

MATTHEW CHIONG PARTNERSHIP

ADVOCATES & SOLICITORS

8 Eu Tong Sen Street, #11-96/97, The Central Office 1, Singapore 059818

T +65 6224 0405 | F +65 6224 0306 | W www.mcplaw.com.sg

Your Ref: *To be advised*

1 November 2022

Our Ref: JW/ns/20221521-018 [SMX2971D]

Writer's name: Jade Wu

Writer's email: jadewu@mcplaw.com.sg

Writer's Secretary DID: +65 6812 0630 (Nicole)

LOH YEDA VANCE

28 Fourth Avenue

Singapore 268670

By Certificate of Posting

LIBERTY INSURANCE PTE LTD

51 Club Street

#03-00 Liberty House

Singapore 069428

By Email:

servicecenter@libertyinsurance.com.sg

Dear Sirs,

Name of Claimant:

KENNETH TAY ZHI YUAN

c/o SV Autoworks Pte. Ltd.

8 Kaki Bukit Avenue 4

#02-24, Premier @ Kaki Bukit

Singapore 415875

Accident Involving SMX2971D (Our Client's Vehicle) And SFH13A Along Duxton Road – Craig Road on 29 July 2022 At 10:30pm

1. We are instructed by the abovenamed to claim damages against you in connection with a road traffic accident on 29 July 2022 along Duxton Road – Craig Road involving our client's vehicle registration number SMX2971D and vehicle registration number SFH13A owned by you and driven by you at the material time.
2. We are instructed that the accident was caused by your negligent driving and/or management of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:

	Particulars	S\$
a.	Costs of Repair	24,700.00
b.	Rental Fees (9 days x S\$90.00)	810.00
c.	Survey report fee	1,223.00
d.	Gear Search Fee	2.00
e.	GIA search fee	31.00
f.	Costs (including GST)	1,070.00
		27,836.00

3. A copy of each of the following supporting documents is enclosed:

- a) Our client's Singapore Accident Statement and police report;
- b) Accident Statement of SFH13A;
- c) Police investigation result letter;
- d) Repairer's invoice;
- e) Rental vehicle invoice and agreement;
- f) Survey report, alignment report and invoice;
- g) Accident Statement invoice; and

- h) Gear search receipt.
4. Our investigations reveal that you were the owner of vehicle registration number **SKU230L** at the material time.
5. Pursuant to Appendix B of the State Courts Practice Directions 2021, you must reply to us substantively with eight (8) weeks from the date of your receipt of this letter with the following information:
- a. Whether your insurer is defending the claim or whether you are defending the claim personally. Reasons for the insurer's decision not to act must be provided;
 - b. Your position on the claim on both liability and quantum (eg, whether the claim is admitted or denied) or make an offer of settlement. If the claim is not admitted in full, the you must give reasons and provide a list of documents together with copies of all relevant supporting documents;
 - c. You **are to confirm/state the identity of the person driving your vehicle at the time of the accident and provide the driver's identification number and address** if this is not already stated in the Singapore Accident Statement. If it is your position that the party you have named was the hirer of your vehicle, please provide us with the document(s) i.e. correspondence, lease/rental agreement etc.

Please **TAKE NOTICE** that there is a presumption in law that you were the driver of the vehicle and/or the said driver was driving as your employee, servant and/or agent at the material time of the accident and if we do not hear from you on the identity of the driver, we shall commence legal proceedings against you as the Defendant for being liable for the damages, loss and expense suffered by our client in the above accident;

- d. You must provide copies of the Singapore Accident Statements and police reports and they must be full and complete and must reflect the names, identification numbers and addresses of all persons involved in the accident together with type-written transcripts of their factual accounts of the accident;
 - e. You must provide any pre-repair and/or post-repair survey/inspection report(s);
 - f. You must specify the particular scenario in the Motor Accident Claims Online, Motor Accident Guide and/or other similar guide that is applicable to his account of the accident, enclose with your reply a copy of the relevant page of the scenario and, except where the claim is denied, make an offer on liability; and
 - g. If your insurer is the party replying to us, the reply must also state the name(s), telephone number(s) and fax number(s) of the insurance officer(s) handling the matter and the insurer's file reference number(s), to facilitate correspondence.
6. Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.
7. Please note that you or your insurer should send to us an acknowledgement of receipt within fourteen (14) days of your receipt of this letter and/or respond to us substantively within eight (8) weeks of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.
8. Please also note that 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 eight (8) weeks of your receipt of this letter.

9. Our client's rights are expressly reserved.

Yours faithfully,

Matthew Chiong Partnership

MATTHEW CHIONG PARTNERSHIP

encs

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	01/08/2022 16:36 (SGT)
Reported by	Both
Date of Accident	29/07/2022 22:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	DUXTON RD - CRAIG RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX2971D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KENNETH TAY ZHI YUAN
NRIC No	S9320616I
Email Address	KENNETHTAYZY@GMAIL.COM
Mobile Phone No	(Phone) +65-91702433
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1500

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2001625413-01

DRIVER

Name of Driver	KENNETH TAY ZHI YUAN
NRIC No	S9320616I
Date Of Birth	05/06/1993
Occupation	Indoor

Date Of Driving Pass	04/11/2013
Driving experience	8 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91702433
Alt. Phone Number	-
Email Address	KENNETHTAYZY@GMAIL.COM
Address	587 ANG MO KIO AVE 3 #05-3023 S560587
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	Raining
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)	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	Central Division Headquarters
Police Station Phone No	(Phone) +65-18002240000
Alt. Police Station Phone No	(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 ATTACHED POLICE REPORT

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	WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFH13A
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

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



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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
(ii) investigating the accident and/or my claims;
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
(collectively the "Purposes")
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

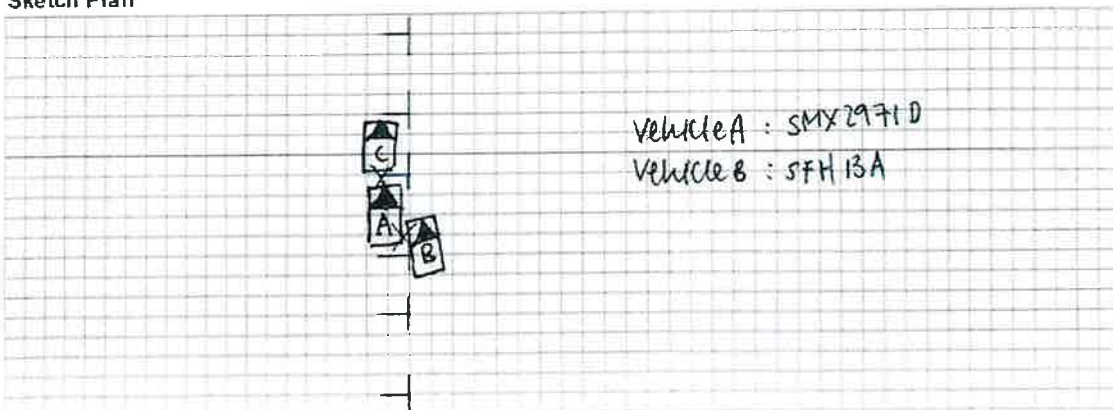


Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan



- Refer police report -

Declaration

We declare the foregoing particulars are true in every respect.

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre Personnel






























**SINGAPORE
POLICE FORCE**


A/20220801/7006

1 of 2

POLICE REPORT (NP299)

Report No. A/20220801/7006

Police Station Of Origin
Central Division HQ
391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 01/08/2022 10:14	Vide Report No.	Station Diary No.
Name Of Informant KENNETH TAY ZHI YUAN	Address 587 ANG MO KIO AVENUE 3 #05-3023 SINGAPORE 560587	
ID Type / ID No. NRIC NO / S9320616I	Contact No. Home/Office:	Mobile: 91702433
Nationality SINGAPORE CITIZEN	Email Address keenneeth@gmail.com	
Occupation Insurance sales agent/broker	Sex Male	Age 29
Institution/School Name	Date of Birth 05/06/1993	Race Chinese
Date/Time Of Incident 29/07/2022 22:35 - 30/07/2022 00:15	Location Of Incident 28 DUXTON ROAD #00-00 SINGAPORE 089492	

Brief details.

On 29th July 2022 at 2130hrs, I parked my Grey Mercedes Benz C180 Advantgarde (SMX2971D) along Duxton Road (Lot 45) where I was on my way to have dinner with friends. Upon returning to my vehicle at 0015hrs, I discovered that my vehicle was damaged at the rear driver side and there was a dent. I walked forward to check, my car bumper was dislodged, and the car emblem was shattered. A note was placed on top on windshield together with a case card that a police report was made Case No. (A/20220729/0148). The above accident was with a dark blue BMW X6 (SFH13A).

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: 01/08/2022 10:14
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



A/20220801/7006

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20220801/7006

Subjects Involved			
Victim			
Person Name	KENNETH TAY ZHI YUAN		
ID Type	NRIC NO	ID No	S9320616I
Gender	Male	Age	29
Race	Chinese	Language	English
Occupation	Insurance sales agent/broker	Address	587 ANG MO KIO AVENUE 3 #05-3023 SINGAPORE 560587
Mobile No	91702433	Is Informant A Victim?	Yes
Person Name	KENNETH TAY ZHI YUAN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 01/08/2022 10:14
Officer In-Charge Of Case:	Classification Of Case:



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1960
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SP2001625413-01
 Date of Issue : 2022-04-21
 Coverage : Comprehensive
 Policyholder : KENNETH TAY ZHI YUAN
 Period of Insurance : 21 April 2022 to 20 April 2023(both dates inclusive)
 Registration No. : SMX2971D
 Chassis number of Vehicle : WDD2050402R206531

Persons or Classes of Persons Entitled to Drive*:

- (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with the his/her permission

**Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.*

Limitation as to Use*:

Used only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- (a) use for hire or reward
 (b) use for racing, pace-making, reliability trials or speed testing
 (c) use for the carriage of goods (other than samples) in connection with any trade or business
 (d) use for any purposes in connection with the Motor Trade

**Limitation rendered inoperative by Section 8 of 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) or Amendment, Act or Acts passed in substitution thereof.

21 April 2022

Issued Date

Hicham Raissi
 Chief Executive Officer
 Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000336 AAC PERFORMANCE PTE LTD

Excess	: Own Damage Excess	SGD	500.00
	: Windscreen Excess	SGD	100.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C
 79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg



SINGAPORE POLICE FORCE



A/20220801/7006

1 of 2

POLICE REPORT (NP299)

Report No. A/20220801/7006

Police Station Of Origin
Central Division HQ
391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 01/08/2022 10:14	Vide Report No.	Station Diary No.
Name Of Informant KENNETH TAY ZHI YUAN	Address 587 ANG MO KIO AVENUE 3 #05-3023 SINGAPORE 560587	
ID Type / ID No. NRIC NO / S9320616I	Contact No. Home/Office:	Mobile: 91702433
Nationality SINGAPORE CITIZEN	Email Address keenneetht@gmail.com	
Occupation Insurance sales agent/broker	Sex Male	Age 29
Institution/School Name	Date of Birth 05/06/1993	Race Chinese
Date/Time Of Incident 29/07/2022 22:35 - 30/07/2022 00:15	Location Of Incident 28 DUXTON ROAD #00-00 SINGAPORE 089492	

Brief details.

On 29th July 2022 at 2130hrs, I parked my Grey Mercedes Benz C180 Advantgarde (SMX2971D) along Duxton Road (Lot 45) where I was on my way to have dinner with friends. Upon returning to my vehicle at 0015hrs, I discovered that my vehicle was damaged at the rear driver side and there was a dent, I walked forward to check, my car bumper was dislodged, and the car emblem was shattered. A note was placed on top on windshield together with a case card that a police report was made Case No. (A/20220729/0148). The above accident was with a dark blue BMW X6 (SFH13A).

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: 01/08/2022 10:14
Officer In-Charge Of Case:	Classification Of Case:

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 02/08/2022 14:59 (SGT)
Reported by Both
Date of Accident 29/07/2022 21:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information Duxton Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFH13A

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Loh Yeda Vance

VEHICLE PARTICULARS

Manufacturer BMW
Model X6
Variant -
Vehicle Category Private car
Transmission Auto
CC 2998

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd
Policy Number / Cover Note Number -

DRIVER

Name of Driver Loh Yeda Vance
NRIC No SXXXXX523A
Address 28 Fourth Avenue
Address complement -
Postcode 268670
Does Driver Own Other Vehicles? No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Collided into Parked Vehicle

Weather Conditions Raining

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
Was anybody injured in the Accident? No
Was any other vehicle or property damaged? Yes
Number of Passengers (Including Driver) 3
Translator's name -
Translator's ID -
Translator's phone number -
Translator's email -
Original language used in the statement -

CIRCUMSTANCES OF ACCIDENT

Refer to Sketch Plan.

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 too large.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMV2971D
Vehicle Manufacturer Mercedes
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver -
Insurance Company Name -

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.
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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


 Policyholder's Signature
 Date & Time:

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


 Jack Ng Guoming
 Performance Motors Limited
 303 Alexandra Road
 Sime Darby Performance Centre
 Singapore 150041
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

Refer to Police Report.

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:















**SINGAPORE
POLICE FORCE**



A/20220730/7079

1 of 2

POLICE REPORT (NP299)

Report No. A/20220730/7079

Police Station Of Origin
Central Division HQ
391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 30/07/2022 15:50	Vide Report No.	Station Diary No.
Name Of Informant LOH YEDA, VANCE	Address 28 FOURTH AVENUE SINGAPORE 268670	
ID Type / ID No. NRIC NO / S8330523A	Contact No. Home/Office: Mobile: 80311301	
Nationality SINGAPORE CITIZEN	Email Address VANCELOH@GMAIL.COM	
Occupation FINTECH	Sex Male	Age 38
Institution/School Name	Date of Birth 03/10/1983	Race Chinese
	Language English	
Date/Time Of Incident 29/07/2022 21:30 - 29/07/2022 21:35	Location Of Incident DUXTON ROAD	

Brief details.

I am filing this report on the instruction of my investigation officer Mr Vilton Hia. My car is in in pound and a report must be filed for the release.

Reason for the in pound is cause of damage to another car without proving contact details for settlement. About 2130 hours on the 29th of July 2022, I was driving along Duxton Road with 2 friends, road condition was wet and visibility was poor. There were cars lined on both sides of the road and it was narrow. My speed was very slow due to the road conditions and I was also looking for a space to park. I felt a bump while driving, and exited the car to access the damage together with another friend. There

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: 30/07/2022 15:50
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



A/20220730/7079

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20220730/7079

was a passerby who pointed some damage to another car, however, I felt that the damage was caused by a prior accident and not by myself. I then proceeded to park my car along the road and met up with some friends for drinks. I took a taxi home with the intention to collect my car the next day. However, when I returned to Duxton road to collect the car on the 30th of July about 11am, I realised that the car was missing. I subsequently discovered that it was impounded by the Traffic Police.

It is not my intent to drive off after causing damage to another car as I have stopped the car to check the situation. Also, I did not drive off to another place, but parked my car along the same road itself. However, I would take responsibility for the incident and am willing to make commercial settlements with all parties involved.

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: 30/07/2022 15:50
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**
SAFEGUARDING EVERY DAY

Our Ref: TP/IP/20023/2022

KENNETH TAY ZHI YUAN
587 ANG MO KIO AVENUE 3
#05-3023
Singapore 560587

000064

Traffic Police
10 Ubi Avenue 3
Singapore 408865

IB Call Centre: 65470000
FAX: 65474883

Date: 21/09/2022

Dear Sir

**TRAFFIC ACCIDENT INVOLVING SMX2971D, SGR31H & SFH13A ALONG DUXTON ROAD ON
29/07/2022 AT 21:43 HRS**

I refer to the above accident.

2 We have completed investigation into the case. Action has been initiated against the driver of **SFH13A** for the following offences:

a) **CARELESS DRIVING WITHOUT DUE CARE AND ATTENTION UNDER SECTION 65(1)(a) PUNISHABLE UNDER SECTION 65(5)(a) OF THE ROAD TRAFFIC ACT, 1961.**

b) **FAILING TO STOP AFTER AN ACCIDENT UNDER SECTION 84(1) ROAD TRAFFIC ACT 1961.**

c) **LEAVING VEHICLE IN SUCH A MANNER CAUSING INCONVENIENCE TO OTHERS UNDER SECTION 122 ROAD TRAFFIC ACT 1961.**

3 Please be informed that our decision does not preclude you from pursuing civil claims.

4 If you have any clarification, you may contact the Investigation Officer, Vilton Hia Wee Siang at office number: 65476232.

Yours faithfully,
SI Vilton Hia Wee Siang
Investigation Officer (GIT D)
Traffic Police
Singapore Police Force

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



SV AUTOWORKS PTE LTD

UEN No.: 202140260K

8 Kaki Bukit Avenue 4

Premier @ Kaki Bukit

#02-24, Singapore 415875

Tel: +65 6242 4328

Email: info.svautoworks@gmail.com

STATEMENT OF CLAIM

Liberty Insurance Pte Ltd

6221 8611

Invoice No. : I202201043
Invoice Date : October 27, 2022
Vehicle No. : SMX2971D
Make & Model : Mercedes C180
Chassis No. : WDD2050402R206531
Mileage : -
Terms : Due within 90 days

NO.	DESCRIPTION	QUANTITY	PER UNIT (SGD)	AMOUNT (SGD)
1	To Carry Out Repair & Respray on Accident Corresponding to Supply on Spare Parts & Labour Charges	1	24,700.00	24,700.00

GRAND TOTAL :	\$24,700.00
Amount Paid	\$0.00
Balance Due	\$24,700.00



Signature/Company Stamp

I agree to the price as listed above and affirm that the goods are received in good condition.



Invoice To	: Kenneth Tay Zhi Yuan
Address	: 587 Ang Mo Kio Ave 3 #05-3023 Singapore 560587
Attention	: -
Contact No.	: -
PO Number	: N/A
Vendor Number	: N/A
Total Pages	: 01

ORIGINAL TAX INVOICE

Invoice No. : INV0007
Date : 13/08/2022
Terms : Immediate

S/N	DESCRIPTION	QUANTITY	Per day	AMOUNT
1	Rental of Audi A3 (SLH 2793 Y) 31 July 2022 - 13 Aug 2022 Replacement for SMX 2971 D	9	\$90	810

All Cheques should be crossed "A/C Payee Only" and drawn to the order of
"J & J Car Rental & Leasing Pte Ltd "

Subtotal: S\$810.00
Total: S\$810.00

Thank you. We look forward to being of service to you again.

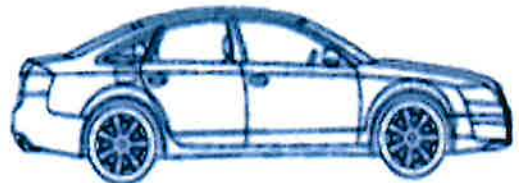
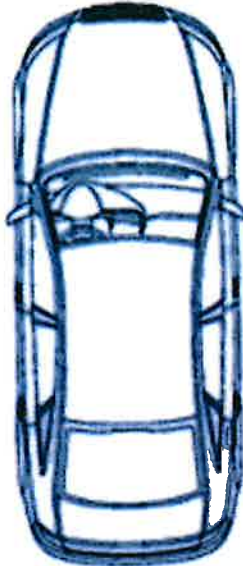
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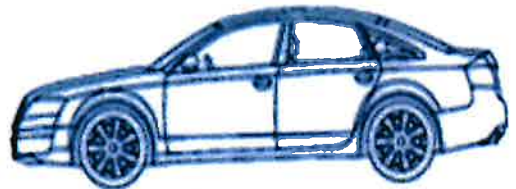
① SMX 297110

HIRER'S PARTICULARS	
Name: <u>Kenneth Tay zhi yuan</u>	Mobile No.: <u>9170 2433</u>
Address (Residential): <u>587 ANG MO KIO AVE 3 # 05-3023 SINGAPORE 560587</u>	Home No.: <u>-</u>
NRIC / Passport No.: <u>S93206161</u>	Email: <u>kennethtayzy@gmail.com</u>
Emergency contact (Next of Kin / Friend):	Date of Birth: <u>05/06/1993</u>
License Issued Date / Country of Issue:	
VEHICLE DETAILS	
Model / Make: <u>Audi A3</u>	Vehicle No.: <u>SLH27931</u>

FRONT



REAR



Legend: D = Dent, S = Scratch, C = Chip Off, R = Rust, M = Missing, L = Loose, CR = Crack																																	
Additional Features in Vehicle:		Delivery Address:	Collection Address:																														
<table border="1"> <thead> <tr> <th colspan="2">RENTAL CHARGES</th> </tr> <tr> <th>Day(s) / Week(s) / Month(s) / Year</th> <th>\$</th> </tr> </thead> <tbody> <tr><td>Malaysia Charge</td><td>\$</td></tr> <tr><td>Additional Driver</td><td>\$</td></tr> <tr><td>CDW</td><td>\$</td></tr> <tr><td>GPS Rental</td><td>\$</td></tr> <tr><td>Surcharge</td><td>\$</td></tr> <tr><td>Misc Charges</td><td>\$</td></tr> <tr><td>Delivery</td><td>\$</td></tr> <tr><td>Collection</td><td>\$</td></tr> <tr><td>Damage</td><td>\$</td></tr> <tr><td>Refundable Deposit</td><td>\$</td></tr> <tr><td>TOTAL</td><td>\$</td></tr> <tr><td>Reservation</td><td>\$</td></tr> <tr><td>BALANCE</td><td>\$</td></tr> </tbody> </table>		RENTAL CHARGES		Day(s) / Week(s) / Month(s) / Year	\$	Malaysia Charge	\$	Additional Driver	\$	CDW	\$	GPS Rental	\$	Surcharge	\$	Misc Charges	\$	Delivery	\$	Collection	\$	Damage	\$	Refundable Deposit	\$	TOTAL	\$	Reservation	\$	BALANCE	\$	Out Date: <u>31/07/2022</u> Return Date: <u>13/08/2022</u>	Out Time: Return Time: Hirer Signature: _____ Staff Signature: _____
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		<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>OUT</p> <p>1 1/2</p> <p>E F</p> </div> <div style="text-align: center;"> <p>IN</p> <p>1 1/2</p> <p>E F</p> </div> </div>																															
		Remarks:																															

By signing on the below, I have agreed that all the information stated above are true and accurate at the time of print.

Hirer's Signature / Date

Allied Auto Appraisal

22 Upper Serangoon Crescent #16-53 Singapore 534028

alliedauto@ymail.com

Reg 53127783B

Invoice

SV AUTOWORKS PTE. LTD.
8 KAKI BUKIT AVENUE 4
#02-24, PREMIER @ KAKI BUKIT
SINGAPORE 415875

Invoice No. ALLIED/SV/0029
Date : 27 OCT 2022
Case Ref : SV IND B2 08005

Sr	Description	Amount
1	Survey Inspection of SMX 2971 D	968.00
2	Transportation x 3	180.00
3	Photographs (Digital Printouts)	75.00
	Grand Total	SGD 1,223.00

Please cross a cheque of an amount **SGD 1,223.00 (SGD ONE THOUSAND TWO HUNDRED AND TWENTY-THREE ONLY)** payable to **ALLIED AUTO APPRAISAL**.

We shall be grateful if you could forward our payment within 30 days from the date of this invoice.

Thank you.

NG HENG CHAI - DIRECTOR

This is a computer generate invoice no signature is required

ALLIED AUTO APPRAISAL

22 Upper Serangoon Crescent #16-53 Singapore 534025

Company Registration No. 53127785B

Our Ref: **Allied/TP/22-08005**

Repairer : **S V Autoworks Pte Ltd**
Address of Inspection
8 Kaki Bukit Ave 4
#02-24 Premier Kaki Bukit
Singapore 415875

Veh No : **SMX 2971 D**
Date of Report : **26-Oct-22**
Date of Accident : **29-Jul-22**
Date of Survey : **1-Aug-22**

VEHICLE PARTICULARS & CONDITION

Make & Model	: Mercedes Benz C180 Avantgrade	Date of Registration	: 21-Oct-16
Engine No	: 27491030714963	Engine c.c.	: 1595 cc
Chassis No	: WDD2050402R206531	COE Expiry Date	: 20-Oct-26

CONDITION OF VEHICLE

General Condition	: Good	Modification	: No
Steering	: Serviceable	Air-Conditioner	: Yes
Handbrake	: Serviceable	Footbrake	: Serviceable
Wing Mirror	: Yes	Paint Work	: Good

CONDITION OF TYRES

 (The below values represent the remaining tyre treads depth)

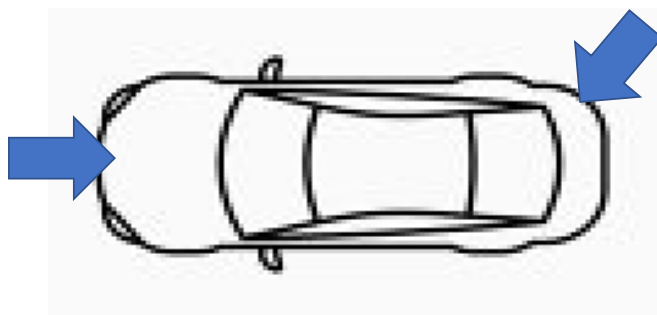
Front Tyre Size	: 225/45R18	Rear Tyre Size	: 225/45R18
Front Left Side	6mm Westlake	Rear Left Side	6mm Westlake
Front Right Side	6mm Westlake	Rear Right Side	6mm Westlake

GENERAL DESCRIPTION OF DAMAGE

The inspected vehicle sustained damage at the **FRONT & REAR RIGHT SIDE** portion.

During visual inspection, our surveyor noted that the front bumper, front headlamps, rear bumper, right tailamp and among other parts were affected.

All stated damage is subject to consistency of the accident reports.



Repairer Estimate

Parts	: 22,941.54
Nett Item	: 2,695.00
Labour	: 5,260.00
Total	: 30,896.54

Our Recommendation

Parts :	22,941.54
Nett Item :	2,695.00
Labour :	5,260.00
GST (7.00%) :	-
Total :	30,896.54
Less 20% :	6,179.31
	24,717.23
Lump Sum (Estimated) :	24,700.00

The repairer agree to repair the vehicle on a **Lump Sum Basis** with our recommendation of **SGD 24,700.00 (SGD Twenty Four Thousand and Seven Hundred only)** and we are in the opinion the repairer would need about a **10.0** working day period to repair the vehicle.

Allied Auto Appraisal

Surveyed by

Ng Heng Chai
Licensed Appraiser

ALLIED AUTO APPRAISAL

RECOMMENDED PARTS

No.	Descriptions	Condition	Qty	Repairer	Adjusted
1	FRONT BUMPER	Deformed		1,790.00	1,790.00
2	FRONT RADIATOR GRILLE	Cracked		855.00	855.00
3	FRONT EMBLEM (STAR)	Cracked		135.00	135.00
4	FRONT NUMBER PLATE GARNISH	Cracked		110.00	110.00
5	FRONT PARKING SENSOR CENTRE RH	Shorted		225.50	225.50
6	FRONT PARKING SENSOR CENTRE LH	Shorted		225.50	225.50
7	FRONT HEADLAMP LH	Cracked		4,780.00	4,780.00
8	FRONT HEADLAMP RH	Cracked		4,780.00	4,780.00
9	FRONT BUMPER CENTRE GARNISH	Cut		285.00	285.00
10	FRONT BUMPER SPONGE	Cut		198.50	198.50
11	FRONT BUMPER CENTRE SUPPORT BRACKET	Bent		328.50	328.50
12	FRONT BUMPER SIDE BRACKET LH	Cut		85.50	85.50
13	FRONT BUMPER REINFORCEMENT BAR	Bent		745.10	745.10
14	REAR BUMPER	Grazed		1,350.00	1,350.00
15	REAR RH FENDER	Deformed		3,850.00	3,850.00
16	REAR BUMPER SIDE RETAINER RH	Cracked		125.00	125.00
17	FUEL COVER	Grazed		225.00	225.00
18	TAILLAMP RH	Grazed		780.00	780.00
19	REAR END PANEL TOP GARNISH	Cut		235.00	235.00
20	AIR VENT RH	Deformed		115.00	115.00
21	SHOCK ABSORBER	Bent		978.00	978.00
22	LOWER ARM 1	Bent		675.00	675.00
23	LOWER ARM 2	Bent		535.00	535.00
24	KNUCKLE ARM BEARING	Grazed		856.00	856.00
25	BEARING HUB	Jammed		515.00	515.00
26	TRAILING ARM	Bent		325.00	325.00
27	LOWER LINKING ARM	Bent		228.00	228.00
28	BOLT WASHER	Grazed		155.00	155.00
Sub Total (S\$) :				25,490.60	25,490.60
Discount (10%) :				2,549.06	2,549.06
Total Parts (S\$) :				22,941.54	22,941.54

RECOMMENDED SPECIAL NETT ITEMS

No.	Descriptions	Condition	Repairer	Adjusted
1	FRONT BUMPER CLIPS	Necessary	120.00	120.00
2	FRONT RADIATOR GRILLE CLIPS	Necessary	100.00	100.00
3	FRONT BUMPER PARKING SENSOR HOLDER (6 PCS)	Necessary	135.00	135.00
4	REAR BUMPER CLIPS	Necessary	100.00	100.00
5	REAR TAILLAMP LAMP SEAL	Necessary	50.00	50.00
6	REAR BUMPER PARKING SENSOR HOLDER (6 PCS)	Necessary	135.00	135.00
7	REAR RH SPORT RIM	Grazed	1,850.00	1,850.00
8	REAR FENDER RH INNER SHIELD CLIPS	Necessary	85.00	85.00
9	SEALANT FOR WINDSCREEN	Necessary	120.00	120.00
			2,695.00	2,695.00

ALLIED AUTO APPRAISAL

RECOMMENDED LABOUR

No.		Repairer	Adjusted
1	REMOVE/ REFIX/ REPAIR & PANEL BEATING. (FRONT)	700.00	700.00
2	REFOCUS ON HEADLAMP. (FRONT)	200.00	200.00
3	RE-PROGRAMMING ON ASAD SENSOR. (FRONT)	400.00	400.00
4	REMOVE/ REFIX PARKING SENSOR. (FRONT)	120.00	120.00
5	SPRAY PAINTING. (FRONT)	500.00	500.00
6	REMOVE/ REFIX/ REPAIR & PANEL BEATING. (REAR)	1,400.00	1,400.00
7	REMOVE/ REFIX FUEL TANK TO FACILITATE REPAIRS. (REAR)	240.00	240.00
8	REMOVE/ REFIX REAR WINDSCREEN. (REAR)	200.00	200.00
9	UNDERCARRIAGE. (REAR)	400.00	400.00
10	RESETTING ABS SENSOR. (REAR)	220.00	220.00
11	RESETTING FAULT CODE. (REAR)	180.00	180.00
12	SPRAY PAINTING. (REAR)	700.00	700.00
		5,260.00	5,260.00

COST OF CLAIMS

		Repairer	Adjusted
1	TOTAL PARTS	22,941.54	22,941.54
2	TOTAL NETT ITEMS	2,695.00	2,695.00
3	LABOUR & SPRAY	5,260.00	5,260.00
Gross Total (S\$) :		30,896.54	30,896.54
GST 7.00% (S\$) :		-	-
Total Amount (S\$) :		30,896.54	30,896.54

ALLIED AUTO APPRAISAL



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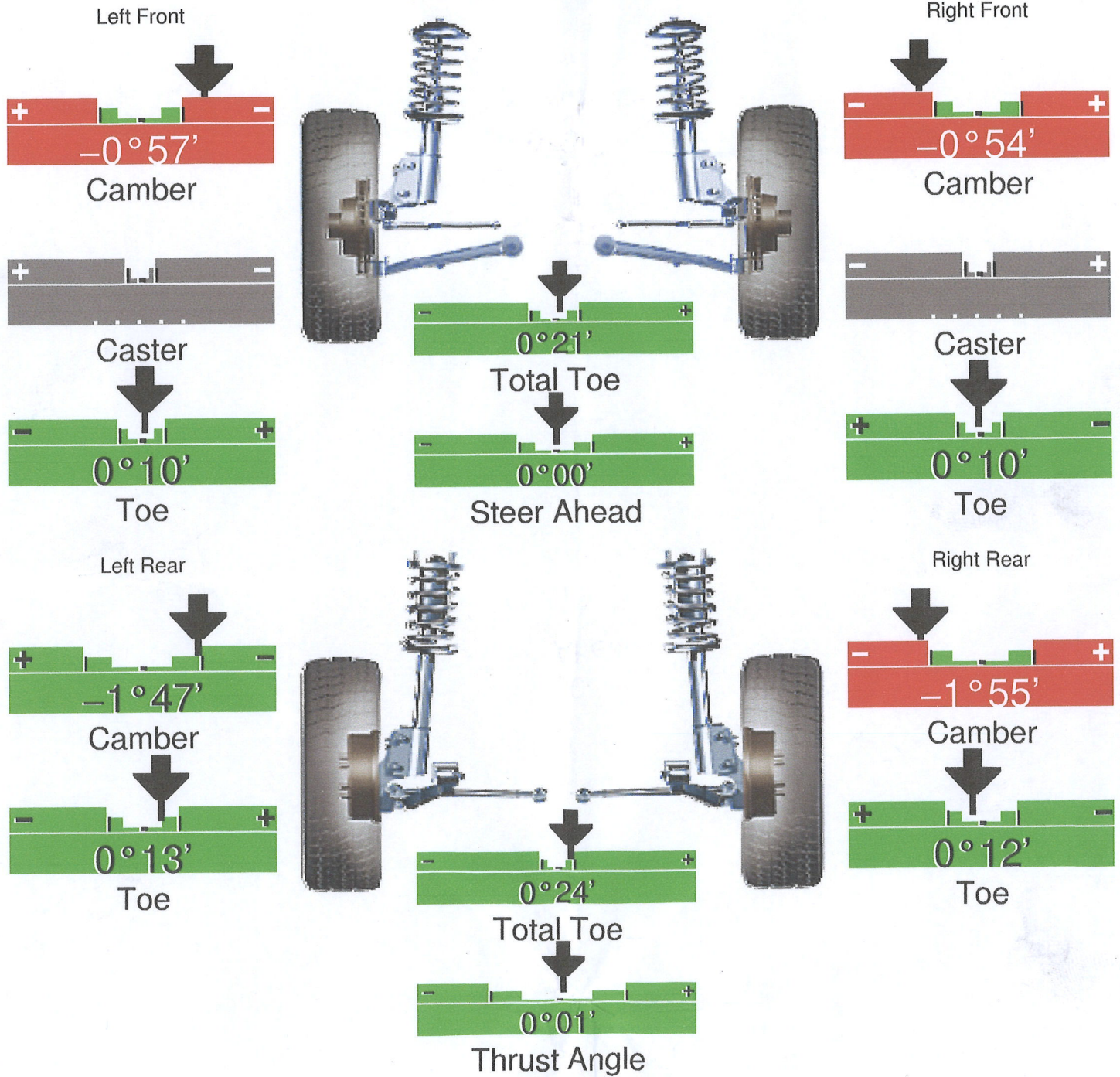


Date

2022-August-13 12:50p.m.

Mercedes-Benz : 205 (C Class 2014-) : without 4MATIC : with Code 485 (Standard Suspension) Sedan/Estate (W/S)

Current Measurements





RECORD MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE

RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Date of Request: 10/08/2022

Your Ref No: SV AUTOWORKS

Dear Sir/Madam,

Date of Accident: 29/07/2022 00:00 (SGT)

Vehicle No: SMX2971D

Place of Accident: Singapore

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

DOCUMENTS	ACCIDENT LOCATION	PER DOC (\$\$)	QTY	AMOUNT (\$\$)
SFH13A	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.

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SFH13A

(SMX2971D)

Date of Accident

29/07/2022



Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance Liberty Insurance Pte Ltd

Period of Insurance 30/03/2022 - 29/03/2023

Requested By SV AUTOWORKS (SV Autowork...

Requested Date 30/07/2022 14:21

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**