

CROSSBORDERS LLC

Advocates & Solicitors | Commissioner for Oaths | Notary Public

MAIN OFFICE
133 NEW BRIDGE ROAD
#23-03/04/05
CHINATOWN POINT
SINGAPORE 059413

Our Ref: AJ.tk.7216.2020.TEK-PD+PI
Your Ref: SJK2556Z

17 SEP 2020

TEL: 6438 1323
FAX: 6438 2313

TO: **ALWIE BIN MUSTARI**
Blk 180 Pasir Ris Street 11
#03-10
Singapore 510180

BY CERTIFICATE OF
POSTING

WITHOUT PREJUDICE

cc: **India International Insurance Pte Ltd**
(Motor Claims Dept)
64 Cecil Street #05-02
IOB Building
Singapore 049711



BY PDX

WITHOUT PREJUDICE

Dear Sirs

**RE: CLAIMANT: ANAND S/O N KANAGASABAI
ACCIDENT INVOLVING VEHICLES NO. SJQ622Y & SJK2556Z ALONG MCE
TOWARDS ECP AT P23M MARK ON 18.05.2018**

We are instructed by the abovenamed to claim damages against you in connection with an accident on 18 May 2018 at about 17:30 hours along MCE towards ECP at P23M Mark involving our client's vehicle no. SJQ622Y and vehicle registration number SJK2556Z driven by you at the material time.

We are instructed that the accident was caused by the negligence of you in the driving, management and control of vehicle registration number SJK2556Z.

As a result of the accident, our client's vehicle no. SJQ622Y was damaged and our client suffered personal injuries which are set out in the medical report annexed to this letter. Our client has been put to loss and expense, particulars of which are as follows:-

A. Special Damages

- a) Transport Expenses (Taxi fare to hospital and clinics)
- b) Medical Expenses (at this stage)
- c) Loss of Income (3 days MC)
- d) Cost of Repairs
Loss of Use (13 days x \$80.00 per day)
- e) (inclusive of Sunday, 2 days Pre-Repair Inspection Notice and Vesak Day Holiday)

MC2018/2443

We are in receipt of your letter, which is receiving our attention. We shall revert shortly. Kindly note that we are preserving our rights to conduct a medical examination on your client where necessary.	
\$	50.00
\$	119.30
Our To be assessed	
\$	5,600.00
\$	1,040.00
Date	18/09/2020
India International Insurance P.L.	

Gabriel

B. General Damages

\$ 3,000.00

C. Disbursements

- a) Medical Report Fees
- b) LTA Search
- c) Insurance Enquiry

\$ 321.00
\$ 7.49
\$ 7.45

CONFIDENTIALITY CAUTION
THIS DOCUMENT IS FOR THE ADDRESSEE(S) ONLY AND MAY CONTAIN CONFIDENTIAL INFORMATION AND/OR MAY BE SUBJECT TO LEGAL PRIVILEGE. IF YOU HAVE RECEIVED THIS IN ERROR, PLEASE CONTACT US IMMEDIATELY.

CROSSBORDERS LLC

A LIMITED LIABILITY CORPORATION, REGISTRATION NUMBER 201305284K
GST REGISTRATION NUMBER 201305284K

CROSSBORDERS LLC

Advocates & Solicitors | Commissioner for Oaths | Notary Public

Our Ref: AJ.tk.7216.2020.TEK-PD+PI
Your Ref: SJK2556Z

MAIN OFFICE
133 NEW BRIDGE ROAD
#23-03/04/05
CHINATOWN POINT
SINGAPORE 059413

TEL: 6438 1323
FAX: 6438 2313

17 SEP 2020

cc: **MUHAMMAD HARITH BIN MOHAMED AJARI**
Blk 993A Buangkok Link
#04-263
Singapore 531993

**BY CERTIFICATE OF
POSTING**

WITHOUT PREJUDICE

cc: **India International Insurance Pte Ltd**
(Motor Claims Dept)
64 Cecil Street #05-02
IOB Building
Singapore 049711

BY PDX

WITHOUT PREJUDICE

Dear Sirs

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TOWARDS ECP AT P23M MARK ON 18.05.2018**

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We are instructed that the accident was caused by the negligence of you in the driving, management and control of vehicle registration number SJK2556Z.

As a result of the accident, our client's vehicle no. SJQ622Y was damaged and our client suffered personal injuries which are set out in the medical report annexed to this letter. Our client has been put to loss and expense, particulars of which are as follows:-

A. Special Damages

a) Transport Expenses (Taxi fare to hospital and clinics)	\$	50.00
b) Medical Expenses (at this stage)	\$	119.30
c) Loss of Income (3 days MC)		To be assessed
d) Cost of Repairs	\$	5,600.00
Loss of Use (13 days x \$80.00 per day)	\$	1,040.00
e) (inclusive of Sunday, 2 days Pre-Repair Inspection Notice and Vesak Day Holiday)		

B. General Damages \$ **3,000.00**

C. Disbursements

a) Medical Report Fees	\$	321.00
b) LTA Search	\$	7.49
c) Insurance Enquiry	\$	7.45

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CROSSBORDERS LLC

A LIMITED LIABILITY CORPORATION, REGISTRATION NUMBER 201305284K
GST REGISTRATION NUMBER 201305284K

d) GIA Report	\$	29.00 ✓
e) Survey Report Fees	\$	725.00 ✓
D. Legal Cost (including GST) (at this stage)	\$	3,210.00

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

- a) GIA Report & Traffic Police Report lodged by our client (SJQ622Y) with sketch plan;
- b) GIA Report lodged by you (SJK2556Z) with sketch plan together with photographs of your vehicle no. SJK2556Z;
- c) ✓ Result of LTA search on your vehicle registration no. SJK2556Z;
- d) ✓ Insurance Enquiry search on your vehicle registration no. SJK2556Z;
- e) Final Repair Bill from Tek Soon Motor Repair & Spray Painting;
- f) Vehicle Assessment Report & Invoice from Mc-Coy Appraiser Pte Ltd;
- g) One Hundred Forty-Five (145) colour photographs depicting the damage to our client's motor vehicle no. SJQ622Y;
- h) ✓ Certificate of Insurance of our client's vehicle no. SJQ622Y;
- i) ✓ Vehicle Owner Particular of our client's vehicle no. SJQ622Y;
- j) Medical Report dated 7th September 2020 by Dr Lye Tong Fong from Central 24-Hr Clinic Group together with Tax Invoice for the sum of \$321.00 being Medical Report Fees;
- k) Medical Fees for \$119.30 from Central 24-Hr Clinic Group; and
- l) Medical Certificate from Central 24-Hr Clinic Group; and
- m) ✓ LTA Receipt and GIA Invoices.

Pre-Repair Notification have been sent to **India International Insurance Pte Ltd** on 23 May 2018, of the accident and pre-repair inspection of our client's vehicle was carried out by your insurer.

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 or your insurer should send to us an acknowledgement of receipt of this letter **within 14 days** of your receipt of this letter. If you or your insurer wish to have our client examined by your own medical expert, this should be stated in your acknowledgement of receipt. Please also advise **within 14 days** of the acknowledgement of receipt, where and when the examination of our client is to take place so that we may arrange for him to attend.

Should you fail to acknowledge receipt of this letter **within 14 days**, our client can commence court proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our client arising out of the accident, you are required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents **within 6 weeks** of your receipt of this letter.

Yours faithfully

A handwritten signature in blue ink, appearing to read "CrossBorders LLC", is written over the typed name.

CrossBorders LLC

Email: corene@crossbordersllc.com (secretary)

encs

cc: SJQ622Y

MSME18066058 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 21/05/2018 16:01
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 ability.
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 21/05/2018 16:01
Date Of Accident 18/05/2018 17:30
Exact Location Of Accident MCE TWDS ECP AT P23M MARK
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJQ622Y
Insured/Policyholder
Name Of Registered Owner ANAND S/O N KANAGASABAI
NRIC No S6947084Z
Email Address ANAND@SAMUDERA.ID
Mobile Phone No (LOCAL) +65-96815189
Alternative Phone No OFFICE-96815189

Vehicle Particulars

Manufacturer SUZUKI
Model SX4

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 AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number GA098602
Cover Note Number

Driver

Name of Driver ANAND S/O N KANAGASABAI
NRIC No S6947084Z
Date Of Birth 15/04/1969
Occupation INDOOR
Date Of Driving Pass 15/07/2005
Driving Experience 12 YEARS AND 10 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-96815189
Fax Number
Contact Number OFFICE-96815189
EMail Address ANAND@SAMUDERA.ID

Address BLK 647 PASIR RIS DRIVE 10 #05-48
 Postcode 510647
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OWNER
 Vehicle Registration Number of Driver's Own Vehicle -
 Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles involved in the accident
 Was any body injured in the Accident? YES
 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) 1

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
 Police Station Address ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-2449999 - FAX NO: 62447258
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20180519/2063.

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 SJK2556Z
 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)

DETAILS OF INJURED PERSON 1

Name	ANAND S/O N KANAGASABAI
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SJQ622Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	



Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/05/2018 12:58		Vide Report No.:		Station Diary No.: 48	
Informant's Particulars					
Name of Informant: ANAND S/O N KANAGASABAI			Address: APT BLK 647 PASIR RIS DRIVE 10 #05-48 SINGAPORE 510647		
ID Type / ID No.: NRIC NO / S6947084Z			Contact No.: Home/Office: Mobile: 96813189		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 49	Date of Birth: 15/04/1969	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: SHIPPING AGENT			Driving Licence Information: Class: 2B,2A,3A		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/05/2018 17:30	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY EXACT LOCATION IS MCE TOWARDS ECP AT THE P23M MARK				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJK2556Z	Car	PROTON	GEN21.6AT HLE	Red	Seriously Damaged	0
SJQ622Y	Car	SUZUKI	SX4 1.6HB AT	Grey	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJQ622Y	AXA INSURANCE SINGAPORE PTE LTD	GA098602	23/04/2018	22/04/2019



Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20180519/2063

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ANAND S/O N KANAGASABAI	ID No.	S6947084Z
Related Vehicle	SJQ622Y (Car)	Contact No.	96813189
Hospital/Clinic	CENTRAL 24-HR CLINIC (PASIR RIS)	Class of Driving Licence & Expiry Date	Class: 2B,2A,3A Date of Expiry: NIL
Date Treatment	18/05/2018	Date Discharge	18/05/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	ALWIE BIN MUSTARI	ID No.	S1542701I
Related Vehicle	NIL	Contact No.	98554066
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 18th of May 2018, at around 1730hrs, I was travelling along MCE towards the ECP in my vehicle bearing registration no.SJQ622Y. As I was approaching the P23M mark, I saw that the traffic was starting to build up and thus started to apply my brake in preparation to stop when necessary. From the rear view mirror, I saw a vehicle travelling towards the rear of my vehicle and the said vehicle did not seem to be stopping. What happened next shocked me, the said vehicle (bearing registration no.SJK2556Z) collided onto the rear left bumper of my vehicle. Both parties then moved our vehicles to the emergency lane and alighted from our vehicles. My vehicle was damaged on the rear left bumper and it could not be driven afterwards. The other vehicle's right headlight was completely broken. We both exchanged particulars and he informed that he was in a rush to fetch his wife. We then parted ways.

Subsequently at night, I started to feel giddiness and not feeling particularly well. I proceeded to a nearby 24hr clinic in Pasir Ris and visited the doctor. I was then given a 3 days MC. I wish to state that I do not have an in-car camera.



**SINGAPORE
POLICE FORCE**



T/20180519/2063

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

3 of 3

Report No. T/20180519/2063

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:

G /

Sgt 2 ANDERITTE LIM JIN CUN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Staff Sgt TANG SIEW PING

Contact No: 65476430

Authentication Stamp

NP168

SIGNATURE

Signature Of Informant:

Date/Time:

19/05/2018 12:58

Classification Of Case:

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	05/06/2018 16:48
Date Of Accident	18/05/2018 17:40
Exact Location Of Accident	ALONG KPE TOWARDS CHANGI AIRPORT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJK2556Z
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD HARITH BIN MOHAMED AJARI
Vehicle Particulars	
Manufacturer	PROTON
Model	GEN21.6ATHLE
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M493726
Cover Note Number	15/10/2017-14/10/2018

Driver

Name of Driver	ALWIE BIN MUSTARI
NRIC No	S1542701I
Address	BLK 180 PASIR RIS STREET 11 #03-10

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

ON THE STATED DATE AND TIME, I WAS DRIVING MY VEHICLE A (SJK2556Z) ALONG KPE TOWARDS CHANGI AIRPORT, I AM CHECKING THE ONCOMING VEHICLE ON MY LEFT AND SUDDENLY MY VEHICLE HIT ONTO THE VEHICLE B (SJK622Y). THERE WERE NO INJURIES.

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

SJQ622Y

Vehicle Make/Model/Colour

Name of Driver

Insurance Company Name

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



Sketch Plan Pg. 2

SKETCH PLAN

ALONG KPE TOWS CHANGI AIRPORT
VEH A - SJK255GZ
VEH B - JGR624

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that Alwie Bin Mustari,
NRIC/FIN SI5427011, has reported to the Police a non-injury traffic accident
which occurred at Along KPE towards Changi Airport

on 18/05/2018 at 1741hrs am/pm involving the following vehicles:

- 1) SJK2556Z (car belonging to Alwie Bin Mustari)
- 2) SJQ622Y (car belonging to the other party)

- 2 If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt Bryan Lim

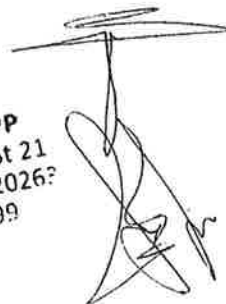
Date: 19/05/2018 Time: 1737hrs

S/D Ref: 22

Police Post/Unit: Tampines East NPP

Original – to be issued to informant
Duplicate – to be submitted to Traffic Police

Tampines East NPP
Block 263 Tampines St 21
#01-138 Singapore 52026?
Tel: 1800-7839999



Accident Photo



Accident Photo



Accident Photo



Driving License



Accident Photo



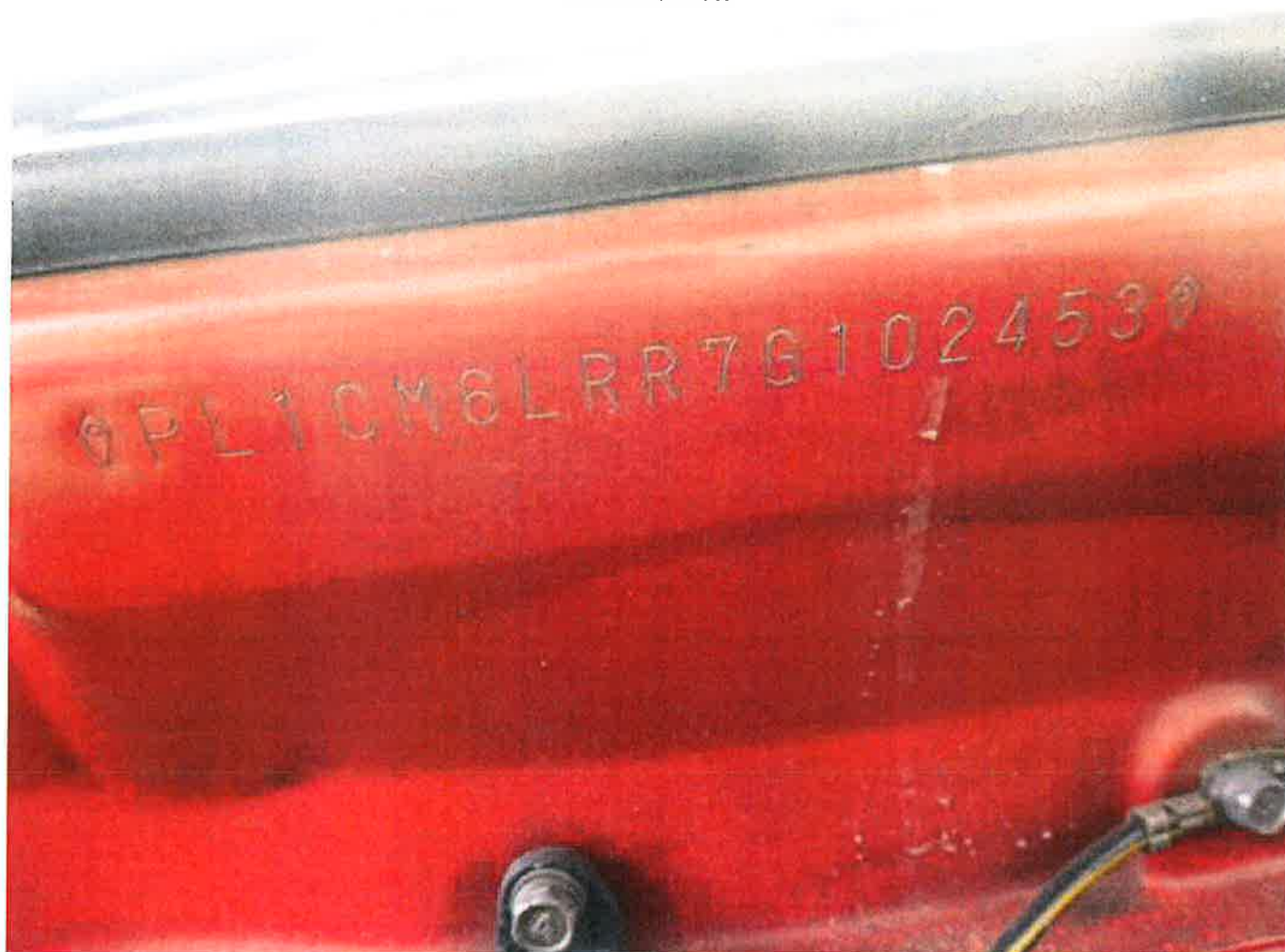
Accident Photo



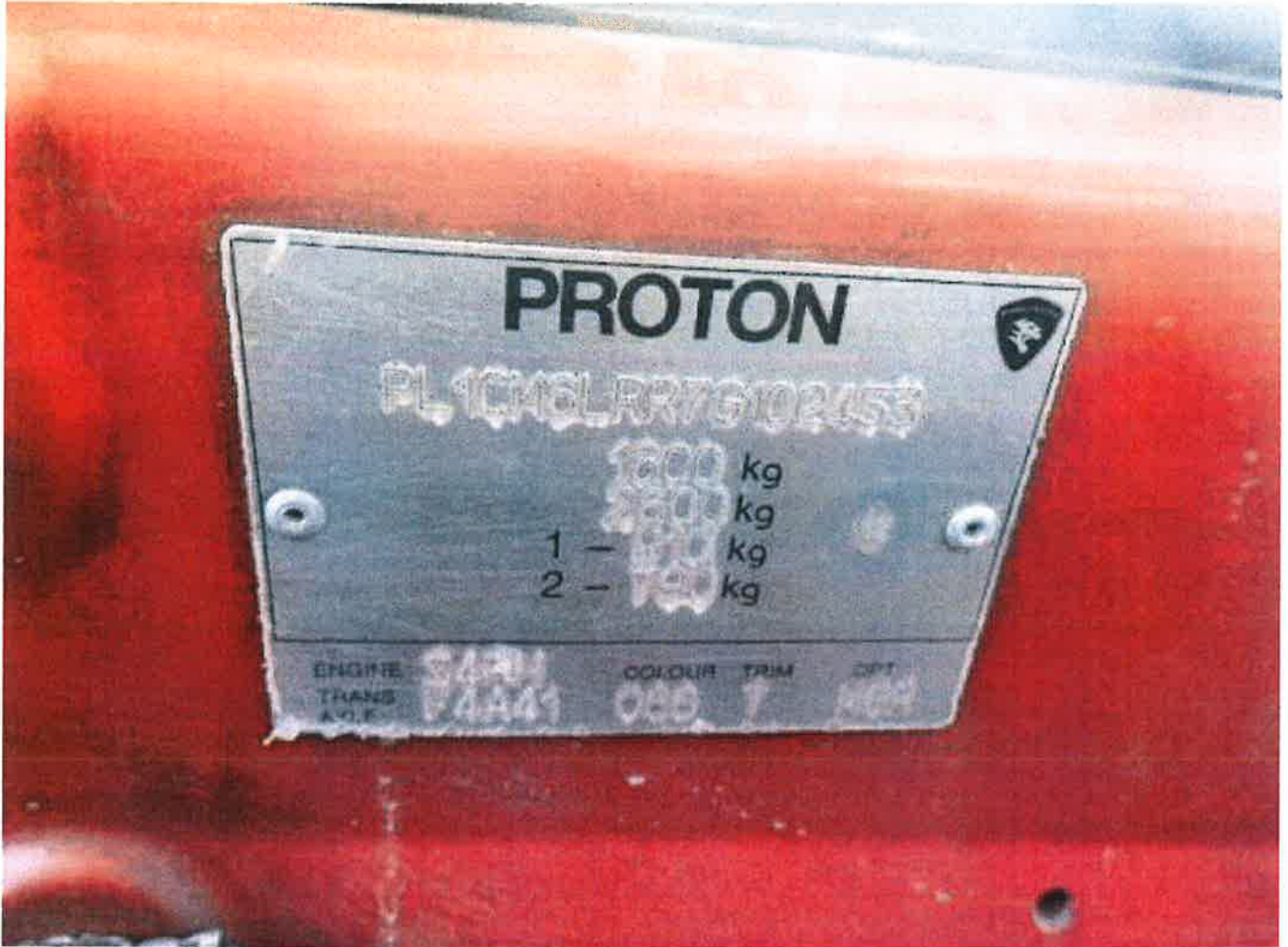
Accident Photo



Accident Photo



Accident Photo



Enquire Vehicle Owner Details (As At 18 May 2018 / 17:30:00)

Vehicle Owner Details

Owner ID Type:

Singapore NRIC

Owner ID:

S8341794C

Owner Name:

MUHAMMAD HARITH BIN MOHAMED
AJARI

Registered Address Type:

HDB / HUDC

Registered Block/House No.:

993A

Registered Street Name:

BUANGKOK LINK

Registered Unit No.:

04 - 263

Registered Building Name:

Registered Postal Code:

531993

Vehicle Insurance Details

Vehicle No.:

SJK2556Z

Make Description/Model:

PROTON / GEN21.6ATHLE

Insurance Company Name:

INDIA INT'L INS PTE LTD

Printed on 15 Sep 2020 15:04:21

Copyright © Land Transport Authority of Singapore 2018

Land Transport Authority

Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0008529-2

Print Date/Time : 23 May 2018 / 08:18:38

Receipt Date/Time : 23 May 2018 / 08:18:38

Tax Invoice/Receipt

Receipt No. : ITNET-00000-180523-000183

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 - SJK2556Z

As at 22 May 2018/09:00:00

Insurance Co: INDIA INTL INS PTE LTD

1 Insurance Enquiry - SJK2556Z

Enquiry Fee

20180523081643722655

7.00	0.49	7.49
------	------	------

Sub-Total

7.00	0.49	7.49
------	------	------

Total Before Rounding

7.00	0.49	7.49
------	------	------

Rounding Difference

0.04

Total Amount Payable

7.45

Paid By

xxxxxxxxxxxx8482

Credit Card:
Visa/MasterCard

7.45

Total

7.45

Cash Change

0.00

Tendered Amount

7.45

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.

TEK SOON MOTOR REPAIR & SPRAY PAINTING

AUTOBAY @ KAKI BUKIT, 1 KAKI BUKIT AVENUE 6, #01-28,
SINGAPORE 417883

EMAIL: teksoonmotor@gmail.com
REG NO. 252083/00-L

Name : Anad s/o N Kanagasabai

Date : 30-Mar-20

Address : Blk 647 Pasir Ris Drive 10
#05-48
Singapore 510647

Final repair bill for Suzuki SX4 No. SJQ 622 Y

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

\$ 5,600.00

Dollars : Five Thousand Six Hundred Only

MC-COY

APPRAISER PTE LTD

No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417883
Tel: 6748 6653 Fax: 67471017 Registration No: 200723252D

Billing Name & Address

Anad s/o N Kanagasabai
Blk 647 Pasir Ris Drive 10
#05-48
Singapore 510647

Invoice No 18037-05/AY

Date 5 Jun 2018

Vehicle No : SJQ 622 Y

Model : Suzuki SX4

Item	Descriptions	Amount S\$
1	Date of inspection : <u>24 May 2018</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>145</u> copies	
3	Transportation Charges	
4	2nd Inspection & Final Inspection <div>Total</div>	<div>\$ 725.00</div>
SDLS : SEVEN HUNDRED AND TWENTY-FIVE 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 6653 Fax: 67471017 Registration No: 200723252D

Report Reference : TP / 18037-05/AY / 2018

Date of Report : 5 Jun 2018

Anad s/o N Kanagasabai
Blk 647 Pasir Ris Drive 10
#05-48
Singapore 510647

THIRD PARTY SURVEY

ACCIDENT HAPPENED ON 18 May 2018

Workshop Address : Tek Soon Motor Repair & Spray Painting
No. 1 Kaki Bukit Ave 6
#01-93 AutoBay@Kaki Bukit
Singapore 417883

As per your instruction dated 24 May 2018 with regard to the above matter. We have carried out a physical inspection on the said vehicle SJQ 622 Y. We enclosed herewith our report and findings as follows:

1. VEHICLE PARTICULARS

Registration No	: SJQ 622 Y	Engine No	: M16A1462270
Model	: Suzuki SX4	Mileage	: 265690
Year / Capacity	: 2009/1586	Colour	: Grey
Chassis No	: JSAGYA21S00205619		

2. TYRES CONDITION

	<u>Size</u>	<u>Made</u>	<u>Balance</u>		<u>Rim</u>
FRONT O/S	: 205/60 R16	Toyo	5.00	mm	Sport
REAR O/S	: 205/60 R16	Toyo	5.00	mm	Sport
FRONT N/S	: 205/60 R16	Toyo	5.00	mm	Sport
REAR N/S	: 205/60 R16	Toyo	5.00	mm	Sport



No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417883
Tel: 6748 6653 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 rear portion(s). For more detail of the damages, please see photograph attached.

4. Estimated normal period of repair : 9 working days to complete.
5. Enclosed number of photograph : 145 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: **SJQ 622 Y**
 Report No: **TP/ 18037-05/AY / 2018**

SPARE PARTS

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
<u>List Items</u>				
1	Rear tailgate	Repair	\$ 651.95	\$
1	Rear tailgate 'SUZUKI' emblem	Damage	\$ 18.05	\$ 18.05
1	Rear tailgate 'SX4'	Damage	\$ 19.05	\$ 19.05
1	Rear tailgate 'SPORT' emblem	Damage	\$ 38.00	\$ 38.00
2	Rear taillamps	N/S Damage	\$ 371.20	\$ 185.60
1	Rear end panel	Damage	\$ 261.75	\$ 261.75
1	Rear end panel inner garnish	Damage	\$ 68.55	\$ 68.55
1	Rear bumper	Damage	\$ 456.85	\$ 456.85
1	Rear bumper outer centre garnish	Damage	\$ 131.35	\$ 131.35
2	Rear bumper reflectors	N/S Damage	\$ 37.90	\$ 189.50
1	Rear bumper reinforcement	Damage	\$ 188.95	\$ 188.95
2	Rear bumper side retainers	Necessary	\$ 52.40	\$ 52.40
1	Rear bumper side garnish	Damage	\$ 131.35	\$ 131.35
1	Rear exhaust silencer	Damage	\$ 323.60	\$ 323.60
2	Rear exhaust silencer mountings	Necessary	\$ 37.00	\$ 37.00
1	Rear n/s fender	Damage	\$ 390.60	\$ 390.60
1	Rear n/s fender outer arch garnish	Damage	\$ 148.25	\$ 148.25
1	Rear n/s fender air gate	Damage	\$ 16.55	\$ 16.55
1	Rear n/s fender air gate outer garnish	Damage	\$ 19.50	\$ 19.50
1	Rear n/s fender inner shield	Damage	\$ 89.95	\$ 89.95
1	Rear n/s fender quarter glass moulding	Necessary	\$ 45.50	\$ 45.50
1	Rear wheel hub c/w bearing	Damage	\$ 280.75	\$ 280.75
1	Rear shock absorber	Damage	\$ 187.25	\$ 187.25
1	Rear axle	Damage	\$ 866.25	\$ 866.25
			<u>\$ 4832.55</u>	<u>\$ 4146.60</u>
	Discount	15.0%	\$ 724.88	\$ 621.99
			<u>\$ 4107.67</u>	<u>\$ 3524.61</u>
<u>Special Nett Items</u>				
1	Rear bumper clip (1 set)	Necessary	\$ 30.00	\$ 30.00
1	Rear n/s fender quarter glass sealant	Necessary	\$ 50.00	\$ 20.00
2	Rear reverse sensor (1 set)	Damage	\$ 280.00	\$ 280.00
			<u>\$ 360.00</u>	<u>\$ 330.00</u>

Spare Parts Total \$ 4467.67 \$ 3854.61

Vehicle No: **SJQ 622 Y**
 Report No: **TP/ 18037-05/AY / 2018**

LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
	Spare Parts Total c/f	\$ 4467.67	\$ 3854.61
1	To remove and refit rear electrical wiring, replaced damaged lamps and test for proper functioning.	\$ 50.00	\$ 40.00
2	To remove and refit inner trims, inner garnishes, to facilitate the repairs.	\$ 180.00	\$ 120.00
3	To remove and refit rear bumper sensor.	\$ 120.00	\$ 80.00
4	To remove and refit rear undercarriage.	\$ 400.00	\$ 250.00
5	To check and re-adjust (Computerized) all wheel alignment.	\$ 100.00	\$ 60.00
6	To remove and refit quarter glass to facilitate the repairs.	\$ 120.00	\$ 60.00
7	To remove and refit, straighten and re-adjust exhaust pipe and replace rear exhaust silencer and mountings.	\$ 100.00	\$ 80.00
8	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.	\$ 1600.00	\$ 1100.00
9	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.	\$ 1600.00	\$ 1320.00
10	To apply undercoating on the repaired and replaced panels for rust protection.	\$ 150.00	\$ 90.00
Total		\$ 8887.67	\$ 7054.61

Vehicle No: **SJQ 622 Y**
Report No: **TP/ 18037-05/AY / 2018**

LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
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Total c/f \$ 8887.67 \$ 7054.61

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:

\$ **5600.00**

SDLS: FIVE THOUSAND SIX HUNDRED ONLY



Qualified Appraiser





