gangar:-	236			20002011/ NMENT (Office	e)			. 1	
Post (Person	i); Ben To	ang	oE3o	CTI		_ Dat	te/Time:	5/02/2020	B) 10.25
Estimated Co				Bill to:					
OD THE	S/TP RES/	DD RES / I	EVA/INV/I	MV /-CS				and the second	
To Inspect Vo	chicle No:		STO :	7365Y		nred:	CB	6962M	
nt Workshop	m/e		Lion	city Rentz	1)	Tel:	97	422188.	
of	6	o jular		vert #04-		6			
5 M 3 C		1						1/	
Policy No:		U		Claim No	MINS :	200:	2005	71/686062	M/BEN
Policy No: Sum Immed:		U				2002	2005	71/086962	m/BER
. 8	1	0		Claim No				71/C86962 29/01/2021	-
Sum Insured Make of Veh (Client's Record CA / REV	d) / REP. / RE	V 24 HRS		Excess		D.C	0.A .	29/01/2020	-
Sum Insured Make of Veh (Client's Record CA / REV	1	V 24 HRS 2 2020	Person Contr	Excess		D.C	D.A	Dajoi zozu	-
Sum Insured Make of Veh (Client's Record CA / REV	d) / REP. / RE	2/2020	Person Control	Excess noted; Mr.		D.C	D.A	Dajoi zozu	-
Sum lusured: Male of Vela Chent's Recor CA / REV Date/Time: /	/ REP. / RE	2 2020	Person Controlly	Excess noted; Mr.		D.C	D.A	Dajoi zozu	-
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Sum Insured Make of Veh Chent's Record CA / REV Date/Time: I	REP. / RE 1.04am@ 5	2 2020 action 1	Person Controlly (v	Excess noted; Mr.		D.C	D.A	Dajoi zozu	-

,	ASSIGNMENT
From: Date:	
Estimated Cost:	Van No: SL Q 7365U Yr Regn: 20/7/17
OD/TP/WS/TP-RES/OD RES/EVA/INV/MV	Type: M.Car / M.Cycle / Bus / Van / Lorry / Text / Prime Mover /
To Inspect Vehicle No:	Truck / Trailer or
н Workshop m/s	Mako: - Handa Vezel
of	Colour MCK "AC: Insured States and
Insured	Sp.Reading 187006 T/Redio; Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	Cilvo: Ru3/12 6878.
Sam brown	Gen. Cond: Good / Fair / Poor / Burnt
CAC055;	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inded r / Jammed / Leaked / Burnt or
Make of Veh;	Modi: NII / SRIm / STD A/Rim or
AND STATE OF THE S	Tyre Size: F: 215/6/1846
(Policy Condition)	R:
nemark, the ven had commonded its	
repair at the time of inspection.	TOYOTYOKO or
Bal. or Market Value:	Frent
DAC Accident Rport: Consistent?: Yes or No	DIRA /
SIA / PP. Seen: Consistent7 : Yes or No	I Part - U mm R/Bat, L mm
st. Repairs: days Res.; Yes or No	DBal, mm
um Sum: % 3 Val.; Yes or No	2.11-120
	Survey held at Lin City
A / REV / REP. / 24 HRS Vehiclo:	Dos. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Person Contpoled:	
ala / Tine Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
MV-71K	19/3/20 Final \$ 2600 , 3 dys (Sim) ()
2/5/10	C \$ 54.00 Red - 3 20 / moonsty
815	Check Parts PHIOS
0 No.	1 /20/3/20
RECEIVE	ED 2 8 MAR 2020
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Adr	Fee: Site Insp (\$) sees 5
	Interview (#
ort Format :	To-b (a) 29/5
DS4/11.B.1: (5 2,600/- 45)	
	TO TAKE A STANDARD TO THE
) 43 1	

Nivitha (LKK Auto)

From:

Ben Tang <Ben.Tang@sg.cntaiping.com>

Sent:

Wednesday, 5 February 2020 10:25 AM

To:

'assignments'

Subject:

FW: OUR REF: SNM20D200571/CB6962M/BEN & YOUR REF: SLQ7365U -3rd party

survey for SLQ7365U

Dear Sirs

We refer to above matter.

Please assist to arrange for PRS survey of TP vehicle SLQ7365U.

Thank you.

Best Regards Ben Tang Executive Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #XX-00 Springleaf Tower Singapore 079909

DID: (65) 6389 6175 | F: (65) 6222 1033

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平狮城 Taiping SG

Disclaimer: This e-mail and any files transmitted with it is intended only for the named recipients and may contain confidential information. Any unauthorized disclosure, use or dissemination of this message, either in whole or partial, is prohibited. If you are not the intended recipient, please notify the sender immediately. Please delete the e-mail and any copies of it thereafter.

From: Siak Tong Sim <siaktong@lioncityrentals.com.sg>

Sent: Wednesday, February 5, 2020 10:12 AM To: Ben Tang <Ben.Tang@sg.cntaiping.com>

Cc: Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Subject: Re: OUR REF: SNM20D200571/CB6962M/BEN & YOUR REF: SLQ7365U -3rd party survey

for SLQ7365U

Dear sir

We would like LKK to survey the car

Regards

S.T.Sim (65-97422188)

Manager

Accident Reporting Center

60 Jalan Lam Huat #04-35/36 Carros Centre Singapore 737869



On Wed, Feb 5, 2020 at 10:09 AM Ben Tang < Ben. Tang@sg.cntaiping.com > wrote:

WITHOUT PREJUDICE

Dear Sir.

We refer to your email dated 04 February 2020.

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

LKK / LBS / STA

ADRIAN LING	
Kelvin Ang	
SEE CHEW SENG	
MOHD FADHILAH BIN	
OSMAN	
XING QUO QIANG	
KENNETH KONG	
SIMON HO	
CHUA WEIJIE	
MARCUS CHUA	
HENRY NG	

You may select one of the listed motor surveyors and we will bear the cost of the pre-repair survey carried out by the single joint expert.

If we do not hear from you within two days of this letter, you shall have deemed to have agreed that the surveyor appointed by us shall be Single Joint Expert for this matter.

Thank you.

Best Regards

Ben Tang

Executive

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #XX-00 Springleaf Tower Singapore 079909

DID: (65) 6389 6175 | F: (65) 6222 1033

W: www.sq.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平狮城 Taiping SG

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From: Claims Dept of CTI

Sent: Wednesday, February 5, 2020 10:03 AM

To: Ben Tang < Ben. Tang@sg.entaiping.com >; siaktong@lioncityrentals.com.sg

Subject: OUR REF: SNM20D200571/CB6962M/BEN & YOUR REF: SLQ7365U -3rd party survey for

SLQ7365U

Dear Ben.,

Please conduct PRS -SLQ7365U soonest possible

Officer in charge-Ben Tang-DID: 6389 6175.

Dear Mr Sim.

*** kindly quote our reference number when replying.***

Thank you.

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

Tel: 6389 6116

Fax (65) 6224 7175 / 6224 7478

Email: claimsdept@sg.cntaiping.com Website:www.sg.cntaiping.com Disclaimer: This e-mail and any files transmitted with it is intended only for the named recipients and may contain confidential information. Any unauthorized disclosure, use or dissemination of this message, either in whole or partial, is prohibited. If you are not the intended recipient, please notify the sender immediately. Please delete the e-mail and any copies of it thereafter. From: Siak Tong Sim < siaktong@lioncityrentals.com.sg> Sent: Tuesday, February 4, 2020 8:18 AM To: Claims Dept of CTI < claimsdept@sg.cntaiping.com> Subject: Re: 3rd party survey for SLQ7365U

Ce: Lion City Rentals ARC < lcrarc@lioncityrentals.com.sg>

Dear sir

Please arrange 3rd party survey for the following car

Our Insured: SLQ7365U

Your Insured: CB6962M

Date of accident: 29/01/2020

Regards

S.T.Sim (65-97422188)

Manager

Accident Reporting Center

60 Jalan Lam Huat

#04-35/36 Carros Centre

Singapore 737869



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	621K
Vehicle No.:	SLQ7365U
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Feb 2020
Vehicle Make:	HONDA
Vehicle Model:	VEZEL HYBRID 1.5 AUTO
Primary Colour:	Black
Manufacturing Year:	2016
Engine No.:	LEB5926852
Chassis No.:	RU31226838
Maximum Power Output:	112.0 kW (150 bhp)
Open Market Value:	\$22,345.00
Original Registration Date:	20 Jul 2017
First Registration Date:	20 Jul 2017
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Jul 2027
PARF Rebate Amount: intended COE Rebate Details	\$3,750.00
COE Expiry Date:	19 Jul 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$54,405.00
COE Rebate Amount:	\$40,555,00
otal Rebate Amount:	\$44,305.00

The information contained herein is correct as at 05 Feb 2020

OK

Steve Chen (LKK Auto)

From:

Sent:	Thursday, March 19, 2020 4:03 F	PM	
To:	Steve Chen (LKK Auto)		
Subject:	Re: SLQ 7365 U - Finalize		
Steve			
Ok confirm lump sum	\$2,600/3 days		
Thanks & Best Reg	ards		
S.T.Sim			
Manager			
Accident Reporting	Center		
60 Jalan Lam Huat			
#04-35/36 Carros Centre			
Singapore 737869			
×			
	JOSEPH SERVICION NO. TOTAL SERVICE NO.		
On Wed, Mar 4, 2020	at 12:06 PM Steve Chen (LKK Auto)	<stevechen@lkkauto.co< td=""><td>m> wrote:</td></stevechen@lkkauto.co<>	m> wrote:
D 01			
Dear Sim,			
Vindly fallow up fine	the same		
Kindly follow up fina	126.		
Thanks.			

Siak Tong Sim <siaktong@lioncityrentals.com.sg>

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

archesaic.	
E SCHOOL STATE OF THE	ACCIDENT STATEMENT
Date Of Report	30/01/2020 16:05
Date Of Accident	29/01/2020 12:40
Exact Location Of Accident	KARIKAL LANE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLQ7365U
Insured/Policyholder	
Name Of Registered Owner	LION CITY RENTALS PTE LTD
Co Reg No	2XXXXX621K
Email Address	RENTALS@LIONCITYRENTALS.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-31381884
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL-1.5 HYBRID (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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	19-MK000195-ROO

Driver

Cover Note Number

Name of Driver MOHAMED FARIKH BIN MOHAMED ALI

 NRIC No
 SXXXX232C

 Date Of Birth
 10/06/1976

 Occupation
 OUTDOOR

 Date Of Driving Pass
 13/03/2007

Driving Experience 12 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93895662

Fax Number Contact Number

EMail Address NOEMAIL

Address 525 WOODLANDS DRIVE 14 #08-433

730525 Postcode

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

OTHER - HIRER

General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR DRY

Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle) 2 involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO ambulance?

Was any other material or property damaged? NO

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera?

Was there any audio recorded?

NO

CB6962M

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category BUS

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material
 facts may allow insurance companies to repudiate policy liability.
- The Issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Indistance
 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 Protettion 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 traceller 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 agescy/authority (such as the police), for the purpose(s) of :
 - processing, handling and/or dealing with my claims including the sattlement of the claims and any necessary investigations relating to the daims;
 - (ii) investigating the accident and/or my claims;
 - (iii) currying 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 wall as on the externel cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my chans. (collectively the "Purposes")
 - all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, trey/are permitted, to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 - (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
 - (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
 - (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law anforcement and government agencies as reasonably required for the purposes stated, or

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

Policyholae Malacetyre

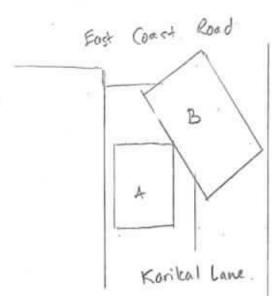
Driver's Signature It' driver is not the ook

(If driver is not the policyholder) bete & Time: Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN



Lagend A: SCO 7365U

B: CB 6962 M

East Coast Shell

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

CRIBE CIRCUIVISTAN	ICES OF THE ACCIDENT
In 29 Jan	2020, at around 1240 I had stopped my car
	my Greb app sofely from main traffic in
	rivate lane of Karkal Lane.
	CB 6962M a private bus came beside me
	e and knock and scrape the front right headlight
	rionary arc.
The car had	I been stationary and the engine is off.
	1-cor camera has stopped recording the event.
and the	TOV CALLETT VIOS STOPPED TELEVICING THE CO.
	*
	N .
	9,
DECLARATION	·
	abing particulars are true in every respect.
18 TO	Carlotte Court
THE STATE OF THE S	SHINA
Policyholder spenatu	Driver's Signature Reporting Centre Personnel's Signature If datasets and the adjustments Marine

Lion City Rentals Pte Ltd CARROS CENTER 60 JALAN LAM HUAT #04-01 S(737869)

Main +65 62524991

Py: - 5NM20D200571/CBG962M/B

MsChina Taiping Insuran

Date: 04/02/2020

Attn: MOTOR CLAIMS DEPT

ESTIMATE

VEHICLE NO.SLQ7365U CHASSIS NO: RU31226838

MAKE / MODEL: Honda Vezel 1.5 Hybrid

DATE OF ACCIDENT: 29/01/2020

YOUR INSURED VEHICLE NUMBER: CB6962M

MILEAGE: 187006 km

	PARTS De	SCRIPTION	QTY	U	NIT PRICE	L	IST PRICE	5101
1	Front bumper	CUT	1PC	\$	955,00	\$	955.00	
2	F/R fender wheel arch n	noulding / DK	1PC	\$	300.00	5	300.00	195
3	F/R headlamp assy	- (4)	1PC	5	2,100.00	\$	2,100.00	1870/
				LIST	TOTAL S\$:	\$	1,255.00	
			20.009	6 DIS	COUNT SS:	\$	251.00	286
						5	1,004.00	- 707
	SPECIAL NETT							229
1	Front bumper clips	n/C	1 SET			Ś	100.00	80
				al Net	tt Total S\$:	<u>-š</u> -	100.00	
	LABOUR	CHARGES	Specia			*	100.00	
1	ESTING TO ST		9 0		0.00	\$	750.00	400 450
	To labour charge for rer replacement of damage		out to facilit	ate r	epairs and	50	1.500	400 433
2	To respray front bumpe	r and F/R fender whee	el arc moulo	ling		s	800.00	444 500
	16 60			-	TOTAL SS:		1,550.00	. 4. 5.0
		des /	(E.)		OTAL 55:	Ś	2,654.00	con
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		1.	GF		TOTAL SS:	5	2,839.78	
	V	1 6/2/2020						
	Steve (LKK)	WH Pr			0		1192	
	Tiere (TV V)	ALLE DE			- (*		1110	
		5/2/70, 2.900	6		M	_	39	
		- 1 - 1			7		950	
		5 441			-		13	
		7.17					912	
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er of	the following:	J - V			-			
before	stafter spray painting						2600	/
-11-09	ed part(s) during resurvey	1						

LKK Auto Co the Repairer of the following:

- . To resurvey beforelafter spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed.
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: