

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

TAX INVOICE

EQ INSURANCE COMPANY LTD

5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEX SINGAPORE 069110 INV No. AC2301027

INV Date 20/02/2023

Reference CS/EQI22004292/Bvy3e2

Code EQI

PROFESSIONAL SERVICE FEE

Vehicle No. SGW 378G

Insured Veh. SKJ 5090Z

Claim No. DM22HO00710/JT

Policy No. DMPPHQ21-00409

Accident Date 04/05/2022

Inspection Date 10/05/2022

Description	Total
Survey Inspection	300.00
Resurvey Inspection	
Digital Photographs	
Transportation	
Subtotal	300.00
GST (8%)	24.00
Grand Total	324.00

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

LKK Auto Consultants Pte Ltd

KHM



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TEL: 6256 3561 FAX: 6256 4315

		Affiliated to Federation Internation	nale Des Experts En Automo	bile
	EQ INSURANCE C	OMPANY LTD	Ref:	CS/EQI22004292/Bvy3e2
	5 MAXWELL ROAD #17-00 TOWER BL MND COMPLEXSII	OCK	Date:	20/02/2023
			Code:	EQI
1.		Policy Particulars :	- THIRD PARTY CLAIN	1
	Insured Veh.	SKJ 5090Z	Veh. Inspected	SGW 378G
	Policy No.	DMPPHQ21-00409	Coverage (\$)	0.00
	Claim No.	DM22HO00710/JT	Excess (\$)	0.00
	Assign From	MELODY TEOH	Assign Date	09/05/2022
2.		Vehicle Partic	culars & Condition	
	Make & Model	HONDA HRV 1.5	c.c	1497
	Engine No.	HIDDEN	Year of Reg.	2016
	Chassis No.	MRHRU1830GP000045	Colour	BLACK
	Odometer	107532 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	FAIR		
3.		Condition	ons of Tyres	
		Size	Make	Balance
	R/H Front Tyre	225/50 R18	YOKOHAMA	6 mm
	L/H Front Tyre	225/50 R18	YOKOHAMA	6 mm
	R/H Rear Tyre	225/50 R18	YOKOHAMA	6 mm
	L/H Rear Tyre	225/50 R18	YOKOHAMA	6 mm
4.		·	on of Damages	
	THE VEHICLE SUS	STAINED DAMAGES AT THE FRO	ONT AND REAR PORTION	l.
	DAMAGES SEE DE	ETAILS.		
5.		General	Information	
	Accident Date	04/05/2022	Inspection Date	10/05/2022
	Survey held at	TEAM AUTOPRO PTE LTD		
		160 SIN MING DR #01-14 SIN MING AUTO CITY SINGAPORE 575722		
5a.		Re	emarks	
		N WAS CONDUCTED ON A"WIT E TO YOUR INSTRUCTIONS, WI		
5b.	,	·	Days of Repair	
	ESTIMATED NORM	MAL PERIOD FOR REPAIR:	11 Wor	king Days



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGW 378G

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	TAILGATE	DENTED	1,436.20	1,436.20
1	TAILGATE LOGO	NECESSARY	95.80	95.80
2	TAILGATE LAMP @\$546.00	BROKEN	1,092.00	1,092.00
1	TAILGATE INNER LOCK	JAMMED	156.70	156.70
1	TAILGATE OUTER GARNISH	BROKEN	385.00	385.00
1	TAILGATE INNER TRIMBOARD	BROKEN	386.20	386.20
1	TAILGATE WEATHERSTRIP	TORN	198.40	198.40
1	TAILGATE INNER HANDLE	NOT DAMAGED	85.00	-
1	TAILGATE ANTENNA SENSOR	BROKEN	214.00	214.00
1	TAILGATE SMART BUZZER	BROKEN	195.00	195.00
1	REAR W/SCREEN MOULDING SIDE	NECESSARY	88.60	88.60
1	REAR W/SCREEN MOULDING TOP	NECESSARY	108.00	108.00
1	REAR WINDSCREEN MOULDING BOTTOM	NECESSARY	108.00	108.00
1	REAR BUMPER	BROKEN	989.50	989.50
2	REAR BUMPER SIDE RETAINER @\$85.00	NECESSARY	170.00	170.00
2	REAR BUMPER BRACKET @\$135.60	NO SUCH PARTS	271.20	-
2	REAR BUMEPR REFLECTOR @\$128.00	BROKEN	256.00	256.00
2	REAR BUMPER SIDE GARNISH @\$238.90	BROKEN	477.80	477.80
1	REAR END PANEL	DENTED	695.80	695.80
1	REAR END PANEL TOP GARNISH	BROKEN	184.00	184.00
1	SPARE TYRE PANEL	DENTED	1,230.00	1,230.00
1	SPARE TYRE PANEL TOP BOARD	BROKEN	420.00	420.00
1	SPARE TYRE PANEL INSULATOR	NO SUCH PARTS	240.00	-
1	SPARE TYRE PANEL TOOLS TRAY	BROKEN	264.00	264.00
1	SPARE TYRE PANEL LOWER SPLASH COVER	NO SUCH PARTS	316.00	-
2	REAR FENDER @\$1425.80	NOT DAMAGED	2,851.60	-
2	REAR FENDER INNER TRIM BOARD @\$723.00	BROKEN	1,446.00	1,446.00
2	REAR FENDER ARCH GARNISH @\$218.30	BROKEN	436.60	436.60
2	TAILLAMP @\$658.30	BROKEN	1,316.60	1,316.60
1	EXHAUST PIPE	NOT DAMAGED	895.00	-
2	EXHAUST MOUNTING @\$42.50	TORN	85.00	85.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	EXHAUST HEAT SHIELD	NOT DAMAGED	185.00	-
1	BONNET	NOT DAMAGED	1,034.70	-
1	BONNET LOCK ASSY	NOT DAMAGED	234.60	-
1	FRONT BUMPER	BROKEN	1,050.00	1,050.00
1	FRONT BUMPER LOWER	NO SUCH PARTS	485.60	-
2	FRONT BUMPER SIDE RETAINER @\$72.00	NECESSARY	144.00	144.00
1	FRONT BUMPER REINFORCEMENT	BENT	486.00	486.00
1	FRONT BUMPER CENTRE GRILLE	BROKEN	198.60	198.60
2	FRONT BUMPER FOG LAMP @\$456.70	BROKEN	913.40	913.40
2	FRONT BUMPER FOG LAMP GARNISH @\$126.20	BROKEN	252.40	252.40
1	FRONT BUMPER TOW CAP	MISSING	83.20	83.20
2	FRONT GRILLE TOP BRACKET SIDE @\$87.30	NECESSARY	174.60	174.60
1	FRONT GRILLE TOP BRACKET CENTRE	NOT NECESSARY	198.00	-
2	HEADLAMP ASSY @\$2145.90	BROKEN	4,291.80	4,291.80
2	HEADLAMP BRACKET @\$76.00	NECESSARY	152.00	152.00
1	FRONT SUPPORT PANEL	NOT DAMAGED	898.00	-
1	FRONT SUPPORT PANEL TOP GARNISH	NOT DAMAGED	185.00	-
2	FRONT FENDER @\$785.00	NOT DAMAGED	1,570.00	-
2	FRONT FENDER ARCH PROTECTOR @\$128.90	NOT DAMAGED	257.80	-
1	AIRCON CONDENSER	DENTED	985.00	985.00
1	AIRCON SUCTION HOSE	NECESSARY	398.00	398.00
1	AIRCON DISCHARGE HOSE	NECESSARY	352.00	352.00
1	RADIATOR	NOT DAMAGED	987.90	-
	LESS 20% DISCOUNT		-6,522.32	-4,383.24
			26,089.28	17,532.96
	SPECIAL NETT ITEMS			
1	SUNDRIES (SN)	NOT NECESSARY	80.00	-
1	TAILGATE SEALANT (SN)	NECESSARY	100.00	30.00
1	TAILGATE OUTER GARNISH CLIPS (SN)	NECESSARY	50.00	20.00
2	TAILGATE LAMP CLIPS @\$50.00 (SN)	NOT NECESSARY	100.00	-
2	TAILGATE LAMP SEAL @\$60.00 (SN)	NECESSARY	120.00	20.00
1	TAILGATE INNER TRIMBOARD CLIPS (SN)	NECESSARY	50.00	30.00
1	TAILGATE WINDSCREEN CLIPS (SN)	NOT NECESSARY	50.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	TAILGATE WINDSCREEN PRIMER AND CLEANER (SN)	NOT NECESSARY	80.00	-
1	TAILGATE WINDSCREEN SEALANT (SN)	NECESSARY	100.00	40.00
1	TAILGATE WINDSCREEN INNER SEAL (SN)	NOT NECESSARY	60.00	-
1	REAR BUMPER CLIPS (SN)	NECESSARY	100.00	30.00
2	REAR BUMPER SIDE GARNISH CLIPS @\$50.00 (SN)	NOT NECESSARY	100.00	-
1	REAR END PANEL SEALANT (SN)	NECESSARY	100.00	30.00
1	REAR END PANEL TOP GARNISH CLIPS (SN)	NECESSARY	50.00	30.00
1	SPARE TYRE PANEL SEALANT (SN)	NECESSARY	100.00	30.00
1	SPARE TYRE PANEL LOWER SPLASH COVER CLIPS (SN)	NOT NECESSARY	50.00	-
2	REAR FENDER SEALANT @\$100.00 (SN)	NOT NECESSARY	200.00	-
2	REAR FENDER INNER TRIM BOARD CLIPS @\$50.00 (SN)	NECESSARY	100.00	40.00
2	REAR FENDER ARCH GARNISH CLIPS @\$50.00 (SN)	NECESSARY	100.00	30.00
1	REAR CHASSIS MEMBER SEALANT (SN)	NOT NECESSARY	100.00	-
2	TAILLAMP CLIPS @\$50.00 (SN)	NECESSARY	100.00	20.00
2	TAILLAMP SEAL @\$60.00 (SN)	NECESSARY	120.00	40.00
1	REAR NUMBER PLATE W/CASING (SN)	NOT NECESSARY	80.00	-
1	REVERSE CAMERA (SN)	NOT DAMAGED	480.00	-
2	REAR BUMPER REVERSE SENSOR @\$250.00 (SN)	SHORT CIRCUIT	500.00	200.00
1	BONNET SEALANT (SN)	NOT NECESSARY	100.00	-
1	FRONT BUMPER CLIPS (SN)	NECESSARY	50.00	30.00
1	FRONT BUMPER LOWER CLIPS (SN)	NECESSARY	50.00	30.00
1	FRONT BUMPER CENTRE GRILLE CLIPS (SN)	NECESSARY	50.00	20.00
2	FRONT BUMPER FOG LAMP GARNISH CLIPS @\$50.00 (SN)	NOT NECESSARY	100.00	-
1	FRONT GRILLE (CARBON FIBRE) (SN)	BROKEN	850.00	850.00
1	FRONT GRILLE CLIPS (SN)	NECESSARY	50.00	30.00
1	FRONT SUPPORT PANEL SEALANT (SN)	NOT NECESSARY	100.00	-
1	FRONT SUPPORT PANEL TOP GARNISH CLIPS (SN)	NECESSARY	50.00	20.00
2	FRONT FENDER SEALANT @\$100.00 (SN)	NOT NECESSARY	200.00	-
2	FRONT FENDER ARCH GARNISH CLIPS @\$50.00 (SN)	NECESSARY	100.00	20.00
1	RADIATOR COOLANT (SN)	NECESSARY	80.00	40.00
1	AIR CON FLUID (SN)	NECESSARY	80.00	80.00
1	FRONT NUMBER PLATE W/CASING (SN)	BROKEN	80.00	60.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
			5,010.00	1,770.00
	<u>LABOUR</u>			
	R&R TAILGATE COMPONENT.		150.00	80.00
	R&R TAILGATE WINDSCREEN.		250.00	120.00
	R&R REAR BUMPER REVERSE SENSOR.		100.00	60.00
	R&R REVERSE CAMERA.	NOT NECESSARY	150.00	-
	R&R EXHAUST PIPE.		150.00	50.00
	REAR CHECK WIRING.	NOT NECESSARY	100.00	-
	CONDUCT WATER LEAKAGE TEST.	NOT NECESSARY	100.00	-
	REAR UPHOLSTERY.	NOT NECESSARY	300.00	-
	REAR PANEL BEATING.		1,800.00	1,000.00
	REAR RUST PROOFING.	NOT NECESSARY	200.00	-
	REAR SPRAY PAINTING.		1,800.00	600.00
	R&R BONNET COMPONENT.	NOT NECESSARY	150.00	-
	R&R CONDENSER.		150.00	80.00
	R&R RADIATOR.		150.00	80.00
	FRONT CHECK WIRING.	NOT NECESSARY	100.00	-
	DIAGNOSTIC AND RESET FAULT CODE.	NOT NECESSARY	300.00	-
	FRONT UPHOLSTERY.	NOT NECESSARY	300.00	-
	FRONT PANEL BEATING.		1,200.00	600.00
	FRONT RUST PROOFING.	NOT NECESSARY	200.00	-
	FRONT SPRAY PAINTING.		1,200.00	400.00
			8,850.00	3,070.00
	GRAND TOTAL		39,949.28	22,372.96
		<u> </u>		

RECOMMENDED COST OF LUMP SUM REPAIRS		15,000.00
(TO ITS PRE-ACCIDENT CONDITION)		

Report Ref No. CS/EQI22004292/Bvy3e2



LIM TEOW GUAN

Automotive Assessor



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 contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.

SN0922590004 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 09/05/2022 11:50 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (09/05/2022 11:50 (SGT))

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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 09/05/2022 11:50 (SGT) Date of Accident 04/05/2022 20:15 (SGT) Exact Location of Accident Bukit Batok Rd, Singapore Additional Location Information TOWARDS TECK WHYE (BESIDE BLK 437A) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SGW378G**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner THAM TUCK MENG CALVIN NRIC No. S8116312Z Email Address calvinthamtuckmeng@gmail.com Mobile Phone No (Phone) +65-91766079 Alternative Phone No +65-91766079

VEHICLE PARTICULARS

Manufacturer Honda Model Hr-v 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 1497

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Type of Coverage Comprehensive Fleet Policy Policy Number 22-MR001776-R02 Cover Note Number

DRIVER

Name of Driver THAM TUCK MENG CALVIN NRIC No. S8116312Z

Date Of Birth 02/06/1981 Occupation Indoor Date Of Driving Pass 11/12/2009 Driving experience 12 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-91766079 Alt. Phone Number +65-91766079 Email Address calvinthamtuckmeng@gmail.com Address BLK 444 JURONG WEST AVENUE 1 #03-780 Address complement Postcode 640444 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 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 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο PASSENGER 1 Name TAN LI MING Gender Female PASSENGER 2 Name **AMANDA WONG** Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name Jurong Division Headquarters Police Station Phone No (Phone) +65-18007910000 Alt. Police Station Phone No (Fax) +65-68965647 Police Station Address No. 2 Jurong West Avenue 5 Singapore 649482 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT J/20220505/7028 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No

No

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ5090Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMC1596X
Vehicle Manufacturer	_
Vehicle Model	_
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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 Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	-
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	- -

INJURED 3

Name of injured person Gender	TAN LI MING Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SGW378G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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.
- Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 (# driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre

Personnel

Sketch Plan

LECHU: SGW 378G VECHZ: SKJ SOGOZ VECH (: SMC1596X

BUICH BUTCH MU TOWARDS TECK WHYE (BESIVE 131/K 437/A)

45	Circumstances	IN	4:1106	1.6 101	11	-1002	0505/	020	-
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We decl	are the foregoing p	particulars	are true in every	respect					
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No. 12 and the last of the									





Report No. J/20220505/7028

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No:1800-7910000

Date/Time Report Made 05/05/2022 13:36	Vide Report No.		Station Diary No.	
Name Of Informant THAM TUCK MENG CALVIN	Address 444 JURONG WEST AVENUE 1 #03-780 SINGAPORE 640444			
ID Type / ID No. NRIC NO / S8116312Z	1700110101100		Mobile: 91766079	
Nationality SINGAPORE CITIZEN	Email Address CALVINTHAMTUCKMENG@GMAIL.COM			
Occupation Unemployed	Sex Male	Age 40	Date of Birth 02/06/1981	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 04/05/2022 20:15 - 04/05/2022 20:30	Location Of Incident BUKIT BATOK ROAD			
Brief details.				

On the stated time and date, I (SGW378G) was driving along Bukit Batok road towards Teck Whye. While on the right most lane, the front vehicle slowed down to stop, and I followed suit. Suddenly, there was a huge impact from our rear and pushed my vehicle forward to collide onto the vehicle(SMC1596X) in front of my car. When we alighted to check, I realized that (SKJ5090Z) had failed to brake in time and collided onto our rear causing this chain collision. At the point of time, I have 2 passengers on in my car namely (Amanda Wong S9305729E) (Tan Li Ming G2338312N)I felt pain and discomfort and I went to Raffles medical to consult the doctor.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 05/05/2022 13:36		
Officer In-Charge Of Case:	Classification Of Case:		





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20220505/7028

Victim			STATE OF THE PARTY
Person Name	THAM TUCK MENG CALVIN		4
ID Type	NRIC NO	ID No	S8116312Z
Gender	Male	Age	40
Race	Chinese	Language	English
Occupation	Unemployed	Address	444 JURONG WEST AVENUE 1 #03-780 SINGAPORE 640444
Mobile No	91766079	Is Informant A Victim?	Yes
Person Name	THAM TUCK MENG CALVIN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 05/05/2022 13:36		
Officer In-Charge Of Case:	Classification Of Case:		



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

PHOTOGRAPHS FOR VEHICLE NO. SGW 378G

INSPECTION















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RE-INSPECTION















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