From (Person): Rulin Than of MSI			Date/Time:	5.). W	0 16.4292 19
Estimated Gost:	Bill to:				***************************************
OD FIPTNS/TP RES/OD RES/EVA/INV/MV/C To Inspect Vehicle No: SLG 64847	8	_ Insured:	SKN	9706]	
at Workshop m/s Em Sawhon		Tel:	64560	226/0	71018302
of 160 sin ming bru # 03-18					
Policy No: 29 123167	Claim No:				
Sum Insured:	Excess:				
Make of Veh:			0.0.A.	1.2.202	D
(Client's Record) CA / REV / REP. / REV 24 HRS Date/Fine: 6 WYOV 5.55p.m Person Contacted:	Bemard	V	H.O.D. End		
Date/Time Action/Instruction (V) Estimate SLG 6484T - X					
SEN 97067-X					-
26/3 6/ Ly & 17 col encil	(Red \$	8507-	59 8	0%)	

Milmy

...CLAIM SUBFOLDER...(New Assignment)

LAIM SU	BFOLDER TRA	CKING					
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	05 Feb 2020 14:47		05 Feb 2020 16:42 Assign				New Assignment Cancel Case

Ma	nie	Reference		Claim Details		Document	s	Show All
CLAIM SUBI	FOLDER DETAILS				[Created	by insurer]		NAME OF TAXABLE PARTY.
Insured:	Premier Rent A C	ar Pte Ltd, Co. F	Reg. No.: 2006	12929E	270.5			
Main Claimant:	SENTOSA LIMOU	SINE, Co. Reg. 1	No.: 53350233	3X				
Vehicle Reg. No.:	SLG6484T			Date of Loss		20 07:00 - :59 ns and 25 Days Fr	om LTA Reg Dat	e (Man Yr)]
Claim Type:	TP	Policy/Cover 29123167 (TP, Fire & Theft) Note No.: Coverage: 01/05/2019 - 30/04/2020						
Vehicle Reg. No. (Insured):	SKN97063			Policy No. (Claimant):	51112170	72	AND THE PROPERTY OF THE PROPER	
			W-1	Excess:				
Repairer:	E M Solution Pte	Ltd (HQ) 160 Sin	Ming Drive,, #	03-18, Sin Ming Aut	ocity, 575722	2 Sin Ming - Tel: 6	54560226	
Handling Insurer:	MSIG Insurance	(Singapore) Pte.	Ltd. (HQ) - T	el: +65 6827 7888 .	[Handled b	y Pauline Tham	- 6594 2545]	
Claimant's Insurer:	NTUC Income In	surance Co-opera	ative Ltd (HQ) - Tel:				
Adjuster:	LKK Auto Consult	ants Pte Ltd (HQ) - Tel: 6256-	3561 [Imm.Ad	vice due 0	6/02/2020]		
Driver/Custo dian (Insured):	LEE BYOUNG SU (4	9 / Male) , NRIC	: F7959036M	Email:				
Adj Asg. Remarks:	on WP. Liab: clear. 9101 8302.	Agree on SJE, Ass	ign: Kenneth I	Kong from LKK Auto	Consultants (Pte Ltd. Contact:	Mr Bernard @ 64	56 0226 /
ASSOCIATE	D MAIL RECEIVED					٧	riew All Compi	ose Case Mail
There are no	mail for this case.						and the second second	
ALL ASSOC	IATED TASKS				View All	Search Tasks	Create New Task	Complet
Due Date No results.	Priority Type	Task Group	Subject	Handler Assig	ned By	Completed On	Created O	n Done

Note: This document has not been finalised. LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way

#21-01 SGX Centre 2 Singapore 068807

LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park

Singapore 408933

Attn:

Pauline Tham

Date:

07 Feb 2020

Preliminary Advice

Insured Vehicle No : SKN9706J

TP Vehicle No

: \$LG6484T

Accident Date

: 04/02/2020

: TOYOTA PRIUS

Assignment Date

: 05/02/2020

Make

Est, Duration of Repair

Date of Inspection

: 06/02/2020

:S\$

: 4.00

Inspection At

: E M SOLUTION PTE LTD (HQ)

160 SIN MING DRIVE,, #03-18, SIN MING AUTOCITY

SINGAPORE 575722

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear n/s portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	10,507.59
Revised Amount	:SS	1,247.76
Check Items (Estimated)	:S\$	1,893.58
Total	:S\$	3,141.34

Lump Sum Repair

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:SS
Margin for Repair	:S\$

Remarks

The vehicle is economical/not economical for repair,

(X) The above survey was conducted on a 'without prejudice' basis.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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.
- Any false reporting may be referred to the Police for Investigation.
 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	05/02/2020 11:30
Date Of Accident	04/02/2020 07:30
Exact Location Of Accident	ALONG BUKIT TIMAH ROAD - HALIFAX ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLG6484T
Insured/Policyholder	
Name Of Registered Owner	SENTOSA LIMOUSINE
Co Reg No	5XXXX233X
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-92223583
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5111217072
Cover Note Number	
Driver	
Name of Driver	TEO BENG SENG
NRIC No	SXXXX646F
Date Of Birth	04/07/1962
Occupation	OUTDOOR
Date Of Driving Pass	06/07/1983
Driving Experience	36 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92223583
Fax Number	

NOEMAIL

Address

BLK 491B TAMPINES AVENUE 9

#13-402 SINGAPORE

Postcode

521491

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

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

ambulance?

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?

YES

Was any injured conveyed to hospital by

NO

YES

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

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name Police Station Address

ROAD: BLK 25 SIN MING ROAD , POSTCODE: 570025 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4529999 - FAX NO: 6 5535740

THOMSON NEIGHBOURHOOD POLICE POST

Was notice of intended Prosecution given?

NO

If Yes.against whom?

Circumstances of Accident

REFER POLICE REPORT AND ATTACHED

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

SKN9706J

Vehicle Make/Model/Colour

REFER POLICE REPORT AND ATTACHED

Details Of Properties Vehicle Category

PRIVATE CAR

Name of Driver

LEE BYOUNG SU

NRIC/Passport Number

FXXXX036M

Contact Number

Address

Postcode

Insurance Company Name

Name TEO BENG SENG Approximate Age Injuries Sustain REFER POLICE REPORT AND ATTACHED Injured person in which vehicle? SLG6484T Were seat belts worn? YES Was this injured conveyed to hospital by ambulance? Address Postcode

SKETCH PLAN

A STATE OF THE STA

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

10	(N 4/2/2000 at about 7.30 AM 9 was
davi-	-p my Vetticle - SLG 6484 T alex Butillimm Renso.
	is at the No Through junction stationery for a short
while	before 9 received a order to pick-typ passeryer while
9 wa	a turning out of the road, a verticle - SKN 9701]
from -	the pear and collided onto my rear of my vetticle
9 14	portry this incident to Chaim against SKN 9706 J
for 1	my demayes. I have slight parin on my neck & sidevalde
and	went to see declox.

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.:

KERINE TANG

GIARMC SketchPlanForm_V3

1

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process:
- 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 Hability on the part of the insurance companies.
- 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- 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:
 - processing, handling and/or dealing with my daims 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
- 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.
- 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:

Name:

NRIC/FIN No.:

KERING TANG Reporting Centre Personnel's Signature

Common Statement Pg. 1





Police Station Of Origin:

Thomson NPP

25 Sin Ming Road #01-180 SINGAPORE

570025

Tel No: 1800-4529999

REPORT OF A TRAFFIC ACCIDENT

T/20200204/2098

Report No. T/20200204/2098

1 of 3

	Date/Time Report Made: 04/02/2020 16:31		Vide Report No.:	Station Diary No.: 42		
Informa	nt's Partic	ulars	Service Control of the Control of th			
	Informant: NG SENG		Address: APT BLK 491B TAMPINES A 521491	VENUE 9 #13-402 SINGAPORE		
The state of the s	/ ID No.: D / S15286	46F	Contact No.: Home/Office:	Mobile: 92223583		
	Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 57	Date of Birth: 04/07/1962	Type of Informant: Driver			
Race: Chinese	e Language: Mandarin			Institution / School Name:		
Occupat PHV DR		4010-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/02/2020 07:30	Type of Location: Straight Road
Location: Along Road 1 HALIFAX RO Weather: Clear		Road Surface:	5.0.5.11	Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled	100	Fraffic Volume:
Two Way				

A STATE OF THE PARTY OF THE PAR	ehicle invol	A SECTION OF THE PROPERTY OF T	Service Control of Service Control of Service	THE RESERVE THE PARTY OF	STATISTICS, TASK MICE AND	THE REAL PROPERTY AND ADDRESS OF THE PARTY AND
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKN9706J	Car	ТОУОТА	TOYOTA COROLLA ALTIS 1.6L CVT	Silver	Slightly Damaged	0
SLG6484T	Car	TOYOTA	PRIUS HYBRID 1.8 CVT	White	Slightly Damaged	0

Common Statement Pg. 1



T:222072442303

Police Station Of Origin: Thomson NPP 25 Sin Ming Road #01-180 SINGAPORE 570025 2 of 3 Report No. T/20200204/2098

Tel No: 1800-4529999

CONTINUATION OF REPORT

Any Pedestrian Ir	volved: No				
No. of Pedestrian	Use of Pedestrian Crossing: NA				
Driver			40.00	400 STEE	
Name	TEO BENG SENG		ID No	9	S1528646F
Related Vehicle	SLG6484T (Car)		Conta	ct No.	92223583
Hospital/Clinic	MOUNT ALVERNIA HOSPITAI		Class Drivin Licens Expin	g	Class: 3 Date of Expiry: NIL
Date Treatment	04/02/2020	Date Disc	SERVICE TO SERVICE	1	2/2020
No. of Days gran	ted Medical Leave 06	Degree of	Injury	Sligh	

Brief Details.

On 04/02/2020 at about 7.30am, I stopped at Halifax road as I was accepting a job from Gojek Application. After I check the application, I made a right turn to the slip road leading to Bukit Timah Road. Just as I was completing the turn (still in motion, moving slow), I felt an impact from the rear. I alighted to check and realised that SKN9706J had collided to my rear. We alighted and spoke to the driver. The driver acknowledged that he was in the wrong as he did not see me and told me to follow up with his insurance company. After I took some photo of the accident, we left the accident location. I felt unwell thereafter and sought treatment from Mount Alvernia Hospital. I was given 6 days of outpatient sick leave.

Common Statement Pg. 1





Police Station Of Origin:

Thomson NPP

25 Sin Ming Road #01-180 SINGAPORE

570025

Tel No: 1800-4529999

Report No. T/20200204/2098

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: E / Staff Sgt ONG KIAN KENG	Signature Of Informant:				
Signature Of Interpreter: Not applicable	Date/Time: 04/02/2020 16:31				
Officer In Charge Of Case: TP / AEIT /	Classification Of Case:				
Staff Sgt WONG SIEU LUI Contact No.: 654761517	SN 070				
Authentication Stamp NP168 SIGNATURE					

E M SOLUTION PTE LTD

160, Sin Ming Drive, #03-18/19, Sin Ming Autocity, Singapore 575722 Tel: 64560226 Fax: 64584500

Registration No: 201016308K

Sentosa Limousine

05.02.2020

Not Nothanke 11 Rup 8 1700/-Merry After Paint

REPAIR ESTIMATE FOR TOYOTA PRIUS - SLG 6484 T

11-17	WIN ESTIMATE FOR TOTAL THE	00 020 0101	-		•		. 7/2
1 pc.	rear bumper		Bu	677.90	_		
0.000	rear bumper side retainers	\$87.95	M	175.90	X		
200	rear bumper brackets	\$127.40					
	rear bumper lower difuser	* (T) (1)	13				
	rear bumper lamps	\$425.60	10.77	<u> </u>		es:	
4.00 PM	rear bumper reinforcement	V.120.00	-	385.70	2		
19, 50 (200) (40,000)	rear bumper sensors	\$349.70			20012		
20.00	tail lamps assy	\$488.95					
	boot lid		150	,221.70			
9800 PM (1980) 10 mm	boot emblem			68.90			
	boot "Prius" badge			61.70			
50000000	boot "Hybrid" badge		11	48.20	٨		
	boot number plate lamps	\$87.60	R	175.20	X		
	boot rubber	W	Sur	323.90	<		
	boot lock		n	381.60	X		
	boot inner trim		Sh	441.65	X		
1 pc.	rear lock sensor		12	187.40	X		
1 pc.	rear end panel		1	741.95	1		
2.00	rear end panel top garnish		in	221.60	1		
1 pc.	spare tyre panel		n	821.95			
1 pc.	spare tyre cover		Sam	551.65	X		
	rear exhaust silencer		n	899.75			
2 pcs	rear exhaust mountings	\$47.20	In	94.40	×		
1 pc.	rear windscreen moulding		nn	137.40	X		
			10	,923.45			
		Less 25%	2	,730.86			
		,	8	,192.59	8,192.		
1 set	rear bumper clips				May 45.	.00 SN	
1 set	rear end panel top garnish clips				ma 30.	00 SN	×
1 pc	rear windscreen sealant				~~ 80	00 SN	X
1 pc	rear number plate				70.	.00 SN	1
1 pc	rear camera				رم ₅₅₀ .	.00 SN	X
1)	Check electrical wirings				60.	00 /5	/
2)	Repair accident damages and ren				550.	00 30	d
3)	Spray paint on accident affected p	ortions.	ence n	alify	550.	00 400	1
4)	Remove and refit rear windscreen	ne repairer of the follo To resulvey before/after our	wing: av naletie		150.	00 X	-7.
5)	Renew rear camera	To display damaged part(s)	ดีนกักธ กล	SHAMA	ام 100	ANTENNO ADMIN	
6)	Renew rear exhaust silencer	Farly prices are subject to o	onfirmati	on	. 80.		
7)	Tuff kote on affected portions	Third party survey is on a "W No illegal medification(s) is a	enhapt Pr Howart	ejunice" hasis	NW 50.	00 X	
		Supplementary Remas) must	his radius	veyed and \$	10,507.	59	
		In subject to final approval to	om Trissell	ince Company			
	A	dinowledged by Remainer					

E M SOLUTION PTE LTD

160, Sin Ming Drive, #03-18/19, Sin Ming Autocity, Singapore 575722
Tel: 64560226 Fax: 64584500

Registration No: 201016308K

Sentosa Limousine

05.02.2020

Not Nothank

	7 & De 00 =
REPAIR ESTIMATE FOR TOYOTA	A PRIUS - SLG 6484 T Revery After Paint
1 pc. rear bumper	p
	0.11.00
2 pcs rear bumper side retainers	\$87.95 175.90 X
2 pcs rear bumper brackets	\$127.40 1 254.80 7
1 pc. rear bumper lower difuser	By 521.70 -
2 pcs rear bumper lamps	\$425.60 / 851.20 x
1 pc. rear bumper reinforcement	By 385.70 7
2 pcs rear bumper sensors	\$349.70 Per 699.40 20012
2 pcs tail lamps assy olsin M	1 my cm \$488.95 & 977.90 x+
1 pc. boot lid	911.90
1 pc. boot emblem	1,221.70 x
1 pc. boot "Prius" badge	~ 68.90 ≺
1 pc boot "Hubsid" bade	2~ 61.70 X
1 pc. boot "Hybrid" badge	48.20 A
2 pcs boot number plate lamps	\$87.60 175.20 X
1 pc. boot rubber	Mr. 323.90 €
1 pc. boot lock	381.60 X
1 pc. boot inner trim	56 441.65 x
1 pc. rear lock sensor	187.40 ₹
1 pc. rear end panel	1 744 05
1 pc. rear end panel top garnish	741.95 🔀
1 pc. spare tyre panel	£ 221.60 X
1 pc. spare tyre cover	₹ 821.95 ×
1 pc. rear exhaust silencer	551.65 ⊀
2 pcs rear exhaust mountings	\$47.20 / 94.40 ×
1 pc. rear windscreen moulding	nn 137.40 X
	10,923.45
	Less 25% 2,730.86
10	8,192.59 8,192.59
1 set rear bumper clips	14 15 00 CN
1 set rear end panel top garnish clip	일 :
1 pc rear windscreen sealant	
1 pc rear number plate	6- 80.00 SN X
1 pc rear camera	70.00 SN X
Check electrical wirings	550.00 SNX
	60.00 /5/
	renew parts 550.00 3 oct
 Spray paint on accident affecte 	
Remove and refit rear windscre Renew rear camera	den To resouve before table some painter.
, and a control of	r = 10 supply carriaged parties to the second ~ ~ 100 00 Å
Renew rear exhaust silencer	The process are subject to confinencial AA OO OO V
Tuff kote on affected portions	TOTAL PORTS SErver is not a "Williams transfer or a
,	
	Conpotentially Banda) must be resurveyed and \$ 10,507.59 Is author to final approval from identification Company
	A STATE OF THE STA
	Asknowledged by Repailer