

泛舟修理汽車私人有限公司
PUAN CHEW MOTOR WORK PTE LTD

BLK K, PANDAN LOOP INDUSTRIAL ESTATE #01-12 SINGAPORE 128230
TEL: 6773 0073 FAX: 6773 0928
GST REGN NO: 19-8700614-G

Date: 11.8.2021

First Capital Insurance Ltd
36, Robinson Road #16-01
City House
Singapore 068877

Attn: Motor Claims Dept

Dear Sir / Mdm,

TP CLAIM AGAINST YOUR INSURED SHF 296 L

OUR CLIENT'S : MISS LEE CHER LING
VEH. REG. NO : SCF 954 E
MODEL : TOYOTA COROLLA ALTIS
ACCIDENT DATE : 10.8.2021

Below are the estimate for SCF 954 E

1	1 rear n/s door	\$ 1,248.50
2	1 rear n/s fender	\$ 1,149.90
		<u>\$ 2,398.40</u>
	Less 25%:	\$ 599.60
	Total:	<u>\$ 1,798.80</u>

Labour Charges

3	To transfer rear n/s door glass window, rear n/s door harness, rear n/s door lock, rear n/s door inner board trim.	\$ 180.00
4	To remove and replace damaged parts, knock out, cut and weld body panel parts where necessary, straighten and reshape, reposition and realign replacement parts to the original position.	\$ 980.00
5	Spray painting of accident sections.	\$ 880.00
	Grand Total:	<u>\$ 3,838.80</u>

PRICES QUOTED EXCLUDE GST CHARGES
PERSON TO CONTACT MR. LIM AT 97938181 / 96338181

We Specialised in Servicing and Repairing all kinds of Motor Vehicles, Panel Beating, Spray Painting

專修各種汽車 噴漆打馬呷 燒焊汽車服務。

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 11 Aug 2021 / 09:34:55

Receipt Date/Time : 11 Aug 2021 / 09:34:55

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210811-000532

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$)	GST Amount (\$)	Amount After GST (\$)
Result of Insurance Enquiry - SHF296L				
As at 10 Aug 2021/08:15:00				
Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - SHF296L Enquiry Fee 20210811093349930228	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				
	20210811093405145	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.

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	10/08/2021 17:39 (SGT)
Date of Accident	10/08/2021 08:15 (SGT)
Exact Location of Accident	New Bridge Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCF954E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE CHER LING
NRIC No	S1179206E
Email Address	yanying_sg@yahoo.co.uk
Mobile Phone No	(Phone) +65-96886809
Alternative Phone No	+65-85040231

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS
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	1598

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D21MTPV01006349
Cover Note Number	-

DRIVER

Name of Driver	TAN YANYING (CHEN YANYING)
NRIC No	S8522833A

Date Of Birth	09/08/1985
Occupation	Indoor
Date Of Driving Pass	28/07/2004
Driving experience	17 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-85040231
Alt. Phone Number	-
Email Address	yanying_sg@yahoo.co.uk
Address	3 CASSIA DRIVE
Address complement	-
Postcode	289697
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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 - Major/Minor Rd
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 vehicle 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?	Yes
Police Station Name	Bukit Merah East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002369999
Alt. Police Station Phone No	(Fax) +65-62204360
Police Station Address	391 New Bridge Road Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20210810/2009

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	SHF296L
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Taxi
Name of Driver	KIONG KUAN YEAN
NRIC No	S0211478Z
Contact Number	(Phone) +65-96648065
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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 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 G.A. 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/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.

[Signature]
10/8/2017
Policyholder's Signature / Date & Time

[Signature]
10/8/2017
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature]
10/8/2017
Witnessed by Reporting Centre Personnel

Sketch Plan




Handwritten notes: B) SCF 954E, B) SHF 296L

Describe Circumstances of the Accident


REFER TO POLICE REPORT 7/202-10810/2021

Declaration

We declare the foregoing particulars are true in every respect.

 10/8/21
Policyholder's Signature / Date & Time

 10/8/2021
Driver's Signature (If driver is not the policyholder) / Date & Time

 10/8/2021
Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20210810/2009

1 of 4

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

Report No. T/20210810/2009

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/08/2021 09:44	Vide Report No.:	Station Diary No.: 31
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Informant's Particulars

Name of Informant: TAN YANYING			Address: 3 CASSIA DRIVE SINGAPORE 289697	
ID Type / ID No.: NRIC NO / S8522833A			Contact No.: Home/Office: Mobile: 85040231	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 36	Date of Birth: 09/08/1985	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: CIVIL SERVANT			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 10/08/2021 08:15	Type of Location: Straight Road
Location: EU TONG SEN STREET				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

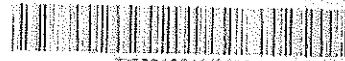
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SCF954E	Car				Slightly Damaged	0
SHF296L	Car				Slightly Damaged	0

Details of Person Involved

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



SINGAPORE
POLICE FORCE



T20210810/2009

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

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Report No. T20210810/2009

CONTINUATION OF REPORT

Driver			
Name	TAN YANYING		ID No. S6522833A
Related Vehicle	SCF954E (Car)		Contact No. 85040231
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
Driver			
Name	Kiong Kuan Yean		ID No. S0211478Z
Related Vehicle	SHF296L (Car)		Contact No. 96648085
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: N/L Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/08/2021 at about 0815hrs-I was turning right from Outram Road towards New bridge Road. I was the second car from the front and the traffic light was in my favour (right green arrow). As I was turning, I could see that there was a maroon SMRT Toyota Prius taxi (SHF296L) which was along Cantonment road on the left most lane. There was a double dotted white line at the slip road and he should have checked before proceeding.

As I was turning, I could see that he still has not passed the zebra crossing yet, I continued to make my way towards the left most lane and was already in the lane when I felt and heard the impact. We both stopped our cars immediately. This was when an Aelos Officer SGT (13574) Md Ibrahim Seman (97518124) saw what had happened and asked us to move forward so as not to obstruct the traffic. I then told him to help me inform the taxi driver to move forward as well and we moved forward and stopped just before the bus stop where people usually wait for their grab/taxi. We both did not have any passengers in our vehicles.

We then got off our respective vehicles and took pictures of the damages to both our vehicles as well as exchanged particulars. During the exchange, I said that he should not have come out, while he said that he had the right of way. He then said that it was ok and that it was recorded and we left it as that. As my in car camera was only front facing, I was unable to capture the accident, however it should have captured our relative positions as I was turning. I then asked him to confirm his particulars and since he did not look like he was injured and did not complain of any injuries, I then left. I am also not injured as far as I am aware of. I will monitor my condition to see if I would need to see a doctor.

IO can contact me for the photographs and in car camera footage if needed, and the Aelos officer was



**SINGAPORE
POLICE FORCE**



T/20210810/2009

Police Station Of Origin:
Bukit Merah East N.P.C
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Tel No: 1800-2369999

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Report No. T/20210810/2009

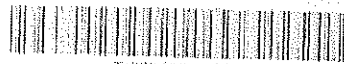
CONTINUATION OF REPORT

also informed that the IO may contact him to find out more about what had happened. I have no issues if the taxi driver is only warned for careless driving. I will be sending my car for repair and insurance claim.

I am not sure if the taxi driver's number is 96648065 or 96648063.



SINGAPORE
POLICE FORCE



T:20210810/2019

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

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Report No. T:20210810/2009

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 65474685 stating the report number as reference.

Signature Of Officer Recording The Report:

A /

Insp TAN YI HAO, SHAWN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

10/08/2021 09:44

Officer In Charge Of Case:

TP / GIA /

SI TAN JEOK LENG

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

SP166