

REF: CC4/A1621010958/T1 r43.

1	TOTAL
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EM-1 AUTO PTE LTD

BLK 8 SIN MING INDUSTRIAL ESTATE SECTOR C

#01-68 SINGAPORE 575643

Contact Number: 6452 3298 (O) 9666 6556 (H/P) 6457 5776 (F)

Email Address: em1autopteltd@gmail.com

COMPANY / GST REG. NO. : 201316380R

Vehicle Number : SDW 2908A
Vehicle Model : MIT. LANCER EX
Accident Date : 24.10.2021
Original Reg Date : 23.02.2016

Date : 25.10.2021
Chassis : JMYSRCY1AGU003352
TP Ins. **AIG**

ESTIMATE

NETT

1	1 pc	Boot Lid			bc	852.00
2	1 pc	Boot Lid Badge			ne	52.00
3	1 pc	Boot Lid Emblem LANCER			ne	56.00
4	1 pc	Boot Lid Emblem CC			ne	40.00
5	1 pc	Boot Lid Emblem MIVEC			ne	56.00
6	2 pcs	Boot Lid Lamps	LH X	223.00	RH ne	446.00
7	2 set	Boot Lid Lamp Clips	LH X	30.00	RH ne	60.00
8	1 set	Boot Lid Insulator Clips			X	40.00
9	1 pc	Boot Lid Stopper			ne	20.00
10	1 pc	Boot Lid Inner Lock			X	136.00
11	1 pc	Boot Lid Weatherstrip			7	189.00
12	2 pcs	Boot Lid Hinges		92.00	Ry	184.00
13	2 pcs	Boot Lid Absorber		136.00	X	272.00
14	1 pc	Rear Bumper			diy	875.00
15	2 pcs	Rear Bumper Side Retainers	LH X	38.00	RH de	76.00
16	1 set	Rear Bumper Clips			30 ne	40.00
17	1 pc	Rear Bumper Reflector RH			cm	84.00
18	1 pc	Rear Bumper Top Beam			b7	210.00
19	1 pc	Rear Bumper Reinforcement			bt	295.00
20	1 pc	End Panel			bt photo	592.00
21	1 pc	End Panel Top Trim			de	183.00
22	1 set	End Panel Top Trim Clips			20 ne	30.00
23	2 pcs	Taillamps	LH X	365.00	RH ne	730.00
24	2 set	Taillamps Clips	LH X	25.00	RH ne	50.00
25	1 pc	Taillamps Panel	X		bc	129.00
26	1 pc	Rear Fender RH			bu	695.00
27	1 pc	Rear Fender Inner Trims			fn	262.00
28	1 set	Rear Fender Inner Trim Clips			ne	30.00
29	1 pc	Rear Fender Inner Shield			fn	38.00
30	1 set	Rear Fender Inner Shield Clips			ne	20.00

Boothid lamp & taillamp - 1 set - 91300 6,742.00

Less 10% 674.20

C/F 6,067.80

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Email Address: em1autopteltd@gmail.com

COMPANY / GST REG. NO. : 201316380R

Vehicle No : SDW 2908A

B/F

6,067.80

Special Nett

1	1 pc	Rear Bumper Top Chrome			bt ✓	480.00
2	1 set	Reverse Sensor			200mm ✓	250.00
3	1 set	Body Panel Joint Sealer			400mm ✓	120.00
4	1 pc	Rear Windscreen Sealant			400mm ✓	60.00
5	1 pc	Rear Windscreen Inner Seal			200mm ✓	40.00
6	1 pc	Boot Lid Top Spoiler Repair Kit			300mm ✓	60.00

Labour charge

Panel Beating			1200	1,800.00
Spray painting			1000	1,300.00
Check Wiring			30	40.00
Anti rust			30	120.00
Remove and install carpet and seat.			60	120.00
Remove and install reverse sensor			30	90.00
Remove and install windscreen			120	140.00

10,687.80

Less 20% 2,137.56

Lump sum 8,550.24

Tanpin 97445741
WP 27/10/10 1130
4/5 Repair After repair
08 days
tanpin 01/11/10

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC

Owner ID: 505B

Vehicle Details

Vehicle No.: SDW2908A

Vehicle to be Exported: No

Intended Deregistration Date: 25 Oct 2021

Vehicle Make: MITSUBISHI

Vehicle Model: LANCER EX 1.6 AT LED TAIL LAMP

Primary Colour: Blue

Manufacturing Year: 2015

Engine No.: 4A92CD9513

Chassis No.: JMYSRCY1AGU003352

Maximum Power Output: 86.0 kW (115 bhp)

Open Market Value: \$13,608.00

Original Registration Date: 23 Feb 2016

First Registration Date: 23 Feb 2016

Transfer Count: 2

Actual ARF Paid: \$13,608.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 22 Feb 2026

PARF Rebate Amount: \$9,525.00

Intended COE Rebate Details

COE Expiry Date: 22 Feb 2026

COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years): 10

QP Paid: \$45,002.00

COE Rebate Amount: \$19,493.00

Total Rebate Amount: \$29,018.00

The information contained herein is correct as at 25 Oct 2021

OK

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	25/10/2021 17:48 (SGT)
Date of Accident	24/10/2021 13:00 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE/PIE towards Changi
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDW2908A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Jessie Ang Bee Geok
NRIC No	S1620505B
Email Address	llewynhozhantui@gmail.com
Mobile Phone No	(Phone) +65-96851482
Alternative Phone No	(Home) +65-96851482

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Lancer
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	1600

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00032582101
Cover Note Number	-

DRIVER

Name of Driver	Llewyn Ho Zhan Hui
NRIC No	S9135100E

Date Of Birth	24/09/1991
Occupation	Indoor
Date Of Driving Pass	09/10/2017
Driving experience	4 YEARS
Gender	Male
Mobile Number	(Phone) +65-96851482
Alt. Phone Number	-
Email Address	llewynhozhanhui@gmail.com
Address	Blk 394 Bukit Batok West Ave 5 #02-458
Address complement	-
Postcode	650394
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Jacquelyn Tan
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Hong Kah North Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18005679999
Alt. Police Station Phone No	(Fax) +65-65652508
Police Station Address	Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

refer attached police report.

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	SLF2132R
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-96749360
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	unknown
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	UNKNOWN
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

Describe Circumstances of the Accident

Please refer to police report no. 7/2021034/2020

Additional information as follows

On 24/10/2021 at about 13.00 hrs, I was driving my car (SEWING 988A) along the Central Expressway on Lane 4 / Pass Island Expressway (towards Chang) and was sitting at Upper Selegie Road.

Vehicle # A : SDW 3108A

Vehicle: B SLT 2182 R.

Vehicle: C Unknown

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

Witnessed by Reporting Centre
Personnel

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 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.

B. 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Handwritten sketch plan details:

- Vehicle A: SDW 5703A
- Vehicle B: SLF 2133R
- Vehicle C: Unknown
- Location: CTE Doublet City
- Other markings: "P12", "P13", "P14", "P15", "P16", "P17", "P18", "P19", "P20", "P21", "P22", "P23", "P24", "P25", "P26", "P27", "P28", "P29", "P30", "P31", "P32", "P33", "P34", "P35", "P36", "P37", "P38", "P39", "P40", "P41", "P42", "P43", "P44", "P45", "P46", "P47", "P48", "P49", "P50", "P51", "P52", "P53", "P54", "P55", "P56", "P57", "P58", "P59", "P60", "P61", "P62", "P63", "P64", "P65", "P66", "P67", "P68", "P69", "P70", "P71", "P72", "P73", "P74", "P75", "P76", "P77", "P78", "P79", "P80", "P81", "P82", "P83", "P84", "P85", "P86", "P87", "P88", "P89", "P90", "P91", "P92", "P93", "P94", "P95", "P96", "P97", "P98", "P99", "P100".


**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999



T/20211024/2050

1 of 4

Report No. T/20211024/2050

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/10/2021 15:54	Vide Report No.	Station Diary No : 27
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Informant's Particulars			
Name of Informant: LLEWYN HO ZHAN HUI		Address: APT BLK 394 BUKIT BATOK WEST AVENUE 5 #02-458 SINGAPORE 650394	
ID Type / ID No.: NRIC NO / S9135100E		Contact No.:	Mobile: 96851482
Nationality: SINGAPORE CITIZEN		Email: llewynhozhanhui@gmail.com	
Sex: Male	Age: 30	Date of Birth: 24/09/1991	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Accountant		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident			
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/10/2021 13:00
Location: PAN-ISLAND EXPRESSWAY		Type of Location:	
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow:	Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear		Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved							
Vehicle No.	Type	Make	Model	Color	Condition	No of Passengers	
SDW2908A	Car				Slightly Damaged	1	
SLF2132R	Car				Slightly Damaged	4	

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



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999



T/20211024/2050

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Report No. T/20211024/2050

CONTINUATION OF REPORT

Passenger			
Name	JACQUELYN TAN	ID No.	S9330290G
Related Vehicle	SDW2908A (Car)	Contact No.	93661491
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	LLEWYN HO ZHAN HUI	ID No.	S9135100E
Related Vehicle	SDW2908A (Car)	Contact No.	96851482
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	ALACANTARA RICHARD VILLALON	ID No.	S7885682C
Related Vehicle	SLF2132R (Car)	Contact No.	96749360
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

Brief Details.

On 24/10/2021 at about 1300hrs, I was driving my car (SDW2908A) along the Pan Island Expressway (towards Changi) and was exiting at Upper Serangoon Road. My girlfriend was the passenger on board, seated at the front passenger seat.

While going through the exit, a car ahead of me had jammed its brakes. To prevent collision, I jammed the brakes to my car as well, coming to a complete stop. However, an impact was felt from the rear about 2-3 seconds after braking. Shortly after the impact, I saw the car which collided into mine, swerving to its right and colliding into a motorcycle after which, I alighted and rendered assistance to the rider before calling for ambulance. The rider was conscious throughout. I later found out that another car had collided into the motorcycle as well, while the motorcycle was swerving to its right.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999



T/20211024/2050

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Report No: T/20211024/2050

CONTINUATION OF REPORT

I checked on my car and saw damages such as scratches and dents on the rear right portion of it. Both myself and my girlfriend are not injured. Ambulance and Traffic Police soon arrived at the accident scene. The memory card of my in-car camera was handed over to the Traffic Police officers. After exchanging particulars with the driver of the car that collided into mine, I left.

**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999



T/20211024/2050

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Report No. T/20211024/2050

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

J /

Staff Sgt MUSHAWWIR BIN
ADRUS

Signature Of Informant:

Signature Of Interpreter:
Not applicableDate/Time:
24/10/2021 15:54

Officer In Charge Of Case:

TP / GIT /

Sgt 3 INTAN WULANDARI BUDDY SANTOSO

Contact No.: 65476415

Classification Of Case:

Authentication Stamp
NP158



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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SS0221AP0009 Vehicle Registration No: SAW 290PA
 Name (as shown in NRIC): Lilengun Ho Zhen Hui NRIC/FIN/Passport No: S91351005
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 9645 1482
 Email Address: _____
 Date of Accident: 24/1/12 Time of Accident: 1300 hrs
 Place of Accident: CTB/PIS towards Changi
 Insurance Company: China

(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:

1) Chain Collision : 3 vehicles.
 2) 3rd vehicle : unknown motorbike.
 3) Injury TP (3rd vehicle).

Policyholder / Driver's Signature
 Date: 26/1/12

Reporting Centre Personnel's Signature
 Name: _____
 NRIC/FIN No.: _____
 Date: 26/1/12