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INVESTIGATION FEE

SURVEY FEES

LEGAL FEES

OTHERS

FRAUD CHECK

UPLOAD TO MERIMEN

GRANT RIGHTS

 *** FAX TX REPORT ***

TRANSMISSION OK

JOB NO. 3851
 DESTINATION ADDRESS 969096246
 SUBADDRESS
 DESTINATION ID
 ST. TIME 23/03 11:19
 TX/RX TIME 00' 53
 PGS. 2
 RESULT OK



SL LAW CHAMBERS

ADVOCATES & SOLICITORS, Notary Public & Commissioner For Oaths

Reg No. 53388805X

11 Keng Cheow Street #02-03 Singapore 059608

Tel : 6909 9356, Fax : 6909 6246, E-mail : prs@slaw.com.sg

Our ref : PD.190921/sp

Your ref : SHD7212T

Date : 19 MAR 2020

INDIA INTERNATIONAL INSURANCE PTE LTD

64 Cecil Street

#04 / #05 / #06-02 IOB Building

Singapore 049711

Attention: Motor Claims DepartmentWITHOUT PREJUDICE
BY HAND

Dear Sir,

CLAIMANT: LIM ZI XIANG HENRY – OWNER OF SKC6509P
PROPERTY DAMAGE CLAIM ARISING FROM ROAD TRAFFIC ACCIDENT INVOLVING MOTOR VEHICLES NO. SKC6509P AND SHD7212T ALONG ORCHARD ROAD TOWARDS BUYONG ROAD ON 24 JANUARY 2020 AT ABOUT 0520 HOURS

We refer to the above matter.

We are instructed by **LIM ZI XIANG HENRY** to claim damages against your insured in connection with a road traffic accident on **24 JANUARY 2020 ALONG ORCHARD ROAD TOWARDS BUYONG ROAD** involving **SHD7212T** driven by you / your insured's driver at the material time.

We are instructed that the accident was caused by your / your insured driver's negligence. As a result of the accident, our client suffered damages, loss and expenses of which particulars are set out in the report(s) annexed hereto this letter:

a)	Cost of Repair (incl of GST)	: S\$ 4,066.00
b)	Loss of Rental (\$70.00/day x 13 days (Incl. 2 days PRI & Weekends))	: S\$ 910.00
c)	Survey Report Fee	: S\$ 379.00
d)	LTA / GIA search fee	: S\$ 7.49
e)	Colour Photos (\$1.00/page x 8 pages)	: S\$ 8.00
f)	Incidentals	: S\$ 150.00
g)	Costs	: S\$ 1,000.00



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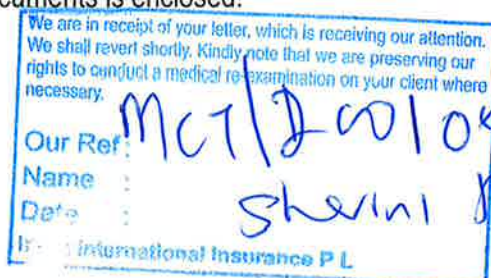
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d)	LTA / GIA search fee	: S\$ 7.49
e)	Colour Photos (\$1.00/page x 8 pages)	: S\$ 8.00
f)	Incidentals	: S\$ 150.00
g)	Costs	: S\$ 1,000.00
Total		: S\$ 6,527.98

A copy each of the following supporting documents is enclosed:

- (1) Our client's GIA/TP report;
- (2) LTA search;
- (3) Final Repair Bill;
- (4) Rental Invoice;
- (5) Surveyor Report; and
- (6) Coloured Photographs



Our client has on 7 February 2020 notified **INDIA INTERNATIONAL INSURANCE PTE LTD** of the accident and a reply was received with an appointment fixed for pre-repair survey of our client's vehicle.



SL LAW CHAMBERS

ADVOCATES & SOLICITORS, Notary Public & Commissioner For Oaths

Reg No. 53388805X

11 Keng Cheow Street #02-03 Singapore 059608

Tel : 6909 9356, Fax : 6909 6246, E-mail : prs@slaw.com.sg

=====

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurers.

Please note that you or your insurer should send to us an acknowledgement of receipt to us within 14 days of your receipt of this letter. Should you/your insurer fail to acknowledge receipt of this letter within 14 days, our client may commence Court proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully

SL LAW CHAMBERS

Encl

TO OWNER OF SHD7212T
COMFORT TRANSPORTATION PTE LTD
383 Sin Ming Drive
Gas Building
Singapore 575717

CERTIFICATE OF POSTING
(WITHOUT ENCLOSURES)
FOR YOUR INFORMATION ONLY

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 withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. 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	29/01/2020 17:04
Date Of Accident	24/01/2020 05:20
Exact Location Of Accident	ORCHARD ROAD TOWARDS BUYONG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC6509P
Insured/Policyholder	
Name Of Registered Owner	LIM ZI XIANG HENRY
NRIC No	SXXXX046D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93838689
Alternative Phone No	OFFICE-93838689

Vehicle Particulars

Manufacturer	SUBARU
Model	IMPREZA 5D 1.5R AWD AT
Exact Purpose for which vehicle was being used at time of accident	LEISURE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00742239
Cover Note Number	

Driver

Name of Driver	LIM ZI XIANG HENRY
NRIC No	SXXXX046D
Date Of Birth	30/01/1988
Occupation	INDOOR
Date Of Driving Pass	06/08/2010
Driving Experience	9 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93838689
Fax Number	
Contact Number	OFFICE-93838689
Email Address	NOEMAIL

Address BLK 434 HOUGANG AVE 8 #10-906
Postcode 530434
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OWNER
Vehicle Registration Number of Driver's Own Vehicle -
-
Insurance Company of Driver's Own Vehicle -
-

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE
Weather Conditions CLEAR
Road Surface DRY

Other Information

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

Passenger 1 NAME: : UNKNOWN
GENDER: : MALE
Passenger 2 NAME: : UNKNOWN
GENDER: : MALE
Passenger 3 NAME: : UNKNOWN
GENDER: : MALE

NOT IN

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

WHILE I WAS MAKING A LEFT TURN ONTO BUYONG ROAD, VEHICLE B CROSS INTO MY LANE AND HIT MY VEHICLE LEFT PORTION. I WISH TO STATE THAT I WAS IN MY LANE AND VEHICLE B MAKE A WIDE TURN. VIDEO FOOTAGE HAS BEEN CAPTURED ON MY DASHI CAM

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 SHD7212T
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
Name of Driver

NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

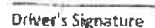
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2. This form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate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

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all Insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

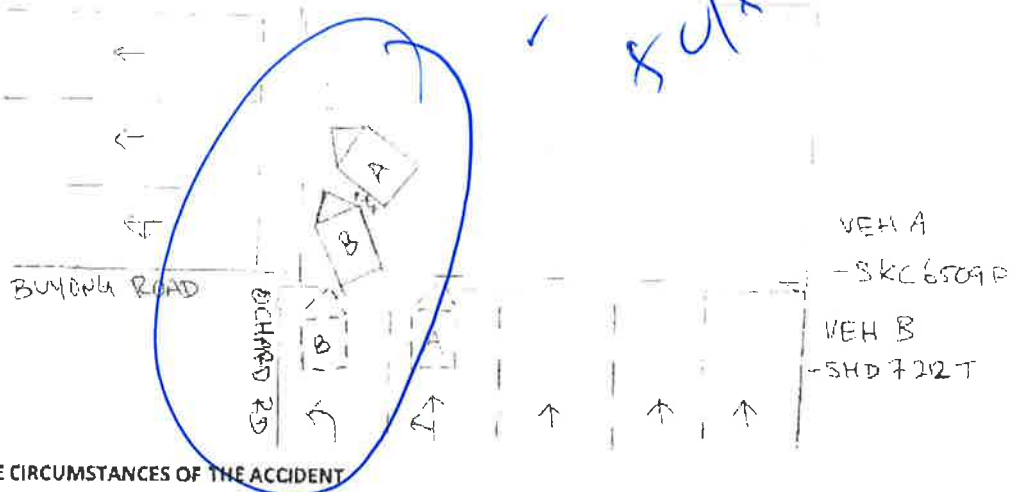

Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name: MAH SIEW HIEW
NRIC/FIN No.: S8208988E

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While I was making a left turn onto Buyong Road, vehicle B cross into my lane and hit my vehicle left portion. I wish to state that I was in my lane and vehicle B make a wide turn.

Video footage has been captured on my dash cam

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: MAH STEW HERNAN
NRIC/PIN No.: S8208788E

Enquire Vehicle & Owner Information (Vehicle No. SHD7212T As At 24 Jan 2020 / 05:20:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: PD.190921/LP

Current Owner Details

Owner ID Type: Company

Owner ID: 199303821R

Owner Name: COMFORT TRANSPORTATION PTE LTD

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 383

Registered Street Name: SIN MING DRIVE

Registered Unit No.: -

Registered Building Name: GAS BUILDING

Registered Postal Code: 575717

Current Vehicle Details

Vehicle No.: SHD7212T

Make Description/Model: TOYOTA / PRIUS HYBRID 1.8 CVT

Insurance Company Name: INDIA INT'L INS PTE LTD

Print

OK



Thank you

Kang Peng Luan has successfully logged out.

Your last login date and time was 07 Feb 2020, 15:07:48.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

S/No. <small>1</small>	Asset Type <small>1</small>	Asset ID <small>1</small>	Asset Owner ID <small>1</small>	Transaction Type <small>1</small>
1	Vehicle	SHD7212T	-	18.19 Enquire Veh Owner Info (Others) by Law Firm

ROC NO : 201716952C + GST NO : 201716952C

VEHICLE NO: SKC6509P SUBARU IMPREZA / ACCIDENT DATE / TIME : 29.01.2020 17:04 PM



GV MOTORWORKS PTE LTD



Biz Reg No. 201837456H

Invoice To:

LIM ZI XIANG, HENRY

BLK 434 HOUGANG AVE 8 #10-906 (S) 530434

GV RENTAL PTE. LTD.

68 Kaki Bukit Avenue 6 #02-20

ARK@KB

Singapore 417896

Tel: +65 6957 4651 Fax: +65 6957 4652

Email: gv.car.rental@gmail.com

Invoice No. : GVR/20/00001

Date : 11-01-00

Due Date : 11-01-00

Description	Amount
Being Rental Of Vehicle : SJW1528Z HONDA FIT For Period : 08 FEB 2020 TO 21 FEB 2020 \$70 Per Day x 13 Days	\$ 910.00
Thank you for your Business!	Total Due \$ 910.00

If you note any discrepancy, kindly contact our Accounts Department within (7) days in writing from the date of this invoice. Otherwise all charges are deemed to be correct. Our Standard Business Terms and Conditions applies. A Copy is available upon request.

For and on behalf of
GV Rental Pte. Ltd.

Payment may be made by cheque payable to "GV Rental Pte. Ltd." or by telegraphic transfer to:

Account Name GV Rental Pte. Ltd.
Bank UOB BANK
Account No 3413136472



Authorised Signature

WG APPRAISAL SERVICES

Blk 224B, Compassvale Walk, #07-647.Singapore 542224

Email: Winsongkk@hotmail.com Contact: 9747 0063

Company Register No. 53326249J

Our Ref: WG/TP/2020-81
Invoice No: TP/GV/2020-81
Vehicle No: SKC6509P
Attn: LIM ZI XIANG HENRY
Company: GV MOTORWORKS PTE LTD
Address: 68 Kaki Bukit Ave 6, #01-10 ARK@KB .Singapore 417896

Date 03 March 2020

Invoice

Surveyor Fee:	S\$250
Re-inspection Fee:	S\$50
Transport:	S\$50
Photographs:	S\$29/- (@ \$1 per photo, total 29 photos)
Total:	S\$379

Surveyor:
Signature:
Date:

Winsong Goh
WG APPRAISAL SERVICE
03 March 2020

WG APPRAISAL SERVICES

Blk 224B, Compassvale Walk, #07-647, Singapore 542224
Email: winsongkk@hotmail.com Contact: 9747 0063
Company Register No. 53326249J

ACCIDENT DAMAGED VEHICLE INSPECTION REPORT

M/S : LIM ZI XIANG HENRY
C/O GV MOTORWORKS PTE LTD
68 Kaki Bukit Ave 6, #01-10 ARK@KB
Singapore 417896

Date : 03 March 2020
Our Ref : WG/TP/2020-81

REFERENCE PARTICULARS

Date of Accident : 24 January 2020
Date of Inspection : 13 February 2020

Type of Inspection : Third Party Claim
Date of Re-Inspn : 19 February 2020

VEHICLE PARTICULARS

Registration No : SKC6509P
Make : SUBARU
Model : IMPREZA 5D 1.5R AWD AT
Year : Na

Engine No : ELQ54LPIMA
Chassis No : JF1GH3KS59G035389
Odometer : 185048km
Colour : Blue

CONDITION OF VEHICLE (STATIC CHECKS AT TIME OF INSPECTION ONLY)

Engine condition : Good
Foot Brake : Serviceable
Hand Brake : Serviceable

General Body Work : Good
Steering : Serviceable
Lightings : Serviceable

TYRE CONDITION (Remaining estimated life of tyre in mm)

	<u>Make</u>	<u>Size</u>	<u>Thread Balance</u>
Front Near side	: Goodyear	225/45R18	5 mm
Front Off Side	: Goodyear	225/45R18	5 mm
Rear Near Side	: Goodyear	225/45R18	5 mm
Rear off Side	: Goodyear	225/45R18	5 mm

GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained damage at the left portion.
For details, refer to assessment for repairs and photographs attached.

ASSESSMENT SUMMARY

Our assessment of the repair costs to pre-accident condition was **S\$3,800.00** nett at lump sum basis. (Subject to GST if applicable)

Under normal circumstances, estimated period required for repairs : Seven (07) working days.

Enclosed Twenty-nine (29) photographs depicting damage to the vehicle.

Inspection conducted at : GV MOTORWORKS PTE LTD
68 Kaki Bukit Ave 6, #01-10 ARK@KB . Singapore 417896

In accordance to your instruction, we have **not authorise** repairs and inspection was conducted strictly on a "**WITHOUT PREJUDICE BASIS**".

VEHICLE NO : SKC6509P
MODEL : IMPREZA 5D 1.5R AWD AT

Our Ref : WG/TP/2020-81

ASSESSMENT OF REPAIRS AND SPARE PARTS COSTS

DESCRIPTION OF PARTS AND NATURE OF REPAIRS

	SPARE PARTS	QTY PC/SET	ASSESSED CONDITION		ORIGINAL QUOTATION	REVISED QUOTATION
1	FRONT LH DOOR PANEL	1	DENTED	\$	1,080.00	\$ 1,080.00
2	FRONT LH DOOR LOCK ASSY	1	NOT NECESSARY	\$	420.00	\$ 420.00
3	REAR LH DOOR PANEL	1	DENTED	\$	1,130.00	\$ 1,130.00
4	REAR LH DOOR LOCK ASSY	1	MALFUNCTION	\$	481.00	\$ 481.00
5	REAR LH FENDER	1	REPAIR	\$	-	\$ -
				\$	3,111.00	\$ 3,111.00
				Less 20%	\$ 622.20	\$ 622.20
				\$	2,488.80	\$ 2,488.80
B)	<u>S/NETT ITEM</u>					
6	FRONT DOOR INNER TRIM CLIP	1 SET	NECESSARY	\$	30.00	\$ 20.00
7	REAR DOOR INNER TRIM CLIP	1 SET	NECESSARY	\$	30.00	\$ 20.00
				\$	60.00	\$ 40.00
			Parts Total :	\$	2,548.80	\$ 2,528.80
C)	<u>LABOUR CHARGES & MISC</u>					
8	CHECK WIRING AND LIGHTNING SYSTEM			\$	60.00	\$ 50.00
9	REMOVE, REFIT LINING , TRIM AND GARNISH			\$	100.00	\$ 80.00
10	TRANSFER PARTS, ATTACHMENT FROM FRONT OLD DOOR TO NEW			\$	200.00	\$ 180.00
11	TRANSFER PARTS, ATTACHMENT FROM REAR OLD DOOR TO NEW			\$	200.00	\$ 180.00
12	PANEL BEATING ON AFFECTED AREAS			\$	800.00	\$ 700.00
13	SPRAY PAINTING ON AFFECTED AREAS			\$	1,000.00	\$ 900.00
14	APPLY ANTI RUST ON AFFECTED AREAS			\$	120.00	\$ 100.00
			Labour Total :	\$	2,480.00	\$ 2,190.00
			Total Parts and Laboure :	\$	5,028.80	\$ 4,718.80
	<u>FINAL LUMP SUM ADJUSTMENT</u>					\$ 3,800.00

POINT OF IMPACT

The impact was confined to the left portion of the vehicle.

The damages appeared to be consistent as per the accident report statement.

Please refer the attached schedule and photographs for details.

ADJUSTMENT/RECOMMENDATIONS

We have thoroughly inspected each and every item on the repairer's estimates against the actual damaged found on the vehicle. We have listed the breakdown of our findings and recommendations as per assessment above.

CONCLUSION

The repairer has agreed to undertake repair the vehicle at a lump sum basis of **\$3,800.00 nett** corresponding to replacement of parts, spray painting and labour charges. We now revert for your decision on the above claim.

Yours faithfully,
WG APPRAISAL SERVICES

Winson Goh
Automotive Appraiser



