

ASS. REC. BY:

REF: C817119013444/uyd3

Special Instruction:

Surveyor: MATOS

Meimoh

ASSIGNMENT (Office)

From (Person): Tan Kah Leong of C11

Date/Time: 31/12/19 @ 5.03pm

Estimated Cost: Bill to:

OD - TP - WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SJQ 277K

Insured: SKB 617E

at Workshop m/s Keiizon motor

Tel: 9150 0670

of 68 Kelai Bukit Ave 6 #02-12

Policy No: DMPCSN19225619000

Claim No: SNM19D203515

Sam Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 25/7/19

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10:03am 1/1/19

Person Contacted: Shearn

Vehicle IN (OUT)

Date/Time	Action/Instruction
	Estimated ✓
	SJQ 277K X
	SKB 617E X

(Q8/11/13) wef

ASS. REC. BY: Marcus

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:

GLA / PR Seen:

Est. Repairs:

Lum Sum:

Consistent? : Yes or No

Consistent? : Yes or No

days Res.: Yes or No

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

Yr Regn:

C.O

A/C: Insured / Std / NI / NA

T/Radio: Insured / Std / NI / NA

N/S	O/S

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

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

Date/Time, File Pass to?

☐

Preli. Report

☐

Final Report

Date/Time, File Return to?

1)

2)

Report Format:

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

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

S + RS, SI

Photos

Others

TOTAL

RECEIVED 16 AUG 2019

5/8/19 confd final by 480 vrb shown. (Red 804-00, 63%)

16/8 - Typist

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	30 Jul 2019		01 Aug 2019 10:23 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	----------

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:			
Main Claimant:	KINETIC HOLDING PTE LTD,	Co. Reg. No.:	201618392N
Vehicle Reg. No.:	SJQ277K	Date of Loss:	25/07/2019 22:00 - :59
Claim Type:	TP / SNM19D203515C02	Policy/Cover Note No.:	DMPCSN19225619000
Vehicle Reg. No. (Insured):	SKB617E	Policy No. (Claimant):	999994105
		Excess:	S\$1,100.00
Repairer:	Kaizen Motors Pte Ltd (HQ) 68 KAKI BUKIT AVE 6, #02-12 ARK @ KAKI BUKIT, 417896 Kaki Bukit - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Tan Kah Leong - 63896193]		
Claimant's Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (SG) - Tel: 65-6419-3000		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 14/08/2019]		

ASSOCIATED MAIL RECEIVED

View All

Compose Case Mail

There are no mail for this case.

ALL ASSOCIATED TASKS

View All

Search Tasks

Create New Task

Complete

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Nivitha (LKK Auto)

From: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>
Sent: Thursday, 1 August 2019 10:15 AM
To: Jerome Soh; assignments
Cc: Admin-D (LKKAuto); Jacqueline Tan
Subject: RE: OUR REF: SNM19D203515-SKB617E-TKL & YR REF: K88-111134 -PRS
Attachments: 20190731171118.pdf

WITHOUT PREJUDICE

Dear Jerome,

We refer to your email of 31.07.2019.

We will be assigning M/s LKK Auto Consultants to survey your client's vehicle on a without prejudice basis.

Aside to LKK,

Please refer to the email below & proceed to survey the third party vehicle.

Thank you.

Regards

Tan Kah Leong

Assistant Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6193 | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/

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From: Jerome Soh [mailto:jeromesoh@visionlawllc.com]

Sent: Wednesday, 31 July, 2019 5:03 PM

To: 'Admin-D (LKKAuto)' <admin-d@lkkauto.com>; Chong Boon Sen <boonsen.chong@sg.cntaiping.com>; Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>; Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Cc: 'assignments' <assignments@lkkauto.com>

Subject: OUR REF: SNM19D203515-SKB617E-TKL & YR REF: K88-111134 -PRS

Dear Kah Leong,

Refer to the above matter and our letter dated 30 July 2019, please arrange with LKK Marcus Chua for this case.

Jerome Soh
Assistant Secretary

Vision Law LLC
133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413
Tel: 6534-2811 Fax: 6535-6802

VISION LAW LLC

Advocates & Solicitors

(Incorporated with limited liability)

Unique Entity No. 200721148H

Head Office: 133 New Bridge Road #18-01/02 Chinatown Point, Singapore 059413

Branch: 490 Lorong 6 Toa Payoh #03-11 HDB Hub (Biz 3 Lobby 1), Singapore 310490

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For more information please visit <http://www.symanteccloud.com>

Nivitha (LKK Auto)

From: Jerome Soh <jeromesoh@visionlawllc.com>
Sent: Wednesday, 31 July 2019 5:03 PM
To: 'Admin-D (LKKAuto)'; 'Chong Boon Sen'; kahleong.tan@sg.cntaiping.com; claimsdept@sg.cntaiping.com
Cc: 'assignments'
Subject: OUR REF: SNM19D203515-SKB617E-TKL & YR REF: K88-111134 -PRS
Attachments: 20190731171118.pdf

Dear Kah Leong,

Refer to the above matter and our letter dated 30 July 2019, please arrange with LKK Marcus Chua for this case.

Jerome Soh
Assistant Secretary
Vision Law LLC
133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413
Tel: 6534-2811 Fax: 6535-6802

VISION LAW LLC
Advocates & Solicitors
(Incorporated with limited liability)
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Branch: 490 Lorong 6 Toa Payoh #03-11 HDB Hub (Biz 3 Lobby 1), Singapore 310490

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VISION LAW LLC

Advocates & Solicitors - Notary Public - Commissioner for Oaths
Agents for Trade Marks

(Incorporated with limited liability)

ERIC NG CHING BOON
WONG KENG LEONG RAYNEY
AUDREY WONG SU-HSIEN
PAUL YAP TAI SAN
ANJALLI DIO MUNIANDY
SEGA PARAM
ANG KIM NOI DIANE
RAVENDRA KRISHNASAMY
TAN YINGXIAN, SELWYN
CHEONG YUNHUI, CLARISSA
EDISON TAM CHYI EU
SONIA LIM WEI LEI

Unique Entity Number : 200721148H
✓ **HEAD OFFICE:** 133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413

Branch: 490 Toa Payoh Lorong 6
#03-11 HDB Hub
Singapore 310490

✓ HEAD OFFICE

TEL : (65) 65342811 (Hunting)
FAX ✓ : (65) 65355802 (General)
: (65) 65355905 (Litigation)

E-mail : jactan@visionlawllc.com

BRANCH

TEL : 65 63580703
FAX : 65 63580448 (Conveyancing)

WHEN REPLYING PLEASE QUOTE OUR REFERENCE- KINDLY REPLY TO **HEAD OFFICE** FOR THIS MATTER

Our Ref: AM.jt.Ins.K88.111134.19 (sj)
Your Ref: SNM19D203515-SKB617B

30 July 2019

CHINA TAIPING INSURANCE (S'PORE) PTE LTD
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909
Attention: Motor Claims Department – Tan Kah Leong

BY FAX: 6224 7175

email: claimsdept@sg.cntaiping.com
email: kahleong.tan@sg.cntaiping.com

Dear Sirs,

**ACCIDENT INVOLVING SJQ 277 K & SKB 617 E ON 25 JULY 2019 ALONG MAJU AVENUE AT ABOUT 2225 HOURS
(NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY WITHIN 2 WORKING DAYS PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES)**

We refer to your email 30 July 2019 of even date informing that you wish to conduct a pre-repair survey and your List of Surveyors.

Our client confirmed appointment of Marcus Chua from LKK as the Single Joint Expert for this matter.

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

Venue: Kaizen Motors Pte Ltd
68 Kaki Bukit Avenue 6
#02-12 ARK@KB
Singapore 417896
Contact Person: Shawn Yap 9150-0670 /6384-1956

If you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you.

Yours faithfully

ANJALLI M
(HEAD OFFICE)

FOR SURVEYOR

Please initial here after completion of pre-repair inspection.
Thank you.

1st Survey on _____
Appointed surveyor : _____
(Name & Signature)

2nd Survey on _____
Appointed surveyor : _____
(Name & Signature)

3rd Survey on _____
Appointed Surveyor : _____
(Name & signature)

cc: **SJQ 277 K** – By Email: claims@kaizenmotors.com.sg only

NB.: Any settlement of offer is on the express condition that this settlement is in respect of our client's claim for property-related damages only and shall not preclude our client from claiming injury-related damages arising from this accident.

CONFIDENTIALITY

THE INFORMATION CONTAINED IN THESE DOCUMENTS MAY BE PRIVILEGED AND CONFIDENTIAL AND IS INTENDED FOR THE EXCLUSIVE USE OF THE ADDRESSEE DESIGNATED ABOVE. If you are not the addressee, any disclosure, reproduction, distribution or other dissemination or use of this communication is strictly prohibited. If you have received this transmission in error please contact us immediately by telephone so that we can arrange for its return.

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	26/07/2019 16:54
Date Of Accident	25/07/2019 22:25
Exact Location Of Accident	MAJU AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ277K
Insured/Policyholder	
Name Of Registered Owner	KINETIC HOLDING PTE LTD
Co Reg No	201618392N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97420668

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALLION
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994105
Cover Note Number	

Driver

Name of Driver	ARUN S/O PRABHAKAR V CLEETUS
NRIC No	S9634820G
Date Of Birth	03/10/1996
Occupation	OUTDOOR
Date Of Driving Pass	29/04/2017
Driving Experience	2 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86126903
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLK 517 JELAPANG ROAD #06-183
 Postcode 670517
 Was driver an employee of the Insured's Company YES
 If No, Relationship of the Driver with the Insured
 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. 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 ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
 Police Station Address ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-4849999 - FAX NO: 62181399
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20190726/2000.

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 Witness 1

Name ROY
 Phone Number 94572957
 Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKB617E
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

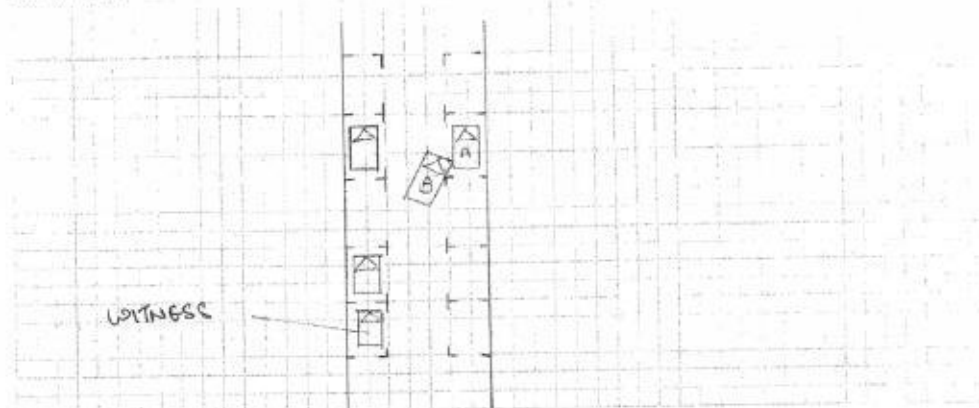
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT.

DECLARATION

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



Policyholder's Signature
Date & Time:

Q1114-00000000000000000000



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

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



**SINGAPORE
POLICE FORCE**



T/20190726/2000

1 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20190726/2000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/07/2019 00:04	Vide Report No.:	Station Diary No.: 3
--	------------------	-------------------------

Informant's Particulars

Name of Informant: ARUN S/O PRABHAKAR V CLEETUS	Address: APT BLK 517 JELAPANG ROAD #06-183 SINGAPORE 670517		
ID Type / ID No.: NRIC NO / S9634820G	Contact No.:	Mobile: 86126903	
Nationality: SINGAPORE CITIZEN	Home/Office:	Email:	
Sex: Male	Age: 22	Date of Birth: 03/10/1996	Type of Informant: Driver
Race: Indian	Language:	Institution / School Name:	
Occupation: FINANCIAL CONSULTANT	Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/07/2019 22:00	Type of Location: Straight Road
Location: Along Road 1 MAJU AVENUE PARELLEL PARKING				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow:	Traffic Control:		Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle	Anyone conveyed by ambulance: No			

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJQ277K	Car					0
SKB617E	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190726/2000

2 of 3

Report No. T/20190726/2000

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

CONTINUATION OF REPORT

Driver Name	ARUN S/O PRABHAKAR V CLEETUS	ID No.	S9634820G
Related Vehicle	SJQ277K (Car)	Contact No.	86126903
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 25/7/2019 at about 10pm, my car (SJQ277K) was parked along parallel parking at Maju Avenue. There are two sides of parallel parking at the particular location. My car was parked on the right side of the road. A car was trying to park and hit onto the left rear side of my vehicle. I was inside my car when the incident happened. When I alighted the driver drove off without alighting. I manage to get a hold of the registration plate number which is SKB617E (Kia Cerato).

I wish to inform that my car is a private hire and a rental.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999



T/20190726/2000

3 of 3

Report No. T/20190726/2000

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:
F /
Sr Staff Sgt MUHAMMAD YUNOS BIN ABDUL
RAHMAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt NEO ZHI YUAN
Contact No.: 65478079

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
26/07/2019 00:04

Classification Of Case:

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Company

Owner ID: 392N

Vehicle Details

Vehicle No.: SJQ277K

Vehicle to be Exported: No

Intended Deregistration Date: 06 Aug 2019

Vehicle Make: TOYOTA

Vehicle Model: ALLION 1.5 A

Primary Colour: Black

Manufacturing Year: 2008

Engine No.: 1NZD313945

Chassis No.: NZT2603039239

Maximum Power Output: 81.0 kW (108 bhp)

Open Market Value: \$17,934.00

Original Registration Date: 21 Apr 2009

First Registration Date: 21 Apr 2009

Transfer Count: 1

Actual ARF Paid: \$17,934.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 20 Apr 2024

COE Category: A - Car (1600cc & below)

COE Period(Years): 5

PQP Paid: \$13,088.00

COE Rebate Amount: \$12,317.00

Total Rebate Amount: \$12,317.00**Message**

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 06 Aug 2019

OK

Land Transport  Authority

Serial No. A 60068

Name: Arun S/O prabhakar V cleetus

NRIC: S9634820G

TEMPORARY PRIVATE HIRE CAR DRIVER'S VOCATIONAL LICENCE

1. You have passed the vocational licence competency test and have been granted a Private Hire Car Driver's Vocational Licence (PDVL).

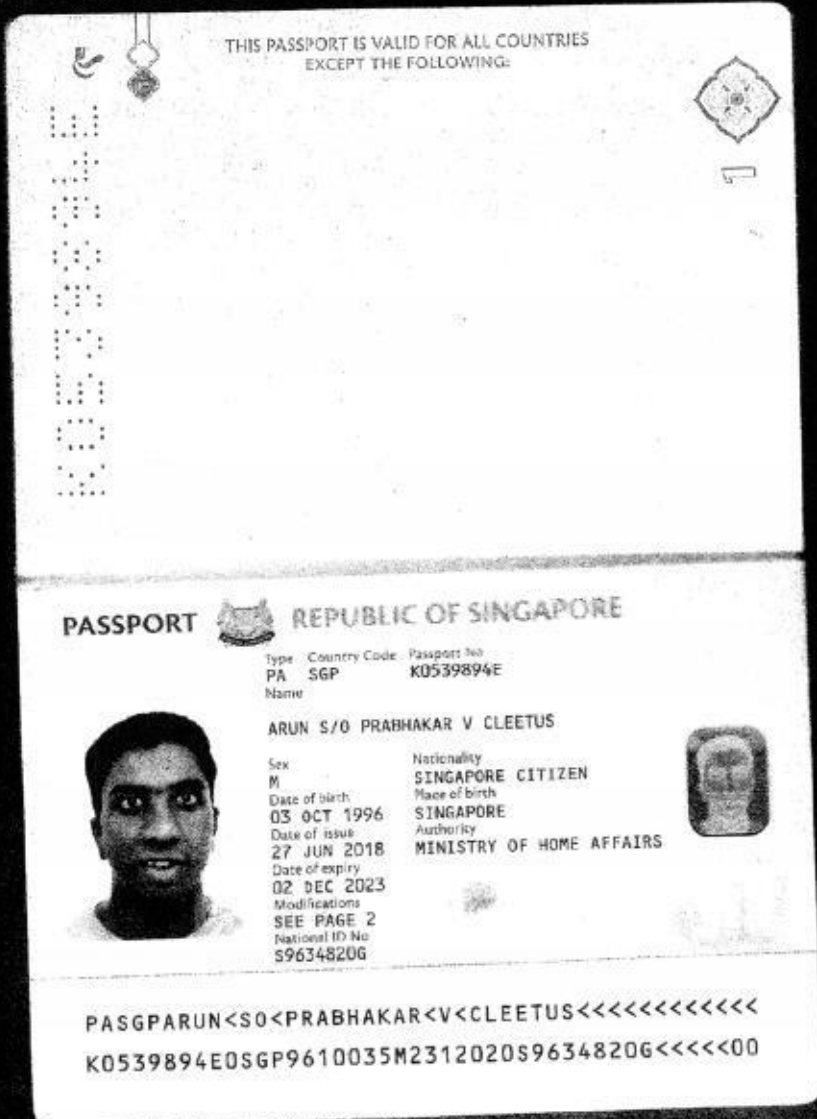
PDVL Commencement Date: 5 July 2019

2. You must **display this Temporary PDVL in your car at all times while driving a chauffeured private hire car.**

3. LTA will subsequently inform you to collect your Vocational Licence Card that will replace this Temporary PDVL.
You must collect your Vocational Licence Card **within 6 months** of the PDVL Commencement Date and display it in your car thereafter. **Otherwise, your PDVL may be revoked.**

Kwan Mei Fong
Assistant Registrar of Vehicles
Land Transport Authority of Singapore

This Temporary PDVL is handed to you by Jerelene Toh (centre officer name), Assistant Manager
(centre officer designation), of LTA SMO (centre name).





J/20190716/2068

1 of 2

Case Summary Form (CSF)

Report No. J/20190716/2068

Manual Form Serial No 01
 Report Number J/20190716/2068
 Vide Report Number J/20190712/2119
 Date/Time of Report Made 16/07/2019 15:12
 Place Report Lodged Bukit Panjang N.P.C
 Name of Informant Arun S/O Prabhakar V Cleetus
 ID Type / ID No. NRIC NO / S9634820G
 Home/Office
 Mobile 86126903
 Email
 Date/Time of Incident From 12/07/2019 18:35
 Date/Time of Incident To
 Incident Location 1 RAFFLES PLACE ONE RAFFLES PLACE SINGAPORE 048616
 Outside One Raffles Place Mall, at the benches area

Brief Facts

I am the above mentioned and I wish to add one more item mentioned in the below table, into the stolen property list on the report J/20190712/2119 that I have lodged.

The PDVL number is A24283, dated 05/07/2019. I am lodging this additional report to make a replacement of my stolen PDVL.

Property Information								
S/N	Item	Type	Brand/ Account/ Property/ Security- Type	Make/ Model/ Bank/ Address/ Counter	Serial No./ IMEI/ Acct No.	Quantity	Value	Description
1	Licence	Stolen	Provisional Driving Licence			1		ONE Provisional Driver Vocational License bearing name Arun S/O Prabhakar V Cleetus, NRIC S9634820G.