



Our Reference: SMD798G/7019316
Your Reference: XD4671G

By Email / Mail

26/04/2021

ALLIED WORLD ASSURANCE COMPANY LTD C/O LKK AUTO CONSULTANTS
Attn: Third Party Claim Department -

ACCIDENT INVOLVING SMD798G & XD4671G ON 30 Mar 2021.

Dear Officer,

We wish to inform you that the repairs to our client vehicle have been completed.

We hereby submit the claims as follows:

Details	Remarks	Amount (SGD)
Cost of Repairs		\$10,481.10
Loss Of Rental	\$160.50 x 5 days	\$802.50
Others	LTA search fees	\$7.45
TOTAL		\$11,291.05

Kindly let us have your offer to Christine.yow@wearnes.com

Your soonest reply is much appreciated. Thank you.



Yours faithfully
Christine Yow
D (65) 6430 4899
Wearnes Automotive Pte Ltd
Bodyshop and Paint Division
249 Alexandra Road
Singapore 159935

This is a computer generated printout, no signature is required.

(PAYMENT BREAKDOWN)

Vehicle No	:	SMD 7986	(Insd veh)	Model	:	VOLVO S60
	:	XJ 46716	(TP veh)			
Date of Accident	:	20/03/2021				

Global Sum Settlement	:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Liability	:	100 %	(Agreed/Assessed)

Repair Estimate	:	\$ 17096.55.		
Final Repair Cost	:	\$ 10481.10.		
Loss of Use	:	\$	days at \$	per day
Rental (if any)	:	\$ 802.50	5 days at \$ 160.80	(incl of GST) per day
Others	:	\$		
LTA SEARCH	:	\$ 745		
	:	\$		
	:	\$		
Final Settlement Sum	:	\$		

Remarks: _____

Payment Instruction: Payee's Breakdown		
1)	WARRANTS AUTOMOTIVE PTE LTD.	: \$
2)	ERIC AUC LEONG TOM	: \$ 745.
3)		: \$
4)		: \$

SERVICE TAX INVOICE

0 - R00003 SL: ALLIED WORLD ASSURANCE COMPANY LTD ALLIED WORLD ASSURANCE COMPANY LTD 60 ANSON ROAD #09-01 MAPLETREE ANSON SINGAPORE 079914	GST Reg.No:M28920628X Inv.No. . . : B&P 7019316 Page 1 Inv.date. . : 23/04/2021 WIP No. . . : 16926 Veh.In/Out: 19/04/2021 23/04/2021 *Tel.No. . . : 64230888 Reg.No. . . : SMD798G Reg.date . . : 31/07/2018 Mileage . . : 47,903 Chassis No: YV1FS40LDJ2469346
Closed by : Richmond Ho Svc Consultant : ACC Remarks : Mr Eric Toh Aik Keon	

Parts/Op.No Description	Mech Qty	Price	Disc%	Pkg	Amount	G
802 TO REPLACE REAR BOOT LID,REAR EMBLEM,REAR LH TAIL LAMP,REAR BUMPER,REAR LOWER SPOILER,ETC	0	1700.00	0		1,700.00	S
800 TO PUTTY SPRAY PAINT ON REAR BOOT LID,REAR BUMPER,REAR LOWER SPOILER,ETC	0	1500.00	0		1,500.00	S
802 TO TRANSFER REAR BOOT LID PART	0	250.00	0		250.00	S
280 TO CHECK WIRING INCLUDE RESETTING OF ALL ELECTRICAL MODUELS	0	510.00	0		510.00	S
039808145 BUMPER COVER REAR S6	1.0 EA	1746.00	10		1,571.40	S
039802591 TOW COVER REAR S60 1	1.0 EA	85.50	10		76.95	S
031395582 BOOT REAR S60 11-	1.0 EA	2659.10	10		2,393.19	S
030796589 EMBLEM 'VOLVO' REAR	1.0 EA	106.40	10		95.76	S
031333650 EMBLEM 'T5' XC60 S80	1.0 EA	101.80	10		91.62	S
031333641 EMBLEM 'S60' CH 1700	1.0 EA	97.20	10		87.48	S
031395931 TAILLAMP RH S60 11-	1.0 EA	447.80	10		403.02	S

SERVICE TAX INVOICE

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Closed by : Richmond Ho Svc Consultant : ACC Remarks : Mr Eric Toh Aik Keon	

Parts/Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
030796272	BOOT LAMP RH S60 11-	1.0 EA	236.90	10		213.21	S
036012843	ADHESIVE TUBE CHEMIC	1.0 EA	797.60	10		717.84	S
031407765	BUMPER INSTALLING MT	1.0 EA	96.50	10		86.85	S
000969197	BLIND RIVET 4.0*21 P	10.0 EA	4.10	10		36.90	S
000968547	BUMPER CLIP 8x8,5	10.0 EA	6.80	10		61.20	S

	Gross Total.	9,795.42
Labour Total		3,960.00
Parts Total		5,835.42
Package Total		0.00
	Net.....	9,795.42
	GST @ 7.0%	685.68
	Total.....	10,481.10
	Paid.....	0.00
	Please Pay..	10,481.10

GST: S=StdRated; O=OutOfScope; Z=ZeroRated
 Enquiries must be lodged within 14 days from the invoice date
 This is a computer generated invoice. No signature is required.

AUTHORIZATION TO ACT

I, ERIC ANK KFOUNT TOH ("the third party Claimant")
of 2 RIVERLACE LANE #10-05 (address),
owner of SMD 7986 (vehicle no.)
hereby authorize WARNS AUTOMOTIVE PH-170 ("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. SMD 7986 that was damaged
pursuant to the accident which occurred on 30/03/2021 (date) along
93 CALVANG WAY (location)
involving Vehicle No/s XDA671G ("The accident").

I further authorize the workshop to sign the discharge voucher on my behalf to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver / owner / insurers of the other vehicle/s is concerned.

Date this _____ day of _____ (month) 20 _____ (year)



Signed by "the third party claimant"



Signed by "the workshop"



Wearnes Automotive Pte. Ltd.
Co Reg No, 199501400R / GST Reg No, M28920628X
45 Leng Kee Road, Singapore 159103
Telephone: +65 6876 5063
www.wearnesleasing.com

ALLIED WORLD ASSURANCE COMPANY LTD
60 ANSON ROAD
#09-01 MAPLETREE ANSON
Singapore 079914

Tax Invoice

Inv No. : R2100523
Inv Date : 23 Apr 2021
Ref :
Terms : 90 Days

Rental Information

Agreement No. : RA21/00267
Billing Period : 19/04/2021 09:30 - 23/04/2021 15:45
Driver Name : Eric Toh Aik Keong

Car Information

Registration No. : SLL2427J
Make : MAZDA
Model : MAZDA6 4-DOOR
SEDAN 2.0L SP.6EAT

#	Description	Qty	UOM	Unit Price	Amt
1	Being Rental Payment for the Period Stated Above	5.00	Day	150.00	750.00

Remarks:

SMD798G_Allied World_Richmond (V)

Payment method:

Interbank GIRO and credit card payments: Deduction will take place from 5th to 9th of the month.

Cheque payments: All cheques should be crossed and made payable to "Wearnes Automotive Pte Ltd".

Bank Transfers:

Oversea-Chinese Banking Corporation Limited

Bank Code: 7339

Branch Code: 501

Bank Account Name: Wearnes Automotive Pte Ltd

Bank Account: 501-296727-001

SWIFT CODE: OCBCSGSG

Subtotal : S\$ 750.00
GST 7.0% : S\$ 52.50
Total : S\$ 802.50

Please note that late payment interest will be imposed at a rate of 2% per month commencing from the date that the payment is due, compounded daily, plus an administrative fee of S\$50.00 (excluding GST) each time.

This is a computer generated document. No signature is required.

Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 23 Mar 2021 / 15:43:22

Receipt Date/Time : 23 Mar 2021 / 15:43:06

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210323-002728

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 - XD4671G As at 20 Mar 2021/14:50:00 Insurance Co: ALLIED WORLD ASSURANCE COMPANY, LTD (SINGAPORE BRANCH)				
1	Insurance Enquiry - XD4671G Enquiry Fee 20210323154220638732	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				
	r12h3cv9		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.

SV0E213M0002 / VANTAGE AUTOMOTIVE LIMITED
ENTRY DATE & TIME: 22/03/2021 15:38 (SGT)
SUBMITTED BY: LIM LUO SHAN
VERSION: 1 (22/03/2021 15:38 (SGT))

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 Submission	22/03/2021 15:38 (SGT)
Date of Accident	20/03/2021 14:50 (SGT)
Exact Location of Accident	Near 93 Kallang Way, Singapore 349217
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMD798G

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ERIC AIK KEONG TOH
NRIC No	SXXXX728E
Email Address	ERICTOH79@GMAIL.COM
Mobile Phone No	(Phone) +65-97998845
Alternative Phone No	+65-97725842

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	S60
Variant	-
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2000

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10414442R00
Cover Note Number	-

DRIVER

Name of Driver	CHAN YAN QING DAPHNE
NRIC No	SXXXX854C

Date Of Birth	19/02/1983
Occupation	Indoor
Date Of Driving Pass	10/03/2003
Driving experience	18 YEARS
Gender	Female
Mobile Number	(Phone) +65-97725842
Alt. Phone Number	-
Email Address	CHANDAPHNE25@GMAIL.COM
Address	2 RIVERLALE LINK #10-03
Address complement	-
Postcode	545040
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

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 the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	XD4671G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LOKE CHEE HONG
NRIC No	GXXXX137W
Contact Number	(Phone) +65-82552337
Address	90539618

Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN

IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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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/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.

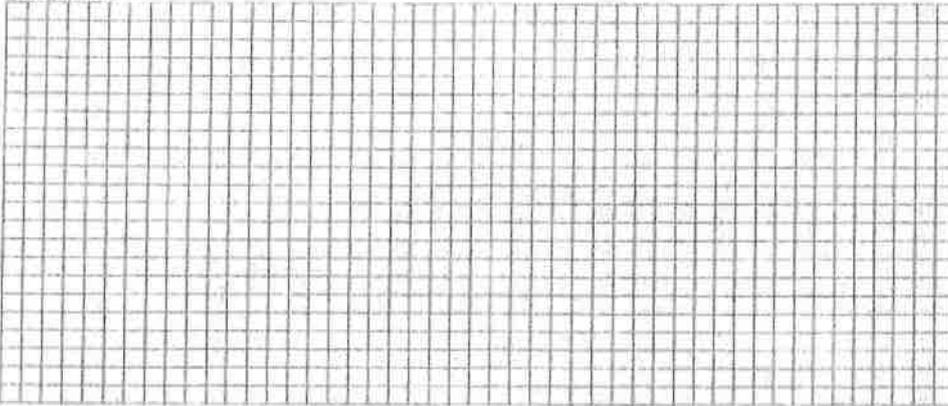
Policyholder's Signature
Date & Time:

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

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

REPORTING CENTRE PERSONNEL

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE NO: SMD 798CY

ACCIDENT DATE: 20/3/2021

CONTACT NUMBER: 97725842

ACCIDENT TIME: 14:50

EMAIL: chandaphne25@gmail.com

LOCATION: KPE/PIE towards Orchard Tuas ~~off~~

~~I was exiting~~

I exited KPE/PIE (Tuas) exit and filtered right to join the main road on PIE (heading towards Tuas). The truck vehicle XD 4671G hit the rear of my car.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIMS UNDER YOUR OWN POLICY.

PLEASE CHECK YOUR POLICY FOR MORE INFORMATION

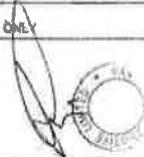
PLEASE STATE: CLAIM OWN POLICY CLAIM THIRD PARTY REPORTING ONLY

DECLARATION

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

Policyholder's Signature
Date & Time: 20/3/2021
15:24

Driver's Signature
(If driver is not the policyholder)
Date & Time: 22/3/2021
15:24



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

Richmond Ho

From: Goh, Stella <stella.goh@awac.com> on behalf of Motorsurvey <Motorsurvey@awac.com>
Sent: Tuesday, 6 April 2021 10:06 am
To: Richmond Ho; Motorsurvey
Cc: Goh, Stella
Subject: RE: TP Survey assignment for SMD798G DOA: 20/03/2021 Our ref: NSV2100039/SG

WITHOUT REJUDICE

Dear Richmond,

We refer to your email dated 31.03.2021.

Based on BOLA 27, we are agreeable with a direct settlement with your workshop, subjected to agreed quantum with our surveyor.

Please submit the supporting documents to quantify your client's claim.

Thank you.

Regards
Stella Goh
Claims Analyst
Claims Group
Global Markets

Allied World Assurance Company, Ltd
60 Anson Road 308-01 Mapletree Anson Singapore 079914
T: +65 6423 0857
F: +65 6423 0864
E: stella.goh@awac.com
W: www.awac.com

From: Richmond Ho <richmond.ho@wearnes.com>
Sent: Wednesday, 31 March 2021 10:25 am
To: Motorsurvey <Motorsurvey@awac.com>
Subject: RE: TP Survey assignment for SMD798G DOA: 20/03/2021 Our ref: NSV2100039/SG
Importance: High

CAUTION: External Email

Hi

Please advise if we can settle direct for this case

Richmond Ho
Senior Service Consultant
Body & Paint – Insurance Claim



Wearnes Automotive Pte Ltd
249 Alexandra Road Singapore 159935
D (65) 6430 4890 M (65) 9176 8543

www.wearnesauto.com richmond.ho@wearnes.com

*This email, including any attachment, is confidential and may also be privileged.
If you have received it in error, please notify us immediately by reply email and then delete this message from your system.
Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you.*

From: Hew, Lee Fong <LeeFong.Hew@awac.com> **On Behalf Of** Motorsurvey
Sent: Thursday, 25 March 2021 4:37 pm
To: 'assignments@lkkauto.com' <assignments@lkkauto.com>
Cc: 'sur@lkkauto.com' <sur@lkkauto.com>; Richmond Ho <richmond.ho@wearnes.com>
Subject: TP Survey assignment for SMD798G DOA: 20/03/2021 Our ref: NSV2100039/SG

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us do have consensus in the appointment of **Mr MARCUS CHUA** as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	SMD 798 G
Insured Vehicle	:	XD 4671 G
Policy Number	:	BVFCSB0006702015
Name of Workshop	:	WEARNES AUTOMOTIVE PTE LTD
Contact Number	:	6430 4890/ 9176 8543
Person to Contact	:	MR RICHMOND HO
Estimated Cost of repairs	:	\$ 17,096.55

Regards,
Claims Division

Copy to {Wearnes Automotive Pte Ltd} (Your Ref: SMD798G) via Email.

Note -

- (x)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, Ltd or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.