

TRIPLE-T AUTOMOBILE

BLK 5 DEFU LANE 10 #01-574 SINGAPORE 539186

TEL: 6385 1171

BUS. REG. NO. 53176519M

15th January 2021

Our Ref: CL20083

Your Ref: SHB6235U

India International Insurance Pte Ltd

Motor Claims Department

64 Cecil Street

#04-05 IOB Building

Singapore 049711

Dear Sirs,

ACCIDENT INVOLVING SKV2830L AND SHB6235U ALONG TAMPINES AVE 5 ON 12.09.2020

We are the representative for Lim Ping Guan, whose vehicle registration number SKV2830L was damaged in the above accident.

We are instructed to claim for damages against your insured in connection with the above-captioned road traffic accident driven by your insured.

We are instructed that the accident was caused by your insured's negligence and/or management of motor vehicle registration SHB6235U. As a result of the accident, our client's vehicle was damaged and our client had been put to loss and expense, particulars of which are as follows:-

Cost of repairs	\$4,700.00
Loss of rental for 04 days @\$128.40	\$ 513.60
Survey fee	\$ 568.00
LTA search fee	<u>\$ 7.45</u>
	<u>\$5,789.05</u>

Enclosed are the supporting documents for your perusal:-

GIA

LTA search

Repair bill

Kindly let us have your payment of \$5,789.05 in our workshop's name within the next 14 days.

Please do not hesitate to contact our Ms Tan at 9838 8224 or email motor@iaconsultingsg.com should you have any queries on your matter. We thank you for your kind attention and appreciate your quick remittance.

Yours faithfully,

End.

Our reference: 21-7068
Date: 8/12/2020

INVOICE NO. 7068

Lim Ping Guan
c/o Triple-T Automobile
Blk 6 Defu Lane 10
#01- 556
Singapore 539187

Registration No. **SKV2830L**

We enclose our fee note for your kind attention, which remains payable irrespective of the outcome of this case.

S/No.	Description of Services Provided	Qty	Amount
1	Being vehicle damage assessment report, inspection, photographs, transport and miscellaneous.	1	\$568.00
Total amount			<u>\$ 568.00</u>

Please kindly cross all cheques made payable to " Impact Analysis Consultant".

We thank you in anticipation for your prompt payment.



L.L. Tan (Ms)
Principal Consultant

Subsidiaries of Impact Analysis Consultant:

• Impact Analysis Consulting Pte Ltd • Impact Analysis Academy Pte Ltd • IA Racking Solutions Pte Ltd
• IA Accounting & Consultancy Pte Ltd • Infoknights International Services (Philippines) • IABN Pte Ltd
www.iaconsultingsg.com

Our reference: 21-7068

Date: 8/12/2020

c/o Triple-T Automobile
Blk 6 Defu Lane 10
#01- 556
Singapore 539187

Dear Sirs

RE: Road Traffic Accident on 12/9/2020
Lim Ping Guan

In accordance with your instructions received in this office on 30/11/2020, we made arrangements to examine the vehicle on 30/11/2020 at above-mentioned address. The following data was recorded:

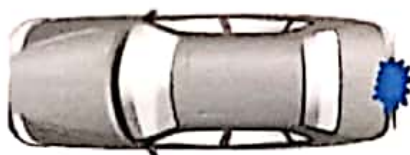
Vehicle details

Make	Toyota	Registration	SKV2830L
Model	Harrier	Chassis	ZSU600052118
Colour	White	Gearbox	Auto
Odometer	75619km	Paintwork	Good
Steering	Good	Brakes	Good
Condition	Good		

Tyre Depths

Front left	235/55R18	85% Michelin
Front right	235/55R18	85% Michelin
Rear left	235/55R18	85% Michelin
Rear right	235/55R18	85% Michelin

Impact Direction & Area of Damage:



Status	REPAIRABLE
Magnitude	Medium
Legal status	Unroadworthy

Following our examination of the accident damage, we have calculated repair times and method, which are detailed on page 2 & 3. We would recommend a sum of \$4,700.00 and 6 working days for repair, which is sufficiently lower than the pre accident value to render the vehicle an economically and physically reliable proposition.

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Our reference 21-7068
Date 8/12/2020
Page 2

Section A: Damaged Parts Assessment

Part's Description	Qty	Condition As inspected	Repairer's Estimate	Our Adjustment
List Items:				
Rear bumper (original)	1	deformed/cut	1024.50	1024.50
Rear end panel	1	repair.respray	758.90	0.00
Rear exhaust pipe	1	rebuild	1425.50	0.00
Rear bumper sponge	1	damaged	112.50	112.50
Rear exhaust pipe headseal @\$185.00	2	grazed	370.00	370.00
Sub- Total costs			3691.40	1507.00
Percentage discount : 25%			922.85	376.75
Sub-Total costs for parts			2768.55	1130.25

Special Nett Items:

Rear bumper clips	set	necessary	55.00	55.00
Rear bumper lower (bodykit)	1	damaged	677.40	677.40
Rear bumper lower lid (bodykit)	1	holder torn	785.00	785.00
Rear bumper diffuser (bodykit)	1	damaged	845.80	845.80
Reverse sensor	1	malfunction	280.00	280.00
Sub-Total costs for parts			2643.20	2643.20

Parts Repair

*	*	*	0.00	0.00
Sub- Total costs			0.00	0.00
Total costs for parts			5411.75	3773.45

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Page 3

Section B: Labour Cost Calculation

	Hourly rate	Manhr. Req.	Total
To dismantle, replace, cut, weld, knock out dents to straighten accident parts as-mentioned on the 'Parts Repair' column inclusive of replacement parts.	\$ 48.00	14	\$ 672.00
Putty & Spray painting to adjacent panels. Job allowance. Paint / material. (front door, side skirt, bonnet, front bumper / lower lid, front fender)	Sub-contract work.		\$ 700.00
Apply rust proofing on the adjacent panels.	Sub-contract work.		\$ 50.00
Remove and rebuild exhaust system	\$ 45.00	2	\$ 90.00
Remove and replace rear reverse sensor & conduct distance safety setting	\$ 48.00	1.7	\$ 81.60
Specialist charges - Diagnostic fault code / reset			\$ 150.00
Wiring and bulb checking	\$ 48.00	0.5	\$ 24.00
Total labour cost			\$ 1,767.60

Manhour rate and the number of manhours required for each repairing task are formulated based on individual workshop's operating cost and in-house@ IA Research Guidelines respectively.

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Our reference 21-7068
Date 8/12/2020

Section C: Summary Table of Total Repair Cost

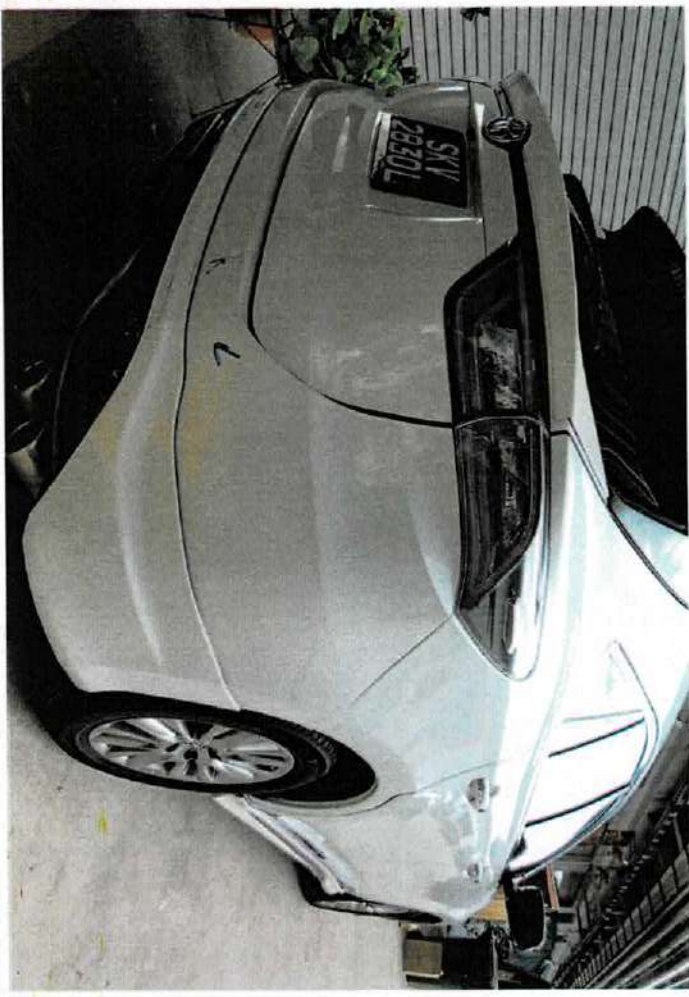
Description		Cost	
Damaged Parts Assessment (See section A)		\$3,773.45	
Further discount		\$754.69	
	20%		
Recommended cost of parts		\$3,018.76	(1)
Labour Cost Calculation (See section B)		\$1,767.60	(2)
Total Repair Cost (Round off to hundred)		\$4,700.00	(1) + (2)

We would recommend a sum of **\$4,700.00** and **6** working days for repair.
No further items will be approved without our expressed written agreement. Any significant additional items will be subject to a supplementary report.

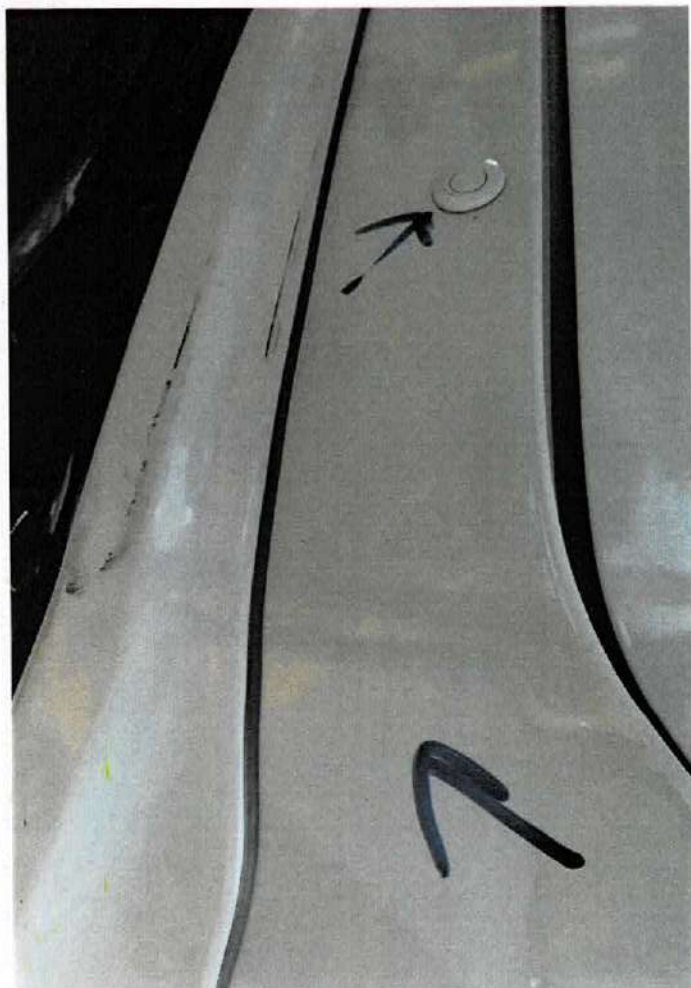
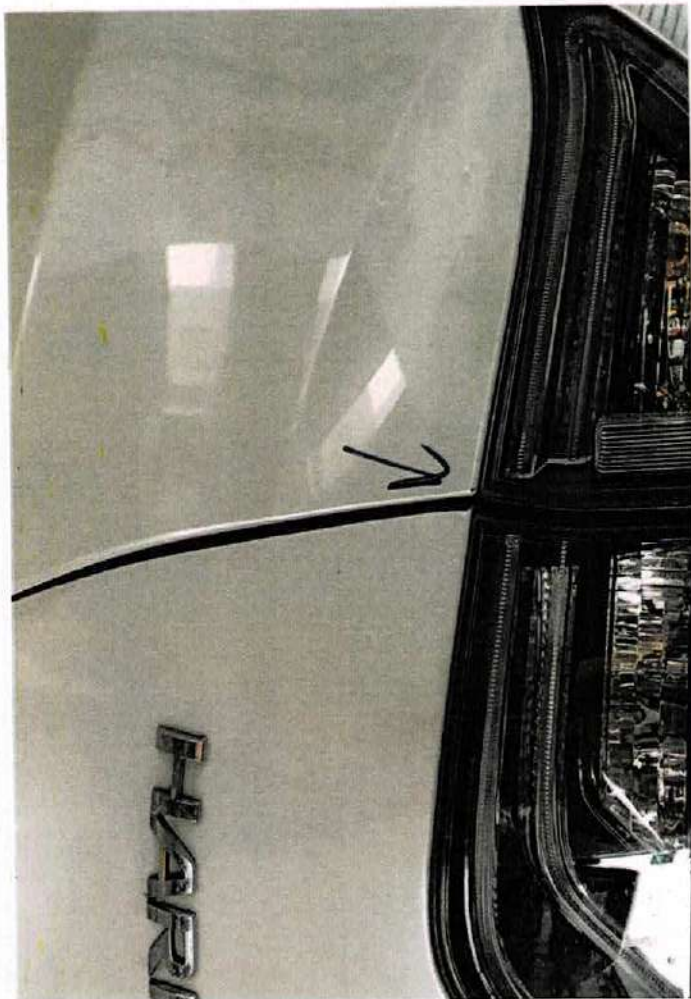
Mechanical Engineer, Accident Expert Witness, Licensed Appraiser (Automobile)
B.Eng. (Hons, NUS)
Diploma. Mechanical Engineering
NTC-2 Automovite Technology
Sr.MIES, Institution of Engineers, Singapore (#20100091)
MATAI, Maryland Association of Traffic Accident Investigators
IAARS, International Association of Accident Reconstruction Specialists
PMC of Singapore Business Advisors & Consultants Council
ACTA certified Trainer, Singapore
Enterprise Singapore - Recognised Certification for Management Consultants
IMI Professional Certificate In Vehicle Accident Damage Assessment (UK)

Subsidiaries of Impact Analysis Consultant:

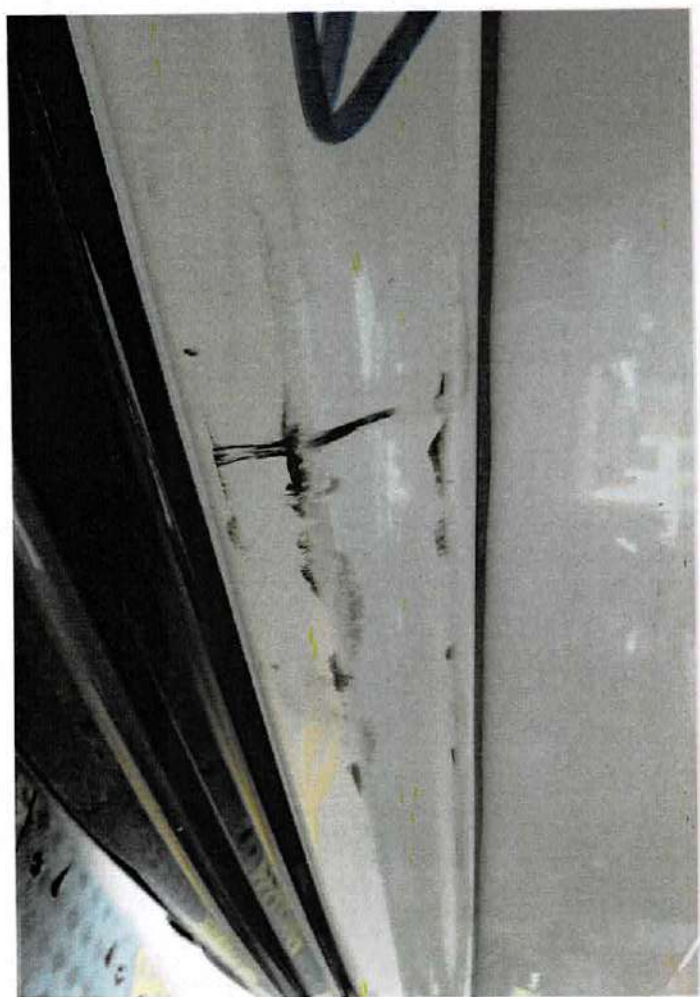
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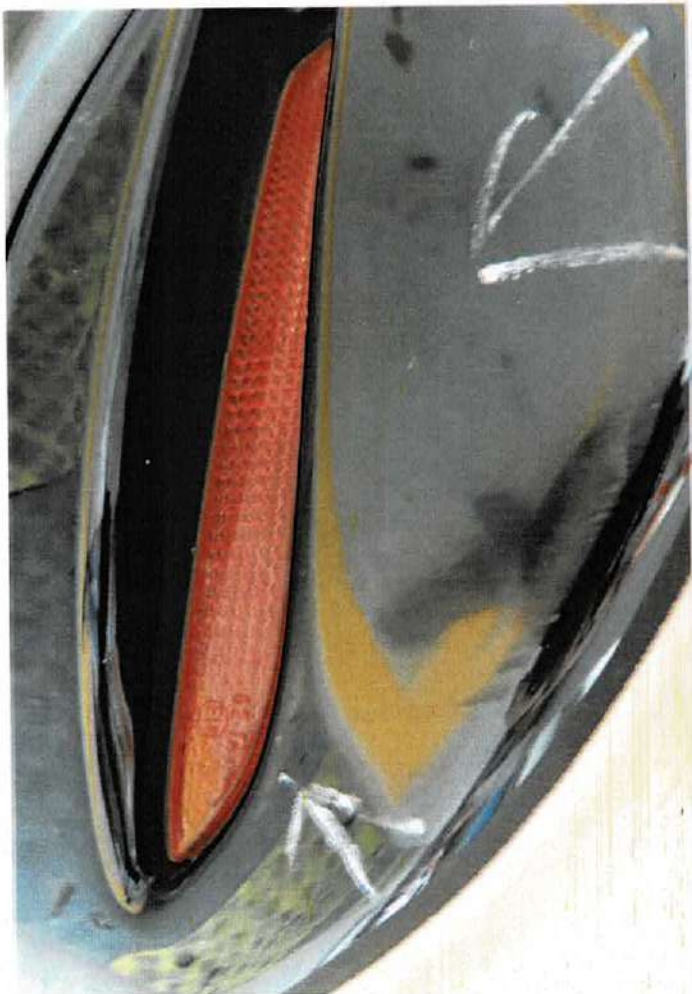
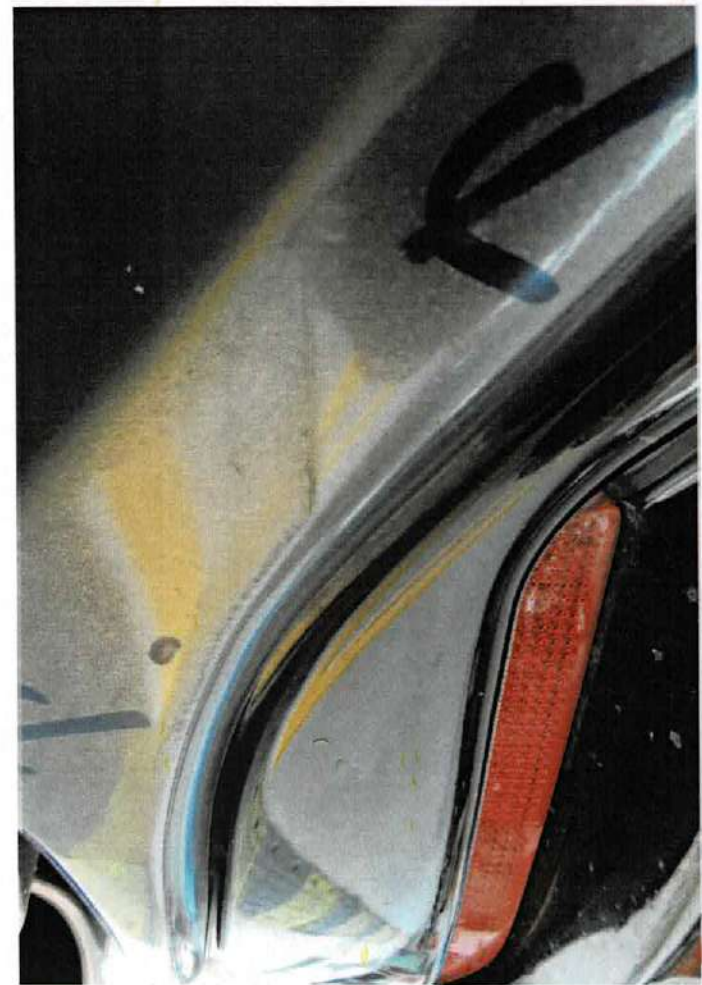


TOYOTA MOTOR CORPORATION JAPAN
 DBA-FAE
 MODEL 3ZR-FAE
 ENGINE ZSU60-0052118
 FRAME No. 070 FA43 A31
 COLOR K114-01A
 TRIM 456
 TIME/MILE
 1986 ml
 OPTION

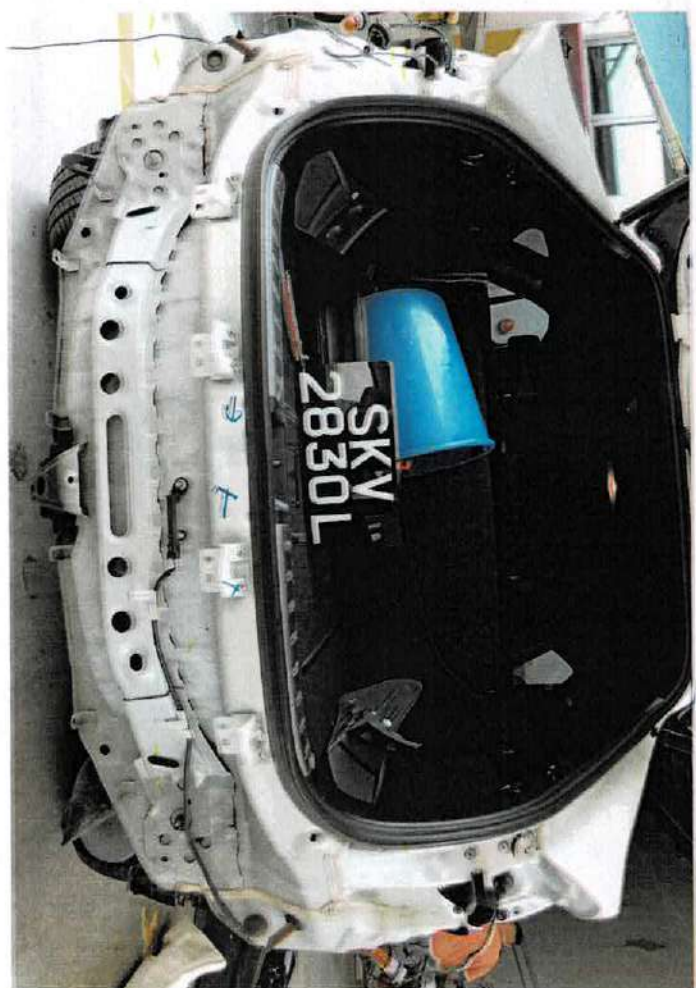
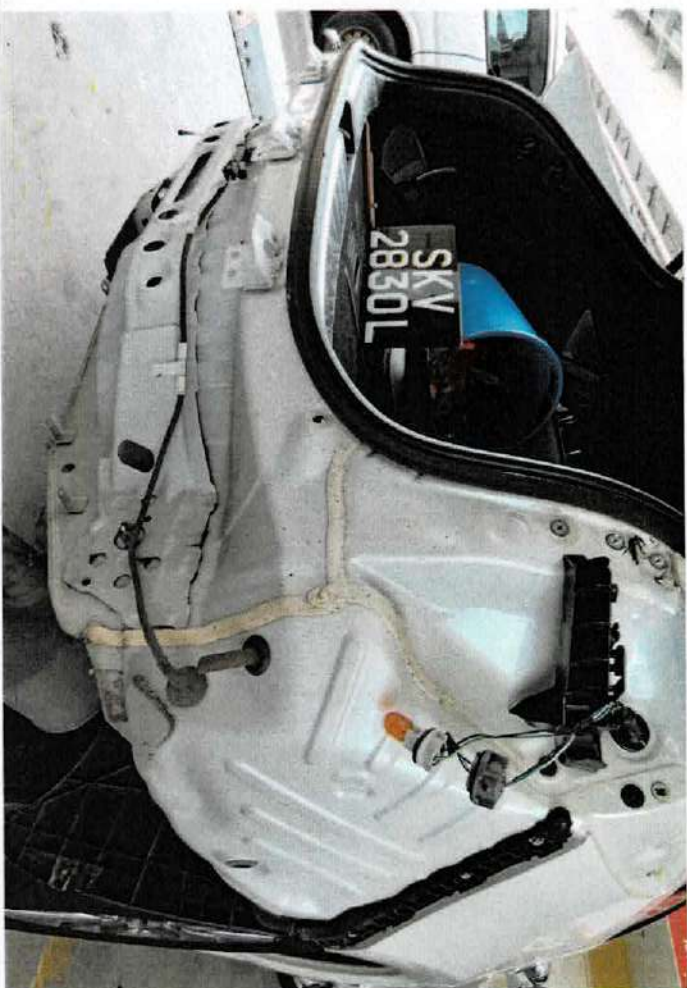
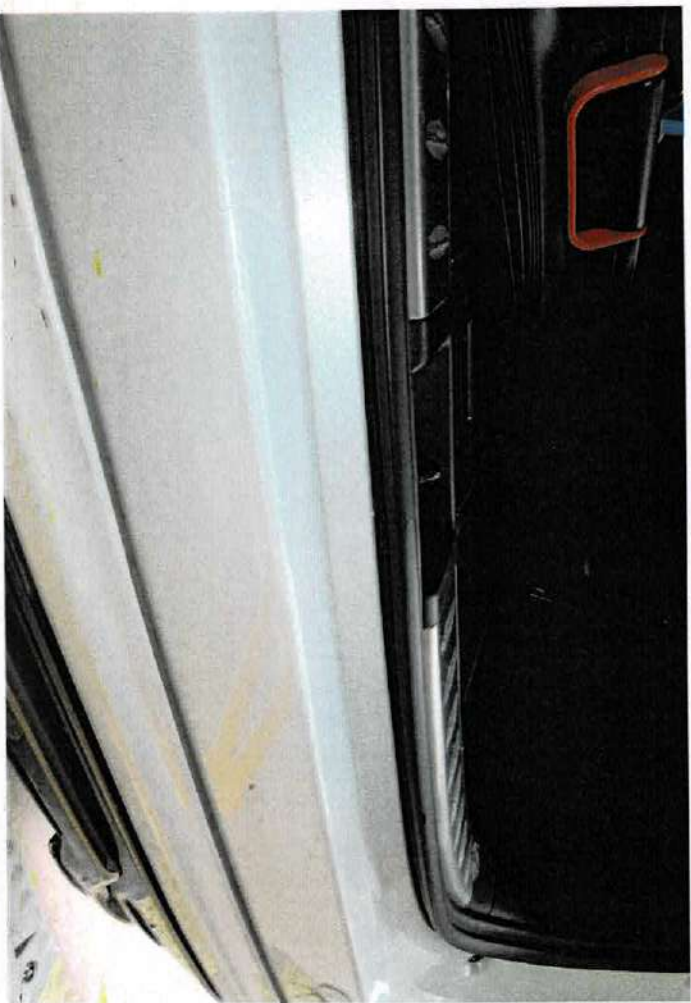


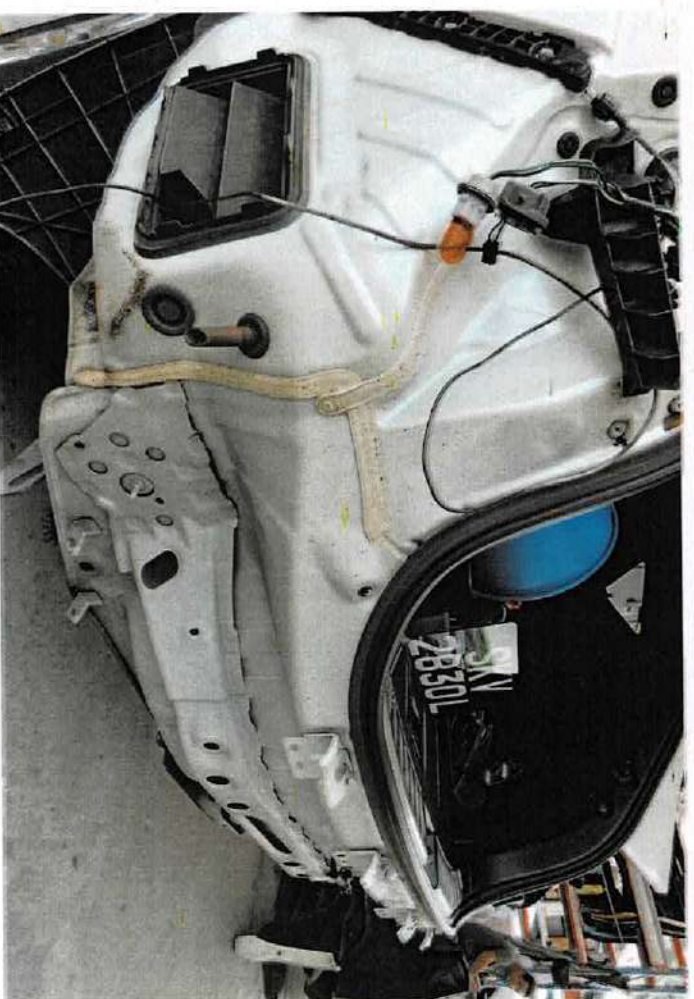
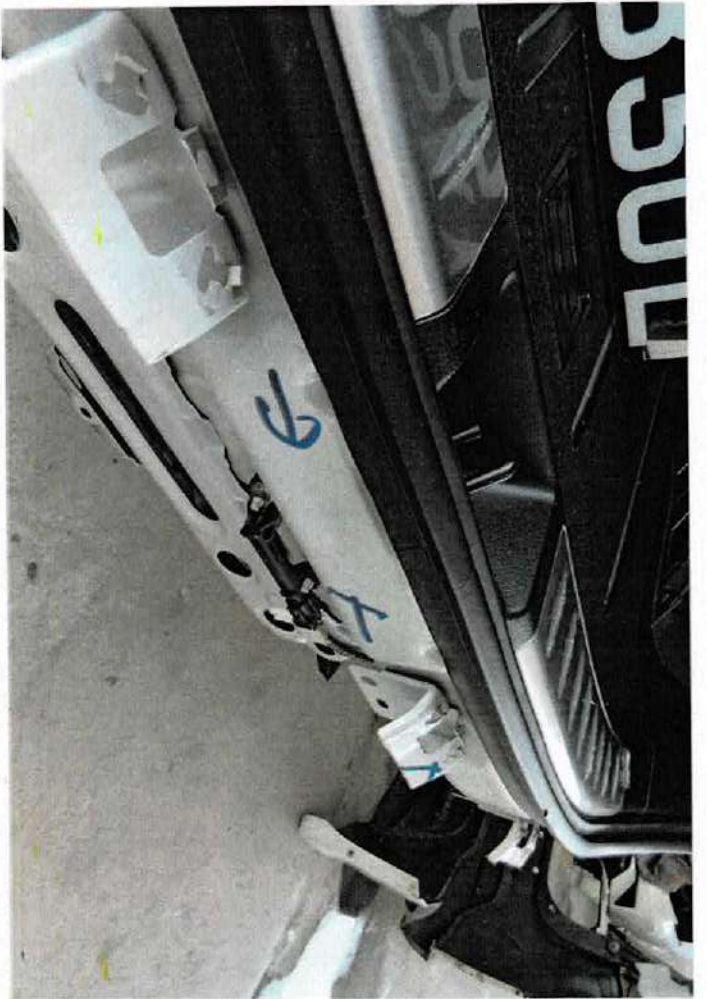


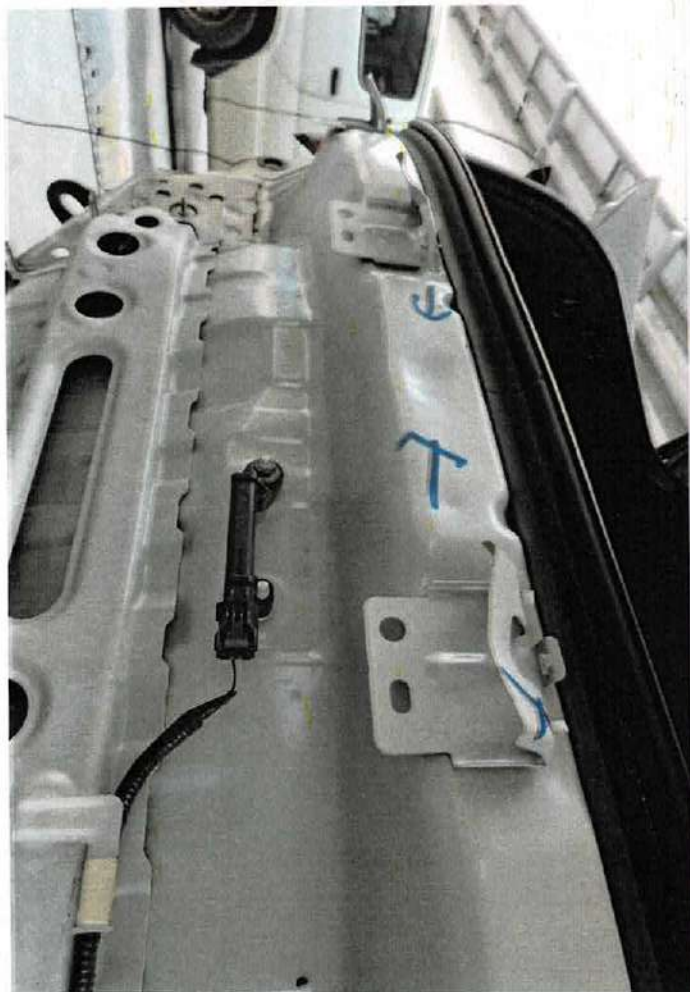


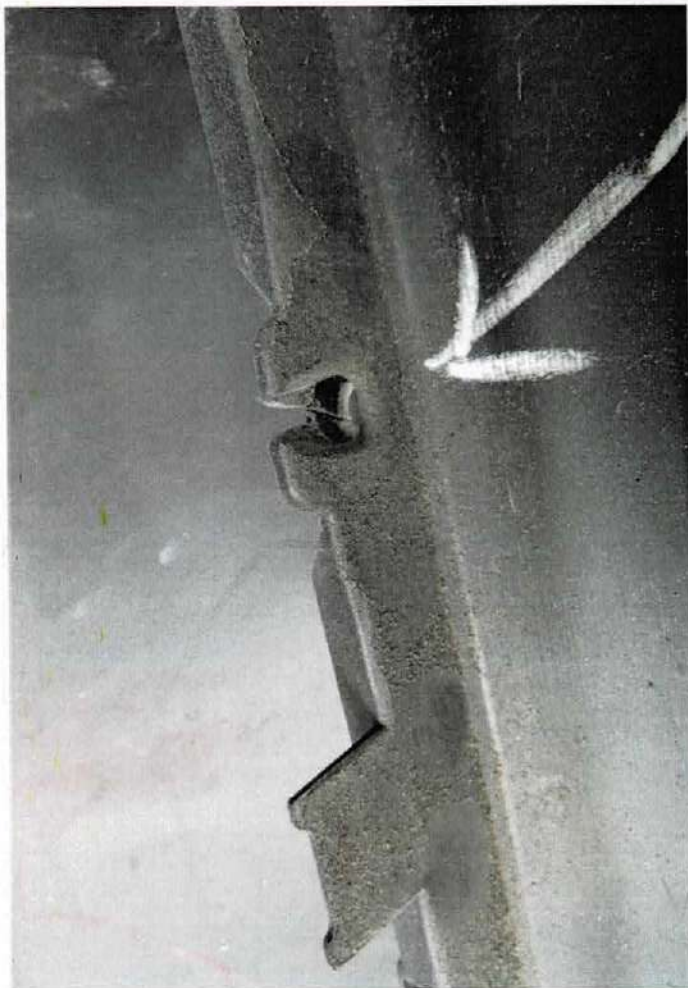




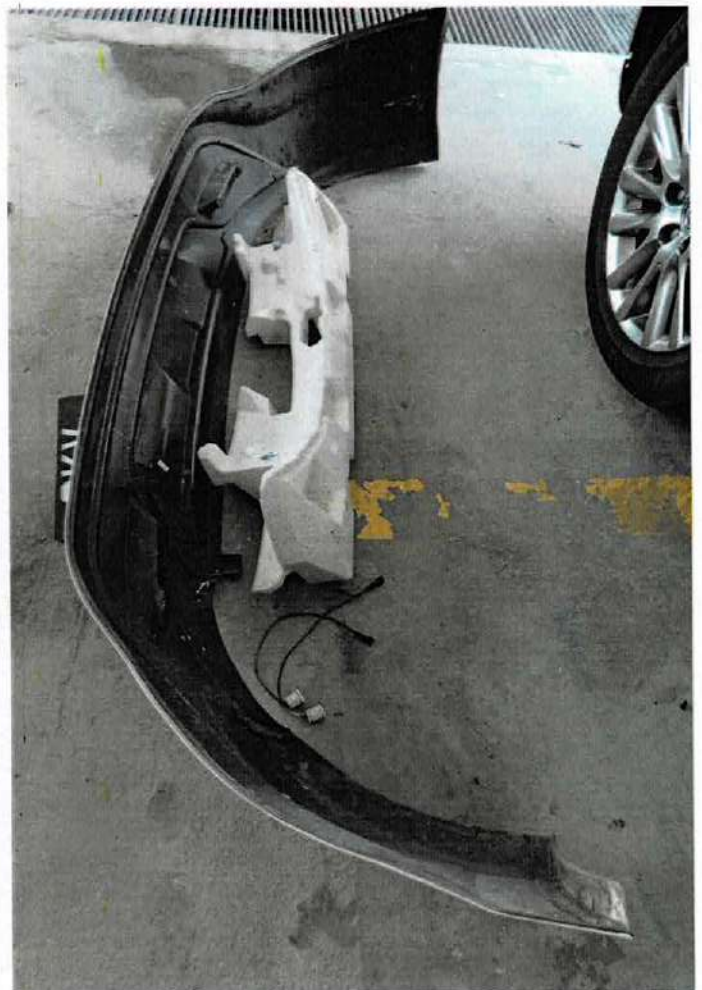




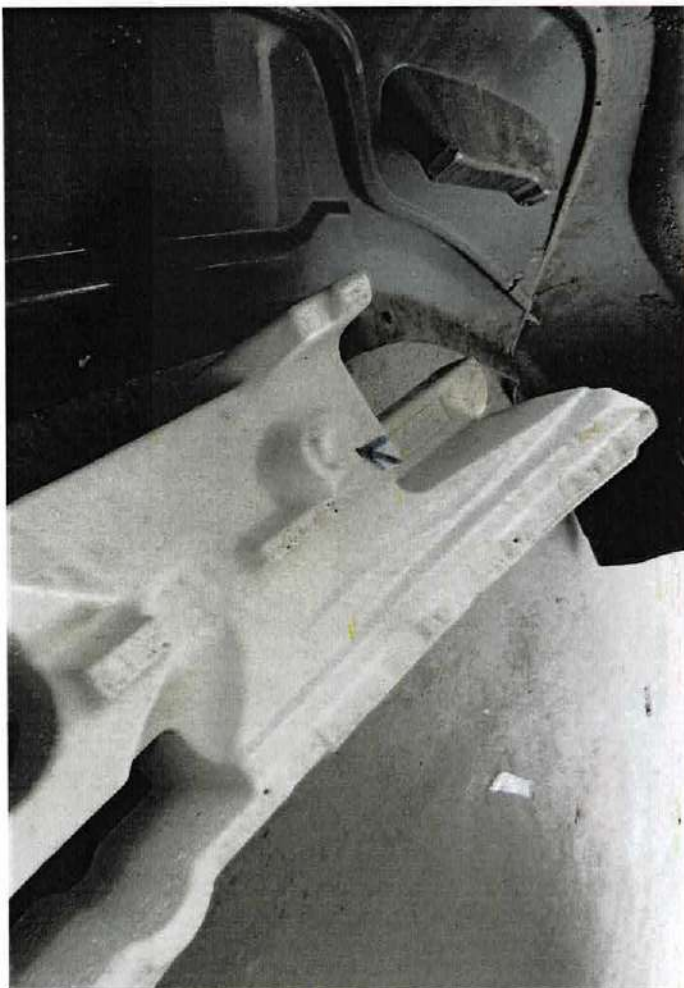














Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 21 Sep 2020 / 09:59:28

Receipt Date/Time : 21 Sep 2020 / 09:59:28

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200921-000600

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 - SHB6235U				
As at 12 Sep 2020/17:05:00				
Insurance Co: INDIA INTL INS PTE LTD				
1	Insurance Enquiry - SHB6235U Enquiry Fee 20200921095841219377	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				
20200921095849209		Direct Debit: eNETS Debit (Internet Banking)		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.

VEHICLE HIRING AGREEMENT

Workshop: **DIPL T**

HIRER'S PARTICULARS

Name (as in I/C): **Lim Ping Guan**
NRIC/Passport No: **[REDACTED]** Date of Birth: **23/10/1969**
Address: **282, TAMPINES ST 22 #04-286 S(520282)**
Age: **52**
Name & Address of Employer: **[REDACTED]**

Occupation: **[REDACTED]** Driving Exp: **31/8/2001**
Driving Licence No: **[REDACTED]** Passed Date: **31/8/2001**
D/L Type: Local/Int'l/Other: **[REDACTED]**

DRIVER'S PARTICULARS

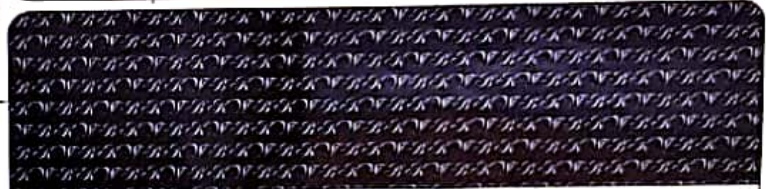
Name (as in I/C): **[REDACTED]**
NRIC/Passport No: **[REDACTED]** Date of Birth: **[REDACTED]**
Address: **[REDACTED]** Age: **[REDACTED]**
Occupation: **[REDACTED]** Driving Exp: **[REDACTED]** Yrs: **[REDACTED]**
Driving Licence No: **[REDACTED]** Passed / Expiry Date: **[REDACTED]**
D/L Type: Local/Int'l/Other: **[REDACTED]** Contact No: **[REDACTED]**

Hirer's Own Vehicle No: **SKV 2830** Replace Veh No: **[REDACTED]**
Loan Vehicle No: **SLE 3881 K** VR No: **[REDACTED]**
Make & Model: **H VEEZEL 1.5** Auto/Manual Group: **[REDACTED]**

CHARGES		\$	cts
Daily	4 day @ \$ 120	Per day	\$480
Weekly/Monthly	week @ \$	Per week/Monthly	
Others			
CDW/PAI	@ \$	Per day/Monthly	
Delivery/Collection Svc			
		GST 7%	\$33
		(A) SUB-TOTAL	\$513

Petrol Level & Surcharge	OUT	E	1/4	1/2	3/4	F
IN						

First **[REDACTED]** km FREE per day
Excess mileage is chargeable at **[REDACTED]** cents per km
GST
TOTAL CHARGES



NON WAIVER EXCESS (Subject to GST): **\$2000**
ACCESSORIES CHECK
☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge
☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre

Hirer's Signature: **[Signature]** Additional Driver's Signature: **[Signature]**
SINGAPORE Use Only

I have read and agree to the terms and condition on both sides of this 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 been made on the charge/credit card voucher. All information I have been given by BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 65 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be borne by the Hirer/the Authorized Driver.
- All vehicles are supplied with petrol and should be returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (For instance, in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

- legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace a replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair, between \$200 - \$400.
- The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.
- In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
- The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
- All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
- I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Date Out	Time Out	Mileage	Check By	Remarks	Hirer's/Driver Signature
01/11/2022		8166/5	[Signature]		[Signature]
Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"					
Date In	Time In	Mileage	Check By	Remarks	Hirer's/Driver Signature
12/2/22					[Signature]

TAX INVOICE

GST REG. NO.: 200106276D

DATE	INVOICE NO.
16-Dec-2020	A 42346

INVOICE TO.
LIM PING GUAN 282 TAMPINES ST 22 #04-286 SINGAPORE 520282

	VHA NO.	DUE DATE	VEH NO.
	A 42346	16-Dec-2020	SLE 3881 K
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 30 NOVEMBER 2020 TO 04 DECEMBER 2020 YOUR REF: SKV 2830 L	4	120.00	480.00
GST @ 7%			\$33.60
TOTAL			\$513.60

All cheques must be made payable to BKW Rent A Car Pte Ltd.
Please write the vehicle and invoice number on the reserve.

BKW Rent-A-Car Pte Ltd

Lower Delta Road #02-15 Cendex Centre (S) 169208 Tel: 6738 7777 Fax: 6738 6666

ACRA No: 200106276D GST Reg. No: 20-0106276-D Website: www.bkw.sg
A subsidiary of **BKW Automobile Pte Ltd**SINGAPORE 1990
SINGAPORE SME 100
INTERNATIONAL 100**bizSAFE**

TRIPLE-T AUTOMOBILE

BLK 5 DEFU LANE 10 #01-574 SINGAPORE 539186

TEL: 63851171 FAX: 63851141

INVOICE

To: Lim Ping Guan

Invoice No. : CL20083

Date : 22/12/2020

Vehicle No. : SKV2830L

No.	Description	Qty	Unit Price	Amount
1	REPAIR COST		\$ 4,700.00	\$ 4,700.00
Total:				\$ 4,700.00

Payment by cheque should be crossed and made payable to 'Triple-T Automobile'

Issued By:



Authorised Signature

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	14/09/2020 18:27
Date Of Accident	12/09/2020 17:05
Exact Location Of Accident	ALONG TAMPINES AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV2830L
Insured/Policyholder	
Name Of Registered Owner	LIM PING GUAN
NRIC No	SXXXX449B
Email Address	BRENDALIM100@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-86661616
Alternative Phone No	OFFICE-86661616

Vehicle Particulars

Manufacturer	TOYOTA
Model	HARRIER 2.0 PREMIUM AT AIRBAG 2WD
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA551209
Cover Note Number	05/09/2020-05/09/2021

Driver

Name of Driver	LIM PING GUAN
NRIC No	SXXXX449B
Date Of Birth	23/10/1969
Occupation	INDOOR
Date Of Driving Pass	31/08/2001
Driving Experience	19 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86661616
Fax Number	
Contact Number	OFFICE-86661616
Email Address	BRENDALIM100@YAHOO.COM.SG

Address 282 TAMPINES ST 22
04-286

Postcode

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 DRIZZLING

Road Surface WET

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? 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 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 POLICE REPORT

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: FOOTAGE WITH OWNER

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHB6235U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

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 PING GUAN

Approximate Age

Injuries Sustain

Injured person in which vehicle? SKV2830L

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

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 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



A - SKV 2830 L

B - ~~SHB 2830 E~~
SHB 6235 U

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

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

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/ID No.:



**SINGAPORE
POLICE FORCE**



T/20200912/7023

1 of 3

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

Report No. T/20200912/7023

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/09/2020 22:24		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LIM PING GUAN			Address: 282 TAMPINES STREET 22 #04-286 SINGAPORE 520282		
ID Type / ID No.: NRIC NO / S6937449B			Contact No.: Home/Office:		Mobile: 86661616
Nationality: SINGAPORE CITIZEN			Email: brendalim100@yahoo.com.sg		
Sex: Male	Age: 50	Date of Birth: 23/10/1969	Type of informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/09/2020 17:05	Type of Location: Bend
Location: TAMPINES AVENUE 5				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
SHB6235U	Car	HYUNDAI		Blue	Slightly Damaged	0
SKV2830L	Car	TOYOTA	Harrier		Slightly Damaged	0

POLICE REPORT Pg. 2



**SINGAPORE
POLICE FORCE**



T/20200912/7023

2 of 3

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

Report No. T/20200912/7023

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKV2830L	AXA INSURANCE SINGAPORE PTE LTD	GA551209	05/09/2020	05/09/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LIM PING GUAN		ID No.	S6937449B
Related Vehicle	SKV2830L (Car)		Contact No.	86661616
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	12/09/2020		Date	12/09/2020
No. of Days granted Medical Leave		05	Degree of	Serious

Brief Details.

I am moving and approaching the bend, i feel a big impact hitting my rear. The rear taxi(SHB6235U) hit my car. i felt my back sprain and neck discomfort and decided to proceed to the A&E at Mount Avernia. I was given 5 Days MC from the Doctor.

POLICE REPORT Pg. 3



SINGAPORE
POLICE FORCE



T/20200912/7023

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

3 of 3

Report No. T/20200912/7023

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPO /
JUREMAH BINTE AHMAD
Contact No.: 65476219

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
12/09/2020 22:24

Classification Of Case: