健準

Chambers Law LLP

Advocates & Solicitors, Commissioner for Oaths & Notary Public (Limited Liability Partnership UEN TO7LL1103A)

45 North Canal Road #05-01 Lew Building Singapore 059301

Tel: (65) 65353 234 Fax: (65) 65353 502 (Not for service of court documents)

Website: www.chamberslaw.com.sg

Managing Partner 柳 清 清 LEW CHEN CHEN

Master of Laws (UK) Barrister-At-Law (Lincoln's Inn) BA (Hons) Law & Accounting (UK) Email: cclew@chamberslaw.com.sg Senior Partner 李济彬 LEE CHAY PIN, VICTOR

LLB (Hons) (Spore) Email: victor@chamberslaw.com.sg Associate 陈 静 娴 CHARMAINE JIN JING XIAN

BA Law & Business Studies (Hons)(UK)
Email: cj@chamberslaw.com.sg

AXA INSURANCE PTE LTD

Associate 蔡凯雯 DILYS H CHUA

LLB (Hons)(UK)
Email: dilys@chamberslaw.com.sg

11380047

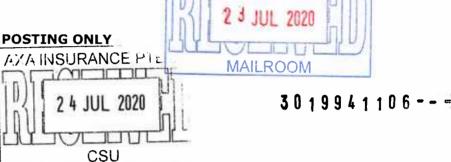
Our Ref: CCL.WYY.st.200504 VA

22 July 2020

BY CERTIFICATE OF POSTING ONLY

Kng Junwei Blk 135 Simei St 1 #09-56 Singapore 520135

Dear Sirs



EXPRESS TRANSPORT SERVICES & CONSTRUCTION PTE LTD C/O VFIX AUTO PTE LTD OF 26 CHIA PING ROAD SINGAPORE 619977 ACCIDENT ON 14.2.2020 INVOLVING XB 8506K & SJZ 512J

- 1. We are instructed by the abovenamed to claim damages against you in connection with a road traffic accident on 14.2.2020 at about 0235 hours along ECP towards Fort Road exit, involving our clients' vehicle registration number **XB 8506K** and your vehicle registration number **SJZ 512J** driven by you at the material time.
- 2. We are instructed that the accident was caused by your negligent driving and/or management of your vehicle in that your vehicle had collided onto the rear right portion of our clients' said motor vehicle at the material time. As a result of the accident, our clients' vehicle was damaged and our clients have been put to loss and expenses, particulars of which are as follows:-

Cost of repairs with 7% GST	\$ 3	27,499.00
Loss of use for 9 days at \$180.00 per day	\$	1,620.00
LTA Search Fee	\$	14.94
GIA Report Fee	\$	29.00
Survey fee	\$	859.00
Colour Photographs	\$	20.00
Postage & other incidentals	\$	50.00
Cost for CD video evidence	\$	30.00
Legal Costs	\$	1,000.00
Total	<u> \$ </u>	31,121.94
	Loss of use for 9 days at \$180.00 per day LTA Search Fee GIA Report Fee Survey fee Colour Photographs Postage & other incidentals Cost for CD video evidence Legal Costs	Loss of use for 9 days at \$180.00 per day LTA Search Fee GIA Report Fee Survey fee Colour Photographs Postage & other incidentals Cost for CD video evidence Legal Costs \$

- 3. We enclose herewith a copy each of the following supporting documents for your attention:-
 - (a) GIA Report of our clients' vehicle;
 - (b) Traffic Accident Report lodged by Fan Kok Chong;
 - (c) GIA Report of your vehicle no. SJZ 512J;
 - (d) LTA Search Result of your vehicle no. SJZ 512J;
 - (e) Surveyor's Report and Invoice;
 - (f) 40 copies of scanned photographs of damage of our clients' vehicle;
 - (g) Certificate of Insurance of our clients' vehicle;
 - (h) 19 copies of scanned photographs taken at the accident scene;
 - (i) Repairer's Invoice;
 - (j) Notification of Accident dated 17.2.2020 on the pre-repair inspection; and
 - (k) Video recording of the accident.
- 4. Our clients' workshop had, on 17.2.2020 notified your insurer, AXA Insurance Pte Ltd, of the said accident and a pre-repair inspection of our clients' vehicle was carried out by your insurer on 21.2.2020.
- 5. We propose using Impact Analysis Consultant as a single joint expert in the event should the matter proceed to Court. Kindly let us know if you are agreeable.
- 6. Please note that if you are insured and wish to claim under your insurance policy, you should immediately pass this letter and all enclosed documents to your insurer.
- 7. Please note that you or your insurer should send to us an acknowledgement of receipt of this letter **within 14 days** of your receipt of this letter, failing which, our clients will have no alternative but to commence proceedings against you without further notice to you or your insurer.
- 8. Please also note that if you have a counterclaim against our clients arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaims together with all relevant supporting documents **within 8 weeks** of your receipt of this letter.

Yours faithfully

1133394

Wong Yan Ying

c.c. By email (motor.survey@axa.com.sg) & Registered mail

AXA Insurance Pte Ltd Motor Claims Department 8 Shenton Way #24-01 AXA Tower Singapore 068811

c.c. Clients

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 cop es 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.

By the lodgement of this report to the insurers, you hereby consaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	14/02/2020 17:38
Date Of Accident	14/02/2020 02:50
Exact Location Of Accident	ALONG ECP FRONT XILIN AVE TWDS FORT ROAD
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	XB8506K
Insured/Policyholder	
Name Of Registered Owner	EXPRESS TRANSPORT SERVICES & CONSTRUCTION PTE LTD
Co Reg No	1XXXXX970Z
Email Address	KINHOE.NG@KTCGROUP.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-96155910
Vehicle Particulars	
Manufacturer	VOLVO
Model	FMX370 64R SLEEPER CAB
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	GOODS VEHICLE
Insurance Company	
Name of Insurance Company	GREAT EASTERN GENERAL INSURANCE LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2019-V0089141-VCV-R007
Cover Note Number	
Driver	

Name of Driver FAN KOK CHONG Passport No/FIN FXXXX269M Date Of Birth 15/04/1976 Occupation **OUTDOOR** Date Of Driving Pass 14/09/2002 Driving Experience 17 YEARS AND 5 MONTHS Gender MALE Mobile Number (LOCAL) +65-98953346

Fax Number

Contact Number

EMail Address NOEMAIL Address 27 PANDAN CRESCENT

Postcode 128476

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 REAF.

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

Was any body injured in the Accident? NO

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

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name JURONG WEST NEIGHBOURHOOD POLICE CENTRE

NO

YES

2

NO

YES

NO

1

Police Station Address ROAD: 700 CORPORATION ROAD, POSTCODE: 649818, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-2689999 - **FAX NO**: 62672438

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT NO. T/20200214/2022.

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 SJZ512J

Vehicle Make/Model/Cclour

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 Pg. 1

SKETCH PLAN

JTICE

aport correctly the details of the accident to speed up the claims process.

, Form must be completed by the Policyholder and/or the Authorised Driver.

Information provided must be as <u>truthful and accurate as possible</u>. Any wilful mis-epresentation 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.
- 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, hand ing 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 daims 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, aw 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:

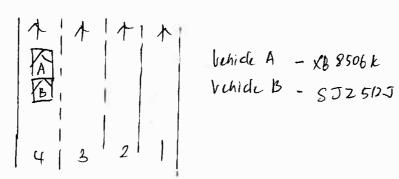
NRIC/FIN No.:

Name:

Reporting Centre Perso

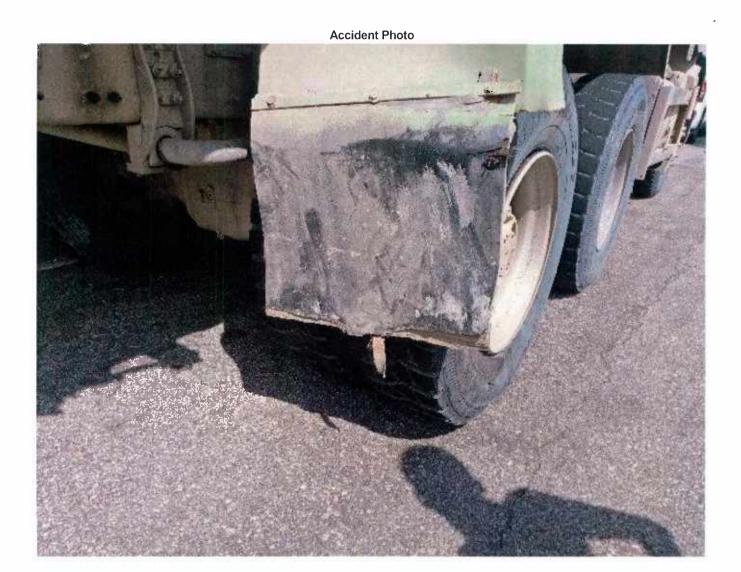
Sketch Plan Pg. 2

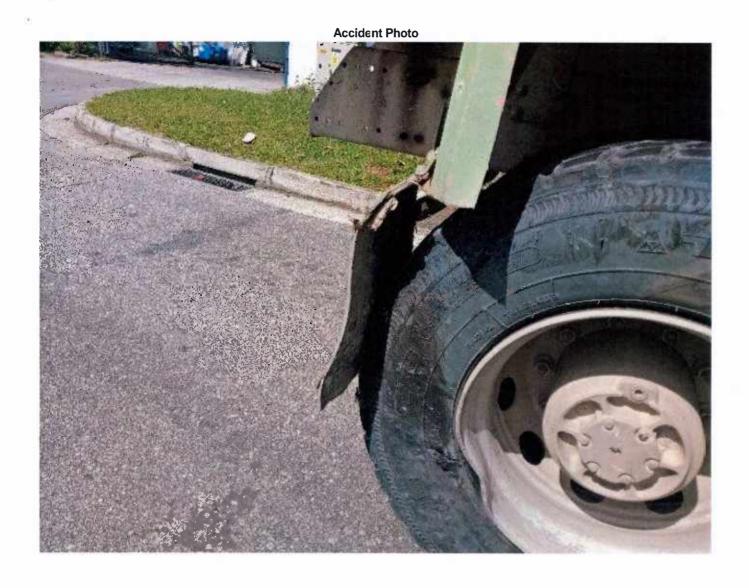
SKETCH PLAN

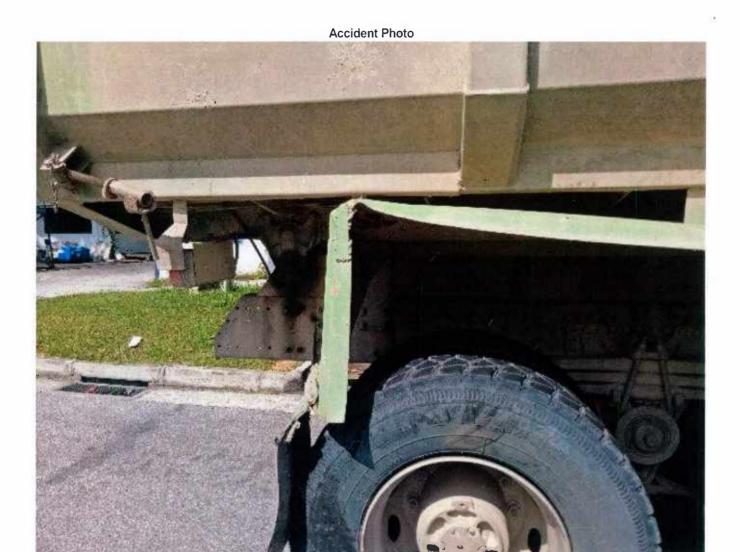


LICENSE PLATE:	ACCIDENT DATE	D TIME.	
	ACCIDENT DATE		
CONTACT NUMBER:	E-MAIL ADDRES	S:	
LOCATION:			***
Refer Report	No: T/20200214/2027		
•	,		
			, to the state of
	, , , , , , , , , , , , , , , , , , , ,		
NOTE: PLEASE NOTE TH	AT YOUR INSURER MAY HAVE 14 DAYS T	IME FRAME FOR Y	OU TO SUBMIT AN
OWN DAMAGE CLAIM UNDI	ER YOUR OWN POLICY. PLEASE CHECK Y	OUR POLICY FOR	MORE INFORMATION
Please state:			
() Claim Own Policy	() Claim Third Party () Claim OD/TP at	t other workshop	() Reporting Only
Policyh los Strature Date & Time:	Driver Shenature (If driver is not the policyholder) Date & Time:		tre Personnel's Signature





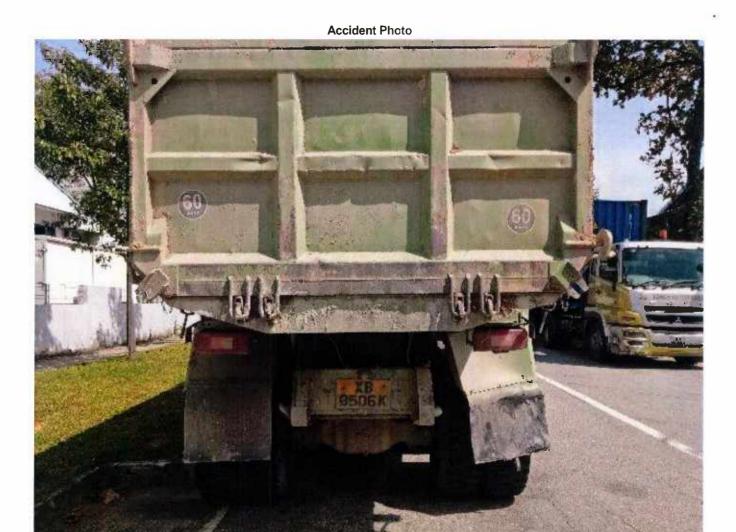


















1 of 3 Report No. T/20200214/2022

Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vide Report No.: Station Diary No.: 14/02/2020 09:40 G/20200214/0060 38 Informant's Particulars Name of Informant: Address: FAN KOK CHONG 84 Taman Bestari 06/2 Ulu Tiram ID Type / ID No.: Contact No.: FIN NO / F8255269M Home/Office: Mobile: 98953346 Nationality: Email: **MALAYSIAN** Sex: Age: Date of Birth: Type of Informant: Male 43 15/04/1976 Driver Race: Language: Institution / School Name: Chinese Occupation: Driving Licence Information: Lorry driver Class: 2B,2A,3,4,5 Date of Expiry:

General Informati	on of the Accident			THE REAL PROPERTY.	
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 14/02/2020 02:50		Type of Location: Straight Road
Location: Along Road 1 EAST COAST EX					
before fort road e	xit				
Weather:		Road Surface:		Road	d Speed Limit:
Clear		Dry			
Traffic Flow:		Traffic Control:		Traff	ic Volume:
One Way		Not Controlled		No 7	raffic
Type of Collision: Between Moving	Vehicles - Head To R	ear			one conveyed by ulance:

Details of V	ehicle Invo	lved		经验证证		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJZ512J	Car				Totally	0
					Damaged	
XB8506K	Lorry				Slightly	0
121					Damaged	

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





3 of 3

Report No. 7/20200214/2022

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPCRE 649818

Tel No: 1800-2689999

CONTINUATION OF REPORT

Sketch Plan

0

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 Record	ing The Report:	\$ignature Of Informant:
J / Staff Sgt TAMILLMAARAN		
Stati Sgl TAIVIILLIMARAIN	S/O LE CHIVIAIN	* 5
Signature Of Interpreter:		Date/T me:
Not applicable		14/02/2020 09:40
Officer In Charge Of Case:		Classification Of Case:
TP / GIA / Staff Sgt WONG SIEU LUI-	17	
Contact No.: 65476151	r in	SN 126
Authentication Stamp NP168	Signature :	Also I
l s	ingapore Police	Force





2 of 3

Report No. T/20200214/2022

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999 CONTINUATION OF REPORT

Driver				人。		
Name	FAN KOK CHONG			ID No.		F8255269M
Related Vehicle	XB8506K (Lorry)			Conta	ct No.	98953346
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: 2B,2A,3,4,5 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ited Medical Leave	NIL.	Degree o	of Injury	NIL	

Brief Details.

On the 14th February at about 0250hrs, I was driving my company tipper lorry XB8506K along East Coast Expressway from Xilin Avenue towards fort road. I was driving to Marina East drive to unload some soil for the staging ground for dumping. As I was driving along the outer most left side lane when I felt a hit to the rear right side of my lorry. I quickly came out to see and saw that SJV512J had collided with my lorry and thereafter hit onto the right side metal divider at the expressway. EMAS arrived and called for ambulance and the traffic police. The paramedics made a check on the both of us and we suffered no injuries. The driver of the car did not want to be conveyed to hospital. Traffic police came shortly after informed us to lodge a police report vide G/20200214/0060. The damages to my lorry was a damaged right side mud guard, tire and rims. The car that collided my lorry was totally damaged due to the impact of hitting the metal divider. My lorry is fitted with a in car cam which might have captured the accident.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the clams process.
- 2. This Form must be $\underline{\text{completed by the Policyholder and/or the Authorised Driver}}$
- 3. 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.

Markey Markey Control and	ACCIDENT STATEMENT
Date Of Report	17/02/2020 16:31
Date Of Accident	14/02/2020 04:30
Exact Location Of Accident	ECP (MCE) BEFORE FORT RD EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJZ512J
Insured/Policyholder	
Name Of Registered Owner	KNG JUNWEI
Vehicle Particulars	
Manufacturer	BMW
Model	3351
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA523910
Cover Note Number	
Driver	
Name of Driver	KNG JUNWEI
NRIC No	S9318457B
Address	BLK 135 SIMEI ST 1 #09-56
General Information of the Accident	
Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Other Information	
Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1
Circumstances of Accident	
REFER TO POLICE REPORT: T/20200217/7015.	
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 Make/Model/Colour

Name of Driver

Insurance Company Name

DETAILS OF INJURED PERSON 1

Name KNG JUN WEI

Injured person in which vehicle? SJZ512J

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

funderstand, 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:
 - 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.
- (c) 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:

17/2/20

Ofiver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

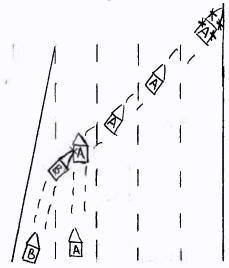
NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN

A: 5725125

B: XB8506K



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

0n	the	above	stated	date	and	time	, I	was	traveling	along
ECP	(MCE) Before	Ford	Road	Exit	. Ι ω	as t	raveling	Straigh	t on
		-				· · · · · · · · · · · · · · · · · · ·				
the	4th	lane	when	Sudden	y vel	nide B	(Gm	e ou	t from	the
Slip	road	and	without	checking	vehi	de B	Coll	ded .	on to	му
vehi	ulc let	it porto	n dye	to	the	huye	impa	t m	vehicle	swril
					<u></u>				the rig	
			3211						8.0	
of	the	rad.			, , , .	and an experience of the second			10-010	
									154-1	
				, ····		·				

DECLARATION

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

Folicyholder's Signature Date & Time:

(If driver is not the policyholder)
Date & Time:

Reporting Tentre Personnel's Signature Name: NRIC/FIN No.:

Page 4 of 20

Sketch Plan #3 Pg. 1





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20200217/7015

REPORT OF A TRAFFIC ACCIDENT

Date/Time 17/02/202	Report Ma 0 15:02	nde:	Vide Report No.:	Station Diary No.:
Informant	's Particul	ars		(2) [[a] (a) (b) (b) (b) (b) (b) (b) (b) (b) (b) (b
Name of I			Address: APT BLK 135 SIMEI STREET	1 #09-56 SINGAPORE 520135
ID Type / I NRIC NO	ID No.: / S9318457	7B	Contact No.: Home/Office:	Mobile: 97889120
Nationality SINGAPO	/: RE CITIZE	N	Email: haroldkngjw@gmail.com	19
Sex: Male	Age: 26	Date of Birth: 22/05/1993	Type of Informant: Driver	
Race: Chinese	•	 	Language: English	Institution / School Name:
Occupatio INSURAN	n: CE AGEN	Γ	Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/02/2020 04:30	Type of Location Straight Road
Location:				<u> </u>
EAST COAST	ΓΡΔΡΚΙΜΔΥ			
Weather:		Road Surface:		Road Speed Limit:
		Road Surface: Dry	1	Road Speed Limit: 90 Km/h
Clear	-			
Weather: Clear Traffic Flow: One Way		Dry		90 Km/h

Details of Vehicle Involved						
Vehicle No	Туре	Make	Model	Color	Condition	No of Passenger
SJZ 512J	Car	BMW	335I CONVERTIB	White		0
XB8506K	TIPPER TRUCK				Slightly Damaged	1

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SJZ512J	AXA INSURANCE SINGAPORE PTE LTD	GA523910	07/01/2020	06/01/2021		

Sketch Plan #4 Pg. 1





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

2 of 3 Report No. T/20200217/7015

CONTINUATION OF REPORT

Details of Perso		WA THE				
Any Pedestrian II	nvolved: No			_		
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver		A SECTION			100	
Name	KNG JUNWEI			ID No		S9318457B
Related Vehicle	SJZ512J (Car)			Conta	ct No.	97889120
Hospital/C inic	NIL			Class Drivin Licent Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	15/02/2020		Date Discl	Date Discharge 15/02		2/2020
No. of Days granted Medical Leave 07			Degree of	egree of Injury Serious		us

Brief Details.

ON THE ABOVE STATED DATE AND TIME, I WAS TRAVELING ALONG ECP(MCE) BEFORE FORD ROAD EXIT. I WAS TRAVELING STRAIGHT ON THE 4TH LANE WHEN SUDDENLY VEHICLE (XB8506K) CAME OUT FROM THE SLIP ROAD AND WITHOUT CHECKING HIS BLIND SPOT VEHICLE (XB8506K) COLLIDED ON TO MY VEHICLE LEFT PORTION DUE TO THE HUGE IMPACT MY VEHICLE SWIFL TO THE RIGHT (1ST LANE) AND COLLIDED ON TO THE BARRICADE ON THE RIGHT SIDE ON THE ROAD.

I THEN WENT TO CONSULT A DOCTOR AT 525 ANG MO KIO AVENUE 10 #01-2407 S(560525) AND RECEIVE 7 DAYS MC FROM 15/02/2020 TO 21/02/2020.

Sketch Plan #5 Pg. 1





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

Report No. T/20200217/7015

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan

NP168

Signature Of Officer Recording The Report: 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: Not applicable	Date/Time: 17/02/2020 15:02
Officer In Charge Of Case: TP / TPIB / THABAGESH JEYATHESH Contact No.: 65476232	Classification Of Case:
Authentication Stamp	

LETTER OF UNDERTAKING

I/We, KN9 JUN WZ/	, the owner of vehicle	no
My/Our Insurance is under M/s AXA Insuclaim under my/our Policy or against the such a claim to M/s AXA Insurance Pte Liwithin 14(fourteen) days of occurrence	td with all relevant facts	and documents
My/Our Third Party claim is handle by m	y/our preferred worksho	p,
Signed and Acknowledge by:		
Nric no. & signature of policyholder		17/02/90 Date





1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

⊠ customer.care@axa.com.sg

www.axa.com.sg

Certificate of Insurance

account number 04196

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960 -Road Transport Act. 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name

KNG JUNWEI

Certificate number

GA523910 / 1

Cover Plan name Comprehensive Essential

Chassis number Engine number

WBAWL72010JZ95337 09396658N54B30A

NCD applicable Vehicle registration number 30%

5175121

from 07/01/2020 to 06/01/2021 (both dates inclusive)

Period of Insurance Finance loan company

TOKYO CENTURY LEASING (S) PTE LTD

Persons or classes of persons entitled to drive*

(a) The Policyholder

(b) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle 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 Vehicle.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on. a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace making or such similar purposes.

* Limitations rendered Inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Basic Own Damage Excess

Windscreen Excess

SGD 1.200.00 SGD 100 00

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- 2. S\$500 for declared Young and Inexperienced Driver
- 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops

Additional clauses & endorsements to your policy

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

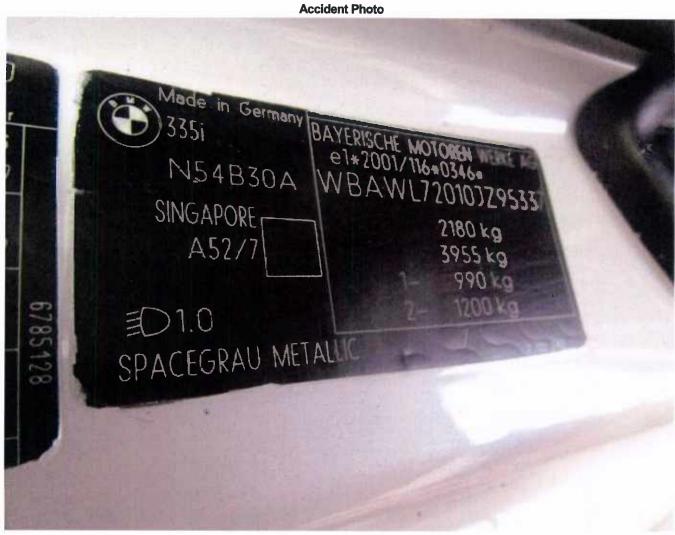
Authorised signature

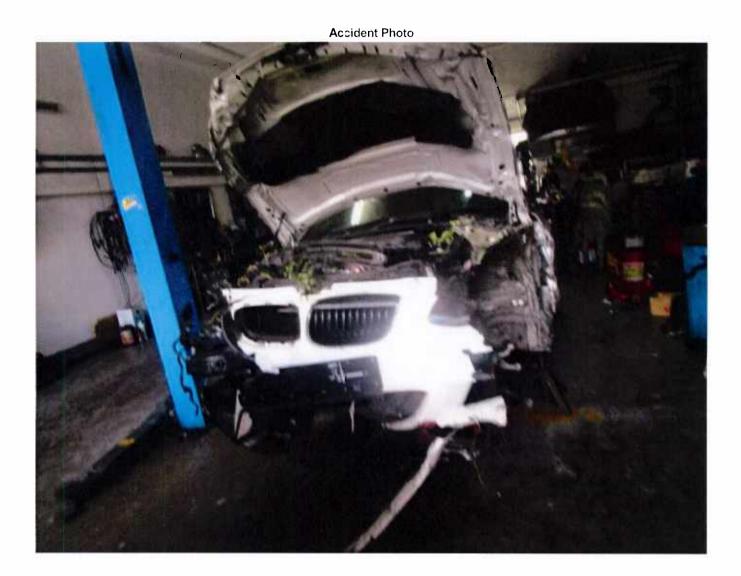
Important note

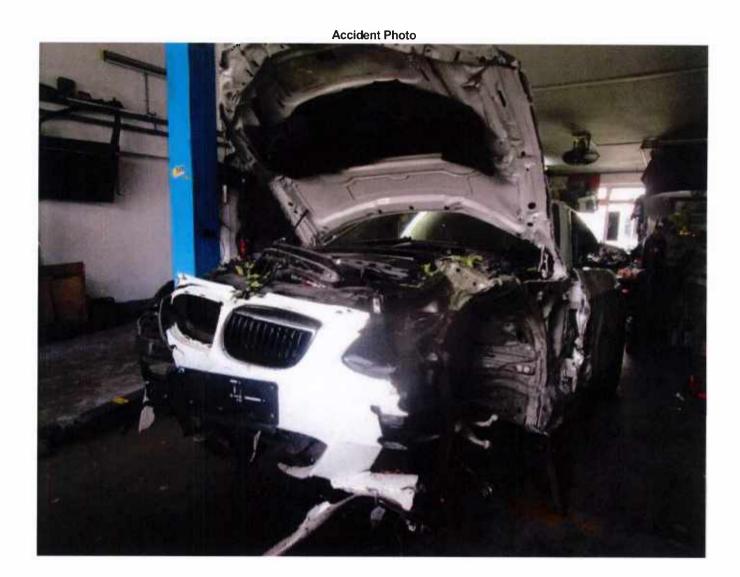
Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

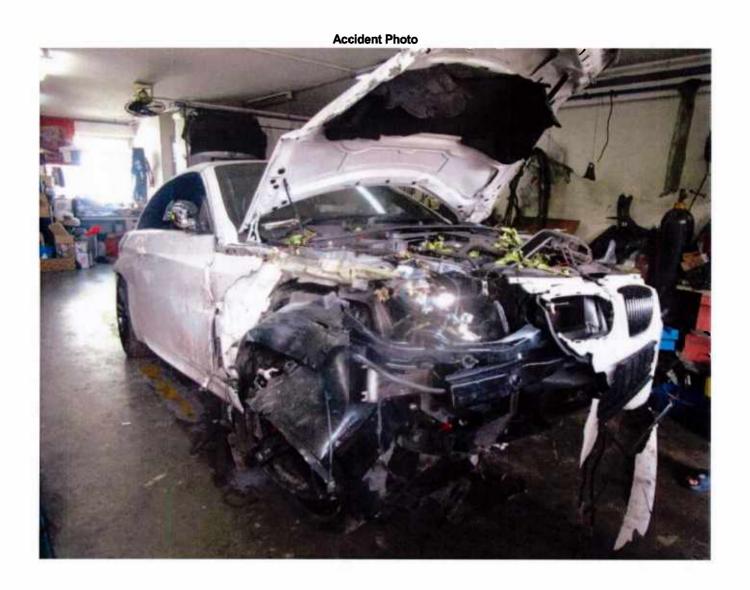
The Premium Warranty Clause requires the premium to be paid in full within a specific period falling which there would be no flability under the policy, renewal certificate, endorsement etc.

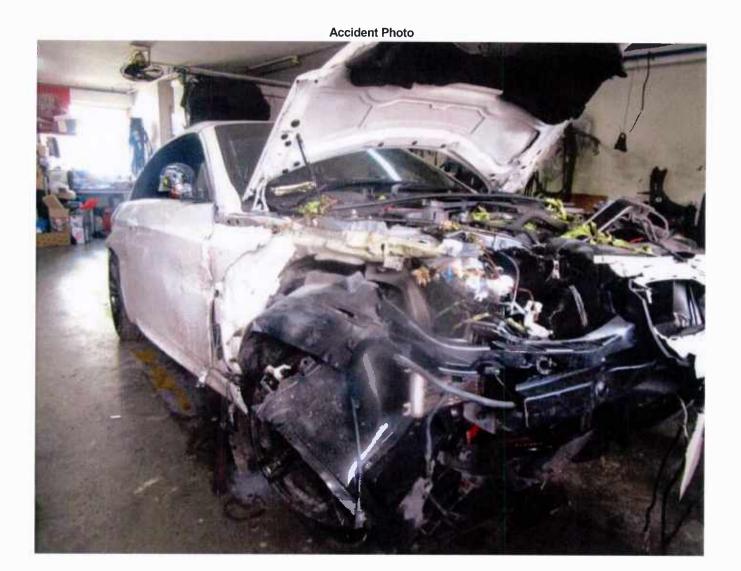
AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01



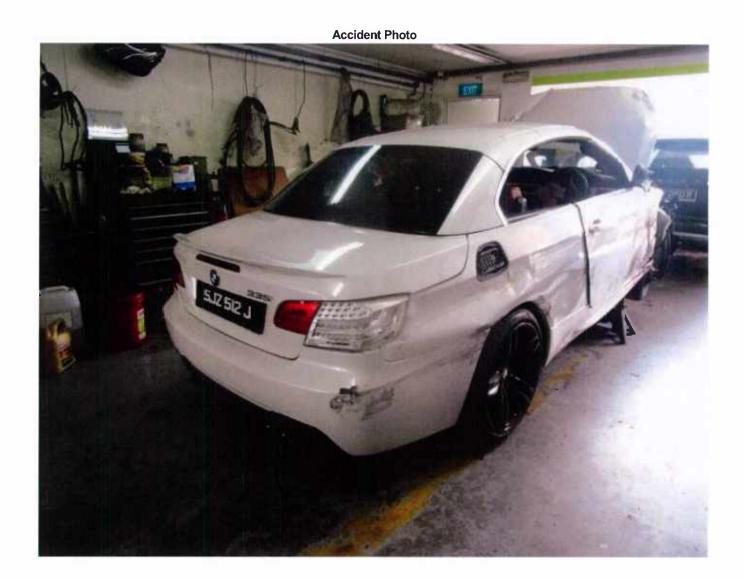




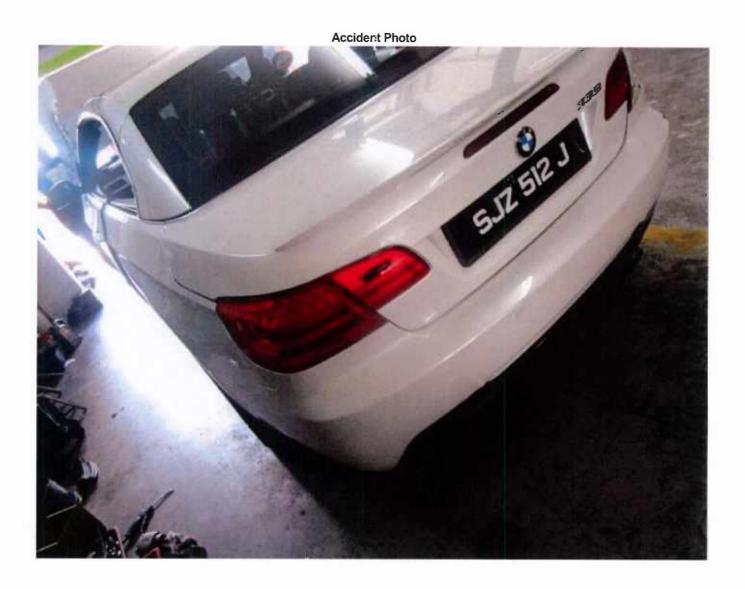












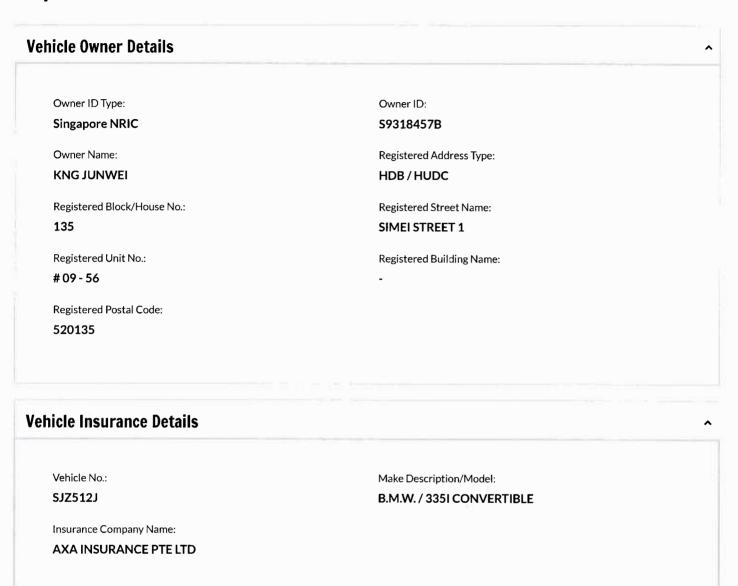


Addendum Sheet Pg. 1

	CARLEST INTUINICE A	SSULIATION OF SINGHPURE OF ALLERS	
GENERAL	CONTRACTOR STATE	(288)	
INSURANCE	Cream out more	4 (03)	
	SELECTION ROLL NO : Nº	00017725	,
WITH WITH THE	rase submit the complete. th whom you submitted th	d Addendum form to the <u>same</u> Authori ne Original Report	sed Reporting Centre
		DDENDUM	
A) PARTICULARS OF PE	RSONMAKING THE AMER		
Original Report No .			17 CNT
Namejas shownin NRIC):	ENG per WE	venicle Registration No: 20	S 930845
	icle Owner) (*) Please de	NRIC/FIN/Passport No =	3 12:045
Address	BIE 135 SIM	NEL 871 #09-56	
-		07.000	_Singapore(500)25
Contact (Tel) :		Mobile No.: 41889	po
Email Address :_	haroldkuglu	Degna: 1. com.	
Date of Accident	14102/2000	Time of Accident :	0430
Place of Accident :_	Bep (mcs)	BBFOKE FORT RD	Exq
		b	
nsurance Company:		7-22-4	
ADDITIONAL INFORMA	TION / AMENDMENTS: the above mentioned aco	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	sident and would like to include additi	onal information Or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned as	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned acondments:	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned acondments:	ident and would like to include additi	onal information or
ADDITIONAL INFORMA	the above mentioned acondments:	ident and would like to include additi	onal information or
ADDITIONAL INFORMA have made a report on nake the following ame	the above mentioned acondments:	ident and would like to include additi	onal information or
have made a report on make the following ama	the above mentioned acondments:		
ADDITIONAL INFORMA have made a report on nake the following ame	the above mentioned acondments:	Reporting Centre Personnel' Name: NRIC/FINNO.:	

Enquire Vehicle Owner Details

Enquire Vehicle Owner Details (As At 14 Feb 2020 / 02:50:00)



Save as PDF

Print

ОК→



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 417800 Hotline: **6385 1171**

Our reference:

20-02-9104

Date:

15/3/2020

INVOICE NO.

9104

Express Transport Services & Construction Pte Ltd c/o Vfix Auto Pte Ltd 26 Chia Ping Road Singapore 619977

Registration No.

XB8506K

We enclose our fee note for your kind attention, which remains payable irrespective of the outcome of this case.

S/No.	Description of Services Provided	Qty	Amount
1	Being vehicle damage assessment report, inspection, photographs, transport and miscellaneous.	1	\$ 859.00
		Total amount	\$ 859.00

Please kindly cross all cheques made payable to "Impact Analysis Consultant".

We thank you in anticipation for your prompt payment.

_ V

L. L. Tan (Ms)
Principal Consultant



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 41780

Hotline: 6385 1171

Our reference:

20-02-9104

Date:

15/3/2020

c/o Vfix Auto Pte Ltd 26 Chia Ping Road Singapore 619977

Dear Sirs

RE:

Road Traffic Accident on 14/2/2020

Express Transport Services & Construction Pte Ltd

In accordance with your instructions received in this office on

21/2/2020

, we made arrangements to

examine the vehicle on

21/2/2020

at above-mentioned address. The following data was

recorded:

Vehicle details

Make	Volvo	Registration	XB8506K
Model	FMX370 64R	Chassis	YV2J1E1D0CA732634
Colour	White/Green	Gearbox	Auto
Odometer	8315776km	Paintwork	Good
Steering	Good	Brakes	Good
Condition	Good	2 2 5 E 0 B B B B B B B B B B B B B B B B B B	

Tyre Depths

Front left	315/80R22.5	Triangle x 2
Front right	315/80R22.5	Triangle x 2
Rear left	315/80R22.5	Triangle x 4
Rear right	315/80R22.5	Triangle x 4

Status	REPAIRABLE
Magnitude	Medium
Legal status	Unroadworthy

Impact Direction & Area of Damage:



Following our examination of the accident damage, we have calculated repair times and method, which are detailed on page 2 & 3. We would recommend a sum of \$25,700.00 and working days for repair, which is sufficiently lower than the pre accident value to render the vehicle an economically and physically reliable proposition.

Subsidiaries of Impact Analysis Consultant:

- Impact Analysis Consulting Pte Ltd
 Impact Analysis Academy Pte Ltd
 IA Racking Solutions Pte Ltd
- IA Accounting & Consultancy Pte Ltd
 Infoknights International Services (Philippines)
 IABN Pte Ltd



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 41780 Hotline: 6385 1171

Our reference

20-02-9104

Date

15/3/2020

Page

2

Section A: Damaged Parts Assessment

Part's Description	Qty	Condition As inspected	Repairer's Estimate	Our Adjustment	
<u>List Items:</u>					
Rear mudguard rh	1	damaged	750.00	750.00	700 🗸
Rear mudguard bracket rh	set	damaged	550.00	550.00	400✓
Rear mudflap rh	1	damaged	180.00	180.00	150√
Rear axle assy	1	damaged	22000.00	22000.00	X svc
Rear axle mounitng @\$1200 1	-2	damaged	2400.00	2400.00	500 ✓
Suk	o- Total	costs	25880.00	25880.00	
Percentage disc	count :	0%	0.00	0.00	
Sub-Tot	al costs	for parts	25880.00	25880.00	1750
Special Nett Items:					
Rear tyre rh @90% 50% of 600 = \$300	1	daamged	600.00	540.00	300 ✓
Rear tyre rim rh	1	damaged	850.00	850.00	700 ✓
Sub-Tot	al costs	for parts	1450.00	1390.00	
Parts Repair					1000
*	*		0.00	0.00	
Suk	- Total	costs	0.00	0.00	
Total	costs fo	r parts	27330.00	27270.00	

[•] Impact Analysis Consulting Pte Ltd • Impact Analysis Academy Pte Ltd • IA Racking Solutions Pte Ltd

[•] IA Accounting & Consultancy Pte Ltd • Infoknights International Services (Philippines) • IABN Pte Ltd



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 41780 Hotline: 6385 1171

Our reference

20-02-9104

Date

15/3/2020

Page

3

Section B: Labour Cost Calculation

	Hourly rate	Manhr. Reg.	Total	
To dismantle, replace, cut, weld, knock out dents to straighten accident parts as-mentioned on the 'Parts Repair' column inclusive of replacement parts.	*	+	\$ 1,000.00	600 ✓
Putty & Spray painting to adjacent panels. Job allowance. Paint / material.		tract work.	\$ 900.00	300 ✓
Apply rust proofing on the adjacent panels.	Sub-contract work.		\$ 80.00	30 🗸
Remove and refix rear undercarriage works	*	*	\$ 1,800.00	600 🗸
Wheel alignment charges	*	*	\$ 150.00	100 ✓
Wiring and bulb checking	(*)	*	\$ -	4000
	Total la	bour cost	\$ 3,930.00	1630

Manhour rate and the number of manhours required for each repairing task are formulated based on individual workshop's operating cost and in-house@ IA Research Guidelines respectively.

Total - 4380

L/S - 3504 = 3500

5 repair days

Subsidiaries of Impact Analysis Consultant:

[•] Impact Analysis Consulting Pte Ltd • Impact Analysis Academy Pte Ltd • IA Racking Solutions Pte Ltd

 [◆] IA Accounting & Consultancy Pte Ltd
 ◆ Infoknights International Services (Philippines)
 ◆ IABN Pte Ltd



No.25 Kaki Bukit Road 4 #06-46 Synergy @KB Singapore 41780 Hotline: **6385 1171**

Our reference

20-02-9104

Date

15/3/2020

Section C: Summary Table of Total Repair Cost

Description		Cost	
Damaged Parts Assessment (See section A)		\$27,270.00	
Further discount 20%		\$5,454.00	
Recommended cost of parts		\$21,816.00	(1)
Labour Cost Calculation (See section B)		\$3,930.00	(2)
Total Repair Cost (Round off to hundred)		\$25,700.00	(1) + (2)

We would recommend a sum of	\$25,700.00	and	7	working days for repair
No further items will be approved	without our expresse	d written agree.	ment. Any signifi	cant additional
items will be subject to a suppleme	entary report.			

Mechanical Engineer, Accident Expert Witness, Licensed Appraiser (Automobile)

B.Eng. (Hons, NUS)

Diploma.Mechanical Engineering

NTC-2 Automovite Technology

Sr.MIES, Institution of Engineers, Singapore (#20100091)

MATAI, Maryland Association of Traffic Accident Investigators

IAARS, International Association of Accident Reconstruction Specialists

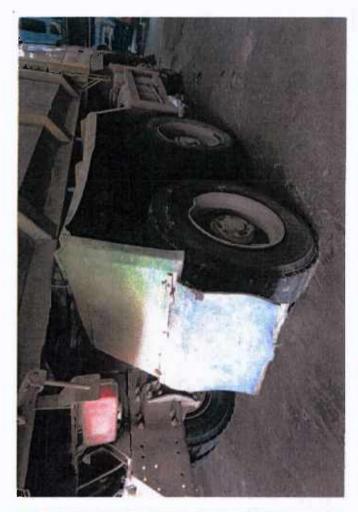
PMC of Singapore Business Advisors & Consultants Council

ACTA certified Trainer, Singapore

SPRING- Recognised Certification for Management Consultants

Subsidiaries of Impact Analysis Consultant:

- Impact Analysis Consulting Pte Ltd Impact Analysis Academy Pte Ltd IA Racking Solutions Pte Ltd
- IA Accounting & Consultancy Pte Ltd
 Infoknights International Services (Philippines)
 IABN Pte Ltd

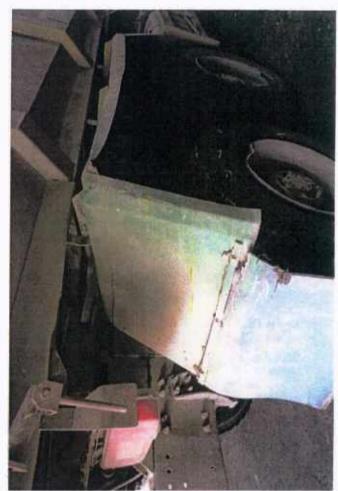




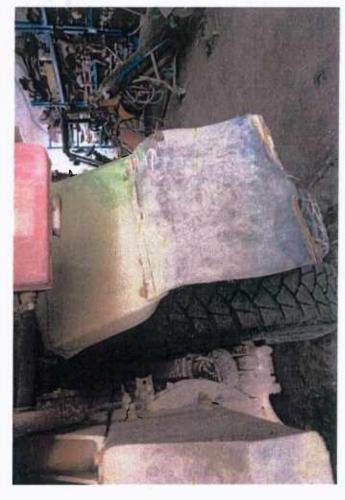


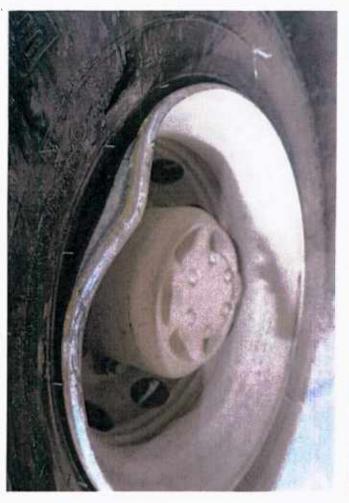












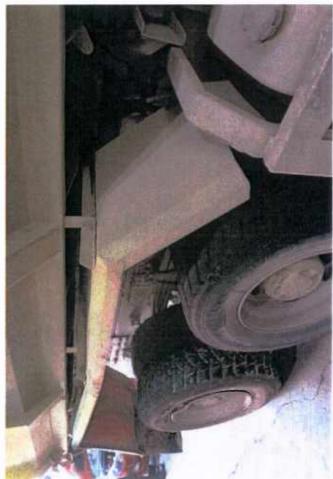




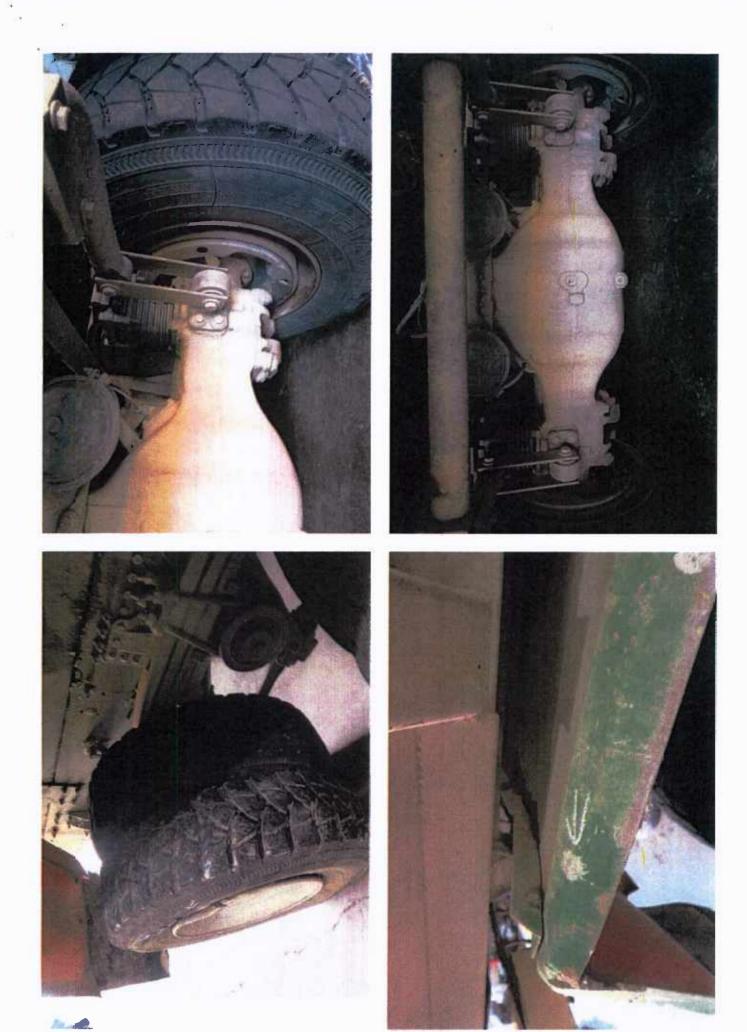








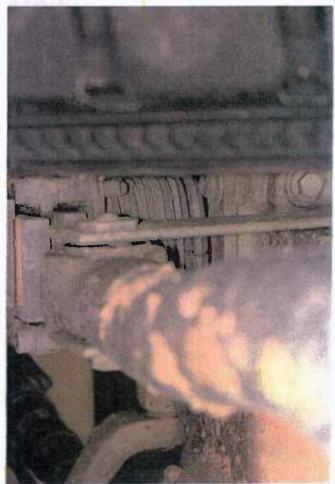




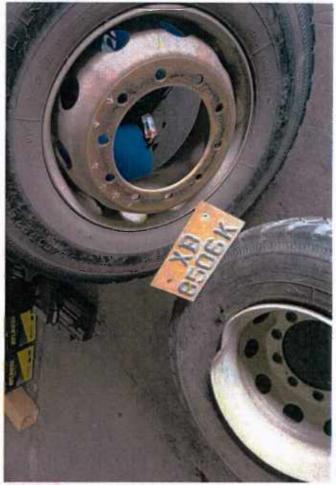




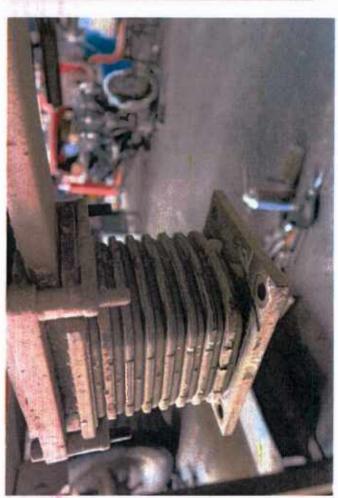




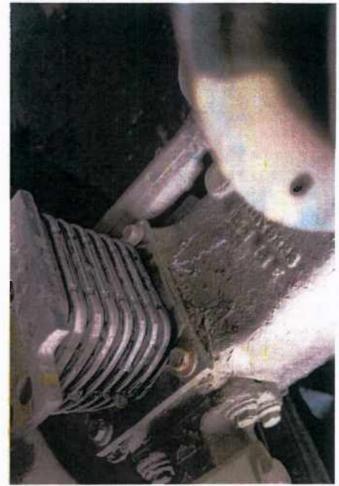








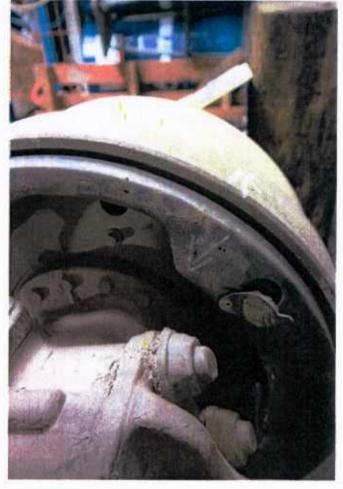
























For Customer Service please visit 1 Pickering Street #01-01 Great Eastern Centre Tel: +65 6248 2888 Fax: +65 6327 3080

Certificate of Insurance



ORIGINAL

Road Transport Act 1987 (Federation of Malaysia)
The Motor Vehicles (Third-Party Risks) Rules, 1959 (Federation of Malaysia)
The Motor Vehicles (Third-Farty Risks and Compensation) Act. (Cap.189 of the Revised Edition) (Republic of Singapore)
The Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960. (Republic of Singapore)

FORM M2300

Policy No. : 2019-V0089141-VCV-R007

Policy Type : Commercial Vehicle

Risk# : 0001

Cover : Comprehensive

DESCRIPTION OF VEHICLES:

Vehicle Registration : XB8506K Vehicle Make & Model : VOLVO FMX370 64R SLEEPER CAB

Name of Insured : EXPRESS TRANSPORT SERVICES & CONSTRUCTION PTE L

Period of Insurance: 24-08-2019 (0000HRS

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE * Any person who is driving on the Policyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle 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 Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

LIMITATIONS AS TO USE

(1) Use in Connection with the Policyholder's business.

(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

(3) Use for social, domestic and pleasure purposes.

The policy does not cover:

(1) Use for racing, pace-making, reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
 (3) Use for the carriage of passengers for hire or reward.

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings.

WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Signed for and on behalf of the Company

Authorised Signature

1500

GPGICSS

22-07-2019







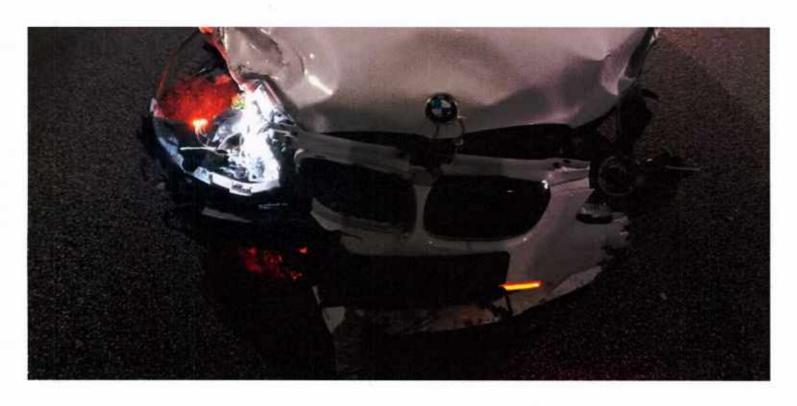


















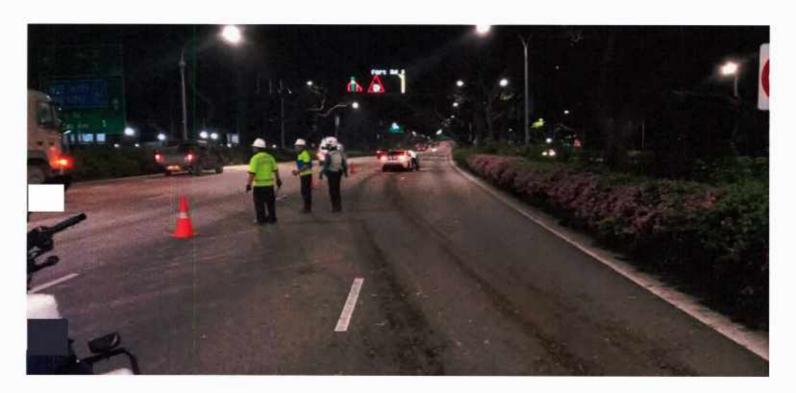


















Vfix Auto Pte Ltd 26 Chia Ping Road Singapore 619977 E-mail: wskoh@vfixauto.com.sg Tel: 64552957 Fax: 68628669 UEN/GST Reg. No.: 201830761R

FINAL REPAIR BILL

AXA INSURANCE SINAGPORE PTE LTD

8 SHENTON WAY #27-01 AXA TOWER

SINGAPORE 068811

DATE

: 23/5/2020

VEHICLE NO

: XB8506K

MAKE/MODEL : VOLVO FMX370

ACC DATE

: 14/02/2020

CLAIM NO

: VFIX-TP20200732

POLICY NO

AMOUNT S\$

LUMP SUM REPAIR COST

Repair Amount

25,700.00

7% GST

1,799.00

Total

27,499.00

SINGAPORE DOLLARS: TWENTY SEVEN THOUSAND FOUR HUNDRED NINETY NINE ONLY

VFIX AUTO PTE LITE

Ken Tan

Operation Director

VFIX AUTO PRIVATE LIMITED

26 CHIA PING RD SINGAPORE 619977 UEN / GST REG NO.: 201830761R

TEL: +65 6455 2957 FAX: +65 6862 8669



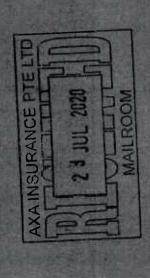
Date: (7 2 2020	
To AXA Insurance Ple Ltd. Motor Claims Department	By fax only
8 Shenton Way #24-01	
Ara Tower Singapore 068811	
Dear Sir/Mdm,	
NOTIFICATION	OF ACCIDENT
Please be informed that an accident involving vehicle(s) no	my/our vehicle noX88506K and had taken place at / alongon date4/200 at
	the date of this notice if you wish to carry out or
If we do not hear from you within 2 workin without further notice and our client shall clai giving of this notification to you.	g days, we shall proceed to repair the vehicle m for the additional loss of use arising from the
Please call Ms Tan at 98388224 to arrange.	
Yours sincerely,	PRI
\cap I	Date / Time
<i>Y</i> : <i>I</i>	Company Name
<i>X</i> 1//	Surveyor
	Contact No.
V V	Signature
	DISMANTLED PARTS
	Date / Time
	Surveyor
	AFTER REPAIR
	Date / Time
	Surveyor

Bundle:11380047 3019941106



Bundle: 11380047 3019941106

200 504 VA



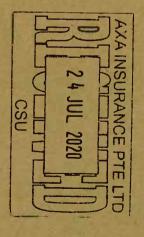
AXA Insurance Pte Ltd Motor Claims Department 8 Shenton Way #24-01 AXA Tower Singapore 068811













Charloses Jaw 5323 45 North Canal Rouad #05-01 Lew Building Singapore 059301 Tel: (65) 65353 234 Fax: (65) 65353 502