



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

| Affiliated to Federation Internationale Des Experts En Automobile | | | | |
|--|--|-----------------|---|--|
| SINGAPORE CIVIL DEFENCE FORCE (MHA05) 91 UBI AVE 4 SINGAPORE 408827 ATTN: RALF TAY | | | Ref: CS/SCD22003955/Aqy3e2 Date: 16/09/2022 Code: SCD | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | | |
| Insured Veh. | QX 1235E | Veh. Inspected | SJC 7297E | |
| Policy No. | | Coverage (\$) | 0.00 | |
| Claim No. | 2022 - 43 | Excess (\$) | 0.00 | |
| Assign From | RALF TAY | Assign Date | 27/04/2022 | |
| 2. Vehicle Particulars & Condition | | | | |
| Make & Model | HONDA ODYSSEY | c.c | 2354 | |
| Engine No. | HIDDEN | Year of Reg. | 2008 | |
| Chassis No. | JHMRB18508C202995 | Colour | BLACK | |
| Odometer | 187722 KM | Steering | IN ORDER | |
| Brakes | IN ORDER | Modification | SPORTS RIM | |
| General | GOOD | | | |
| 3. Conditions of Tyres | | | | |
| | Size | Make | Balance | |
| R/H Front Tyre | 215/55 R17 | BRIDGESTONE | 6 mm | |
| L/H Front Tyre | 215/55 R17 | BRIDGESTONE | 6 mm | |
| R/H Rear Tyre | 215/55 R17 | BRIDGESTONE | 6 mm | |
| L/H Rear Tyre | 215/55 R17 | BRIDGESTONE | 6 mm | |
| 4. Description of Damages | | | | |
| | THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS. | | | |
| 5. General Information | | | | |
| Accident Date | 26/04/2022 | Inspection Date | 05/05/2022 | |
| Survey held at | N-51 AUTOMOTIVE PL 2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921 | | | |
| 5a. Remarks | | | | |
| | A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. | | | |
| 5b. Estimate Days of Repair | | | | |
| | ESTIMATED NORMAL PERIOD FOR REPAIR: | | 2 Working Days | |



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJC 7297E

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|---|---------------|---------------------------|-------------------|
| | <u>REPLACEMENT OF PARTS</u> | | | |
| 1 | FRONT BUMPER | TORN | 689.20 | 689.20 |
| 1 | FRONT BUMPER LH FOGLAMP ASSY | CRACKED | 333.70 | 333.70 |
| 1 | FRONT BUMPER LOWER LID (SPOILER) | NOT NECESSARY | 680.20 | - |
| 2 | FRONT BUMPER SIDE RETAINER L/R @\$22.70 | NOT NECESSARY | 45.40 | - |
| 1 | FRONT GRILLE | NOT NECESSARY | 210.40 | - |
| 1 | FRONT GRILLE LOWER CHROME | NOT NECESSARY | 190.40 | - |
| 1 | FRONT GRILLE TOP CHROME | NOT NECESSARY | 136.20 | - |
| 1 | FRONT LH HEADLAMP | CRACKED | 629.90 | 629.90 |
| 1 | FRONT LH HEADLAMP LOWER BRACKET | NOT NECESSARY | 36.40 | - |
| | LESS 20% DISCOUNT | | -590.36 | -330.56 |
| | | | 2,361.44 | 1,322.24 |
| | <u>SPECIAL NETT ITEMS</u> | | | |
| 1 | SET FRONT BUMPER CLIPS (SN) | NECESSARY | 80.00 | 30.00 |
| 1 | FRONT BUMPER NUMBER PLATE (SN) | NOT NECESSARY | 25.00 | - |
| 1 | FRONT BUMPER NUMBER PLATE HOLDER (SN) | NOT NECESSARY | 50.00 | - |
| | | | 155.00 | 30.00 |
| | <u>LABOUR</u> | | | |
| | TO REMOVE, REINSTALL ELECTRICAL WIRING HARNESS, CHECK LIGHTING AND RESETTNG HEADLAMP FOCUSING. (TO FR) | | 80.00 | 30.00 |
| | TO RE-SPRAY PAINTING ON THE CHANGE BODYPARTS, REPAIR PORTION, AND WHERE CONSISTENT TO THE ACCIDENT. | | 450.00 | 200.00 |
| | TO PROVIDE LABOUR, WORKMANSHIP TO CHANGE THE ABOVE DAMAGED BODYPARTS, REPAIR, RE-CONSTRUCT AND RE-ALIGN BODY STRUCTURE, BODY ALIGNMENTS AND DAMAGED CONSISTENT TO THE ACCIDENT. | | 400.00 | 200.00 |
| | TO APPLY ANTI-RUST CHEMICAL ON REPAIRED AND REPLACED PANEL. | NOT NECESSARY | 40.00 | - |
| | | | 970.00 | 430.00 |
| | GRAND TOTAL | | 3,486.44 | 1,782.24 |



| | | | |
|---|--|--|----------|
| RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) | | | 1,400.00 |
|---|--|--|----------|

Report Ref No. CS/SCD22003955/Aqy3e2

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

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 | 27/04/2022 13:11 (SGT) |
| Date of Accident | 26/04/2022 13:40 (SGT) |
| Exact Location of Accident | 422 Pasir Ris Drive 6, Singapore |
| Additional Location Information | CARPARK |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------------------------|
| Vehicle Registration Number | SJC7297E |
| INSURED/POLICYHOLDER | |
| Is company? | No |
| Name Of Registered Owner | FAHMY BIN ESKAK |
| NRIC No | S7715931B |
| Email Address | fahmy.eskak1977@gmail.com |
| Mobile Phone No | (Phone) +65-97531977 |
| Alternative Phone No | +65-97531977 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Honda |
| Model | Odyssey |
| 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 | 2400 |

INSURANCE COMPANY

| | |
|---------------------------|-----------------------|
| Name of Insurance Company | AXA Insurance Pte Ltd |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | GA571100 |
| Cover Note Number | - |

DRIVER

| | |
|----------------|-----------------|
| Name of Driver | FAHMY BIN ESKAK |
| NRIC No | S7715931B |

| | |
|--|--------------------------------------|
| Date Of Birth | 15/06/1977 |
| Occupation | Indoor |
| Date Of Driving Pass | 30/08/2002 |
| Driving experience | 19 YEARS AND 8 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-97531977 |
| Alt. Phone Number | +65-97531977 |
| Email Address | fahmy.eskak1977@gmail.com |
| Address | BLK 187A BEDOK NORTH STREET 4 #14-42 |
| Address complement | - |
| Postcode | 461187 |
| 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 | Collision - Head to Rear |
| 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 | Tampines North Neighbourhood Police Post |
| Police Station Phone No | (Phone) +65-18007818999 |
| Alt. Police Station Phone No | (Fax) +65-67838603 |
| Police Station Address | Blk 461 Tampines Street 44 #01-56 Singapore 520461 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20220426/2075.

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 | QX1235E |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Government |

Name of Driver -
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident VEHICLE B
 No. Of Passenger (Including Driver) -

NOTES

On 11/01/2022 at 10:00 AM, I was driving my car (Vehicle A) on the A1 road, heading towards London. I was in the left lane, following the traffic. At approximately 10:15 AM, I noticed a vehicle (Vehicle B) in the right lane, which appeared to be changing lanes. I slowed down slightly to allow it to pass. However, Vehicle B did not signal and moved into the left lane, cutting in front of me. I attempted to brake, but it was too late, and I collided with the rear of Vehicle B. The impact was significant, and both vehicles came to a stop. I remained in the vehicle, and no one was injured. The police arrived at the scene and took statements from both drivers. They issued a report and provided me with a copy. I am now waiting for the insurance company to process the claim. I am happy to provide any further information if needed.


Signature of Driver: [Signature]
 Date: 11/01/2022




SKETCH PLAN

IMPORTANT NOTICE

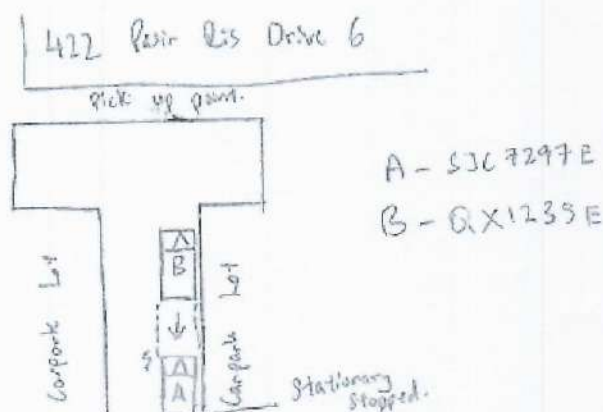
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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.
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' law yers/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' law yers/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 law yers/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



Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



T/20220426/2075

1 of 3

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

Report No. T/20220426/2075

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 26/04/2022 16:27 | Vide Report No.: | Station Diary No.: 22 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | |
|--|--|-------------------------------------|------------------------------|
| Name of Informant: FAHMY BIN ESKAK | Address: APT BLK 187A BEDOK NORTH STREET 4 #14-42 SINGAPORE 461187 | | |
| ID Type / ID No.: NRIC NO / S7715931B | Contact No.: | Mobile: 97531977 | |
| Nationality: SINGAPORE CITIZEN | Home/Office: | Email: fahmy.eskak1977@gmail.com | |
| Sex: Male | Age: 44 | Date of Birth: 15/06/1977 | Type of Informant: Driver |
| Race: Javanese | Language: | | Institution / School Name: |
| Occupation: SELF-EMPLOYED | Driving Licence Information: Class: 2B,2A,2,3 | | Date of Expiry: |

General Information of the Accident

| | | | | |
|---|----------------------------------|----------------------|--|-------------------------------------|
| Type of Accident: | Non-Injury Government Vehicle | Drink Drive: No | Date/Time of Accident: 26/04/2022 13:40 | Type of Location: Car Park |
| Location: PASIR RIS DRIVE 6 | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: | | Traffic Control: | | Traffic Volume: |
| Type of Collision: Moving Vehicle Against - Parked Vehicle | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|-----------|-------|------------------|-------|---------------------|-----------------|
| QX1235E | Ambulance | | | | | 0 |
| SJC7297E | Car | HONDA | ODYSSEY 2.4 A | Black | Slightly Damaged | 1 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|---------------------------------|--------------|------------|-------------|
| SJC7297E | AXA INSURANCE SINGAPORE PTE LTD | GA571100 | 16/04/2022 | 15/04/2023 |



**SINGAPORE
POLICE FORCE**



T/20220426/2075

2 of 3

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

Report No. T/20220426/2075

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|-------------------------|--|---|
| Details of Person Involved | | | |
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | MUHAMMAD AKID BIN AZHAR | ID No. | S9224491A |
| Related Vehicle | QX1235E (Ambulance) | Contact No. | NIL |
| 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 | FAHMY BIN ESKAK | ID No. | S7715931B |
| Related Vehicle | SJC7297E (Car) | Contact No. | 97531977 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 2B,2A,2,3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 26/04/2022 at about 1340hrs, I stopped my vehicle at the carpark drive-way of Blk 422 Pasir Ris Drive 6, to allow my wife to alight from the vehicle. At that time my vehicle was about 1 car length behind an ambulance that was stationary on the carpark drive-way.

After my wife alighted, the ambulance started to reverse. I sounded the horn on my vehicle but the ambulance continued to reverse and eventually, the rear portion of the ambulance hit onto the front portion of my vehicle, causing it to be damaged.

After the accident, I parked my vehicle in one of the parking lots and took down the particulars of the ambulance driver. I also took some photographs of the general scene.

At the time of the accident, no one appeared to be injured.



**SINGAPORE
POLICE FORCE**



T/20220426/2075

3 of 3

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

Report No. T/20220426/2075

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:

G /

SR STAFF SGT MUHAMMAD
NOOR AZRI BIN MOHAMED
SALLEH

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Other MUHAMMAD NOOR BIN ABDUL
RAHMAN

Contact No.: 65476219

Signature Of Informant:

Date/Time:

26/04/2022 16:27

Classification Of Case

NP168



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PHOTOGRAPHS FOR VEHICLE NO. SJC 7297E

INSPECTION





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RE-INSPECTION





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RE-INSPECTION

