| S. RECBY: TOUTH REF. (3/SPE 2 20 | 01?158/Tny3 |
|--|---|
| ASSI | GNMENT |
| ASSIC ASIC ASSIC ASS | Veh No: SLS 5352 Jyr Regn: 2017, Sep. Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or Make: Kare Freed Hypnel c.c 1496 Colour White AC: Insured / Std / NI / NA Sp.Reading 7789 T/Radio: Insured / Std / NI / NA Eng/No: C/No: 9870/23/4 # Gen. Cond: G600/ Fair / Poor / Burnt |
| um Insuled: Excess: (Client's Record) Make of Veh: | Steering: inorder / Jammed / Leaked / Burnt or Brake: inorder / Jammed / Leaked / Burnt or Modi: Nil / S/Rim / STD A/Rim or Tyre Size: F: (95/65/2/5 |
| (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: GIA / PR Seen: Est. Repairs: Consistent?: Yes or No Est. Repairs: Consistent?: Yes or No Available of No Consistent?: Yes or No Available of No Consistent?: Yes or No Consistent?: Yes or No Consistent?: Yes or No | R: |
| CA / REV / REP. / 24 HRS Date: Person Contacted: Vehicle: IN / O Date / Time Action / Instruction | Des. of Damages Frt / Reary O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. |
| | |
| Detection File Page 192 | Davis Of Banatus |
| Date/Time, File Pass to? 1) Date/Time, File Return to? 2) Add Flep Formal:: | Days Of Repair: Resurvey No. of Trip: Survey Fee: Transportation: S+RS_SI Interview (\$) Photos Trach. Trivs (\$) Others |
| Lemp Sum / LB.A: //p) | :Weelend (\$ |

-



Headquarter: Blk 8 JTC Defu Industrial City #04-29 Defu South Street 1, S533758

Tel: (65) 6747 9560, 6743 5344 • Fax: (65) 6748 1006

E-mail: ryan@kanfs.net / patricia@kanfs.net

Branch: 1 Kaki Bukit Avenue 6 #01-13, Singapore 417883

Tel: (65) 6481 5150 • Fax: (65) 6481 8683

ATTORNEY GENERAL CHAMBERS

1 COLEMAN STREET #10-00 S(0617)

DATE

: 03-12-2022

VEHICLE NO.

: SLS5352J

ACCIDENT DATE

: 01-12-2022 20:20

THIRD PARTY REF.: QX1890M

ATTN: ATTORNEY GENERAL CHAMBERS

ESTIMATE COST OF REPAIR TO VEHICLE SLS5352J HONDA FREED 1.5G HYBRID SENSING AUTO

| # | QTY | PARTS DESCRIPTION | | | AMOUNT (SG\$) |
|-------|------|-----------------------------------|--------|---------------|------------------|
| 1 | 1 | REAR BOOT COVER | | | 1032.30 bt |
| 2 | 1 | REAR BOOT LOCK | | | 90.10 7 |
| 3 | 1 | REAR BOOT RUBBER | | | 120.30 ? |
| 4 | 1 | REAR BOOT WINDSCREEN MOULDING | | | 70.50 Nel- |
| 5 | 1 | REAR BOOT CHROME | | | 140.30 7 |
| 6 | 1 | REAR BOOT FREED EMBLEM | | | 42.60 Nej |
| 7 | 1 | REAR BOOT H EMBLEM | | | 32.30 19 |
| 8 | 1 | REAR BOOT HYBRID EMBLEM | | | 57.70 res |
| 9 | 2 | REAR BOOT REFECTOR@\$363.30 | | | 726.60 ? |
| 10 | 2 | REAR LAMP@\$654.00 | | | 1308.00 X |
| 11 | 1 | REAR END PANEL | | | 350.80 Ry |
| 12 | 1 | REAR BUMPER | | | 673.80 de |
| 13 | 2 | REAR BUMPER SIDE RETAINER@\$13.50 | | | 27.00 ? |
| 14 | 10 | REAR BUMPER CLIP@\$3.50 | | | 35.00 All |
| | | | | | 4,707.30 |
| | | | LESS 2 | 20 % | 941.46 |
| | | | TOTAL | (A) | |
| | | | IOIAL | (A) | 3,765.84 |
| SP | ECIA | L NETT ITEMS | | | |
| 1 | 1 | REAR WINSCREEN GUM | | | 50.00 ra |
| | 100 | REAR REVERSE SENSOR | | | 300.00 200 nw |
| 25.53 | 1 | REAR NUMBER PLATE | | | 40.00 % |
| 0 | - | | | AG DEWELL LAW | |
| | | | TOTAL | (C) | 390.00 |
| | | | | | |
| LA | BOUR | CHARGES | | | |
| 1 | 1 | TO CHECK WIRING SYSTEM | | | 50.00 |
| _ | | | | | 30.00 |



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Tel: (65) 6481 5150 • Fax: (65) 6481 8683

VEHICLE NO.

: SLS5352J

ACCIDENT DATE

: 01-12-2022 20:20

| TH | IRD PA | ARTY REF. : QX1890M | | | |
|----|------------|--|------------------|-------------------|---------------|
| # | <u>QTY</u> | PARTS DESCRIPTION TO REMOVE/REFIT REAR WINDSCREEN | GLASS | | AMOUNT (SG\$) |
| 2 | 1 | | | | 100.00 60 |
| 3 | 1 | TO REMOVE/REFIR REAR FENDER INNE | R GARNISH & ETC | | |
| 4 | 1 | TO REMOVE ALL NECESSARY AFFECTED TTING NEW PARTS | PARTS WELD CUT P | ANEL BEAT AND FI- | 720.00 600 |
| 5 | 1 | SPRAYPAINTING CHARGES | | | 750.00 Gos |
| | | | TOTAL | (D) | 1,720.00 |
| | | | ESTIMATE TO | TAL | 5,875.84 |

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To d splay damaged part(s) during resurvey
- Parts prices are subject to confirmation.
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

S00022C20004 / KAN FOOK SING MOTOR WORKSHOP [533758] ENTRY DATE & TIME: 02/12/2022 17:33 (SGT) SUBMITTED BY: Boo Miow Hwa VERSION: 1 (02/12/2022 17:33 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.
 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 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 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 dentre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission

Reported by

Date of Accident

xact Location of Accident

Additional Location Information

Country/State of Loss

02/12/2022 17 33 (SGT)

Both

01/12/2022 20 20 (SGT)

Singapore

YIO CHU KANG ROAD

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLS5352J

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No.

No

TAN CHOON HUI

SXXXX849A

CHHUITAN@GMAIL.COM (Phone) +65-96881206

VEHICLE PARTICULARS

√anufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

your vehicle?

Honda

FREED 1.5G HYBRID SENSING AUTO

Vehicle Category

Transmission

CC

No - Claiming hird party

Private car

Auto

1496

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.

7220099857

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Accident report S00022C20004

TAN CHOON HUI SXXXX849A

21/03/1973 Indoor

Page 1 of 35

Date Of Driving Pass 30/01/1993 Driving experience 29 YEARS AND 11 MONTHS Gender Male Mobile Number (Phone) +65-96881206 Alt. Phone Number **Email Address** CHHUITAN@GMAIL.COM Address BLK 649 PUNGGOL CENTRAL 17-390 SINGAPORE 820649 Address complement Postcode 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 DRIZLLING Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 3 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 2 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 PASSENGER 1 Name WIFE Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name Punggol Neighbourhood Police Centre Police Station Phone No (Phone) +65-18006049999 Alt. Police Station Phone No (Fax) +65-64468015 Police Station Address Blk 21A Tebing Lane Singapore 828837 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER WITH ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes

SD CARD WITH TRAFFIC POLICE



Reasons for not uploading a video of the accident

| Vehicle Registration Number | QX1890M |
|---|------------|
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Government |
| Name of Driver | - |
| Contact Number | - |
| Address | |
| Address complement | - |
| Postcode | _ |
| Insurance Company Name | _ |
| Nature Of Damage | _ |
| Details of property damaged in accident | _ |
| No. Of Passenger (Including Driver) | 3 |

DETAILS OF OTHER VEHICLE PROPERTY 2

| Vehicle Registration Number SMD646 | 4E |
|---|--------------|
| Vehicle Manufacturer | |
| Vehicle Model | |
| Vehicle Variant _ | |
| /ehicle Colour | |
| Vehicle Category Private of | ar |
| 11 (5) | CK CHWEE |
| 0 - 1 - 1 N - 1 | +65-97222280 |
| Address | 7222200 |
| Address complement | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| Details of property damaged in accident | |
| No. Of Passenger (Including Driver) | |

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 Actual Driver.
- 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 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.
- 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

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

Witnessed by Reporting Centre Personnel

1

Co. Reg. No 22146800E

(Name as in NRIC/ID card) & Time Sketch Plan A: SLS \$3672J

B: QX 1840M

C: SMD 6464R 10 ch kang of



1 of 3 Report No. T/20221202/2000

Police Station Of Origin: Punggol N.P.C

151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

REPORT OF A TRAFFIC ACCIDENT

| Date/Time 02/12/2022 | The second second second second | ade: | Vide Report No.: F/20221201/0139 | Station Diary No.: |
|-------------------------|---------------------------------|---------------------------|---|----------------------------------|
| Informant | 's Particu | lars | | erreceptalistic line because the |
| Name of Ir TAN CHO | | | Address: APT BLK 649 PUNGGOI 820649 | L CENTRAL #17-390 SINGAPORE |
| ID Type / I NRIC NO | | 9A | Contact No.: Home/Office: | Mobile: 96881206 |
| Nationality SINGAPO | | ΞN | Email: | |
| Sex: Male | Age: 49 | Date of Birth: 21/03/1973 | Type of Informant: Driver | |
| Race: Chinese | • | | Language: English | Institution / School Name: |
| Occupation IT Manage | | | Driving Licence Informat | ion: |

| Jeneral milon | mation of the Accident | T | | |
|-------------------------------|------------------------------------|---|---|--------------------------------------|
| Type of Accident: | Non-Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 01/12/2022 20:20 | Type of Location: Straight Road |
| Location: | | | | |
| YIO CHU KAI | NG ROAD | | | |
| Weather: Drizzling | | Road Surface: Wet | R | Road Speed Limit: |
| Traffic Flow: One Way | | Traffic Control: Traffic Light - Working | 10.00 | raffic Volume: loderate |
| Type of Collis Between Mov | sion: ving Vehicles - Head To R | ear | a | nyone conveyed by mbulance: lo |

| Details of V | ehicle Invo | lved | | | | |
|--------------|-------------|-------|---|-------|----------------------|-----------------|
| Vehicle No. | Туре | Make | Model | Color | Condition | No of Passenger |
| QX1890M | Car | | | | Slightly Damaged | 2 |
| SLS5352J | Car | HONDA | FREED 1.5G HYBRID SENSING AUTO | White | Slightly Damaged | 1 |
| SMD6464E | Car | | | | Seriously Damaged | |





2 of 3

Report No. T/20221202/2000

Police Station Of Origin: Punggol N.P.C

151 Punggol Central SINGAPORE 828727

Tel No: 1800-6049999

CONTINUATION OF REPORT

| Details of Ve | ehicle Insurance | | | | |
|---------------|---------------------------------|---------|-------|------------|-------------|
| Vehicle No. | Insurance Company | Insuran | ce Na | Effective | Expiry Date |
| SLS5352J | AIG ASIA PACIFIC INSURANCE PTE. | 722009 | 9857 | 27/09/2022 | 26/09/2023 |
| | LTD. | | | | |

| Details of Perso | n Involved | | | | | |
|-------------------------|-------------------|-----|-----------|-------------------------------------|-----------|---------------------------------|
| Any Pedestrian Ir | nvolved: No | | | | | |
| No. of Pedestrian | s Injured: NIL | | Use of Pe | destrian | Cross | ing: NA |
| Driver | | | | | | |
| Name | TAN CHOON HUI | | | ID No. | | S7309849A |
| Related Vehicle | NIL | | | Conta | ct No. | 96881206 |
| Hospital/Clinic | NIL | | | Class Drivin Licent Expiry | g ce & | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | | Date Disc | charge | NIL | |
| No. of Days gran | ted Medical Leave | NIL | Degree o | f Injury | NIL | |

Brief Details.

On 01/12/2022 at about 2020hrs, I was driving car registration number SJS5352J along Yio Chu Kang Road towards Serangoon at the second lane from the left. I then stopped behind a blue taxi, I assumed the driver wants to turn into the Esso petrol kiosk.

Suddenly, I felt an impact from my car rear. My wife and I alighted from the vehicle, and I realised the police car, QX1890M had collided with my car rear. There was also another vehicle, SMD6464E, collided with the police car rear.

I suffered some giddiness and my wife's left leg ache. We were attended by the paramedic at scene. There were some dents at my car's rear. I took photos of the vehicle damage as well. Shortly after, Traffic police arrived at the scene, reference police report number F/20221201/0139, IO incharge: Valerie. My car incar camera SD card was handed over to the Traffic police.

The particulars of SMD6464E as follows: Name: Koh Hock Chwee S1714058B, HP: 97222280

I am lodging this Traffic accident report as advised by the traffic police officer.



3 of 3 Report No. T/20221202/2000

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

CONTINUATION OF REPORT

| _ | | | | | |
|-----|------|-----|----|-----|----|
| CI | ceto | L . | n. | | |
| - 7 | | | ~ | 201 | ъ. |
| | | | | | |

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 3 NG CHEW PING | Signature Of Informant: | an- |
|---|-----------------------------|-----|
| Signature Of Interpreter: Not applicable | Date/Time: 02/12/2022 00:05 | |
| Officer In Charge Of Case: TP / GIT / STAFF SGT YAN MINGSHENG DANIEL Contact No.: 65476252 | Classification Of Case: | |
| NP168 | | |