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SERVICE COPY

PARWANI LAW LLC**ADVOCATES & SOLICITORS
COMMISSIONER FOR OATHS
NOTARY PUBLIC**

3019802019--

UEN No: 201410012K

Our Ref : VP.283137.19(ac)
Your Ref : (Please Quote in Reply)
Date : 8 October 2019

- | |
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| ☐ Via Fax |
| ☐ Via AR Registered |
| ☒ Via Certificate of Posting |
| ☐ Via Ordinary Post |
| ☒ Via Hand |
| ☐ Via Email |

Managing Director

Vijai Parwani parwani@parwanilaw.com.sg

AssociatesVictor Huang Po Han victor@parwanilaw.com.sg
Lim Shu Yi shuyi@parwanilaw.com.sg**Senior Legal Executive**

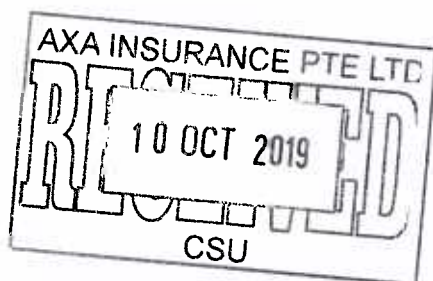
Ari James ari@parwanilaw.com.sg

Legal Executive

Andre Chua andre@parwanilaw.com.sg

Paralegal

Rajiv Singh rajiv@parwanilaw.com.sg

We do not accept service of court documents by fax**AXA INSURANCE PTE LTD**8 Shenton Way
#24-01 AXA Tower
Singapore 068811Attention: Motor Claims Department**JANSEN TEO**34 Mount Vernon Road
#04-16
Singapore 368057**CERTIFICATE OF POSTING
(For your information only)**

Dear Sirs,

CLAIMANT: LOH TECK SENG**ACCIDENT INVOLVING SLA 330A & SKM 9568X AT 46 LORONG 33 GEYLANG
TWDS SIMS AVE ON 22 MAY 2019**We act on the instructions of **LOH TECK SENG**, the owner of Motor Vehicle No. **SLA 330A** (the "Vehicle").

We are instructed by our clients to claim damages against you/your insured in connection with the abovementioned road traffic accident involving our clients' motor vehicle (SLA

Address: 151 Chin Swee Road #13-06 Manhattan House Singapore 169876**Tel:** 6734 9100 **Fax:** 6734 9160 **Email:** hello@parwanilaw.com.sg**Website:** www.parwanilaw.com.sg



PARWANI LAW LLC

ADVOCATES & SOLICITORS
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330A) and your/your insured's motor vehicle (SKM 9568X) driven by you/your insured at the material time.

We are further instructed that the accident was caused by you/your insured's negligence in driving and/or management of your/your insured's vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows: -

<u>S/No.</u>	<u>Description</u>	<u>Amount</u>
1	Repair Costs (Inclusive of 7% GST)	\$5,243
2	Loss of Rent at \$180 per day (6 days)	\$1,080
3	Survey Report Fees	\$500
4	LTA Search	\$7.49
5	Cost Contribution (at this stage)	\$1,000
6	Disbursements (at this stage)	\$80
		TOTAL: \$7,910.49

We enclose a copy of each of the following supporting documents: -

- a) GIA Report lodged by our client;
- b) LTA Search;
- c) Vehicle Rental Agreement;
- d) Surveyor's report from M/s ST Appraisal Services;
- e) Copies of photographs of our client's damaged vehicle; and
- f) Profoma invoice

The demand herein is in respect of our clients' claim for damages pertaining to their motor vehicle and any settlement following or subsequent to this demand shall not prejudice our clients' claim in respect of damages and consequential loss in relation to personal injuries.

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 insurer.

Please note that you and your insurer should send to us an acknowledgment of receipt of this letter within 14 days of 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.

Our clients' claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our clients.



PARWANI LAW LLC

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Please also take note that if you have a counterclaim against our clients arising out of the accident, you are 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,

PARWANI LAW LLC

Victor Huang Po Han

cc. Clients

Encl.

MSME19066784 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 23/05/2019 15:35
 SUBMITTED BY: Chia Pei Ying

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	23/05/2019 15:35
Date Of Accident	22/05/2019 12:50
Exact Location Of Accident	46 LORONG 33 GEYLANG TWDS SIMS AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA330A
Insured/Policyholder	
Name Of Registered Owner	LOH TECK SENG
NRIC No	S8005049F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96334403
Alternative Phone No	OFFICE-96334403

Vehicle Particulars

Manufacturer	BMW
Model	M5
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10904894
Cover Note Number	

Driver

Name of Driver	CYNTHIA CHA CHIN CHIN
NRIC No	S7605449E
Date Of Birth	24/02/1976
Occupation	INDOOR
Date Of Driving Pass	03/08/1994
Driving Experience	24 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92966966
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address 60 LENGKONG TIGA #08-01
 Postcode 417454
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured FRIEND
 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 RAINING
 Road Surface WET

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? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 3
 Passenger 1 NAME: : MICHELLE LIM
 GENDER: : FEMALE
 Passenger 2 NAME: : CHOO CHOON LENG
 GENDER: : MALE

Details of Police Action

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

Circumstances of Accident

I WAS TRAVELLING ALONG 46 LORONG 33 GEYLANG TOWARDS SIMS AVE. WHEN I WAS CHECKING THE MAIN ROAD IS CLEAR BEFORE TURNING INTO SIMS AVE. SUDDENLY, I FELT AN IMPACT FROM MY REAR. WHEN I GOT DOWN FROM MY VEHICLE, I REALISED THAT VEHICLE B COLLIDED ONTO MY VEHICLE

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 SKM9568X
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 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 PLANIMPORTANT NOTICE

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

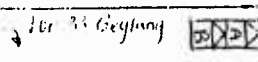

Policyholder's Signature / Date & Time


Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

R: SLN 330 A
R: SKM 4568 X

 EXD

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 23 May 2019 / 16:40:34

Receipt Date/Time : 23 May 2019 / 16:40:34

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190523-002568

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SJR105T				
As at 18 May 2019/16:30:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
1	Insurance Enquiry - SJR105T Enquiry Fee 20190523163923439908	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SJT7305B				
As at 22 May 2019/18:00:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
2	Insurance Enquiry - SJT7305B Enquiry Fee 20190523163923475254	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - PA7151G				
As at 22 May 2019/20:15:00				
Insurance Co: TOKIO MARINE INSURANCE SINGAPORE LTD				
3	Insurance Enquiry - PA7151G Enquiry Fee 20190523163923509584	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - GBF8309C				
As at 19 May 2019/15:09:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
4	Insurance Enquiry - GBF8309C Enquiry Fee 20190523163923561182	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SKM9568X				
As at 22 May 2019/12:50:00				
Insurance Co: AXA INSURANCE PTE LTD				
5	Insurance Enquiry - SKM9568X Enquiry Fee 20190523163923606620	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		35.00	2.45	37.45
Rounding Difference				0.00
Total Amount Payable				37.45
Paid By				
		xxxxxxxxxx4633	Credit Card: Visa/MasterCard	37.45
Total				37.45
Cash Change				0.00

K & t Cars

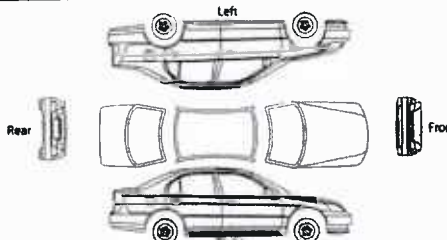
53 Ubi Ave 1 #01-23 Paya Ubi Ind Park
Singapore 408934
Tel: 6844 5938 Fax: 6285 5228
Email: kntcars@gmail.com
Biz Reg. No.: 53208965X

VEHICLE RENTAL AGREEMENT

NO.: KT-04274

Veh. No.: SKT 8214 L	Replace Veh. No.: SLA330A
Veh. M/M: Mitsubishi Outlander	Replace Veh. M/M: BMW M5

HIRER'S PARTICULAR		☐ SAME AS HIRER DRIVER'S PARTICULAR	
Name: Loh Teck Seng		Name: Cynthia Cha Chin Chin	
Address:		Address: 60 Lengkong Tiga #08-01 S(417454)	
I/C: S8005049F	D.O.B:	I/C: S7605449E	D.O.B: 24/02/1976
Contact: 9633 4403	Pass Date:	Contact: 9296 6966	Pass Date: 03/08/1994

	A - ACCIDENT	Hirer's acceptance
	C - CRACKED	
	D - DENTS	Driver's acceptance
	S - SCRATCHES	

RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	29/05/2019		Date In	03/06/2019	
Time Out	1200		Time In	1230	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES					PETROL / DIESEL LEVEL					
Daily	@ \$	180	<u>6</u> Days @	\$ 1080	OUT	E	¼	½	¾	F
Weekly	@ \$		_____ Wks @	\$						
Monthly	@ \$		_____ Mth @	\$	IN	E	¼	½	¾	F
Hours	@ \$		_____ Hrs @	\$						
Inclusive of additional charges (if any)			Amt payable	\$ 1080	Petrol Charges		YES	NO	AMT: _____	
					CDW		YES	NO	AMT: _____	
Payment: ☐ CASH ☐ NETS ☐ CHQ ☐ VISA ☐ MAST					Security Deposit		YES	NO	AMT: _____	
Bank / Cheque No.:					Advance Payment		YES	NO	AMT: _____	

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tender accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true and accurate.

IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)

- ❖ Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- ❖ Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- ❖ Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- ❖ Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- ❖ The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- ❖ In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact: occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- ❖ In view of all accident, the hirer will bear the full responsibility for the SGD\$3,500/- excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT	
 Signature of hirer / driver (company stamp if any)	  For and on behalf of K & t CARS (authorised signature only)

ST Appraisal Services

Insurance Loss Adjusters & Licensed Appraisers

Insurance Claim Investigator

Business Address: 60 Arab Street Singapore 199757

Tel: 66523352 / 98586761; Fax: 6297 0270

E mail - ttrajan@singnet.com.sg

Mailing Address: 161 Alexandra Post Office Singapore 911506

Invoice No : 05936

ORIGINAL

INVOICE

Date : 8 Aug 2019

Our Ref : TP / TWG SLA330A/ 05.25/19

Your Ref :

CUSTOMER PARTICULARS

Name	Mr Loh Teck Seng
Address	53 Ubi Avenue 1 #03-47 Paya Ubi Industrial Park Singapore 408934

ASSIGNMENT

TP Motor Claims by SLA 330 A

DESCRIPTION

A set of Survey Report, correspondence & consultation. Other disbursements incurred. Transport charges.

TOTAL

Terms of payment: 7 days from date of invoice
All Payments please make payment to "ST Appraisal Services"

AMOUNT CHARGEABLE

\$500.00

\$500.00


Authorised Signature

ST Appraisal Services

Insurance Loss Adjusters & Licensed Appraisers

Insurance Claim Investigator

Business Address: 60 Arab Street Singapore 199757

Tel: 66523352 / 98586761; Fax: 62970270

Mailing Address : 161 Alexandra Post Office Singapore 911506

Date : 8th Aug 2019

Our Ref : TP / TWG SLA330A/ 05.25/19

Your Ref :

Mr Loh Teck Seng
53 Ubi Avenue 1
#03-47 Paya Ubi Industrial Park
Singapore 408934

DAMAGED VEHICLE (SLA 330 A) INSPECTION REPORT (WITHOUT PREJUDICE)

Detailed accounts of our inspection are as follows:-

(A) Reference

Name of Claimant	: Mr Loh Teck Seng	Date of Request	: 30 th May 2019
		Referred By	: Insured
Policy No.	: Please Advice	Date of Inspection	: 30 th May 2019
Claim No.	: Please Advice	Date of Re-inspection	:
Accident Date	: 25 th May 2019	Sum Insured	: NA
Repairer	: M/s Team Work Garage Pte Ltd	Excess Amount	: NA
	53 Ubi Avenue 1	3 rd Party Vehicle	: Please Advice
	#01-23 Paya Ubi Industrial Park	3 rd Party Insurer	: Please Advice
	Singapore 408934		

(B) Particulars of Vehicle

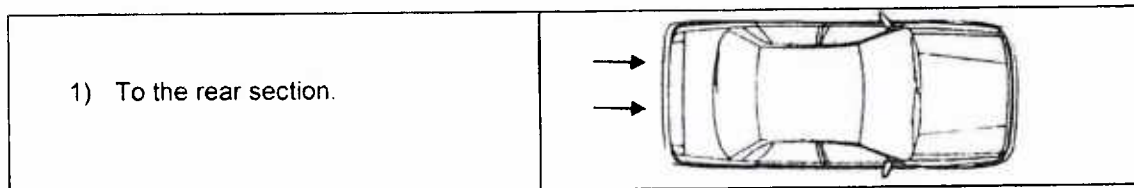
Registration No	: SLA 330 A	Mileage	: 63607 Km
Make & Model	: B.M.W M5 4.4A	Engine No	: 21810312S63B44B
Year of Manufacture	: 6 th Dec 2012	Chassis No.	: WBSFV92040DX95973
Colour	: Grey	Engine Capacity	: 4,395 cc

(C) Pre-Accident Condition (Static Test Only)

Steering	: Serviceable	Paint Work	: Good
Foot-brake	: Serviceable	Modification	: NIL
Hand-brake	: Serviceable	General Condition	: Good

(D) Tyre Condition

	Tread Depth	Make	Size
Front Left	65 %	MICHELIN	265/35 R20
Front Right	65 %	MICHELIN	265/35 R20
Rear Left	65 %	MICHELIN	295/30 R20
Rear Right	65 %	MICHELIN	295/30 R20

(E) Point of Impact**(F) General Description of Damages**

The impact of the collision has damaged/affected the rear bumper, rear bumper reflector, rear bumper sensor and etc.

Please refer to the Annex for a detailed account of the damages and photographs taken.

(G) Recommendation

We have inspected thoroughly the actual damages found on the vehicle, before we arrived at our recommendation as to whether the parts needed replacement or repairs.

Our adjusted cost of lump sum repair is **\$4,900.00** and an estimated **5** days is required to repair the vehicle. Please refer to the Annex for a detailed account of the cost estimates.

(H) Remarks

We have not authorised the repairs. However for information, under normal circumstances, the repairs should not exceed **5** days.

This inspection was conducted on a **"without prejudice"** basis.

We are pleased to advice that the inspection work was carried out accordingly, and hereby submit our Appraisal Report, which includes evidence photographs.

ST Appraisal Services



T T RAJAN
MVI, ITC (Mechanical), NTC (Motor Vehicle)
ASIET, MSAAA, Assessor/Appraiser

AD041-2007532D

ASSESSMENT OF REPAIRS AND SPARE PARTS COSTS FOR VEHICLE NO: SLA 330 A**Adjustment of Spare Parts Costs for Repairs**

Item	Qty	Vehicle parts description	Condition / Remarks	Estimated by Workshop	Disc. (%)	Adjusted Cost
1	1	Rear bumper	cut/deformed	1610.35	10	1449.32
2	2	Rear bumper mount	necessary	195.70	10	176.13
3	1	Rear bumper carrier	damaged	635.95	10	572.36
4	1	Rear bumper centre support	cracked	101.20	10	91.08
5	1	Rear bumper reflector RH	split	77.60	10	69.84
6	1	Rear bumper reflector LH	serviceable	77.60	100	0.00
7	4	Rear bumper sensor holder	necessary	60.80	10	54.72
8	2	Rear bumper sensor - RH	malfunction	627.10	10	564.39
9	2	Rear bumper sensor - LH	serviceable	627.10	100	0.00
10	1	Rear bumper diffuser	damaged	389.60	10	350.64
11	1	Rear bumper tow hook cover	damaged	43.05	10	38.75
12	1	Rear bumper inner garnish	cracked	96.30	10	86.67
<u>Special nett items</u>						
1	2	Silencer pipe sleeve	damaged	628.00		600.00
2		Sundries	necessary	80.00		65.00
Total parts				5250.35		4118.89

Adjustment of Labour Costs for Repairs

To remove and replaced damaged parts including straightening and repositioning replacement parts.	1100.00	900.00
Spray Painting & finishing above to condition.	900.00	700.00
To carry out body cavity preservation.	150.00	100.00
To reconnect all electrical components and wiring at the rear section and check for proper functions.	150.00	120.00
To check and reset fault memory.	220.00	180.00
Total labour	2520.00	2000.00

Adjustment Parts and Labour Costs of Repairs

	Estimated by workshop	Adjusted cost
TOTAL PARTS COSTS	5250.35	4118.89
TOTAL LABOUR COSTS	2520.00	2000.00
TOTAL REPAIR COSTS	7770.35	6118.89

ADJUSTED REPAIR COST**4900.00**





















TeamWork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Spore 408934
Paya Ubi Industrial Park
Tel : 6844 2475 Fcx : 6844 2474
E-mail : claims@teamworkgarage.com
GST registered number : 201015366H

PROFOMA INVOICE - PI-1935

LOH TECK SENG
C/O 53 Ubi Avenue 1 #01-24
Paya Ubi Industrial Park
Singapore 408934

Date : 20-Sep-19
Vehicle number : SLA330A
Make Model : BMW M5
Accident date : 22-May-19
Reference number : 1905-75

Description		Amount SGD\$
Inclusive of supplying parts, labour, panel beating and spray painting		
Lump sum repair	:	4900.00
7% GST	:	343.00
Grand total	:	5243.00
Singdollars: FIVE THOUSAND TWO HUNDRED AND FORTY THREE DOLLARS		



Teamwork Garage Pte Ltd