

VISION AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201500371E

Letter of Demand

Re : Accident involving my vehicle no. SMJ5457B and vehicle no. SCR 8318B on 15/10/2020 at 12:40 HRS PM/AM at/along Cross Junction of Sembawang Road and Yishun Avenue 7

We refer to the above matter.

Attached please find copies of the following for your kind perusal:

Vehicle Repair cost /Excess	\$ 6955.00
Vehicle Rental Fee for <u>8</u> days @ \$ <u>180.00</u> per day	\$ 1440.00
Loss of use for <u>-</u> days @ \$ <u>-</u> per day	\$ -
Police search fee/police report fee/LTA search fees	\$ 7.45
Others 3rd Party Report → \$ 29.00 Towing Fee → \$ 60.00	\$ 89.00
Total :	\$ 8491.45

Yours faithfully,

ABBY



ABBY

HP : 9856 4815

E-mail: visionautowork@gmail.com

VISION AUTOWORK PTE. LTD.

8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875

Tel: 6341 6789 Fax: 6341 6778

Co. Reg. No. : 201500371E

Authorisation To Act

I, Lim Yew Chung Raymond ("the third party claimant") of
BLK 589 Woodlands Drive 16 # 02-38 Singapore 730589
(address), owner of SMJ 5457B (vehicle no.) hereby
authorise Vision Autowork Pte. Ltd.
("the workshop") to act for me with respect to my claim for repair
costs and/or rental and/or loss of use ("claim") for my vehicle
no. SMJ 5457B that was damaged pursuant to the accident which
occurred on 15/10/2020 (date) at/along Cross Junction of Sembawang
Road and Yishun Avenue 7 (location) involving
vehicle no/s SCR 8318B
("the accident").

I further hereby authorise the workshop to settle my above mentioned claim in a
manner that they deem it fit and the workshop is further authorised to receive payment
further to settlement of my claim with payment cheque/s being made in favour of the
workshop.

I further authorise the workshop to execute and/or sign any documents/discharge
vouchers/agreements regarding my/our claim/case for my/our convenience.

I further acknowledge that any settlement the workshop may reach on my behalf is on
a without prejudice and without admission of liability basis in so far as any other
claim (s) whatsoever by me and/or the driver/owner/insurers of the other vehicle/s
arising from the aforesaid accident concerned.

Dated this 16 day of 10 (month) 20 20 (year)



Signed by "the third party claimant"



Signed by "the workshop"

VISION AUTOWORK PTE. LTD.
8 KAKI BUKIT AVENUE 4, #08-09, PREMIER @ KAKI BUKIT, S'PORE 415875
Tel: 6341 6789 Fax: 6341 6778
Co. Reg. No. : 201500371E

Letter of Authorisation & Indemnity

Accident involving motor vehicles no. SMJ 5457B and SCR 8318B on 15/10/2020
at/along Cross Junction of Sembawang Road and Yishun Avenue 7

1. I/We, the Owner of motor vehicle no. SMJ 5457B hereby instruct and authorise Vision Autowork Pte. Ltd. ("the workshop") to appoint an independent surveyor on my/our behalf to inspect my/our motor vehicle and to commence repairs immediately to the said motor vehicle in accordance with the report of the independent surveyor. Pending the outcome of my/our claim against the third party, I/we forthwith pay you the sum of \$ _____ being refundable deposit of the repair to my/our said vehicle.
2. You are further authorised to appoint solicitors on my/our behalf and to instruct the solicitors fully as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authorisation/approval/consent hereby to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem it fit.
4. My/Our solicitors shall also accept this as my/our irrevocable authority to pay the compensation monies from my/our third party claim directly to you after deducting their costs on a Solicitor and Client basis.
5. Upon resolving my/our claim, you are also hereby authorised to agree with my/our solicitors on the amount of their professional costs and disbursements incurred in thereby acting for me/us and to receive and make payment of the balance of the settlement sum on my/our behalf directly into your account.
6. I/We undertake and agree to fully co-operate with you and my/our solicitors to recover my claim successfully and also hereby consent and authorise you to instruct my/our solicitors to commence legal proceedings and to take all necessary steps to recover the claim from the negligent party where necessary.
7. I/we also hereby instruct and authorise you to deduct directly from the claim monies received from the third party all outstanding balances that are still owing to you, namely the balance of repair costs and rental of substitute vehicles.
8. In the event that I/we am/are required to attend at my/our solicitor's office for purposes of giving my/our further instructions on the accident matter, to sign court documents and to attend Court hearings in connection with my/our claim, I/we shall render my/our full co-operation to my/our solicitors.
9. In the event that my/our claim against the third party and/or his insurers is not successful at any stage of the recovery of my/our claim procedure including court proceedings, if any, and/or cannot be proceeded with and/or if any Judgement or settlement is not honoured or satisfied by the third party and/or the third party and/or his insurers make an offer to pay less than the amount claimed by you for whatever reasons, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred and to also indemnify you in respect of my/our solicitor's costs and disbursements thereby incurred on my/our behalf or to pay you the difference in amount, as the case may be.
10. I/we shall keep you informed of any correspondences and/or summons that I may receive due to this action agreeing to pay or receive any monies due to this claim.

Dated this 16 day of 10 2020

Signature of vehicle owner

Name - Lim Yew Chung Raymond

IC/UEN No : S7223817F

(Company stamp, if applicable)

Address : BLK 589 Woodlands

Drive 16 #02-38 S (730589)

Tel : 9844 9566

Witnessed by :

Abby

VISION AUTOWORK PTE.LTD.

8 Kaki Bukit Ave 4,
#08-09 Premier @ Kaki Bukit,
Singapore 415875

Tel : 6341 6789

Fax : 6341 6778

ROC / GST REG NO.: 201500371E

Email : visionautowork@gmail.com

TAX INVOICE

INVOICE No **TI V17285**

Date : 11.11.20

Vehicle Number : **SMJ5457B**

Bill To:

AXA INSURANCE SINGAPORE PTE LTD

8 SHENTON WAY
#27-01 AXA TOWER
SINGAPORE 068811

	DESCRIPTION	AMOUNT
	Carry out lump sum repair on accident vehicle corresponding to supply of spare parts, labour and spray painting charges	\$ 6,500.00
Sub Total		\$ 6,500.00
Add GST 7%		\$ 455.00
Total Amount		\$ 6,955.00

PAYMENT BY CHEQUE SHOULD BE CROSSED AND MADE PAYABLE TO
' VISION AUTOWORK PTE.LTD. '

PLEASE INDICATE THE INVOICE NO. ON THE REVERSE SIDE.

Issued By :



Co's stamp & Authorised Signature



CAR COVE
LEASING PTE LTD

CAR COVE LEASING PTE LTD

8 KAKI BUKIT AVENUE 4 PREMIER @KAKI BUKIT #02-54/55 SINGAPORE
415875

Tel: 63926608

INVOICE
RCB : 201602573M

LIM YEW CHUNG RAYMOND
BLK 589 WOODLANDS DRIVE 16 #02-38
SINGAPORE 730589
NRIC/UEN: S7223817F

REMARKS : RENTAL BILLING FROM 16/10/2020 TO 24/10/2020 (SMJ5457B)

- TOYOTA – WISH 1.8
- SLM9783D
- 8 DAYS - \$1,440

AMOUNT : S\$1,440.00

**ONE THOUSAND FOUR HUNDRED AND FOURTY DOLLARS AND ZERO
CENTS ONLY**

FOR CAR COVE LEASING PTE LTD

AUTHORISED SIGNATURE

CAR COVE LEASING PTE LTD

8 KAKI BUKIT AVENUE 4 PREMIER @KAKI BUKIT #02-54/55 SINGAPORE 415875

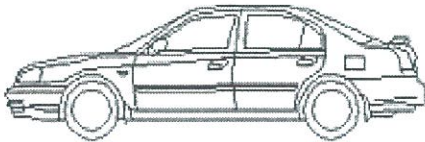
OFFICE
FAX
EMAIL

INVOICE :
DATE :

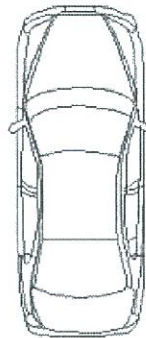
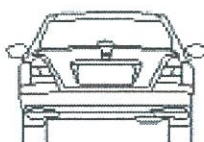
Company Name
Company Address
Hirer's Name
Hirer's Address
NRIC/Passport No.
Driving License No.
Local Contact

SIN DOB :

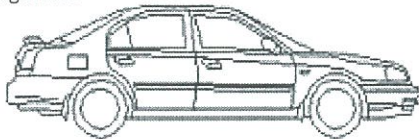
Left Side



Back



Right Side



Front



Top

Model *Toyota Wish*
Licence Plate *SLM9783D*
Colour *Maroon*

* Rates does not include Petrol.

Taken

E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

Return

E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

* Every 1/8 of petrol used is chargeable @ \$10 nett.

Remarks : D = Dent S = Scratches C = Chips R = Rust M = Missing

NTAL DATA

Start Date *16/10/20*
Return Date *24/10/20*

Start Time *3:30pm*
Return Time *8:00pm*

	RATES	QTY	TOTAL
Rental Amount	180	1	1440
Additional Driver			
Malaysia Usage *Destination :()			
Rental of GPS			
Rental of P-Plate			
Total Cost Of Rental			

Remarks:

REPLACEMENT FOR *SMJ5457B*

Raymond

Hirer's Signature



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

Print Date/Time : 16 Oct 2020 / 14:52:43

Receipt Date/Time : 16 Oct 2020 / 14:52:43

Tax Invoice/Receipt

Receipt No. : ITNET-00000-201016-002454

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SCR8318B As at 15 Oct 2020/12:40:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SCR8318B Enquiry Fee 20201016145159351245	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				
526471XXXXXX1359		eNETS Credit Card		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.



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-20-126434

Date of Request: 19/10/2020

Your Ref No: PURCHASE BY EMAIL

VISION AUTOWORK PTE LTD
8 KAKI BUKIT AVE 4,, #08-09 PREMIER @ KAKI BUKIT
SINGAPORE 415875

Dear Sir/Madam,

Your Vehicle No: SMJ5457B
Date of Accident: 15/10/2020
Place of Accident: SEMBAWANG RD
Involving Vehicle No: SCR8318B

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



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-20-126436

Date of Request: 19/10/2020

Your Ref No:

PURCHASE BY EMAIL

VISION AUTOWORK PTE LTD
8 KAKI BUKIT AVE 4,, #08-09 PREMIER @ KAKI BUKIT
SINGAPORE 415875

Dear Sir/Madam,

Date of Accident: 15/10/2020

Vehicle No: SMJ5457B

Place of Accident: JUNCT OF SEMBAWANG RD & YISHUN AVE 7

Involving Vehicle No: SCR8318B

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\$)
SCR8318B	JUNCT OF SEMBAWANG RD & YISHUN AVE 7	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.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque



PRINCE TOWING SERVICES

CO REG NO: 53405980E

PRINCETOWING.SERVICES@GMAIL.COM / +65 9222 7993



NO. 1510

DATE: 15/10/20

M/S

VEHICLE NO

FROM

TO

REMARKS

CASH

SMJ 5457 B

YISHUN AVE 4

8 PREMIER 08-09

MODEL

CALL TIME

TIME ARRIVAL

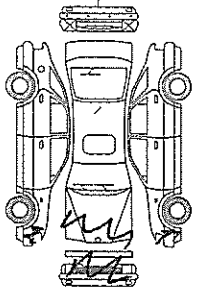
ARRIVAL WORKSHOP

STREAM

1820

1830

1830



- | | | | |
|---|---|---|-------------------------------------|
| <input type="checkbox"/> CHANGE TYRES/PATCH TYRES | <input checked="" type="checkbox"/> ACCIDENT | <input type="checkbox"/> USE CAR CARRIER | <input type="checkbox"/> LOADED |
| <input type="checkbox"/> BASEMENT/MULTI CARPARK | <input type="checkbox"/> LOW BODY KIT/LOW SPOILER | <input type="checkbox"/> OPEN DOOR | <input type="checkbox"/> JUMP START |
| <input type="checkbox"/> USING KING DOLLEY | <input type="checkbox"/> DISMANTLE BRAKE/SHAFT | <input type="checkbox"/> CRANE UP/WINCH OUT | |

AMOUNT S\$

60/-

RECEIVED BY

Jimmy

PRINCE TOWING

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	16/10/2020 18:07
Date Of Accident	15/10/2020 12:40
Exact Location Of Accident	JUNCT OF SEMBAWANG RD & YISHUN AVE 7
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ5457B
Insured/Policyholder	
Name Of Registered Owner	LIM YEW CHUNG RAYMOND
NRIC No	SXXXX817F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92389387
Alternative Phone No	OFFICE-92389387

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM
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	5118284535
Cover Note Number	

Driver

Name of Driver	LIM YEW KEONG EDMUND
NRIC No	SXXXX817F
Date Of Birth	30/11/1978
Occupation	INDOOR
Date Of Driving Pass	06/01/1997
Driving Experience	23 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92389387
Fax Number	
Contact Number	OFFICE-92389387
Email Address	EDCAPRIO97097@GMAIL.COM

Address	BLK 12A MARSILING LANE #26-59
Postcode	731012
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED

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	SCR8318B
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)

DETAILS OF INJURED PERSON 1

Name	LIM YEW KEONG EDMUND
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SMJ5457B
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any 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. 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:

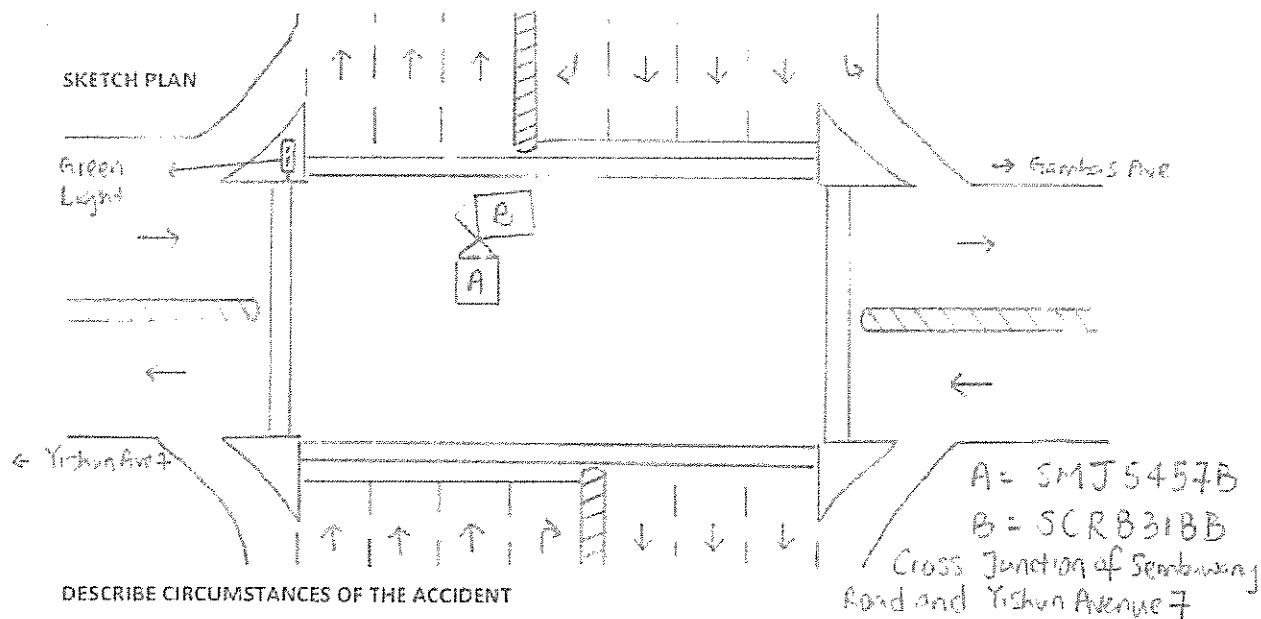
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "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/mail packages), and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be used 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 investigating, investigating, investigating, investigating, handling, regulatory, law enforcement and government agencies or authorities required for the investigation;
 - (ii) for complying with requirements under any applicable laws, regulations or orders.

Signature of Policyholder
Date & Time:

Signature of Authorised Driver
Date & Time:

Signature of Insurer's Representative
Name:
Date & Time:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

Report No T/20201016/7014

DECLARATION

[illegible][illegible]
$$\begin{aligned}
 & \text{where } \mu = \frac{1}{2} \left(\frac{1}{\alpha} + \frac{1}{\beta} \right), \quad \sigma = \frac{1}{2} \left(\frac{1}{\alpha} - \frac{1}{\beta} \right), \quad \text{and } \gamma = \frac{1}{2} \left(\frac{1}{\alpha} + \frac{1}{\beta} \right) \\
 & \text{and } \gamma = \frac{1}{2} \left(\frac{1}{\alpha} + \frac{1}{\beta} \right), \quad \sigma = \frac{1}{2} \left(\frac{1}{\alpha} - \frac{1}{\beta} \right), \quad \text{and } \gamma = \frac{1}{2} \left(\frac{1}{\alpha} + \frac{1}{\beta} \right) \\
 & \text{and } \gamma = \frac{1}{2} \left(\frac{1}{\alpha} + \frac{1}{\beta} \right), \quad \sigma = \frac{1}{2} \left(\frac{1}{\alpha} - \frac{1}{\beta} \right), \quad \text{and } \gamma = \frac{1}{2} \left(\frac{1}{\alpha} + \frac{1}{\beta} \right)
 \end{aligned}$$

$$Z_{\alpha} = \frac{1}{\sqrt{2\pi}} \int_{-\infty}^{\infty} e^{-\frac{1}{2}x^2} dx = 1$$

$$Z_{\alpha} = \frac{1}{\sqrt{2\pi}} \int_{-\infty}^{\infty} e^{-\frac{1}{2}x^2} dx = 1$$

$$Z_{\alpha} = \frac{1}{\sqrt{2\pi}} \int_{-\infty}^{\infty} e^{-\frac{1}{2}x^2} dx = 1$$

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20201016/7014

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20201016/7014

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/10/2020 15:21		Vide Report No.: L/20201015/0092		Station Diary No.:	
Informant's Particulars					
Name of Informant: LIM YEW KEONG, EDMUND			Address: 12A MARSILING LANE #26-59 SINGAPORE 731012		
ID Type / ID No.: NRIC NO / S7835722C			Contact No.: Home/Office: Mobile: 92389387		
Nationality: SINGAPORE CITIZEN			Email: EDCAPRIO97097@GMAIL.COM		
Sex: Male	Age: 41	Date of Birth: 30/11/1978	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Grabfood Delivery Rider			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident:				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/10/2020 12:40	Type of Location: X-Junction
Location: SEMBAWANG ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SCR8318B	Car	LEXUS			Slightly Damaged	3
SMJ5457B	Car	HONDA	Stream	White	Seriously Damaged	0

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20201016/7014

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20201016/7014

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SMJ5457B	NTUC Income Insurance Co-Operative Limited	5118284535	17/07/2020	24/07/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM YEW KEONG, EDMUND		ID No. S7835722C
Related Vehicle	SMJ5457B (Car)		Contact No. 92389387
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	15/10/2020		Date 15/10/2020
No. of Days granted Medical Leave	05	Degree of	Slight

Brief Details.

On 15.10.2020 at about 12:40 hours at Cross Junction of Sembawang Road and Yishun Avenue 7. I was stationary on lane 2 along Sembawang Road towards Upper Thomson Road and waiting for the traffic light to turn green. When the traffic light turned green in my favour and I started to move forward, suddenly vehicle (B) from opposite direction and tried to make a U-Turn without checking the traffic condition, hence collided onto the front portion of my vehicle (A).

Vehicle (A): SMJ 5457B
Vehicle (B): SCR 8318B

POLICE REPORT Pg. 1



SINGAPORE
POLICE FORCE



T/20201016/7014

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20201016/7014

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 16/10/2020 15:21
Officer In Charge Of Case: TP / TPHQ / HO JIEKANG, IVAN Contact No.: 65476170	Classification Of Case:

Authentication Stamp
NP168

SMJ 5457B (owner)



SINGAPORE ARMED FORCES IDENTITY CARD

Name

**LIM YEW CHUNG
RAYMOND**

NRIC No

S7223817F



This card is the property of the Singapore Armed Forces. Any person finding this card is requested to forward it without delay to Central Manpower Base or any Police Station.

GMA 1105 00650510YMB

00000050010453

NRIC No / Colour

S7223817F / PINK

Race

CHINESE

Blood Group

A (+)

Date Of Birth

13/07/1972

Country Of Birth

SINGAPORE

Sex

M

Service Status

REGULAR

Military Rank Status

WOSE

Address

**ADDRESS: APT BLK 589 WOODLANDS DRIVE 16 #02-38
SINGAPORE 730589 DATE: 23-07-2014 S7223817F**



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7835722C



Name

LIM YEW KEONG, EDMUND
(NING YAOCHANG)

甯 耀 倡

Race

CHINESE

Date of birth

30-11-1978

Sex

M

Country of birth

SINGAPORE

Sm15457B

driver

4 3 3 2 4 1 7



NRIC No. S7835722C



Date of issue

06-01-2009

APT BLK 12A MARSILING LANE #26-59
SINGAPORE 731012

NRIC No: S7835722C

Date: 06/08/2012


No: 7135165

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7835722C**
Name: **LIM YEW KEONG, EDMUND
(NING YAOCHANG, EDMUND)**

Birth Date: **30 Nov 1978**
Issue Date: **14 Jan 2003**

1000118234J



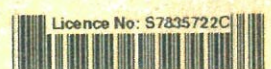
Sing 5457B
driver

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 Jan 1997

NP 428A

Licence No: S7835722C



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 511R284535

Cover : Third Party

1. Index mark and Registration Number of Vehicle

SMJ5457B

Chassis Number

RN61042252

2. Name of Policyholder

UM YEW CHUNG RAYMOND

3. Effective Date of Insurance

17 Jul 2020

4. Expiry Date of Insurance

24 Jul 2021

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

EXCESS (SECTION 1)

: N/A

EXCESS (SECTION 2)

: N/A

ADDITIONAL EXCESS

: N/A

UNNAMED DRIVER EXCESS

: N/A

REPAIR AT OWNER'S PREFERRED WORKSHOP

: NO

INSURE WITH COE

: N/A

NCD PROTECTION

: YES

PRIMARY DRIVER

: UM YEW CHUNG RAYMOND

NAMED DRIVER (1)

: UM YEW KEONG EDMUND

NAMED DRIVER (2)

: CHAN EE MEI JULIANNE

HIRE PURCHASE COMPANY

: N/A

SUM INSURED

: N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : KAREN LOW (00000527020)

Date of Issue : 17 Jul 2020 14:04 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive