23/03/2002 ASS. REC. BY;		REF: (S/A)	9 190 192301 kgf	Special Instruction:
Surveyor - K	punum	ASSIC	ENMENT (Office)	
From (Person):	Hor Yinrul	of	A19	Date/Time: 31.10-19 10-5hq.m
Estimated Cost:			Bill to:	
To Inspect Vehi		ESTEVATINUTI		sured: SMA 7736E
at Workshop m	s Hong Yo	P Seng		Tel: 91833008
of BIC 160	son ming	mu 408-	13	
Policy No:			Claim No:	496191684034
Sum Insured:			Excess:	
Make of Veh:				D.O.A. 27-10-2019
	REP. / REV 24 10.19 11.37a.		acted: Han Nung	H.O.D. Endorsement:
Date/Time	Action/Instruction	(V) Es	imate.	
	SMN DANAM	The latest terminal and the la		
	SMA THE B	- X		

kEF:

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ΔG	SS	£٩	¥.	N	VI.	E.	N.	1

8	ASSIGNMENT	1 1
From Date:	Veh No: Smv 233	FM Yr Regn: OT 19
Estimated Cost	Type: M.Car, I M.Cycle I Bus I Van I	Lorry / Taxi / Prime Mover /
OD TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or AD	
To Inspect Vehicle No: SMN 2337 M	Make: Ope 1 .	In sign p 00 1598
at Workshop m/s Heng Yap Seng 9183:		
of 160 sin Ming Drive #08=13	Sp.Reading 17573	-
Insured:	Eng/No:	
Policy No.	C/No: WOUZI	n 6 EF1 K10 5 7189
Claims No.	Gen. Cond: 200d Fair / Poor / Bu	
Sum Insured: Excess:	Steering: Inorder / Jammed / Leake	ed / Burnt or
(Client's Record)	Brake: Inerder / Jammed / Leake	ed / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STO A/Rim	or
	Tyre Size: F:	
(Policy Condition)	R:	225/55:RI7
Remark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZ	
repair at the time of inspection.	TOYO / YOKO or	Certinental
Bal. or Market Value:	Front O	Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm	R/Bal. mm
GIA / PR Seen: Consistent? : Yes or No	L/Balt, & mm	L/Bal. & mm
Est. Repairs: 4 - days Res.: Yes or No	D.O.A. 27/10/19	D.O.I. 31/10/19
Lum Sum: 1.8 / % 3 Val.: Yes or No	'Survey held at	
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O	IS I N/S I U/C I Rooftop or
Date: Person Contacted:	IN / OUT The II/C / Chassis frame / B	ody Structure affected due to collision.
Date / Time Action / Instruction	The O/C / Chassis frame / B	ouy structure anotice due to someon.
3//10 Est not ready, parts 04/12/20 confirmed with Mr Chong LS S	no Stade in local market. \$3850, 4 days (Red \$15338, 80	
Date/Time, File Pass to? : Preli. Report 1) 04/12 Typist : Final Report	Days Of Repair: 4 Resurvey No. of Trip: 1	Survey Fee:
Date/Time, File Polymn to?	dd Fee: Site Insp. (\$	Transportation:) S + RSSI
2)	Interview (\$)S+RSSI)Fholos
Bonard Earmet MED TD	Tech hys G	1 +1005 1 Others
Report Forms: MER-TP	West end (5)	7 (50000)
3850	L. Westerio	7010
		The second secon

PRE-REPAIR INSPECTION REQUEST - SMN2337M vs SMA7736E (OI) on D.O.A.: 27/10/2019

Fram: 1 Hor, Yintul

To: 'assignments@lkkauto.com', Admin A (admin-a@lkkauto.com)

Cc: Fong. Andy-SY, Fan, Winnie-LW, Abu Kassim, Noor Mariesa, Azlan, Syazairdina, Chan, Yoke Shi, Lim, Sheng Yang, Mithoosingh, Aashweenjeetkaur, Parthiban, Theerthan, Subramaniam, Divyashn

Sent: 10/31/2019 10:56:33 AM

Attachments: 3416.email.AiG.30.10.19.pdf

Hi,

Please refer to the enclosed request from Kurup & Boo.

Claim no : Case Owner :

: 4961916850SG003 : Bennie Tan Wei Zhong

If you have any queries/concerns, please let us know.

Kindly assist to assign Kenneth Kong as Single Joint Expert as requested.

Thanks & Regards,

Hor Yin Rul (Viviane)

AIG

FNOL Adjuster I

Singapore FNOL | Claims Operations - Auto

Tel: 8001206556 | Ext; 1002208 Yinrul,Hor@aig.com | www.aig.ag

From: boo@kurupnboo.com.sg [mailto:boo@kurupnboo.com.sg]

Sent: Thursday, October 31, 2019 10:53 AM

To: Hor, Yinrul

Cc: Fong, Andy-SY; Fan, Winnie-LW; Abu Kassim, Noor Mariesa; Azlan, Syazairdina; Chan, Yoke Shi; Lim, Sheng Yang; Mithoosingh, Aashweenjeetkaur; Parthiban, Theerthan;

Subramaniam, Divyashni; boo@kurupnboo.com.sg

Subject: RE: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SMA7736E AND SMN2337M ON 27/10/2019

Our Ref: BMC.3416.19,wh

31 October 2019

AIG Asia Pacific Insurance Pte Ltd

Attention: Ms Hor Yin Rui

Dear Sirs

We refer to your email dated 30 October 2019.

We are instructed to appoint Mr Kenneth Kong of LKK Auto Consultants Pte Ltd for the pre repair inspection.

Regards

Boo Moh Cheh

Kurup & Boo

111 North Bridge Road

#15-03 Peninsula Plaza

Singapore 179098

Tel: 6223 3343

Tax: 6225 7248

Veh In - KOC

From: Hor, Yinrul

Sent: Wed, 30 Oct 2019 07:46:42 +0000

To: boo@kurupnboo.com.sg

Ce: Fong, Andy-SY, Fan, Winnie-LW, Abu Kassim, Noor Mariesa, Azlan, Syazairdina, Chan, Yoke Shi, Lim, Sheng Yang, Mithoosingh, Aashweenjeetkaur, Parthiban,

Theerthan, Subramaniam, Divyashni

Subject: PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE SMA7736E AND SMN2337M ON 27/10/2019

Without Prejudice

Your Reference

: BMC.3416.19.wh

Our Reference

: 4961916850SG003

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
AIG In House Surveyor	AIG 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

Tel: 8001206556 | Ext: 1002208 Yinrul.Hor@aig.com | www.aig.sg

From: Boo Moh Cheh [mailto:boo@kurupnboo.com.sg]

Sent: Wednesday, October 30, 2019 3:13 PM

To: AIG SGP, Claims-Survey

Subject: [EXTERNAL] Our Ref : BMC.3416.19.wh

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

Our Ref : BMC,3416,19.wh

Your Ref : Insured vehicle no. SMA 7736E

30 October r 2019

AIG Asia Pacific Insurance Pte Ltd

Dear Sirs

REQUEST FOR PRE REPAIR INSPECTION ACCIDENT INVOLVING VEHICLES NO. SMN 2337M AND SMA 7736E ALONG PUNGGOL CENTRAL ON 27 OCTOBER 2019

We attach a copy of our letter today for your attention.

Regards

Boo Moh Cheh Kurup & Boo 111 North Bridge Road #15-03 Peninsula Plaza Singapore 179098 Tel: 6223 3343

Fax: 6225 7248

IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have

received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by American International Group, Inc. or its subsidiaries or affiliates either jointly or severally, for any loss or damage arising in any way from its use.

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KURUP & BOO

UEN 53130914B ADVOCATE & SOLICITOR COMMISSIONER FOR OATHS NOTARY PUBLIC 111 North Bridge Road #15-03 Peninsula Plaza Singapore 179098 Tel. No. 6223 3343 6221 8623 Fax. No. 6225 7248 Writer's e-mail:

boo@kurupnboo.com.sg. kurup@singnet.com.sg

Our Ref : BMC.3416.19.wh

Your Ref: Insured vehicle no. SMA 7736E

30 October r 2019

URGENT

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way #07-16 AIG Building Singapore 079120 Via email: aigsgp_claimssurvey@aig.com and BY HAND

Dear Sirs

ACCIDENT INVOLVING VEHICLES NO. SMN 2337M AND SMA 7736E ALONG PUNGGOL CENTRAL ON 27 OCTOBER 2019

We act for Cosmo Automobiles Rental Pte Ltd, the owner of the vehicle no. SMN 2337M which was involved in the above accident.

We attach a copy of our client's Singapore Accident Statement lodged by the driver of vehicle no. SMN 2337M for your immediate attention.

By way of notice, we inform you that our client damaged vehicle no. SMN 2337M is now in the workshop named below:

Heng Yap Seng Auto Services

Block 160, Sin Ming Drive #08-13 Sin Ming AutoCity

Singapore 575722

Contact: Mr Chong Han Meng

HP No.: 9183 3008 Fax: 6873 2017

We hereby give you **two days**' notice for your representative to go the above workshop to inspect our client's damaged vehicle. Kindly contact Mr Chong Han Meng prior to going to the workshop for the survey.

Yours faithfully

BOO MOH CHEH

 $\sim\sim\sim$

enc

cc Heng Yap Seng Auto Service

ATTRO GADAGE ATTE LTD (MENG)

MSH 19142767 / STA INSPECTION PTE LTD - Sin Ming ENTRY DATE & TIME 29:10/2019 14:21 SUBMITTED BY Wong Lip Yong

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.
- Information provided must be as truthful and accurate as possible. Any wilful misropresentation or witholding of material facts may allow incurance 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	29/10/2019 14:21	
Date Of Accident	27/10/2019 16:30	
Exact Location Of Accident	ALONG PUNGGOL CENTRAL	
Country/State of Loss	SINGAPORE	

	DETAILS OF OWN VEHICLE	C193	
Vehicle Registration Number	SMN2337M		

Insured/Policyholder

Name Of Registered Owner COSMO AUTOMOBILES RENTAL PTE LTD

Co Reg No 201719129M Email Address NOEMAIL

Mobile Phone No OFFICE-87502314

Vehicle Particulars

Manufacturer OPEL Model INSIGNIA

Exact Purpose for which vehicle was being used at time of accident WORK PURPOSE

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

for repair to your vehicle?

If No. Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE HIRE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE Fleet Policy NO

Policy Number 5107813422

Cover Note Number

Driver
Name of Driver
NG JIAN YUE

 NRIC No
 S9029508Z

 Date Of Birth
 17/08/1990

 Occupation
 OUTDOOR

 Date Of Driving Pass
 24/02/2015

Driving Experience 4 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87502314

Fax Number

Contact Number OFFICE-87502314

EMail Address NOEMAIL

Address

APT BLK 161 LORONG 1 TOA PAYOH

#02-1606 SINGAPORE

OTHER - HIRER

Postcode

310161

Was driver an employee of the Insured's Company NO

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 (including own vehicle)

2

involved in the accident

YES

Was any body injured in the Accident?

Was any injured conveyed to hospital by

NO

ambulance?

Was any other material or property damaged? I have been approached by unknown person(s) YES

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO 1

Details of Police Action

YES

Was the accident reported to the police? If Yes, Please state which Police Station

Police Station Name

CHANGKAT NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 109 TAMPINES STREET 11 #01-261 , POSTCODE: 521109 ,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-7819999 - FAX NO: 67832722

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO FOOTAGE WITH DRIVER / COMPANY

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Make/Model/Colour

SMA7736E

Details Of Properties

PRIVATE CAR

Vehicle Category

Name of Driver

CHIA KIAM PHENG

NRIC/Passport Number

Contact Number

S1277267Z 96749922

Address

Postcode

Page 2 of 20

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

140. Of Passenger (Incideng Driver)		
	DETAILS OF INJURED PERSON 1	
Name	NG JIAN YUE	T.
Approximate Age	29	
Injuries Sustain	REFER POLICE REPORT	
Injured person in which vehicle?	SMN2337M	
Were seat belts worn?		
Was this injured conveyed to hospital by ambulance?	NO	
Address	APT BLK 161 LORONG 1 TOA PAYOH #02-1606 SINGAPORE	
Postcode	310161	

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

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 the 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 (all insurer) 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 :
 - 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 rists 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/flaw 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.
 - 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		
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	面上面	
A =MA27		
1 0 0	AST OF THE PROPERTY OF	
FAME 2		
DESCRIBE CIRCUMSTANCES O		
As Pac Police	Report: 7/201910	28/2047.
		74
DECLARATION		
We declare the foregoing particula	ars are true in every respect.	2
		(10)
1100	424	
olicyholder's Signature Iate & Tene:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:
ent the second	Date & Time:	NRIC/FIN No.:

Common Statement Pg. 1



Date of Expiry:

Police Station Of Origin: Changkat NPP 109 Tampines Street 11 #01-261 SINGAPORE 521109 Tel No: 1800-7819999

1 of 3 Report No. 7/20191028/2047

REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made: Vide Report No.: Station Diary No.: 28/10/2019 13:22 Informant's Particulars Name of Informant: Address: NG JIAN YUE APT BLK 161 LORONG 1 TOA PAYOH #02-1606 SINGAPORE 310161 ID Type / ID No .: Contact No.: NRIC NO / S9029508Z Home/Office: Mobile: 87502314 Nationality: SINGAPORE CITIZEN Email: Sex: Age: Date of Birth: Type of informant: Male 29 Driver 17/08/1990 Race: Language: Institution / School Name: Chinese English Occupation: GRAB DRIVER Driving Licence Information:

General Information of the Accident Type of Injury Drink Date/Time of Type of Location: Others Drive: Accident: Accident: Straight Road No 27/10/2019 16:30 Location: PUNGGOL CENTRAL PUNGGOL ROAD ALONG PUNGGOL CENTRAL TOWARDS PUNGGOL ROAD JUST BESIDE WATERWAY POINT SHOPPING MALL Weather: Road Surface: Road Speed Limit Clear Dry Traffic Flow: Traffic Control: Traffic Volume: One Way Traffic Light - Working Moderate Type of Collision: Anyone conveyed by Between Moving Vehicles - Head To Rear ambulance: No

Class: 3

Vehicle No.	Type :	Make	Model	Color	Candillan	N 45
SMA7736E	Car	VOLKSWAGO				No. of Passenger
		N	TSI R-LINE AT SR	White	Slightly Damaged	1
SMN2337M	Car	OPEL	INSIGNIA GRANDSPO BI B16DTH		Seriously Damaged	0

1 1 .

1:

Common Statement Pg. 1



T/20191028/2047

Police Station Of Origin: Changkat NPP 109 Tampines Street 11 #01-261 SINGAPORE 521109 Tel No: 1800-7819999

2 of 3 Report No. T/20191028/2047

CONTINUATION OF REPORT

Details of Perso	n Involved	4.00	1. 111		er Paragoni
Any Pedestrian I	nvolved; No		1000	-	
No. of Pedestrian	ns Injured: NIL	Use of Pe	destriar	Cross	sing: NA
Driver		171. 1			
Name	CHIA KIAM PHENG		ID No		S1277267Z
Related Vehicle	SMA7736E (Car)		Contact No.		98749922
Hospital/Clinic	NIL .		Class Drivin Licens Expin	9	.Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc		the same of the sa	
	ted Medical Leave NIL	Degree of			
Driver		(, +)			
Name	NG JIAN YUE		ID No		S9029508Z
Related Vehicle	SMN2337M (Car)		Contact No.		87,502314
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class Drivin Licens Explry	9	Class; 3 Date of Expiry: NIL
Date Treatment	28/10/2019	Date Disc	harge	28/10	V2019
No, of Days grant	ted Medical Leave 05	Degree of			

Brief Details.

On 27/10/2019 at about 1630hrs, I was driving my vehicle (SMN2337M) along Punggol Central Iowards Punggol Road. Upon reaching a traffic light junction just outside Waterway Point, I stowed down and came to a complete stop. Suddenly, a vehicle from the rear collided with my vehicle, I alighted from my vehicle and made observation on the damages. Subsequently, both parties then went further down the road and we exchanged particulars. We also took a few pictures of the damages. Thereafter, both parties drove off.

There was no Traffic Police or ambulance at scene as there was no immediate medical attention required. There was no government property damaged, My vehicle has an in camera that was able to record the whole incident. I was then given 5 days MC.

1.1

Common Statement Pg. 1





Police Station Of Origin: Changkat NPP 109 Tampines Street 11 #01-261 SINGAPORE 521109 Tel No: 1800-7819999 3 of 3 Report No. T/20181028/2047

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 O	f Officer Recor	ding The Rep	oort:
Sgt 3 KHAIF	RUL HAZWAN	BIN AZMI	~ .
Signature O Not applicat	f Interpreter; de		
Officer in Ch	narge Of Case:		
SI MENTALLY	たいではLFAZDL できょうを204	I BIN ABDUL	LAH
Authenticatio	n Stamp "- E-		
	SIGNATURE		-

Signature Of Informant:		
Der.		
Date/Time: 28/10/2019 13:22	····	-
Classification Of Case;		
¥3		