - EUNOS FLYOVER

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLW1120S

Insured/Policyholder

Name Of Registered Owner

NOR BAIZURAH BINTE ABU BAKAR

NRIC No

S1770259I

Email Address

NOEMAIL

Mobile Phone No

(LOCAL) +65-97487914

Alternative Phone No.

OFFICE-97487914

Vehicle Particulars

Manufacturer

TOYOTA

Model

SIENTA

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE USE

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5106814372

Cover Note Number

Driver

Name of Driver

MUHAMMAD SYAFIQ BIN MOHD SHAHBUDIN

NRIC No

S9521530J 23/06/1995

Date Of Birth Occupation

23/00/1995

Occupation

INDOOR

Date Of Driving Pass Driving Experience 18/05/2015 4 YEARS AND 1 MONTH

Gender

TA NOT THE

MALE

Mobile Number

(LOCAL) +65-97487914

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

3 ROSE LANE #02-02

Postcode

437361

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

RELATIVE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

Was any body injured in the Accident? Was any injured conveyed to hospital by NO

ambulance?

NO

Was any other material or property damaged?

YES

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

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: GRANDFATHER

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH OWNER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJV9814A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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
- 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 loggment 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, 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 law yers flaw 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

Palicyholder's Senature Date & Time

(If driver is not the noticy) aider)

Date E. Time

Reporter Centre Personnel's Signature

Name

NRIC/FIN NO

SKETCH PLAN

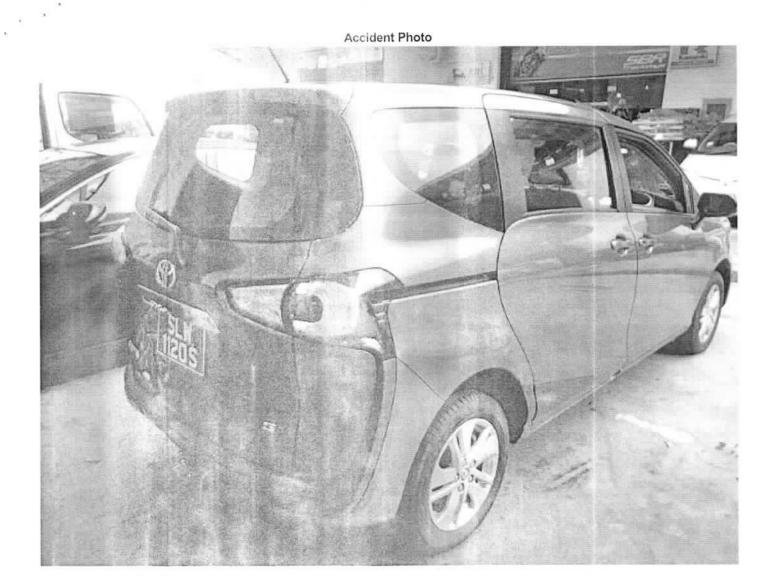
BSIV9814A

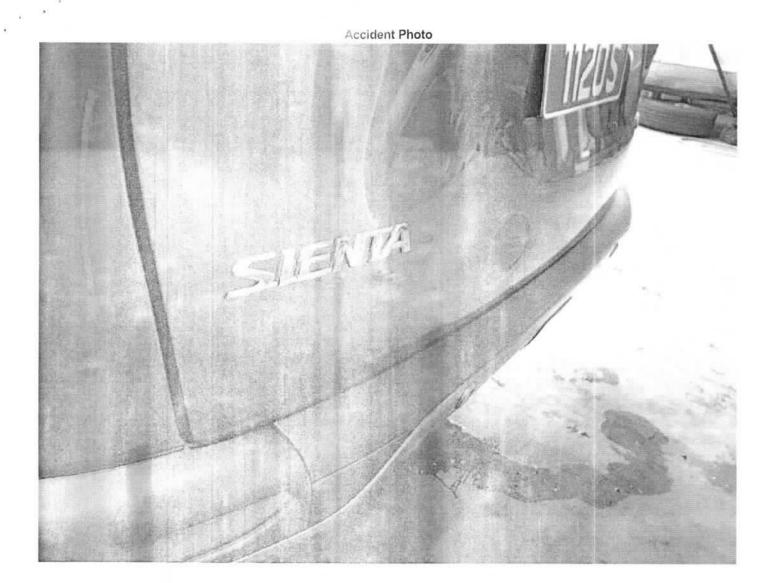
BEAD IXX PIE > Thew. Euros Flyover

DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
On mentionee	I dete and time, I	I was travella	alcon
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veh B do		feel a bit	gildy.
1 mght (rouself doctor it i	read to. My	grand fothe
sall remain	in He my vehicle	a later he a	lso got
down from	my vehicle to che	eck on our	velocle
clarges.			
DECLARATION			/
	iculars are true in every respect		
Policyholder s'y gitature	Drever s Athantic	Reporting Centre Perso	nnel's Sanatura
Date & Time	(if program not the policyholder)	Name	and a adjustant
	Date & Time	NRIC/FIN No.	

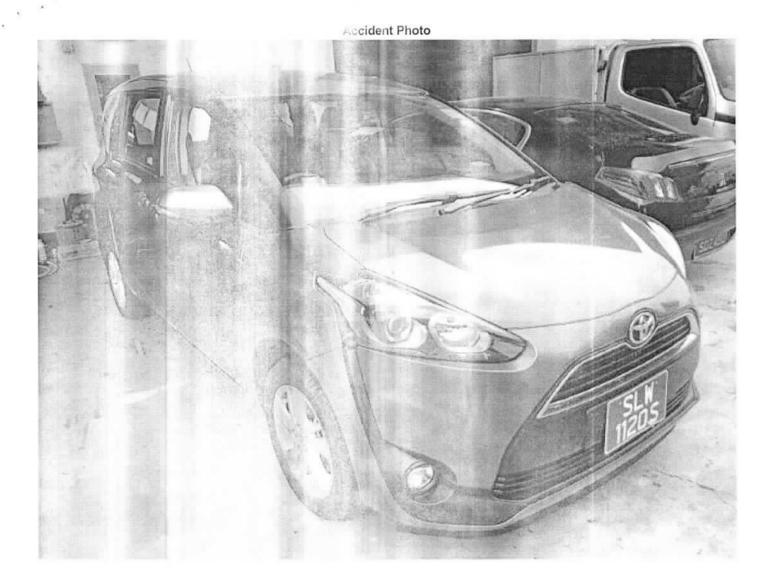
Page 5 of 13



















LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT AUTO & GENERAL INSURANCE (S) PL CS3/AGI19011163/T1cd3e2 30-08-2019 (BUDGET DIRECT INSURANCE) 190 CLEMENCEAU Date: AVENUE #03-01 S S CSINGAPORE 239924 Code: AGI Policy Particulars :- (THIRD PARTY CLAIM) SJV 9814A **SLW 1120S** Insured Veh. Veh. Inspected Policy No. Coverage (\$) 0.00 C10003345/JW 0.00 Claim No. Excess (\$) 25/06/2019 **Assign From Assign Date** Vehicle Particulars & Condition TOYOTA SIENTA 1496 Make & Model c.c HIDDEN Year of Reg. 2018 Engine No. MHFZ28H3200047629 BRONZE Chassis No. Colour 2980 KM IN ORDER Odometer Steering Brakes IN ORDER Modification SPORTS RIM GOOD General **Conditions of Tyres** Size Make Balance R/H Front Tyre 185/60 R15 DUNLOP 6 mm 185/60 R15 DUNLOP L/H Front Tyre 6 mm R/H Rear Tyre 185/60 R15 DUNLOP 6 mm 185/60 R15 DUNLOP 6 mm L/H Rear Tyre 4. **Description of Damages** THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. 5. **General Information** 24/06/2019 25/06/2019 (04:50 PM) **Accident Date** Inspect Date / Time Survey held at **ZOLAR AUTO SERVICES** NO.8 KAKI BUKIT AVENUE 4 PREMIER (GATE 2) #06-21 SINGAPORE 415875 5a. Remarks A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,500-\$3,300 5b. **Estimate Days of Repair** ESTIMATED NORMAL PERIOD FOR REPAIR: 4 Working Days

Report Ref No. CS3/AGI19011163/T1cd3e2

Inspected By

preprie

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A
Automotive Assessor

L

K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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