

Surveyor

REF: CS1/CTI19015776/E sd307

Special Instruction:

HS: \$ 15,600-00

ASSIGNMENT (Office)

From (Person): Irene Tay of CTI Date/Time: 4/9/19

Estimated Cost: Bill to:

Third Parties:

Claimant:

Surveyor: Sincere Appraisal Services

Workshop: Horizon Auto

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SLN 4203P Insured: SKA 519K

at Workshop m/s Horizon Auto Tel:

of 25 kaki Bukit Road 4 #01-48 synergy

Policy No: Claim No: SNMIBD0336402

Sum Insured: Excess:

Make of Veh: D.O.A. 6/07/2018

(Client's Record)

H.O.D. Endorsement/Date:

Date/Time: Person Contacted: Vehicle IN / OUT

Date/Time: Confirmed with Final Fig , days (Red \$ / %; Original 12 days)

Date/Time: 10/9/19 Submit Final Fig LS 8500 , 7 days (Red \$ 7100 / 46%; Original days)

Date/Time Action/Instruction

SLN 4203P-NA/INC19009867/21
GBA 316D-X

DOA: 11/6/2019

Submit by 11/09/2019

Kindly Refer Memo

[Signature]
10/9/2019

URGENT

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

RECEIVED 10 SEP 2019

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

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value :

Inspected/
Estimated by:

Fee Charged:

Basic & Add
Transport
Photos
Others
Total

Date:

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

Nivitha (LKK Auto)

From: Irene Tay <irene.tay@sg.cntaiping.com>
Sent: Wednesday, 4 September 2019 3:04 PM
To: assignments; Asher Sng (LKK Auto)
Subject: URGENT ----- CTP REF NO. SNM18D03364C02 - ACCIDENT INVOLVING GBG316D AND SLN4203P ON 05 JULY 2018
Attachments: 20190904145717.pdf

Dear Sir/Mdm,

We refer to the above captioned matter.

Please assist to conduct a PAPER INSPECTION.

Enclosed herewith the third party survey report for your perusal.

Possible to let us have the report latest by 11 September 2019.

Irene Tay

Executive

Claims Department (Motor Division)

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 63896192 | F: (65) 62247478/62247175

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG

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Horizon Auto Tuners Pte Ltd

Company ID : 200915883C

25 Kaki Bukit Road 4

#01-48, Synergy @ KB

417800

Singapore

Invoice

INV-21653

Balance Due
SGD15,600.00

Bill To
Douglas
SLN 4203P
VW GTI

Invoice Date : 01 Aug 2018
Terms : Due on Receipt
Due Date : 01 Aug 2018
Sales person : Vincent Lim
Telephone : +65

#	Item & Description	Qty	Rate	Amount
1	Lump Sum Repair as per recommendation	1.00	15,600.00	15,600.00
Sub Total				15,600.00
Total				SGD15,600.00
Balance Due				SGD15,600.00

Notes

Thank you for your business. Have A Nice Day! :)

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 willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
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	06/07/2018 13:46
Date Of Accident	05/07/2018 17:40
Exact Location Of Accident	KPE EXIT TWDS PIE TUAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN4203P
Insured/Policyholder	
Name Of Registered Owner	M/S DOUGLASLWQ TRANSPORT
Co Reg No	53361217M
Email Address	DOUGLAS99111@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91138590
Alternative Phone No	OFFICE-91138590

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	POLO-1.4 GTI (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE & REWARD
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 HIRE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSN1733111700
Cover Note Number	

Driver

Name of Driver	LIM WEN QIANG, DOUGLAS
NRIC No	S9108302G
Date Of Birth	15/03/1991
Occupation	OUTDOOR
Date Of Driving Pass	07/08/2014
Driving Experience	3 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91138590
Fax Number	
Contact Number	
EEmail Address	DOUGLAS99111@GMAIL.COM

Address	BLK 501 ANG MIO KIO AVENUE 5 #11-3702
Postcode	560501
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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)	2
Passenger 1	NAME: : TIMOTHY GENDER: : MALE

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 SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 81 ANG MO KIO AVE 3 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4519999 - FAX NO: 65535679
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER SKETCH PLAN AND POLICE REPORT ATTACHED

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	SKA519K
Vehicle Make/Model/Colour	TOYOTA CAMRY SILVER COLOUR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ABHINANDA NAG
NRIC/Passport Number	G5122116N
Contact Number	91015264
Address	
Postcode	

Insurance Company Name
Nature Of Damage REAR
No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBG316D
Vehicle Make/Model/Colour VAN SILVER COLOUR
Details Of Properties
Vehicle Category GOODS VEHICLE
Name of Driver HOI YUNG LIN
NRIC/Passport Number S8022102I
Contact Number 96824703
Address
Postcode

Insurance Company Name
Nature Of Damage FRONT
No. Of Passenger (Including Driver) 2
Passenger 1

NAME: :

GENDER: :

DETAILS OF INJURED PERSON 1

Name LIM WEN QIANG DOUGLAS
Approximate Age 27
Injuries Sustain NECK AND BACK
Injured person in which vehicle? SLN4203P
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address BLK 501 ANG MO KIO AVENUE 5 #11-3702
Postcode 560501

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: 6/7/18

12:45 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sahy
51842

Sketch Plan #2 Pg. 1

SKETCH PLAN

KPE (TPE)
Exiting to PIE (TUAS)
On the Flyover to merge
to PIE (TUAS)



A - SLN4203P
B - SKAS19K
C - GBG316D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police Report No T/20180706/2021 dd 6/7/18
the 08-KI am attached.

DECLARATION



We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 6/7/18

12:45pm

Driver's Signature

(if driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Signature

51842


**SINGAPORE
POLICE FORCE**


T/20180706/2021

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

1 of 4

Report No. T/20180706/2021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/07/2018 08:51		Vide Report No.:		Station Diary No.: 30
Informant's Particulars				
Name of Informant: LIM WEN QIANG, DOUGLAS		Address: APT BLK 501 ANG MO KIO AVENUE 5 #11-3702 SINGAPORE 560501		
ID Type / ID No.: NRIC NO / S9108302G		Contact No.: Home/Office: Mobile: 91138590		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 27	Date of Birth: 15/03/1991	Type of Informant: Driver	
Race: Chinese		Language: English	Institution / School Name:	
Occupation: salesperson		Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/07/2018 17:40	Type of Location: Flyover
Location: Along Road 1 KALLANG PAYA LEBAR EXPRESSWAY after KPE exit towards PIE (tuas)				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBG316D	Van					1
SKA519K	Car					0
SLN4203P	Car					1



**SINGAPORE
POLICE FORCE**



T/20180706/2021

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

2 of 4

Report No. T/20180706/2021

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM WEN QIANG, DOUGLAS	ID No.	S9108302G
Related Vehicle	SLN4203P (Car)	Contact No.	91138590
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	05/07/2018	Date Discharge	05/07/2018
No. of Days granted Medical Leave	06	Degree of Injury	NIL
Driver			
Name	HOI YUNG LIN	ID No.	S8022102I
Related Vehicle	NIL	Contact No.	NIL
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	ABHINANDA NAG	ID No.	G5122116N
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: 24/05/2021
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 05/07/2018 at around 1740hrs, I was driving along lane 1 after KPE exit towards PIE (Tuas). At that point of time, there was a passenger seated at the rear seat and the traffic volume was moderate. Suddenly the vehicle bearing: SKA519K which was ahead of my car did an emergency brake due to the traffic ahead. I managed to brake and stop my car to avoid the collision however the van bearing: GBG316D could not stop in time and collided into the rear of my car. The impact from the collision caused my car to skid forward and collide into the rear of vehicle bearing: SKA519K. After the accident, I alighted from my car to exchange particulars with the other drivers as well as to check on the damages to my car. Due to the accident, I sustained pain at neck and lower back area. Later that day, I went to Tan Tock



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio South N.P.C
Ang Mo Kio Avenue 3 SINGAPORE
N000000
Tel No. 1800-4519999



T/20180706/2021

3 of 4

Report No. T/20180706/2021

CONTINUATION OF REPORT

Sang Hospital for medical treatment and was given 6 days medical leave. The front and rear of my car was damaged hence I sent to my workshop at kaki bukit for repair works.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999



T/20180706/2021

4 of 4

Report No. T/20180706/2021

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 /
Sgt 2 YEO YUE LONG ROGER

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT
Staff Sgt WONG SIEU LUI
Contact No: 65475151
Signature:

SN 085

Authentication Stamp
NP 68 Singapore Police Force

Signature Of Informant:

Date/Time:
06/07/2018 08:51

Classification Of Case:

CERTIFICATE OF INSURANCE

Page 1 of 2



中国太平保險(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MS406L/SE 2H 3
AN0567A
Cov. Type: C
AUTOSAFE

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 188)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1950
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

53361217M

CERTIFICATE No.	DMHCSN1733111700	Engine No : CAW380909 Chassis No: WVMZEEER3CY541725
1. Index Mark and Registration Number of Vehicle	SLN4203P	
2. Name of Policy Holder	DOUGLASWQ TRANSPORT	
3. Effective date of the Commencement of insurance for the purposes of the Regulations, Ordinance or Enactment	8 MAY 2018	EXCESS SECT. I\$51,000.00 EXCESS SECT. I (OUTSIDE SINGAPORE).....\$22,000.00 EXCESS SECT. II\$51,000.00 EXCESS SECT. II (OUTSIDE SINGAPORE).....\$22,000.00 EX. OF WINDSCREEN\$5100.00
4. Date of Expiry of insurance	10 OCTOBER 2019	
5. Persons or Classes of Persons entitled to drive * -		
<p>AS PER NAMED DRIVER(S) STATED BELOW.</p> <p>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.</p> <p>ANY EMPLOYEE OF THE COMPANY OR DOUGLAS LIM WEN QIANG ONLY</p>		
<p>6. Limitations as to use: *</p> <p>(1) USE FOR THE CARRIAGE OF PASSENGERS OR GOODS IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. (2) USE FOR SOCIAL DOMESTIC PLEASURE PURPOSES AND BUSINESS PURPOSES OF ANY PERSON TO WHOM THE VEHICLE IS HIRED. THE POLICY DOES NOT COVER (1) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING. (3) USE WHILE DRAWING A TRAILER EXCEPT THE TOWING (OTHER THAN FOR REWARD) OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.</p>		
<p>NIKE PURCHASE CO. : S\$ CAPITAL PTE LTD AS HP OWNER * 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.</p>		

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 188) and Part IV of the Road Transport Act, 1987 (Malaysia).
Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:

Janice Lim
Autoshield Pte Ltd
Senior Manager
Business Development

Authorized Signatory

DID : 63851626 Mobile : 86889191

3 Anson Road #15-00 Singapore Tower Singapore 079908 Tel: 6389 6111 Fax: 6225 3582 Website: www.sg.cntaiping.com

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHOR DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Business) of DOUGLASLWQ TRANSPORT (53361217M)

The Following Are The Brief Particulars of :

Name of Business	: DOUGLASLWQ TRANSPORT
Former Name(s) if any	:
Date of Change of Name	:
Registration No.	: 53361217M
Registration Date	: 26/04/2017
Commencement Date	: 26/04/2017
Status of Business	: Live
Status Date	: 26/04/2017
Renewal Date	:
Expiry Date	: 26/04/2018
Renewal via GIRO	: NO
Constitution of Business	: Sole-Proprietor
Principal Place of Business	: 501 ANG MO KIO AVENUE 5 #11-3702 CHENG SAN CREST SINGAPORE (560501)
Date of Change of Address	:

Principal Activities

Activities (I)	: PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HI AND TRISHAWS) (49219)
Description	: UBER GRAB
Activities (II)	:
Description	:

Particulars of Authorised Representative(s)

Name	ID	Nationality	Address	Address Source
------	----	-------------	---------	----------------

Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source
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INFORMATION RESOURCES

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Business Profile (Business) of DOUGLASLWQ TRANSPORT (53361217M)**Existing Sole-Proprietor(s) / Partner(s)**

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source
DOUGLAS LIM WEN QIANG	S9108302G	SINGAPORE CITIZEN	501 ANG MO KIO AVENUE 5 #11-3702 CHENG SAN CREST SINGAPORE (560501)	ACRA

Withdrawn Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of End Position

Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

PLEASE NOTE THE INFORMATION HEREIN CONTAINED IS EXTRACTED FROM FORMS/TRANSACTIONS FILED WITH THE AUTHORITY

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA170502127846

DATE : 02/05/2017

This is computer generated. Hence no signature required.



**SINGAPORE
TAXI
ACADEMY**

Date: 04-06-2018

Student Result Slip

NRIC	S9108302G
Name	LIM WEN QIANG, DOUGLAS (ATD)
Class Code	[PF42705180]
Test Name	[1]Private Hire Car Driver Vocational Licence (8-hours)
Test Status	Pass

Result Details

Section Name	Test Date	Score
Page 2		

Serial No. A 12399

Land Transport  Authority

NRIC: 59108302-A

Name: Jim Lee Date: Aug. 29/23

NAME: John W. King REG: 12/29/2013

TEMPORARY PRIVATE HIRE CAR DRIVER'S VOCATIONAL LICENCE

After passing the written test and having been granted a Private Hire Car Driver's Licence, the holder must also pass a practical test and have been granted a Private Hire Car Driver's Licence.

NAME: Lim Yee King English

TEMPORARY PRIVATE HIRE CAR DRIVER'S VOCATIONAL LICENCE

I hereby certify that the above-named person has been granted a Private Hire Car Driver's Vocational Licence (PDVL).


05/11/2018

unmanned private hire car.

PDV1 Commencement Date: 05 JUN 2018

PDLV Commencement Date.

2. You must display this Temporary PDLV in your car at all times while driving a vehicle.
3. If you are stopped by a police officer, you must allow him/her to inspect your Temporary PDLV and that will replace this Temporary PDLV.
4. Your Temporary PDLV will expire on the date specified on it and within 6 months of the PDLV Commencement Date and display it in your car accordingly. Otherwise, your PDLV may be revoked.



SINGAPORE TAX ACADEMY
WANA



Ministry of Transport
Road Transport Department
Singapore


Exposure to PM₁₀ - related to years
of residence in the area

Account officer name:

Page 14 of 14

INSURED IC & DL Pg. 1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9108302G



Name
LIM WEN QIANG, DOUGLAS
林文强
Race
CHINESE
Date of Birth
15-03-1991
Country of Birth
SINGAPORE
Sex
M
S9108302G

REPUBLIC OF SINGAPORE DRIVING LICENCE
S9108302G



LIM WEN QIANG, DOUGLAS
Birth Date: 15 Mar 1991
Issue Date: 07 Aug 2014
001232879C

owner / driver

#377011



IDENT NO. S9108302G



Date of Issue
10-03-2009

Address
APT BLK 501 ANG MO KIO AVENUE 3
#11-3702
SINGAPORE 550501

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

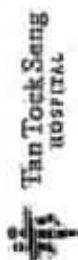
EFFECTIVE DATE

Class 1 Motor Cars ≤ 3500kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 3500kg 07 Aug 2014

NP 425A

License No: S9108302G





Tan Tock Seng Hospital
11, Jalan Tan Tock Seng, Singapore 308433
TEL: (65) 6266 6011

MEDICAL CERTIFICATE ORIGINAL TTSH16153412

NAME: LIM WEN QIANG, DOUGLAS NRIC: S9108302G

Type of Medical Leave granted : OUTPATIENT SICK LEAVE


The above named is unfit for duty for a period of 6 day(s) from 05-Jul-2018 to 10-Jul-2018 inclusive

The certificate is not valid for absence from court attendance.

The above named attended for Examination/Treatment from 05-Jul-2018 22:21 to 05-Jul-2018 23:43

05-Jul-2018 Date
LOI TSUAN-HAO (11137F) Issued by
Emergency Department Location

Signature


A member of National Healthcare Group
Adding years of healthy life

SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



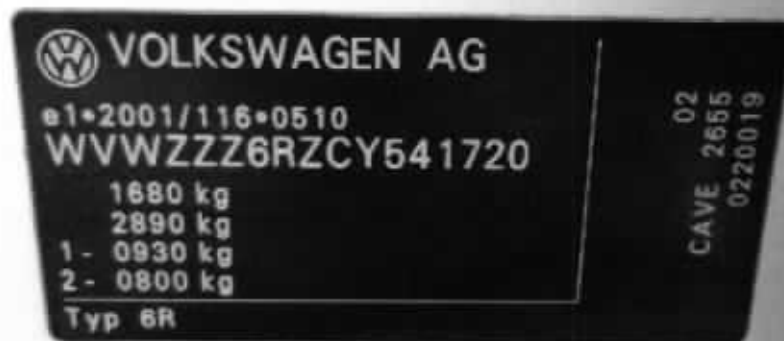
SCENE PHOTO



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INSURED CAR DECAL



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 ability.
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	06/07/2018 11:51
Date Of Accident	05/07/2018 17:40
Exact Location Of Accident	KPE TOWARDS PIE (TUAS) / CTE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKA519K
Insured/Policyholder	
Name Of Registered Owner	NAG SUMALLYA
NRIC No	G5016568Q
Email Address	SUMALLYANAG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91015264
Alternative Phone No	OFFICE-91015264
Vehicle Particulars	
Manufacturer	TOYOTA
Model	CAMRY 2.0 AUTO ABS AIRBAG
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	GA029967/1
Cover Note Number	
Driver	
Name of Driver	ABHINANDA NAG
Work Permit No	G5122116N
Date Of Birth	18/11/1976
Occupation	INDOOR
Date Of Driving Pass	25/05/2016
Driving Experience	2 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-91015264
Fax Number	
Contact Number	
Email Address	ABHINANDANAG@GMAIL.COM

Address	SINGAPORE
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE SEE ATTACHED S & C 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	SLN4203P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM WEN QIANG, DOUGLAS
NRIC/Passport Number	S9108302G
Contact Number	91138590
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBG316D
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HOI YUNG LIN (XU YONGLIN)
NRIC/Passport Number	S8022102I
Contact Number	96824703
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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 willful misrepresentation or withholding of material facts may allow insurance companies to regulate 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 or 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 afterwards.
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 (Police) Signature
Name:
NRIC/IN No.:

I am fully aware that my insurer may have a 14-day period for me to decide on filing an Own Damage Claim.

Accident Sketch Plan

SKETCH PLAN

Date of Accident 05/07/18

KPE
TOWARDS
PIE (TUAS)
/ CTE



A SKA519K
B SLN4203P
C GBG316D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 05/07/2018 at 1740 hrs. I was travelling along KPE towards PIE (Tuas) / CTE as the traffic was heavy and the vehicle in front of me stopped. I stopped too. I then suddenly felt a huge impact hit my rear. As I came down to check, Vehicle B (SLN4203P) had collided onto the rear of my vehicle and there was another vehicle, Vehicle C (GBG316D) which had collided onto Vehicle B.

- ☐ Own Damage claim
- ☒ Third Party Claim
- ☐ CO/TP Claim at another workshop
- ☐ Reporting Only

DECLARATION

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

Policyholder's Signature
Date & Time

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


Reporting Centre (AIC) Signature
Name:
NRIC/FIN No.



04943

Source: U.S. Census Bureau, *Transportation Statistics* (Chicago, IL: 1987-1994), "Statistical Abstracts for the United States" (Chicago, IL: 1987-1994), "Statistical Abstracts for the United States" (Chicago, IL: 1987-1994).

Polystyrolide name	NAG SCHWALLER	Confidentiality
Owner	Comprehensive	<input type="checkbox"/> Other (specify)
Plant name	Phosico A/P	Engineer name
NCD applicable	40%	
Subsidy registration number	SKKSEEN	
Period of Insurance	From 25/09/2017 to 24/09/2018 (year)	System not allowed
Insurance fees comments	2015, 2016, 2017	

Certificate number	GAC23947 / 1
Order number	MYPOL2004-01270-02421
Invoice number	1477121094

EXCLUSIVE AUTHORIZED DEALERSHIP
CHENG AUTO
Auto Sales
7300A 88 STREET
461-8888 PICKERING PLACE
BRANDS: HONDA, TOYOTA, MAZDA, NISSAN, SUBARU
24 Hours Towing: 888 7775

© 1999 The Polytechnic

Noted that the person doing is permitted in accordance with the following in other laws or regulations to be in the Motor Vehicle. It has been determined and is not regulated by any of a Court of Law of the reason of any enactment or regulation to be in the Motor Vehicle.

(See entry for *Wendell, the woman who*, for the judgments of the New Englanders on Wendell.

[illegible]

1. Information on the respondent's location is from the Midway Study (The Midway Study and Consortium for Asia, Chicago, 1995 and 2000 and 2005). The Midway Study is a longitudinal study of the health and well-being of the Chinese population in Chicago, Illinois, and is part of the Midway Study Consortium for Asia.

EXCESS	Jan 1 Own Damage Excess	USD 200.00		
	Whichever Excess	USD 100.00		

See Additional Features on page 100 for more information.

- \$8500 for an owner, authorized driver
- \$2500 for a declared injury and a suspended driver
- \$65,000 for an authorized injury and for a restricted driver. This additional amount is increased to \$22,500 for a driver who has a AAA Pledge to Drive.

Page 4

(We hereby certify that the policy of which this Certificate relates, is issued in accordance with the provisions of the Motor Vehicles Third Party Bill, 1941 (Compensation Act, Chapter 146) and Part IV of the Road Transport Act, 1987 (Malaysia).)

AXA Insurance Pte Ltd

8. The amount of liquid in

Dr. Erdemovic has stated that in the case of a private contract they need to consider the Certificate of Burial and the listing in the newspaper obituary, if the Certificate of Burial is not available, then only a Burial or Cremation is sufficient to be a burial. This is not the case. A body must be buried under the Mass which (Dead) Body, Name and Cemetery must also exist. 1302.

F&A Insurance Pte Ltd (199902512M)
8 Shenton Way, #04-01, F&A Tower,
Singapore 068811
Contact: Mr Goh Kah Hui, MFL-01

INSURED IC



G5016568Q

NAG SUMALLYA



VALID

Scanned on: 03 Jul 2018, 04:25PM

Pass Type	Employment Pass
Pass Expires On	01 Aug 2021
Employer	NYK SHIPMANAGEMENT PTE LTD
Occupation	VESSEL MANAGER
Date of Application	08 Jun 2018
Issued On	26 Jun 2018
Multiple Journey Visa	Issued
Card Serial Number	K0526551

Accurate as of 03 Jul 2018, 12:00PM

DRIVER IC FRONT



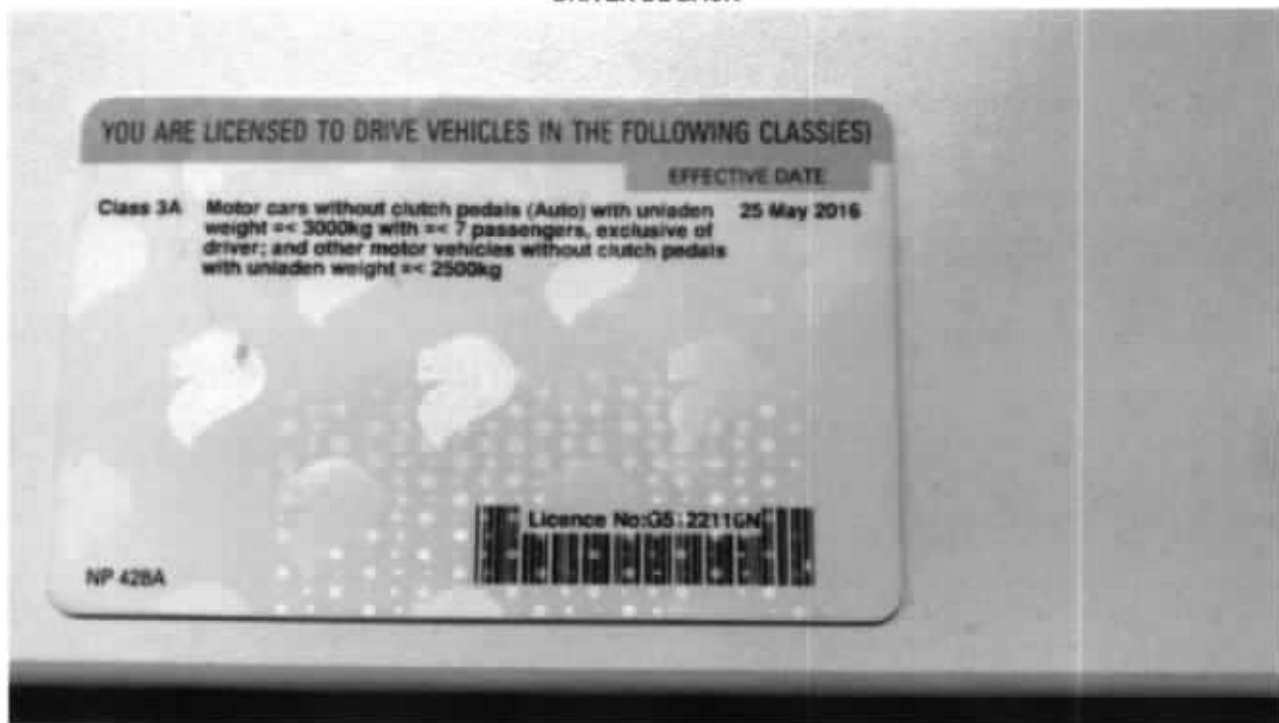
DRIVER IC BACK



DRIVER DL FRONT



DRIVER DL BACK



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



VEHICLE A



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.
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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	06/07/2018 12:56
Date Of Accident	05/07/2018 17:45
Exact Location Of Accident	ALONG PIE TOWARDS TUAS
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBG316D
Insured/Policyholder	
Name Of Registered Owner	SOLO PTE LTD
Co Reg No	201013506H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65158803
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200-1.5 (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?	YES
If No, Please state action to be taken	
Vehicle Category	GOODS VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	
Driver	
Name of Driver	HOI YUNG LIN (XU YONGLIN)
NRIC No	S8022102I
Date Of Birth	30/06/1980
Occupation	OUTDOOR
Date Of Driving Pass	02/06/2005
Driving Experience	13 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96824703
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 361 YUNG AN ROAD, #12-115, SINGAPORE 610361
Postcode	
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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: : XIAO JIANBIN
	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 SKETCH PLAN

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	SLN4203P
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKA519K
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

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.
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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.
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- (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.

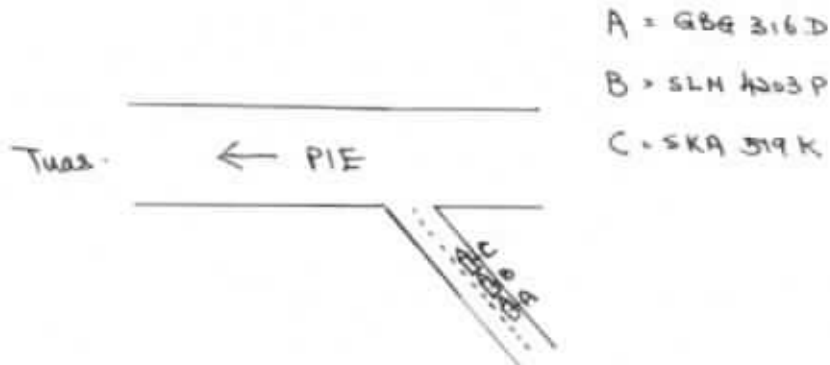

Policyholder's Signature
Date & Time:


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


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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 5/7/18 at about 3.45 p.m., I was driving my Company Vehicle Reg No. GBG 316 D traveling along PIE towards Tues.

While traveling I was accidentally hit onto in front vehicle Reg. No. SLN H203 P. When I came down to check and found that vehicle SLN H203 P hit against vehicle SKA 519 K. That all

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 Personnel's Signature
Name:
NRSC/VIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S80221021



HOI YUNG LIN
(XU YONGLIN)
许 泳 麟

Sex: Male
Date of Birth: 10-05-1980
Place of Birth: SINGAPORE



48241021



NR: S80221021



Date of Issue: 12-05-2010

Address:
APT BLK 304 YONG AN ROAD
#12-175
SINGAPORE 610361

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S80221021



HOI YUNG LIN
(XU YONGLIN)

License Valid Until: 02 Jun 2016
Issue Date: 02 Jun 2010



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

Class	Description	Valid Until
Class 1	Motor cars < 3500 kg with < 7 passengers, and/or motor vehicles < 3500 kg	02 Jun 2016

SP-0840



License No. S80221021



SINCERE
APPRAISAL SERVICES PTE LTD

VEHICLE DAMAGE INSPECTION REPORT

Our Ref: 418/TP/2018

Date: 27/7/2018

REFERENCE

Date of loss: 5/7/2018
Claimant: M/S Douglaslwg Transport

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLN4203P	Make &	Volkswagen
Reg date:	11/4/2012	Model	Polo GTI 1.4 A
Colour:	Grey	Engine No:	CAV380909
Type:	Motor Car	Chassis No:	WVWZZZ6RZCY541720
Type of Claims:	Third Party	Odometer No:	97115km
		Engine Cap:	1390cc

CONDITION OF VEHICLE AT THE TIME OF SURVEY (STATIC ONLY)

General Condition: Good	Steering: Good	Engine Modification: Nil
Paint work: Good	Handbrake: Good	Pre-accident
	Footbrake: Good	Damage: Nil

CONDITION OF TYRES

Front Left Size: Goodyear 215/40R17 70%	Front Right Size: Goodyear 215/40R17 70%
Rear Left Size: Yokohama 215/40R17 70%	Rear Right Size: Yokohama 215/40R17 70%

The above percentages represent the remaining life of the tyre threads

COST OF REPAIRS

	Repairer S\$	Adjuster S\$
Parts	S 16,547.02	S 13,274.98
Labour	S 7,620.00	S 6,240.00
Calculated Cost (S\$):	S 24,167.02	S 19,514.98

Recommended Lump Sum Repair Cost (S\$): \$ 15,600.00

Date of Assignment: 7/7/2018
Date Inspected: 7/7/2018
Est. repair Period: 12 days

Inspected At: Horizon Auto Turners Pte Ltd
25 Kaki Bukit Road 4
#01-48 Synergy
Singapore 417800

SINCERE APPRAISAL SERVICES PTE LTD Co.Reg no: 201800639R

60 Paya Lebar Road #07-41 Paya Lebar Square Singapore 409051

Tel: 6636 4628 Fax: 6636 4638 E-mail: sincereappraisal@gmail.com

ANNEX A

REPAIR DETAILS

Recommended Parts

No	Qty	Description	Condition	Repairer's Amount	Adjuster's Amount
1	1	Front bonnet assy	repair	\$ 1,271.80	\$ -
2	1	Front bumper assy	grazed/warped	\$ 1,106.80	\$ 1,106.80 ✓
3	1	Front bumper sponge	necessary	\$ 106.00	\$ 106.00 X SVC
4	2	Front bumper retainer	bent/necessary	\$ 128.60	\$ 128.60 ✓
5	2	Front bumper bracket	bent/necessary	\$ 88.60	\$ 88.60 X SVC
6	1	Front bumper reinforcement	bent/dented	\$ 380.20	\$ 380.20 ✓
7	1	Front bumper lower grille	bent/necessary	\$ 130.40	\$ 130.40 X SVC
8	1	Front bumper tow cover	missing	\$ 68.60	\$ 68.60 ✓
9	1	Front grille assy	bent/necessary	\$ 306.70	\$ 306.70 ✓
10	1	Front grille centre logo	necessary	\$ 80.50	\$ 80.50 ✓
11	1	Front grille 'GTT' emblem	necessary	\$ 82.30	\$ 82.30 ✓
12	1	Front grille 'Monster Tune' emblem	necessary	\$ 88.50	\$ 88.50 ✓
13	1	Front left headlamp	cracked	\$ 752.20	\$ 752.20 ✓
14	1	Front right headlamp	cracked	\$ 752.20	\$ 752.20 ✓
15	1	Front left fender	repair	\$ 898.70	\$ -
16	1	Front right fender	repair	\$ 898.70	\$ -
17	1	Front support panel assy	twisted	\$ 891.70	\$ 891.70 X R
				\$ 8,032.50	\$ 4,963.30
Less 10%				\$ 803.25	\$ 496.33
				\$ 7,229.25	\$ 4,466.97
				3746.60	
				- 10%	
				3371.94	
<u>Special Nett Items</u>					
1	10	Front bumper clips	necessary	\$ 50.00	\$ 50.00 30/
2	4	Front grille clips	necessary	\$ 20.00	\$ 20.00 15/
3	10	Front bumper lower spoiler clips	necessary	\$ 40.00	\$ 40.00 X SVC
4	1	Front bumper lower spoiler	warped	\$ 1,200.00	\$ 1,200.00 X SVC
5	1	Front bumper lower spoiler sealant	necessary	\$ 80.00	\$ 80.00 X SVC
6	6	Front bumper lower grille clips	necessary	\$ 30.00	\$ 30.00 X SVC
7	1	Front no plate	necessary	\$ 80.00	\$ 80.00 30/
				\$ 1,500.00	\$ 1,500.00
Total parts				\$ 8,729.25	\$ 5,966.97 75

ANNEX A

REPAIR DETAILS

Recommended Parts

No	Qty	Description	Condition	Repairer's Amount	Adjuster's Amount
1	1	Rear bumper assy	dented	\$ 1,045.80	\$ 1,045.80 ✓
2	2	Rear bumper bracket	necessary/bent	\$ 88.60	\$ 88.60 X SK
3	2	Rear bumper retainer	necessary/bent	\$ 124.60	\$ 124.60 ✓
4	1	Rear bumper reinforcement	dented	\$ 360.20	\$ 360.20 ✓
5	1	Rear tailgate assy	dented	\$ 1,452.40	\$ 1,452.40 ✓
6	1	Rear tailgate centre logo	necessary/bent	\$ 80.50	\$ 80.50 ✓
7	1	Rear tailgate 'Monster Tune' emblem	necessary	\$ 88.50	\$ 88.50 ✓
8	1	Rear tailgate 'GTI' emblem	necessary	\$ 82.30	\$ 82.30 ✓
9	1	Rear tailgate lock mechanism	bent	\$ 227.40	\$ 227.40 ✓
10	1	Rear left taillamp	bent	\$ 544.70	\$ 544.70 ✓
11	1	Rear right taillamp	bent	\$ 544.70	\$ 544.70 ✓
12	1	Rear end lower panel	repair	\$ 566.40	\$ -
13	1	Rear end lower panel top garnish	bent	\$ 172.30	\$ 172.30 ✓
14	1	Rear exhaust centre pipe with muffler complete assy	bent	\$ 1,820.30	\$ 1,820.30 X SK
15	4	Rear exhaust rubber mounting	necessary	\$ 76.60	\$ 76.60 X SK
				\$ 7,275.30	\$ 6,708.90
Less 10%				\$ 727.53	\$ 670.89
				\$ 6,547.77	\$ 6,038.01

4723.40
-176
4547.40

Special Nett Items

1	10	Rear bumper clips	necessary	\$ 50.00	\$ 50.00 30 ✓
2	1	Rear bumper lower spoiler sealant	necessary	\$ 80.00	\$ 80.00 X SK
3	10	Rear bumper lower spoiler clips	necessary	\$ 40.00	\$ 40.00 20 ✓
4	1	Rear bumper lower spoiler assy	warped	\$ 1,000.00	\$ 1,000.00 X SK
5	1	Rear no plate	necessary	\$ 80.00	\$ 80.00 30 ✓
6	4	Rear end lower panel top garnish clips	necessary	\$ 20.00	\$ 20.00 10 ✓
				\$ 1,270.00	\$ 1,270.00

Total parts

\$ 7,817.77 \$ 7,308.01 90

ANNEX B

REPAIR DETAILS

Recommended Labour

No	Description	Repairer's Amount	Adjuster's Amount
1	Labour for panel beating, cut, weld, straighten front affected area and replace front damaged parts.	\$ 1,000.00	\$ 800.00 <i>400</i>
2	To putty and spray painting front portion.	\$ 1,000.00	\$ 800.00 <i>300</i>
3	To check wiring and focus front headlamp.	\$ 50.00	\$ 30.00 <i>/</i>
4	To remove and install front bonnet lock mechanism.	\$ 80.00	\$ 60.00 <i>X</i>
5	To apply anti rust proofing to front affected area.	\$ 120.00	\$ 100.00 <i>30</i>
6	Labour for panel beating, cut, weld, straighten rear affected area and replace rear damaged parts.	\$ 1,000.00	\$ 800.00 <i>500</i>
7	To putty and spray painting rear portion.	\$ 1,000.00	\$ 800.00 <i>500</i>
8	To check rear lighting and wiring.	\$ 50.00	\$ 30.00 <i>/</i>
9	To remove and install rear tailgate lock mechanism.	\$ 80.00	\$ 60.00 <i>20</i>
10	To remove and install rear trim to facilitate the repair.	\$ 120.00	\$ 100.00 <i>30</i>
11	To apply anti rust proofing to rear affected area.	\$ 120.00	\$ 100.00 <i>30</i>
12	To remove and replace rear exhaust complete assy.	\$ 100.00	\$ 80.00 <i>X</i>
13	To apply colour sticker to front portion.	\$ 1,400.00	\$ 1,200.00 <i>200</i>
14	To apply colour sticker to rear portion.	\$ 1,400.00	\$ 1,200.00 <i>600</i>
15	Towing service.	\$ 100.00	\$ 80.00 <i>/</i>
Total labour :		\$ 7,620.00	\$ 6,240.00 <i>2850</i>

ANNEX C

REPAIR DETAILS

Adjusted Repair Cost

	Repairer's Amount	Adjuster's Amount
Total parts :	\$ 16,547.02	\$ 13,274.98
Total labour :	\$ 7,620.00	\$ 6,240.00
Total repair cost :	\$ 24,167.02	\$ 19,514.98

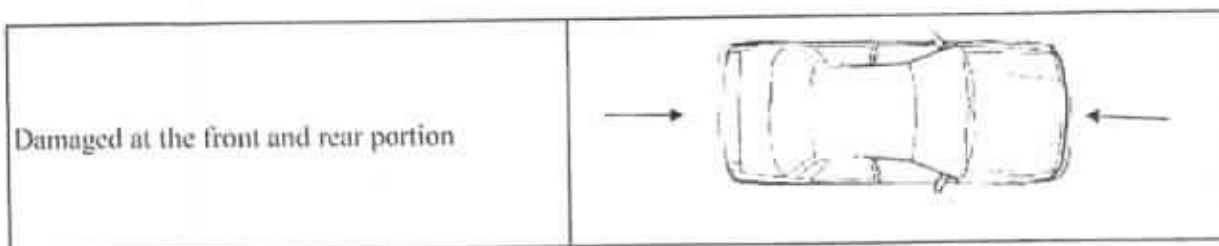
Adjusted Repair Cost (Lump Sum Repair)

\$ 15,600.00

F P - 3371.94
R P - 4251.06
F M - 75
R M - 90
L - 2850
10,638.00
L/S - 8519.49
= 8500

7 repair days

POINT OF IMPACT



BRIEF CIRCUMSTANCES OF ACCIDENT

The Insured's vehicle collided onto the Third Party's vehicle along KPE Expressway towards PIE Expressway, Tuas.

GENERAL DESCRIPTION OF DAMAGES

Our visual inspection of the vehicle revealed that the damages noted are at the front and rear portion.

SPECIAL REMARKS

We have inspected the actual damages found on the vehicle and recommend the replacement of parts and repairs accordingly. The estimated repair cost is \$24,167.02. The repairer has agreed to undertake the repairs at our adjusted lump sum amount of \$15,600.00.

We have not authorised the repair. Under normal circumstances, estimated 12 working days are required to repair the vehicle.

We are pleased to advise that the inspection work was carried out accordingly, and hereby submit our Inspection Report and photographs.



Dave Chang
Automotive Appraiser
AUTO. ENG, CAE, CGI
MIRTE, MSAAA, MTM

Automotive Appraiser: Dave Chang

Please note that this report is solely based on our findings at the time and place of inspection. This inspection has been carried out to our best knowledge and ability. Any other liability is hereby excluded.



Your Ref: SNM19D03364C02

Date: 10th Sep 2019

Our Ref: CS1/CTI19015776/Esd3e2

M/s China Taiping Insurance (S) Pte Ltd

3 Anson Road #16-00
Springleaf Tower
Singapore 079909

Dear Sir / Madam,

**EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: SLN 4203P
INSURED VEHICLE: SKA 519K
ACCIDENT DATE: 05/07/2018**

We thank you for your instruction on 04/09/2019.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SLN 4203P from M/s Sincere Appraisal Services Pte Ltd.
- b) Final Repair Bill of SLN 4203P from M/s Horizon Auto Tuners Pte Ltd.
- c) Singapore Accident Statement of Vehicles SLN 4203P, SKA 519K and GBG 316D.
- d) Police Report of Vehicles SLN 4203P.
- e) Colour damaged vehicle photographs of SLN 4203P.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: SLN 4203P
Make & Model	: Volkswagen Polo GTI 1.4 A
Year of Registration	: 2012
Chassis Number	: WVWZZZ6RZCY541720
Engine Capacity	: 1390 cc

2. We recommend that the repairs of the entire damage require about 7 (Seven) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLN 4203P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BONNET ASSY	TO REPAIR SEE LABOUR	1,271.80	-
1	FRONT BUMPER ASSY	GRAZED / WARPED	1,106.80	1,106.80
1	FRONT BUMPER SPONGE	SERVICEABLE	106.00	-
2	FRONT BUMPER RETAINER	BENT / NECESSARY	128.60	128.60
2	FRONT BUMPER BRACKET	SERVICEABLE	88.60	-
1	FRONT BUMPER REINFORCEMENT	BENT / DENTED	380.20	380.20
1	FRONT BUMPER LOWER GRILLE	SERVICEABLE	130.40	-
1	FRONT BUMPER TOW COVER	MISSING	68.60	68.60
1	FRONT GRILLE ASSY	BENT / NECESSARY	306.70	306.70
1	FRONT GRILLE CENTRE LOGO	NECESSARY	80.50	80.50
1	FRONT GRILLE 'GTI' EMBLEM	NECESSARY	82.30	82.30
1	FRONT GRILLE 'MONSTER TUNE' EMBLEM	NECESSARY	88.50	88.50
1	FRONT LEFT HEADLAMP	CRACKED	752.20	752.20
1	FRONT RIGHT HEADLAMP	CRACKED	752.20	752.20
1	FRONT LEFT FENDER	TO REPAIR SEE LABOUR	898.70	-
1	FRONT RIGHT FENDER	TO REPAIR SEE LABOUR	898.70	-
1	FRONT SUPPORT PANEL ASSY	TO REPAIR SEE LABOUR	891.70	-
1	REAR BUMPER ASSY	DENTED	1,045.80	1,045.80
2	REAR BUMPER BRACKET	SERVICEABLE	88.60	-
2	REAR BUMPER RETAINER	NECESSARY / BENT	124.60	124.60
1	REAR BUMPER REINFORCEMENT	DENTED	360.20	360.20
1	REAR TAILGATE ASSY	DENTED	1,452.40	1,452.40
1	REAR TAILGATE CENTRE LOGO	NECESSARY / BENT	80.50	80.50
1	REAR TAILGATE 'MONSTER TUNE' EMBLEM	NECESSARY	88.50	88.50
1	REAR TAILGATE 'GTI' EMBLEM	NECESSARY	82.30	82.30
1	REAR TAILGATE LOCK MECHANISM	BENT	227.40	227.40
1	REAR LEFT TAILLAMP	BENT	544.70	544.70
1	REAR RIGHT TAILLAMP	BENT	544.70	544.70

Report Ref No. CS1/CTI19015776/Esd3e2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR END LOWER PANEL	TO REPAIR SEE LABOUR	566.40	-
1	REAR END LOWER PANEL TOP GARNISH	BENT	172.30	172.30
1	REAR EXHAUST CENTRE PIPE WITH MUFFLER COMPLETE ASSY	SERVICEABLE	1,820.30	-
4	REAR EXHAUST RUBBER MOUNTING	SERVICEABLE	76.60	-
	LESS 10% DISCOUNT		-1,530.78	-847.00
			13,777.02	7,623.00
	SPECIAL NETT ITEMS			
10	FRONT BUMPER CLIPS (SN)	NECESSARY	50.00	30.00
4	FRONT GRILLE CLIPS (SN)	NECESSARY	20.00	15.00
10	FRONT BUMPER LOWER SPOILER CLIPS (SN)	SERVICEABLE	40.00	-
1	FRONT BUMPER LOWER SPOILER (SN)	SERVICEABLE	1,200.00	-
1	FRONT BUMPER LOWER SPOILER SEALANT (SN)	SERVICEABLE	80.00	-
6	FRONT BUMPER LOWER GRILLE CLIPS (SN)	SERVICEABLE	30.00	-
1	FRONT NO PLATE (SN)	NECESSARY	80.00	30.00
10	REAR BUMPER CLIPS (SN)	NECESSARY	50.00	30.00
1	REAR BUMPER LOWER SPOILER SEALANT (SN)	SERVICEABLE	80.00	-
10	REAR BUMPER LOWER SPOILER CLIPS (SN)	NECESSARY	40.00	20.00
1	REAR BUMPER LOWER SPOILER ASSY (SN)	SERVICEABLE	1,000.00	-
1	REAR NO PLATE (SN)	NECESSARY	80.00	30.00
4	REAR END LOWER PANEL TOP GARNISH CLIPS (SN)	NECESSARY	20.00	10.00
			2,770.00	165.00
	LABOUR			
	LABOUR FOR PANEL BEATING, CUT, WELD, STRAIGHTEN FRONT AFFECTED AREA AND REPLACE FRONT DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF FRONT BONNET ASSY, FRONT LEFT FENDER, FRONT RIGHT FENDER AND FRONT SUPPORT PANEL ASSY.		1,000.00	400.00
	TO PUTTY AND SPRAY PAINTING FRONT PORTION.		1,000.00	300.00
	TO CHECK WIRING AND FOCUS FRONT HEADLAMP.		50.00	30.00
	TO REMOVE AND INSTALL FRONT BONNET LOCK MECHANISM.	NOT NECESSARY	80.00	-
	TO APPLY ANTI RUST PROOFING TO FRONT AFFECTED AREA.		120.00	30.00

Report Ref No. CS1/CTI19015776/Esd3e2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR FOR PANEL BEATING, CUT, WELD, STRAIGHTEN REAR AFFECTED AREA AND REPLACE REAR DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF REAR END LOWER PANEL.		1,000.00	500.00
	TO PUTTY AND SPRAY PAINTING REAR PORTION.		1,000.00	500.00
	TO CHECK REAR LIGHTING AND WIRING.		50.00	30.00
	TO REMOVE AND INSTALL REAR TAILGATE LOCK MECHANISM.		80.00	20.00
	TO REMOVE AND INSTALL REAR TRIM TO FACILITATE THE REPAIR.		120.00	30.00
	TO APPLY ANTI RUST PROOFING TO REAR AFFECTED AREA.		120.00	30.00
	TO REMOVE AND REPLACE REAR EXHAUST COMPLETE ASSY.	NOT NECESSARY	100.00	-
	TO APPLY COLOUR STICKER TO FRONT PORTION.		1,400.00	300.00
	TO APPLY COLOUR STICKER TO REAR PORTION.		1,400.00	600.00
	TOWING SERVICE.		100.00	80.00
			7,620.00	2,850.00
GRAND TOTAL			24,167.02	10,638.00
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				8,500.00

Report Ref No. CS1/CTI19015776/Esd3e2

CHEN TSUE YEE

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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