| Surveyor Ga                                              |              |            |          | T (Office)          |          |                       |      |
|----------------------------------------------------------|--------------|------------|----------|---------------------|----------|-----------------------|------|
| From (Person); Stace                                     | y NG         | of         | Asm      | (AXA)               | D        | ate/Time: 13.12.19    | 1    |
| Estimated Cost:                                          |              |            | E        | Bill to:            | 123      |                       |      |
| OD / FP / WS / TP RE<br>To Inspect Vehicle No:           |              |            | MV / CS  |                     | Insured: | P( 256:               | Z    |
| at Workshop m/s (1)                                      |              |            |          |                     | _ Tel: _ | 6455 0012             |      |
| Policy No:                                               | 0            | ,          |          | Claim No:           | 59m02    | ASV                   |      |
| Sum Insured:                                             |              |            |          | Excess:             |          |                       |      |
| Make of Veh:                                             |              |            |          |                     | D        | .O.A. 12. Dec.        | 2019 |
| (Client's Record)  CA / REV / REP. / Date/Time: 12 12 19 | REV 24 HRS   | Person Con |          | 6-12-2016<br>Li Hui |          | H.O.D. Endorsement: _ |      |
| SLJ                                                      | nstruction ( | -          |          |                     |          |                       |      |
| PC 2                                                     | 162-CS3      | Asm Igui   | 9614 / G | CFSEL               | P. OA -  | 7/6/2019              |      |
| ~                                                        | ised pro     |            |          |                     |          |                       |      |
| Sulp                                                     | nrt pk       | s fer      | ort      |                     |          |                       |      |
|                                                          | 1            | : 18       |          | 9                   |          |                       |      |

Menu

P. Li Hun

V:14

51 ×

7.13.12.19 4.5/7·M



# Service Request Details

Claim

59M02A32

Reference

None Ø

Loss Date

December 12, 2019

Report Date

Dec 13, 2019 11:32:12 AM

Request Date

December 13, 2019

Due Date

December 20, 2019

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

### Actions

Next Step

Agree to perform service

Decline Work

Accept Work

### Vehicle Information

Incident Vehicle Registration #

SLJ361M

LKK AUTO CONSULTANTS PTE LTD (TP) -

iviodei

111

QASHQAI-2.0 CVT ABS D/AIRBAG 2WD 5DR S/R (A)

Service Address

Primary Contact/Insured

SAHRUL TASHA TPT SVS 713 YISHUN STREET 71, #04-214, 760713, Singapore 65471626 NICKI@FLEXI-ASSURE.COM

#### Claim Handler

NG Stacey 6568804351 stacey.ng@axa.com.sg

Additional Instructions

5

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

Menu

New Message



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Date: 19/12/2019

## **Immediate Advice**

To: AXA Insurance Pte Ltd

# Survey details

| Date of loss        | 12-Dec-19    |
|---------------------|--------------|
| Date of appointment | 16-Dec-19    |
| Date of survey      | 16-Dec-19    |
| Location of survey  | Complete VMS |

# Vehicle Details:

| Claim Type:          | Third Party    |
|----------------------|----------------|
| Vehicle number       | SLJ 361M       |
| Make and Model       | Nissan Qashqai |
| Date of registration | 25/11/2016     |
| Excess               |                |
| Market Value         | \$70,000       |
| Parf Rebate          | \$51,515       |
| Nett Loss            | \$18,485       |

## Repair details

| Initial Estimate           |                                                                        |
|----------------------------|------------------------------------------------------------------------|
| Proposed/Revised repair co | ost:                                                                   |
| Parts                      |                                                                        |
| Check item                 |                                                                        |
| Labour                     |                                                                        |
| Total                      |                                                                        |
| Lump Sum(if applicable)    |                                                                        |
| Number of days of repair   |                                                                        |
| Remarks:                   | The Estmated Repair Cost of the<br>Damaged vehicle is in the region of |

\$8000 - \$10,000

### **DHIWAR Namrata**

From:

Gan Li Hui lihui@completevms.com.sg>

Sent:

Friday, December 13, 2019 10:25 AM

To:

SG AXA Insurance SM AXA SGP - Motor Survey

Subject:

[EXTERNAL] NOTICE OF ACCIDENT: SLJ361M Your ref: PC256Z

Categories:

Namrata

#### Without Prejudice

Dear Sir,

ACCIDENT INVOLVING SLJ361M AND PC256Z ON 12/12/2019 ALONG HOUGANG AVE 8 AT ABOUT 08:15 HRS.

We act for JIMMY KOK PAK KEEN owner of vehicle no. SLJ361M with instruction to repair the vehicle.

Please provide us a list of at least 10 motor surveyors.

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

Venue Complete VMS Pte Ltd

176, Sin Ming Drive,

#03-14,

Singapore 575721

If you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you. Please note that there will also be a storage charge of \$60 per day on the 2 day notice period commencing from the date of this letter.

Thank you & Best Regards, Gan Li Hui (Ms) Complete VMS PTE LTD

Block 176 Sin Ming Drive, #03-14 Sin'Ming Autocare Complex, Singapore 575721

Tel: 6455 0012 Fax: 6554 0012

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any false reporting may be referred to the Police for investigation.

- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

|                            | ACCIDENT STATEMENT |  |
|----------------------------|--------------------|--|
| Date Of Report             | 13/12/2019 10:55   |  |
| Date Of Accident           | 12/12/2019 08:15   |  |
| Exact Location Of Accident | HOUGANG AVE 8      |  |
| Country/State of Loss      | SINGAPORE          |  |

| DETAILS | OF OWN | VEHI | CLE |
|---------|--------|------|-----|
|---------|--------|------|-----|

SLJ361M Vehicle Registration Number

Insured/Policyholder

JIMMY KOK PAK KEEN Name Of Registered Owner

S1440634D NRIC No NOEMAIL **Email Address** 

(LOCAL) +65-97332181 Mobile Phone No OTHERS-97332181 Alternative Phone No

Vehicle Particulars

Manufacturer NISSAN

QASHQAI-2.0 CVT ABS D/AIRBAG 2WD 5DR S/R (A) Model

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?

If No. Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

D19MPC0006081

Cover Note Number

Driver

JIMMY KOK PAK KEEN Name of Driver

S1440634D NRIC No 20/11/1960 Date Of Birth INDOOR Occupation 08/12/1978 Date Of Driving Pass

41 YEARS AND 0 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-97332181 Mobile Number

Fax Number

OTHERS-97332181 Contact Number

**EMail Address** NOEMAIL

205A COMPASSVALE LANE Address

#06-41

541205 Postcode

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

CHAIN COLLISION Type Of Accident

Weather Conditions CLEAR

DRY Road Surface

Other Information

NO Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

3

NO

YES

NO

: LIM LEE KHENG

ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY:

GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

10 UBI AVENUE 3

Police Station Address SINGAPORE

TEL NO: - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT NO: T/20191212/7025

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

PC256Z

Vehicle Make/Model/Colour

**Details Of Properties** 

COMMERCIAL VEHICLE Vehicle Category

MOHAMED NOOR RASHID BIN MOHD KASSIM Name of Driver

S7234814A NRIC/Passport Number

88150852/90115254 Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

SLR8389P

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

ONG KIAN LOON

NRIC/Passport Number

\$79157891

Contact Number

96818389

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **DETAILS OF INJURED PERSON 1**

Name

JIMMY KOK PAK KEEN

Approximate Age

Injuries Sustain

9 DAYS MEDICAL LEAVE

Injured person in which vehicle?

SLJ361M

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

### **DETAILS OF INJURED PERSON 2**

Name

LIM LEE KHENG

Approximate Age

Injuries Sustain

9 DAYS MEDICAL LEAVE

Injured person in which vehicle?

SLJ361M

Were seat belts worn?

YES

Was this injured conveyed to hospital by

NO

ambulance?

Address Postcode

#### 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 <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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 (all insurers) 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 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.:

ATTORNEY TO PRODUCE THE ATTORNEY AT

| KETCH PLAN                               |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| Refer to T                               | Police report as attach             | led.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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| DECLARATION                              | ciculars are true in every respect. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| // we declare the foregoing part         | inculais are true in every respect. | 1 ~ ~                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 9                                        |                                     | $\vee \gamma$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Balla shalder's Signature                | Driver's Signature                  | Reporting Centre Personnel's Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Policyholder's Signature<br>Date & Time: | (If driver is not the policyholder) | Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                          | Date & Time:                        | NRIC/FIN No.:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

Date & Time:



T/20191212/7025

1 of 4

Report No. T/20191212/7025

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

#### REPORT OF A TRAFFIC ACCIDENT

| Date/Tim<br>12/12/20 | e Report M<br>19 19:28   | ade:                      | Vide Report No.:                       | Station Diary No.:         |
|----------------------|--------------------------|---------------------------|----------------------------------------|----------------------------|
| Informa              | nt's Particu             | ilars                     |                                        |                            |
| Name of              | Informant:<br>OK PAK K   |                           | Address:<br>205A COMPASSVALE LANE      | #06-41 SINGAPORE 541205    |
| ID Type<br>NRIC NO   | / ID No.:<br>D / S144063 | 34D                       | Contact No.:<br>Home/Office:           | Mobile: 97332181           |
| National             |                          |                           | Email:<br>kokjimmy120@gmail.com        |                            |
| Sex:<br>Male         | Age:                     | Date of Birth: 20/11/1960 | Type of Informant:<br>Passenger        |                            |
| Race:<br>Chinese     | Race:                    |                           | Language:<br>English                   | Institution / School Name: |
| Occupation:          |                          | ager                      | Driving Licence Information:<br>Class: | Date of Expiry:            |

| Type of<br>Accident:                                                                                           | Injury<br>Others | Drink<br>Drive:<br>No                  | Date/Time of<br>Accident:<br>12/12/2019 08:15. | Type of Location<br>Straight Road              |
|----------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------|------------------------------------------------|------------------------------------------------|
| Location: HOUGANG                                                                                              | AVENUE 8         | Road Surface:                          |                                                | Road Speed Limit:<br>50 Km/h                   |
| [Manager   1987   1987   1987   1987   1987   1987   1987   1987   1987   1987   1987   1987   1987   1987   1 |                  |                                        |                                                |                                                |
| Clear                                                                                                          |                  |                                        |                                                | Traffic Volume:                                |
| Clear Traffic Flow: Two Way                                                                                    |                  | Traffic Control:<br>Traffic Light - Wo | rking                                          | Traffic Volume:<br>Light<br>Anyone conveyed by |

| Details of V | THE RESIDENCE OF THE PARTY. | からから ちゃんべん はましいかかけるかったかい | 1.00    | Color                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Condition                           | No of Passenger |
|--------------|-----------------------------|--------------------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------|
| Vehicle No.  | Type                        | Make                     | Model   | THE RESERVE OF THE PARTY OF THE | NAMES AND ADDRESS OF TAXABLE PARTY. | 4               |
| PC256Z       | Van                         | TOYOTA                   | Hiace   | White                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Seriously<br>Damaged                | 1               |
| SLJ361M      | Car                         | NISSAN                   | Qashqai | Brown                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Seriously<br>Damaged                | 1               |
| SLR8389P     | Car                         | MERCEDES<br>BENZ         | CLA180  | Silver                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Slightly<br>Damaged                 | 1               |

| Details of V | ehicle Insurance                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            | 1200        |
|--------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------|
| Vehicle No.  | Insurance Company                        | Insurance No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Effective  | Expiry Date |
|              | Illisuration company                     | THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NA | 25/11/2019 | 24/11/2020  |
| SLJ361M      | INDIA INTERNATIONAL INSURANCE<br>PTE LTD | d 19111bc0000001                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 20/11/2010 |             |





2 of 4

Report No. T/20191212/7025

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

#### CONTINUATION OF REPORT

| Details of Person | CONTRACT CONTRACTOR AND ADDRESS OF THE PARTY |            | 11年日後       | 244                     |                                   |  |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------|-------------------------|-----------------------------------|--|
| Any Pedestrian Ir |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |             |                         |                                   |  |
| No. of Pedestrian | s Injured: NIL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Use of Ped | destrian    | Cross                   | ing: NA                           |  |
| Driver            | THE CONTRACTOR OF THE PROPERTY | 2 (大学建筑)   | ID No.      |                         |                                   |  |
| Name              | MOHAMMAD NOOR RASHID BIN MONHD<br>KASSIM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |             |                         | S7234814A                         |  |
| Related Vehicle   | PC256Z (Van)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |             | ct No.                  | 88150852                          |  |
| Hospital/Clinic   | NIL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |            |             | of<br>g<br>ce &<br>Date | Class: NIL<br>Date of Expiry: NIL |  |
| Date Treatment    | NIL Date Disci                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |             | NIL                     |                                   |  |
|                   | No. of Days granted Medical Leave NIL Degree of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |             |                         |                                   |  |
| Passenger         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |             | atta:                   |                                   |  |
| Name              | JIMMY KOK PAK KEEN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            | ID No.      |                         | S1440634D                         |  |
| Related Vehicle   | SLJ361M (Car)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |            |             | ct No.                  | 97332181                          |  |
| Hospital/Clinic   | ORTHOPAEDIC AND SPINE CLINIC (NOVENA)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |            |             | of<br>g<br>ce &<br>Date | Class: NIL<br>Date of Expiry: NIL |  |
| Date Treatment    | 12/12/2019                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Date Disc  | harge 12/12 |                         | 2/2019                            |  |
|                   | ted Medical Leave 09                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Degree of  | 3-          |                         |                                   |  |
| Passenger         | CE EL TILLER STATE EL LIVER DE L'ACTUAL DE |            |             |                         |                                   |  |
| Name              | LIM LEE KHENG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |            | ID No       |                         | S1591941H                         |  |
| Related Vehicle   | SLJ361M (Car)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |            |             | ct No.                  | 94888284                          |  |
| Hospital/Clinic   | ORTHOPAEDIC AND SPINE CLINIC (NOVENA)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |            |             | of<br>g<br>ce &<br>Date | Class: NIL<br>Date of Expiry: NIL |  |
| Date Treatment    | 12/12/2019                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Date Disc  | harge       | 12/12                   | 2/2019                            |  |
|                   | ted Medical Leave 09                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Degree of  |             | Serio                   |                                   |  |





3 of 4

Report No. T/20191212/7025

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

#### CONTINUATION OF REPORT

| Driver                            |                |     | of Tables | 106.EXE                             | a gyar |                                   |
|-----------------------------------|----------------|-----|-----------|-------------------------------------|--------|-----------------------------------|
| Name                              | ONG KIAN LOON  |     |           | ID No.                              |        | S7915789I                         |
| Related Vehicle                   | SLR8389P (Car) |     |           | Conta                               | ct No. | 96818389                          |
| Hospital/Clinic                   | NIL            |     |           | Class<br>Drivin<br>Licend<br>Expiry | g      | Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | NIL            |     | Date Disc | te Discharge NIL                    |        |                                   |
| No. of Days granted Medical Leave |                | NIL | Degree of | f Injury                            | NIL    |                                   |

Brief Details.

On 12/12/19 at about 8.15am, my vehicle was behind a silver mercedes SLR8389P both of us were stationary at a red traffic light. For about 45 seconds waiting at the red light, my vehicle was rear ended by a white Toyota Hiace PC256Z which pushes my stationary car forward hitting the front vehicle. Both me and my passenger (Lim Lee Kheng, S1591941H) then alighted from our vehicle to understand the situation. Subsequently I exchanged particulars with the driver of the white toyota hiace namely, Mohamed Noor Rashid Bin Mohd Kassim, S7234814A who then admitted that he will report the accident to his insurer as the damages were too extensive.

I exchange particulars with the front driver namely, Ong Kian Loon, S7915789I who also informed us to make an accident report.

At the point of accident both me and my passenger were not feeling well and thus seek medical attention. The doctor then granted a total of 9 days of MC to both me and my passenger.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 4 of 4 Report No. T/20191212/7025

CONTINUATION OF REPORT

| 0 | 40 | tch | P | lan |
|---|----|-----|---|-----|

Authentication Stamp

NP168

Informant is not able to provide sketch plan

| Signature Of Officer Recording The Report:<br>Not applicable                        | Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Signature Of Interpreter:<br>Not applicable                                         | Date/Time: 12/12/2019 19:28                                                                                                         |
| Officer In Charge Of Case:<br>TP / TPHQ /<br>WONG SIEU LUI<br>Contact No.: 65476151 | Classification Of Case:                                                                                                             |

# > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

| Owner ID Type:                | Singapore NRIC                           |  |  |
|-------------------------------|------------------------------------------|--|--|
| Owner ID:                     | 634D                                     |  |  |
| Vehicle No.:                  |                                          |  |  |
| Vehicle to be Exported:       | SLJ361M                                  |  |  |
| Intended Deregistration Date: | No                                       |  |  |
| Vehicle Make:                 | 16 Dec 2019                              |  |  |
| Vehicle Model:                | NISSAN                                   |  |  |
|                               | QASHQAI 2.0 CVT ABS D/AIRBAG 2WD 5DR S/R |  |  |
| Primary Colour:               | Purple                                   |  |  |
| Manufacturing Year:           | 2016                                     |  |  |
| Engine No.:                   | MR20429928W                              |  |  |
| Chassis No.:                  | SJNFBAJ11U1770834                        |  |  |
| Maximum Power Output:         | 106.0 kW (142 bhp)                       |  |  |
| Open Market Value:            | \$19,653.00                              |  |  |
| Original Registration Date:   | 25 Nov 2016                              |  |  |
| First Registration Date:      | 25 Nov 2016                              |  |  |
| Transfer Count:               | 0                                        |  |  |
| Actual ARF Paid:              | \$19,653.00                              |  |  |
| PARF Eligibility:             | Yes                                      |  |  |
| PARF Eligibility Expiry Date: |                                          |  |  |
| PARF Rebate Amount:           | 24 Nov 2026                              |  |  |
|                               | \$14,739.00                              |  |  |
| OE Expiry Date:               | 24 Nov 2026                              |  |  |
| COE Category:                 | B - Car above 1600cc or 97kW (130bhp)    |  |  |
| COE Period(Years):            | 10                                       |  |  |
| QP Paid:                      | \$53,001.00                              |  |  |
| COE Rebate Amount:            | \$36,776.00                              |  |  |
| Total Rebate Amount:          | \$51,515.00                              |  |  |
| information and the transfer  | 427,273,00                               |  |  |

The information contained herein is correct as at 16 Dec 2019

THE ONLY PLACE FOR SMART CAR BUYERS

Qashqai Used Vehicle List (12 vehicles)

Car Model Price Depreciation Reg Date Eng Cap Mileage Company Availability

Nissan Qashqai 2.0A Premium Moonroof \$9,050 /yr 30-Nov-2016 1,997 cc 36,729 km Trillium Automobile Pte Ltd

Available

STA Welcome! In House Financing Available. Buy With A Peace Of Mind. 1 Owner, Low Mileage, 100% Genuine Mileage, Well Maintained, No Chassis/Structural Damage, Immaculate Condition, All Trade In Welco...

Office No. - 64632050

Neo - 83694896 | Nic - 91182220 | Jason - 98157511 | Sky - 91191186

Nissan Qashqai 2.0A \$68,800 \$8,500 /yr 22-Nov-2016 1,997 cc 36,207 km The Car Enthusiast Pte Available Ltd

1 Owner Only! Super Low Mileage! Don't Miss! Bank Or In House Loan Available. Call For More Enquiries!

Office No. - 66848470

Pan - 91010990 | Sebastian - 96828212 | Andy - 97317318 | Poh - 87381401

Nissan Qashqai 2.0A \$79,500 \$10,090 /yr 10-Nov-2016 1,997 cc 36,000 km Available

Very Careful Driver. First And Only Owner.

Office No. - -

Andy - 91445369

Cheapest Depreciation And Pricing In Market! 1 Owner Only With High Paper Value! Meticulously Well Maintained By Previous Owner! Guaranteed Accident Free With Superb Interior/Exterior Condition! View ...

Office No. - -

Francis Yao - 93275727 | Alex Tan - 97556887

Nissan Qashqai 2.0A \$72,800 \$9,260 /yr 05-Oct-2016 1,997 cc 61,330 km House De Carz Trading Available Premium Moonroof

Office No. - -

Casper Lee - 93855920 | Adrian - 93888488

Easy And Flexible In-House Loan And Balloon Scheme Available, No Gimmicks! 1 Owner, GPS/DVD/Bluetooth, Keyless Entry/Start, Auto HID HeadLights With LEDs DRL, Electric Leather Seats, 19" Sports Rims, ...

Office No. - 67772200

John Toh - 92717577 | Bernard Teng - 96818152 | Jing Jing - 98467878 | Alvin Neo - 81886100

Nissan Qashqai 2.0A \$71,800 \$9,130 /yr 30-Sep-2016 1,997 cc 55,000 km Motor Kaiser Enterprise Available

Full Loan Available, Special Bank Loan Interest Rate At 1.98%. Immediate Transfer On The Spot Upon Full Payment, Come With Nice Number Plate 8881. Well Maintained, Low Mileage Done, Spacious And Power...

Office No. - 66593811

Sim - 96723811 | Steven - 93870966

Nissan Qashqai 2.0A \$73,600 \$9,420 /yr 22-Sep-2016 1,997 cc 49,700 km Jetsprint Auto Available Enterprises

1 Owner, Fully Serviced And Maintained By Agent (Tan Chong Motors) Stylish Crossover Equipped With A Powerful And Fuel Efficient 2L Engine And Mated To A CVT Gearbox Providing A Powerful Daily Drive! ...

Office No. - 63484711

Michael Foo - 96906722 | Mr Ho - 87788448 | Mr Chua - 96714711

Nissan Qashqai 2.0A \$72,000 \$9,350 /yr 10-Aug-2016 1,997 cc 50,800 km Motorist Pte Ltd Available

1 Owner Unit. Always Parked Under Shelter. Fully Serviced And Maintained By Agent (Tan Chong Motors), New Tyres. Workshop/STA Evaluation Welcome. Loan Available With Lowest Interest Rates From 2.28%. ...

Office No. - 65898800

Roman - 97251960 | Eugene Yeo - 98307999

Nissan Qashqai 2.0A Premium Moonroof

\$70,000

\$9,190 /yr 27-Jun-2016 1,997 cc 40,000 km Motorist Pte Ltd

Available

Well Maintained Unit With Low Mileage. Trade In Welcome, High Loans Available Up To 80% With Low Interest Rate From 2.28%. Call /Whatapps Now To Book An Appointment To View. Strictly Appointment Based...

Office No. - 65898800

Benedictine - 81813664 | Kanthan - 90225037

Nissan Qashqai 2.0A Premium Moonroof

\$72,288

\$9,580 /yr

23-Jun-2016 1,997 cc

48,000 km YS Auto Pte Ltd

Available

1 Owner. Flexible Loan Available. 100% Accident Free, Perfect Gearbox, Smooth Engine With Super Undercarriage. Beautifully Maintained By Owner, Vehicle Always Park Under Shelter, Extremely Neat And Cl...

Office No. - 64669792

Leon Goh - 96666613 | Teo - 97433225 | Ken Wang - 88261199 | Sham - 96629744

Nissan Qashqai 2.0A Premium Moonroof

\$66,888

\$8,860 /yr

19-May-2016 1,997 cc

50,000 km Creative Auto

Available

3 Free Servicing Package. Cheapest Depreciation And Pricing In Market! 1 Owner Only With High Paper Value! Meticulously Well Maintained By Previous Owner! Guaranteed Accident Free With Superb Interior...

Office No. - -

Ben Goh - 90077863 | Alex Tan - 97556887

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Page No.:1 of 1

| i el                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | PRE-REPAIR INS                                                                                                                            | SPECTION REPORT                                                         | (中国) [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2 |  |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------|--|
| AXA                                                | INSURANCE PTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | LTD                                                                                                                                       | Ref: CS3/ASM19022020/Gtf3e2                                             |                                                 |  |
| 8 SHENTON WAY #24-01 AXA TOWER<br>SINGAPORE 068811 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Date: 26-12-2019                                                                                                                          |                                                                         |                                                 |  |
| ATTN : STACEY NG                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Code: ASM                                                                                                                                 |                                                                         |                                                 |  |
| 1.                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Policy Particular                                                                                                                         | s :- (THIRD PARTY CLAIM)                                                |                                                 |  |
|                                                    | Insured Veh.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | PC 256Z                                                                                                                                   | Veh. Inspected                                                          | SLJ 361M                                        |  |
|                                                    | Policy No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                           | Coverage (\$)                                                           | 0.00                                            |  |
|                                                    | Claim No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | S9M02A32                                                                                                                                  | Excess (\$)                                                             | 0.00                                            |  |
|                                                    | Assign From                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | STACEY NG                                                                                                                                 | Assign Date                                                             | 13/12/2019                                      |  |
| 2.                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Vehicle Pa                                                                                                                                | rticulars & Condition                                                   |                                                 |  |
|                                                    | Make & Model                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | NISSAN QASHQAI 2.0                                                                                                                        | c.c                                                                     | 1997                                            |  |
|                                                    | Engine No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | HIDDEN                                                                                                                                    | Year of Reg.                                                            | 2016                                            |  |
|                                                    | Chassis No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | SJNFBAJ11U1770834                                                                                                                         | Colour                                                                  | PURPLE                                          |  |
|                                                    | Odometer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 67781 KM                                                                                                                                  | Steering                                                                | IN ORDER                                        |  |
|                                                    | Brakes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | IN ORDER                                                                                                                                  | Modification                                                            | SPORTS RIM                                      |  |
|                                                    | General                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | GOOD                                                                                                                                      |                                                                         |                                                 |  |
| 3.                                                 | Bar State of the S | Cond                                                                                                                                      | litions of Tyres                                                        |                                                 |  |
|                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Size                                                                                                                                      | Make                                                                    | Balance                                         |  |
|                                                    | R/H Front Tyre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 225/45 R19                                                                                                                                | DUNLOP                                                                  | 6 mm                                            |  |
|                                                    | L/H Front Tyre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 225/45 R19                                                                                                                                | DUNLOP                                                                  | 6 mm                                            |  |
|                                                    | R/H Rear Tyre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 225/45 R19                                                                                                                                | DUNLOP                                                                  | 6 mm                                            |  |
|                                                    | L/H Rear Tyre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 225/45 R19                                                                                                                                | DUNLOP                                                                  | 6 mm                                            |  |
| 4.                                                 | in terms thrown                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Descrip                                                                                                                                   | otion of Damages                                                        |                                                 |  |
|                                                    | THE VEHICLE SUSTAINED DAMAGES AT THE FR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                           | RONT AND REAR PORTION.                                                  |                                                 |  |
| 5.                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Gene                                                                                                                                      | eral Information                                                        |                                                 |  |
|                                                    | Accident Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 12/12/2019                                                                                                                                | Inspect Date / Time                                                     | 16/12/2019 ( 03:00 PM )                         |  |
|                                                    | Survey held at                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | COMPLETE VMS PTE LTD                                                                                                                      |                                                                         |                                                 |  |
|                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | BLK 176 SIN MING DRIVE #03                                                                                                                | ILK 176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLEX SINGAPORE 57572 |                                                 |  |
| 5a.                                                | SSME STEEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                           | Remarks                                                                 |                                                 |  |
|                                                    | B) THE REPAIR E<br>THE REPAIRER V<br>C) ENCLOSED PL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ON WAS CONDUCTED ON A "V<br>STIMATE WAS NOT PRESENT<br>VAS TOLD TO PREPARE THE E<br>EASE FIND DAMAGED VEHICL<br>ED REPAIR COST OF THE DAM | ED AT THE TIME OF INSPECT<br>ESTIMATE.<br>LE PHOTOGRAPHS.               | TON.                                            |  |
| 5b.                                                | THE STREET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Estimate Days of Repair                                                                                                                   |                                                                         |                                                 |  |
|                                                    | ESTIMATED NOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | MAL PERIOD FOR REPAIR:                                                                                                                    | 3 Working                                                               | Days                                            |  |

Report Ref No. CS3/ASM19022020/Gtf3e2

Inspected By

XING GUO QIANG

K.K.LAU CPT(RET)

M.MATAI, AMSAE-A

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

Automotive Assessor

REGD Auto Consultant-SAE, Licensed Appraiser

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