

LAWRENCE LEE & CO

Advocates & Solicitors

李伟平律师楼

UEN: 53159236K

133 New Bridge Road #13-10
Chinatown Point Singapore 059413
tel: 6533 3680 fax: 6533 3689
email: info@lawrencelee.com.sg

Your ref: (Please advise)
Our ref: LWP/AHM/YWY/4713/21/sm

12 October 2021

This is a letter of claim issued pursuant to
the Personal-Injury Motor Accident
Practice Direction of the State Courts

Guan Chuan Engineering Construction Pte Ltd
28 Sungei Kadut Way
Singapore 729570

CERTIFICATE OF POSTING

Dear Sirs

ACCIDENT ALONG TPE TWDS SLE ON 26.06.21 INVOLVING FBH2411T & GZ9354A (OWNER/RIDER'S CLAIM)

We act for Mr Yu Wen Yao, owner/rider of the above m/cycle registration no. FBH2411T.

We are instructed to claim damages against you in connection with the above road accident involving our client's vehicle and m/van registration no. GZ9354A owned by you and driven by your servant/agent one Li Minjie at the material time.

We are instructed that the accident was caused by your servant/agent's negligent driving, management and/or control of your vehicle; for whose actions you are vicariously liable.

As a result of the accident, our client has suffered personal injuries and has been put to loss and expense. Our client's injuries are set out in the medical report annexed to this letter, particulars of which are as follows:

Injuries

- a. Multiple abrasion wounds as a result of road traffic accident.
 - Deep abrasion wounds over left knee
 - Superficial abrasion wounds over left dorsum of his forefoot and over his left palm

On a strictly without prejudice basis, we quantify our client's claim as follows:

Particulars

- | | | |
|----|---|-------------|
| 1. | General damages for pain and suffering
and loss of amenities | \$ 5,000.00 |
| 2. | Medical expenses | \$ 128.00 |

3.	Estimated transport expenses (2 trips x \$30 per trip)	\$ 60.00
4.	Estimated loss of earnings (27 days x \$58.33pd, from 27.06.21 to 23.07.21)	\$ 1,574.91
5.	Cost of repairs	\$ 2,100.00
6.	Loss of use (7 days x \$50pd)	\$ 350.00

Disbursements

7.	Survey fee	\$ 561.00
8.	LTA fee	\$ 7.49
9.	TP fee	\$ 14.00
10.	Medical report fee	\$ 110.00

For the purposes of our client's claim, we forward herewith copies of the following documents in the copy of this letter to your insurer:

1. LTA search on your vehicle with receipt;
2. Our client's LTA online enquiry and motorcycle insurance summary;
3. Our client's GIA and TP reports with tax invoice;
4. TP letter dated 06.07.21;
5. Repairer's invoice no. 06/tp/21 from Ah Hwa Motor Servicing dated 07.08.21;
6. Survey report with 101 color photographs and invoice no. POS0256/21 from Pro-Option Services;
7. Ordinary medical report from Sengkang General Hospital ("SKGH") dated 04.09.21 with payment receipt;
8. Medical tax invoice from SKGH dated 26.06.21;
9. Medical certificate from SKGH dated 26.06.21;
10. Medical certificate from National Healthcare Group Polyclinics ("NHGP") dated 03.07.21;
11. Emails between our client and SportSG Pool Allocation Team; &
12. Our client's Notice of Assessment for the year of assessment 2018, 2019 and 2020.


In compliance with the pre-action protocol under the State Courts' Practice Direction 38, we propose using the medical expert(s) named above as single joint expert(s).

Please note that:

- a. If you are insured and you wish to claim under your insurance policy, you should immediately pass this letter to your insurer.

- b. Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter. If you or your insurer wishes to have our client examined by your own medical expert, this should be stated in your acknowledgement of receipt.
- c. Should you fail to acknowledge receipt of this letter within 14 days, our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.
- d. If you have any witnesses, photographs of the accident scene, video and GIA/TP reports of the accident, please let us have them within 14 days of your receipt of this letter.
- e. If you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.
- f. In the event that your vehicle had been driven by someone not in the capacity as your servant/agent, please inform us in writing within 14 days otherwise we will name you as a defendant in the Writ that may be issued and you may be liable for legal costs.

Yours faithfully



LEE WEE PENG LAWRENCE
Paralegal: Ms Lim Suk Mei
Email: sukmei@lawrencelee.com.sg

Encs by email only

Cc Lonpac Insurance Bhd
300 Beach Road
#17-04/07 The Concourse
Singapore 199555
(Insurer of GZ9354A)
(Ref: 20/21/21/VC00/024706)

POST/EMAIL

Cc Client

Enquire Vehicle Owner Details (As At 26 Jun 2021 / 11:30:00)

Vehicle Owner Details

Owner ID Type:	Owner ID:
Company	198204782R
Owner Name:	Registered Address Type:
GUAN CHUAN ENGINEERING CONSTRUCTION PTE LTD	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	Registered Street Name:
28	SUNGEI KADUT WAY
Registered Unit No.:	Registered Building Name:
-	-
Registered Postal Code:	
729570	

Vehicle Insurance Details

Vehicle No.:	Make Description/Model:
GZ9354A	FIAT / DOBLO 1.3MJTD
Insurance Company Name:	
LONPAC INSURANCE BHD	



Thank you

Lee Wee Peng Lawrence has successfully logged out.

Your last login date and time was 13 Jul 2021, 12:04:35.

To return to ONE.MOTORING, please click [here](#)

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(S\$) 	Log Date/Time 
1	Vehicle	GZ9354A -		18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49	13 Jul 2021 / 12:05:48

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	650B
Vehicle Details	
Vehicle No.:	FBH2411T
Vehicle to be Exported:	Yes
Intended Deregistration Date:	13 Jul 2021
Vehicle Make:	HONDA
Vehicle Model:	CBF150
Primary Colour:	Black
Manufacturing Year:	2012
Engine No.:	KC11E2108131
Chassis No.:	LALKC11B0C3300441
Maximum Power Output:	-
Open Market Value:	\$1,466.00
Original Registration Date:	11 Apr 2013
First Registration Date:	11 Apr 2013
Transfer Count:	3
Actual ARF Paid:	\$220.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	10 Apr 2023
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$1,812.00
COE Rebate Amount:	\$315.00
Total Rebate Amount:	\$315.00

The information contained herein is correct as at 13 Jul 2021

OK



YOUR THIRD PARTY MOTORCYCLE INSURANCE SUMMARY

Please call **+65-6322-2072** for FWD Emergency Assistance
if Your Motorcycle breaks down or is involved in an accident.
All accidents must be reported within 24 hours or by the next working day of the incident
regardless of whether it will lead to a claim.

POLICY NUMBER : PNM2019-00005083-01

About this policy

Premium paid : S\$114.62
(Inclusive of GST)
Who is insured to ride: : You Only

Coverage start date : 11/04/2021
Coverage end date : 10/04/2022

About you (As the policyholder)

Your name : Yu Wen Yao
Address : 404 Yishun Avenue 6 05-1234 Singapore 760404
Email : libra_0033@yahoo.com
NRIC/FIN : S1741650B

Current no claims discount : 20%
Years of riding experience : >=3
Date of birth : 19/10/1966

Gender : Male
Mobile Number : 98313433
Certificate of merit : Yes

About your motorcycle

Motorcycle make and model : Honda CBF150
Motorcycle plate number : FBH2411T
Overseas Booster : No
Daily transport allowance : No
Issued on : 15/02/2021

Year of first registration : 2013
Authorised rider : No
Hospitalisation expenses due to accident : No

Khor Kee Eng
Chief Executive Officer
FWD Singapore Pte Ltd

Please refer to contract for specific terms, conditions
and exclusions of this policy.

Please immediately inform us at **+65-6820-8888**
or email us at contact.sg@fwd.com if any details in
this Motorcycle Insurance Summary needs to be changed.

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	06/07/2021 21:40 (SGT)
Date of Accident	26/06/2021 11:30 (SGT)
Exact Location of Accident	Punggol, Aft Punggol Rd, TPE, Singapore
Additional Location Information	TPE TOWARDS SLE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH2411T
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YU WEN YAO
NRIC No	SXXXX650B
Email Address	libra_0033@yahoo.com
Mobile Phone No	(Phone) +65-98313433
Alternative Phone No	+65-98313433

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Cbf150
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	Motorcycle
Transmission	Manual
CC	150

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	PNMC2019-00005083-01
Cover Note Number	-

DRIVER

Name of Driver	YU WEN YAO
NRIC No	SXXXX650B

Date Of Birth	19/10/1966
Occupation	Indoor
Date Of Driving Pass	29/12/2016
Driving experience	4 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98313433
Alt. Phone Number	+65-98313433
Email Address	libra_0033@yahoo.com
Address	404, YISHUN AVENUE 6
Address complement	#05-1234
Postcode	S760404
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Side Swipe
Weather Conditions	Raining
Road Surface	Wet

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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 26/06/2021 AT ABOUT 1130HRS, I WAS RIDING ALONG TPE TOWARDS SLE ON THE EXTREME RIGHT LANE. SUDDENLY, A YELLOW CORPORATE VAN WHICH WAS ON THE SECOND LAND HAD SWERVED TO SWITCH TO THE FIRST LANE AND HAD COLLIDED ONTO THE REAR LEFT OF MY MOTORCYCLE CAUSING ME TO LOSE BALANCE AND FALL. THE DRIVER OF THE SAID VAN NAMED LI MIN JIE, IC:S8673661F HAD STOPPED HIS VEHICLE TO ASSIST ME. AMBULANCE WAS CALLED AND I WAS CONVEYED TO SENGKANG GENERAL HOSPITAL TO GET MEDICAL TREATMENT FOR MY INJURIES. I WAS GIVEN SEVEN DAYS OF MEDICAL LEAVE. I AM LODGING THUIS REPORT FOR THE POLICE TO LOOK INTO THE MATTER. THAT IS ALL.

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GZ9354A
-----------------------------	---------

Vehicle Manufacturer	Fiat
Vehicle Model	Doblo
Vehicle Variant	-
Vehicle Colour	Yellow
Vehicle Category	Commercial vehicle
Name of Driver	LI MIN JIE
NRIC No	SXXXX661F
Contact Number	-
Address	783D, WOODLANDS RISE
Address complement	#12-17
Postcode	S734783
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	YU WEN YAO
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	LEFT KNEE AND FEET.
Injured person in which vehicle?	FBH2411T
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

WITNESS DETAILS

WITNESS 1

Name	ANDY CHUNG
Phone	(Phone) +65-94375091
Email	Sales@agw-metals.com


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.

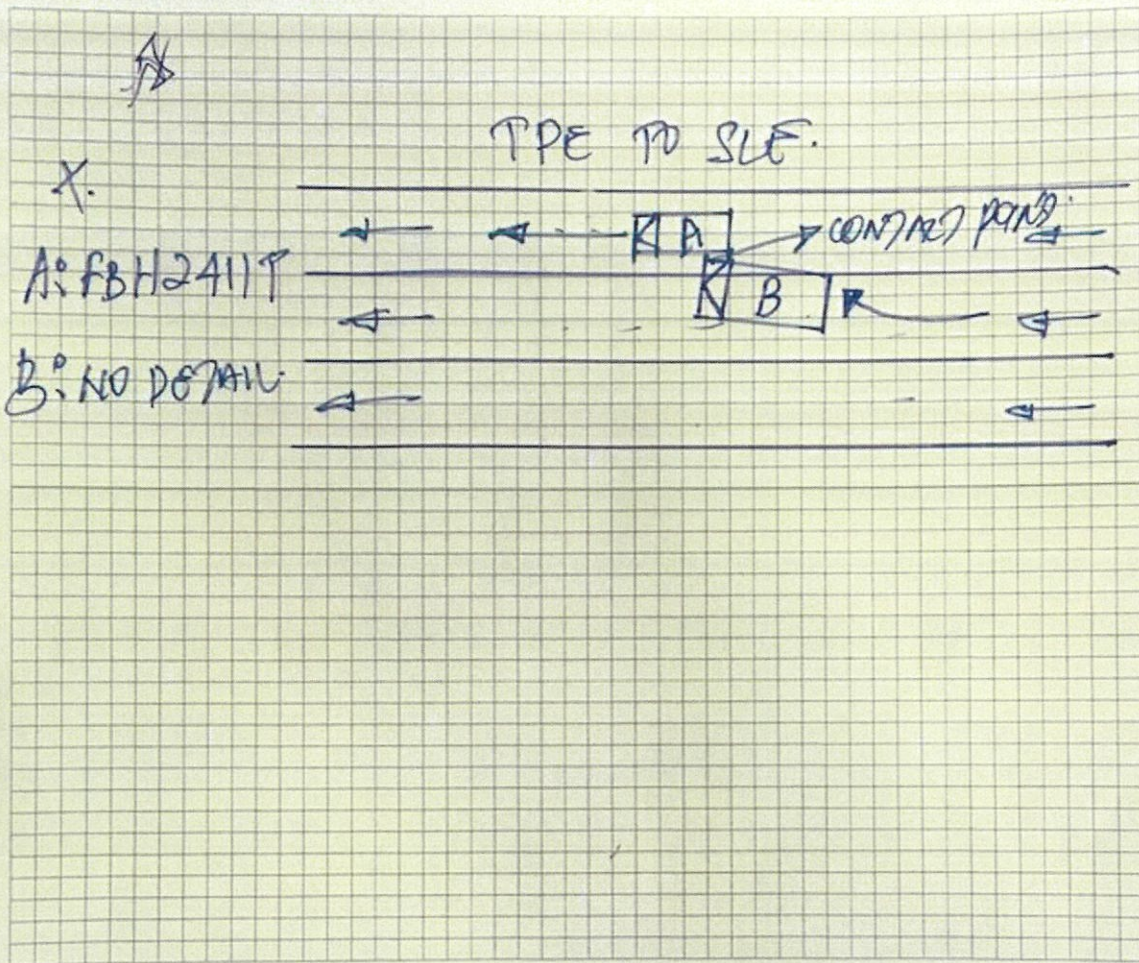
VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
HASHIM BIN KAMARI


 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.:

ACCIDENT DIAGRAM



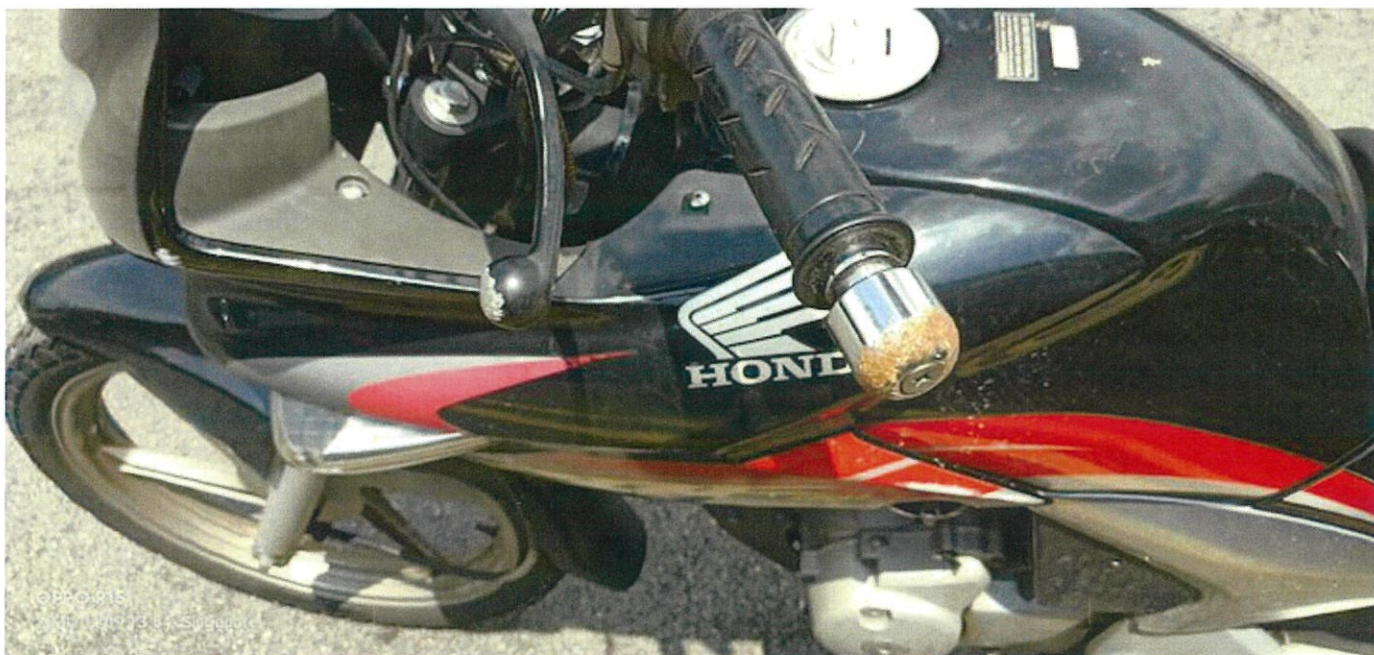
X. [Signature]
 Policyholder's Signature
 Date & Time:

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

VERIFIED BY AJAX MARS (ARC)
 REPORTING OFFICER
 HASHIM BIN KAMARI

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

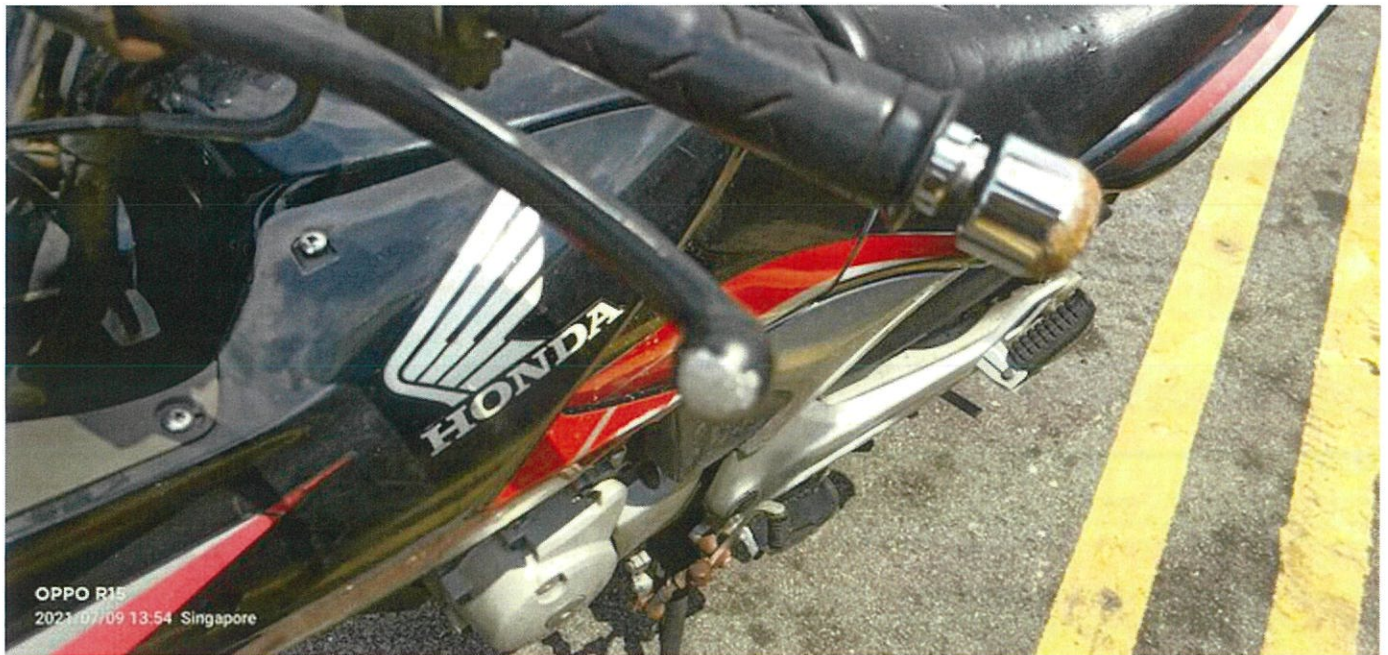


















SINGAPORE POLICE FORCE



T/20210626/2052

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

1 of 3

Report No. T/20210626/2052

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/06/2021 15:05		Vide Report No.:		Station Diary No.: 46	
Informant's Particulars					
Name of Informant: YU WEN YAO		Address: APT BLK 404 YISHUN AVENUE 6 #05-1234 SINGAPORE 760404			
ID Type / ID No.: NRIC NO / S1741650B		Contact No.: Home/Office: Mobile: 98313433			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 54	Date of Birth: 19/10/1966	Type of Informant: Rider		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: SWIMMING COACH		Driving Licence Information: Class: 2B,2A,2,3		Date of Expiry:	

General information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 11:30 26/06/2021 11:00	Type of Location: EXPRESSWAY
Location: TAMPINES EXPRESSWAY		YISHUN NORTH N.P.C 31 YISHUN CENTRAL SINGAPORE 768827 TEL: 6852 9999 FAX: 6852 2299 <i>Sgt Rickson</i> <i>08/07/2021</i>		
Weather: Raining	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 Side				Anyone conveyed by ambulance: No

Vehicle Involved	Model	Color	Condition	No of Passenger
YISHUN NORTH N.P.C	CBF 150	Black		0



**SINGAPORE
POLICE FORCE**



T/20210625/2052

2 of 3

Report No. T/20210625/2052

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	YU WEN YAO	ID No.	S1741650B
Related Vehicle	FBH2411T (Motorcycle)	Contact No.	98313433
Hospital/Clinic	SENGKANG GENARAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	26/06/2021	Date Discharge	NIL
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On 26/06/2021 at about 1130hrs, I was riding along TPE towards SLE on the extreme right lane. Suddenly, a yellow corporate van which was on the second lane had swerved to switch to the first lane and had collided onto the rear left of my motorcycle causing me to lose balance and fall. The driver of the said van namely Li Min Jie, IC: S8673661F had stopped his vehicle to assist me. Ambulance was called and I was conveyed to Sengkang General Hospital to get medical treatment for my injuries. I was given seven days of medical leave. I am lodging this report for the police to look into the matter. That is all.

**SINGAPORE
POLICE FORCE**

T/20210626/2052

3 of 3

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20210626/2052

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:
L /
Sgt 2 NUR RAUDHA BINTE SHEIKH ABDUL
NAZIR

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
26/06/2021 15:05

Officer In Charge Of Case:
TP / GIT /
Sgt 3 MUHAMMAD AFIQ BIN RUMAT
Contact No.: 65476171

Classification Of Case:
SN 085

Authentication Stamp
NP158



Signature:

Singapore Police Force



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:


Original Report No : SA0A21760008 Vehicle Registration No: FBH2411T
 Name(as shown in NRIC) : YU WEN YAO NRIC/FIN/Passport No : S1741650B
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : _____ Singapore()
 Contact (Tel) : _____ Mobile No. : 98313433
 Email Address : libra_0033@yahoo.com
 Date of Accident : 26/06/2021 Time of Accident : 11:30
 Place of Accident : ALONG TPE TOWARDS SLE BEFORE JALAN KAYU
 Insurance Company : FWD SINGAPORE PTE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ATTACH 3RD PARTY VEHICLE NUMBER

Policyholder / Driver's Signature
 Date:


 Reporting Centre Personnel's Signature
 Name: SABITRA
 NRIC/FIN No.:
 Date: 13/07/2021

Please call **+65-6322-2072** for FWD Emergency Assistance
 if Your Motorcycle breaks down or is involved in an accident.
 All accidents must be reported within 24 hours or by the next working day of the Incident
 regardless of whether it will lead to a claim.

POLICY NUMBER : PNM2019-00005083-01

About this policy

Premium paid : S\$114.62
 (Inclusive of GST)

Coverage start date : 11/04/2021

Coverage end date : 10/04/2022

Who is insured to ride: : You Only

About you (As the policyholder)

Your name : Yu Wen Yao

Address : 404 Yishun Avenue 6 05-1234 Singapore 760404

Email : libra_0033@yahoo.com

NRIC/FIN : S1741650B

Current no claims discount : 20%

Gender : Male

Years of riding experience : >=3

Mobile Number : 98313433

Date of birth : 19/10/1966

Certificate of merit : Yes

About your motorcycle

Motorcycle make and model : Honda CBF150

Motorcycle plate number : FBH2411T

Year of first registration : 2013


Overseas Booster : No

Authorised rider : No

Daily transport allowance : No

Hospitalisation expenses due to accident : No

Issued on : 15/02/2021


 Khoo Kee Eng
 Chief Executive Officer
 FWD Singapore Pte Ltd

Please refer to spirit act for specific terms, conditions
 and exclusions of this policy.

Please immediately inform us at **+65 6322 2072**
 or email us at **claims@fwd.com.sg** if any details in
 this motorcycle insurance summary terms to be changed.



SINGAPORE POLICE FORCE

PAYMENT

TAX INVOICE

Invoice No :

SPF2021093001035967

Date/Time:

30/09/2021 15:40:30

Application Paid Via:

Master

Bank Reference No:

R08114

GST Reference No:

MG-8400000-5

Transaction Ref No:

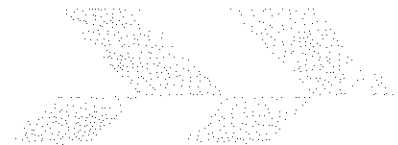
TP000147266

	Service Type	Service Fee	eService Reference No	Unit Price (S\$)	GST (S\$)	Qty	Amount (S\$)
1	Police Document	Search Fee	0050000002498848	14.00	0.00	1	14.00
Total (S\$)							14.00

This is a computer-generated invoice. No signature is required.

Please print a copy of the invoice for your reference.

A FORCE FOR THE NATION





Our Ref : TP/IP/30555/2021
Date : 6 July, 2021

YU WEN YAO
BLK 404 YISHUN AVENUE 6
#05-1234
SINGAPORE 760404

Dear Sir/Madam

**ACCIDENT INVOLVING FBH2411T & GZ9354A ALONG TPE SINGAPORE
TOWARDS SLE BEFORE JALAN KAYU ON 26 JUNE 2021 AT 1128 HRS**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver of GZ9354A had committed an offence of Careless Driving causing hurt under Sec 65 (4) (a) of the Road Traffic Act. Action has been initiated against the said driver for the said offence.

3. If you have any queries, please contact the Investigation Officer, Ken Lee Guang Hui at 6547 6423 or via email Lee_Guang_Hui@spf.gov.sg.

Yours faithfully

Perlin Chong
for Head Traffic Investigation
Traffic Police

Ah Hwa Motor Servicing

Blk 1016 Yishun Industrial Park A, #01-228, Singapore 768758
HP: 9652 8606/9012 1588

INVOICE

Yu Wen Yao
Blk 404 Yishun Avenue 6
\$05-1234
Singapore 760404

Invoice No: 06/tp/21
Date: 7 August 2021
Vehicle No: FBH2411T
Make/Model: Honda CBF150
Accident Date: 26 June 2021

<u>Sr. No.</u>	<u>Description</u>	<u>Qty</u>	<u>Unit price (\$)</u>	<u>Amount (\$)</u>
1	Being labour and materials cost involved for the restoration of the accident vehicle to its pre-accident condition.			\$2,100.00
Total Amount Payable:				\$2,100.00
Sing Dollars: Two Thousand and One Hundred only				

Ah Hwa Motor Servicing


.....
Authorized Signature

PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Email: mirage1195@gmail.com Mobile : 9061 0543

Yu Wen Yao
Blk 404 Yishun Avenue 6
#05-1234
Singapore 760404

Invoice no:	POS0256/21
Date:	6 August 2021
Report no:	256M0721.AHM
Vehicle :	FBH2411T

INVOICE

No	Item Description	Qty	Unit Price	Total Amount(\$)
01	Being charges for the inspection of the accident vehicle, transport and photographs.			561.00
SGD(\$): Five Hundred and Sixty-one only			Payable Amount:	561.00

"Cheque should be crossed and made payable to "Pro-Option Services"

PRO-OPTION SERVICES



.....
Authorised Signature

PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Email: mirage1195@gmail.com Mobile : 9061 0543

ACCIDENT VEHICLE INSPECTION REPORT

Report no : 256M0721.AHM
Vehicle no : FBH2411T

1 REFERENCE

Date of inspection : 15 July 2021
Requested by : Yu Wen Yao
Blk 404 Yishun Avenue 6
#05-1234
Singapore 760404
Type of survey : Independent
Repairer : Ah Hwa Motor Servicing
Blk 1016 Yishun Industrial Park A, #01-360, singapore 762429
Date of accident : 26 June 2021

2 VEHICLE DATA

Make/model : Honda CBF150
Chassis no : LALKC11B0C3300441
Engine no : KC11E2108131
Date of registration : 11 April 2013
Engine capacity : 149 cc
Odometer reading : 57476 km
Colour : Multicolor

3 STATIC CONDITION CHECK

Steering : Affected
Foot brakes : Serviceable
Hand brakes : Serviceable
Paintwork : Good
General Condition : Good

4 TIRE CONDITION CHECK mm/MAKE

	mm/MAKE	SIZE
Front tread	: 5 mm/Golden Boy	80/90-18
Rear tread	: 5 mm/Golden Boy	3.60-18

5 BRIEF DESCRIPTION OF DAMAGE

Front left cowl abraded/scraped, handle bar bent, front rim edge scraped/bent, mirror dented/abraded, front forks bent, front fender abraded, etc. Please see para. 8 of this report for more details.

6 REMARKS

This inspection is carried out on a "WITHOUT PREJUDICE" basis and I have not authorized any repairs.

7 RECOMMENDATION

Cost of repairs : \$2,100.00 (lump sum)
Estimated no of days : Four (4)

8 ASSESSMENT OF DAMAGE AND COSTS

Report no: 256M0721.AHM

Vehicle no: FBH2411T

A SPARE PARTS

<u>SPARE PARTS</u>		<u>Assessed</u>	<u>Repairer's</u>	<u>Revised</u>
<u>Description</u>	<u>Qty</u>	<u>Condition</u>	<u>Amount</u>	<u>Amount</u>
Front cowl, right	1	to reuse	55.00	0.00
Front cowl, left	1	abraded/scraped	55.00	55.00
Signal light, left	1	abraded	50.00	50.00
Front fender	1	abraded	60.00	60.00
Front fender support "U" bracket	1	bent/distorted	22.00	22.00
Handlebar	1	bent	58.00	58.00
Balancer (set)	1	abraded	38.00	38.00
Mirror (set)	1	dented/abraded	65.00	65.00
Clutch lever	1	braded	20.00	20.00
Brake lever	1	serviceable	20.00	0.00
Front brake disc	1	bent	85.00	85.00
Steering con/bearing set	1	necessary	150.00	150.00
Pillion footrest assy, left	1	abraded	35.00	35.00
Rider footrest assy, left	1	abraded	35.00	35.00
Gear shfiter (set)	1	bent	95.00	95.00
Pillion footrest bracket	1	abraded	78.00	78.00
Front fork (set)	1	bent	480.00	480.00
Bottom clamp/under bracket	1	bent/distorted	185.00	185.00
Front rim	1	edge scrapoed/bent	350.00	350.00
		Subtotal of the above	1,936.00	1,861.00
		Discount	10% / 10%	193.60
				186.10
<u>(Special nett)</u>		<u>Subtotal 1:</u>	<u>1,742.40</u>	<u>1,674.90</u>
Kappa box	1	abraded	350.00	350.00
Front wheel bearing set	2	necessary	40.00	40.00
		<u>Subtotal 2:</u>	<u>390.00</u>	<u>390.00</u>

Total cost of parts:

2,132.40 2,064.90

B LABOUR

To check wiring.	30.00	20.00
To repair and spray paint the main stand.	150.00	120.00
Workmanship.	350.00	300.00
Towing fee.	70.00	60.00
Total cost of labour:		600.00 500.00
Total cost of repair:		2,732.40 2,564.90

Report no: 256M0721.AHM
Vehicle no: FBH2411T

9 CONCLUSION

The revised or adjusted cost of repairs to restore the vehicle is

\$2,564.90

(a) However, the recommended cost of repair based on lump sum basis would be

\$2,100.00

(b) The number of days taken to complete the repairs are

Four (4)

(1st re-inspection conducted on 22 July 2021)

(Post Repair Inspection conducted on 29 July 2021)

The above recommendations in my view are fair and reasonable for the restoration of the vehicle to its pre-accident condition.

Note: Lump Sum Repair Basis

This means the repairer is allowed to replace the damaged parts with used, reconditioned or new parts, or repair it to a roadworthy condition.

Yours faithfully


.....
Liaw Leong San
Licensed Automotive Appraiser

Dated: 6 August 2021

Report no: 256M0721.AHM

Vehicle no: FBH2411T



Report no: 256M0721.AHM

Vehicle no: FBH2411T



Report no: 256M0721.AHM

Vehicle no: FBH2411T





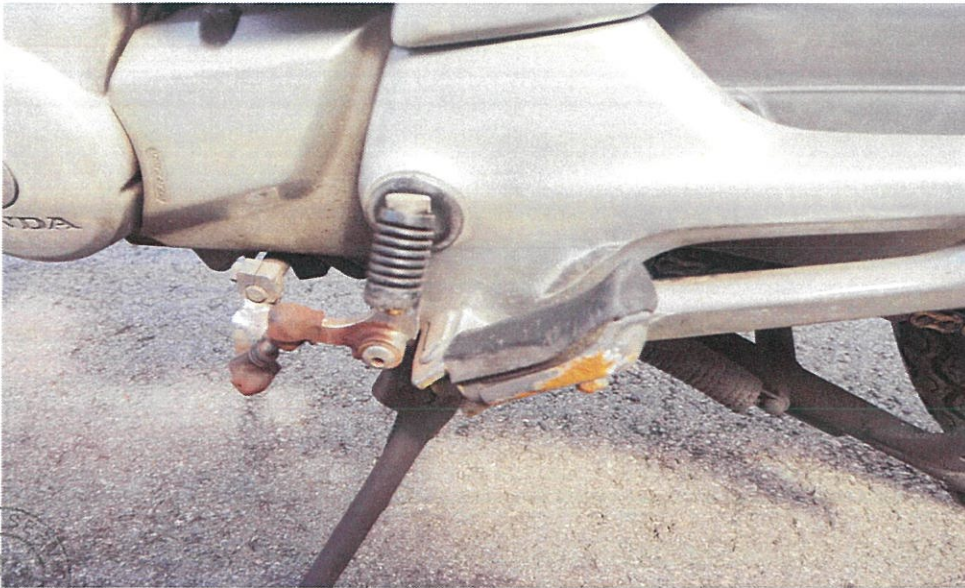
Report no: 256M0721.AHM

Vehicle no: FBH2411T



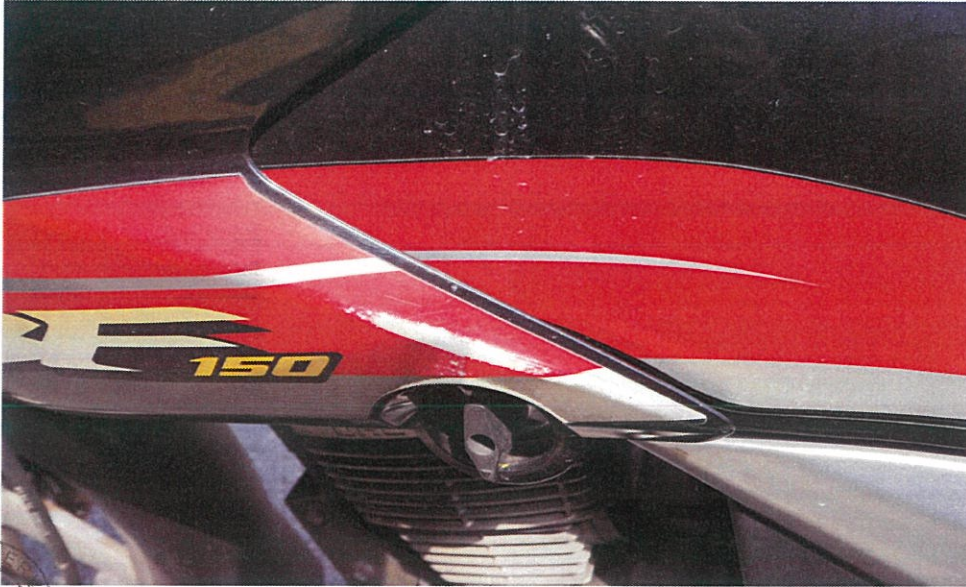
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Vehicle no: FBH2411T



Report no: 256M0721.AHM

Vehicle no: FBH2411T



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Vehicle no: FBH2411T



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Vehicle no: FBH2411T



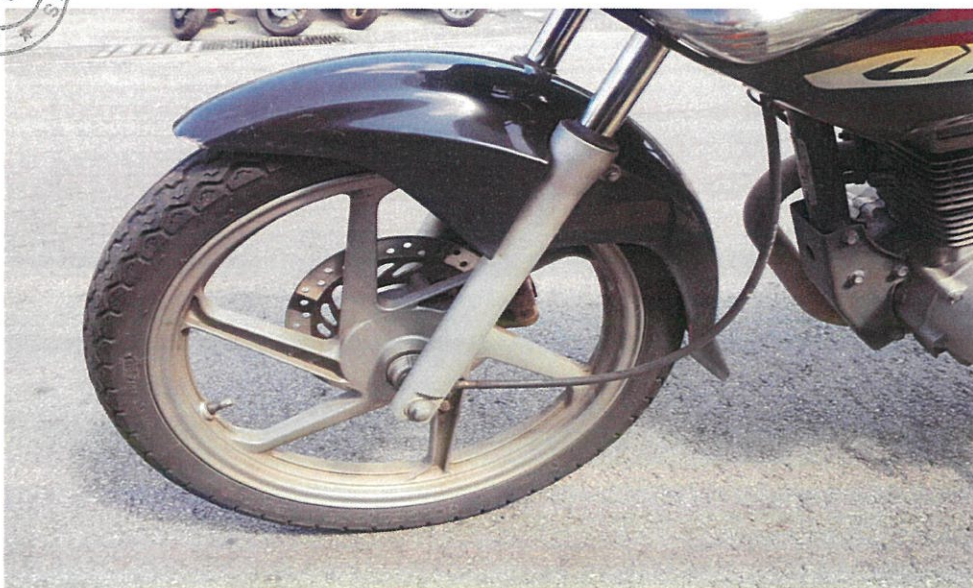
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Vehicle no: FBH2411T



Report no: 256M0721.AHM

Vehicle no: FBH2411T

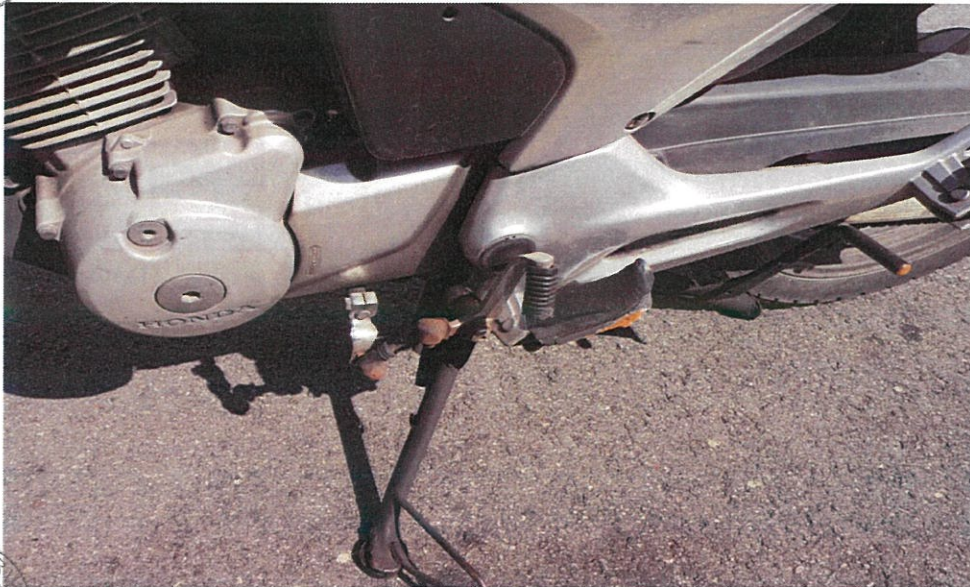
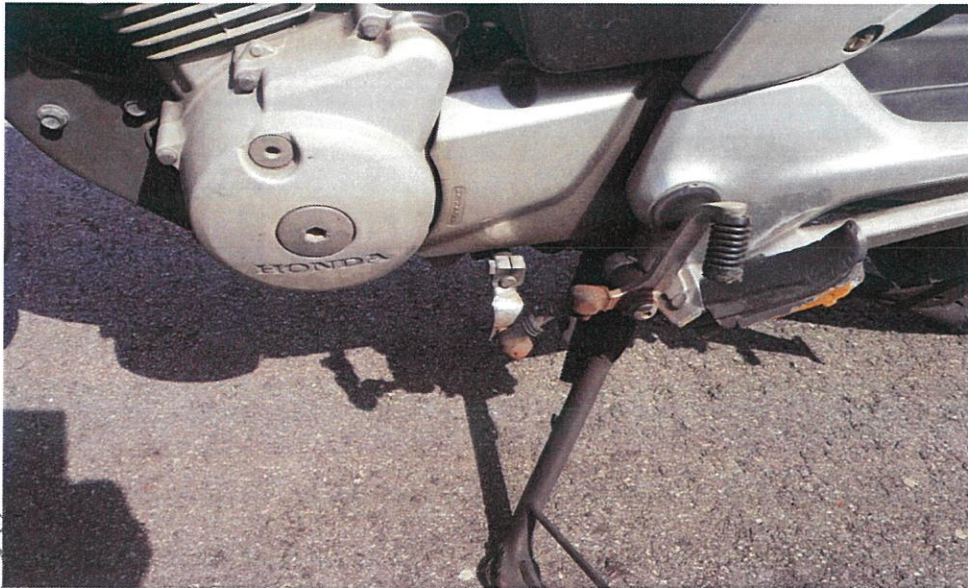


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Vehicle no: FBH2411T



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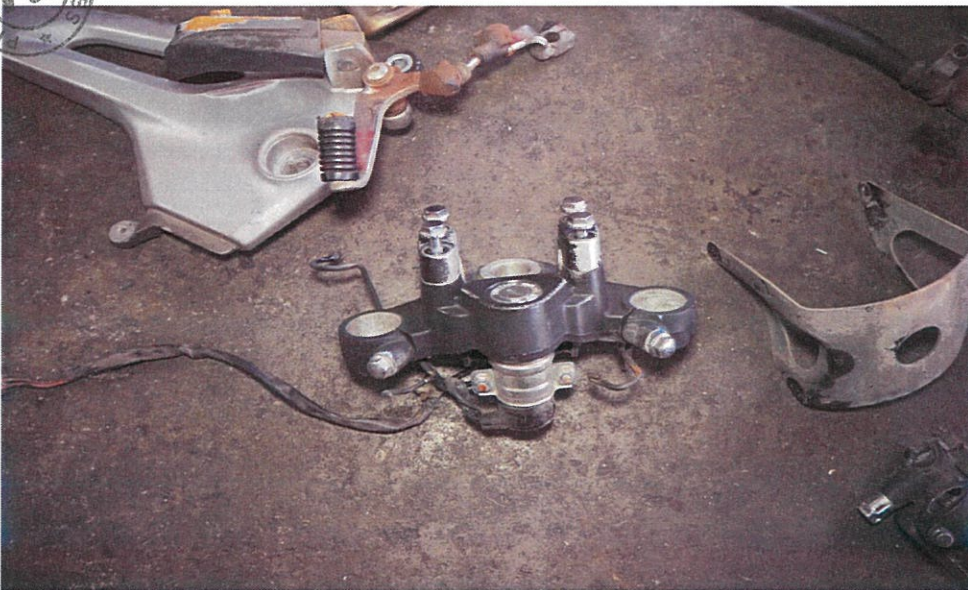
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Vehicle no: FBH2411T



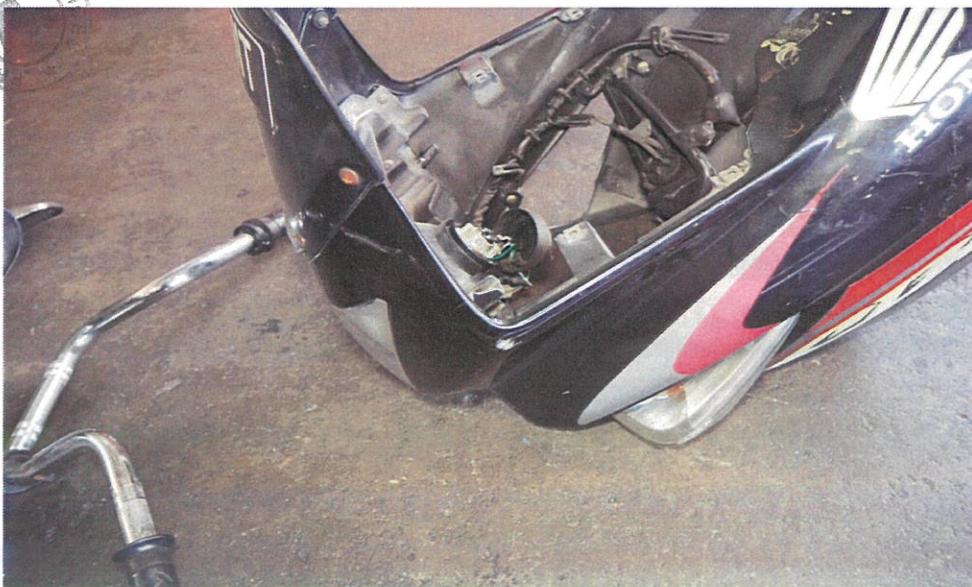
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Report no: 256M0721.AHM
Vehicle no: FBH2411T



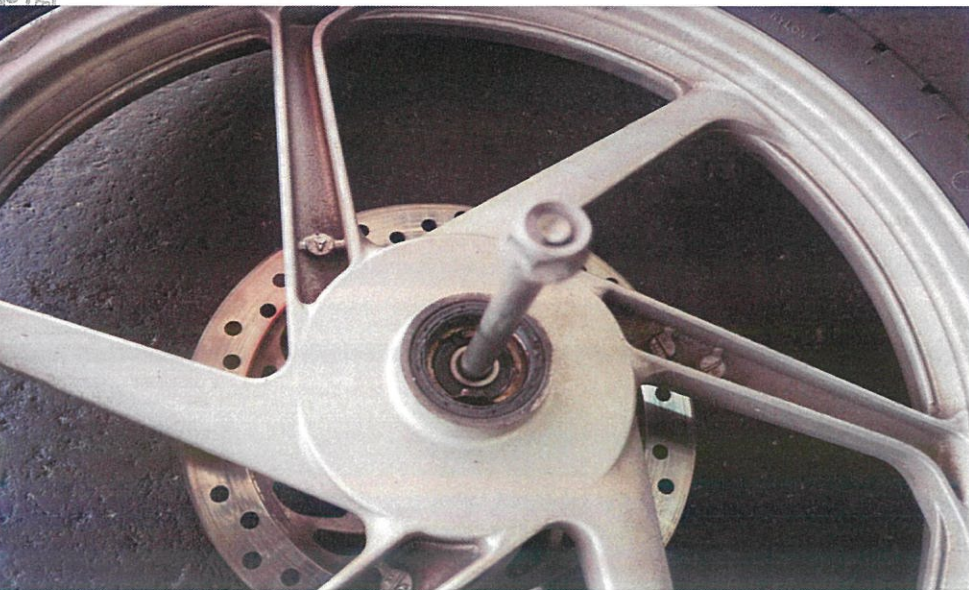
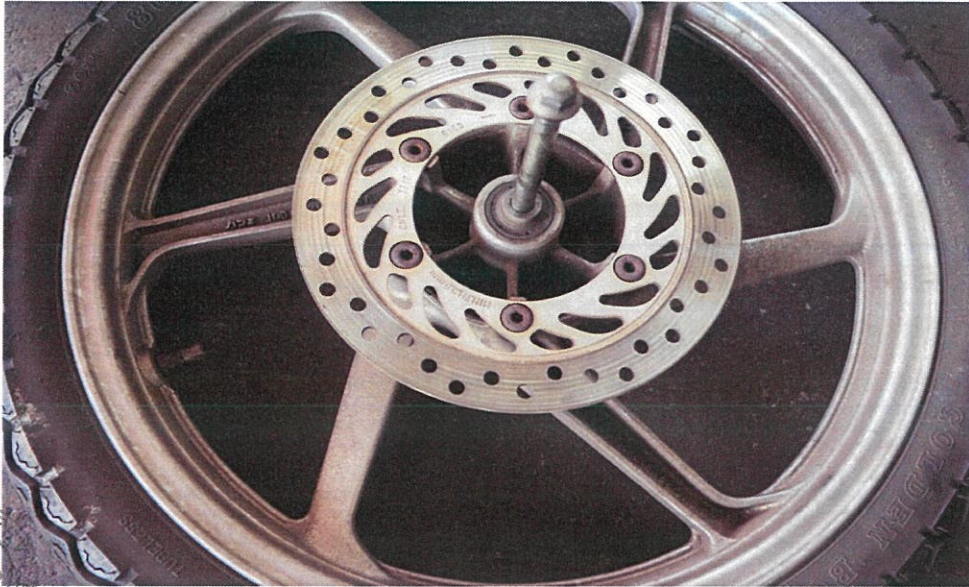
Report no: 256M0721.AHM

Vehicle no: FBH2411T



Report no: 256M0721.AHM

Vehicle no: FBH2411T





POST REPAIR

Report no: 256M0721.AHM

Vehicle no: FBH2411T



POST REPAIR

Report no: 256M0721.AHM

Vehicle no: FBH2411T



POST REPAIR

Report no: 256M0721.AHM

Vehicle no: FBH2411T

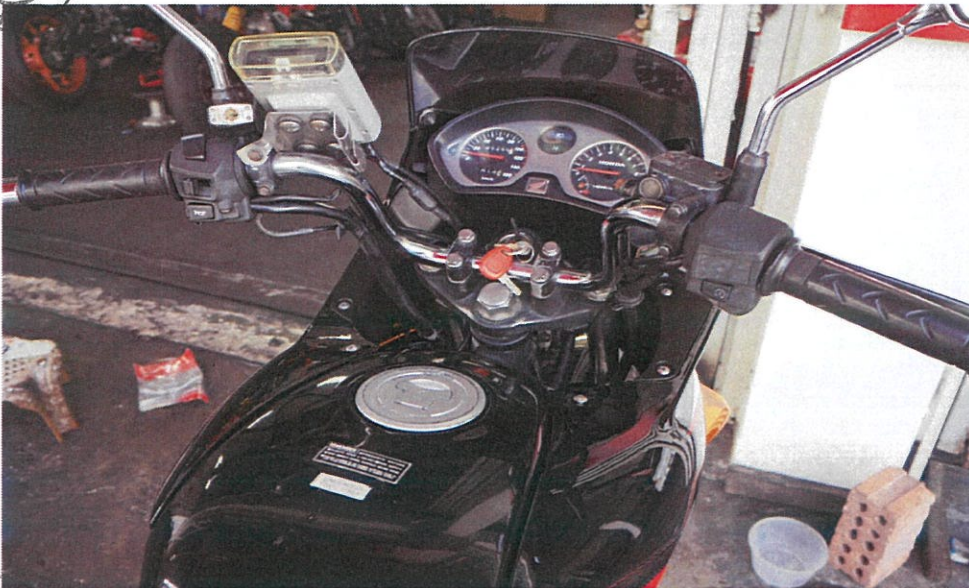




POST REPAIR

Report no: 256M0721.AHM

Vehicle no: FBH2411T



POST REPAIR

Report no: 256M0721.AHM

Vehicle no: FBH2411T

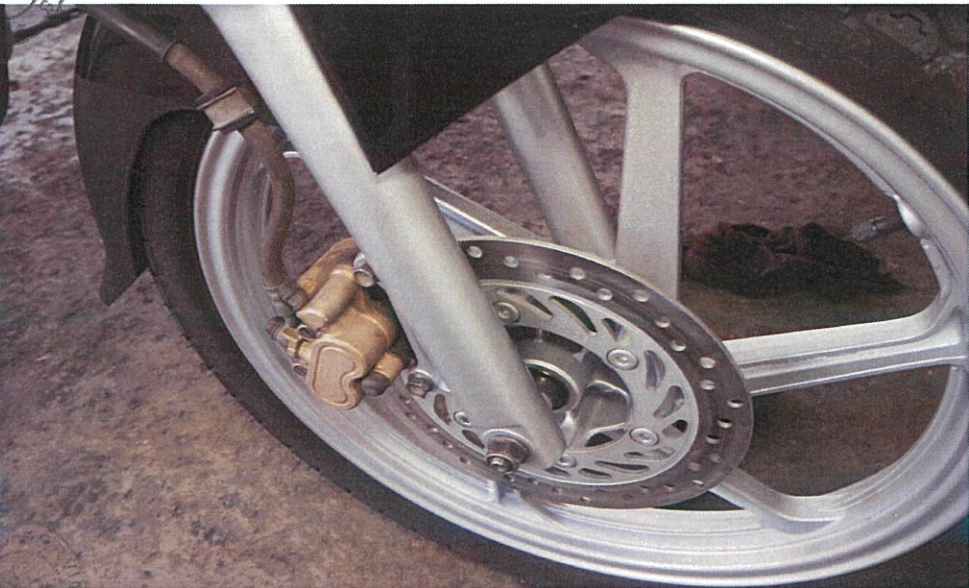




POST REPAIR

Report no: 256M0721.AHM

Vehicle no: FBH2411T





Better Health Together

Our Reference: MR/05660/2021 [LAWYERS] (Request No. 202107098)
Your Reference: LWP/AHM/YWY/4713/21/sm

Date: 04/09/2021

1777

Lee Wee Peng Lawrence
Lawrence Lee & Co
Advocates and Solicitors
133 New Bridge Road
#13/10
China Point Singapore 059413

Dear Sir,

Re: MEDICAL REPORT FOR MR YU WEN YAO (S1741650B)

1. This is an Ordinary Medical Report.
2. Mr Yu Wen Yao was seen on the 26/6/21 by the Emergency Department of Sengkang General Hospital at 1239 by Dr Louis Chua and Dr Christopher Wong.
3. Mr Yu was allegedly involved in a Road Traffic Accident while riding his motorcycle on the expressway. Mr Yu was travelling at 50 kmph when he sustained a rear end collision to his vehicle by a van. He lost control of his motorbicycle and fell on the left side as a result of the accident and he came to the Emergency Department for multiple abrasions over the left side of his body.
4. On examination, Mr Yu had significant findings of deep abrasion wounds over left knee with superficial abrasion wounds over left dorsum of his forefoot and over his left palm.
5. Mr Yu Wen Yao was diagnosed with
 1. Multiple abrasion wounds as a result of road traffic accident
6. He was provided with wound care and was given 7 days of outpatient Medical Leave (201220357K) from the 26/6/21 to the 02/7/21 as well as analgesia (Paracetamol 1g QDS x 7 days, Arcoxia 120mg OM x 5 days) with advice to return if there was any evidence of wound infection or new complaints. He was given an appointment with the polyclinic for a review of his abrasion wounds in a week's time.
7. Thank you.

Yours Sincerely,

Dr Chua Yi Cher Louis
MCR 66534G
Medical Officer
Emergency Department
Sengkang General Hospital

PATIENTS. AT THE HEART OF ALL WE DO.®

SingHealth Duke-NUS Academic Medical Centre

Singapore General Hospital • Changi General Hospital • Sengkang General Hospital • KK Women's and Children's Hospital
National Cancer Centre Singapore • National Dental Centre Singapore • National Heart Centre Singapore
National Neuroscience Institute • Singapore National Eye Centre • SingHealth Community Hospitals • SingHealth Polyclinics





Sengkang
General Hospital
SingHealth

Tel: (65) 6930 6003

Fax:

Sengkang General Hospital
Singapore 544886

Health Information Management Services

Medical Reports Section

Reg No: 201220357K

GST Reg No: M9-0368910-N

Payment Receipt/Tax Invoice

Invoice No : MR/0005007/2021 **Date** : 11-08-2021
Payee's Name : LAWRENCE LEE & CO - OFFICE A/C
Address : 133 NEW BRIDGE ROAD #13-10 CHINATOWN POINT SINGAPORE 059413
Requestor : LAWRENCE LEE & CO **Our Ref** : MR/05660/2021/202107098
Patient : YU WEN YAO **Your Ref** : LWP/ AHM/ YWY/ 4713/ 21/ SM
HRN : S1741650B **Currency** : SGD
Payment Mode : CHEQUE
Bank : OCBC
Cheque/Card No : 003623

S/No	Description	Qty	Unit Price SGD	Total Price SGD
1	ORDINARY MEDICAL REPORT	1	\$102.80	\$102.80
Sub-Total				\$102.80
7 % GST				\$7.20
Total Amount Payable				\$110.00
Amount Received (MRPERT/18874/2021)				\$110.00
Balance Amount				\$0.00

This is a system generated receipt. No signature is required.



GST REG NO. : M90368910N

TAX INVOICE

YU WEN YAO
404 YISHUN AVENUE 6
#05-1234
Singapore 760404

EXTERNAL ID/IRIC : 26.06.2021 / OOPDHW
CASE NUMBER : 51741650B
CUSTOMER NUMBER : 8121718972C
A&E VISIT : 3027318298
LOCATION : 26.06.2021 12:30
BILLING DATE : OEMD QCAEZ
26.06.2021

DESCRIPTION

A&E ATTENDANCE FEE

TOTAL CHARGES

GOVERNMENT GRANT

AMOUNT PAYABLE BEFORE TAX
ADD : 7% GST

AMOUNT PAYABLE AFTER TAX
LESS : GST ABSORBED BY THE GOVERNMENT

NET AMOUNT PAYABLE

PAYMENTS
YU WEN YAO

TOTAL DUE AFTER PAYMENTS
AMOUNT DUE : YU WEN YAO

TOTAL CHARGES BEFORE
GOVT GRANT(S\$)

TOTAL AMT PAYABLE
AFTER GOVT GRANT(S\$)

257.00

128.00

257.00

129.00-

128.00
8.96

136.96
8.96-

128.00

128.00-

0.00

Please settle payment immediately through e-Payment at www.singhealth.com.sg/PayOnline, SingHealth Health Buddy App, HealthHub App, HealthHub App, AXS at Stations, AXS at SSS, AXS at SSS, SAM at www.mysam.sg, DBS PayLah! or DBS/POSB Internet Banking, Kiosk payment services at AXS stations and SAM Self Service Automated Machines. Counter payment services at Singapore Post Office Branches.

The Institution shall be entitled at its discretion to offset any credit balance under the relevant bill against any liability of the patient in respect of any other bills/ batches charging.




Sengkang
General Hospital
SingHealth

Reg No: 201220357K

ORIGINAL

MEDICAL CERTIFICATE

EMD202177069

Name YU WEN YAO		NRIC No. S1741650B	
This is to certify that the above-named is unfit for duty for a period of <u>7</u> days from <u>26-Jun-2021</u> to <u>02-Jul-2021</u> inclusive.			
Type of medical leave granted:			
<input type="checkbox"/> Hospitalization Leave		<input checked="" type="checkbox"/> Outpatient Sick Leave	
Admitted on: _____		Delivered on: _____	
Discharged on: _____		Operated on: _____	
<input type="checkbox"/> Maternity Leave		<input type="checkbox"/> Sterilization Leave	
This certificate is not valid for absence from court attendance.			
Fit for light duty from <u>N.A.</u>		to <u>N.A.</u>	
Time in: <u>N.A.</u>		Time out: <u>N.A.</u>	
Diagnosis		Surgical Operation (if applicable)	
Comments:			
Emergency Department Sengkang General Hospital 110 Sengkang East Way Singapore 544886 Not valid without official hospital stamp		Ward No. SKH Emergency Department Date 26-Jun-2021	
		Signature, Name (in BLOCK LETTERS) and Designation/MCR No.  LOUIS CHUA YI CHER, 66534G	



National Healthcare Group

POLYCLINICS

MEDICAL CERTIFICATE (Ref: 1156285507)

ORIGINAL

NAME: YU WEN YAO

NRIC: S1741650B

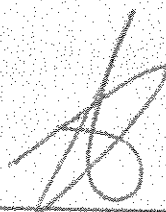
Type of Medical Leave granted: Outpatient Sick Leave

The above named is unfit for duty for 6 day(s) from 03/07/2021 to 08/07/2021
Inclusive.

The certificate is not valid for absence from court attendance.

03/07/2021
Date

Dr. Zhiyong ZENG (17595A)
Issued by


Signature

Location: YIS YISHUN POLYCLINIC

From: Wen Yao Yu <libra_0033@yahoo.com>
Sent: Thursday, 22 July 2021 5:26 PM
To: sukmei@lawrencelee.com.sg
Subject: Fw: Suspension of pool allocation due to injury from road accident since 27/6/2021

----- Forwarded Message -----

From: SPORT Pool allocation (SPORT) <sport_pool_allocation@sport.gov.sg>
To: Wen Yao Yu <libra_0033@yahoo.com>
Sent: Wednesday, July 14, 2021, 09:41:55 AM GMT+8
Subject: RE: Suspension of pool allocation due to injury from road accident since 27/6/2021

Dear Coach,

Thank you for the mail, we wish you a speedy recovery.

Thank you and stay safe.

Best Regards,

SportSG Pool Allocation Team

The Pool Allocation Team operates during office hours only.

Due to the high volume of mail, mails will be delayed and complex requests will be further delayed.

From: Wen Yao Yu <libra_0033@yahoo.com>
Sent: Tuesday, 13 July 2021 12:07 pm
To: SPORT Pool allocation (SPORT) <SPORT_Pool_allocation@sport.gov.sg>
Subject: Suspension of pool allocation due to injury from road accident since 27/6/2021

Hi,

I have suspended my coaching since 27/6/2021 since and will only resume on 24/7/2021.

Thank you for not removing me from the slot.

Best Regards,

Benson Yu

98313433

Tax Reference No : SXXXX650B
Year of Assessment : 2018
Income Tax
Date : 08 May 2018

NOTICE OF ASSESSMENT ORIGINAL



INLAND REVENUE
AUTHORITY OF
SINGAPORE

Please quote the Tax Reference Number (eg. NRIC, FIN, etc) in full when corresponding with us.

MR YU WEN YAO
404 YISHUN AVE 6
#05-1234
SINGAPORE 760404



55 Newton Road
Revenue House
Singapore 307987
Tel: 1800-356 8300
Website: <http://www.iras.gov.sg>
e-Services: <https://mytax.iras.gov.sg>

1-1

	S'PORE (\$)	OTHER COUNTRIES (\$)	TOTAL (\$)
TRADE	18,000.00		18,000.00
TOTAL INCOME	18,000.00		18,000.00
LESS: Approved Donations			2,280.00
ASSESSABLE INCOME			15,720.00
LESS: PERSONAL RELIEFS			
Earned Income		1,000.00	
NSman-self/wife/parent		1,500.00	
Parent/Handicapped Parent		9,000.00	
Provident Fund/Life Insurance		2,353.00	
TOTAL PERSONAL RELIEFS			13,853.00
CHARGEABLE INCOME			1,867.00
TAX PAYABLE			0.00

1. Your tax assessment is based on information given by you through e-Filing on 19 Mar 2018.

2. If you have any objection, please submit your objection online within 30 days via the Object to Assessment e-service or email us at myTax Portal.

NG WAI CHOONG
COMPTROLLER OF INCOME TAX

Tax Reference No : SXXXX650B
Year of Assessment : 2019
Income Tax
Date : 09 Apr 2019

**NOTICE OF ASSESSMENT
ORIGINAL**



INLAND REVENUE
AUTHORITY OF
SINGAPORE

Please quote the Tax Reference Number (eg. NRIC, FIN, etc) in full when corresponding with us.

MR YU WEN YAO
404 YISHUN AVE 6
#05-1234
SINGAPORE 760404



55 Newton Road
Revenue House
Singapore 307987
Tel: 1800-356 8300
Website: <http://www.iras.gov.sg>
e-Services: <https://mytax.iras.gov.sg>

1-1

	S'PORE (\$)	OTHER COUNTRIES (\$)	TOTAL (\$)
TRADE	20,000.00		20,000.00
TOTAL INCOME	20,000.00		20,000.00
LESS: Approved Donations			2,090.00
ASSESSABLE INCOME			17,910.00
LESS: PERSONAL RELIEFS			
Earned Income		1,000.00	
NSman-self/wife/parent		1,500.00	
Parent/Handicapped Parent		9,000.00	
Provident Fund/Life Insurance		2,404.00	
TOTAL PERSONAL RELIEFS			13,904.00
CHARGEABLE INCOME			4,006.00
TAX PAYABLE			0.00

1. Your tax assessment is based on information given by you through e-Filing on 17 Mar 2019.

2. If you have any objection, please submit your objection online within 30 days via the Object to Assessment e-service or email us at myTax Portal.

NG WAI CHOONG
COMPTROLLER OF INCOME TAX

Tax Reference No : SXXXX650B
Year of Assessment : 2020
Income Tax
Date : 09 Mar 2020

NOTICE OF ASSESSMENT ORIGINAL



INLAND REVENUE
AUTHORITY OF
SINGAPORE

Please quote the Tax Reference Number (eg. NRIC, FIN, etc) in full when corresponding with us.

MR YU WEN YAO
404 YISHUN AVE 6
#05-1234
SINGAPORE 760404



55 Newton Road
Revenue House
Singapore 307987
Tel: 1800-356 8300
Website: <http://www.iras.gov.sg>
e-Services: <https://mytax.iras.gov.sg>

1-1

	S'PORE (\$)	OTHER COUNTRIES (\$)	TOTAL (\$)
TRADE	25,000.00		25,000.00
TOTAL INCOME	25,000.00		25,000.00
LESS: Approved Donations			380.00
ASSESSABLE INCOME			24,620.00
LESS: PERSONAL RELIEFS			
Earned Income		1,000.00	
NSman-self/wife/parent		1,500.00	
Parent/Handicapped Parent		9,000.00	
Provident Fund/Life Insurance		2,108.00	
TOTAL PERSONAL RELIEFS			13,608.00
CHARGEABLE INCOME			11,012.00
TAX PAYABLE			0.00

1. Your tax assessment is based on information given by you through e-Filing on 01 Mar 2020.

2. If you have any objection, please submit your objection online within 30 days via the Object to Assessment e-service or email us at myTax Portal.

NG WAI CHOONG
COMPTROLLER OF INCOME TAX