# Centro-Legal Law Corporation

151 Chin Swee Road #02-21 Manhattan House Singapore 169876

Tel: 6235 0633 Fax: 6235 6939

ADVOCATES AND SOLICITORS

Your Ref: To be advised

Our Ref: CLLC.PD.054.2020

20 JUNE 2020

23340

LONPAC INSURANCE BERHAD

WITHOUT PREJUDICE BY HAND

300 Beach Road #17-04/07

The Concourse Singapore 199555

Attn: Manager/Motor Claims Department

Dear Sirs,

ACCIDENT ON 06.05.2020 ALONG BOON LAY WAY NEAR BUS STOP 21689 INVOLVING MOTOR VEHICLES SLF 7823Y AND XE 4490G

We act for Voulez Cars, the owner of the motor vehicle SLF 7823Y involved in the captioned accident.

From our insurance search, you are the insurer of motor vehicle XE 4490G.

We are instructed by our client to claim damages against your insured in connection with a road traffic accident on 06.05.2020 along Boon Lay Way near bus stop 21689 involving our client's motor vehicle no SLF 7823Y and motor vehicle no XE 4490G was driven by your insured and/or your insured's servant and/or agent at the material time.

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

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#### ADVOCATES AND SOLICITORS

a)	Cost of repairs	\$12,800.00
b)	Loss of use/ rental	\$ 1,920.00
c)	Loss of use (PRI) \$80X2 days	\$ 160.00
d)	Survey report fee	\$ 690,00
e)	Colour copies \$1.00X18.00	\$ 18.00
f)	LTA search fee	\$ 7.49
g)	GIA reports fee	\$ 29.00
h)	Costs contribution	<u>\$ 1,000.00</u>
-		\$16,624.49

A copy each of the following supporting documents marked [X] is enclosed:-

[x]	GIA reports
[x]	Repairers bill and evidence of payment
[]	Excess bill/receipt
[]	Vehicle Registration Card
[]	COE/PARF Certificate
[]	Names and addresses of witnesses
[]	Photographs of damage to our client's motor vehicle
[x]	Photocopied photographs of damage to our client's motor vehicle

[ ] Rental Agreement, Invoice and receipt for rental

[x] Supporting documents for all other expenses claimed

Please take note that you should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against your insured without further notice to you.

Yours faithfully,

P KAMALA DEWI

**CENTRO-LEGAL LAW CORPORATION** 

Enc.



ADVOCATES AND SOLICITORS

151 Chin Swee Road #02-21 Manhattan House Singapore 169876

Tel: 6235 0633 Fax: 6235 6939

Please note that we have notified your insurers. Please inform them of the claim. If your insurers are not the above—named and if 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 or your insurer should send us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which, our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.

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

Centro-Legal Law Corporation

151 Chin Swee Road #02-21 Manhattan House Singapore 169876

Tel: 6235 0633 Fax: 6235 6939

ADVOCATES AND SOLICITORS

Your Ref: To be advised

Our Ref: CLLC.PD.0009.2020

21 FEBRUARY 2020

LONPAC INSURANCE BERHAD

WITHOUT PREJUDICE BY HAND

300 Beach Road

#17-04/07

The Concourse

Singapore 199555

Attn: Manager/Motor Claims Department

Dear Sirs,

ACCIDENT ON 06.05.2020 ALONG BOON LAY WAY NEAR BUS STOP 21689 INVOLVING MOTOR VEHICLES SLF 7823Y AND XE 4490G

We act for Voulez Cars, the owner of the motor vehicle SLF 7823Y involved in the captioned accident.

From our insurance search, you are the insurer of motor vehicle XE 4490G.

We are instructed by our client to claim damages against your insured in connection with a road traffic accident on 06.05.2020 along Boon Lay Way near bus stop 21689 involving our client's motor vehicle no SLF 7823Y and motor vehicle no XE 4490G was driven by your insured and/or your insured's servant and/or agent at the material time.

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



53 Ubi Ave 1 #05-44 Paya Ubi Industrial Park Singapore 408934

## Accident between SLF7823Y & XE4490G on 06-05-2020

Lump Sum Repair Cost		SGD \$12800
Survey Fee		SGD \$690
Lost of Use 24 Days		SGD \$1920
	Total:	SGD \$15410

No.

23462

Insurance Loss Adjusters and Licensed Appraisers Regn.52868584L Blk 131 Rivervale Street #05-872 S'pore 540131 Tel:65528323 Fax:64574321

Го	ustomer  M/s Voulez Cars c/o 53 Ubi Ave 1, Paya Ubi Industrial Park #05-44 Singapore 408934	Date Our ref Your Ref	09-Jun-20 PS/003/05/20
	VEHICLE REGISTRATION NO : SLF 7823 Y	! :	•
	VEHICLE MAKE/MODEL : Mazda 3  INSPECTION REPORT FEES  (inclusive of photographs & transport charges)		<u>\$690.0</u>
	DOLLARS: Six Hundred And Ninety Only	; ;	
<del></del>	<u>o</u>	for PRESTIGE AP	PRAISER SERVICE
E. &. O	. E.		

Insurance Loss Adjusters and Licensed Appraiser Regn. 652868584L Bik 131 Rivervale Street #05-872 S'pore 540131 Tel:65528323 Fax:64574321

Our ref: PS/003/05/20
Date: 09th June 2020

M/s Voulez Cars c/o 53 Ubi Ave 1, Paya Ubi Industrial Park #05-44 Singapore 408934

Dear Sir,

Re: THIRD PARTY CLAIM

We refer to your instruction to appraise the vehicle SLF 7823 Y on 08th May 2020.

A static inspection was conducted during our survey and our report is enclosed for your perusal. The estimated repair cost submitted by Messrs. Neo Automotive Pte Ltd for \$20,914.10 as per our attached schedule have been inspected thoroughly each and every item and revised by us against the actual damages found on the vehicle which have been recommended by us accordingly.

The repairer has agreed to undertake repairs at our revised amount of \$12,800.00 lump sum corresponding to supply of parts, labour charges and spray-painting. However, we have not given instruction to authorize the repairs.

Under normal circumstances, the estimated period of repairs would be TWENTY-FOUR (24) days. Photographs of the damaged vehicle taken by us during our inspection are enclosed.

We are reverting the matter to you for a decision.

Please do not hesitate to contact us if you need any clarification.

Assuring you of our best services.

Yours faithfully,

PRESTIGE APPRAISER SERVICES

LÓUIS S C NG CAE AMIMI Dip. MTM. Automotive Engineer Licensed Appraiser

Encl.

#### VEHICLE INSPECTION REPORT

To: M/s Voulez Cars

Date

Excess

: 09th June 2020

c/o 53 Ubi Ave 1, Paya Ubi Industrial Park

Our Ref Policy No : PS/003/05/20

#05-44

Singapore 408934

Sum Insured

: T/P Claim

Assigned By Assignment Date

: M/s Voulez Cars : 08th May 2020 : 06th May 2020

Accident Date

; 08th May 2020

Inspection Date Workshop Name

: Neo Automotive Pte Ltd

Survey Conducted At

: 53 Ubi Ave 1, Paya Ubi Industrial Park

#05-44

Singapore 408934

#### PARTICULARS OF VEHICLE

Registration No

: SLF 7823 Y

Mileage

: 249055km

Make/Model

: Mazda 3

Engine No

: HIDDEN : JM6BM42A8G0344951

Type Of Body

: Motorcar

Chassis No Passenger Cap.

: 4 Passengers

Year Of Manu./Regn. : 2016 Colour

: Brown

Others

#### CONDITION OF TYRES

R/H SIDE

L/H SIDE

Front Tyre

: 5mm 205/60R16 Grenlander

5mm 205/60R16 Grenlander

Rear Tyre

: 5mm 205/60R16 Roadstone

5mm 205/60R16 Arivo

The above represent the estimated remaining life of the tyre treads.

#### PRE-ACCIDENT CONDITION (Static tests only)

Handbrake Footbrake

: Serviceable : Serviceable Body Work Paint Work

: Good : Good

Steering

: Serviceable

Others

#### POINT OF IMPACT

The vehicle sustained an impact on the rear portion.

#### GENERAL DESCRIPTION OF DAMAGES

The rear body panel, bumper assy, floorboard panel, fenders, chassis member, bootlid were dented/distorted.

For details of damages please refer to schedule attached.

#### **REMARKS:**

This survey was conducted strictly without prejudice.

Vehic	le No : SLF 7823 Y			Our Ref:		PS/003/05/20
Qty	Descriptions <u>LIST ITEMS</u>	Conditions		Repairer's Est.		Our Revised.
1	rear bumper	dented	\$	1,150.00	\$	1,150.00
1	rear bumper reinforcement	dented	•	382.00	•	382.00
2	rear bumper side retainer	necessary		47.00		47.00
1	rear bumper centre clip	песеѕѕагу		25.00		25.00
8	rear bumper clip	necessary		32.00		32.00
2	rear bumper reflector	cracked		157.20		157.20
1	rear tow hook cover	missing/dislodged		86,40		86.40
1	rear body panel	dented		645.10		645.10
1	rear body panel top garnish	dented		367.00		367.00
4	rear body panel top garnish clip	necessary		20.00		20.00
2	taillamp	broken		1,250.00		1,250.00
2	taillamp panel	dented		286.40		286.40
1	bootlid	dented/distorted		1,195.00		1,195.00
1	bootlid weatherstrip	distorted		215.80		215.80
2	boot hinge	dented/bent		326.50		326.50
1	boot top lock	dented		221.50		221.50
1	boot lower lock	dented		68.30		68.30
1	boot inner trim	dented/distorted		386.50		386.50
2	boot reflector	cracked		902.60		902.60
1	boot emblem ' LOGO '	necessary		40.00		40.00
1	boot emblem ' MAZDA 3 '	necessary		57.40		57.40
1	boot emblem ' SKYACTIVE '	necessary		45.60		45.60
2	rear number plate lamp	damaged		186.60		186.60
1	R/H rear fender	denetd/distorted		1,167.90		1,167.90
1	R/H rear fender dust cover	distorted		185.90		185.90
1	R/H rear fender air vent	dented		79.60		79.60
1	R/H rear fender inner garnish	torn		386.50		386.50
1	L/H rear fender	dented/distorted		1,167.90		1,167.90
1	L/H rear fender dust cover	dented		185.90		185.90
1	L/H rear fender air vent	dented		79.60		79.60
1	L/H rear fender inner garnish	torn		386.50		386.50
2	rear fender corner panel	dented		166.40		166.40
1	spare wheel panel	dented		1,055.20		1,055.20
1	spare wheel top cover	dented/distorted		225.60		225.60
1	spare wheel top sponge	serviceable		168.00		-
1	exhaust muffler	dented/bent		975.90		975.80
2	exhaust mounting	distorted		148.60		148.60
1	exhaust heat shield	dented		198.50		198,50
2	rear chassis member	dented - repair		866.60		
1	rear windscreen moulding	necessary		185.60		185.60
	-	,		15,724.10	•	14,689.40
		Less 20%		•		2,937.88
			\$	15,724.10	\$	11,751.52
	S/NETT ITEMS					
.1	rear windscreen sealant	necessary		120.00		80.00
1set	reverse sensor	damaged		280.00		250.00
1	rear number plate	dented		60.00		50.00
		Balance c/f	\$	16,184.10	\$	12,131.52

Vehic	le No: SLF 7823 Y		Our Ref ;	PS/003/05/20
Qty	Descriptions	Conditions	Repairer's Est.	Our Revised.
	<u>Labour Charges &amp; Misc</u> To dismantle & replace dama	Balance b/d	\$ 16,184.10	\$ 12,131.52
	necessary.	- • •	2,450.00	2,100.00
	To putty, apply primer & spray	y-paint on the affected portion.	1,500.00	1,200.00
	To apply rust-proofing on repa	aired, replaced panel.	200.00	160.00
	To remove/refit rear windscre	en glass to facilitate repairs.	180.00	140.00
	To remove/refit rear cushion s to facilitate repairs.	seat, speaker board, roof upholstery	140.00	120.00
	To remove/renew reverse ser	nsor.	80.00	60.00
	To remove/renew exhaust mu	uffler.	90.00	60.00
	To check wiring functions.		\$ 90.00 20,914.10	\$ 70.00 16,041.52

Note: The repairer has agreed to undertake the repairs at our adjusted amount of \$12,800.00 lump sum corresponding to supply of parts, labour and spray-painting charges.

Under normal circumstances, the estimated repair period would be **TWENTY-FOUR (24)** days. Pursuant to your instruction we have not authorised repairs on your behalf.

PRESTIGE APPRAISER SERVICES

LOUIS S C NG CAE AMIMI (UK)

Licensed Appraiser

Dip. MTM. Automotive Engineer









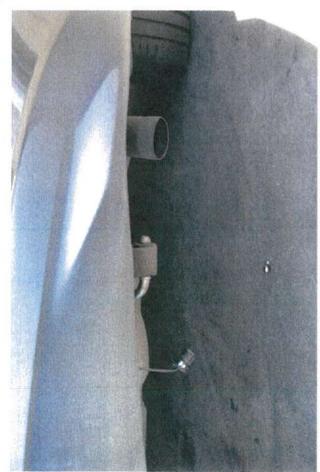




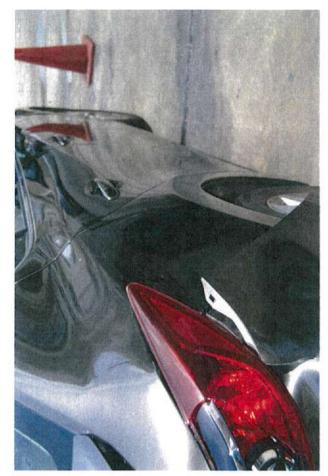






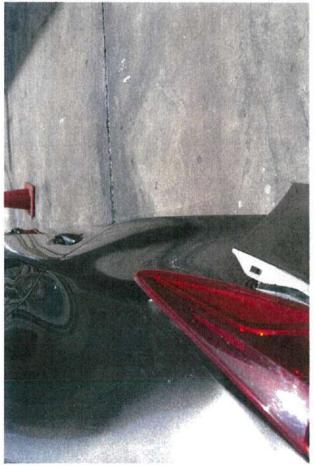










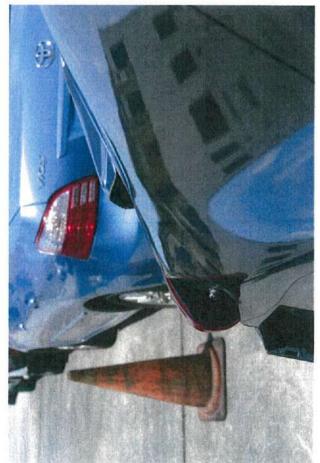












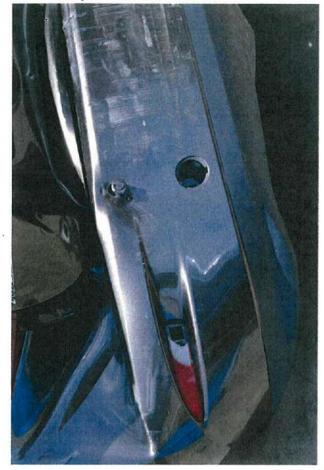


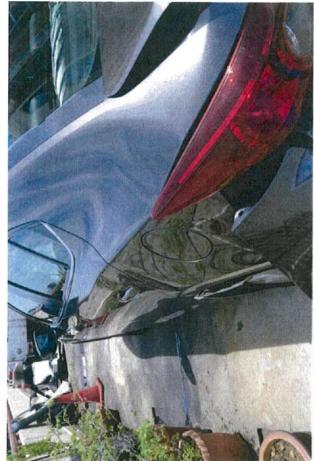










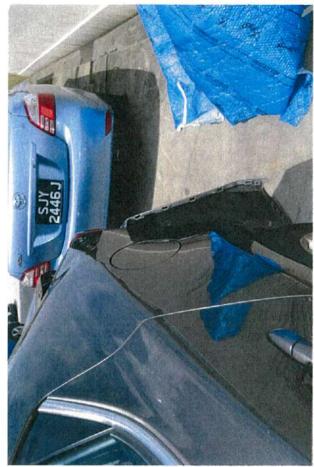




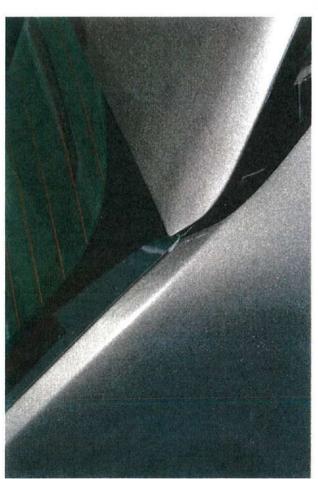










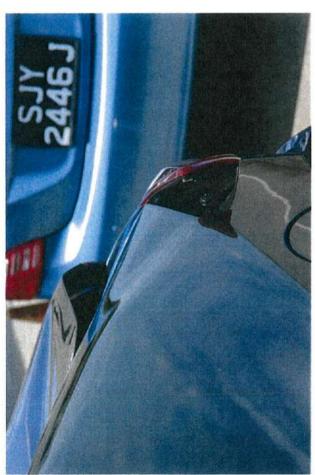
















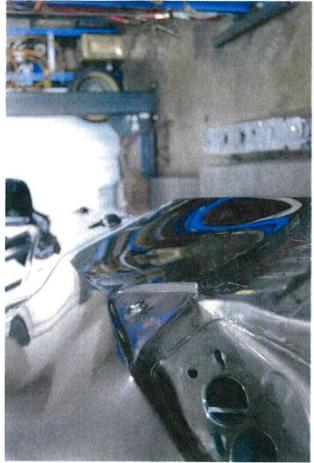




























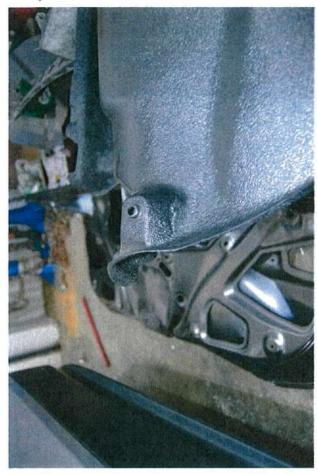


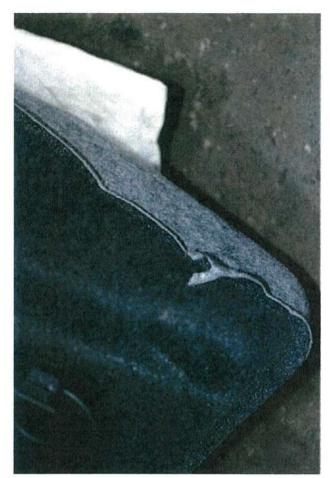










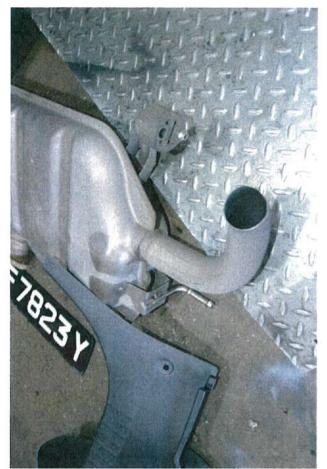








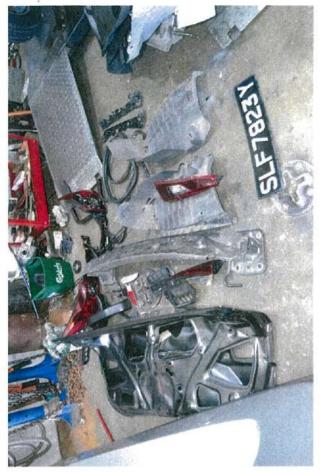












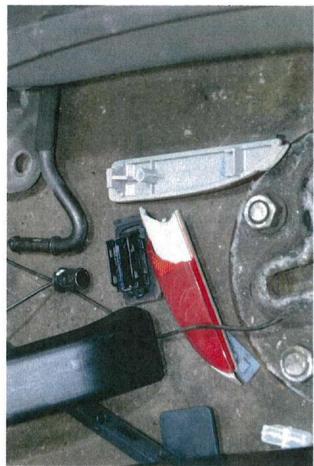


























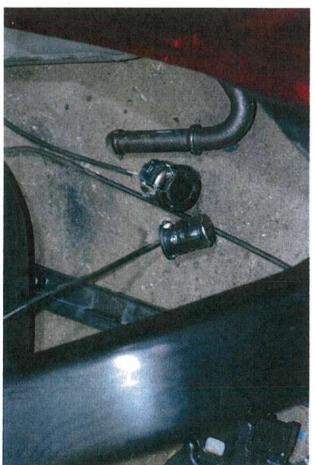












#### SINGAPORE ACCIDENT STATEMENT

#### 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.

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 erchiving 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 aforessid.

ACCIDE	NTSTA	IEMENI	
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06/05/2020 13:48 Date Of Report 06/05/2020 07:30 **Date Of Accident** 

ALONG BOON LAY WAY NEAR BUS STOP 21689 **Exact Location Of Accident** 

SINGAPORE Country/State of Loss

#### DETAILS OF OWN VEHICLE

SI F7823Y Vehicle Registration Number

#### Insured/Rolloyholder

**VOULEZ CARS** Name Of Registered Owner 5XXXX846X Co Reg No NOEMAIL Email Address

(LOCAL) +65-97209789 Mobile Phone No OFFICE-97209789 Alternative Phone No

#### Vehicle Particulars

MAZDA Manufacturer 3 Model

Exact Purpose for which vehicle was being used at

time of accident

WORKING PURPOSES

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

THIRD PARTY If No. Please state action to be taken PRIVATE HIRE Vehicle Category

#### Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

COMPREHENS!VE Type Of Coverage

NO Fleet Policy

5112801747 **Policy Number** 

Cover Note Number

#### Driver

TANG LEE LEE Name of Driver SXXXX649G **NRIC No** 30/09/1967 Date Of Birth OUTDOOR Occupation 28/06/1995 Date Of Driving Pass

24 YEARS AND 10 MONTHS Driving Experience

**FEMALE** Gender

(LOCAL) +65-97209789 Mobile Number

Fax Number

OTHERS-97209789 Contact Number

NOEMAIL EMail Address

Page 1 of 25

Address

BLK 207 BUKIT BATOK STREET 21

#02-122

Postcode

650207

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

General Information of the Accidenta

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

Other Information

Was any foreign vehicle involved in this accident?

eta yakun kara

NO

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

2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

YES NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

**Police Station Address** 

BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-6659999 - FAX NO: 66655793

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200506/2021

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

HAVEN'T RETRIEVE

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

XE4490G

Vehicle Make/Model/Colour

SCANIA P410

**Details Of Properties** 

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

ZHENNG XIAOYAN

NRIC/Passport Number

GXXXX623N

Contact Number

97502878

Address

**Postcode** 

Page 2 of 25

#### Insurancè Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

No. Of Passenger (Including Driver)	2	
	DETAILS OF INJURED PERSON 1	
Name	TANG LEE LEE	
Approximate Age		
Injuries Sustain	SERIOUS	
Injured person in which vehicle?	SLF7823Y	
Were seat belts worn?	YES	
Was this injured conveyed to hospital by ambulance?	NO	
Address		
Postcode		

#### Accident Sketch Plan

#### 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.
- 3. Information provided must be as truthful and accurate as possible. Any wiful meterpresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and exceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any faire 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
- 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 (PDFA)

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 porsonal 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)
  - (f) 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;
  - illilitarrying 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 knowe 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 taw 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 tirms, may/are permitted to callect, use, disclose and/or process my Personal information for one or more of the above Purposet; 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 Singapove, 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.
- (a) the information so collected under (d) above may be shared / disclosed:
  - (i) to attingurers 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

egotion of the

Onver's Signature

(if driver is not the policyholder)

Date & Time:

NAIC/FIN No.:

#### Accident Sketch Plan

KETCH PLAN	Puwa 4	Beau lay	Why , WAR	gas sug	21689
23	To the second	to to the			
38		-x -yau	<b>8</b>	A) B)	SLF 7823 Y XE YY90 G
	<b>*</b>	BALL TUB	• • • • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · · · · ·
BEFFU			4 poor 1/20	2006/2	021
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				<u>/</u>	
				····	
			/		
DECLARATION I/We deciste the	fasegaine partic	ulars are true in every	respect.	_ 411	06/05/2020
Policyholder's Date & Time:		Driver's Signatur jil driver (s not t Date & Time:		Name: NRIC/FIN No.:	Fill War

and the second sections

# **Enquire Vehicle's Insurance Particulars**

# Enquire Vehicle's Insurance Particulars ( As At 06 May 2020 / 07:30:00 )

### **Vehicle Insurance Details**

Vehicle No.:

XE4490G

Make Description/Model:

SCANIA / P410LA4X2MSZ

Insurance Company Name:

LONPAC INSURANCE BHD

Business Transaction Reference No.:

20200508130538336731

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

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OK →

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