

TOMMY CHOO, MARK GO LLC

Advocates & Solicitors

UEN NO : 201523418E

(a law corporation with limited liability)

151 CHIN SWEE ROAD #14-15/16

MANHATTAN HOUSE

SINGAPORE 169876

TEL : (65) 6532 2455

FAX : (65) 6538 9850 (Services of Court Documents By Fax Not Accepted)

EMAIL: lhling@tcmg.com.sg

Our Ref : LLH/r/1202/0720/ZAW

Your Ref: GBF 9425 T

13 JUL 2020

Jong Fresh Supplies Pte Ltd

53 Ubi Avenue 3

#01-01 Travelite Building

Singapore 408863

MSIG Insurance (Singapore) Pte Ltd

16 Raffles Quay #24-01

Hong Leong Building

Singapore 048581

Attn: Motor Claims Department

Dear Sirs,

ACCIDENT INVOLVING SMK 3416 C AND GBF 9425 T ON 4 DECEMBER 2019 ALONG JUNCTION CHULIA STREET & SOUTH CANAL ROAD

We are instructed by **Ong Lay Tin**, to claim damages against you or your insured, the owner/driver of motor vehicle no. GBF 9425 T in connection with a road traffic accident on 4th day of December, 2019 at about 11:50 hours along junction Chulia Street & South Canal Road, involving our client's motor vehicle no. SMK 3416 C and motor vehicle no. GBF 9425 T driven by your insured at the material time.

We are instructed that the accident was caused by your insured's negligence and/or management of his motor vehicle. As a result of the accident, our client's motor vehicle was damaged and our client had been put to loss and expenses, particulars of which are as follows:

1	Costs of Repair	\$ 5,300.00
2	Rental (\$200 x 7 days)	\$ 1,400.00
3	LTA/ GIA search fees	\$ 22.49
4	Survey fee	\$ 594.00
5	Disbursement (at this stage)	\$ 100.00
6	Legal Cost (at this stage)	\$ 700.00
		<u>\$ 8,116.49</u>



613559
CNP

By Certificate of Posting

(For your attention; without enclosures)

BY PDX NO. 8173

PDX Intercompany Exchange Pte Ltd



010808977208

FROM TOMMY CHOO, MARK GO LL

PDX Box No. 8141

TOMMY CHOO MARK GO LLC

Page No. 2

A copy each of the following supporting documents is enclosed:

1. Copy of accident report, LTA search and insurance enquiry;
2. Copy of rental invoice, rental agreement and repair bill
3. Copy of survey report and invoice;
4. Colour photographs pertaining to our client's motor vehicle for your perusal.

We had on 4th December 2019 notified your insurer, M/s MSIG Insurance (Singapore) Pte Ltd about the accident.

Please note that if you are insured and you wish to claim your insurance policy, you should immediately pass this letter to your insurer.

Please note that you should send us an acknowledgment of receipt of this letter within fourteen (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 or your insured.

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

Yours faithfully,



LING LEONG HUI (MR)

enc.

cc. clients

Enquire Vehicle Owner Details (As At 04 Dec 2019 / 11:50:00)

Vehicle Owner Details

Owner ID Type:	Owner ID:
Company	200107204H
Owner Name:	Registered Address Type:
JONG FRESH SUPPLIES PTE LTD	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	Registered Street Name:
53	UBI AVENUE 3
Registered Unit No.:	Registered Building Name:
# 01 - 01	TRAVELITE BUILDING
Registered Postal Code:	
408863	

Vehicle Insurance Details

Vehicle No.:	Make Description/Model:
GBF9425T	TOYOTA / DYNA 3.0 MANUAL
Insurance Company Name:	
MSIG INSURANCE (SINGAPORE) PTE LTD	



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 04 Dec 2019 / 22:53:38

Receipt Date/Time : 04 Dec 2019 / 22:53:38

Tax Invoice/Receipt

Receipt No. : ITNET-00000-191204-003593

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 - GBF9425T				
As at 04 Dec 2019/11:50:00				
Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD				
1	Insurance Enquiry - GBF9425T Enquiry Fee 20191204225247076315	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Result of Insurance Enquiry - SKR6658M				
As at 02 Dec 2019/20:13:00				
Insurance Co: NTUC INCOME INS CO-OP LTD				
2	Insurance Enquiry - SKR6658M Enquiry Fee 20191204225247129933	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		14.00	0.98	14.98
Rounding Difference				0.03
Total Amount Payable				14.95
Paid By				
		xxxxxxxxxxxx0962	Credit Card: Visa/MasterCard	14.95
Total				14.95
Cash Change				0.00
Tendered Amount				14.95
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

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	05/12/2019 09:09
Date Of Accident	04/12/2019 11:50
Exact Location Of Accident	JUNC CHULIA ST & SOUTH CANAL RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK3416C
Insured/Policyholder	
Name Of Registered Owner	ONG LAY TIN
NRIC No	S6802144H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81831081
Alternative Phone No	OFFICE-81831081
Vehicle Particulars	
Manufacturer	FORD
Model	MUSTANG 2.3 GTDI AT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108676585
Cover Note Number	
Driver	
Name of Driver	JOSEPH YEO PENG SIONG
NRIC No	S9616316I
Date Of Birth	23/04/1996
Occupation	INDOOR
Date Of Driving Pass	18/11/2016
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81831081
Fax Number	
Contact Number	OFFICE-81831081
Email Address	NOEMAIL

Address 89 YISHUN STREET 81
#11-10
Postcode 768449
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured CHILDREN
Vehicle Registration Number of Driver's Own Vehicle -
-
Insurance Company of Driver's Own Vehicle -
-

General Information of the Accident

Type Of Accident SIDE SWIPE
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?
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) 2
Passenger 1
NAME: : -
GENDER: : FEMALE

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

REFER TO STATEMENT.

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 GBF9425T
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- This report is **entirely** the property of the insurer to speed up the claims process.
- This report must be completed by the **Policyholder and/or the Authorized Driver**.
- The report must be completed as **truthful and accurate as possible**. Any willful misrepresentation or withholding of material facts may constitute an offence under the Insurance Act to **invalidate policy liability**.
- The use and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- I hereby consent to the archiving of this report at the centre and to release of the report being made available thereafter.
- **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 insurers who have insured vehicle(s) involved in this accident (all insureds 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) complying and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, notices, reports or copies to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as the physical items of correspondence/packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes").
 - b. Insurers 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/are 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 situated 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. My information as 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;
 - (ii) to regulatory, law enforcement and government agencies as reasonably required for the purposes stated in (d);
 - (iii) for complying with requirements under any regulations, laws or court orders.

Signature of Driver/Authorized Driver

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

Reporting Centre Representative's Signature
Name:
SINC/SINCE

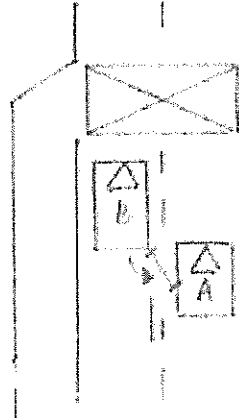
Accident Sketch Plan

DATE: 11/11/2011

VEHICLE A SMK 3416 C

VEHICLE B. ABT 94157

VEHICLE C (HUMAN)



PA 10000 SMKS 2 10000 SMKS

STATE THE DISTANCES OF THE ACCIDENT

on the stated date & time, I, vehicle A, SMK 3416 C
was moving straight along the stated venue suddenly, the
rear right door of vehicle B, ABT 94157, hit onto my
vehicle's left portion.

STATE SIGN

STATE THE SIGN OF THE ACCIDENT

STATE THE SIGN OF THE ACCIDENT

STATE THE SIGN OF THE ACCIDENT

ZOOM AUTOWERKS PTE LTD

130 Bedok Reservoir Road, Eunos Spring
#08-1339 Singapore 470130
Tel: 9450 7920
zoomautowerks@gmail.com

INVOICE NO. ZAW/TCMG/19/20

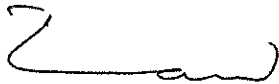
Date: 4th May 2020

Ong Lay Tin
89 Yishun Street 81
#11-10
Singapore 768449

COST OF REPAIRS FOR VEHICLE NO. SMK 3416 C
=====

Lump sum cost of repairs : S\$5,300.00

Singapore Dollars : Five Thousand Three Hundred Only.



.....
M/S ZOOMAUTOWERKS PTE LTD

ZOOM CAR LEASING

Zoom Car Leasing
Registration No.: 5339410M
e-mail : zoomcarleasing@gmail.com

RENTAL INVOICE

Zoom Autowerks Pte Ltd

Tel: 9450 7920

Invoice No. : **INV0000518**
Date : 29/12/2019
Ref : SKB 6887 C
Your Ref : **SMK 3416 J**
Terms : 30Days

#	Rental Period	Rate	Quantity	Amount
1	Rental Charges for SKB 6887 C (04/12/2019 to 11/12/2019)	\$200.00	7 Days	\$1,400.00

C/O Joseph Yeo Peng Siong

89 Yishun Street 81

#11-10 Singapore 768449

Contact: 8183-1081

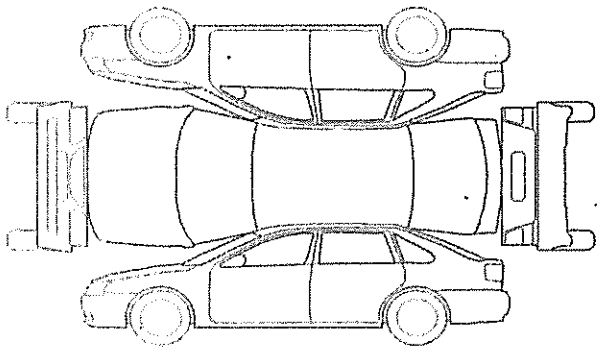
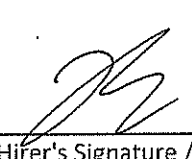
Total : **\$1,400.00**

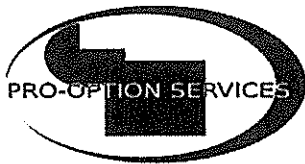
(Customer's Signature/Stamp)


ZOOM CAR
LEASING

(For Zoom Car Leasing)

RENTAL AGREEMENT

HIRER'S PARTICULAR		VEHICLE DETAIL																					
Name: <u>Joseph Yeo Peng Siong</u>		Vehicle No.: <u>SLB 6887C</u>																					
NRIC/Passport No.: <u>S9616316I</u>		Vehicle Make/Model: <u>Audi A5</u>																					
Address: <u>89 Yishun St B1, #11-10</u> <u>S (768449)</u>		Date/Time Out: <u>04/12/19</u>																					
Tel: <u>8183 1081</u>		Date/Time In: <u>11/12/19</u>																					
Driving License No./Exp.:		<table border="1"> <tr> <td>E</td><td>¼</td><td>½</td><td>¾</td><td>F</td> <td>E</td><td>¼</td><td>½</td><td>¾</td><td>F</td> </tr> <tr> <td colspan="5">OUT</td> <td colspan="5">IN</td> </tr> </table>		E	¼	½	¾	F	E	¼	½	¾	F	OUT					IN				
E	¼	½	¾	F	E	¼	½	¾	F														
OUT					IN																		
ADDITIONAL DRIVER'S PARTICULAR		Mileage:																					
Name:		Mileage:																					
NRIC/Passport No.:		RENTAL CHARGES																					
Address:		<table border="1"> <tr> <th>Hours</th> <th>@</th> <th>per hour</th> <th></th> </tr> <tr> <td>7 Days</td> <td>@</td> <td>\$200 per day</td> <td>\$1400</td> </tr> <tr> <td>Weeks</td> <td>@</td> <td>per week</td> <td></td> </tr> <tr> <td>Months</td> <td>@</td> <td>per month</td> <td></td> </tr> </table>	Hours	@	per hour		7 Days	@	\$200 per day	\$1400	Weeks	@	per week		Months	@	per month						
Hours	@	per hour																					
7 Days	@	\$200 per day	\$1400																				
Weeks	@	per week																					
Months	@	per month																					
Tel:		Other Charges																					
Driving License No./Exp.:		Petrol Top-Up																					
(A) - Accident (D) - Dent (S) - Scratch		Sub-total																					
		TOTAL CHARGES <u>\$1400</u>																					
PRE-PAYMENT																							
Downpayment and Deposit																							
Amount Refunded Due																							
I/We agreed to the terms and conditions above, overleaf and that all information given are true & correct in all respect. My/Our driving license(s) is/are current and not disqualified from driving.																							
PHYSICAL DAMAGE EXCESS		ACKNOWLEDGEMENT																					
Singapore - Own Damage	\$S2,000.00																						
Singapore - 3rd Party	\$S2,000.00																						
Malaysia*	\$S8,000.00																						
For Drivers aged < 27 or > 65 and/or less than 2 years driving experience regardless of age	\$S3,000.00 (Additional)																						
IMPORT NOTE: 1. ONLY PERSONS ABOVE 22 YEARS OF AGE, HOLDING A VALID SINGAPORE LICENCE FOR MORE THAN 2 YEARS, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE 2. Vehicle is strictly for use in Singapore only and may not be driven out of Singapore without the prior written consent of Zoom Car Leasing 3. Use of vehicle for illegal purposes (e.g. in connection with theft, drug peddling or trafficking, smuggling) is strictly prohibited. 4. In case of accident, the hirer shall report to Zoom Car Leasing immediately.																							
		 Hirer's Signature / Date																					
		 Owner's Signature / Date																					



PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Mobile: 9061 0543, Email: mirage1195@gmail.com

Ong Lay Tin
89 Yishun Street 81
#11-10
Singapore 768449

Invoice no:	POS092/20
Date:	4 May 2020
Report no:	92M0220.ZAW
Vehicle :	SMK3416C

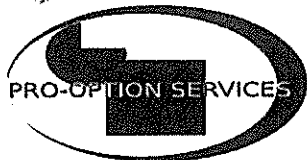
INVOICE

No	Item Description	Qty	Unit Price	Total Amount(\$)
01	Being charges for the inspection of the accident vehicle, transport and photographs.			594.00
SGD(\$): Five Hundred and Ninety-four only			Payable Amount:	594.00

"Cheque should be crossed and made payable to "Pro-Option Services"

PRO-OPTION SERVICES

.....
Authorised Signature



PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Mobile: 9061 0543, Email: mirage119@gmail.com

ACCIDENT VEHICLE INSPECTION REPORT

Report no : 92M0220.ZAW
Vehicle no : SMK3416C

1 REFERENCE

Date of inspection : 6 December 2019
Requested by : Ong Lay Tin
89 Yishun Street 81
#11-10
Singapore 768449
Type of survey : Independent
Repairer : Zoom AutoWerks Pte Ltd
130 Bedok Reservoir Road, #08-1339, Singapore 470130
Date of accident : 4 December 2019

2 VEHICLE DATA

Make/model : **FORD MUSTANG 2.3 GTDI AT**
Chassis no : 1FA6P8TH9G5300984
Engine no : G5300984
Date of registration : 22 Sep 2016
Engine capacity : 2261 cc
Odometer reading : 028097.9 KM
Colour : Matt Grey

3 STATIC CONDITION CHECK

Steering : Serviceable
Foot brakes : Serviceable
Hand brakes : Serviceable
Paintwork : Good
General Condition : Good

4 TIRE CONDITION CHECK

	<u>RH/MAKE</u>	<u>LH/MAKE</u>	<u>SIZE</u>
Front tread	: 7 mm/Pirelli	7 mm/Pirelli	255/40R19
Rear tread	: 7 mm/Pirelli	7 mm/Pirelli	255/40R19

5 BRIEF DESCRIPTION OF DAMAGE

Rear LH fender dented/scraped, LH side mirror broken/cracked, LH side carbon fibre side skirt dented/cracked, etc. Please see para. 8 of this report for more details.

6 REMARKS

This inspection is carried out on a "WITHOUT PREJUDICE" basis and I have not authorized any repairs.

7 RECOMMENDATION

Cost of repairs : **\$5,300.00** (lump sum)
Estimated no of days : **Four (4)**

8 ASSESSMENT OF DAMAGE AND COSTS

Report no: 92M0220.ZAW
Vehicle no: SMK3416C

A SPARE PARTS

Description	Qty	Assessed Condition	Repairer's Amount	Revised Amount
(Special nett)				
LH side mirror assy	1	broken/cracked	✓ 1,250.00	1,250.00
LH side door glass	1	scratched/cut	✓ 950.00	950.00
Carbon fibre side skirt – LHS	1	dented/cracked	SVC X 2,500.00	2,500.00
Total cost of parts:			4,700.00	4,700.00

B LABOUR

<u>LABOUR</u>				
To check wiring.	2200	60.00	✓	45.00
To apply anti-rust undercoat.		120.00	30 ✓	60.00
To supply labour to install RHS fibre carbon side skirt.		500.00	×	250.00
Labour charges to remove and replace damaged parts and to panel beat the front door, rear fender back to shape.		900.00	400✓	600.00
Spray painting charges to paint the front LH door, LH side mirror, LH rear fender and necessary areas.		1,200.00	750✓	900.00
	1255			
Total cost of labour:		2,780.00		1,855.00
Total cost of repair:		7,480.00		6,555.00

9 CONCLUSION

The revised or adjusted cost of repairs to restore the vehicle is

3 repair days

\$6,555.00

Total - 3455

(a) The recommended cost of repair based on lump sum repairs would be

\$5,300.00

L/S - 2764

(b) The estimated number of days for the repairs would be

2750

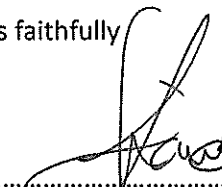
Four (4)

The above recommendations in my view are fair and reasonable for the restoration of the vehicle to its pre-accident condition.

Note: Lump Sum Repair Basis

This means the repairer is allowed to replace the damaged parts with used, reconditioned or new parts, or repair it to a roadworthy condition.

Yours faithfully

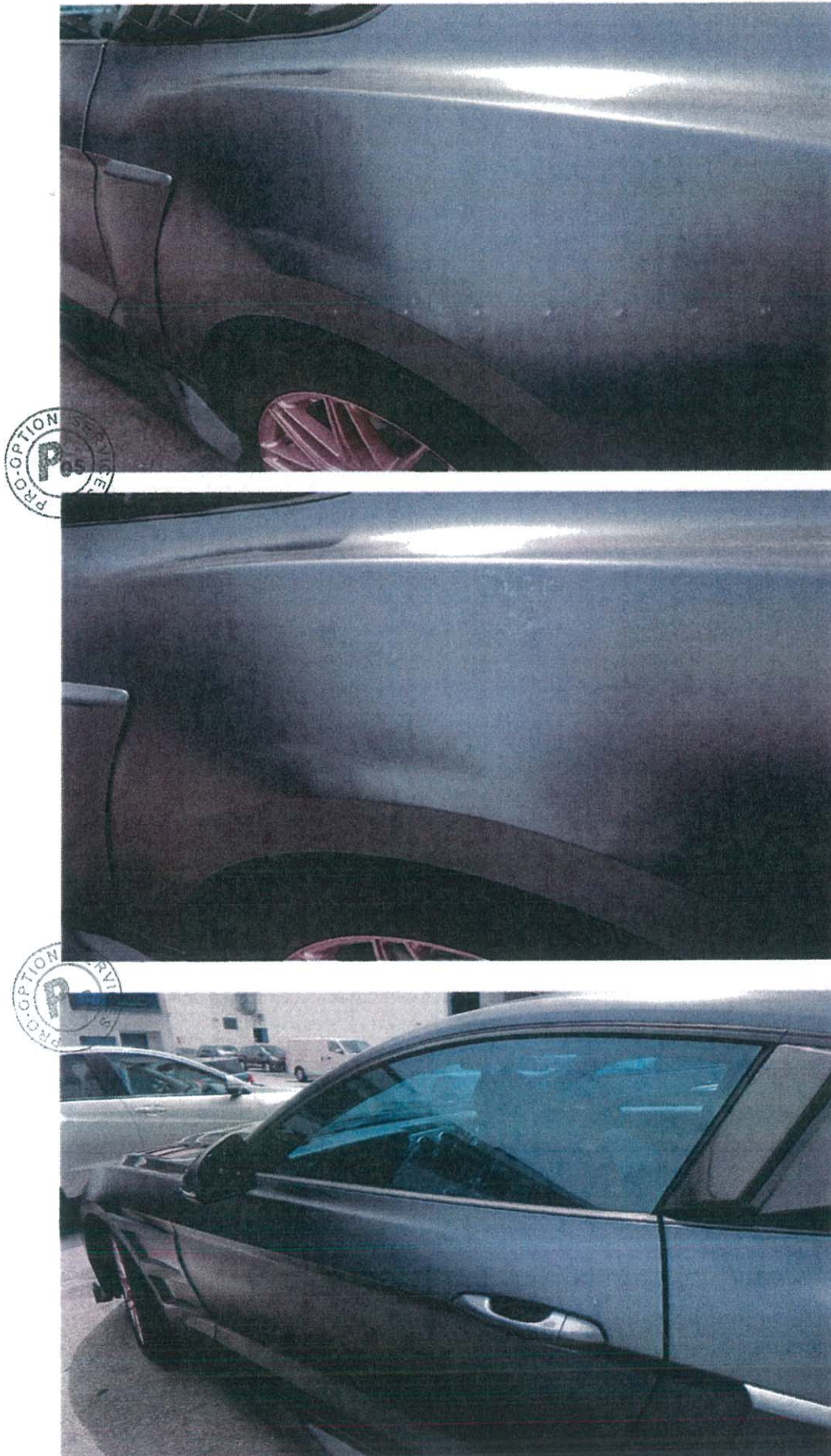

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Liaw Leong San
Licensed Automotive Appraiser

Dated: 4 May 2020

Report no: 92M0220.ZAW

Vehicle no: SMK3416C





Report no: 92M0220.ZAW

Vehicle no: SMK3416C





Report no: 92M0220.ZAW

Vehicle no: SMK3416C



