### LAWRENCE LEE & CO

Advocates & Solicitors 李伟平律师楼 UEN: 53159236K

Your ref:

(Please advise)

Our ref:

LWP/PZF/5021A/22/sm

19 MAY 2023

Mr Asok Kumar S/O Naraindas 8 Broadrick Road Singapore 439470 133 New Bridge Road #13-10 Chinatown Point Singapore 059413 tel: 6533 3680 fax: 6533 3689 email: info@lawrencelee.com.sg

This is a letter of claim issued pursuant to the State Courts Practice Directions 2021 APPENDIX B: Pre-Action Protocol for Personal Injury Claims and Non-Injury Motor Accident Claims

CERTIFICATE OF POSTING

Dear Sir

# ACCIDENT ALONG CHURCH ST TWDS CECIL ST ON 03.11.22 INVOLVING SNH1063D & EW5005Z (OWNER/DRIVER'S CLAIM)

We act for Mr Pang Zhi Feng, owner/driver of the above m/car registration no. SNH1063D.

We are instructed to claim damages against you in connection with the above road traffic accident involving our client's vehicle and m/car registration no. EW5005Z owned and driven by you at the material time.

We are instructed that the accident was caused by your negligent driving, management and/or control of your vehicle.

As a result of the accident, our client has suffered personal injuries and has been put to loss and expense. Our client's injuries are set out in the medical report annexed to this letter, particulars of which are as follows:-

#### Injuries

a. Back strain.

On a strictly without prejudice basis, we quantify our client's claim as follows:

#### **Particulars**

1.	General damages for pain and suffering	
	and loss of amenities	\$ 4,000.00
2.	Medical expenses	\$ 1,559.48
3.	Estimated transport expenses	\$ 30.00
4.	Estimated loss of earnings	\$ 325.00
	(5 days x \$65pd)	

5.	Cost of repairs	\$ 7,400.00
6.	Loss of use	\$ 1,200.00
	(10 days x \$120pd)	

#### Disbursements

7.	Survey fee	\$ 682.00
8.	LTA fee	\$ 7.49
9.	TP fees	\$ 34.00
10.	Medical report fee	\$ 176.03

For the purposes of our client's claim, we forward herewith copies of the following documents in the copy of this letter to your insurer:

- 1. LTA search on your vehicle with receipt;
- 2. Our client's LTA online enquiry and certificate of insurance;
- 3. Our client's GIA and TP reports with tax invoices;
- 4. Our client's passenger's TP report;
- 5. Repairer's invoice no. TP/23/01 from 18 Car Auto Services dated 14.01.23;
- 6. Survey report with 82 color photographs and invoice no. POS01126/22 from Pro-Option Services;
- 7. Medical report from Mount Alvernia Hospital ("MAH") dated 29.01.23 with receipt;
- 8. Medical receipt from MAH dated 03.11.22;
- 9. Medical certificate from MAH dated 03.11.22; &
- 10. Our client's Notice of Assessment for the year of assessment 2023.

In compliance with the pre-action protocol under the State Courts' Practice Direction 38, we propose using the medical expert(s) named above as single joint expert(s).

#### Please note that:

- a. If you are insured and you wish to claim under your insurance policy, you should immediately pass this letter to your insurer.
- b. 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. If you or your insurer wishes to have our client examined by your own medical expert, this should be stated in your acknowledgement of receipt.
- c. Should you fail to acknowledge receipt of this letter within 14 days, our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.
- d. If you have any witnesses, photographs of the accident scene, video and GIA/TP reports of the accident, please let us have them within 14 days of your receipt of this letter.

- e. If you have a counterclaim against our client arising out of the accident, you are also 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.
- f. In the event that your vehicle had been driven by someone not in the capacity as your servant/agent, please inform us in writing within 14 days otherwise we will name you as a defendant in the Writ that may be issued and you may be liable for legal costs.

Yours faithfully

LEE WEE PENG LAWRENCE Paralegal: Ms Lim Suk Mei

Email: sukmei@lawrencelee.com.sg

Encs by email only

Cc Liberty Insurance Pte Ltd

51 Club Street #03-00 Liberty House Singapore 069428

(Insurer of EW5005Z)

(Ref: IVS22/1947-PRS-PY/EC)

Cc Client

POST/EMAIL



# Enquire Vehicle Owner Details (As At 03 Nov 2022 / 17:50:00)

## Vehicle Owner Details

Owner ID Type:

Owner ID:

Singapore NRIC

S0188605C

Owner Name:

Registered Address Type:

ASOK KUMAR S/O NARAINDAS

Private Residential (Condo Apt or House) /

Shopping / Office Complexes

Registered Block/House No.:

Registered Street Name:

8

**BROADRICK ROAD** 

Registered Unit No.:

Registered Building Name:

Registered Postal Code:

439470

### Vehicle Insurance Details

Vehicle No.:

Make Description/Model:

EW5005Z

**ROLLS ROYCE / PHANTOM V12 MY19** 

Insurance Company Name:

LIBERTY INS PL



#### You have successfully logged out.

Your last login date and time was 22 Nov 2022, 17:45:40.

#### 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(S\$)	Log Date/Time:
1	Vehicle	EW5005Z	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49	22 Nov 2022 / 17:46:24

## > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	182B
Vehicle Details	
Vehicle No.:	SNH1063D
Vehicle to be Exported:	Yes
Intended Deregistration Date:	22 Nov 2022
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	GOLF GTI E35 2.0 AT 5K19P3 5DR
Primary Colour:	White
Manufacturing Year:	2011
Engine No.:	CDL061397
Chassis No.:	WVWZZZ1KZCW089497
Maximum Power Output:	173.0 kW (231 bhp)
Open Market Value:	\$33,373.00
Original Registration Date:	27 Dec 2011
First Registration Date:	27 Dec 2011
Transfer Count:	3
Actual ARF Paid:	\$33,373.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	30 Sep 2031
COE Calegory:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$58,124.00
COE Rebate Amount:	\$51,472.00
Total Rebate Amount:	\$51,472.00

The information contained herein is correct as at 22 Nov 2022

# **SINGAPORE ACCIDENT STATEMENT**

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

  2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

  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 3. Information provided must be as truthful and accurate as possible 13, information provided must be as truthful and accurate as possible 13, inclination of policy liability on the part of the insurance companies.

  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 05/11/2022 11:32 (SGT) Reported by Both Date of Accident 03/11/2022 17:50 (SGT) Exact Location of Accident Near 20 Cecil St. Singapore 049705 Additional Location Information CHURCH ST TOWARDS CECIL ST Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SNH1063D

#### INSURED/POLICYHOLDER Is company? Nο Name Of Registered Owner PANG ZHI FENG NRIC No S9726182B Email Address DRPANG12@GMAIL.COM Mobile Phone No (Phone) +65-96913658 Alternative Phone No VEHICLE PARTICULARS Manufacturer Volkswagen Model ..... Golf Variant Exact purpose for which vehicle was being used at time of 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

INSURANCE COMPANY

Name of Insurance Company Etiga insurance Pte Ltd Policy Number / Cover Note Number MA024051

DRIVER Name of Driver PANG ZHI FENG NRIC No S9726182B Date Of Birth 09/08/1997 Occupation Outdoor

Date Of Driving Pass	20/01/2017
Driving experience	5 YEARS AND 10 MONTHS
Gender	Maie
Mobile Number	(Phone) +65-96913658
Alt. Phone Number	-
Email Address	DRPANG12@GMAIL.COM
Address	BLK 180, BUKIT BATOK WEST AVE 8
Address complement	#10-193
Postcode	650180
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	140
Total of the state	_
Insurance Company of Other Vehicle Owned by Driver	-
n en	en. Notae on the second and the months of the control o
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry
	21,9
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?	No '
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s)	2
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	-
PASSENGER 1	
Name	YAYEWKEE LIM HUI MEI
Gender	Female
en er stantsport stille er stille er steere er en en een en en steere er en een een een een een een een e	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Vaa
Police Station Name	Yes
Police Station Phone No	Central Division Headquarters
Alt, Police Station Phone No	(Phone) +65-18002240000
Police Station Address	(Fax) +65-62200877
Police Station Address	391 New Bridge Road #03-112 Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given?	No
If yes, against whom?	-
,,,	
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN & POLICE REPORT A/20221104/703	1
ATTACHMENT(S)	
Are assistant photos quallable for the character	<b>V</b>
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 TOO LARGE - PLEASE REQUEST FROM OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EW5005Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-91555005
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?	-
INJURED 2	
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?	SNH1063D Yes
Was this injured conveyed to hospital by ambulance?	No

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the data is of the accident to speed up the claims process
- 2. This Form must be completed by the Policyholder and/or the Actual Onver
- 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 hability.
- 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 Traffic Police Department for investigation.

- This report will be forwarded by the insurers to 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.
- 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)

Lunderstand, acknowledge, agree and consent that

(a) My insurer, my weikshop 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

(ii) 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.

Driver's Signiture (if driver is not the policyholder) (Date

Witnessed by Reporting

Sketch Plan

Describe Circumstance of the Accident
Or. 3/11/22 about 1750, Iwas drowny my we have a simulated
also character of the contract
have been and and the dealers the picked my wife office
the trace that the first the
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along there st towards (cost short I am picked my wife often ber work and was going for dimer we some to a stop of the tretific light. Then suddenly there was a loud towny settement by a strong york of the car. I've some z week to do had no thinking of stopping burst sear sided ms.
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Declaration

If We declare the foregoing particulars are true in every respect.

Pidicyholders Signature i Cate & Time

Driver's Signature (\* driver is not the porcynologis) Date & Time

Witnessed by Reporting Centre Personnel (Name as in NRIC1D card)

2

Wee paulint







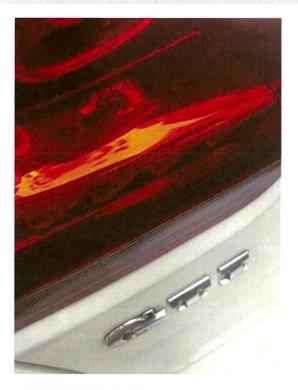


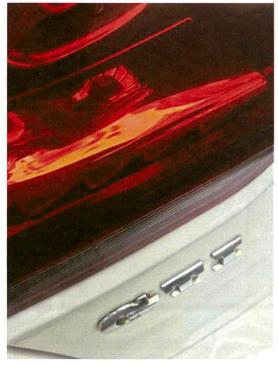


















1 of 4 Report No. T/20221105/7037

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/11/2022 17:18		ade:	Vide Report No.:	Station Diary No.:	
Informant	's Particu	lars			
Name of Informant: PANG ZHI FENG			Address: 180 BUKIT BATOK WEST AVENUE 8 #10-193 SINGAPORE 650180		
ID Type / ID No.: NRIC NO / S9726182B			Contact No.: Home/Office:	Mobile: 96913658	
Nationality: MALAYSIAN			Email: DRPANG12@GMAIL.COM		
Sex: Age: Date of Birth: Male 25 09/08/1997			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation	n:		Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/11/2022 17:50	Type of Location Straight Road
Location: CHURCH ST	REET			
Weather:		Road Surface: Dry	- I - I - I - I - I - I - I - I - I - I	Road Speed Limit: 50 Km/h
Clear				חשווא טכ
Clear Traffic Flow: One Way	The state of the s	Traffic Control: Traffic Light - Wor	king	Traffic Volume: Moderate

Vehicle No.	Type	Make	Model	Color	Conditio	No of
EW5005Z	Car	ROLLS ROYCE	POLICE PO	White		0
SNH1063D	Car	VOLKSWAGO N	GOLF GTI E35 2.0 AT 5K19P3 5DR	White		0





2 of 4 Report No. T/20221105/7037

#### CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SNH1063D	ETIQA INSURANCE BERHAD	MA024051	28/09/2022	27/09/2023	

Details of Perso	n Involved					
Any Pedestrian Ir	ivolved: No					
No. of Pedestrian	s Injured: NIL		Use of Ped	lestrian	Cross	ing: NA
Passenger	<u> </u>	11				
Name	YAYEWKEE LIM HUI	MEI		ID No.	•	S9545008C
Related Vehicle	SNH1063D (Car)			Contact No.		93885662
Hospital/Clinic	MOUNT ALVERNIA I		Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL	
Date	03/11/2022		Date		03/11	/2022
No. of Days gran	led Medical Leave	05	Degree of	Serious		us
Driver						
Name	PANG ZHI FENG			ID No	•	S9726182B
Related Vehicle	SNH1063D (Car)			Contact No.		96913658
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date	03/11/2022		Date		03/11	/2022
No. of Days gran	ted Medical Leave	05	Degree of		Serio	us

#### Brief Details.

On 3/11/2022 at or about 1750hours, I was driving straight along Church Street. As the traffic light turned red, I followed suit and came to a complete stop. After about 5 seconds, suddenly I felt an huge impact from the back. I then realised that EW 5005Z driven by Mr Asok Kumar Hp no. 91555005 had collided into the rear of my vehicle. We then got out of our vehicles and exchanged particulars. There was a passenger in my car- Yayewkee Lim Hui Mei who is pregnant. After the accident, we went to Mount Alvernia to see a doctor as we were experiencing severe pain in our neck and back. I experienced pain in my thumb the next day. We also did an ultrasound scan for the baby to ensure that the baby was doing fine. We were given 5 days' of MC each. I have front camera video footage (to show that I did not jammed brake). The rear camera video footage had been overwritten hence I couldn't retrieve it. It shows that the other party has no intention to stop a second before the accident.





3 of 4 Report No. T/20221105/7037

CONTINUATION OF REPORT





4 of 4 Report No. T/20221105/7037

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

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: 05/11/2022 17:18
Officer In Charge Of Case: TP / TPIB / ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:



whom you submitted the Original Report.					
ADDENDUM					
)	PARTICULARS OF PERSON MAKING THE AMENDMEN	its:			
	Original Report No: SCICE 2285 0062	Vehicle Registration No: <u>&lt;~H10630</u>			
	Name (as shown in ARIC): PRIVATE TEAG	NRIC/FIN/Passport No: SYMYY 1828			
	(*Vehicle Driver/Vehicle Owner) (*) Please delete as	•••			
	Address: REE 180 ENRIT EFFOR IJES Contact (Tel):	7 HVENTIE 8 #10-13 Singapore (FEOTER)			
	Contact (Tel):	Mobile No.: <u>9 69 13658</u>			
	Email Address: DEPANG 126 GMAIL - COM	• •			
	Date of Accident:	Time of Accident:			
	Place of Accident: CHURCH ST TOWARDS				
	Insurance Company: ETICLA				
,	ADDITIONAL INFORMATION / AMENDMENTS:  I have made a report on the above-mentioned accidents	at and would like to include additional information or			
,	ADDITIONAL INFORMATION / AMENDMENTS:  I have made a report on the above-mentioned accider make the following amendments:	nt and would like to include additional information or			
,	I have made a report on the above-mentioned accider				
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70000266 COV. Type: Comprehensive

#### 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)

~~~~		
L.E.K.I	かれみに	No. MA024051

Index Mark and Registration

Number of Vehicle

SNH1063D

Name of Policyholder

PANG ZHI FENG

Effective Date of Commencement of Insurance for the purposes of the Act

28/09/2022

Engine No.; CDL061397

Chassis No.: WVWZZZ1KZCW089497

Hire Purchase: MAYBANK SINGAPORE LIMITED Excess (Named Drivers): \$\$800.00 Excess (Unnamed Drivers): \$\$1300.00

Date of Expiry of Insurance

27/09/2023

Persons or Class of Persons entitled to drive (A) THE POLICYHOLDER (B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION

PANG ZHI FENG

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 REGULATIONS IN THAT BEHALF FROM DRIVING THE MOTOR VEHICLE.

Limitations as to use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.

THE POLICY DOES NOT COVER-

THE POLICY DOES NOT COVER:
(i) USE FOR HIRE OR REWARD.
(ii) USE FOR RACING, PACE MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(iii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(iv) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

#### Policy Owners' Protection Scheme

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the General Insurance Association Of Singapore (GIA) / Life Insurance Association Singapore (LIA) / SDIC websites (<a href="https://www.gia.org.sg/">www.gia.org.sg/</a> www.lia.org.sg / www.sdic.org.sg).

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

For and on behalf of Etiqa insurance Pte. Ltd. Approved Insurer

Authorised Signature

Page: 1 of 2

<sup>\*</sup> 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.



# **PAYMENT**

TAX INVOICE Invoice No: SPF2022122901328916 Date/Time: 29/12/2022 08:48:28						
Application Paid Via: Bank Reference No: GST Reference No:	Master 666928 MG-84000	000-5				
Transaction Ref No:	TP000159	244				
Service Type	Service Fee	eService Reference No	Unit Price (S\$)	GST (S\$)	Qty	Amount (S\$)
1 Police Document	Document Fee	0050000002725460	18.00	0.00	1	18.00
				Tota	al (S\$)	18.0
This is a computer-generat	ed invoice. No signati	ure is required.				
Please print a copy of the i	nvoice for your refere	ence.				



#### **PAYMENT**

TAX INVOICE Invoice No:

SPF2022120801316956

Date/Time:

08/12/2022 15:52:58

Application Paid Via: Bank Reference No: GST Reference No:

Master 482193 MG-8400000-5

Transaction Ref No:

TP000159244

	Service Type	Service Fee	eService Reference No	Unit Price (S\$)	GST (S\$)	Qty	Amount (S\$)
1	Police Document	Search Fee	0050000002722488	16.00	0.00	1	16.00

Total (S\$) 16.00

This is a computer-generated invoice. No signature is required.

Please print a copy of the invoice for your reference.

A FORCE FOR THE NATION





Report No. T/20221115/7049

1 of 4

Tel No: 65470000

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time 15/11/2022	•	nde:	Vide Report No.:	Station Diary No.:		
Informant	s Particul	ars				
Name of In YAYEWKE		I MEI	Address: 113 BEDOK NORTH STREET 2 #10-282 SINGAPORE 460113			
ID Type / ID No.: NRIC NO / S9545008C			Contact No.: Home/Office:	Mobile: 93885662		
Nationality: SINGAPORE CITIZEN			Email: YAYEWKEE128@GMAIL.COM			
Sex: Female	Age: 26	Date of Birth: 08/12/1995	Type of Informant: Passenger			
Race: Chinese			Language: Institution / School Nar English			
Occupation:			Driving Licence Information: Class: 3	Date of Expiry:		

General Informat	ion of the Accident					
Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 03/11/2022 17:50	)	Type of Location: Straight Road
Location:						
CHURCH STREE	ΞΤ					
Weather:		Road	Surface:		Road	d Speed Limit:
Clear		Dry			50 K	-
		raffic Control: raffic Light - Working		Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Rear					Anyone conveyed by ambulance: No	

Mahiala Na	T	Nada	Madal	0-1	0400-	TN1= -6
Vehicle No.	туре	Make	Model	Color	Conditio	INO OI
EW5005Z	Car	ROLLS		White		0
		ROYCE				
SNH1063D	Car	VOLKSWAGO	Golf GTI E35	White		1
		N	2.0			

Details of Vehicle Insurance	
Vehicle No. Insurance Company Insurance No	Effective Expiry Date





2 of 4 Report No. T/20221115/7049

#### **CONTINUATION OF REPORT**

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
SNH1063D	ETIQA INSURANCE BERHAD	MA024051	28/09/2022	27/09/2023			

Details of Person involved						
Any Pedestrian Involved: No						
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver						
Name	PANG ZHI FENG			ID No	•	S9726182B
Related Vehicle	SNH1063D (Car)	,		Conta	ct No.	96913658
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date	03/11/2022		Date	ate 03/11/2022		/2022
No. of Days gran	ted Medical Leave	05	Degree of		Serious	
Passenger						
Name	YAYEWKEE LIM HUI	MEI		ID No	•	S9545008C
Related Vehicle	SNH1063D (Car)			Conta	ct No.	93885662
Hospital/Clinic	MOUNT ALVERNIA H	HOSPITAL		Class Driving Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date	03/11/2022		Date		03/11	/2022
No. of Days gran	ted Medical Leave	05	Degree of		Serio	us

#### Brief Details.

On 3/11/2022 at or about 1750hours, I was a front seat passenger in motor vehicle SNH 1063D. I was belted at the time of the accident. The driver, my husband, was driving straight along Church Street. As the traffic light turned red, the vehicles in front slowed down and our vehicle followed suit by gradually slowing down and came to a complete stop. After about 5 seconds, I suddenly felt an huge impact from the back. I then realised that EW 5005Z driven by Mr Ask Kumar Hp no. 91555005 had collided into the rear of my vehicle. We then got out of our vehicles and exchanged particulars. I was pregnant at the time of about 13 weeks. After the accident, I went to Mount Alvernia to see a doctor as I experienced severe pain in my neck and back. I also did an ultrasound scan for the baby to ensure that the baby was doing fine. I was given 5 days' of MC. After the collision, Mr Ask Kumar suggested that we privately settle the matter. To date however, parties have not been able to reach a settlement. I am making this report for record and claim purposes.





3 of 4 Report No. T/20221115/7049

**CONTINUATION OF REPORT** 





4 of 4 Report No. T/20221115/7049

**CONTINUATION OF REPORT** 

n

Informant is not able to provide sketch

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: 15/11/2022 16:05
Officer In Charge Of Case: TP / TPIB / ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:

# 18 Car Auto Services

1 Bukit Batok Crescent, #09-19 WCEGA Plaza, Singapore 658064 Mobile: 83933771

Pang Zhi Feng

Blk 180 Bukit Batok West Ave 8

#10-193

Singapore 650180

Invoice No:

TP/23/01

Date:

14 January 2023

### **INVOICE**

Sr. No.

**Description** 

Oty Unit price (\$) Amount (\$)

1 Being labour and materials cost incurred for the repair of the accident vehicle to its pre-accident condition.

\$7,400.00

Vehicle No:

SNH1063D

Make/Model:

Volkswagen Golf GTI

Accident Date: 3 November 2022

Total Amount Payable:

\$7,400.00

Dollars (S\$): Seven Thousand and Four Hundred only

18 Car Auto Services

Authorized Signature

# **PRO-OPTION SERVICES**

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Mobile: 9061 0543, Email: mirage1195@gmail.com

Pang Zhi Feng Blk 180 Bukit Batok West Ave 8 #10-193 Singapore 650180

Invoice no:	POS01126/22
Date:	13 January 2023
Report no:	1126M22.18C
Vehicle :	SNH1063D

#### **INVOICE**

No	Item Description	Qty	Unit Price	Total Amount(\$)
01	Being charges for the inspection of the accident vehicle, transport and photographs.			682.00
	e			
SGD(\$):	Six Hundred and Eighty-two only		Grand Total:	682.00

<sup>&</sup>quot;Cheque should be crossed and made payable to "Pro-Option Services"

		and the same of	and the same of th		
		/			
	4	5			
	1	4			
	./	/		 	
Autho	ised	Signat	ure		

PRO-OPTION SERVICES

# PRO-OPTION SERVICES

Mailing address: Blk 189B Rivervale Drive, #04-1004, Singapore 542189

Mobile: 9061 0543, Email: mirage1195@gmail.com

#### **ACCIDENT VEHICLE INSPECTION REPORT**

Report no

: 1126M22.18C

Vehicle no

: SNH1063D

1 REFERENCE

Date of inspection

: 24 November 2022

Requested by

: Pang Zhi Feng

Blk 180 Bukit Batok West Ave 8

#10-193

Singapore 650180

Type of survey

: Independent

Repairer

: 18 Car Auto Services

Date of accident

1 Bukit Batok Crescent, #09-19 WCEGA Plaza, Singapore 658064

: 3 November 2022

2 VEHICLE DATA

Make/model

: VOLKSWAGEN GOLF GTI E35 2.0 AT 5K19P3 5DR

Chassis no

: WVWZZZ1KZCW089497

Engine no

: CDL061397

Date of registration

: 27 December 2011

**COE Expiry Date:** 

30 September 2031

Engine capacity

: 1984 cc : White

Colour Odometer reading

: 134878 km

#### 3 STATIC CONDITION CHECK

Steering

: Serviceable

Foot brakes

: Serviceable

Hand brakes

: Serviceable

Paintwork

: Good

General Condition

: Good

#### **BRIEF DESCRIPTION OF DAMAGE**

Tailgate bent, rear bumper cracked, rear bumper reinforcement dented/bent, rear end panel bent, tailgate side reflector RH - grazed, etc. Please see para. 8 of this report fo rmore details.

#### 5 REMARKS

This inspection is carried out on a "WITHOUT PREJUDICE" basis and I have not authorized any repairs.

#### **6 RECOMMENDATION**

Cost of repairs

\$7,400.00 (lump sum)

Estimated no of days

Seven (7)

### **7** ASSESSMENT OF DAMAGE AND COSTS

Report no:

1126M22.18C

Vehicle no:

SNH1063D

### A SPARE PARTS

<u>B</u>

		<u>Assessed</u>	Repairer's	<u>Revised</u>			
<u>Description</u>	Qty	<b>Condition</b>	<u>Amount</u>	<u>Amount</u>			
Tailgate assy	1	bent/distorted	2,409.00	2,409.00			
Tailgate lock assy	1	bent/distorted	228.00	228.00			
Tailgate "GTI" emblem	1	necessary	65.00	65.00			
Tailgate side reflector RH	1	face grazed	90.00	90.00			
Rear bumper	1	cracked	1,600.00	1,600.00			
Rear bumper reinforcement	1	dented/bent	680.00	680.00			
Rear bumper side retainer L/R	2	necessary	392.00	392.00			
Rear bumper clip	10	necessary	30.00	30.00			
Rear bumper centre support/retainer	1	bent/deformed	228.00	228.00			
Rear end panel	1	to repair	680.00	680.00			
		Subtotal of the above	6,402.00	6,402.00			
		Discount 10%	640.20	640.20			
(Special nett)		Subtotal 1:	5,761.80	5,761.80			
Tailgate 'Rabbit 35' badge	1	necessary	55.00	55.00			
Rear windscreen gum	1	necessary	80.00	80.00			
Rear bumper lower diffuser	1	bent/distorted	1,200.00	1,200.00			
Reverse sensor set	1	dented/shorted	320.00	320.00			
		Subtotal 2:	1,655.00	1,655.00			
		Total cost of parts:	7,416.80	7,416.80			
		-					
<u>LABOUR</u>							
To check wiring at the affected areas for	60.00	45.00					
Panel beating charges to dismantle and	1,000.00	750.00					
install the same; to cut out the damaged body, renew and weld the same; to knock and reshape surrounding panels back to shape and alignment.							
knock and resnape surrounding panels b	ack to si	lape and angilinent.					
Spray paint all affected parts and repair	s – tailgate, rear bumper, rear	1,000.00	750.00				
end panel, etc.							
To apply anti-rust undercoat for the affection	120.00	60.00					
To apply anti-rust undercoat for the affect	120.00	60.00					
To remove and refit rear windscreen glas	150.00	120.00					
To remove and rent real windscreen gias	130.00	120.00					
To reomve and install new reverse sensors and check sensing functions.			100.00	60.00			
10 realitive and maturification actions and effect settaing functions.							
		Total cost of labour:	2,430.00	1,785.00			
		=	2,730.00	1,700.00			
	9,846.80	9,201.80					
		Total cost of repair:	2,040.00	3,201.00			

Report no:

1126M22.18C

Vehicle no:

SNH1063D

#### 8 CONCLUSION

The revised or adjusted cost of repairs to restore the vehicle is

\$9,201.80

(a) The recommened cost of repair based on lump sum repairs would be

\$7,400.00

Seven (7)

(b) The estimated number of days for the repairs would be

(1st Reinspection conducted on 29 November 2022)

(Post Repair Inspection conducted on 9 December 2022)

The above recommendations in my view are fair and reasonable for the restoration of the vehicle to its preaccident condition.

#### Note: Lump Sum Repair Basis

This means the repairer is allowed to replace the damaged parts with used, reconditioned or new parts, or repair it to a roadworthy condition.

Prepared by:

Liaw Leong San

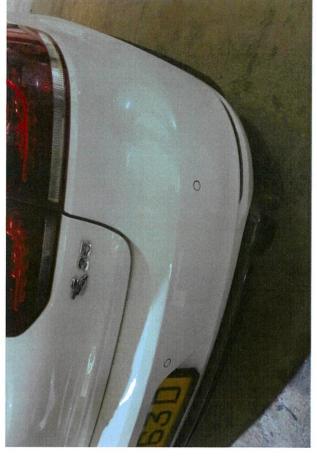
Licensed Automotive Appraiser

Dated:

13 January 2023









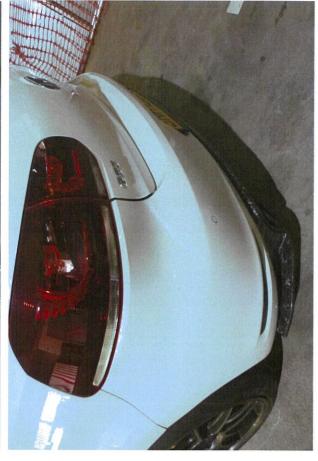


Pro-Option Services













Pro-Option Services



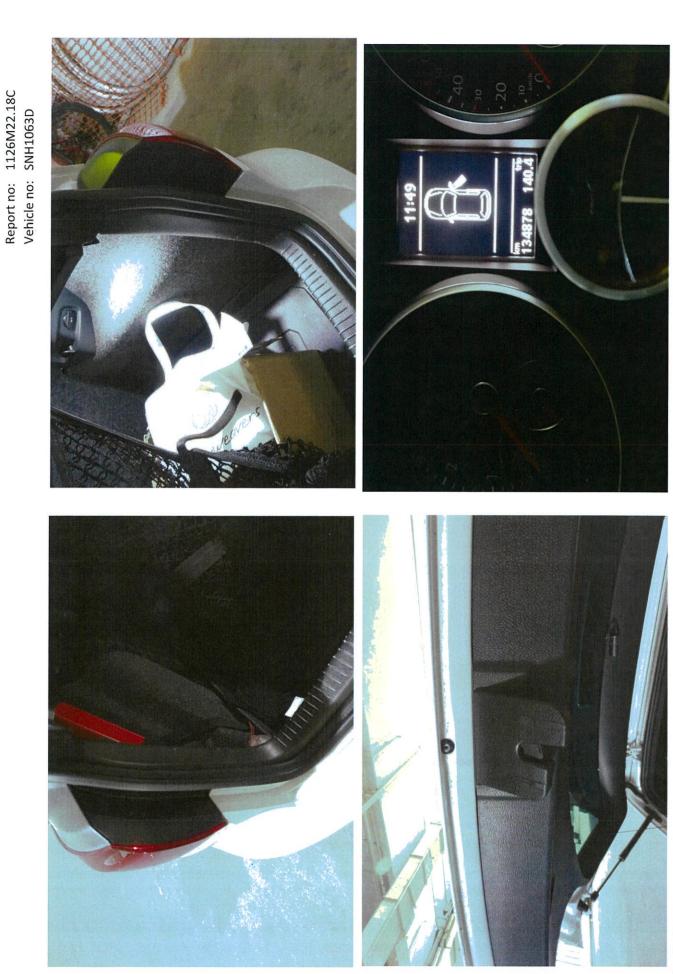








Pro-Option Services





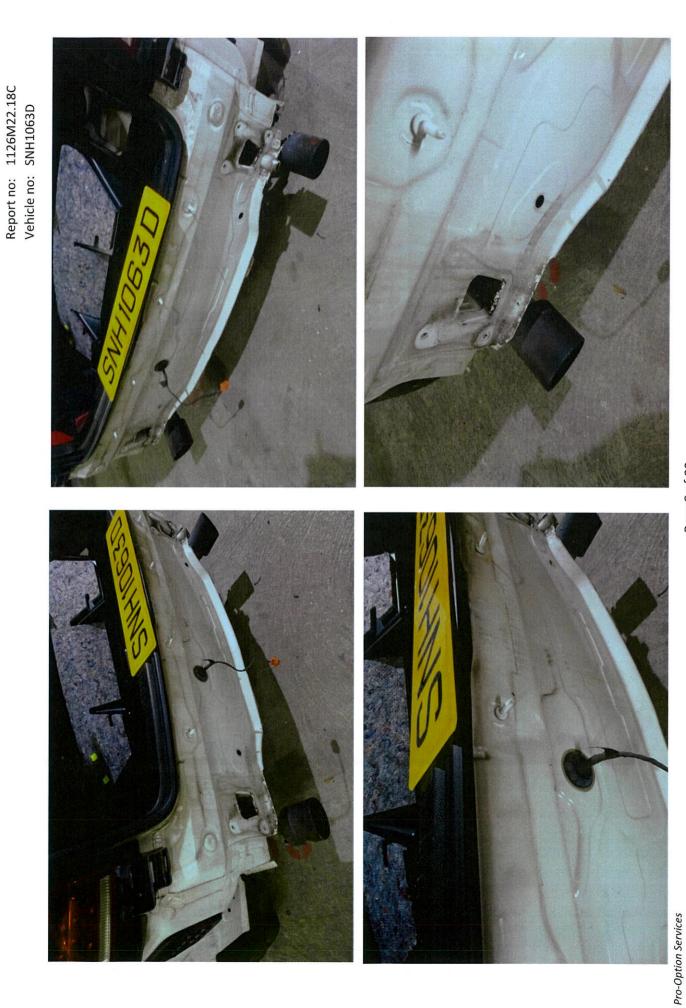








**Pro-Option Services** 





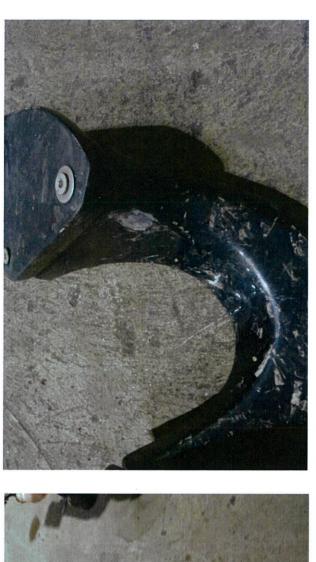
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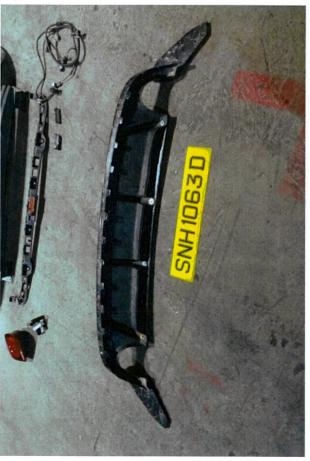












Pro-Option Services



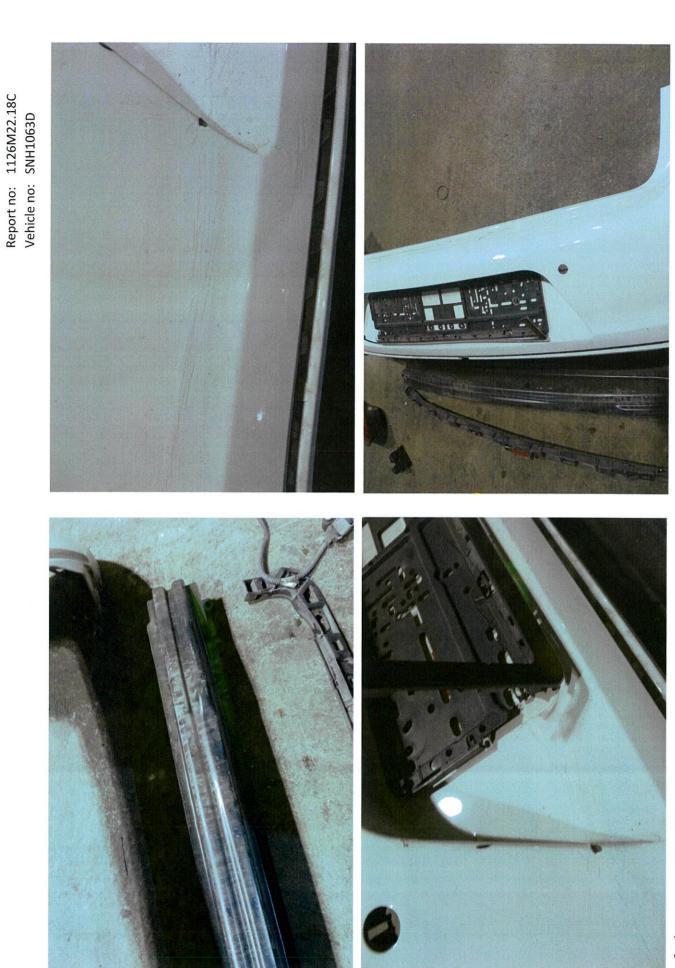




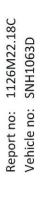


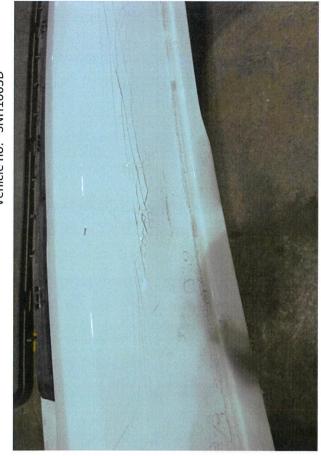
Pro-Option Services



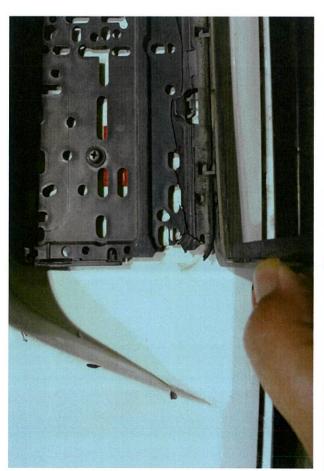


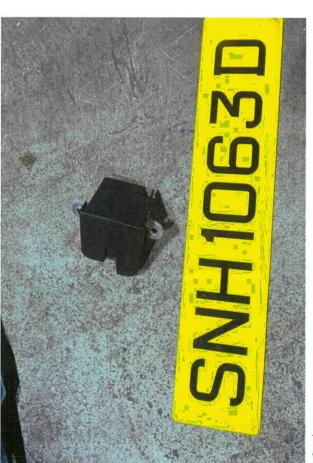






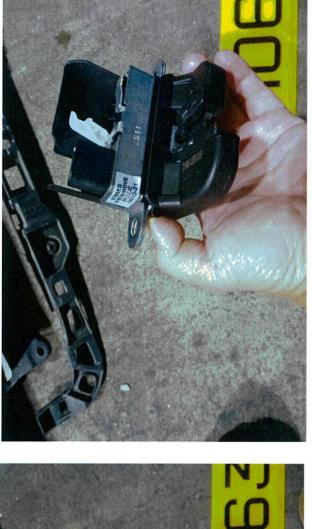






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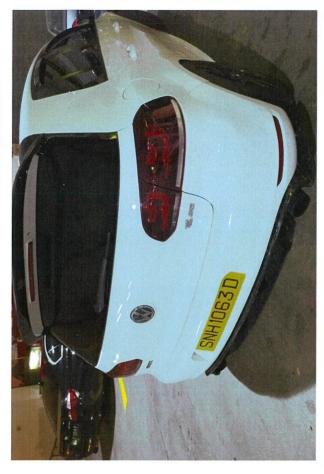


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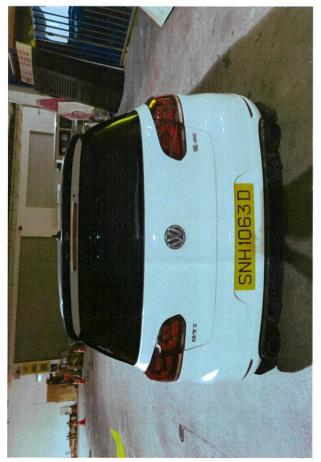


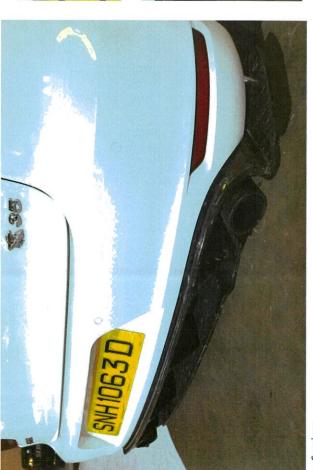


Report no: 1126M22.18C Vehicle no: SNH1063D









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POST REPAIR







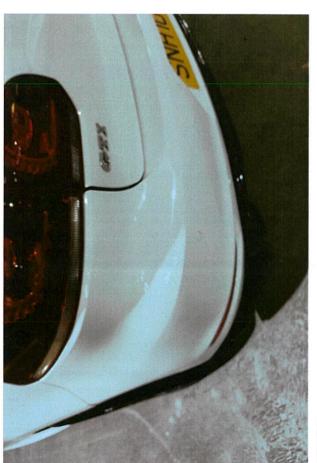
Page 18 of 22

POST REPAIR









Pro-Option Services

Page 19 of 22



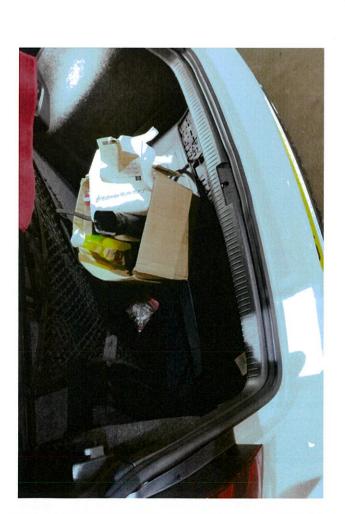




Page 20 of 22



Page 21 of 22





Serve all with Love

Our Ref: MAH/MR/20230127/0155 Your Ref: LWP/PZF/5021A/22/sm Dated: Sunday, January 29, 2023

Lawrence Lee & Co 133 New Bridge Rd #13-10 Chinatown Point Singapore 059413

Dear Sir/Madam,

RE: Medical Report of PANG ZHI FENG (S9726182B)

The above mentioned was seen on the 3/11/2022. He was the driver of a car that was involved in a road traffic accident that day. He presented with pain over the lower back

On examination he was well alert and rational. Vital parameters stable. Tenderness noted over the left paralumbar region radiating till the left gluteus muscle. No neurological deficit found

MRI of the lumbar spine showed no fractures or prolapsed discs

He was discharged with some oral analgesia and medical leave issued from 3/11 till the 7/11/2022. He was also referred to the orthopaedic specialist for further review.

Diagnosis was that of a strain back

For your information,

With best regards, Yours sincerely

> 24HR WALK-IN CLINIC/EMERGENCY DEPT TEL: 6347-6210 FAX: 6354-5517 820 THOMSON ROAD SINGAPORE 574623



Serve all with Love

Our Ref: MAH/MR/20230127/0155 Your Ref: LWP/PZF/5021A/22/sm Dated: Sunday, January 29, 2023

Lawrence Lee & Co 133 New Bridge Rd #13-10 Chinatown Point Singapore 059413

Looi Peter MBBS (Singapore) MCR: M04966B

> 24HR WALK-IN CLINIC/EMERGENCY DEPT TEL: 6347-6210 FAX: 6354-5517 820 THOMSON ROAD SINGAPORE 574623



820 THOMSON ROAD, SINGAPORE 574623 MAIN LINE: 6347 6688 WEBSITE: www.mtalvernia.sg GST REGN NO: M4-0003321-8

## RECEIVED 13 FEB 2023

Receipt No.

M230040039

Date:

30/01/2023

Customer Name:

PANG ZHI FENG (XXXXX182B)

Page:

Item

Amount (\$)

MEDICAL REPORT

162.99

**Total Charges** 

162.99

GST @ 8%

13.04

Paid

176.03

Mode of Payment:

**PAYNOW** 

**Reference No.:** 30/01/2023

This is a computer generated official receipt, no signature is required.

Report ID: PY00150R



MOUNT
820 THOMSON ROAD, SINGAPORE 574623
MAIN LINE: 6347.6688 WEBSITE: www.mtalvernia.sg
GST REGN NO. M4:00003321-8
GST REGN NO. M4:00003321-8

Patient Name: PANG ZHI FENG
ID No.: \$9726182B
Account No.: 0220730324

Receipt No. : 220121171 Date : 03/11/2022 Page : 1 of 2

Item	Qty	UOM Amount (\$)	
ANAREX (PARA450/ORPH35)	20	EA	7.80
ARCOXIA TAB 120MG	5	EA	19.90
KEFENTECH PLASTER 30MG 8/PKT	2	EA	14.76
MRI LUMBAR SPINE (3T)	1	EA	897.00
OUTPATIENT NURSING SERVICE	1	EA	23.00
RAD'GRAPHER CALLBACK MR, CT, OT	1	EA	130.00
RADIOLOGIST CALL BACK BF MIDNIGHT	1	EA	302.00
	1	EA	63.00
RMO CONSULTATION FEE		-	1,457.46
Total Charges A & E / 24-HOUR WALK-IN	CLINIC		102.02
GST @ 7% Mount Alvernia Hospita 820 Thomson Road	1,559.48		
Paid: Singapore 574623 VISA BY PANG ZHI FENG Tel: 63476210			1,559.48
	eference N	o.:	



# Mount Alvernia Hospital Medical Certificate

24-Hour Walk-in Clinic and Emergency Department

No: M220000101338

This is to certify that PANG ZHI FENG, S9726182B, is granted Outpatient Sick Leave for 5 day(s) from 03-Nov-2022 to 07-Nov-2022.

Remark:

This medical certificate is not valid for absence from Court or judicial proceeding unless specifically stated.

Dr. Peter Looi MCR: 04966B A & E / 24-HOUR WALK-IN CLINIC Mount Alvernia Hospital 820 Thomson Road Singapore 574623 Tel: 63476210 03/11/2022

Date

Please quote the Tax Reference Number (e.g. NRIC, FIN etc.) in full when corresponding with us.

#10-193 SINGAPORE 650180





1-1

### Income Tax - Notice of Assessment (Original)

#### What do you need to do?

You have no tax payable. No payment is required.

#### YEAR OF ASSESSMENT 2023

INCOME^ (\$)	DEDUCTIONS	(\$)	·	CHARGEABLE INCOME	(\$)
23,417.00		5,380.00		IIIOOME	18,037.00
TRADE 9,017.00	RELIEFS	5,380.00	TAX CO	MPUTATION	
	Earned Income	1,000.00			
EMPLOYMENT 14,400.00	NSman-self/ wife/ parent	1,500.00		Tax Payable	
n sa sa sa santanta ka sa	Provident Fund/ Life Insurance	2,880.00		\$0.00	

<sup>^</sup> All income are net after deduction of expenses.

- Your tax assessment is based on information given by you through e-Filing on 03 Mar 2023.
- If you disagree with the assessment, Object to Assessment under 'Individuals' at myTax Portal within 30 days, i.e. by 09 Apr 2023. Please pay the amount, if any, in this Notice by the due date, even if you object to the assessment.
- Please pay your taxes, if any, by the due date to avoid late payment penalties and other recovery actions.
- View Account Summary under 'Account' at myTax Portal for your latest income tax balance.

NG WAI CHOONG

worlkoorg

COMPTROLLER OF INCOME TAX

Website: www.iras.gov.sg • myTax Portal: mytax.iras.gov.sg

Tel: 1800-356 8300