

Our Ref. : RSS/2103-7078 (TSA)(PD)

Your Ref. :

W : Natalie Ng

E : natalie_ng@rssolomon.com

20 May 2021



R. S. SOLOMON LLC
ADVOCATES & SOLICITORS

INDIA INTERNATIONAL INSURANCE PTE LTD

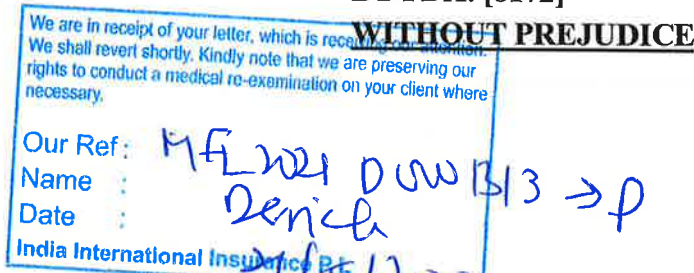
BY PDX: [8172]

64 Cecil Street

#04-05 IOB Building

Singapore 049711

Kind Attn: Motor Claim Dept



Dear Sirs,

ACCIDENT INVOLVING SLK 593E AND SLS 8247K ALONG PAN ISLAND EXPRESSWAY TOWARDS CHANGI ON 24TH MARCH 2021 AT ABOUT 0740 HRS

We act for Wang Jing ("our Client"), the owner and driver of vehicle registration no. SLK 593E, and refer to the above-captioned matter.

2. We are instructed that you are the insurers of vehicle registration no. SLS 8247K at the material time. We are further instructed that the aforesaid accident was caused solely by your insured driver's negligence in her/his driving, controlling and/or management of the said vehicle. As a result of the accident, our Client's vehicle was damaged and he has been put to loss and expense, particulars of which are as follows: -

(a) Cost of Repair	\$ 8,000.00
(b) Loss of use for 11 working days at \$80.00 per day (i.e. including two days for Pre-repair)	\$ 880.00
(c) Survey report fee	\$ 500.00
(d) GIA report & search fees	\$ 29.00
(e) LTA search fee	\$ 7.49
(f) Costs (with 7% GST)	\$ 856.00
(g) Transport, Xerox, postages & Other Incidentals (with 7% GST)	\$ 53.50
Total:	<u>\$ 10,325.99</u>

3. We enclose herewith copies of the following documents in support of our Client's claim: -

- (a) Final Repair Bill dated 5th April 2021 from TSA Transport;
- (b) Survey Report with Invoice No. 0321/TT883 dated 5th April 2021 from Aeon Auto Consultants LLP;
- (c) GIA report lodged by our Client;
- (d) GIA report lodged by your insured driver with payment advice for search and report fees;
- (e) LTA search result with payment advice; and

PAGE 1 OF 2

300 BEACH ROAD #12-02/03/04, THE CONCOURSE, SINGAPORE 199555 | UEN & GST REGISTRATION: 201726628D

T +65 6817 7498 | F +65 6292 2665 | E info@rssolomon.com | W www.rssolomon.com

WE DO NOT ACCEPT SERVICE OF COURT DOCUMENTS BY FAX OR EMAIL.

Our Ref. : RSS/2103-7078 (TSA)(PD)

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20 May 2021



R. S. SOLOMON LLC
ADVOCATES & SOLICITORS

(f) 92 coloured photographs depicting damages to our Client's vehicle registration No. SLK 593E.

4. **TAKE NOTICE** that unless we receive your acknowledgement of receipt to this letter and enclosures **within fourteen (14) days from the date hereof**, our Client will have no alternative but to commence proceedings against your insured and/or its driver without further notice to you.

Yours faithfully,



R. S. SOLOMON LLC
ADVOCATES & SOLICITORS

Encl.

Cc: Grab Rentals Pte Ltd
28 Sin Ming Lane
#01-143
Singapore 573972

By Certificate of Posting
Without Prejudice

Cc: Viknesvaran s/o Danabalan
Block 309 Jurong East Street 32
#02-286
Singapore 600309

By Certificate of Posting
Without Prejudice

Note to insured and/or the driver: No enclosures have been provided to you; should you require copies of the afore-mentioned enclosures, please contact our office.

TAKE NOTICE that if you have a counterclaim against our Client arising out of the above-captioned accident, you are required to send us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of you receiving this letter.

HP: 8181 2212

Our Reference:	HRV/SLK593E
Date:	05-Apr-2021
Vehicle Num:	SLK 593 E
Make/Model:	HONDA HRV 1.5 DX CVT
Chassis No.:	JHMRU1810GX201361
Engine No.:	L15B4531361
Accident Date:	24-Mar-2021

[illegible]



INVOICE

TO : WANG JING
C/O: TSA TRANSPORT
241 JALAN KAYU
SINGAPORE 799465

Invoice No.: 0321/TT883
Date: 05-Apr-2021

PARTICULARS

Vehicle Registration No.: SLK 593 E
Date of Loss: 24-Mar-2021
Date of Assessment: 24-Mar-2021

SERVICES

FEES

1. Assessment with report Photographs -
Including films, developing, storage and Transport. \$500.00

TOTAL \$500.00

SINGAPORE DOLLARS FIVE HUNDRED ONLY

We would appreciate your cheque crossed and made payable to:
"AEON AUTO CONSULTANTS LLP" with our invoice no. written on the back of the cheque.

AEON AUTO CONSULTANTS LLP



AEON AUTO CONSULTANTS LLP

50 Chin Swee Road #09-04 Thong Chai Building Singapore 169874
Telephone +65 97687958 Facsimile +65 68264112 Email amas@aeonac.com
Reg. No. LL0701273L (registered with limited liability)

AUTOMOBILE ASSESSMENT REPORT

TO: WANG JING
C/O: TSA TRANSPORT
241 JALAN KAYU
SINGAPORE 799465

Our Reference: 0321/TT883
Date: 05-Apr-2021

ASSESSMENT OF VEHICLE NO. SLK 593 E

DATE OF LOSS: 24-Mar-2021

We have carried out a physical assessment at JEC AUTO SERVICE,
1 Kaki Bukit Ave 6 #02-11 Autobay @ Kaki Bukit Singapore 417883, according to your instruction
on 24-Mar-2021 and are pleased to submit our report herewith.

1. VEHICLE PARTICULARS

Registration No.: SLK 593 E
Make & Model: HONDA HRV 1.5 DX CVT
Year of Registration: 2017
Engine Capacity: 1496
Chassis No.: JHMRU1810GX201361
Engine No.: L15B4531361
Colour: BEIGE
Mileage (km): 78958

2. VEHICLE CONDITION

Body Paint: GOOD
Steering: SERVICEABLE
Foot Brake: SERVICEABLE
Parking Brake: SERVICEABLE
Modification: NIL

3. TYRE PARTICULARS & CONDITION

Front
RH Make/Size/Thread: DUNLOP 215/60 R16 – 70%
LH Make/Size/Thread: DUNLOP 215/60 R16 – 70%

Rear
RH Make/Size/Thread: DUNLOP 215/60 R16 – 70%
LH Make/Size/Thread: DUNLOP 215/60 R16 – 70%

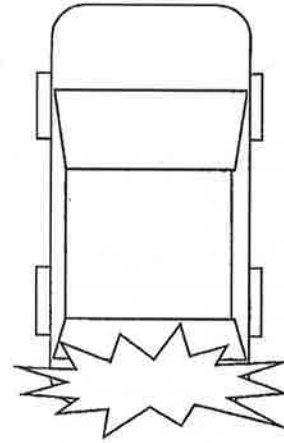
4. DESCRIPTION OF DAMAGE

At the time of the inspection, the vehicle sustained damages to the REAR portion.

5. REMARKS

Market Value: Na
Salvage Value: Na
Repair Limit: Na

Estimated Amount: \$12,013.96
Adjusted Amount: \$10,097.00
Final Adjusted Sum: \$8,000.00
Estimated Repair Days: 9 days
Date of Completion : 01-Apr-2021



Pursuant to your instruction, we have **NOT AUTHORISED** repair.

The assessment was conducted on a **"Without Prejudice"** basis.

If we are not notified of anything to the contrary within **14 days** from the date hereof, this report shall be treated as correct.

Disclaimer

This report is intended for the exclusive use of the addressee solely in relation to the loss occurrence in which the assessed vehicle is involved. No liability or responsibility whatsoever shall be held by Aeon Auto Consultants LLP for any reliance on this report by any third party.

ASSESSMENT REPORT FOR VEHICLE NO. SLK 593 E

PARTS (LIST ITEMS)

Qty	Description	Condition	Workshop's Estimate	Our Assessment
1	REAR TAILGATE	Bent	953.30	953.30
1	REAR TAILGATE 'VEZEL' EMBLEM	Necessary	56.20	56.20
2	REAR TAILGATE DAMPER L/R	Bent	360.00	360.00
2	REAR TAILGATE HINGES L/R	Bent	100.00	100.00
2	REAR TAILGATE WINDSCREEN INNER SEAL	Necessary	100.00	100.00
2	REAR TAILGATE WINDSCREEN MOULDING	Necessary	100.00	100.00
1	REAR TAILGATE WIPER MOTOR	Faulty	315.90	315.90
1	REAR TAILGATE OUTER GARNISH	Cracked	220.00	220.00
1	REAR TAILGATE OUTER GARNISH 'H' LOGO EMBLEM	Necessary	25.00	25.00
1	REAR TAILGATE OUTER LOCK SWITCH	Faulty	175.50	175.50
2	REAR TAILGATE NUMBER PLATE LAMP L/R	Cracked	51.60	51.60
2	REAR TAILGATE REFLECTOR L/R	Cracked	529.20	529.20
2	REAR TAILGATE REFLECTOR BACK RUBBER GASKET L/R	Necessary	77.00	77.00
1	REAR TAILGATE INNER PULL GARNISH	Bent	27.50	27.50
1	REAR TAILGATE INNER TRIM GARNISH	Cracked	153.40	153.40
1	REAR TAILGATE MECHANISM LOCK	Bent	180.00	180.00
1	REAR TAILGATE MECHANISM LOCK STRIKER	Bent	27.50	27.50
2	REAR TAILGATE RUBBER GUIDE STOPPER L/R	Bent	37.00	37.00
1	REAR TAILGATE WEATHER STRIP	Cut	96.80	96.80
2	REAR TAILLAMP L/R	Cracked	857.40	857.40
2	REAR FENDER INNER TRIM GARNISH L/R	Repair	590.00	-
1	REAR BUMPER	Cracked	762.70	762.70
2	REAR BUMPER REFLECTOR L/R	Necessary	282.20	282.20
4	REAR BUMPER REVERSE SENSOR	Faulty	670.00	670.00
2	REAR BUMPER SIDE L/R	Cracked	390.00	390.00
2	REAR BUMPER SIDE RETAINER L/R	Bent	46.00	46.00
2	REAR FENDER ARCH GARNISH L/R	Cracked	390.00	390.00
1	REAR FLOOR PANEL INNER TOP BOARD COVER	Repair	430.30	-
1	REAR FLOOR PANEL COMPARTMENT TRAY SPONGE	Repair	485.30	-
1	REAR END PANEL ANTENNA SENSOR	Faulty	60.10	60.10
1	REAR END PANEL BUZZLE SENSOR	Faulty	85.20	85.20
1	REAR END PANEL INNER TOP GARNISH	Cracked	98.00	98.00
1	REAR END PANEL	Repair	415.60	-
			9,148.70	7,227.50
Less 20% discount			1,829.74	1,445.50
Parts Total:			7,318.96	5,782.00

ASSESSMENT REPORT FOR VEHICLE NO. SLK 593 E

SPECIAL NETT ITEMS

1	REAR TAILGATE INNER TRIM GARNISH CLIPS - SET	Necessary	50.00	50.00
1	REAR TAILGATE OUTER GARNISH CLIPS - SET	Necessary	40.00	40.00
1	REAR TAILGATE REVERSE CAMERA	Faulty	800.00	800.00
1	REAR TAILGATE SPOILER CLIPS - SET	Necessary	40.00	40.00
1	REAR TAILGATE WINDSCREEN SEALANT	Necessary	100.00	100.00
1	REAR TAILGATE NUMBER PLATE	Bent	25.00	25.00
1	REAR TAILGATE NUMBER PLATE HOLDER	Cracked	50.00	50.00
2	REAR TAILLAMP CLIPS L/R - SET	Necessary	80.00	80.00
2	REAR FENDER ARCH GARNISH CLIPS L/R - SET	Necessary	100.00	100.00
1	REAR BUMPER CLIPS - SET	Necessary	50.00	50.00
1	REAR END PANEL INNER TOP GARNISH CLIPS - SET	Necessary	40.00	40.00
Special Nett Total :			1,375.00	1,375.00

LABOUR

S/N	Description	Workshop's Estimate	Our Assessment
1	To remove, reinstall electrical wiring harness, check lighting and rewire for parking sensor.	120.00	100.00
2	To remove, reinstall top trim upholstery, cushion seat, trim garnish, trim liner carpet.	100.00	80.00
3	To remove, reinstall tailgate windscreen.	180.00	160.00
4	To re-spray painting on the change bodyparts, repair portion, and where consistent to the accident.	1,200.00	1,000.00
5	To provide labour, workmanship to change the above damaged bodyparts, repair, re-construct and re-align body structure, body alignments and damaged consistent to the accident.	1,600.00	1,500.00
6	To apply anti-rust chemical on repaired and replaced panel.	120.00	100.00
Labour Total :		3,320.00	2,940.00
TOTAL (PARTS & LABOUR) \$		12,013.96	10,097.00

The workshop has agreed to undertake the repair cost of the final adjusted Sum contract amount is

\$8,000.00

(SINGAPORE DOLLARS EIGHT THOUSAND ONLY)



Amas Ong
Automobile Assessor

(Draft)

SL0321300005 / Lai Huat (Meng Kee) Motor Pte Ltd
ENTRY DATE & TIME -
SUBMITTED BY: [To Be Confirmed]
VERSION: 1 (24/03/2021 11:05 (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 Authorized 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	
Date of Accident	24/03/2021 07:40 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	Towards Changi
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK593E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Wang Jing
Passport No/FIN	GXXXX696P
Email Address	lixin091929@gmail.com
Mobile Phone No	(Phone) +65-90618210
Alternative Phone No	+65-90618210

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Hr-v
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	1500

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD21V00028/VPC/R00
Cover Note Number	-

DRIVER

Name of Driver	Wang Jing
Passport No/FIN	GXXXX696P

Vehicle Registration Number
SLS8247K
Vehicle Manufacturer
Mazda
Vehicle Model
Private car
Vehicle Variant
Vehicle Colour
Vehicle Category
Name of Driver
Contact Number
Address
Address complement

DETAILS OF OTHER VEHICLE PROPERTY 1

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Was there any audio recorded?

ATTACHMENTS

Please refer to sketch plan

CIRCUMSTANCES OF ACCIDENT

Was the accident reported to the police?
Was notice of intended Prosecution given?
If yes, against whom?

DETAILS OF POLICE ACTION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other material or property damaged?
Number of Passengers (including Driver)
Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

OTHER INFORMATION

Type of Accident
Weather Conditions
Road Surface
Collision - Head to Rear
Clear
Dry

GENERAL INFORMATION OF THE ACCIDENT

Insurance Company of Other Vehicle Owned by Driver
Vehicle Registration Number of Other Vehicle Owned by Driver
Does Driver Own Other Vehicles?
If No, Relationship of the Driver with the Insured
Is the driver the policyholder?

Date Of Birth
Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
150037
Yes
No
5 YEARS AND 8 MONTHS
21/07/2015
Outdoor
12/11/1983
(Draft)
Male
(Phone) +65-90618210
+65-90618210
lixin091929@gmail.com
37 Jalan Rumah Tinggi #03-415

(Draft)

Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

Describe Circumstances of the Accident

On 24/3/21 at about 7.40am, I was driving my vehicle SLK 593F along F16 towards Changi. The vehicle in front of me slowed down and I followed to slow down. Suddenly I felt a bang and realised that a vehicle no. SLS 8247K had hit onto the back of my vehicle.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time
Wang Jing 24/03/2021

Driver's Signature (if driver is not the policyholder) / Date & Time
Wang Jing 24/03/2021

Witnessed by Reporting Centre Personnel
26 MAR 2021



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	24/03/2021 14:48 (SGT)
Date of Accident	24/03/2021 07:40 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS8247K
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	GRAB RENTALS PTE LTD

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	3
Variant	-
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	D21MFL0000447
Cover Note Number	-

DRIVER

Name of Driver	VIKNESVARAN S/O DANABALAN
NRIC No	S8803843F
Address	BLK 309 JURONG EAST STREET 32 #02-286
Address complement	-
Postcode	600309
Does Driver Own Other Vehicles?	No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions

Collision - Head to Rear
Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Was anybody injured in the Accident?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210324/2013

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	SLK593E
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	WANG JING
Insurance Company Name	-

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GAA 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.
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 be 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 making 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 be 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 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 based outside of Singapore, for one or more of the above Purposes.

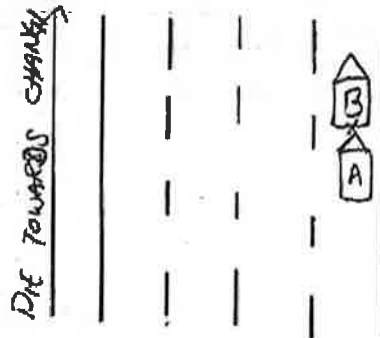
Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

Da Hashim
10:45 am



A - SLK 8247K
B - SLK 593E

Describe Circumstances of the Accident

Refer to Police Report T/20210824/2013

Declaration

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 *Vinos*

Witnessed by Reporting Centre
Personnel Det Hashim
10:45 am




















**SINGAPORE
POLICE FORCE**


T/20210324/2013

1 of 3

Report No. T/20210324/2013

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/03/2021 08:57	Vide Report No.:	Station Diary No.: 22
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Informant's Particulars

Name of Informant: VIKESVARAN S/O DANABALAN		Address: APT BLK 309 JURONG EAST STREET 32 #02-288 SINGAPORE 600309	
ID Type / ID No.: NRIC NO / S8803843F		Contact No.: Home/Office: Mobile: 85003843	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 33	Date of Birth: 04/02/1988	Type of Informant: Driver
Race: Sri Lankan		Language: English	Institution / School Name:
Occupation: Security Manager		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 24/03/2021 07:40	Type of Location: Expressway
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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
SLK593E	Car				Slightly Damaged	0
SLS8247K	Car				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20210324/2013

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

2 of 3

Report No. T/20210324/2013

CONTINUATION OF REPORT

Driver			
Name	Wang Jing	ID No.	G8283696P
Related Vehicle	SLK593E (Car)	Contact No.	90618210
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
Driver			
Name	VIKNESVARAN S/O DANABALAN	ID No.	S8803843F
Related Vehicle	SLS8247K (Car)	Contact No.	85003843
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24/03/2021 at about 0739hrs, I was driving my car SLS8247K along PIE towards Changi. On the flyover of Rifle Range Road near lamp post number 1297F, the cars in front of me started to apply their brakes and I also did so but I still collided into the car SLK593E ahead of me. There is no police or ambulance called in. I am informed to make this traffic accident report by Grab.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999



T/20210324/2013

3 of 3

Report No: T/20210324/2013

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:
F /
Sgt 3 YEO WEE KIAT

Signature Of Interpreter:
Not applicable

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

Authentication Stamp
NP162

Signature Of Informant:

Date/Time:
24/03/2021 08:57

Classification Of Case:



SIGNATURE





RECORD 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

Date of Request: 30/03/2021

Your Ref No: 1234

Dear Sir/Madam,

Date of Accident: 24/03/2021 00:00 (SGT)

Vehicle No: SLK593E

Place of Accident: PIE, Singapore

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

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLS8247K	PIE, Singapore	(29.00)	1	(27.10)
GST Amount				(1.90)
Total Amount Due (GST Inclusive)				(29.00)

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.

Enquire Vehicle's Insurance Particulars (As At 24 Mar 2021 / 07:40:00)

Vehicle No.:

SLS8247K

Make Description/Model:

MAZDA / MAZDA3 SEDAN 1.5 AT EU6

Insurance Company Name:

MSIG INSURANCE (SINGAPORE) PTE LTD

Insurance Company Name:

INDIA INT'L INS PTE LTD

Business Transaction Reference No.:

20210324121516492902

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

Printed on 24 Mar 2021 12:15:28

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Siaw Kin Yeow has successfully logged out.

Your last login date and time was 24 Mar 2021, 12:13:49.

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For security reasons, please CLEAR YOUR CACHE after each session.

Session Transaction History

S/No.	Asset Type	Asset ID	Asset Owner ID	Transaction Type	Transaction Amount(\$)	Log Date/Time
1	Vehicle	S.5527K	-	10.19 Enquire VEH Owner Info Others by Law Firm	749	24 Mar 2021 / 12:15:16

24 Mar 2021 / 12:15:16

18.19 Enquire Veh Owner Info (Others) by Law Firm

7.49

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