

23/04/2011

ASS. REC. BY:

REF: CS/ALG/9013854/ASD3 Special Instruction:

Surveyor: Adrian

ASSIGNMENT (Office)

From (Person): Hor Fimmel

of ALG

Date/Time: 6/8/19 @ 5:19pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SMA 795F

Insured:

SLM 144H

at Workshop in/s

TK Motor

Tel:

9627 3323

of

1 Kuli Bulet Ave 6 #02-56

Policy No:

Claim No:

Sum Insured:

Excess:

D.O.A. 4/8/2019

Make of Veh:

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 11:30am @ 7/8/19 Person Contacted:

Ah Keong

Vehicle IN / OUT

Date/Time	Action/Instruction	Initials
	SMA 795F - NA/ALG/9013757/h	
	SLM 144H - X	
14/08/19	@ 13:09 pm check with Ah Keong got estimate	

Consistent? : Yes or No

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

R/Bal.

06

mm

R/Bal.

06

mm

L/Bal.

06

mm

L/Bal.

06

mm

D.O.A.

D.O.I.

13/08/19

Survey held at

T.K.

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

Front n/s.

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Date / Time	Action / Instruction
	TP ALG.
	Adrian Confirmed 45 \$6,000/- @ 4 days with Boss.
	(\$9,652.00 Red 62%)
	MV:
	PV:
	Nett:

Date/Time, File Pass to?

Date/Time, File Return to?

Part Prices Check:

Survey Fee:

Date:

1) Typ 4

2)

IN

OUT

Basic & Add.

S + RS, SI

Photos

Others

TOTAL

Prel. Report:

Final Report:

\$6,000/- 45

Adrian

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/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.

N/S	O/S

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: SMAT9SE Yr Reg: 2018 April
 Type: M.Cycle / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or

Make: Mercedes Benz C180 c.c. 1595

Colour: Bronze A/C: Insured / Std / Nil / NA

Sp. Reading: 23291 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: WDD2050402 R355502

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Good / Jammed / Leaked / Burnt or

Brake: Good / Jammed / Leaked / Burnt or

Modi: Nil / SRim / STD A/Rim or

Tyre Size: F: 255/50R17

R: 255/50R17

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

TOYO / YOKO or Continental

Front

Rear

R/Bal. 06 mm R/Bal. 06 mm

L/Bal. 06 mm L/Bal. 06 mm

D.O.A. _____ D.O.I. 13/08/19

Survey held at T.K.

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

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

Date / Time Action / Instruction

TP AIG.

Adrian Confirmed US \$6,000/- @ 4 days with Boss.
 (\$9,652.00 Red 62%)

MV:

PV:

Nett:

Date/Time, File Pass to?

Date/Time, File Return to?

Part Prices Check:

Survey Fee:

Date:

1) Tyres

2)

IN

OUT

3)

4)

5)

6)

Basic & Add.

___ S + RS, ___ SI

Photos

Others

TOTAL

Prel. Report:

Final Report \$6,000/- US

PRE-REPAIR INSPECTION REQUEST - SMA795E vs SLM144H (01) on D.O.A.: 04/08/2019

From: Hor, Yinrul
To: assignments@lkkauto.com, Admin A (admin-a@lkkauto.com)
Cc: Fong, Andy-SY; Chin, Lee-Ying; Abu Kassim, Noor Mariesa; Azlan, Syazairdina; Chan, Yoke Shi; Lim, Sheng Yang; Mithoosingh, Aashweenjeetkaur; Parthiban, Theerthan; Subramaniam, Div;
Sent: 8/6/2019 5:19:17 PM

Hi,

Please refer to the enclosed request from **Kuru & Co**.
Kindly carry out Policy coverage verification first before conducting the pre-repair inspection within 48 hours

If you have any queries/concerns, please let us know.
Kindly assist to assign **Adrian Ling** as Single Joint Expert as requested.

Thanks & Regards,

Hor Yin Rul (Viviane)
AIG
FNOL Adjuster I
Singapore FNOL | Claims Operations - Auto

Yinrul.Hor@aig.com | www.aig.sg

From: Kuru & Co [mailto:kurulegal@yahoo.com.sg]
Sent: Tuesday, August 06, 2019 5:16 PM
To: Hor, Yinrul
Cc: Fong, Andy-SY; Chin, Lee-Ying; Abu Kassim, Noor Mariesa; Azlan, Syazairdina; Chan, Yoke Shi; Lim, Sheng Yang; Mithoosingh, Aashweenjeetkaur; Parthiban, Theerthan; Subramaniam, Divyashini; Tong, Wahxin
Subject: [EXTERNAL] Re: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SLM144H AND SMA795E ON 04/08/2019 // Ou ref: L19.1016.R

This message is from an external sender; be cautious with links and attachments.

Dear Sirs,

Our client is agreeable to the following surveyor(s): **LKK Auto Consultants Pte Ltd - Adrian Ling**

Please arrange for your surveyor to survey our client's vehicle at the following address:

TK Motor Workshop

AutoBay@Kaki Bukit

Blk 1 Kaki Bukit Ave 6

#02-56

Singapore 417883

Tel: 96273323

Please instruct your surveyor to conduct the pre-repair survey immediately and complete the pre-repair survey within 2 working days of his appointment.

Kindly let us have the pre-repair and/or post repair survey report upon completion of the survey(s).

As solicitors on record, our client shall look to you for payment of our legal costs plus disbursements should you reach a direct settlement with our client's repairer.

Thanks / Rgds,
Lena
Kuru & Co
150 South Bridge Road
#04-06 Fook Hai Building
Singapore 058727
Tel: 6532 2009
Fax: 6532 2007

On Tuesday, 6 August 2019, 4:04:18 pm SGT, Hor, Yinrul <Yinrul.Hor@aig.com> wrote:



This is a secure, encrypted message. To read it, open the attachment.

这是安全加密信息。如要阅读此信息，请开启附件。

นี่คือการรักษาความปลอดภัยของข้อมูลที่เข้ารหัสไว้เพื่ออ่านมันให้ปลอดภัยยิ่งขึ้น

이것은 안전하고 암호화된 메시지입니다. 그것을 읽으려면 첨부 파일을 엽니다.

Ini adalah pesan, aman terenkripsi. Untuk membacanya, membuka attachment.

Click here by 2019-08-13 16:04 +08 to read your message.
After that, open the attachment.

More Info

Disclaimer: This email and its content are confidential and intended solely for the use of the addressee. Please notify the sender if you have received this email in error or simply delete it.

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From: Yinnul.Hor@aig.com
To: kunleagal@yahoo.com.sg
Cc: Andy-SY.Fong@aig.com, Lee-Ying.Chin@aig.com, NoorMariesa.AbuKassim@aig.com, Syazairdina.Azlan@aig.com, yokeshi.chan@aig.com, ShengYang.Lim@aig.com, Aashweenjeetkaur.Mithoosingh@aig.com, Theerthan.Parthiban@aig.com, Divyashni.Subramaniam@aig.com, Wahxin.Tong@aig.com
Subject: aigencrypt PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SLM144H AND SMA795E ON 04/08/2019
Date: Tue, 6 Aug 2019 08:04:07 +0000
Without Prejudice

Your Reference : L.19.1016.lt
Our Reference : SLM144H

Dear Sir/Madam,

We refer to your Notice of Accident of even date.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert:

Name of Surveyor	Company Name
ALG In House Surveyor	ALG Asia Pacific Insurance Pte Ltd
Lawrence Ng Chun Kee	Priority Services
Jeffrey Ong Leng Kiat	Priority Services
Jimmy Lee	Priority Services
EC Looi	Automobile Inspection Services Pte Ltd
Pang Kiah Keen (Frankie)	Formteam Adjusters Pte Ltd
Ng You Han	Formteam Adjusters Pte Ltd
Soon HanXin (Gary)	Formteam Adjusters Pte Ltd
Chow Bo Xiong	Formteam Adjusters Pte Ltd
Chua Soo Teck (Benjamin)	Formteam Adjusters Pte Ltd
Kalvin Ang	LKK Auto Consultants Pte Ltd
Xing Guo Qiang	LKK Auto Consultants Pte Ltd
Marcus Chua	LKK Auto Consultants Pte Ltd
Mohamad Taufikh	LKK Auto Consultants Pte Ltd
Adrian Ling	LKK Auto Consultants Pte Ltd
Mohammed Rasul	LKK Auto Consultants Pte Ltd
Kenneth Kong	LKK Auto Consultants Pte Ltd

Please let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select one or more of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Thanks & Regards,

Hor Yin Rul (Viviane)
AIG
FNOL Adjuster I
Singapore FNOL | Claims Operations - Auto

Yinnul.Hor@aig.com | www.aig.sg

From: Kuru & Co [mailto:kurulegal@yahoo.com.sg]
Sent: Tuesday, August 06, 2019 3:53 PM
To: AIG SGP, Claims-Survey
Subject: [EXTERNAL] PRE-REPAIR INSPECTION NOTIFICATION - Yr ref: SLM 144H // Our ref: L19.1016.R

This message is from an external sender; be cautious with links and attachments.

Dear Sirs,

ACCIDENT INVOLVING SMA 795E AND SLM 795E ON 04.08.2019
AT/ALONG JUNCTION OF MARINE PARADE ROAD AND STILL ROAD SOUTH
NOTIFICATION OF ACCIDENT AND PRE-REPAIR SURVEY

We act for Vashdev Parsram Chandiramani, whose vehicle registration number SMA 795E was damaged in the above accident.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within **2 working days** of your receipt of this notice whether you 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.

Regards,
Lena
Kuru & Co
150 South Bridge Road
#04-06 Fook Hai Building
Singapore 058727
Tel: 6532 2009
Fax: 6532 2007

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	06/08/2019 15:10
Date Of Accident	04/08/2019 21:30
Exact Location Of Accident	MARINE PARADE RD JUNC WITH STILL RD SOUTH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA795E
Insured/Policyholder	
Name Of Registered Owner	VASHDEV PARSRAM CHANDIRAMANI
NRIC No	S1314296C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91003933
Alternative Phone No	OFFICE-91003933

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800046339-01
Cover Note Number	-

Driver

Name of Driver	ROSHNI VASHDEV CHANDIRAMANI
NRIC No	T0035774F
Date Of Birth	30/09/2000
Occupation	INDOOR
Date Of Driving Pass	03/07/2019
Driving Experience	0 YEAR AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-82460852
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address 793A MOUNTBATTEN RD
Postcode 437793
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 -
Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - U-TURN
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? YES
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) 3
Passenger 1 NAME: : UNKNOWN
GENDER: : FEMALE
Passenger 2 NAME: : UNKNOWN
GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES
If Yes, Please state which Police Station
Police Station Name CLEMENTI N.P.C
Police Station Address ROAD: 20 CLEMENTI AVE 5, POSTCODE: 129858, COUNTRY: SINGAPORE
Police Station Contact TEL NO: - FAX NO:
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLM144H
Vehicle Make/Model/Colour
Details Of Properties PRIVATE CAR
Vehicle Category YEO CHOK YANG LEWIS
Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name ROSHNI VASHDEV CHANDIRAMANI

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SMA795E

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Accident Sketch Plan

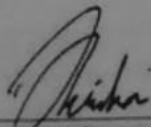
SKETCH PLAN


IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any 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.

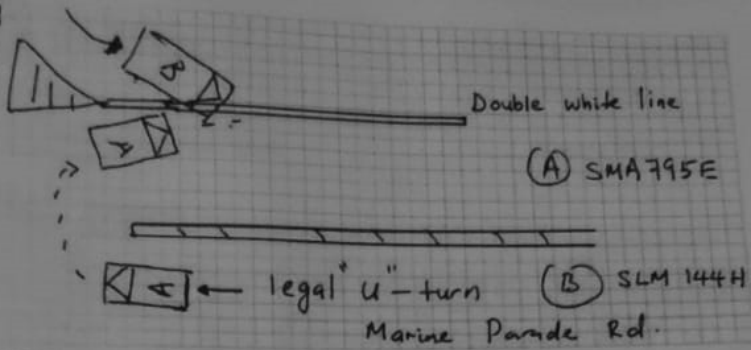

Policyholder's Signature
Date & Time:


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


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

Accident Sketch Plan

SKETCH PLAN
St: 4 Rd
south



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer To Police Report

DECLARATION

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

Police Officer's Signature _____
Date & Time _____

Date & Time

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

Date & Time:

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

NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129658
Tel No: 1800-8729999



T/20190805/2185

1 of 3

Report No. T/20190805/2185

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
05/08/2019 23:23

Vide Report No.:

Station Diary No.:
244

Informant's Particulars

Name of Informant: ROSHNI VASHDEV CHANDIRAMANI		Address: 793A MOUNTBATTEN ROAD SINGAPORE 437793	
ID Type / ID No.: NRIC NO / T0035774F		Contact No.: Home/Office:	Mobile: 82480852
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 18	Date of Birth: 30/09/2000	Type of Informant: Driver
Race: Indian	Language: English		Institution / School Name: NUS
Occupation: Student	Driving Licence Information: Class: 3A		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/08/2019 21:30	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 MARINE PARADE ROAD STILL ROAD SOUTH At the X-Junction of Marine Parade Rd and Still Rd South				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SLM144H	Car	HYUNDAI		Grey	Slightly Damaged	1
SMA795E	Car	MERCEDES BENZ	C180	Brown	Seriously Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SMA795E	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800046339-01	30/04/2019	29/04/2020

POLICE REPORT



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 120858
Tel No: 1800-8720999



T/20190805/2165

2 of 3

Report No. T/20190805/2165

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Driver		Use of Pedestrian Crossing: NA	
Name	YEO CHOK YANG, LEWIS	ID No.	S7921845F
Related Vehicle	SLM144H (Car)	Contact No.	98666665
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
Driver			
Name	ROSHNI VASHDEV CHANDIRAMANI	ID No.	T0035774F
Related Vehicle	SMA795E (Car)	Contact No.	82480852
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	05/08/2019	Date Discharge	05/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

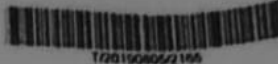
On 04/08/2019 (Sunday) at about 9.30pm, while I was driving my car of reg no. SMA795E along Marine Parade Rd heading towards Marine Drive, making a U-turn at the junction of Marine Parade Rd and Still Rd South. The traffic light was green in my favour and I checked for oncoming traffic from both Marine Parade Rd and Still Rd South and proceeded to turn. As I completed the turn, vehicle SLM144H driven by Yeo Chok Tang, Lewis (IC No. S7921845F) dashed out at high speed from Still Rd South, turning left onto Marine Parade Rd and hit onto the front left side of my vehicle. As a result of the jerk, I had unusual continuous pain in my neck and went to Mount Alvernia Hospital for a medical check-up where I was given an MC for 5 days together with medication prescribed. We exchanged details with each other. I have the in-car video footage.

POLICE REPORT



SINGAPORE
POLICE FORCE

Police Station Of Origin
Clementi N.P.C.
20 Clementi Avenue 5 SINGAPORE 120858
Tel No: 1800-8729999



T/20190805/2165

3 of 3

Report No: T/20190805/2165

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:

D/

SI LOH WEE CHOON

96680

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI MOHAMAD ZULFAZDLI BIN ABDULLAH

Contact No: 65476204

Authentication Stamp

NP168

SIGNATURE

Signature Of Informant:

[Signature]

Date/Time:

05/08/2019 23:23

Classification Of Case: