

# CPc

## C PAGLAR & CO

ADVOCATES & SOLICITORS

UEN NO. 53130985A/ GST REG NO. M90371275E

50 Chin Swee Road  
#05-03 Thong Chai Building  
Singapore 169874

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Facsimile: (65) 6536 8706

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SERVICE OF COURT DOCUMENTS BY FACSIMILE WILL NOT BE  
ACCEPTED

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**PLEASE QUOTE OUR FILE REFERENCE WHEN REPLYING**

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Our Ref : CP/6803/17/PD(AA).aa  
Your Ref :

26 NOV 2021

**LKK AUTO CONSULTANTS PTE LTD**

51 Ubi Avenue 1

#01-25 Paya Ubi Industrial Park

Singapore 408933

**Attn : Mr Ang Bryan Tani**

**BY EMAIL: [bryanang@lkkauto.com](mailto:bryanang@lkkauto.com)**

**BY CERTIFICATE OF POSTING**

Dear Sir,

**CLAIMANT: SIOW BOON HWEE - SINGLE JOINT EXPERT  
APPOINTMENT**

**PROPERTY DAMAGE CLAIM ARISING FROM A ROAD TRAFFIC ACCIDENT ON  
28<sup>TH</sup> JULY 2017 INVOLVING MOTOR VEHICLES NO. SKS 7309J AND GBE  
2499G ALONG HOLLAND AVENUE AT ABOUT 1250 HOURS**

We refer to the above matter.

We act for Siow Boon Hwee and M/s Tan Chin Hoe & Co act for Tan Hwee Joo.

The claim is in respect of damage to motor vehicle no. SKS 7309J which was damaged in a road traffic accident on 28<sup>th</sup> July 2017 involving motor vehicle no. GBE 2499G.

Pursuant to Order 108 of the Rules of Court, the Court has appointed you as the Single Joint Expert.

Kindly note that as the Single Joint Expert appointed in the above matter, your duty is to the Court and you are required to give a fair and reasonable opinion as regards the issue of repair costs and duration for the repair of motor vehicle no. SKS 7309J.

We attach herewith a copy of the following documents for your attention and review:

- (a) Singapore Accident Statement (GIA report) of SKS 7309J and GBE 2499G; and
- (b) Survey report by M/s C L Appraiser Pte Ltd (with coloured photographs) - Claimant's surveyor.

Kindly conduct a physical re-inspection of motor vehicle no. SKS 7309J and let us have your views on the issue of repair costs and duration for the repair of motor vehicle no. SKS 7309J.

Your fee has been stipulated at \$400.00 (exclusive of GST) for the report.

**C Paglar & Co.**  
**Advocates & Solicitors**

Our Ref: CP/6803/17/PD(AA).aa

Date: 26 NOV 2021

Please let us know when the re-inspection has been completed and we look forward to receiving your re-inspection report.

Please let us have your report by **20<sup>th</sup> December 2021**.

Yours faithfully

**C PAGLAR & CO**

Enc.

c.c. **M/s Tan Chin Hoe & Co**  
**Yref: RT/EK/208/2018/zx**

**By Email**

## 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 ability.
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 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 Report 28/07/2017 17:11  
Date Of Accident 28/07/2017 12:50  
Exact Location Of Accident HOLLAND AVE  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SKS7309J  
**Insured/Policyholder**  
Name Of Registered Owner SIOU BOON HWEE  
NRIC No S7827692D  
Email Address REVOLT\_J@HOTMAIL.COM  
Mobile Phone No (LOCAL) +65-98569478  
Alternative Phone No OTHERS-98569478

### Vehicle Particulars

Manufacturer NISSAN  
Model GTR35  
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  
If No, Please state action to be taken THIRD PARTY  
Vehicle Category PRIVATE CAR

### Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number DMPCSN1635551701  
Cover Note Number

### Driver

Name of Driver SIOU BOON HWEE  
NRIC No S7827692D  
Date Of Birth 18/09/1978  
Occupation INDOOR  
Date Of Driving Pass 03/07/2000  
Driving Experience 17 YEARS AND 0 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-98569478  
Fax Number  
Contact Number OTHERS-98569478  
EMail Address REVOLT\_J@HOTMAIL.COM

Address BLK 11 HOLLAND DRIVE  
#18-04  
Postcode 271011  
Was driver an employee of the Insured's Company NO  
If No, Relationship of the Driver with the Insured OWNER  
Vehicle Registration Number of Driver's Own Vehicle -  
Vehicle -  
Insurance Company of Driver's Own Vehicle -

#### General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE  
Weather Conditions CLEAR  
Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO  
Was any body injured in the Accident? NO  
Was any other material or property damaged? YES  
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
Number of Passengers (Including Driver) 2

#### Details of Police Action

Was the accident reported to the police? NO  
If Yes, Please state which Police Station  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

#### Circumstances of Accident

I WAS TRAVELLING FROM HOLLAND DRIVE TURNING LEFT TO HOLLAND AVE. AFTER I MAKE A RIGHT TURN AND FILTER TO THE RIGHT SUDDENLY VEH(B) BEARING REG NO GBE2499G CUT INTO MY LANE AND HIT ONTO MY FRONT LEFT SIDE PORTION OF MY VEH.

#### Attachment(s)

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? YES  
Remarks/ Reasons: NOT WORKING  
Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBE2499G  
Vehicle Make/Model/Colour  
Details Of Properties  
Name of Driver TAN HWEE JOO  
NRIC/Passport Number S0071112H  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### Details of Witness

Name  
Phone Number  
Email Address

## SKETCH PLAN

### IMPORTANT NOTICE

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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.

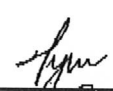
(collectively the "Purposes")

(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

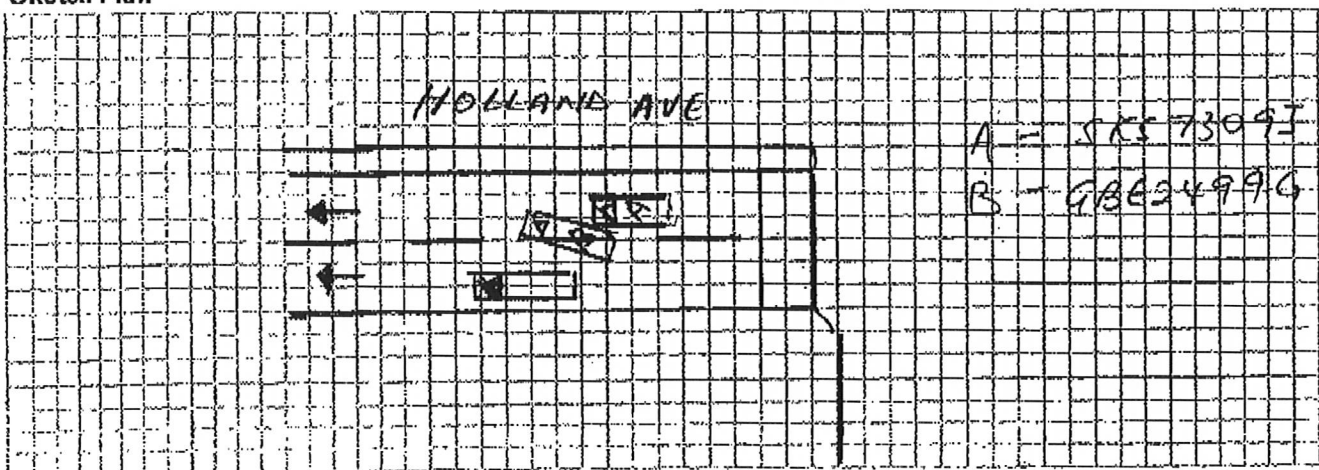
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 28/7/17  
Policyholder's Signature / Date & Time

 28/07/17  
Driver's Signature (If driver is not the policyholder) / Date & Time

 28/07/17  
Witnessed by Reporting Centre Personnel

### Sketch Plan





**Describe Circumstances of the Accident**

*Plb refer to the statement*

**Declaration**

We declare the foregoing particulars are true in every respect.

*[Signature]*  
28/7/17  
Policyholder's Signature / Date &  
Time

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

*[Signature]* 28/07/17  
Witnessed by Reporting Centre  
Personnel

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### ACCIDENT STATEMENT

Date Of Report	28/07/2017 16:12
Date Of Accident	28/07/2017 12:45
Exact Location Of Accident	HOLLAND DRIVE/HOLLAND AVENUE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE2499G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	JOO HOW FURNITURE RENOVATION
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63651882

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 MANUAL
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5084736528
Cover Note Number	

### Driver

Name of Driver	TAN HWEE JOO
NRIC No	S0071112H
Address	BLK 409 BEDOK NORTH AVENUE 2 #03-24

### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR

### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	3

### Circumstances of Accident

SEE ATTACHED SKETCH PLAN

### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SKS7309J

Vehicle Make/Model/Colour

Name of Driver

Insurance Company Name



**SKETCH PLAN**

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(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.

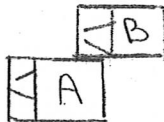
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此 報 告 表 須 填 報  
報 告 人 簽 名  
報 告 人 簽 名

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**



A - GBE 2499G

B - SKS 7309J

### Sketch Plan Pg. 2


### Describe Circumstances of the Accident

I was driving my lorry GBE 2499G along Holland Drive with my left hand signal on, turning left into Holland Avenue. Suddenly a car SKS 7309I came from behind and hit onto my lorry's rear right portion, causing damage.

## Declaration

**I/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 28/7/2017  
3.50p

Accident Photo



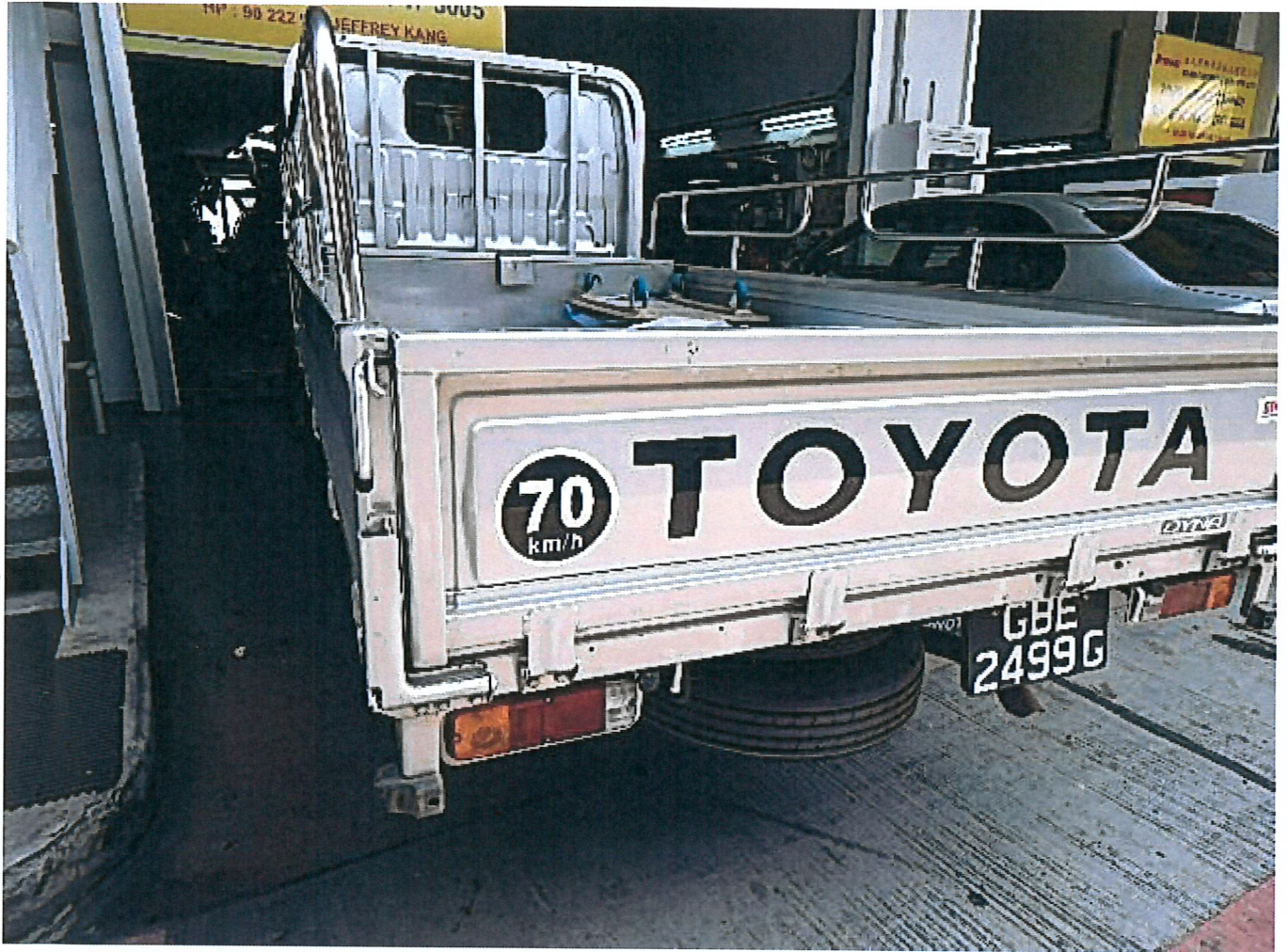


Accident Photo





Accident Photo





Accident Photo





Accident Photo

