



# JusEquity Law Corporation

**ADVOCATES & SOLICITORS • COMMISSIONER FOR OATHS**

133 New Bridge Road #10-03 Chinatown Point Singapore 059413

Telephone: (65) 6536 9339

Fax: (65) 6536 5368 (Litigation & Conveyancing)

Email: [claims@juseq.com.sg](mailto:claims@juseq.com.sg)

Website: [www.juseq.com.sg](http://www.juseq.com.sg)

Our Ref: JEQ/220576/0922 (HSP)

Your Ref: S2M046SL

14 November 2022

**AXA INSURANCE PTE LTD**

9 North Buona Vista Drive

#18-01/06 Tower 1 The Metropolis

Singapore 138586

Attn: Motor Claims Department

By Email  
**WITHOUT PREJUDICE**

Dear Sir / Madam

**PROPERTY DAMAGE CLAIM BY EBENEZER NDT SERVICES PTE LTD ARISING FROM  
ACCIDENT INVOLVING VEHICLES YP6034H AND SHC1041P ALONG HUME AVENUE ON  
12/7/2022 AT ABOUT 1530 HOURS**

We act for Ebenezer NDT Services Pte Ltd, the owner(s) of motor vehicle no. YP6034H.

We are instructed to claim damages against you as the insurers for motor vehicle number SHC1041P as a result of the aforesaid accident.

We are further instructed that the accident was caused by the negligence of your insured driver in the driving, management and control of vehicle registration number SHC1041P.

As a result of the accident, our client / clients has / have suffered loss and expense, particulars of which are as follows: -

**A. Damages**

a. Cost of repairs + GST	\$ 11,770.00
b. Loss of use (\$180.00 x 15 days)	\$ 2,700.00

**B. Disbursements (at this stage)**

a. LTA search fees	\$ 7.49
b. GIA report / search fees	\$ 31.00
c. Survey report fees	\$ 1,055.00
d. Miscellaneous expenses	\$ 53.50

<b>C. Costs + GST</b>	<b>\$ 1,070.00</b>
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**CONFIDENTIALITY CAUTION**

This message is intended only for the use of the individual or entity to whom it is addressed and contains information that is privileged and confidential. If you, the reader of this message, are not the intended recipient, you should not disseminate, distribute or copy this communication. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address at our expense. Thank you.



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Website: [www.juseq.com.sg](http://www.juseq.com.sg)

We attach herewith the following documents in support of our client's / clients' claim: -

- a. GIA / Police report lodged by our clients' driver;
- b. GIA report lodged by your insured driver;
- c. Tax invoice from GIA;
- d. LTA search result with payment receipt;
- e. Tax invoice from HS Automotives Pte Ltd;
- f. Accident Vehicle Survey Report with photographs and invoice from PAR Automotive Consultancy;
- g. Certificate of Insurance of our clients' vehicle YP6034H; and
- h. Our Notice of Accident to you via email on 5 September 2022.

We note that you had appointed LKK Auto Consultants Pte Ltd to survey our client's / clients' vehicle number YP6034H.

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, failing which our client(s) can commence court proceedings against you without further notice to you or your insurer.

Please also note that if you have a counterclaim against our client(s) arising out of the accident, you are 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.

Yours faithfully

Encs

Cc client(s)

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## 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	16/07/2022 11:06 (SGT)
Reported by	Driver
Date of Accident	12/07/2022 15:30 (SGT)
Exact Location of Accident	Hume Ave, Singapore
Additional Location Information	L/P 32
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number YP6034H

#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	EBENEZER NDT SERVICES PTE LTD
Company Reg No	199703920N
Email Address	hupsoon238@yahoo.com
Mobile Phone No	(Phone) +65-97823996
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	FSR34SUQCC
Variant	FSR34SUQCC
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	7790

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNA00059232100

#### DRIVER

Name of Driver	THURAI SAMY RAVI CHANDRAN
Work Permit No	G7415285L
Date Of Birth	03/04/1978
Occupation	Outdoor

Date Of Driving Pass	03/03/2022
Driving experience	4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84551896
Alt. Phone Number	-
Email Address	hupsoon238@yahoo.com
Address	33 KIAN TECK WAY
Address complement	-
Postcode	628746
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Collided into Parked Vehicle
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?	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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
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

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC1041P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-





Vehicle Colour	-
Vehicle Category	Taxi
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)	1

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	TAXIDRIVER
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SHC1041P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

**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 lodging 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.

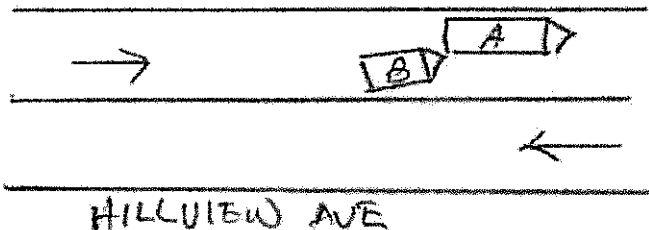


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A. 4P6034A  
B. 84C1041P

## IMPORTANT NOTICE

- Consent under the Personal Data Protection Act (PDPA)**

(a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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 Insurers 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:

- (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.

Donor's Signature of deliver is not the policy transfer. Date  
& Time

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[illegible]

Describe Circumstance of the Accident

REFER TO POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect.



*[Signature]*

Policyholder's Signature / Date & Time

*[Signature]*

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

*[Signature]*

Witnessed by Reporting Center Personnel  
(Name as in NRCHD card)




**SINGAPORE  
POLICE FORCE**


T/20220712/2108

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

1 of 3

Report No. T/20220712/2108

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/07/2022 21:21		Vide Report No.: J/20220712/0089		Station Diary No.: 194	
<b>Informant's Particulars</b>					
Name of Informant: THURAI SAMY RAVI CHANDRAN			Address: APT BLK 9 KIAN TECK DRIVE #03-304 SINGAPORE 628826		
ID Type / ID No.: FIN NO / G7415285L			Contact No.: Home/Office: Mobile: 84551896		
Nationality: INDIAN			Email:		
Sex: Male	Age: 44	Date of Birth: 03/04/1978	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: Mover			Driving Licence Information: Class:		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 12/07/2022 03:20	Type of Location: Gradient
Location:  HUME AVENUE				
Lamp Post Number: 32				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC1041P	TAXI				Slightly Damaged	3
YP6034H	Lorry				Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20220712/2108

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

2 of 3

Report No. T/20220712/2108

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	THURAI SAMY RAVI CHANDRAN	ID No.	G7415285L
Related Vehicle	NIL	Contact No.	84551896
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 12/07/2022 at about 0323hrs, I was in my lorry bearing the plate number, YP6034H. I was parked on the side of the road at the above location when a blue taxi bearing the license plate number, SHC1041, collided into the rear right side of my lorry. The taxi's front left bumper got stuck under the left rear side of my lorry. The left front tires was punctured and the front left side and bumper was damaged. My lorry suffered damages on the rear bumper and rear brake lights. The taxi driver was conveyed to hospital by ambulance and I was informed to lodge a report by the TP officer at scene and also my employer. Incident vide J/20220712/0089. I am not suffering from any injuries.

**SINGAPORE  
POLICE FORCE**

T/20220712/2108

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

3 of 3

Report No. T/20220712/2108

**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/

SGT 2 MUHAMMAD YUSRI BIN  
JUMARI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

12/07/2022 21:21

Officer In Charge Of Case:

TP / GIT /

SGT 3 MUHAMMAD SYARIFUDDIN

MUHAMMAD AJMAIN

Contact No.: 65476367

Classification Of Case:

NP168



# 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 Actual 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.
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5. Any false reporting may be referred to the Police for investigation.
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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.

## ACCIDENT STATEMENT

Date of Submission	14/07/2022 16:58 (SGT)
Reported by	Driver
Date of Accident	12/07/2022 15:30 (SGT)
Exact Location of Accident	Hume Ave, Singapore
Additional Location Information	TOWARDS HILLVIEW AVE
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC1041P
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
VEHICLE PARTICULARS	
Manufacturer	Hyundai
Model	Ae ioniq
Variant	-
Vehicle Category	Taxi
Transmission	Auto
CC	1580

## INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	VFX/P2419138

## DRIVER

Name of Driver	TAN SENG HOCK
NRIC No	S2057363E
Address	BLK 315B PUNGGOL WAY #04-879
Address complement	-
Postcode	822315
Does Driver Own Other Vehicles?	No

## GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
------------------	--------------------------

Weather Conditions Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No  
Was anybody injured in the Accident? Yes  
Was any other vehicle or property damaged? Yes  
Number of Passengers (Including Driver) 4  
Translator's name -  
Translator's ID -  
Translator's phone number -  
Translator's email -  
Original language used in the statement -

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE POLICE REPORT T/20220713/2063

ATTACHMENT(S)

Are accident photos available for attachment? Yes  
Was there any video captured by Car Camera? Yes  
Reasons for not uploading a video of the accident FILE IS NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YP6034H  
Vehicle Manufacturer -  
Vehicle Model -  
Vehicle Variant -  
Vehicle Colour -  
Vehicle Category Commercial vehicle  
Name of Driver UNKNOWN  
Insurance Company Name -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person TAN SENG HOCK  
Gender Male  
Phone No (Phone) +65-96988533  
Injured person in which vehicle? SHC1041P

# 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 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.

Policyholder's Signature / Date & Time

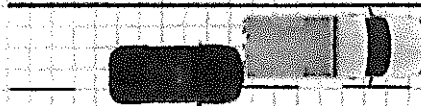
Sketch Plan

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

Witnessed by Reporting Centre Personnel

A - SHC 1041P

B - YP 6034H



→ TOWARDS HILL VIEW AVE  
HUME AVE

Describe Circumstances of the Accident

REFER TO POLICE REPORT  
T/20220713/2063

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

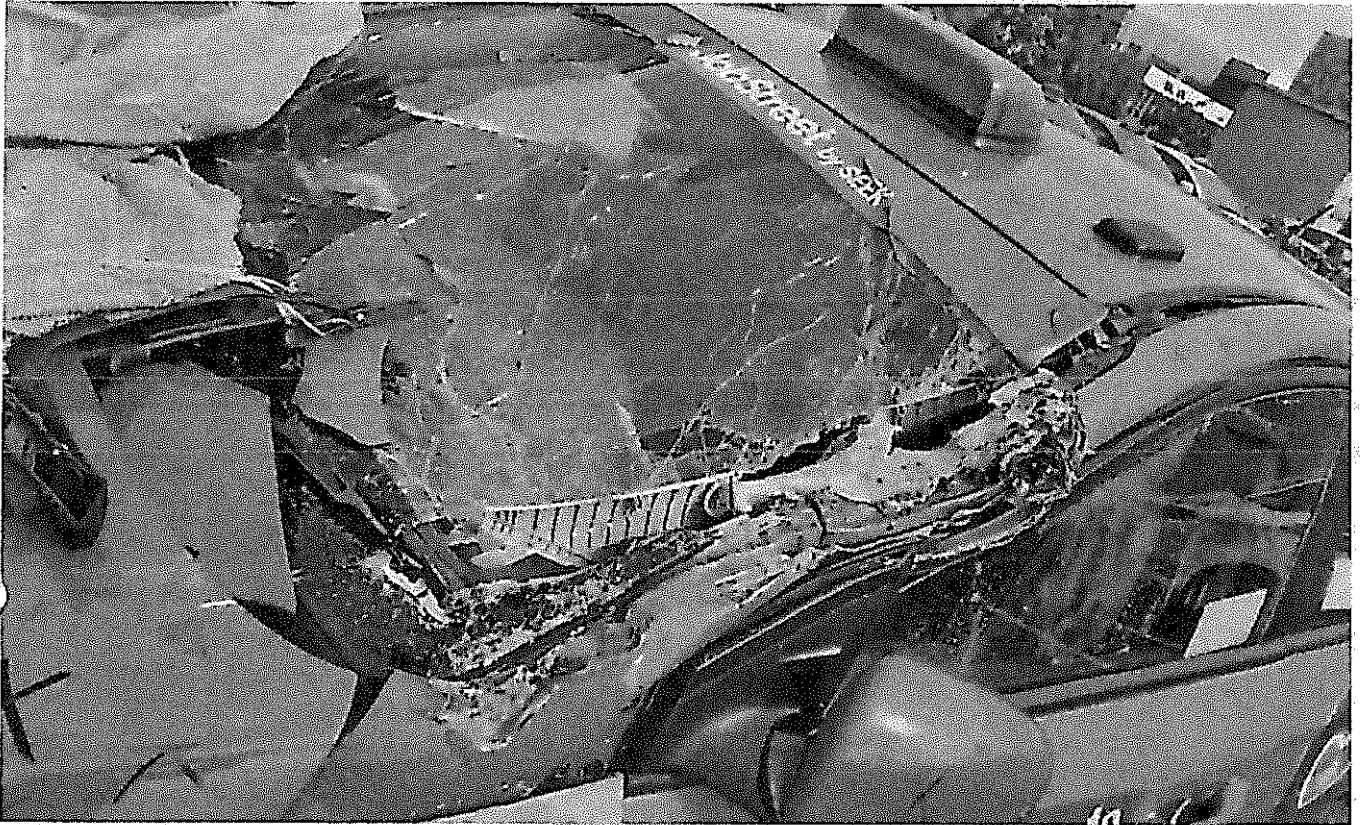
1407.2022 1010HRS

1407.2022 1010HRS
















**SINGAPORE  
POLICE FORCE**


T/20220713/2063

1 of 3

Police Station Of Origin:  
Punggol N.P.C  
151 Punggol Central SINGAPORE 828727  
Tel No: 1800-6049999

Report No. T/20220713/2063

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 13/07/2022 15:30		Vide Report No.: J/20220712/0089		Station Diary No.: 35
<b>Informant's Particulars</b>				
Name of Informant: TAN SENG HOCK		Address: APT BLK 315B PUNGGOL WAY #04-679 SINGAPORE 822315		
ID Type / ID No.: NRIC NO / S2057363E		Contact No.: Home/Office: Mobile: 96988533		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 71	Date of Birth: 01/01/1951	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Taxi driver		Driving Licence Information: Class: 3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 12/07/2022 15:30	Type of Location: Straight Road
Location:  HUME AVENUE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC1041P	Car				Slightly Damaged	3
YP6034H	Lorry				Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20220713/2063

2 of 3

Police Station Of Origin:  
Punggol N.P.C  
151 Punggol Central SINGAPORE 828727  
Tel No: 1800-6049999

Report No. T/20220713/2063

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	TAN SENG HOCK	ID No.	S2057363E
Related Vehicle	SHC1041P (Car)	Contact No.	96988533
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	12/07/2022	Date Discharge	12/07/2022
No. of Days granted Medical Leave	03	Degree of Injury	NIL

**Brief Details.**

On 12/07/2022 at about 1530hrs, I was driving my vehicle bearing SHC1041P along Hume Ave towards Hillview ave at the first lane on the extreme left lane and there were 3 passengers in my vehicle. There were lorry bearing YP6034H in front of me was stationary and I then change lane to the right to cut the lorry. I then collided into the lorry rear right of the vehicle. I then get down of the vehicle and saw no one in the lorry. My passenger was not injured and then left in the hurry. Shortly after ambulance and traffic police came to my scene. Ambulance then conveyed to Ng Teng Fong hospital as I felt pain on my chest.

I wish to state that there was in-car camera on my vehicle and the visibility of the road was clear.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Punggol N.P.C  
151 Punggol Central SINGAPORE 828727  
Tel No: 1800-6049999



T202207132003

1 of 1



Report No: T202207132003

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: F / SGT 2 WU MING HAN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 13/07/2022 15:30
Officer In Charge Of Case: TP / GIT / SI KOH WEI JIE Contact No.: 97303412	Classification Of Case:

NP168



**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: SJ0G227E0014 Vehicle Registration No: SHC1041P  
 Name (as shown in work): Combi Transportation Pte Ltd NRIC/FIN/Passport No: 1XXXXX821R  
 (\* Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: \_\_\_\_\_ Singapore ( )  
 Contact (Tel): \_\_\_\_\_ Mobile No.: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Date of Accident: 12/07/2022 Time of Accident: 15:30  
 Place of Accident: Hume Ave.  
 Insurance Company: AXA Insurance 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:

ATTACHED PHOTOS

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 Policyholder / Driver's Signature  
 Date: \_\_\_\_\_

  
 Reporting Centre Personnel's Signature  
 Name: \_\_\_\_\_  
 NRIC/FIN No.: \_\_\_\_\_  
 Date: 26.07.2022

SLM001C Addendum Form



RECORD MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

9 Temasek Boulevard, Suntec City Tower Two #42-01B  
Singapore 038989

E-mail: [gears-support@shift-technology.com](mailto:gears-support@shift-technology.com)

GST Registration: M400017735

## TAX INVOICE

Date of Request: 06/09/2022

Your Ref No: 220576 ZL

Dear Sir/Madam,

Date of Accident: 12/07/2022 00:00 (SGT)

Vehicle No: YP6034H

Place of Accident: Hume Ave, Singapore

With reference to your application for the accident report, we have attached the following accident report as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SHC1041P	Hume Ave, Singapore	(31.00 )	1	(28.97 )
GST Amount				(2.03 )
Total Amount Due (GST Inclusive)				(31.00 )

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank you.

This is a computer generated document and requires no signature.



# Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars ( As At 12 Jul 2022 / 15:30:00 )

## Vehicle Insurance Details

Vehicle No.:

**SHC1041P**

Make Description/Model:

**HYUNDAI / AE IONIQ HEV 1.6 DCT**

Insurance Company Name:

**AXA INSURANCE PTE LTD**

Business Transaction Reference No.:

**20220718131212986461**

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

Save as PDF

OK →

Print



**Thank you**

You have successfully logged out.

Your last login date and time was 18 Jul 2022, 13:11:30.

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	Transaction Type	Transaction Amount(฿)	Log Date/Time
1	Vehicle	SHC1041P	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49	18 Jul 2022 /



Blk 2 Kaki Bukit AutoHub

#02-25 Kaki Bukit Ave 2 S4179210.

Phone: 6538 1368 Fax: 6538 1367

Email add: [hsautomotivespl@gmail.com](mailto:hsautomotivespl@gmail.com)

Date: 14th November 2022

Invoice #:

For: Motor Accident Claim

Bill To: **EBENEZER NDT SERVICES PTE LTD**

33 Kian Teck Way

Singapore 628746



Authorised Signature

# PAR Automotive Consultancy

Regn. No: 52986974L

Mailing Address : Blk 310 Shunfu Road #07-213, Singapore 570310. Tel : 645 31171

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Report No: 0102-22-HSA

07 November 2022

Ebenezer NDT Services Pte Ltd  
33 Kian Teck Way  
Singapore 628746

**INVOICE No. 0102-22-HSA**

Vehicle No. YP6034H

<u>S/NO.</u>	<u>SERVICES RENDERED</u>	<u>Amount due</u>
1	Being accident vehicle appraisal services, transport, photographs and re-inspection (work in progress and post repair inspection).	\$1,055.00
<b>Total amount payable</b>		<b><u>\$1,055.00</u></b>

Kindly cross your cheque in favour of "PAR Automotive Consultancy"

We thank you in anticipation for your prompt payment.

**PAR Automotive Consultancy**



# PAR Automotive Consultancy

Regn. No: 52986974L

Mailing Address : Blk 310 Shunfu Road #07-213, Singapore 570310. Tel : 645 31171

Report No: 0102-22-HSA

07 November 2022

## ACCIDENT VEHICLE SURVEY REPORT

Ebenezer NDT Services Pte Ltd  
33 Kian Teck Way  
Singapore 628746

### VEHICLE INFORMATION:

Vehicle Reg No.:	YP6034H	Odometer:	180447km
Make & Model:	Isuzu FSR34SUQCC	Colour:	White
Chassis number:	JALFSR347H7000011	Date of accident:	12/07/2022
Year of Regn.:	28/03/2017	Date inspected:	05/09/2022
Repairer at:	H S Automotives Pte Ltd	Date inspected (After Repair):	21/09/2022
	Blk 2 Kaki Bukit Ave 2 #02-25		
	Kaki Bukit Auto Hub		
	Singapore 417921		

### STATIC CHECKS, where applicable:

Steering :	serviceable
Footbrake :	serviceable
Handbrake :	serviceable
Paintwork :	Good
General condition :	Good

### TIRE CONDITION:

	<u>LH / Make</u>	<u>RH / Make</u>	<u>Size</u>
Front:	6mm/WMDforce	6mm/WMDforce	265/70R19
Rear:x2	6mm/WMDforce	6mm/WMDforce	265/70R19

### POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the rear RH portion.  
Please see details as described in the Annex for parts and labour.

### REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

**PAR Automotive Consultancy****Parts and Labour Assessment**

Report No: 0102-22-HSA

Vehicle No: YP6034H

Description of part	Qty	Condition as inspected	Repairer's estimate	Our adjustment
Rear tail lamp	1	broken	230.00	230.00
Rear cargo carrier rear end cross member (wooden)	1	cracked	1,500.00	1,500.00
<i>Subtotal before discount</i>			1,730.00	1,730.00
<i>Percentage discount</i>	<i>0%</i>	<i>and 15%</i>	0.00	259.50
<b>Sub-total 1</b>			1,730.00	1,470.50
Rear platform	1	repair	9,500.00	0.00
Rear platform hydraulic jet top bracket	1	distorted	660.00	660.00
Rear hydraulic jet inner RH	1	bent/leak	3,500.00	3,500.00
Rear hydraulic jet outer RH	1	bent/leak	3,500.00	3,500.00
Rear hydraulic jet pin pivot inner RH	2	necessary	210.00	210.00
Rear hydraulic jet pin pivot outer RH	2	necessary	210.00	210.00
Rear crash guard clw bracket RH	1	bent	450.00	450.00
Hydraulic oil	1	necessary	120.00	120.00
Platform reflective-sticker	2	necessary	160.00	160.00
Zepro reflective-sticker	1	necessary	180.00	180.00
Rear crash guard reflective sticker	1	necessary	120.00	120.00
<i>Subtotal before discount</i>			18,610.00	9,110.00
<i>Percentage discount</i>	<i>0%</i>	<i>and 0%</i>	0.00	0.00
<b>Sub-total 2</b>			18,610.00	9,110.00
<b>Parts-total</b>			<b>20,340.00</b>	<b>10,580.50</b>

**LABOUR**

1. To straighten and panel beating rear RH frame members. To remove and replaced rear cross member. To remove and refit above parts.	1,500.00	1,200.00
2. To putty respary painting and polish.	1,000.00	800.00
3. To repair rear platform.	1,000.00	700.00
4. To check and rectify wiring system.	120.00	50.00
5. To remove and refit platform hydraulic jet, check and bleed hydraulic.	800.00	500.00

<b>Labour total</b>	<b>4,420.00</b>	<b>3,250.00</b>
<b>Parts &amp; Labour total</b>	<b>24,760.00</b>	<b>13,830.50</b>

# PAR Automotive Consultancy

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on LUMP SUM repairs is :

**\$11,000.00**

and the recommended number of working days for the repairs is :

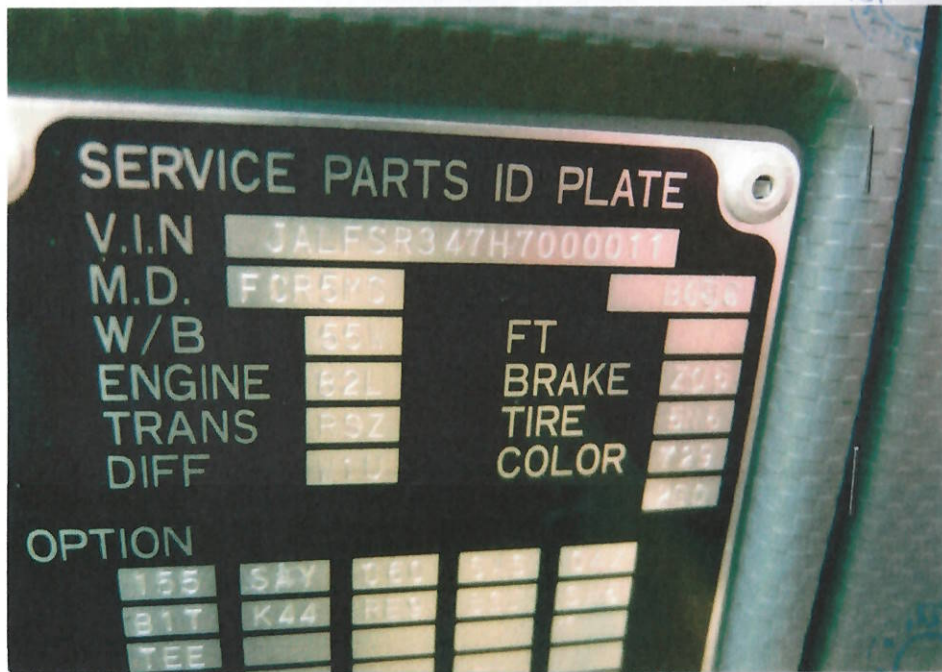
**12**



**B J Loi** (I Eng. MIMI, AIRTE)

Automotive Appraiser











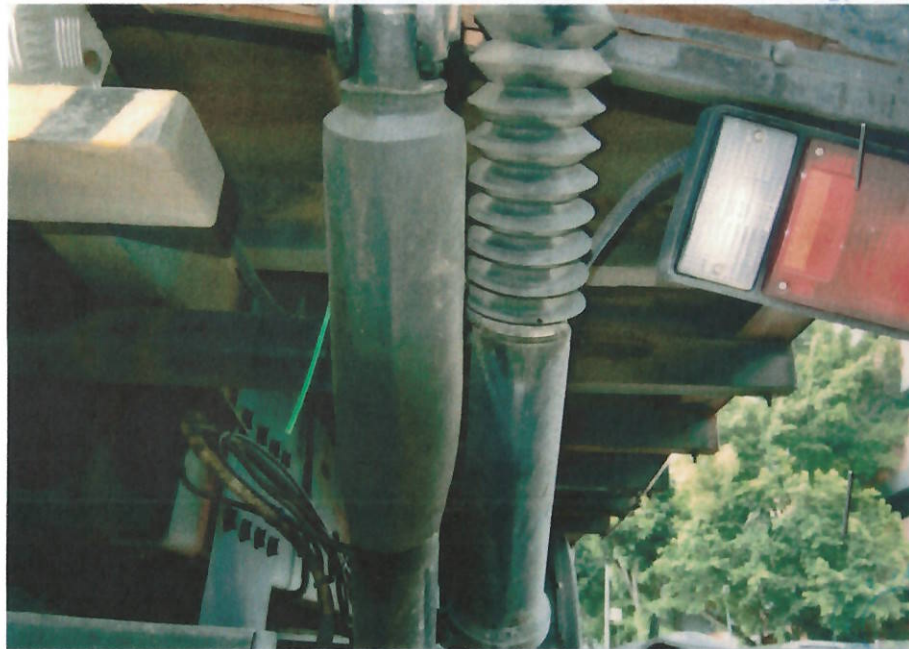
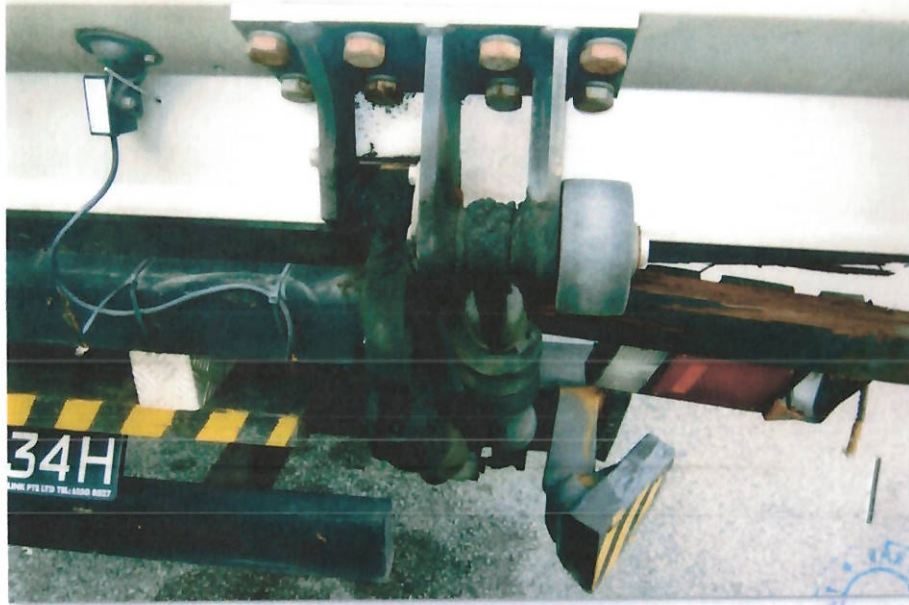




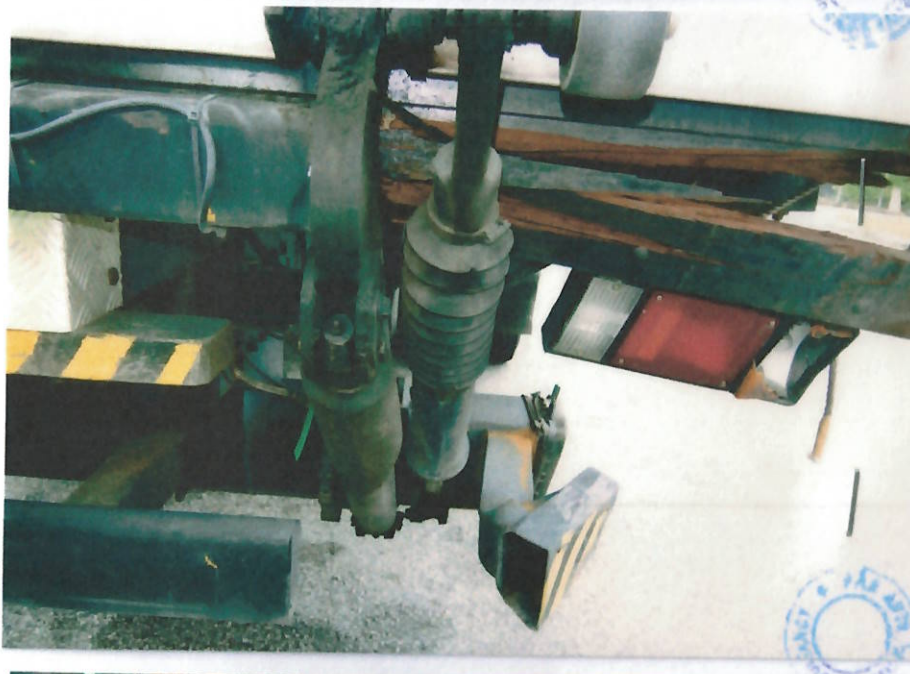


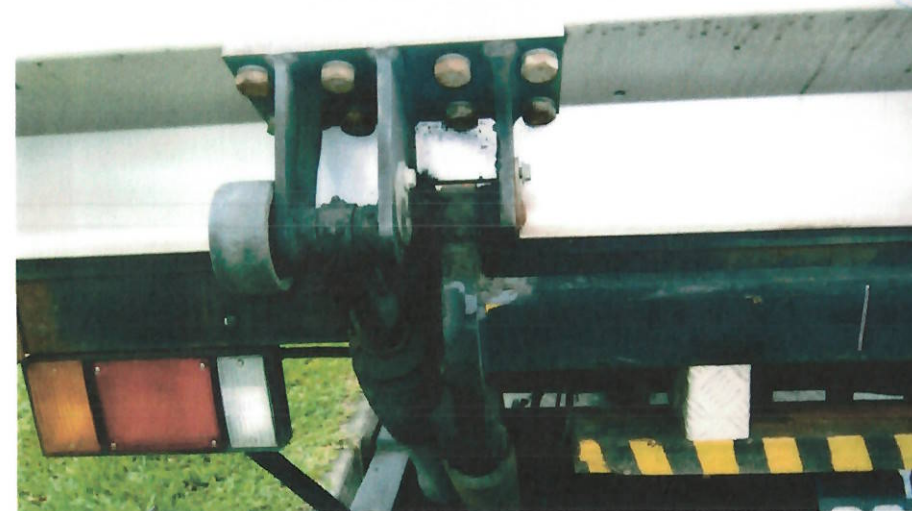
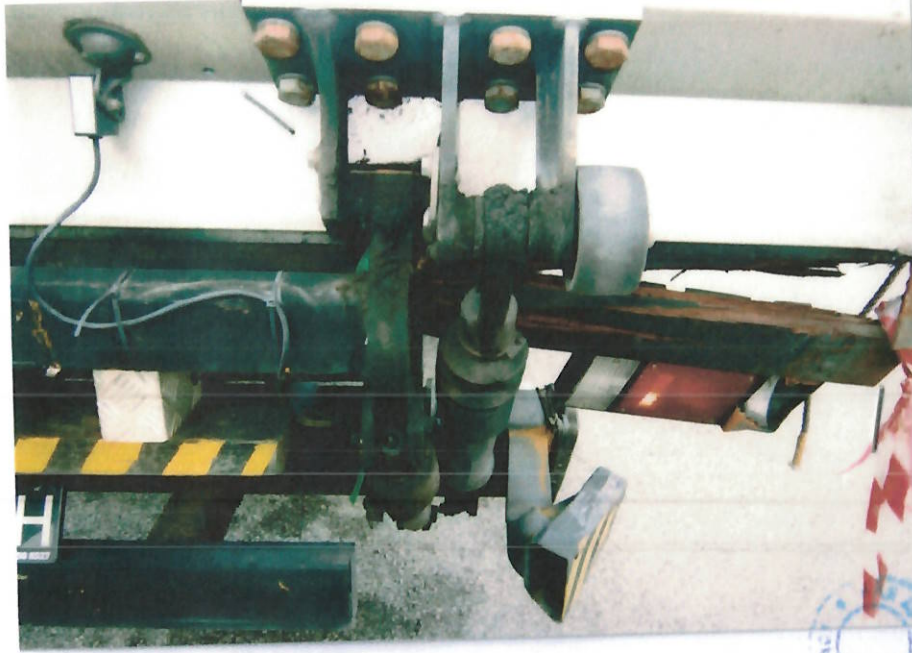




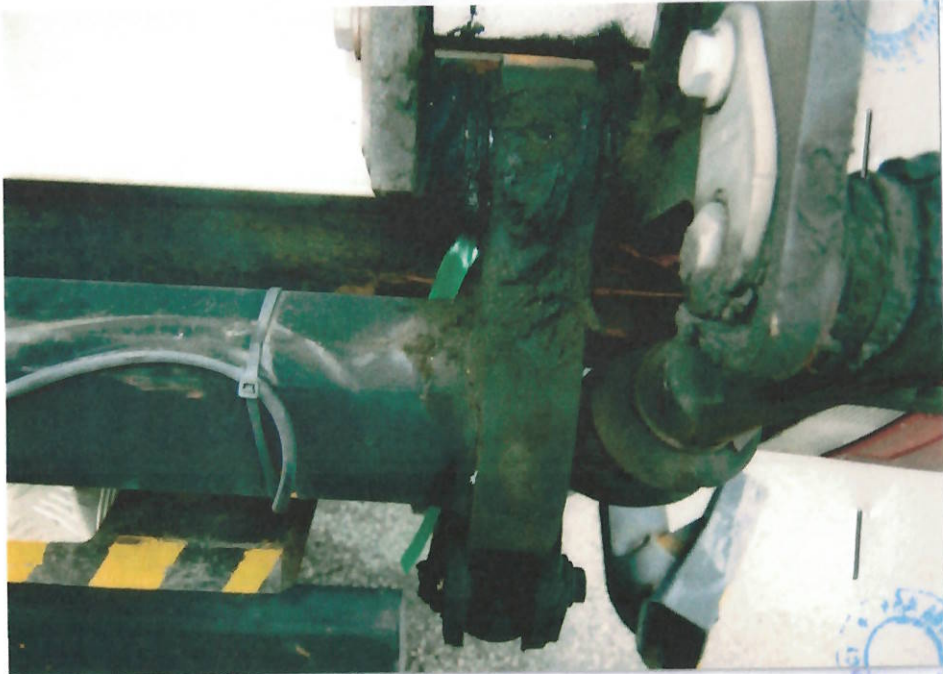


















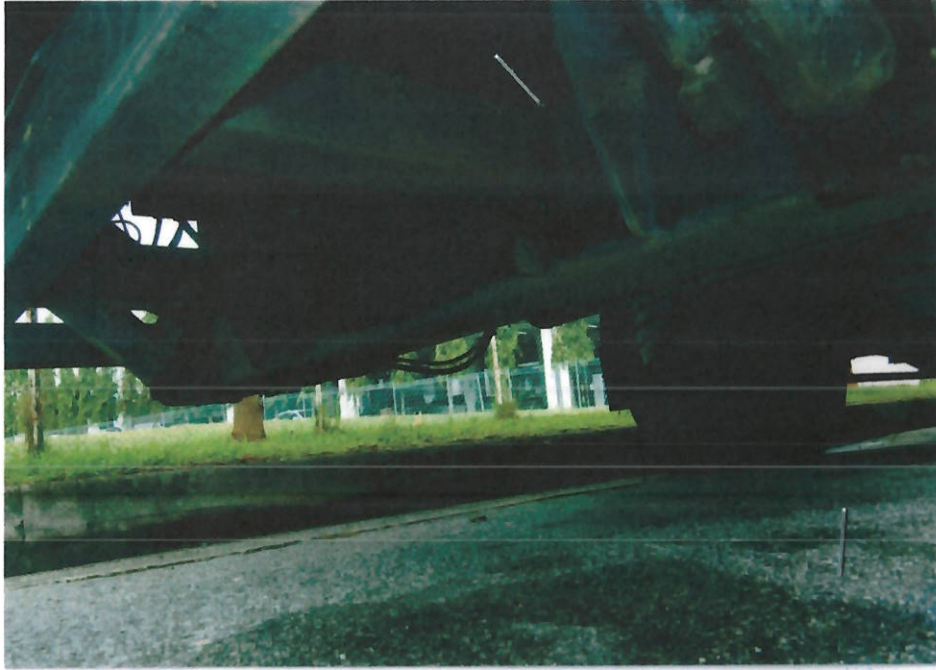






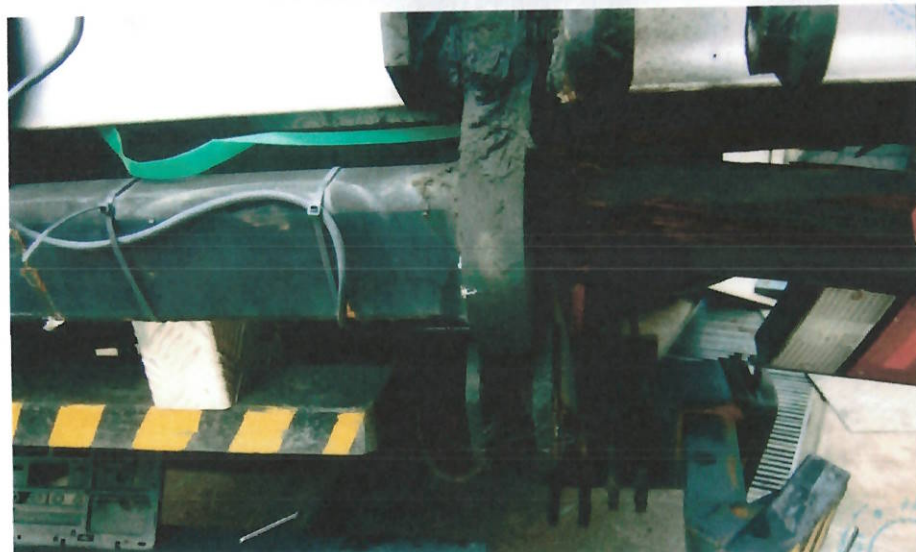
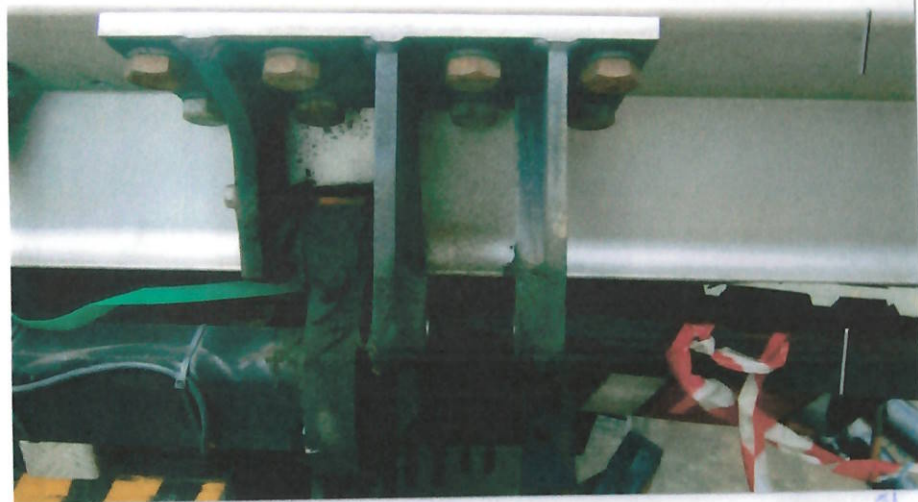




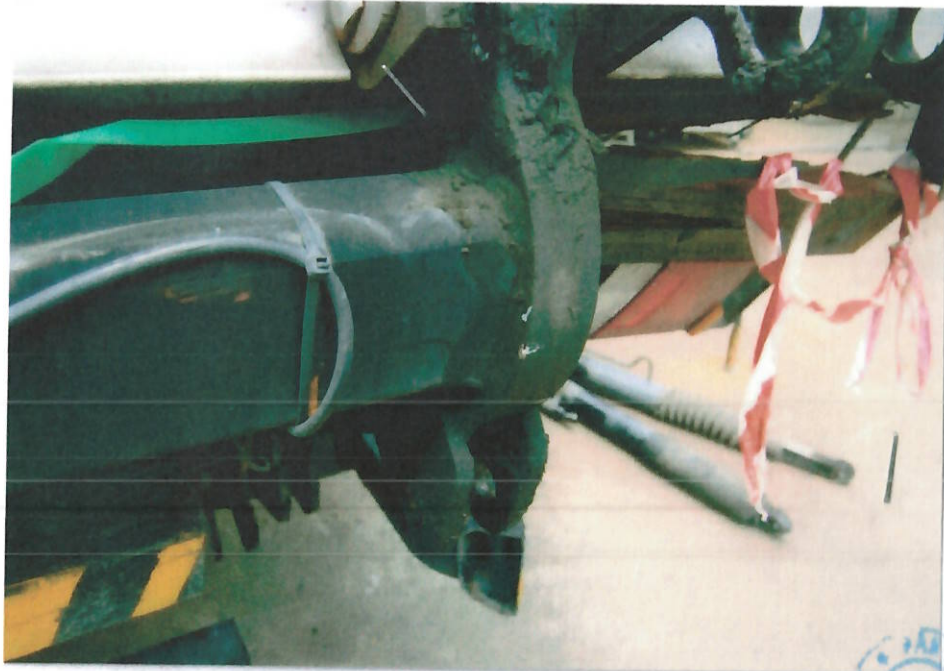










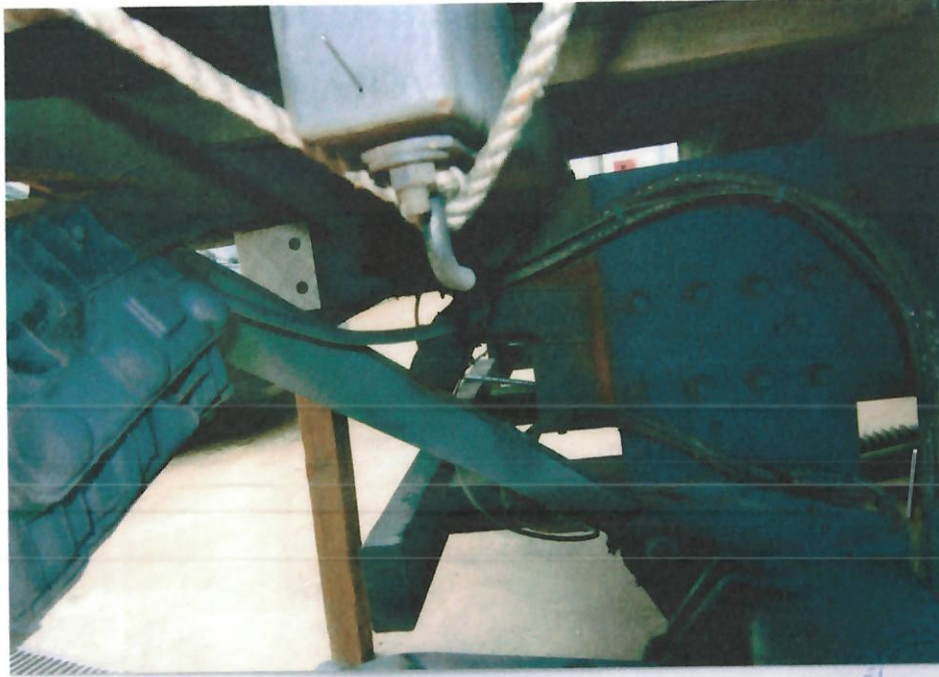








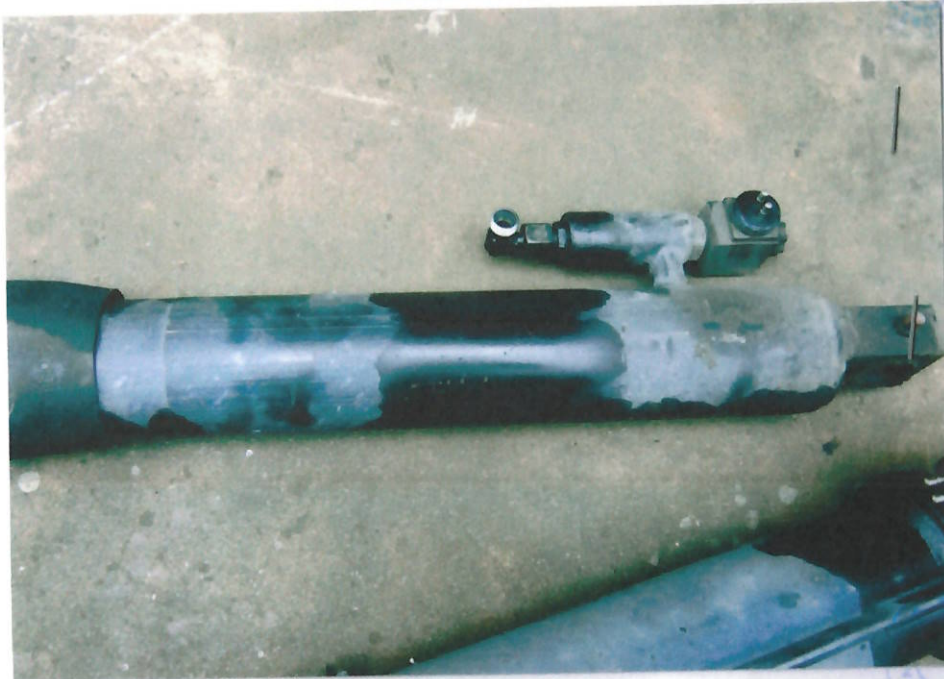
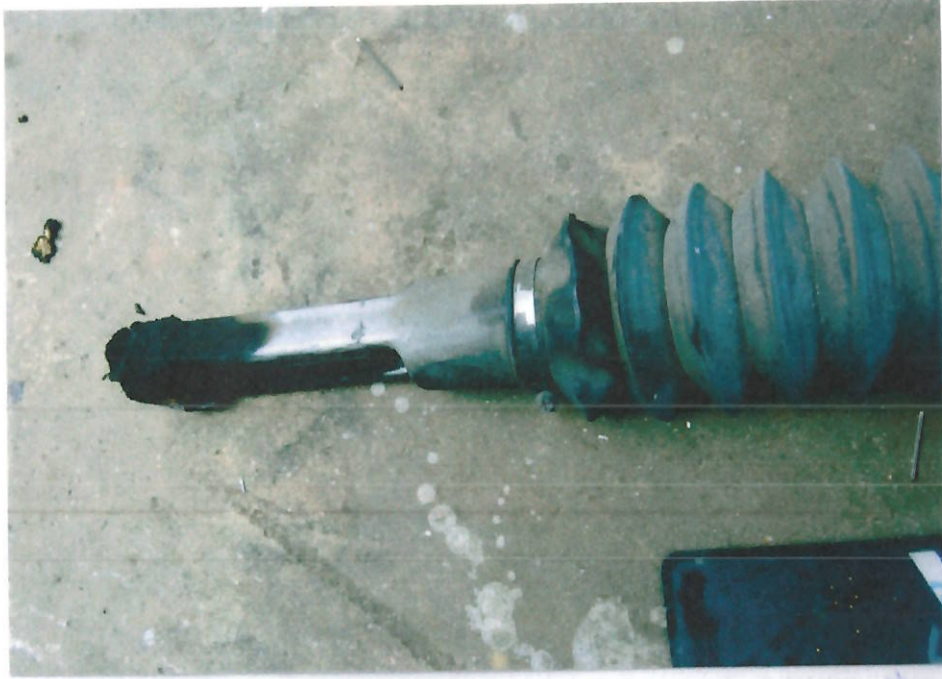










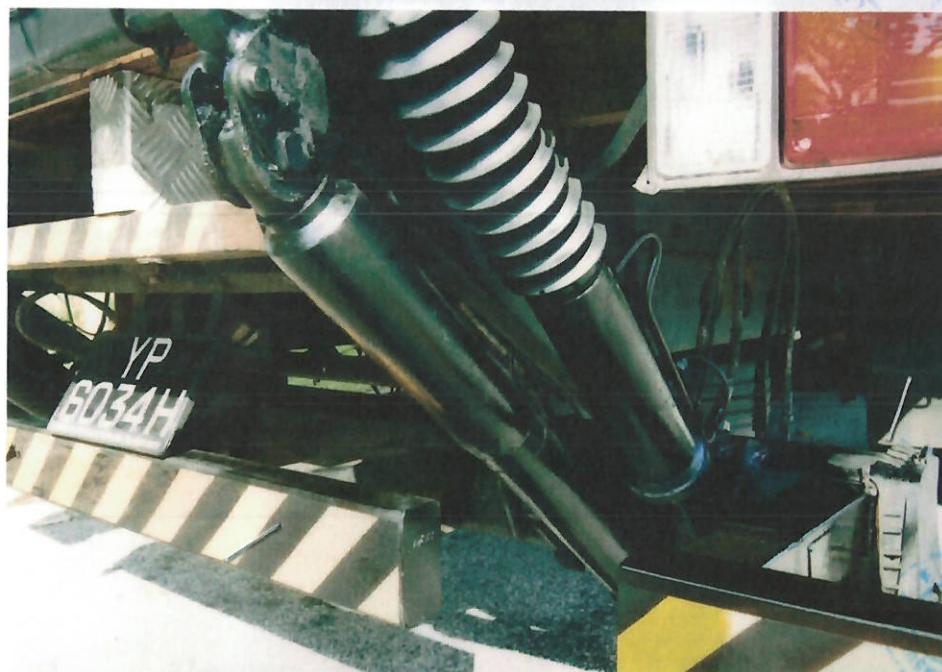




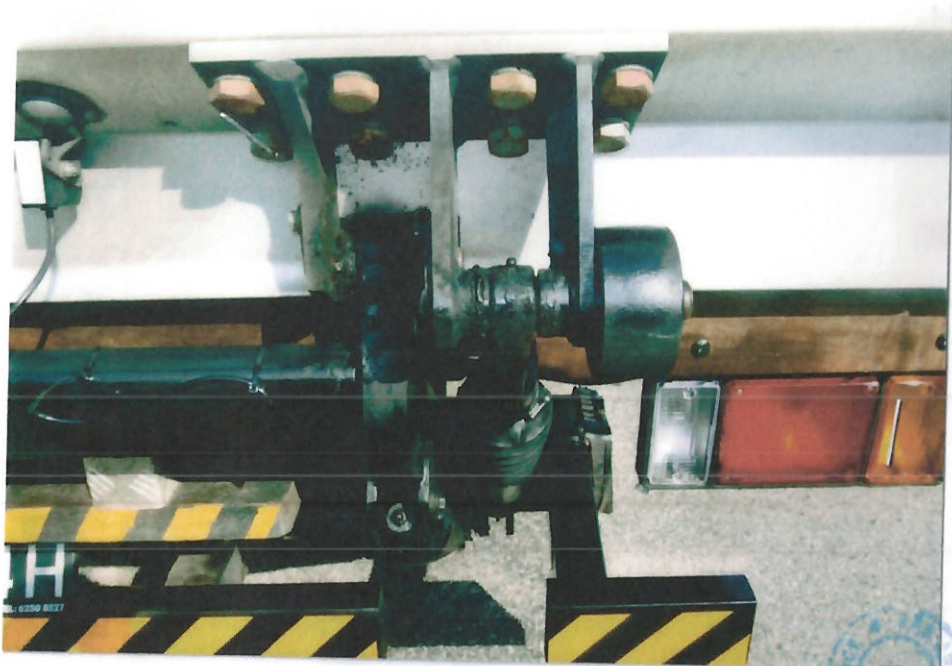
















Motor Commercial

MZ301/C

E SN

AN0679A

Cov. Type:C

**CERTIFICATE OF INSURANCE**

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMCVSNA00059232100	Engine No.: 6HK1694094	Cha. No.: JALFSR347H7000011
1. Index Mark and Registration Number of Vehicle	YP6034H		
2. Name of Policy Holder	EBENEZER NOT SERVICES PTE LTD		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	30/08/2021 (00:00:00)	Excess Sect I .	S\$1,000.00
		EX ON WINDSCREEN .	S\$100.00
4. Date of Expiry of Insurance	23/05/2022		
5. Persons or Classes of Persons entitled to drive*	<p>(1) Whilst the vehicle is being used in connection with the Policyholder's business Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.</p> <p>(2) Whilst the vehicle is being used for social, domestic or pleasure purposes Any person who is driving on the Policyholder's order or with their permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.</p>		
6. Limitations as to use.*	<p>(1) Use in connection with the Policyholder's business.</p> <p>(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.</p> <p>(3) Use for social, domestic or pleasure purposes.</p> <p>The Policy does not cover</p> <p>(1) Use for racing, pace-making, reliability trial or speed-testing.</p> <p>(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p> <p>(3) Use for the carriage of passengers for hire or reward.</p>		

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

**I/We hereby Certify** that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Moses Chia Wen Jye  
Authorised Officer

  
Authorised Signatory

**From:** zul@juseq.com.sg  
**Sent:** Monday, September 5, 2022 11:06 AM  
**To:** 'motor.survey@axa.com.sg'; 'motorclaims@axa.com.sg'  
**Cc:** 'claims@juseq.com.sg'  
**Subject:** NOTICE OF ACCIDENT - PRE-REPAIR INSPECTION - ACCIDENT INVOLVING YP6034H AND SHC1041P ON 12.07.2022 @ ABOUT 1530 HOURS  
**Attachments:** REPORT-YP6034H.pdf

Dear Sirs

Your Ref: **SHC1041P**  
Our Ref: JEQ/YP6034H/0922 (HSP)

**NOTICE OF ACCIDENT - PRE-REPAIR INSPECTION - OUR CLIENTS' / CLIENT' S VEHICLE: YP6034H**

We act for the owner / owners of motor vehicle no. **YP6034H**.

We are instructed to claim for damages against you in connection with the above accident and copy of our clients' / client' s GIA report is attached herewith for your attention.

Pursuant to the State Courts Practice Directions 2021, Appendix B: Pre-action Protocol for Personal Injury Claims and Non-Injury Motor Accident Claims, paragraph 2, we hereby give you notice to conduct a pre-repair inspection of our clients' / client' s motor vehicle no. YP6034H.

We would like to inform that our clients / client will be sending their / his / her vehicle no. YP6034H to the workshop as stated below: -

**H S Automotives Pte. Ltd.**  
Block 2 Kaki Bukit Avenue 2 #01-15  
Kaki Bukit AutoHub,  
Singapore 417921  
Tel: 6538 1368. Fax: 6538 1367  
Person In-Charge: Mr. Alex Lee

TAKE NOTICE that you are required to respond to us **within 2 working days** (excluding Saturday, Sunday and Public Holiday) of receipt of this notice as to whether you wish to carry out or waive a pre-repair inspection. If we do not hear from you in this regard by the stipulated time, we shall construe your silence as waiver of the requirement for a pre-repair inspection and our clients' / client' s repairers shall proceed to repair our clients' / client' s vehicle no. YP6034H.

We look forward to hearing from you by the stipulated time.

With Regards

*Zul*

On behalf of Mr. Caleb Tan  
JusEquity Law Corporation  
133 New Bridge Road #10-03  
Chinatown Point  
Singapore 059413  
Tel: 6536 9339  
Fax: 6536 5368