

K. K. CHENG & CO

Advocates & Solicitors
101 Upper Cross Street #05-21
People's Park Centre
Singapore 058357
Tel: 6227 1272 Fax: 6227 5563



11379270

Our Ref: CKK/ck/ACC/10480/19
Your Ref: SJN 2199E
(Please quote our reference number when replying)

15 JUL 2020

PDX Intercompany Exchange Pte Ltd



013608858415

FROM K K CHENG & CO.
PDX Box No. 8921

AXA INSURANCE PTE LTD
Singapore

3019941102 - - - BY BPDx :8176

Attention: Motor Claims Department

Dear Sirs

STEAMMAPLEH
274A COMPASSVALE BOW #12-535 COMPASSVALE HELM
SINGAPORE (541274)



We are instructed by the above named to claim damages against your insured driver in connection with a road traffic accident 14.08.2018 at about 9.45pm along Brickland Road towards KJE involving our client's vehicle registration number SGU 2306L and vehicle registration number SJN 2199E driven by your insured driver at the material time.

We are instructed that the accident was caused by your insured driver's negligent driving and/or management of 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:-

(1)	cost of repairs	\$11,700.00
(2)	rental for alternative vehicle	\$ 2,520.00
(3)	further loss of use for 2 days of PRI	\$ 300.00
(4)	survey fees	\$ 954.00
(5)	GIA search	\$ 15.00
(6)	GIA report	\$ 29.00
(7)	Police search	\$ 14.00
(8)	LTA search	\$ 8.50
(9)	coloured photographs	\$ 60.00
(10)	photocopying, postages, transport and other incidentals	\$ 50.00
(11)	legal costs	\$ 1,000.00
		\$16,650.50

M/S K. K. CHENG & CO
PAGE 2

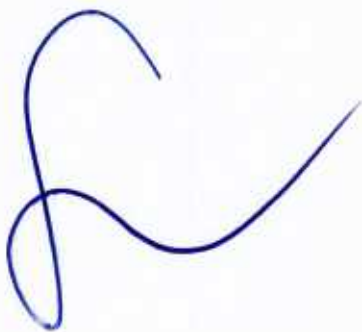
A copy each of the following supporting documents is enclosed:-

- (1) Plaintiff's GIA report enclosing police report
- (2) GIA report enclosing police report of SJN 2199E
- (3) Letter dated 15 February 2019 from Traffic Police, the contents of which are self-explanatory
- (4) Repairer's bill
- (5) Rental Agreement
- (6) Surveyor's report attached with 179 coloured photographs of our client's damaged vehicle
- (7) Vehicle Owner Particulars
- (8) LTA search

Please note that you or your insured 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 or your insured.

Please also note that if your insured has 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



CHENG KIM KUAN
Encs

c.c. CHUA MING JIE, ROCHELLE (CAI MINGJIE)
c.c. client (Ref: SGU 2306L)

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	02/11/2018 15:37
Date Of Accident	14/09/2018 21:45
Exact Location Of Accident	BRICKLAND ROAD TOWARDS KJE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGU2306L
Insured/Policyholder	
Name Of Registered Owner	STEAMMAPLEH
Co Reg No	53321445M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83338147

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC 1.8B A

Exact Purpose for which vehicle was being used at time of accident	GRAB
--	------

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 HIRE
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Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
---------------------------	--

Type Of Coverage	COMPREHENSIVE
------------------	---------------

Fleet Policy	NO
--------------	----

Policy Number	5100067093
---------------	------------

Cover Note Number	
-------------------	--

Driver

Name of Driver	TONY YAU SUN ANN
NRIC No	S7285188I
Date Of Birth	12/11/1972
Occupation	OUTDOOR
Date Of Driving Pass	24/03/1995
Driving Experience	23 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96968147

Fax Number	
------------	--

Contact Number	
----------------	--

E-Mail Address	TONYZUKO@GMAIL.COM
----------------	--------------------

Address	BLK 274A CCMPASSEVALE BOW #12-535
Postcode	541274
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: UNKNOWN GENDER: FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ACCIDENT STATEMENT AS ATTACHED. NOT TOO SURE THE NUMBER OF PEOPLE IN THE OTHER VEHICLE. CAR CAMERA COULDN'T SEE OTHER PARTY'S VEHICLE NUMBER CLEARLY.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO WILL BE SEND VIA EMAIL
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN2199E
Vehicle Make/Model/Colour	
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

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claim process.
2. This Form must be completed by the Policyholder and/or the Authorized 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 for Accident Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will be made available upon application by interested parties.
7. By the judgment 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 enquiry by me;
 - (iv) administering my claims (including the making of correspondence, statements, notices, 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) an 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 one 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 a database for the purpose of fraud detection, investigation and management of present and all future claims.
- (e) the information so collected under (b) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in assessing, investigating, controlling or managing it and 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 Representative's Signature
Name: Joelle Tan
NRIC/IN No: AMEK AUTOPOINT PTE LTD
02.11.2018

Accident Sketch Plan

SKETCH PLAN

A: SGU 2306L

B: 33N 2199E

BRICKLAND RD

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS I WAS ABOUT TO ENTER KJE FROM BRICKLAND RD ON LANE 1 THIS WHITE HATCHBACK CAR TURN ALSO TURNING RIGHT BUT HE TURNED TOO EARLY AND CAME INTO MY LANE AS I CAN'T BREAK IN TIME I HIT HIS RIGHT REAR DOOR. HE DID NOT STOP AND I CAN'T GIVE CHASE AS I HAD PASSENGERS WITH ME.

PLEASE ALSO REFER TO POLICE REPORT T/20180917/2138
ATTACHED.

DECLARATION

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

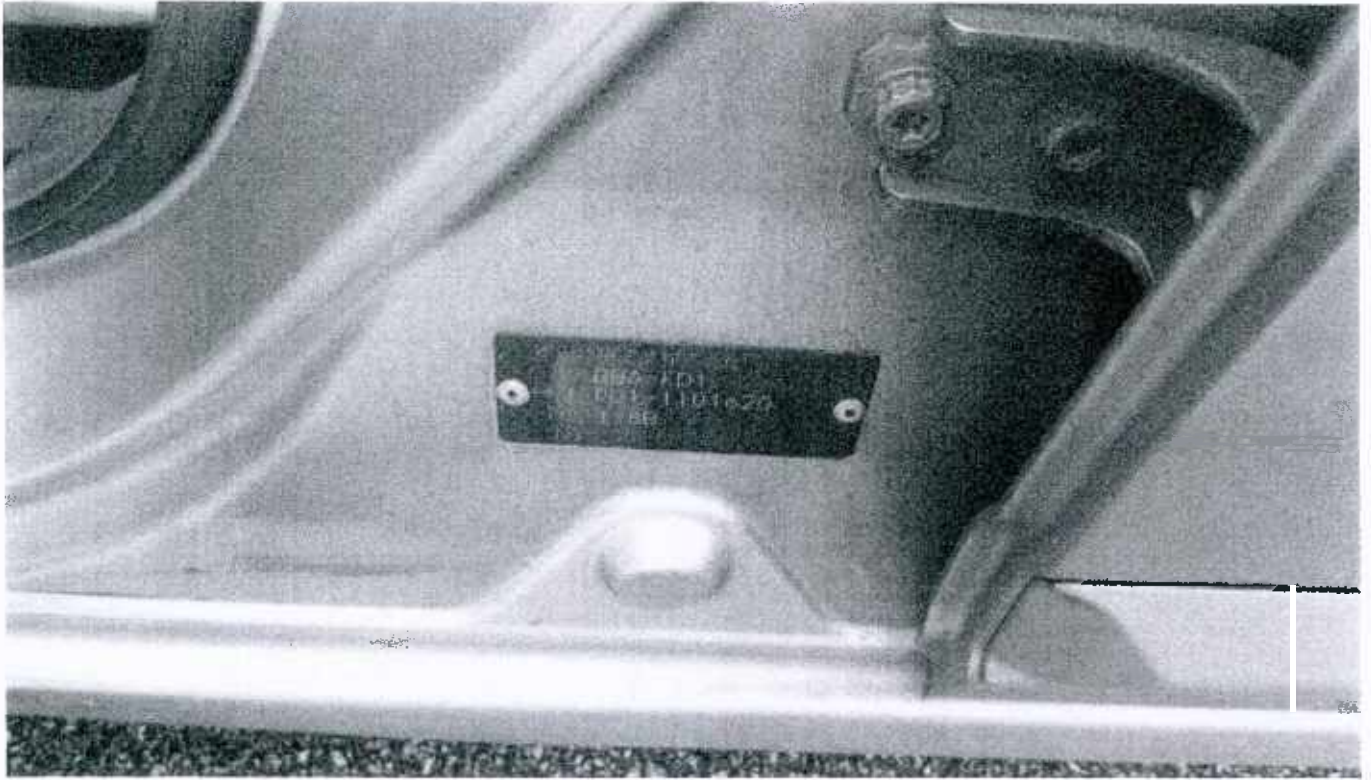
Public holder's signature
Date & Time:

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

Reporting Officer's Signature: [Signature]
Name: JOCK TAN
NRIC No: 8001 0111 1111

AMK AUTOPOINT PTE LTD
02.11.2018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



SINGAPORE
POLICE FORCE



1/20180917/2138

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. 1/20180917/2136

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/09/2018 18:55		Video Report No.		Station Diary No: 111	
Informant's Particulars					
Name of Informant: TONY YAU SUN ANN			Address: APT BLK 274A COMPASSVALE BOW #12-535 SINGAPORE 541274		
ID Type / ID No. NRIC NO / S7285188I			Contact No. Home/Office: Mobile: 96968147		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 45	Date of Birth: 12/11/1972	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: PRIVATE HIRER			Driving Licence Information: Class 2B, 2A, 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 14/09/2018 21:45	Type of Location: X-Junction
Location: Along Road 1 BRICKLAND ROAD				
Along Brickland Road towards KJE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGU2306L	Car	HONDA		Silver	Slightly Damaged	2

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20180817/2138

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

2 of 3

Report No: T/20180817/2138

CONTINUATION OF REPORT

Driver			
Name	TONY YAU SUN ANN	ID No.	S72851881
Related Vehicle	SGU2306L (Car)	Contact No.	96968147
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2E,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 14/09/18 at about 9.45pm, I was driving my vehicle, SGU2306L (Registered under company name "STEMMAPLEH") along the outmost right lane and has made a right signal as I intended to make a right turn towards K.E. In the midst of making a right turn, there was a vehicle (white colour hatchback, unknown make and registration number) which was moving on the left lane had suddenly made a wide turn and cut into my lane. There was also a thud sound. As the vehicle was too near to my vehicle, I could not stop in time and the front left portion of my vehicle had swiped on the right side of the said vehicle.

However, I was expecting the driver of the said vehicle to stop but he or she failed to do so. At that moment, I have two passengers seated in my vehicle and no one had sustained any injuries. However, my passengers did notice when the vehicle cut into my lane. There was an inbuilt camera installed in my vehicle and there were footages of the said incident. I have made a check and discovered that there were scratches on the front left portion of my vehicle.

Police Report



SINGAPORE
POLICE FORCE



T/20180917/2138

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

3 of 3

Report No: T/20180917/2138

CONTINUATION OF REPORT

Sketch Plan

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 65474865 stating the report number as reference.

Signature Of Officer Recording The Report
F /
Staff Sgt JULIANA BINTE JUMARI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/09/2018 18:55

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP168

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay, #15-03 Singapore 048642
Tel: (65) 6724 0010 / Fax: (65) 6724 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
URN: M45506206 / GST Reg. No.: S75057773

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MAAP18142311 Vehicle Registration No: SGV 2306L
Name (as shown in NRIC): TONY YAU SUN ANN NRIC/FIN/Passport No: 72551881
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address: 274A COMPASSVALE BOW #12-535 Singapore (541274)
Contact (Tel): _____ Mobile No.: 96968147
Email Address: tonyzuko@gmail.com
Date of Accident: 14/09/18 Time of Accident: 9:15pm
Place of Accident: BRICKLAND RD
Insurance Company: NTUC INCOME

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

THE OTHER VEHICLE NUMBER IS SJN 2199 E

REPORTING ONLY TO THIRD PARTY CLAIM

Policyholder / Driver's Signature
Date: 22/03/19

Reporting Centre Personnel's Signature
Name: Deile Tan
NRIC/FIN/Passport No: ANIK AUTOPART MT LTD
Date: 22.03.2019



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-19-048745

Date of Request: 28/03/2019

Your Ref No: 10480

K K CHENG & CO
101 Upper Cross Street #05-21
People's Park Centre
Singapore 058357

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 14/09/2018

Place of Accident: BRICKLAND ROAD

Client Vehicle No: SGU2306L

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



**GENERAL
INSURANCE
ASSOCIATION**

RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M403017735

SEARCH RESULTS

Our Ref No: GR-19-048745

Date of Request: 28/03/2019

Your Ref No: 10430

K K CHENG & CO
101 Upper Cross Street #05-21
People's Park Centre
Singapore 058357

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 14/09/2018

Place of Accident: BRICKLAND ROAD

Client Vehicle No: SGU2306L

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

REQ. VEHICLE	ACCIDENT LOCATION	ACCIDENT DATE
SJN2199E	No match found.	

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-19-055230

Date of Request: 09/04/2019

Your Ref No: 10480

K K CHENG & CO
101 Upper Cross Street #05-21
People's Park Centre
Singapore 058357

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 14/09/2018

Place of Accident: BRICKLAND ROAD

Client Vehicle No: SGU2306L

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

RECEIVED
11/09/2018

TAX INVOICE

BY:

Our Ref No: GR-19-055546

Date of Request: 09/04/2019

Your Ref No: 10480

K K CHENG & CO
101 Upper Cross Street #05-21
People's Park Centre
Singapore 058357

Dear Sir/Madam,

Date of Accident: 14/09/2018

Vehicle No: SGU2306L

Place of Accident: BRICKLAND ROAD TOWARDS KJE

Involving Vehicle No: SJN2199E

RECEIVED

BY:

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SJN2199E	BRICKLAND ROAD TOWARDS KJE	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

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For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

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IMPORTANT NOTICE

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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	06/04/2019 11:46
Date Of Accident	14/09/2018 21:45
Exact Location Of Accident	BRICKLAND ROAD TWDS KJE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN2199E
Insured/Policyholder	
Name Of Registered Owner	CHUA MING JIE, ROCHELLE

Vehicle Particulars

Manufacturer	HONDA
Model	FIT-1.3 G (A)
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA391476/1
Cover Note Number	

Driver

Name of Driver	CHUA MING JIE, ROCHELLE
NRIC No	S9204255C
Address	685C CHOA CHU KANG CRESCENT #12-304 SINGAPORE 682685

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

Circumstances of Accident

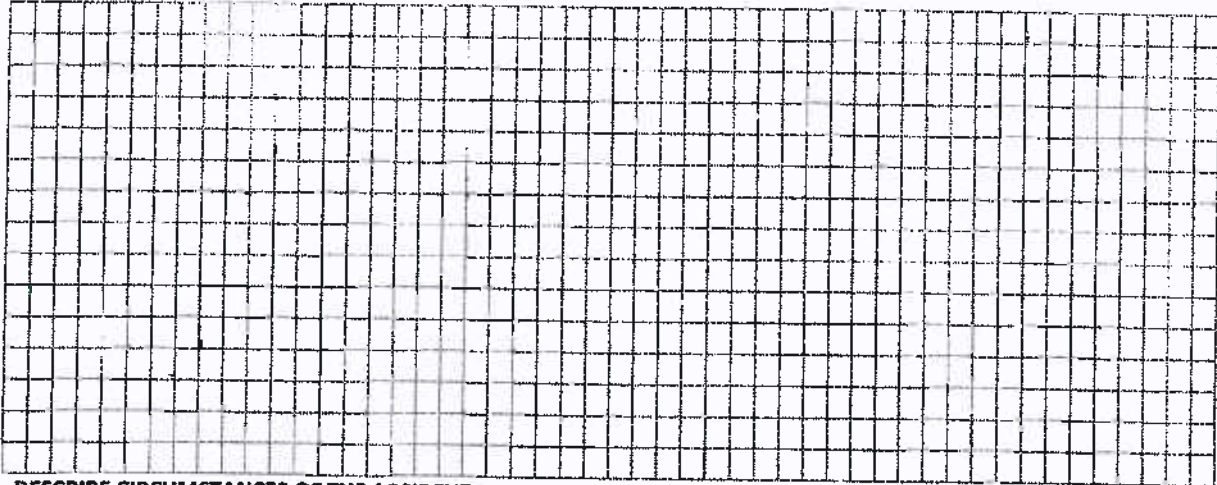
REFER TO POLICE REPORT/ SKETCH PLAN TAKE NOTE: UNABLE TO PROVIDE IMAGE OF INSURED VEHICLE DUE TO (DISPOSAL - DE REGISTERED)

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

SKETCH PLAN — refer to attached road map.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On Sept 14th 2018, at 3145 hrs, I was driving from Bukit Batok towards Choa Chu Kang, along Brickland Road to make a right turn towards KTE (AKE). The traffic light signalling for the right turn lit up, I signalled to turn right.

The road to making the right turn was narrow. As I was turning right, I heard a slight "bump" sound. The car behind me was also making a right turn as I was turning right. As I was making the turn, I heard a slight "bump" sound — checked my mirrors, but the car did not signal to stop. I did not think that it was an accident as the car did not signal to stop or stop, so I continue to drive home.

After I reach home, I check my vehicle and found 2 minor scratch marks on the right rear of the vehicle (refer to photo attached). I did not file a report as (1) it were minor scratch marks & I did not intend to claim; (2) did not note down the other party's vehicle number plate.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE** WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

<input checked="" type="checkbox"/>	- Reporting Only
<input type="checkbox"/>	- Claim OD
<input type="checkbox"/>	- Claim TP
<input type="checkbox"/>	- Claim OD/ TP at other workshop

DECLARATION

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

Chua Cheongjie 06/04/19, 11.22am

Policyholder's signature
Date & Time

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

[Signature]
Reporting Centre Personnel's Signature
Name:
Nric/Fin No.

Page No.: *9*
Unable to disclose
NRIC / driving licence

Sign



KJE

KJE

KJE

Brickland Rd

Brickland Rd

Sungei Tengah Rd

Sungei Tengah Rd



Legend - Car 'A' (SUN 2199E)
- Car 'B' (SGE 2306L)



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20181115/2106

3 of 3

Report No. T/20181115/2106


CONTINUATION OF REPORT

Sketch Plan

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 Recording The Report:

 EDWINA CHEW HUI LING

Signature Of Interpreter:

Not applicable

Singapore Police Force

Officer In Charge Of Case:

TP / HRT /

SI ABDUL KAREEM BIN ABDUL HAGUE

Contact No.: 65476079

Authentication Stamp

NP168

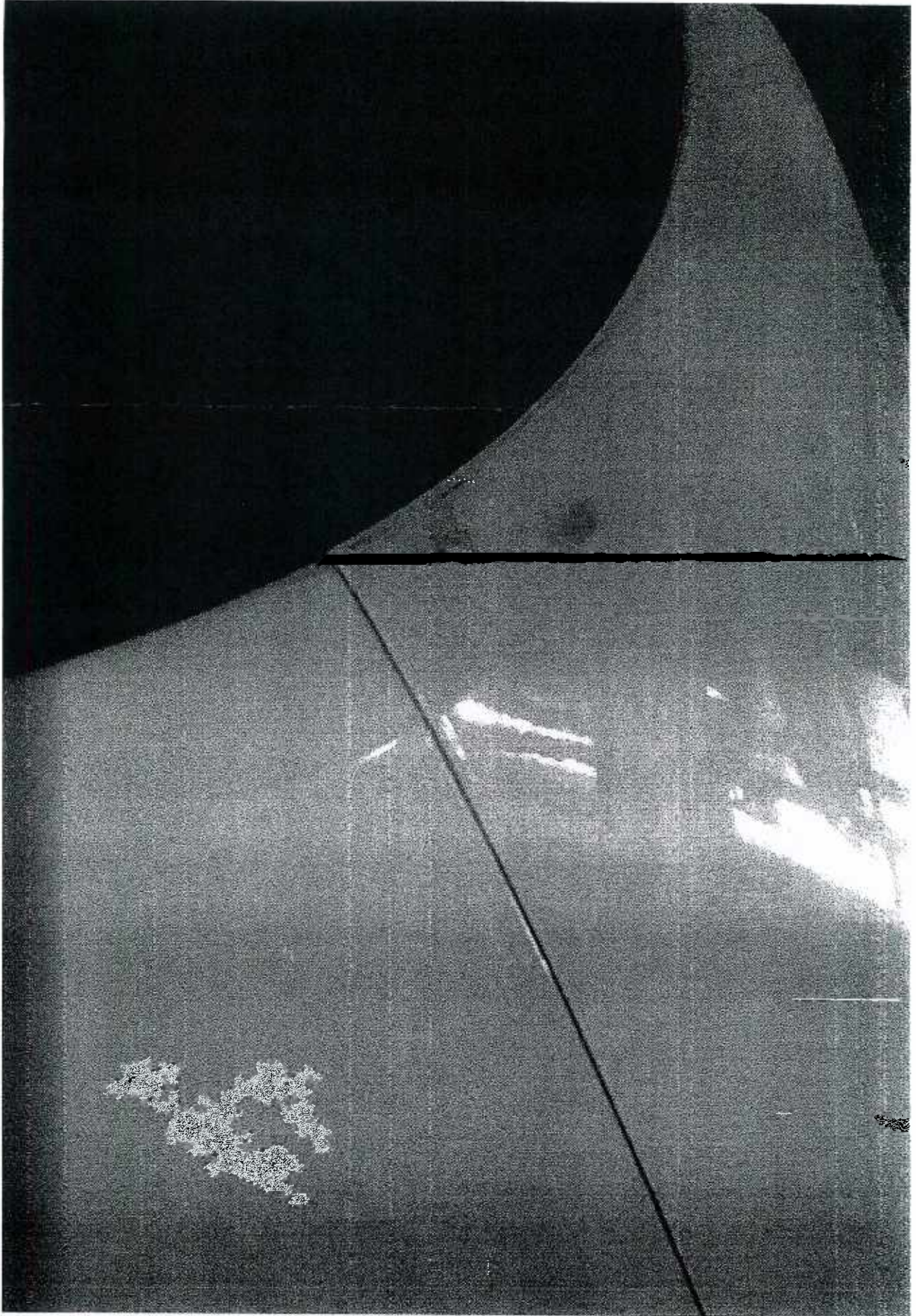
Signature Of Informant:



Date/Time:

15/11/2018 17:20

Classification Of Case:





**SINGAPORE
POLICE FORCE**

PAYMENT

TAX INVOICE

Invoice No: SPF2019032901000200

Date/Time: 29/03/2019 11:58:13

Application Paid Via: Visa

GST Reference No: MG-8400000-5

Transaction Ref No: TP000120786

Service Type	Service Fee	eService Reference No	Unit Price (S\$)	GST (S\$)	Qty	Amount (S\$)
1 Police Document	Search Fee	0050000002027376	14.00	0.00	1	14.00
Total (S\$)						14.00

This is a computer-generated invoice. No signature is required.

Please print a copy of the invoice for your reference.

A FORCE FOR THE NATION



EASYPAY

Your transaction is successful

Merchant Name : SINGAPORE POLICE FORCE
Reference No : SPFEACR2019032900309
Amount : SGD 14.00
Card Type : Visa
Approval Code : 033078
Transaction date/time : 29 March 2019 11:59:17

Please print this page as a reference for your transaction.

To continue, please click 'OK'.

Or you will be automatically redirected to the next page within 20 seconds

Print

OK

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**SINGAPORE
POLICE FORCE**

Traffic Police
18 Ubi Avenue 3
Singapore 408665
Tel +65 6547 6000
Fax +65 6547 4883
www.police.gov.sg

Our Ref : TP/IP/54823/2018
Date : 15 February 2019

Tony Yau Sun Ann
Blk 274A Compassvale Bow
#12-535
Singapore 541274

Dear Sir / Madam,

**TRAFFIC ACCIDENT 1850 SGU2306L AND SJN2199E ALONG BRICKLAND ROAD ON
14/09/2018 AT ABOUT 2145 HRS**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver of SJN2199E had committed the following offences:
- (i) Inconsiderate Driving under Section 65(b) of the Road Traffic Act Chapter 276;
 - (ii) Failing to stop after an accident under Section 84(1) of the Road Traffic Act Chapter 276;
 - (iii) Failing to report an accident within 24 Hours under Section 84(2) of the Road Traffic Act Chapter 276.

Action has been initiated against the driver for the said offences.

3. If you have any clarification, you may contact the Investigation Officer, Si Abdul Kareem at office number: 6547 6079.

4. Thank you.

Yours faithfully,

**HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE**

This is a computer-generated letter. No signature is required.

A FORCE FOR THE NATION

SHENG LI LAI

Tel : 6842 0302
Fax : 6746 0295

No.2 Kaki Bukit Ave 2 #01-36 Kaki Bukit Auto Hub
Singapore 417921

Name : STEAMMAPLEH

Date : 15-Apr-19

Address : c/o No.2 Kaki Bukit Ave 2
#01-36 Kaki Bukit Auto Hub
Singapore 417921

Final repair bill for Honda Civic SGU 2306 L

To supply and replace parts, labour charges for
repairing, knocking, welding and to respray painting
(Lump Sum Repair)

\$ 11,700.00

Dollars : Eleven Thousand And Seven Hundred Only

SHENG LI LAI AUTO LEASING

Workshop : Kaki Bukit Autohub 2 Kaki Bukit Ave 2 #01-36, S(417921)

Tel:68420302 Fax :67460295

UEN: 53368801M

NETT INVOICE

TONY YAU SUN ANN
274A COMPASSVALE BOW
#12-535
SINGAPORE 541274

Invoice No : 2019A012
Invoice Date : 11/04/19
Due Date : 11/04/19
VHA No : 00411

TEL: 96968147
Client: SGU2306L

SKD8740T

Description	Amount
-------------	--------

Rental for 21 Days @ \$120 per day	\$2,520
------------------------------------	---------

Period: 20 Mar 2019 to 10 Apr 2019

Total Amount:	\$2,520
---------------	---------

SHENG LI LAI AUTO LEASING

2 KAKI BUKIT AVENUE 2 #01-36 KAKI BUKIT AUTO-UB SINGAPORE 417921



TEL: 6842 0302 H/P: 91119222

UEN: 53368801M

NO: 00411

VEHICLE RENTAL AGREEMENT



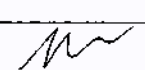
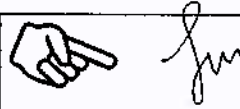
HIRER'S PARTICULAR		Vehicle No: SGM 2306 L Replace Veh No:	
Name: (as in I/C) <u>TONY YAU SUN ANN</u>		Mileage Out: <u>105 423</u>	
NRIC/PASSPORT NO: <u>S 7285188 I</u>		Make & Model: <u>VW JETTA</u>	Auto / Manual
Address (Res): <u>274A COMPASSVALE BOW</u>		Date Out: <u>20 MAR 2019</u>	Time: <u>0930</u>
<u>#12-535 S (541274)</u>		HIRE / PERIOD EXPIRY	Time:
Name & Address of employer: <u>STEAMMAPIEH</u>		NON-WAIVER EXCESS = \$ 3000	
Occupation: _____ Driving Exp: <u>25y</u>		CHARGES	
Driving License No: <u>C00531533</u> D/L Type: Local / Int'l		Daily <u>21 @ \$120</u>	Per day <u>2520</u>
Issue Date: <u>24 MAR 1995</u> Date of Birth: <u>12 NOV 1972</u>		Weekly <u>@ \$</u>	Per week
Tel: (O) _____ (R) _____ HP: <u>9096 8147</u>		Monthly <u>@ \$</u>	Per month
ADDITIONAL DRIVER'S PARTICULAR		Hours <u>@ \$</u>	Per hour
Name: (as in I/C) _____		Others <u>@ \$</u>	
NRIC/PASSPORT NO: _____		CDW <u>@ \$</u>	Per day/month
Address (Res): _____		PAI <u>@ \$</u>	Per day/month
Name & Address of employer: _____		Delivery / Collection Services	
Occupation: _____ Driving Exp: _____		SUB - TOTAL \$ 2520	
VEHICLE CHECK LIST		PETROL LEVEL	
		Out E 1/4 <u>(1/2)</u> 3/4 F	
		In E 1/4 <u>(1/2)</u> 3/4 F	
		EXTENSION	
		Misc.	
INDICATE: A - ACCIDENTS D -- DENTS S - SCRATCHES		TOTAL CHARGES \$ 2520	
		Hirer's Signature: 	
		Additional Driver's Signature: _____	

I have read and agree to the terms and conditions on both sides of the agreement. If I have presented a charge/credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have made on the charge/credit card. All information that I have given to SHENG LI LAI AUTO LEASING in connection with this agreement is true.

*IMPORTANT NOTES

- ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY SHENG LI LAI AUTO LEASING.

RETURN OF VEHICLE. THE HIRER / DRIVER IS TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" DURING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO SHENG LI LAI AUTO LEASING AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER / DRIVER
<u>10/04</u>	<u>1845</u>	<u>108923</u>			

MC-COY

APPRAISER PTE LTD

No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417893
Tel: 6748 6653 Fax: 67471017 Registration No: 200723252D

Billing Name & Address

STEAMMAPLEH
c/o No.2 Kaki Bukit Ave 2
#01-36 Kaki Bukit Auto Hub
Singapore 417921

Invoice No 19026-03/MY

Date 15 Apr 2019

Vehicle No : SGU 2306 L

Model : Honda Civic

Item	Descriptions	Amount S\$
1	Date of inspection : <u>20 Mar 2019</u> A copy of the inspection / survey report Correspondence, postages and etc.	
2	Photography Services - Develop photographs - Storage of digital photographs - Submission of photographs <u>179</u> copies	
3	Transportation Charges	
4	2nd Inspection & Final Inspection	
	Total	<u>\$ 954.00</u>
	SDLS : NINE HUNDRED AND FIFTY-FOUR ONLY	

Notes :

1. All cheque payment should be "Crossed" and made payable to "Mc-Coy Appraiser Pte. Ltd."
2. All cheque should have our "Invoice No." written on the reverse side of the cheque
3. For further enquiries on this invoice, please feel free to contact us



Official Stamp

E & O. E



No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417883
Tel: 6748 6655 Fax: 67471017 Registration No: 200723252D

Report Reference : TP / 19026-03/MY / 2019

Date of Report : 15 Apr 2019

STEAMMAPLEH

c/o No.2 Kaki Bukit Ave 2
#01-36 Kaki Bukit Auto Hub
Singapore 417921

THIRD PARTY SURVEY

ACCIDENT HAPPENED ON 14 Sep 2018

Workshop Address : Sheng Li Lai
No.2 Kaki Bukit Ave 2
#01-36 Kaki Bukit Auto Hub
Singapore 417921

As per your instruction dated 20 Mar 2019 with regard to the above matter. We have carried out a physical inspection on the said vehicle **SGU 2306 L**. We enclosed herewith our report and findings as follows:

1. VEHICLE PARTICULARS

Registration No : SGU 2306 L
Model : Honda Civic
Year / Capacity : 2007/1799
Chassis No : FD11101620

Engine No : R18A1031726
Mileage : 346358
Colour : Silver

2. TYRES CONDITION

	<u>Size</u>	<u>Made</u>	<u>Balance</u>	<u>Rim</u>
FRONT O/S	205/55 ZR16	Nexen	5.00 mm	Sport
REAR O/S	205/55 ZR16	Nexen	5.00 mm	Sport
FRONT N/S	205/55 ZR16	Nexen	5.00 mm	Sport
REAR N/S	205/55 ZR16	Nexen	5.00 mm	Sport



No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417883
Tel: 6748 6553 Fax: 67471017 Registration No: 200723252D

3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the front o/s and undercarriage portion(s). For more detail of the damages, please see photograph attached.

4. Estimated normal period of repair : 13 working days to complete.
5. Enclosed number of photograph : 179 copies.
6. In accordance to your instruction, we have **Not Authorised** repair to the vehicle and the survey was done on a **"Without Prejudice"** basis. We hope that this report will be of assistance to you in dealing with the matter.
7. Should you discover any discrepancy in the report, please kindly notify us **within 2 weeks**, or the report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle No: **SGU 2306 L**
 Report No: **TP/ 19026-03/MY / 2019**

SPARE PARTS

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
<u>List Items</u>				
1	Front o/s headlamp	Damage	\$ 955.60	\$ 955.60
1	Front o/s headlamp lower bracket	Damage	\$ 58.80	\$ 58.80
1	Front grille	Damage	\$ 158.00	\$ 158.00
1	Front grille chrome moulding	Damage	\$ 181.80	\$ 181.80
1	Front grille logo	Damage	\$ 28.80	\$ 28.80
1	Front bumper	Damage	\$ 701.00	\$ 701.00
1	Front bumper fog lamp	Damage	\$ 275.30	\$ 275.30
1	Front bumper reinforcement	Damage	\$ 281.80	\$ 281.80
1	Front bumper side retainer	Damage	\$ 31.30	\$ 31.30
1	Front bumper undercover	Damage	\$ 186.00	\$ 186.00
1	Front o/s fender	Damage	\$ 594.80	\$ 594.80
1	Front o/s fender inner panel	Damage	\$ 463.00	\$ 463.00
1	Front o/s fender inner shield	Damage	\$ 141.50	\$ 141.50
1	Front support panel	Damage	\$ 484.60	\$ 484.60
1	Front support top garnish	Damage	\$ 76.30	\$ 76.30
1	Horn	Damage	\$ 101.50	\$ 101.50
1	Front wiper tank	Damage	\$ 74.00	\$ 74.00
1	ABS pump	Damage	\$ 1984.40	\$ 1984.40
1	Air bag sensor	Damage	\$ 194.00	\$ 194.00
1	Front o/s shock absorber	Damage	\$ 514.00	\$ 514.00
1	Front o/s knuckle arm	Damage	\$ 257.00	\$ 257.00
1	Front o/s knuckle arm bearing	Damage	\$ 126.50	\$ 126.50
1	Front o/s lower arm	Damage	\$ 278.50	\$ 278.50
1	Front steering rack	Damage	\$ 1670.90	\$ 1670.90
1	Front steering rack cross member	Damage	\$ 1208.20	\$ 1208.20
1	Front stabilizer bar	Damage	\$ 151.70	\$ 151.70
1	Front stabilizer bar link	Damage	\$ 82.50	\$ 82.50
1	Front o/s drive shaft	Damage	\$ 993.20	\$ 993.20
1	Front steering wheel clock sensor	Damage	\$ 299.90	\$ 299.90
1	Front engine front mounting	Damage	\$ 146.50	\$ 146.50
1	Front engine rear mounting	Damage	\$ 182.60	\$ 182.60
1	Front engine o/s mounting	Damage	\$ 241.50	\$ 241.50
1	Front door protector	Damage	\$ 106.60	\$ 106.60
			\$ 13232.10	\$ 13232.10
Discount		20.0%	\$ 2646.42	\$ 2646.42
			\$ 10585.68	\$ 10585.68

List Items Sub Total \$ 10625.68 \$ 10625.68

Vehicle No: **SGU 2306 L**
 Report No: **TP/ 19026-03/MY / 2019**

SPARE PARTS

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
-----	-------------------	-----------	-----------------------	------------------------

List Items Total c/f \$ 10625.68 \$ 10625.68

Special Nett Items

1	Front o/s fender inner shield clip (1 set)	Damage	\$ 40.00	\$ 40.00
1	Front o/s tyre (depreciation)	Damage	\$ 300.00	\$ 150.00
1	Front o/s wheel r m	Intact	\$ 450.00	\$
			<u>\$ 790.00</u>	<u>\$ 190.00</u>

Spare Parts Total \$ 11375.68 \$ 10775.68

Vehicle No: **SGU 2306 L**
 Report No: **TP/ 19026-03/MY / 2019**

LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
	Spare Parts Total c/f	\$ 11375.68	\$ 10775.68
1	To remove and refit damage parts, test for proper functioning and focus of headlamps.	\$ 50.00	\$ 40.00
2	To remove and replace air-con system, refill gas and test for leakages.	\$ 200.00	\$ 120.00
3	To remove and refit radiator system.	\$ 100.00	\$ 60.00
4	To remove and refit front undercarriage.	\$ 400.00	\$ 350.00
5	To check and re-adjust (Computerized) all wheel alignment.	\$ 100.00	\$ 60.00
6	To remove and replace the above damaged parts, straighten, knock out, realign and repair including cut and weld body panels. To re-adjust to the original position using power tools.	\$ 1700.00	\$ 1320.00
7	To spray paint on the replaced and repaired parts, prepare spray such as masking tape the unaffected areas with paper, cleaning and sanding of surfaces, final polishing and waxing are also available.	\$ 1700.00	\$ 1400.00
8	To apply undercoating on the repaired and replaced panels for rust protection.	\$ 150.00	\$ 120.00
9	To recalibrate ECU for air bag.	\$ 600.00	\$ 360.00
Total		\$ 16375.68	\$ 14605.68

Vehicle No: **SGU 2306 L**
Report No: **TP/ 19026-03/MY / 2019**


LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
		Total c/f	\$ 16375.68 \$ 14605.68

The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a Lump Sum Repair Contract of:

\$ 11700.00

SDLS: ELEVEN THOUSAND SEVEN HUNDRED ONLY


Qualified Appraiser





