93 63295775 Ms Wong

ASS. REC. BY: | REF 28/SM019022793/K+d3eb Special Instructions:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Grace Teo of SMO Date/Time: 27/12/19 @ 9.41am

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJV 5510C Insured: SLG 3844H

at Workshop m/s Hui Yang Tel: 64515752

of Blk 176 Sin Ming Drive # 04-02

Policy No: Claim No: CMTD1905986/LOR

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 25/12/19

CA / REV / REP. / REV 24 HRS (up) H.O.D. Endorsement:

Date/Time: 9.53am @ 27/12/19 Person Contacted: Bel Vehicle IN / OUT

Date/Time	Action/Instruction
	Estimate (✓)
	SJV 5510C - X
	SLG 3844H - X
31/12-	Sent email preliadvise via email.
	lump sum $1100/- (Red: 3609.80; 76%)

93 63295175 MS Wong

ASS. REC. BY: | REF 28/SM019022793/KL d3ep Special Instructions:

Surveyor: Kennesh

ASSIGNMENT (Office)

From (Person): Grace Teo of SMO Date/Time: 27/12/19 @ 9.41am

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJV5510C Insured: SLG 3844H

at Workshop m/s Hui Yang Tel: 64515752

of BIK 176 Sin Ming Drive # 04-02

Policy No: Claim No: CMTD1905986/LOR

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 25/12/19

CA / REV / REP. / REV 24 HRS (up) H.O.D. Endorsement:

Date/Time: 9.53am @ 27/12/19 Person Contacted: Bel Vehicle IN / OUT

Date/Time	Action/Instruction
	SJV5510C - X
	SLG 3844H - X
31/12	Sent email preliadvise via email.
	lump sum $1100+ (Red: 3609.80; 76%)

ASS. REC. BY: Kenneth

REF: J'no /

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Ifui Yang

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: 1'20 Person Contacted: _____ Vehicle: IN / OUT

Veh No: SJV 5510 C Yr Regn: 01, 10

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Kia Cerato c.c 1591

Colour M Red A/C: Insured / Std / NI / NA

Sp.Reading 178294 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KNAFW 411MA 5125765

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi : NII / S/Rim / STD A/Rim or _____

Tyre Size: F: Kepsen 215/45ZR17

R: Kumho

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	7 mm	R/Bal.	8 mm
L/Bal.	7 mm	L/Bal.	8 mm
D.O.A.	25/12/19	D.O.I.	30/12/19

Survey held at _____

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

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

Date / Time	Action / Instruction
/	File pass To

RECEIVED 0 9 MAR 2020

Date/Time, File Pass to? 9/3 Typist

Date/Time, File Return to?

☐ : Prell. Report

☑ : Final Report

Days Of Repair: 2

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Report Format : TP

Lump Sum / I.B.I: ($ 1100/-

Survey Fee:	290
Transportation:	$ - RS. SI
Forms	
Others	
TOTAL	290

Denise Tay (LKKAuto)

To:	Wong, Lorriance
Cc:	Admin-D (LKKAuto); assignments
Subject:	RE: CMTD1905986/LOR - LKK/ SLG3844H & SJV5510C DOA: 25/12/2019 - Pls arr suv on 31/12/19 after 11am
Attachments:	photo.pdf

Dear Lorriance,

Refer to our conversation 9th January.

According to our surveyor, this is a low speed impact with booth vehicle, it was indeed there was a collision contact between two vehicles, enclosed please see photos showed a dented portion due to impact force on a result of collision contacts.

Please take note that due to the design of the bumper skin which is very elastic, usually after a light collision impact it would goes back to almost original shape, thus unable to see clearly the nature of damages unless to dismantle it

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Wong, Lorriance <lorriance.wong@sompo.com.sg>
Sent: Thursday, 9 January 2020 3:16 PM
To: Denise Tay (LKKAuto) <denisetay@lkkauto.com>; Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments <assignments@lkkauto.com>
Subject: RE: CMTD1905986/LOR - LKK/ SLG3844H & SJV5510C DOA: 25/12/2019 - Pls arr suv on 31/12/19 after 11am

Our claim no : CMTD1905986

Hi Denise

Attached insured e-file report for your kind attention.

Thank you.

Best Regards
Lorriance Wong
Claims Division
D: 63295175 | **T**: 6461 6555 | **F**: 6221 3302

Nivitha (LKK Auto)

From:	Teo, Grace <grace.teo@sompo.com.sg>
Sent:	Friday, 27 December 2019 9:41 AM
To:	hui_yang_motor@hotmail.com; Wong, Lorriance; 'admin-d@lkkauto.com'; 'assignments@lkkauto.com'
Cc:	Ye, Yong Kang Melvin; Henry, Irene James
Subject:	CMTD1905986/LOR - LKK/ SLG3844H & SJV5510C DOA: 25/12/2019 - Pls arr suv on 31/12/19 after 11am
Attachments:	SKM_C28719122615260.pdf
Importance:	High

Without Prejudice

Our Reference: CMTD1905986/LOR
Your Reference: SJV5510C

Hi Bel,

We acknowledged receipt of your claim documents.

Please be informed that **Ms. Lorriance Wong** is the handler of this case who can be contacted at 63295 175/ lorriance.wong@sompo.com.sg .

As spoken, we will appoint **LKK AUTO** to survey the above vehicle.

Aside to **LKK AUTO**,

Please make the arrangement to survey for **SJV5510C** on a without prejudice basis and revert your report upon completion of survey to my colleague, Ms. Lorriance.

Thank you.

Our office will be closed on Christmas, New Year's Eve and New Year Day. Business will resume on 26th December 2019 and 2nd January 2020 respectively.
We wish you a Merry Christmas and a Happy New Year!

Best Regards
Grace Teo
Claims Division
D: 6329 5170 | **T**: 6461 6555 | **F**: 6221 3147

For motor claims survey request, please email to motorsurvey@sompo.com.sg

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From: Hui Yang Motor <hui_yang_motor@hotmail.com>
Sent: Thursday, December 26, 2019 3:28 PM
To: Claims - Motor Survey <MotorSurvey@sompo.com.sg>
Subject: TP Claim for SJV5510C against SLG3844H / DOA: 25/12/2019
Importance: High

Hi,

Please refer to attached and help to arrange surveyor on 31/12/2019 (Tuesday) after 11am.

Thank you & Regards,
Bel
Tel: 64515752

Denise Tay (LKKAuto)

From: Wong, Lorriance <lorriance.wong@sompo.com.sg>
Sent: Thursday, 9 January 2020 3:23 PM
To: Denise Tay (LKKAuto); Admin-D (LKKAuto); assignments
Subject: RE: CMTD1905986/LOR - LKK/ SLG3844H & SJV5510C DOA: 25/12/2019 - Pls arr suv on 31/12/19 after 11am

Hi Denise

Thank you for your prompt action.

Hi
this is a low speed impact
with both vehicles, it was
indeed a damage at 75
rear bumper. Due to the
~~cons~~ constructor of the rear
bumper, the impact force
from the front end
of the insured vehicle,
had ~~to~~ collided
into the bumper,
the bumper should
was push it & bounce back,
appeared to

Best Regards
Lorriance Wong
Claims Division
D: 63295175 | T: 6461 6555 | F: 6221 3302

SOMPO INSURANCE **A Century of Trust**

Sompo Insurance Singapore Pte. Ltd.
50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623
Website: www.sompo.com.sg | **Facebook:** www.facebook.com/SompoSG

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---

From: Denise Tay (LKKAuto) <denisetay@lkkauto.com>
Sent: Thursday, January 09, 2020 3:22 PM
To: Wong, Lorriance <lorriance.wong@sompo.com.sg>; Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments <assignments@lkkauto.com>
Subject: RE: CMTD1905986/LOR - LKK/ SLG3844H & SJV5510C DOA: 25/12/2019 - Pls arr suv on 31/12/19 after 11am

Dear Lorriance,

Will check and get back to you.

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: sur@lkkauto.com | fax: 6256-4315

This is a low speed impact with both vehicle, it was indeed there was a ~~collide~~ collision contact between two vehicles. Enclosed please see photos showed a dented portion due to impact force as a results of Collision contact; ~~for~~ [] Please take note that due to the design of the bumper skin ~~which~~ which is very elastic, usually after a light collision impact, it would goes back to almost original shape, thus ~~unable~~ unable to see clearly the nature of damages unless to dismantle it.

Denise Tay (LKKAuto)

From:	Denise Tay (LKKAuto)
Sent:	Tuesday, 31 December 2019 11:17 AM
To:	Admin-D (LKKAuto); 'Teo, Grace'; 'Wong, Lorriance'; assignments
Cc:	'Ye, Yong Kang Melvin'; 'Henry, Irene James'; SUR
Subject:	RE: CMTD1905986/LOR - LKK/ SLG3844H & SJV5510C DOA: 25/12/2019 - Pls arr suv on 31/12/19 after 11am
Attachments:	PRELI ADVISED OF SJV 5510C.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle **SJV 5510C**
Number of days (estimated) : 3 days

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: denisetay@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Sent: Friday, 27 December 2019 10:47 AM
To: 'Teo, Grace' <grace.teo@sompo.com.sg>; 'Wong, Lorriance' <lorriance.wong@sompo.com.sg>; assignments <assignments@lkkauto.com>
Cc: 'Ye, Yong Kang Melvin' <melvin.ye@sompo.com.sg>; 'Henry, Irene James' <irene.henry@sompo.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: CMTD1905986/LOR - LKK/ SLG3844H & SJV5510C DOA: 25/12/2019 - Pls arr suv on 31/12/19 after 11am

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed that vehicle is not in the workshop, repairer will arrange.

Wishes you a Merry Christmas & Happy New Year 2020

Best Regards

G.NIVITHA

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

LKK Auto Consultants Pte Ltd

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

Your Ref: CMTD1905986/LCR

Date: 31/12/2019

Our Ref: **CS/SMO19022793/Ktd3**

The Motor Claims Department
SOMPO INSURANCE SINGAPORE P

Dear Sirs/Mdm

PRELIMINARY ADVICE OF VEHICLE NO. SJV 5510C .

Please be informed that we had conducted the inspection of the above-mentioned vehicle on 30/12/2019 at the premises of M/s Hui Yang and have the following to report: -

Workshop Estimate Amount	: S$ 4,709.80
Revised Estimate Amount	: S$ 1,112.30
"Check" Items Amount	: S$ 1,492.20
Market Value	: S$
LTA Reimbursement Value	: S$ -
Nett Value	: S$ -

Description of Damage:
The vehicle sustained damages at the rear portion and parts.

Repair days: 3

Comments/ Present Status:
Damages Consistent.

Yours faithfully
Kenneth
Automotive Assessor

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	26/12/2019 10:29
Date Of Accident	25/12/2019 21:15
Exact Location Of Accident	ALONG LOR CHUAN
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJV5510C
Insured/Policyholder	
Name Of Registered Owner	ALLIANCE LEASING PTE LTD
Co Reg No	2XXXXX503M
Email Address	ALLIANCELEASING168@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO FORTE 1.6 AT SX ABS D/AB 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE.
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MJ001932
Cover Note Number	
Driver	
Name of Driver	CHIN SOON CHEONG
NRIC No	SXXXX935A
Date Of Birth	10/07/1974
Occupation	INDOOR
Date Of Driving Pass	06/12/2000
Driving Experience	19 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98181311
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 239 SERANGOON AVE 2 #05-39
Postcode	550239
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : ALYCIA NEO HONG LING GENDER: : FEMALE
Passenger 2	NAME: : ANDREW CHIN JOON GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes,Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLG3844H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation**.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

   I understand, acknowledge, agree and consent that:

   (a) My insurer, my workshop and the General Insurance Association of Singapore (**"GIA"**) may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the **"Personal Information"**) and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the **"Insurers"**), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

   (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

   (ii) investigating the accident and/or my claims;

   (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

   (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

   (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the **"Purposes"**)

   (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

   (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

   (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.

   (e) the information so collected under (d) above may be shared / disclosed:

   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

ALLIANCE LEASING PTE LTD
201706503M

SIN MING

Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 25/12/2019 around 915pm, my vehicle A (SJV5510C) was travelling along Lorong Chuan. While stopping at the traffic light, suddenly vehicle B (SLG3844H) banged onto the rear of my vehicle A.

DECLARATION

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

ALLIANCE LEASING PTE LTD
201706503M

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 :

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or 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	26/12/2019 11:00
Date Of Accident	25/12/2019 21:10
Exact Location Of Accident	LOR CHUAN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG3844H
Insured/Policyholder	
Name Of Registered Owner	TAN JENG ONG
NRIC No	S1241712H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97801386
Alternative Phone No	OFFICE-97801386
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01013189
Cover Note Number	
Driver	
Name of Driver	TAN JENG ONG
NRIC No	S1241712H
Date Of Birth	05/09/1957
Occupation	INDOOR
Date Of Driving Pass	22/08/1977
Driving Experience	42 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97801386
Fax Number	
Contact Number	OFFICE-97801386
EMail Address	NOEMAIL

Address	315 SERANGOON AVE 2 #08-206
Postcode	550315
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	4
Passenger 1	NAME: : CECILIA GENDER: : FEMALE
Passenger 2	NAME: : MICHELLE GENDER: : FEMALE
Passenger 3	NAME: : MELISSA GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes,Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJV5510C
Vehicle Make/Model/Colour	
Details Of Properties	NO DAMAGE
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

   I understand, acknowledge, agree and consent that:

   (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**Personal Information**") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

   (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

   (ii) investigating the accident and/or my claims;

   (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

   (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

   (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "**Purposes**")

   (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

   (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

   (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.

   (e) the information so collected under (d) above may be shared / disclosed:

   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At the above time and date.

I was travelling along Lor chuan. I stopped my vehicle behind vehicle B due to traffic light condition. Without realising that my foot was not firmly on the brake pedal, my vehicle rolled towards vehicle B and came onto light contact with vehicle B.

There was no damage to both the vehicle A and B.

DECLARATION

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

Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SOMPO

Sompo Insurance Singapore Pte. Ltd.
80 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623
Tel: 6481 6855 | Fax: 6221 3302 | Website: www.sompo.com.sg
Co. Reg. No.: 199905490E | GST Reg. No.: M20103135

Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES,1960
ROAD TRANSPORT ACT,1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES,1959 (MALAYSIA)

Cert No./Policy No.	: D19MTPV01013189
Insured	: TAN JENG ONG
Motor Car (Registration No.)	: SLG3844H
Cover	: Comprehensive - ExcelDrive GOLD
Policy Commencement Date	: 28 SEPTEMBER 2019 00:00
Policy Expiry Date	: 27 SEPTEMBER 2020 23:59
Maximum Liability (Section I)	: Market value at time of loss
Excess*	: $600 - Section I (Waived up to S$1,000 if accident repair is done at ExcelDrive Workshops for the first claim per policy year)
Voluntary Excess*	: N.A
Windscreen Excess*	: S$100.00 - Waived if Repair at ExcelDrive Workshop
Loss of Use	: Per Policy Schedule

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

1. The Insured.
2. Any other person who is driving on the insured's order or with his permission.
3. In the event of the death of the insured,
   a. any member of the insured's family, or a paid driver who has been driving the Motor Car during the life of the insured and permission to drive had not been withdrawn prior to the death of the insured; and
   b. any other person who has been given permission to drive the Motor Car prior to the death and such permission had not been withdrawn by the insured.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Car. And provided further that the Motor Car is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purpose and for the insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the insured shall call at the Company's Accident Reporting Center with the Motor Car within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Car must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Car can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

WE HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act,1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.27

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

Date/Time of issue : 10 SEPTEMBER 2019 13:04

IMPORTANT NOTICE

- Keep the Certificate in your Motor Car;
- Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
- On the sale of the Motor Car or if for any reason the insurance is terminated during its currency, the insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
- This Policy will cease to be valid once the Motor Car has been sold to another person. The Policy is not transferable to the new owner of the Motor Car.

Intermediary Code & Name : 11819308 & SYNERGY FINANCIAL ADVISERS PTE. LTD. CI Code: 22A RJWD8LD4K1PLLKBA

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

LKK
SOMPO
31/12/19

輝陽汽車有限公司
HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721
Tel: 64515752 (2 Lines) . Fax: 64514658
GST Reg No. 201629438M

25/12/2019

Owner: ALLIANCE LEASING PTE LTD

ESTIMATE TO REPAIR KIA CERENS - SJV5510C

1pc	rear boot cover "CERENS" emblem	na	$	32.00	—
1pc	rear boot cover "KIA" logo	na	$	75.00	—
1pc	rear boot cover "C&C" logo	na	$	55.00	—
1pc	rear bumper	repair	$	788.00	?
2pcs	rear bumper side retainer @$35.00	Sm	$	70.00	X
2pcs	rear bumper lamp @$181.00	Sm	$	362.00	X
2pcs	rear bumper lamp garnish @$85.00	Sm	$	170.00	X
1pc	rear bumper diffused	Nd/Dif	$	285.00	—
1pc	rear bumper reinforcement	CR	$	350.00	?
2pcs	rear bumper reinforcement side bracket @$55.00	Sm	$	110.00	X
5pcs	rear bumper reinforcement top & lower bracket @$25.00	Sm	$	125.00	X
2pcs	rear bumper centre parking sensor @$220.00	Short	$	440.00	?
2pcs	rear bumper centre parking sensor @$40.00	Sm	$	80.00	X
1pc	rear end panel	R	$	380.00	X
			$	3,322.00	
	less 10%		$	332.20	
			$	2,989.80	

tuffkote	na	$	60.00	X
wiring		$	60.00	10/
spray painting		$	800.00	400/
Labour Charge		$	800.00	300/
Total		$	4,709.80	

Not Authorised
Resume After Paint
3 days

Hui Yang Motor Pte. Ltd.

LKK Auto Consultants hereby notify the Repairer of the following:
- To remove tattoo under spray painting
- To display damaged parts during removal
- Parts prices are subject to confirmation
- Third party losses are on a "Without Prejudice" basis
- No illegal modifications are to be allowed
- Supplementary claims must be approved and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

veh in 30/12
veh out 31/12 7pm
Less 20%

LKK
SOMPO
20/12/19

辉陽汽車有限公司
HUI YANG MOTOR PTE. LTD.

Contact Add : SIN MING AUTOCARE Blk 176 Sin Ming Drive #04-02 Singapore 575721
Tel: 64515752 (2 Lines) . Fax: 64514658
GST Reg No. 201629438M

25/12/2019

Owner: ALLIANCE LEASING PTE LTD

ESTIMATE TO REPAIR KIA CERENS - SJV5510C

1pc	rear boot cover "CERENS" emblem	NN	$ 32.00	X
1pc	rear boot cover "KIA" logo	NN	$ 75.00	X
1pc	rear boot cover "C&C" logo	NN	$ 55.00	X
1pc	* rear bumper	Bal Rd	$ 788.00	
2pcs	rear bumper side retainer @$35.00	Sn	$ 70.00	X
2pcs	rear bumper lamp @$181.00	Sn	$ 362.00	X
2pcs	rear bumper lamp garnish @$85.00	Sn	$ 170.00	X
1pc	rear bumper diffused	Bal DIY	$ 285.00	
1pc	rear bumper reinforcement	R	$ 350.00	X
2pcs	rear bumper reinforcement side bracket @$55.00	Sn	$ 110.00	X
5pcs	rear bumper reinforcement top & lower bracket @$25.00	Sn	$ 125.00	X
2pcs	rear bumper centre parking sensor @$220.00	Sn	$ 440.00	X
2pcs	rear bumper centre parking sensor @$40.00	Sn	$ 80.00	X
1pc	rear end panel	R	$ 380.00	X
			$ 3,322.00	
	less 10%		$ 332.20	
			$ 2,989.80	

	tuffkote	NN	$ 60.00	X
	wiring		$ 60.00	10%
	spray painting		$ 800.00	400 20%
	Labour Charge		$ 800.00	300 200
	Total		$ 4,709.80	

Not Authorised
Refinish After Paint
2 days

1073
less 10%
965.70
410
1375.70
LS 20%
LS 1100 ✓ ok

Hui Yang Motor Pte. Ltd.

LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933
TEL: 6256 3561 FAX: 6256 4315
Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

SOMPO INSURANCE SINGAPORE PL

50 RAFFLES PLACE
#05-01/06
SINGAPORE LAND TOWERSINGAPORE 048623

Ref : CS/SMO19022793/Ktd3e2

Date : 09-03-2020

Code : SMO

1.	Policy Particulars :- THIRD PARTY CLAIM			
	Insured Veh.	SLG 3844H	**Veh. Inspected**	SJV 5510C
	Policy No.		**Coverage ($)**	0.00
	Claim No.	CMTD1905986/LOR	**Excess ($)**	0.00
	Assign From	GRACE TEO	**Assign Date**	27/12/2019

2.	Vehicle Particulars & Condition			
	Make & Model	KIA CERATO (A)	**c.c**	1591
	Engine No.	HIDDEN	**Year of Reg.**	2010
	Chassis No.	KNAFW411MA5125765	**Colour**	METALLIC RED
	Odometer	178294	**Steering**	IN ORDER
	Brakes	IN ORDER	**Modification**	SPORTS RIM
	General	GOOD		

3.	Conditions of Tyres			
		Size	**Make**	**Balance**
	R/H Front Tyre	215/45Z R17	KAPSEN	7 mm
	L/H Front Tyre	215/45Z R17	KAPSEN	7 mm
	R/H Rear Tyre	215/45Z R17	KUMHO	8 mm
	L/H Rear Tyre	215/45Z R17	KUMHO	8 mm

4.	Description of Damages
	THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.

5.	General Information			
	Accident Date	25/12/2019	**Inspection Date**	30/12/2019
	Survey held at	HUI YANG MOTOR PTE LTD BLOCK 176 SIN MING DRIVE #04-02 SIN MING AUTOCARE SINGAPORE 575721		

5a.	Remarks
	A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b.	Estimate Days of Repair	
	ESTIMATED NORMAL PERIOD FOR REPAIR:	**2 Working Days**

LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJV 5510C

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	REAR BOOT COVER "CERENS" EMBLEM	NOT NECESSARY	32.00	-
1	REAR BOOT COVER "KIA" LOGO	NOT NECESSARY	75.00	-
1	REAR BOOT COVER "C&C" LOGO	NOT NECESSARY	55.00	-
1	REAR BUMPER	BUCKLED / DENTED	788.00	788.00
2	REAR BUMPER SIDE RETAINER @$35.00	SERVICEABLE	70.00	-
2	REAR BUMPER LAMP @$181.00	SERVICEABLE	362.00	-
2	REAR BUMPER LAMP GARNISH @$85.00	SERVICEABLE	170.00	-
1	REAR BUMPER DIFFUSED	DENTED / DISTORTED	285.00	285.00
1	REAR BUMPER REINFORCEMENT	TO REPAIR SEE LABOUR	350.00	-
2	REAR BUMPER REINFORCEMENT SIDE BRACKET @$55.00	SERVICEABLE	110.00	-
5	REAR BUMPER REINFORCEMENT TOP & LOWER BRACKET @$25.00	SERVICEABLE	125.00	-
2	REAR BUMPER CENTRE PARKING SENSOR @$220.00	SERVICEABLE	440.00	-
2	REAR BUMPER CENTRE PARKING SENSOR @$40.00	SERVICEABLE	80.00	-
1	REAR END PANEL	TO REPAIR SEE LABOUR	380.00	-
	LESS 10% DISCOUNT		-332.20	-107.30
			2,989.80	965.70
	LABOUR			
	TUFFKOTE.		60.00	-
	WIRING.		60.00	10.00
	SPRAY PAINTNG.		800.00	200.00
	LABOUR CHARGE INCLUSIVE OF THE REPAIR OF REAR BUMPER REINFORCEMENT AND REAR END PANEL.		800.00	200.00
			1,720.00	410.00
	GRAND TOTAL		**4,709.80**	**1,375.70**

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			**1,100.00**

Report Ref No. CS/SMO19022793/Ktd3e2

Report Ref No. CS/SMO19022793/Ktd3e2

KSC

KONG SENG CHEONG

Licensed Appraiser

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