



Our Reference: **SNF5329Y/7022192**

By Email / Mail

Your Reference: **GBJ4308K**

22/03/2023

CHINA TAIPING INSURANCE (SINGAPORE) PTE. C/O LKK AUTO CONSULTANTS

Attn: Third Party Claim Department -

ACCIDENT INVOLVING SNF5329Y & GBJ4308K ON 12 Jan 2023.

Dear Officer,

We wish to inform you that the repairs to our client vehicle have been completed.

We hereby submit the claims as follows:

Details	Remarks	Amount (SGD)
Cost of Repairs		\$20,143.85
Loss Of Rental	\$140.40 x 5 days	\$702.00
Others		
TOTAL		\$20,845.85

Kindly let us have your offer to Christine.yow@wearnes.com

Your soonest reply is much appreciated. Thank you.



Yours faithfully

Christine Yow

D (65) 6430 4899

Wearnes Automotive Pte Ltd

Bodyshop and Paint Division

28 Leng Kee Road,

Singapore 159104

This is a computer generated printout, no signature is required.

(PAYMENT BREAKDOWN)

Vehicle No	:	SNF5329Y	Model	:	JAGUAR E-PACE
	:	GBJ4308K			
Date of Accident	:	12/01/2023			

Global Sum Settlement	:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Liability	:	100 %	(Agreed/Assessed)

Repair Estimate	:	\$ 42,837.90	
Final Repair Cost	:	\$ 20,143.85	
Loss of Use	:	\$	days at \$ per day
Rental (if any)	:	\$ 702.00	5 days at \$140.40 (incl of GST) per day
Others	:	\$	
	:	\$	
	:	\$	
	:	\$	
Final Settlement Sum	:	\$ 20,845.85	

Remarks:

Payment Instruction: Payee's Breakdown

1)	WEARNES AUTOMOTIVE PTE LTD	:	\$ 20,845.85
2)		:	\$
3)		:	\$
4)		:	\$

SERVICE TAX INVOICE

0 - C00010	SL: CHINA TAIPING INSURANCE (SINGAPORE)	
CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD		GST Reg.No:M28920628X
3 ANSON ROAD	Inv.No. . : B&P 7022192	Page 1
#16-00, SPRINGLEAF TOWER	Inv.date. : 18/03/2023	
SINGAPORE 079909	WIP No. . : 58878	
	Veh.In/Out: 22/02/2023 09/03/2023	
	*Tel.No. . : 63896111	
	Reg.No. . : SNF5329Y	
Closed by : Juan Paulo Bongon Ba	Reg.date . : 01/06/2022	
Svc Consultant : ACC	Mileage .. : 7,187	
Remarks : Ms Low Choon Yen	Chassis No: SADFB2AS6N1031436	

Parts/Op.No	Description	Mech	Qty	Price	Disc%	Pkg	Amount	G
802	TO REPLACE TAILGATE, RR BUMPER	0		2600.00	0		2,600.00	S
	RR LOWER COVER, EMBLEM,							
	TAILGATE LAMP LH, ETC							
800	TO REPLACE TAILGATE, RR	0		2000.00	0		2,000.00	S
	BUMPER							
802	TO REMOVE & TRANSFER TAILGATE	0		500.00	0		500.00	S
	INTERIOR COMPONENTS							
802	TO REPLACE RR WINDSCREEN, ETC	0		1300.00	0		1,300.00	S
280	TO CHECK WIRING INCLUDE	0		621.00	0		621.00	S
	RESETTING OF ALL ELECTRICAL							
	MODULES							
0080	TO INSTALL RR WINDSCREEN	0		280.00	0		280.00	S
	FILM							
001161824	*D* PRIMER GLASS & P	1.0	EA	46.90	10		42.21	S
LR078295	ADHESIVE AND SEALER	2.0	EA	192.90	10		347.22	S
J9C4791	GLASS-BACKLIGHT E-Pa	1.0	EA	1128.10	10		1,015.29	S
J9C2663	PANEL-TAILGATE E-Pac	1.0	EA	3994.70	10		3,595.23	S

SERVICE TAX INVOICE

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CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD	Inv.No. . : B&P 7022192	Page 2
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Svc Consultant : ACC	Mileage .. : 7,187	
Remarks : Ms Low Choon Yen	Chassis No: SADFB2AS6N1031436	

Parts/Op.No	Description	Mech	Qty	Price	Disc%	Pkg	Amount	G
J9C7305	BADGE - E-PACE	1.0	EA	216.90	10		195.21	S
T4A15451	BADGE - half leaper	1.0	EA	203.60	10		183.24	S
J9C31405	BADGE	1.0	EA	182.90	10		164.61	S
J9C38015	TAILGATE LAMP LH	1.0	EA	775.80	10		698.22	S
T2H24328	LAMP-TRUNK NUMBER PL	2.0	EA	46.70	10		84.06	S
J9C1805	STUD-SPECIAL	2.0	EA	53.20	10		95.76	S
J9C27143LM	BUMPER-REAR	1.0	EA	2666.70	10		2,400.03	S
J9C14137	PANEL-VALANCE	1.0	EA	199.10	10		179.19	S
J9C14130	MOUNTING CTR BRACKET	1.0	EA	191.10	10		171.99	S
J9C6918	INSERT-PLASTIC BRACK	1.0	EA	245.50	10		220.95	S
C2S6858	BUMPER NUT XF	15.0	EA	6.10	10		82.35	S
J9C38451	BEAM-BUMPER REAR	1.0	EA	785.40	10		706.86	S
J9C12482	BRACKET-BUMPER LH	1.0	EA	156.60	10		140.94	S
T2H47867	LATCH	1.0	EA	334.50	10		301.05	S
T4A5999	BEZEL LATCH	1.0	EA	31.20	10		28.08	S
J9C38013	LAMP-TAILGATE RH	1.0	EA	775.80	10		698.22	S

Gross Total. 18,651.71

Labour Total 7,301.00
Parts Total 11,350.71
Package Total 0.00

Net..... 18,651.71
 GST @ 8.0% 1,492.14
 Total..... 20,143.85
 Paid..... 0.00
 Please Pay.. 20,143.85

GST: S=StdRated; O=OutOfScope; Z=ZeroRated; P=PreviousRate
 Enquiries must be lodged within 14 days from the invoice date
 This is a computer generated invoice. No signature is required.

**Wearnes Automotive Pte. Ltd.**

Co Reg No. 199501400R / GST Reg No. M28920628X
45 Leng Kee Road, Singapore 159103
Telephone: +65 6876 5063
www.wearnesleasing.com

Tax Invoice**China Taiping Insurance (Singapore)**

3 Anson Road
#16-00
Springleaf Tower
Singapore 079909

Inv No. : R2300186
Inv Date : 14 Mar 2023
Ref :
Terms : 90 Days

Rental Information

Agreement No. : RA23/00080
Billing Period : 22/02/2023 10:00 - 27/02/2023 10:00
Driver Name : Low Choon Yen

Car Information

Registration No. : SLM7385H
Make : TOYOTA
Model : CAMRY 2.5 AUTO

#	Description	Qty	UOM	Unit Price	Amt
1	Being Rental Payment for the Period Stated Above	5.00	Day	130.00	650.00

Remarks:

SNF5329Y_China Taiping (J)_Paulo

Payment method:

Interbank GIRO and credit card payments: Deduction will take place from 5th to 9th of the month.

Cheque payments: All cheques should be crossed and made payable to "Wearnes Automotive Pte Ltd".

Bank Transfers:

Oversea-Chinese Banking Corporation Limited
Bank Code: 7339
Branch Code: 501
Bank Account Name: Wearnes Automotive Pte Ltd
Bank Account: 501-296727-001
SWIFT CODE: OCBGSGSG

Subtotal : S\$ 650.00
GST 8.0% : S\$ 52.00
Total : S\$ 702.00

Please note that late payment interest will be imposed at a rate of 2% per month commencing from the date that the payment is due, compounded daily, plus an administrative fee of S\$50.00 (excluding GST) each time.

This is a computer generated document. No signature is required.

AUTHORIZATION TO ACT

I, LOW CHAO N YEN ("the third party claimant")
of BLK 91 WEST COAST VALE #25-02 (address),
owner of SNF53294 (vehicle no.) hereby authorize
WEAPNES AUTOMOTIVE PTE LTD
("the workshop") to act for me with respect to my claim for repair costs and / or rental
and / or loss of use ("claim") for my vehicle no. SNF53294 that was
damaged pursuant to the accident which occurred on 12/01/2023 (date) along
JURONG TOWN HALL ROAD (location)
involving vehicle no. G8J 4308K ("the accident").

I further authorize the workshop to sign the discharge voucher on my behalf to settle
my above mentioned claim in a manner that they deem fit and the workshop is further
authorized to receive payment further to settlement of my claim with payment
cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on
a without prejudice and without admission of liability basis insofar as the driver /
owner / insurers of the other vehicle/s is concerned.

Dated this 12 day of 01 (month) 20 23 (year)



Signed by "the third party claimant"
Policyholder's Signature only
& Company Chop – (if registered under a company)



Signed by "the workshop"

WIP
58878
CTI-TP

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.
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	12/01/2023 16:16 (SGT)
Reported by	Both
Date of Accident	12/01/2023 06:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JURONG TOWN HALL ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNF5329Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LOW CHOON YEN
NRIC No	SXXXX772D
Email Address	linda@entrust.sg
Mobile Phone No	(Phone) +65-94765438
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Jaguar
Model	E-PACE 1.5P FWD
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1500

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220055610

DRIVER

Name of Driver	LOW CHOON YEN
NRIC No	SXXXX772D
Date Of Birth	01/07/1978
Occupation	Indoor

Date Of Driving Pass	05/07/2008
Driving experience	14 YEARS AND 6 MONTHS
Gender	Female
Mobile Number	(Phone) +65-94765438
Alt. Phone Number	-
Email Address	linda@entrust.sg
Address	BLK 91 WEST COAST VALE #25-02
Address complement	-
Postcode	126755
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	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)	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	Jurong East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008999999
Alt. Police Station Phone No	(Fax) +65-66655791
Police Station Address	No. 92 Boon Lay Way Singapore 609962
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBJ4308K
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	TAN CHUN KEONG
NRIC No	SXXXX547G
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	FBN5900Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	RAJADURAI ESWARAN
Work Permit No	GXXXX133P
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

WIP
58878
CTI-TP

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for filing.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorised Driver.
4. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

ACCIDENT STATEMENT

Date and Time of Accident Date: 12/1/23 Time: 06:55
Exact Location of Accident JURONG TOWN HALL RD

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNF5329Y

INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Card) LOW CHUAN YEN
Personal Identification - NRIC (Singaporean/PR) S7878772D
- FIN/Passport Number
- Not Applicable

VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model Manufacturer JAGUAR Model E-PACE
Type of Vehicle* ☐ Saloon ☐ MPV ☐ CRV ☐ Van ☐ Lorry
☐ Bus ☐ M/cycle ☒ Others
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? ☒ Yes ☐ No (If No, Please select: ☒ Third Party ☐ Reporting)
Vehicle Category* ☒ Private ☐ Commercial ☐ Motorcycle

INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company * AIG
Type of Policy ☒ Comprehensive ☐ Third Party Fire & Theft ☐ TP Only
Fleet Policy ☐ Yes ☒ No
Policy Number 7220055610
Motor CI

DRIVER

☒ Same as Insured above
Name of Driver
Personal Identification - NRIC (Singaporean/PR)
- FIN/Passport Number
Date of Birth 01 dd/ 07 mm/ 1978
Driving Date Pass 5 dd/ 01 mm/ 2008
Year of Driving Experience Year(s) Month(s)
Occupation ☒ Indoor ☐ Outdoor
Gender ☐ Male ☒ Female
Contact Number / Mobile Phone / Fax No. 9476-5430

Address of Driver	BLK 91 WEST COAST VALLEY #25-02	Postcode (126755)
Email Address	linda@entrust.sg	
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
If No, Relationship of the Driver with the Insured		
Vehicle Registration Number of Driver's Own	<input checked="" type="radio"/> Yes <input type="radio"/> No	
Vehicle Registration Number of Driver's Own Vehicle (if applicable)		
Insurance Company of Driver's Own Vehicle (if applicable)		

GENERAL INFORMATION OF THE ACCIDENT

Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	HEAD TO REAR (CHAIN COLLISION)
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others, _____
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others, _____

OTHER INFORMATION

Was any foreign vehicle involved in this accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Was any body injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Was any other vehicle or property damaged?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was there any video captured by Car Camera?	<input type="radio"/> Yes <input type="radio"/> No
Number of Passengers (Including Driver)	1

DETAILS OF POLICE ACTION

Was the Accident reported to the Police?	<input checked="" type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, please state which Police Station.)
Police Station Name	
Police Station Address	
Police Station Contact	Tel No. _____ Fax No. _____
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input type="radio"/> No (If Yes, against whom?)

DETAILS OF OTHER VEHICLE / PROPERTY 1

Vehicle Registration Number	GBS4308K
Vehicle Make/ Model/ Colour	LORRY
Details of Properties	TAN CHUN KEONG
Name of Driver	SZG4547G
Personal Identification - NRIC (Singaporean/PR)	FBH5900Y
- FIN/Passport Number	
Contact Number	PAJA DURAI
Address	660 821 33P
Name of Insurance Company	ESWARAN
Nature of Damage	
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 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.

12/1/13

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

REFER TO POLICE REPORT

T/20230112/2021

Declaration

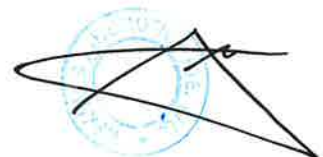
We declare the foregoing particulars are true in every respect.



12/1/23

Policyholder's Signature / Date &
Time

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



Witnessed by Reporting Centre
Personnel



SINGAPORE POLICE FORCE



T/20230112/2021

1 of 3

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

Report No. T/20230112/2021 ✓

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/01/2023 09:17		Vide Report No.:		Station Diary No.: 26	
Informant's Particulars					
Name of Informant: LOW CHOON YEN			Address: BLK 91 WEST COAST VALE #25-02 SINGAPORE 126755		
ID Type / ID No.: NRIC NO / S7878772D			Contact No.: Home/Office: Mobile: 94765438		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 44	Date of Birth: 01/07/1978	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: AUDITOR			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 12/01/2023 06:55	Type of Location: Straight Road
Location: JURONG TOWN HALL ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ4308K	Lorry				Slightly Damaged	1
SNF5329Y	Car	JAGUAR	E-PACE 1.5P FWD	Blue	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNF5329Y	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7220055610	01/06/2022	31/05/2023



**SINGAPORE
POLICE FORCE**



T/20230112/2021

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

2 of 3

Report No. T/20230112/2021

CONTINUATION OF REPORT

Brief Details.

I was involved in a traffic accident which occurred along Jurong Town Hall Road towards AYE (City), near to Blk 114 Jurong East St 13, on 12/01/2023 at about 0655hrs involving the following vehicles:

SNF5329Y (Low Choon Yen: S7878772D)
GBJ4308K (Tan Chun Keong: S2611547G)
An unknown red/black motorcycle

On 12/01/2023, at about 0655hrs, I was travelling along Jurong Town Hall Road towards AYE (City), near Blk 114 Jurong East St 13, in my vehicle bearing registration plate number SNF5329Y. The weather was clear, and the road surface was dry. There were 3 lanes on the road, I was on the second lane. A vehicle in front of me jammed its brakes. The collision warning in my car triggered the brakes, and my car jammed its brakes as well. A lorry bearing registration plate number GBJ4308K failed to stop in time and rear-ended my vehicle. As a result, an unknown red/black motorcycle rear-ended the said lorry. I do not have the particulars of the rider nor the vehicle registration plate number.

I am lodging this report for record purposes.



**SINGAPORE
POLICE FORCE**



T/20230112/2021

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

3 of 3

Report No. T/20230112/2021

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:

D /

SGT 2 Aw Choon Kiat

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

12/01/2023 09:17

Officer In Charge Of Case:

TP / GIA /

SI MOHAMAD ZULFAZDLI BIN ABDULLAH ✓

Contact No.: 65476204 ✓

Classification Of Case:

NP168

Juan Paulo Bongon Baldoz

From: Veron Chen (LKKAUTO) <veronchen@lkkauto.com>
Sent: Monday, 20 March 2023 5:05 pm
To: Rasul (LKKAUTO); SUR; CS A Team; Juan Paulo Bongon Baldoz
Subject: RE: TP FINALIZED: Direct Settlement involving vehicle SNF5329Y (Ours) & GBJ4308K (Your Insured) DOA: 12/01/2023 - Our ref: SNM23D200336/C02/tankl

Dear Paulo,

“Without Prejudice”

We will be advising our Principal a cost of repair of \$18,651.71 before GST with 5 days of repair, subject to their approval.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Rasul (LKKAUTO) <Rasul@lkkauto.com>
Sent: Saturday, 18 March 2023 10:46 AM
To: SUR <sur@lkkauto.com>; CS A Team <cs-a@lkkauto.com>
Subject: FW: TP FINALIZED: Direct Settlement involving vehicle SNF5329Y (Ours) & GBJ4308K (Your Insured) DOA: 12/01/2023 - Our ref: SNM23D200336/C02/tankl
Importance: High

From: Juan Paulo Bongon Baldoz <juan.paulo@wearnes.com>
Sent: Saturday, 18 March 2023 10:45:39 am (UTC+08:00) Kuala Lumpur, Singapore
To: Rasul (LKKAUTO) <Rasul@lkkauto.com>
Subject: TP FINALIZED: Direct Settlement involving vehicle SNF5329Y (Ours) & GBJ4308K (Your Insured) DOA: 12/01/2023 - Our ref: SNM23D200336/C02/tankl

Dear Rasul,

Kindly check & confirm finalized amount \$18,651.71 before GST (part by part). 5 days repair.

Attached before paint & after repair photos.

Juan Paulo Bongon Baldoz

From: Juan Paulo Bongon Baldoz
Sent: Saturday, 18 March 2023 10:45 am
To: 'Rasul (LKKAUTO)'
Subject: TP FINALIZED: Direct Settlement involving vehicle SNF5329Y (Ours) & GBJ4308K (Your Insured) DOA: 12/01/2023 - Our ref: SNM23D200336/C02/tankl
Attachments: SNF5329Y FINALIZED TP (CTI).pdf; B (1).jpeg; B (2).jpeg; B (3).jpeg; 1.jpeg; 2.jpeg; 3.jpeg; 4.jpeg; 5.jpeg; 6.jpeg; 7.jpeg; 8.jpeg; 9.jpeg; 10.jpeg; 11.jpeg; 12.jpeg; 13.jpg; 14.jpg; 15.jpg; A (1).jpeg; A (2).jpeg; A (3).jpeg; A (4).jpeg; A (5).jpeg; A (6).jpeg; A (7).jpeg; A (8).jpeg; A (9).jpeg
Importance: High
Follow Up Flag: Follow up
Flag Status: Flagged

Dear Rasul,

Kindly check & confirm finalized amount \$18,651.71 before GST (part by part). 5 days repair.

Attached before paint & after repair photos.

Thank you

Paulo
Service Consultant
Bodyshop & Paint



Wearnes Automotive Pte Ltd
45 Leng Kee Road Singapore 159103
M (65) 98270463
www.wearnesauto.com juan.paulo@wearnes.com

*This email, including any attachment, is confidential and may also be privileged.
If you have received it in error, please notify us immediately by reply email and then delete this message from your system.
Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you.*

From: Juan Paulo Bongon Baldoz
Sent: Wednesday, 1 March 2023 3:33 pm
To: Rasul (LKKAUTO) <Rasul@lkkauto.com>
Subject: SUPPLEMENTARY: Direct Settlement involving vehicle SNF5329Y (Ours) & GBJ4308K (Your Insured) DOA: 12/01/2023 - Our ref: SNM23D200336/C02/tankl
Importance: High

Hi Rasul,

Refer to attached supplementary list & damage photos.

Thank you

Juan Paulo Bongon Baldoz

From: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>
Sent: Wednesday, 18 January 2023 9:14 am
To: Juan Paulo Bongon Baldoz
Subject: RE: 3rd REMINDER: Direct Settlement involving vehicle SNF5329Y (Ours) & GBJ4308K (Your Insured) DOA: 12/01/2023 - Our ref: SNM23D200336/C02/tankl

Follow Up Flag: Follow up
Flag Status: Flagged

Without Prejudice

Dear Paulo,

We refer to your email below.

Based on the available information, we agree on direct settlement.

Subject to policy terms & conditions, damages consistency and quantum, please let us have your quantification of claim including your client's Letter of Authority once repair cost and days are finalised with our surveyor for our further consideration.

Please note that the claim for loss of use and/or rental per day, if any, will be strictly based on the Non-Injury Motor Accident (NIMA) benchmark and surveyor's recommendation.

Please note that this proposal shall not be deemed or construed to be (a) an admission of the truth or falsity of any actual or potential claims or (b) an acknowledgment or admission by China Taiping Insurance Pte Ltd of any fault or liability whatsoever to the insured or to any third party.

China Taiping Insurance Pte Ltd reserves any and all rights under the policy to investigate the claim and to make a determination on coverage, including the rights to reject the claim.

Thank you.

NOTICE :

In response to the escalating Covid-19 cases, please refrain from sending hardcopy documents to us as delay is to be expected for handling hardcopy documents. All correspondence should be made via email claimsdept@sg.cntaiping.com or fax at [6224 7175](tel:62247175). Any inconvenience caused is much regretted.

Regards

Tan Kah Leong
Senior Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #15-00 Springleaf Tower Singapore 079909