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 3 April 2023

Our Ref: JW/ns/20231548-356 [SNG5258M]

Writer's name: Jade Wu

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

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

GRAB RENTALS PTE LTD By Certificate of Posting

3 Media Close #01-03/06 Singapore 138498

GAN CHIN KIAT By Certificate of Posting

Block 25 Jalan Berseh #12-128

INDIA INT'L INS PTE LTD

64 Cecil Street

By Email:
lod@iii.com.sq

#04/#04, IOB Building Singapore 049711

Dear Sirs,

Name of Claimant: STARK HOLDINGS INN BIKE LEASING PTE LTD

c/o RS Garage Services Pte Ltd

2 Balestier Road

#04-665 Balestier Hill Shopping Centre

Singapore 320002

ACCIDENT INVOLVING SNG5258M (OUR CLIENT'S VEHICLE) AND SMV6090E ALONG BRAS BASAH ROAD TOWARDS BEACH ROAD ON 3 MARCH 2023 AT 7:15PM

- 1. We are instructed by the abovenamed to claim damages against you in connection with a road traffic accident on 3 March 2023 along Bras Basah Road towards Beach Road involving our client's vehicle registration number SNG5258M and vehicle registration number SMV6090E owned by you and driven by you and/or your authorised driver at the material time.
- 2. We are instructed that the accident was caused by you and/or your authorised driver's 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	31,000.00
b.	Loss of Use (8 days x S\$120.00)	960.00
C.	Survey report fee	1,995.00
d.	3P GIA Report	31.00
e.	LTA Search Fee	26.75
f.	Costs (including GST)	1,080.00
		35,092.75

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

Matthew Chiong Partnership

UEN: 53130932X | GST Registration No.: M90355934E

3 April 2023 page 2

- a) Our client's Singapore Accident Statement;
- b) Singapore Accident Statement of SMV6090E;
- c) Repairer's invoice;
- d) Survey Report and Invoice;
- e) LTA Search; and
- f) GIA Search invoice.
- 4. 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;
 - 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 <u>TAKE NOTICE</u> 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.
- 5. 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.
- 6. 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.

3 April 2023 page 3

7. 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.

8. Our client's rights are expressly reserved.

Yours faithfully,

MATTHEW CHIONG PARTNERSHIP

Matthew Chiong Partnership

encs

SY0523360001 / YEW TEE AUTOMOBILE TECH PTE LTD [737856] ENTRY DATE & TIME: 06/03/2023 18:27 (SGT) SUBMITTED BY: TOH TZE CHANG VERSION: 1 (06/03/2023 18:27 (SGT))

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 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.

- 4. The issue and acceptance of this is form by instrained 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 06/03/2023 18:27 (SGT) Reported by Date of Accident 03/03/2023 19:15 (SGT) Exact Location of Accident Singapore Additional Location Information BRAS BASAH RD TOWARDS BEACH RD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mercedes

Vehicle Registration Number **SNG5258M**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner STARK HOLDINGS INN BIKE LEASING PTE LTD Company Reg No 201419069W Email Address STARKHOLDINGSINN@GMAIL.COM Mobile Phone No (Phone) +65-90966559 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model E200 Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5133793562-000151

DRIVER

Name of Driver SOH HUI YING SHARMAIN NRIC No S8723307C Date Of Birth 28/07/1987 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	22/06/2010 12 YEARS AND 9 MONTHS Female (Phone) +65-93868782 - STARKHOLDINGSINN@GMAIL.COM BLK 466C SEMBAWANG DRIVE #14-343 - 753466 No Hirer No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe Clear Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? 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? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
TRFER TO THE ATTACHED	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver	SMV6090E Private car -
Contact Number	-

Address			
Address complement			
Postcode		 	 <u>-</u>
Insurance Company Name			<u>-</u>
Nature Of Damage			
Details of property damaged in a	accident	 	<u>-</u>
No. Of Passenger (Including Dri	ver)		 -

SKETCH PLAN

IMPORTANT NOTICE

- 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 cooles 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)

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 end/or dealing with my dains 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 socident 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.

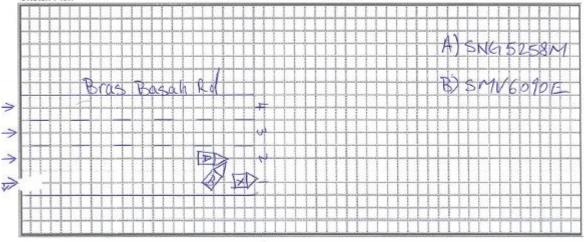
Policyholder's Signature / Date & Time

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

YVONNE

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



1

was driving	along Bres Base	th Road towards Beach Road. There A venicle sudden I are change and
ics a vehicle	infant of me	vehicle. He dral not signal his intention
o lane change		
		/
	<i>f</i> =	

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

413/43 Driver's Signature (if driver is not the policyholder) / Date & Time YVONNE

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

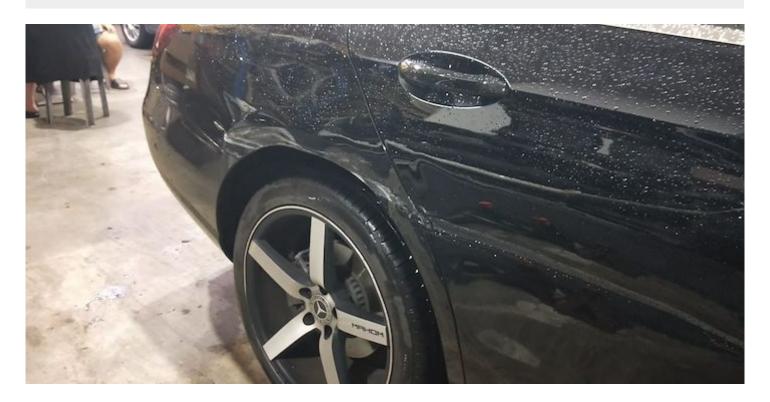
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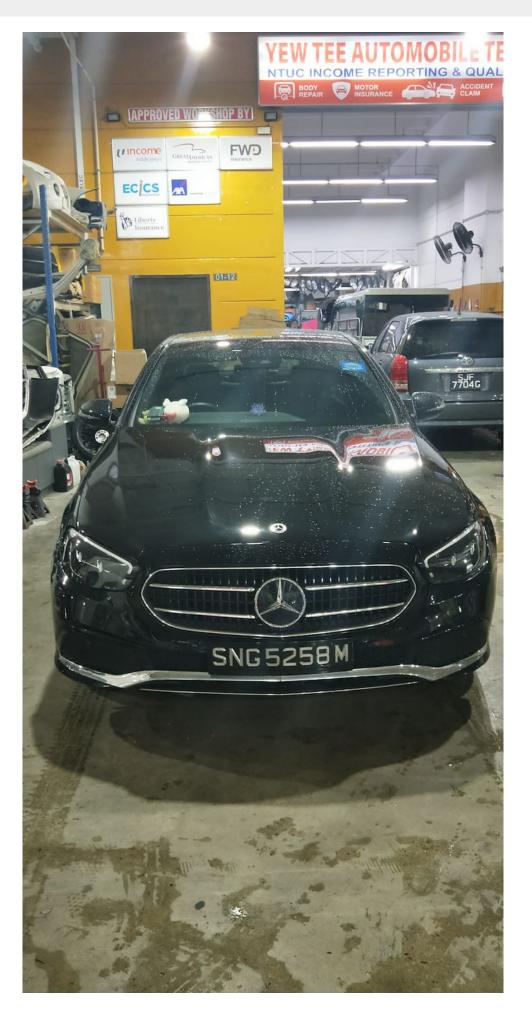














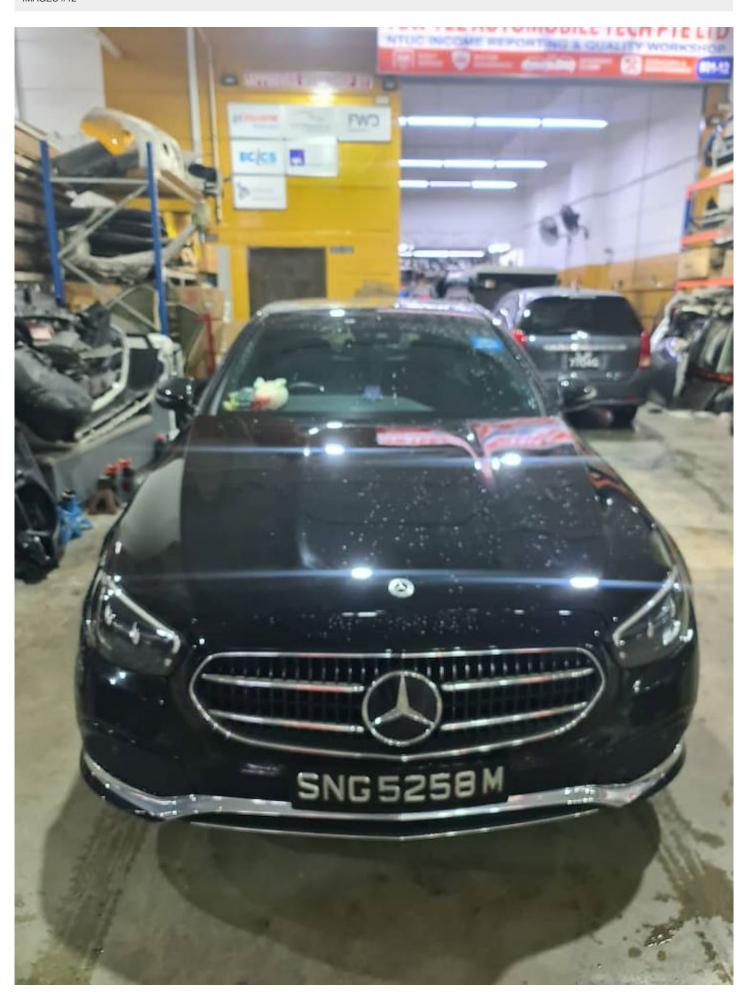


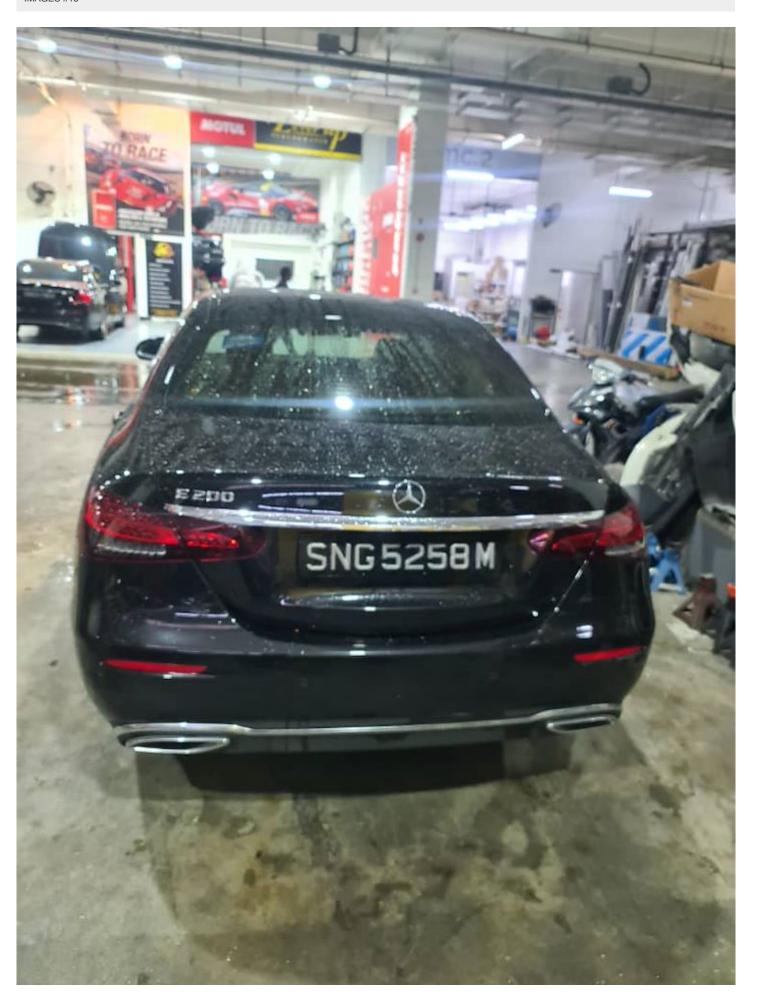


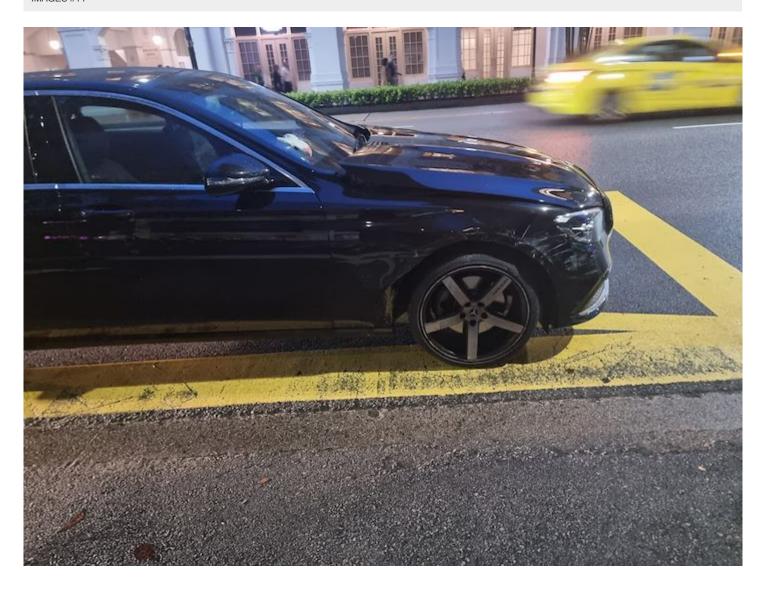


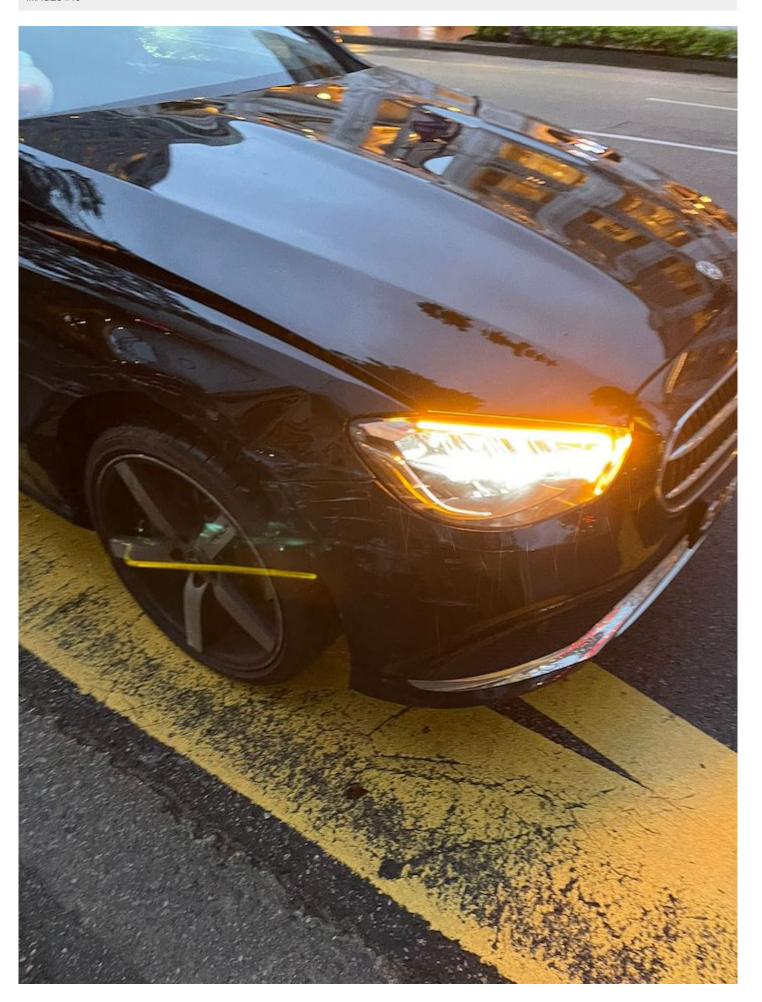




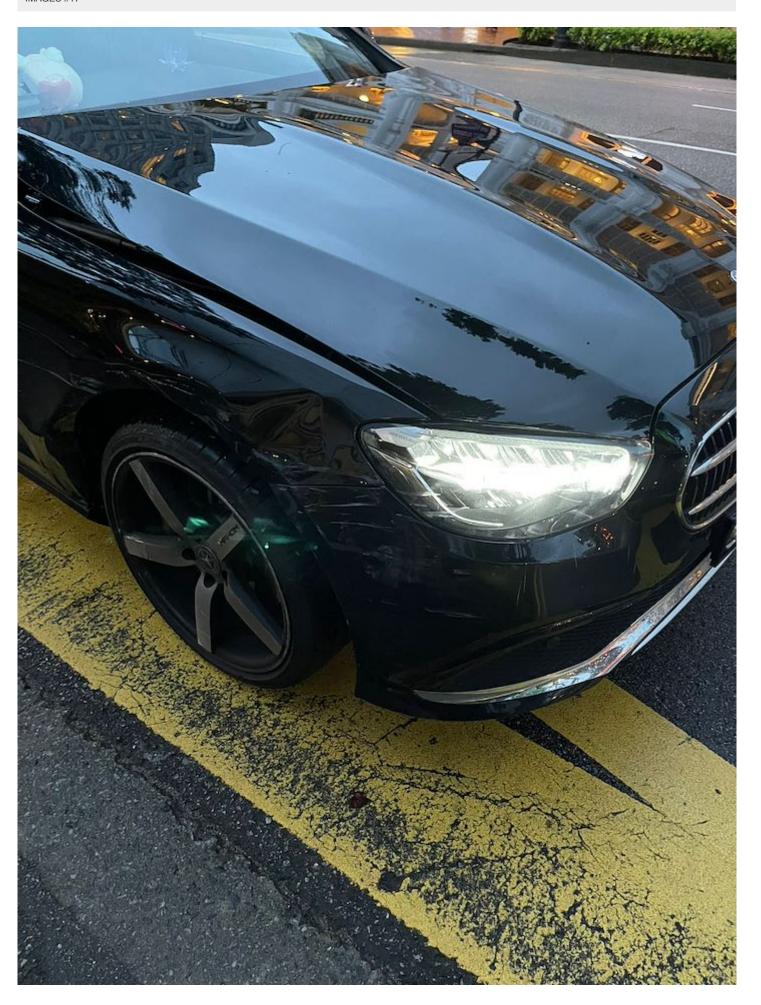




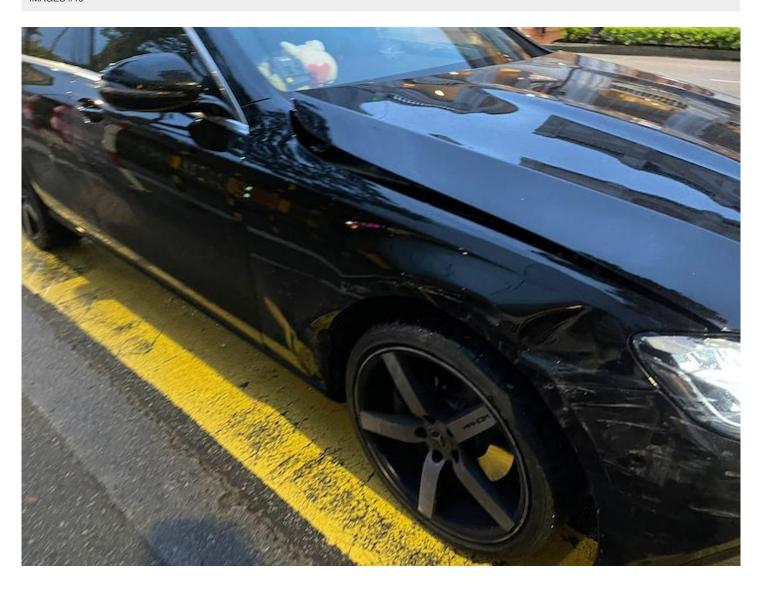


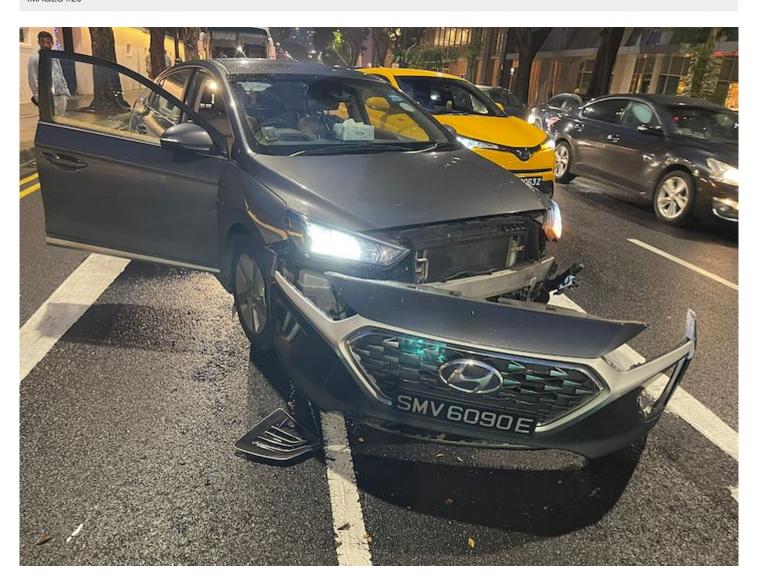




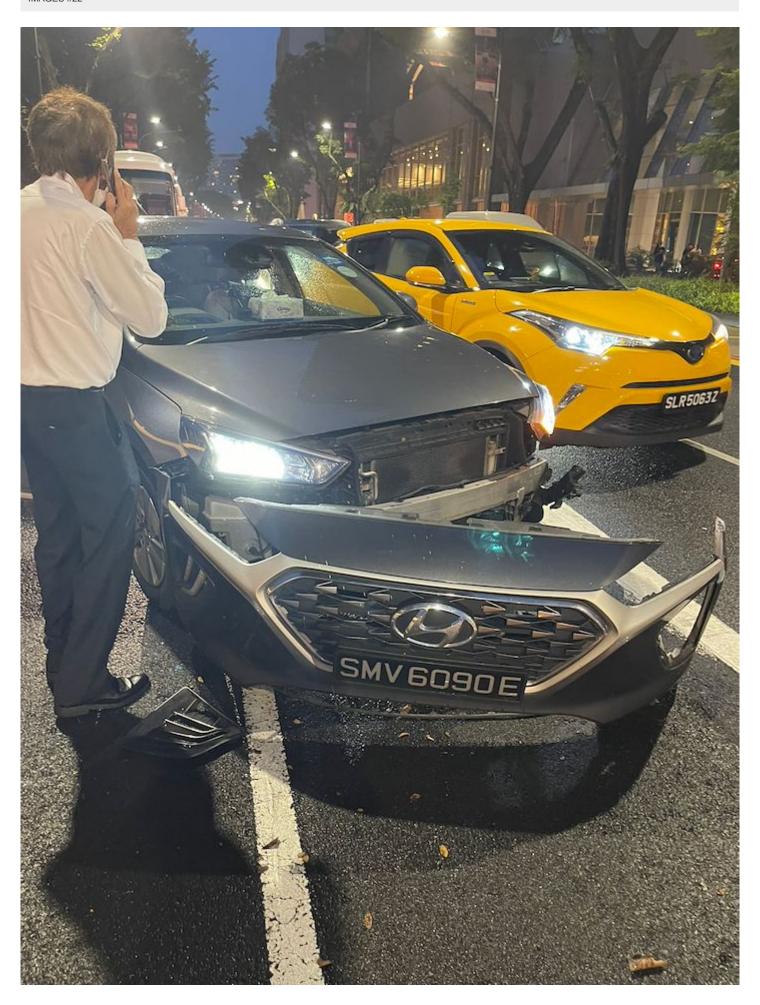


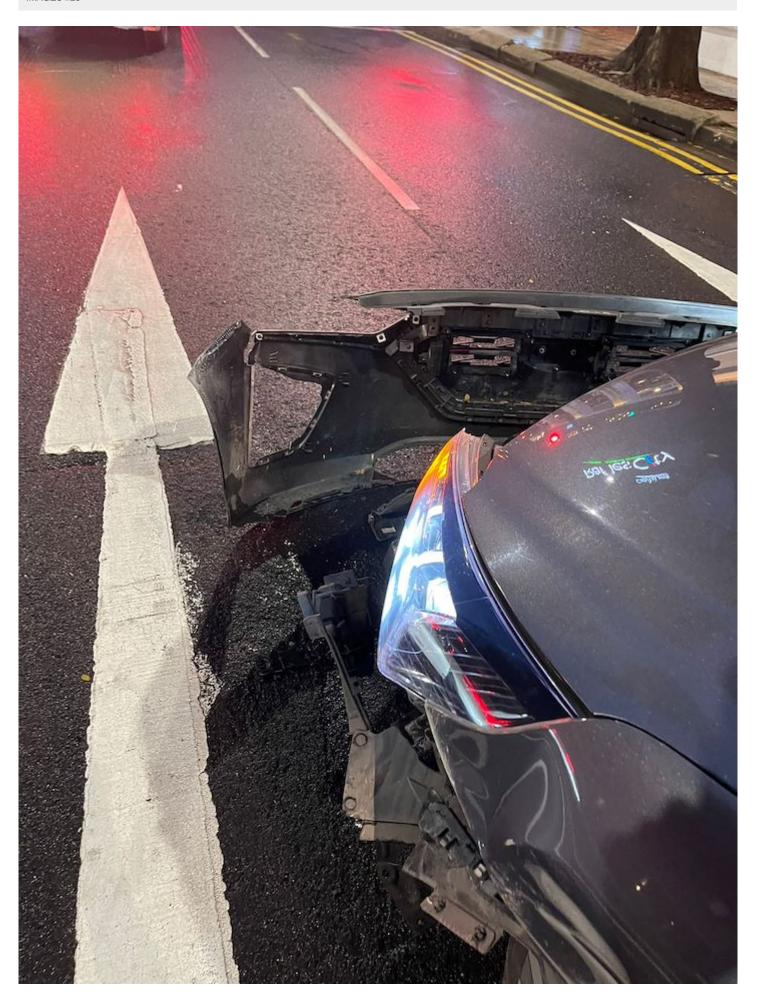


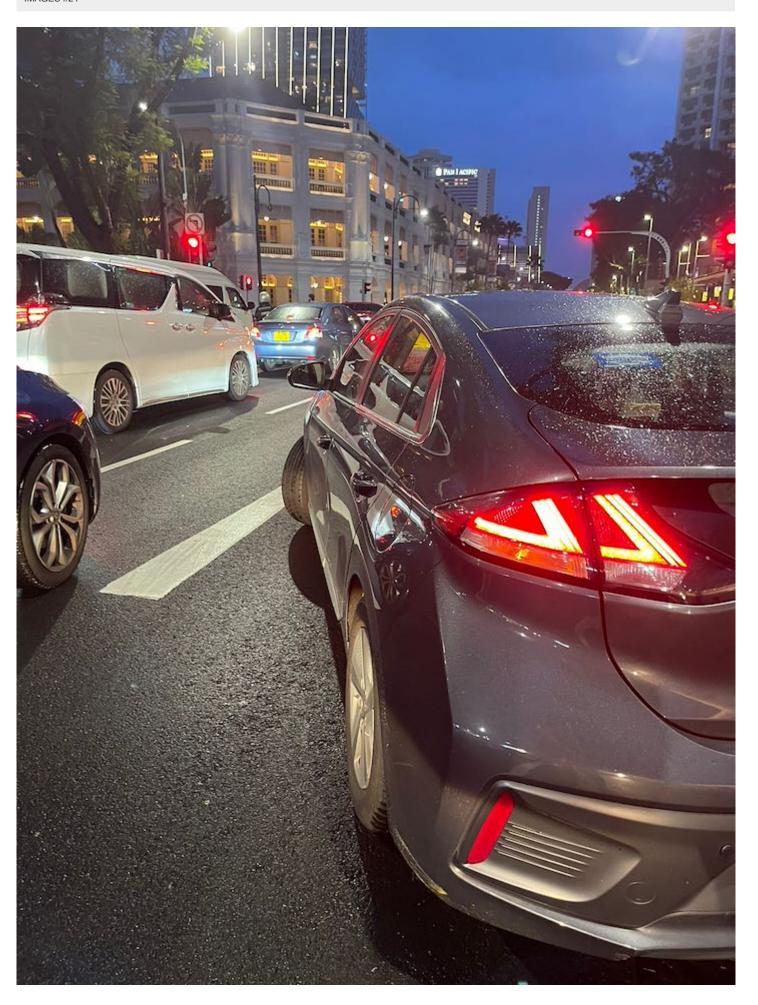


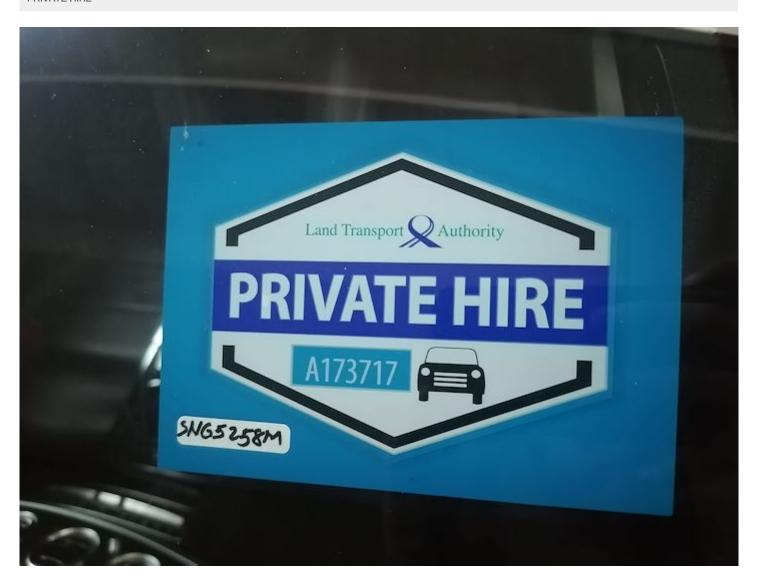












SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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

- 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 the restaurance of the control of the restaurance of the restaurance of the control of the restaurance of t 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

ACCIDEN	STATEMENT
Date of Submission Reported by Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss	04/03/2023 14:08 (SGT) Driver 03/03/2023 19:20 (SGT) Bras Basah Rd, Singapore JUNCTION NORTH BRIDGE ROAD Singapore
DETAILS OF	FOWN VEHICLE
Vehicle Registration Number	SMV6090E
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner	Yes GRAB RENTALS PTE LTD
VEHICLE PARTICULARS	
Manufacturer Model Variant Vehicle Category Transmission CC	Hyundai Ioniq - Private hire Auto 1580
INSURANCE COMPANY	
Name of Insurance Company Policy Number / Cover Note Number	India International Insurance Pte Ltd D21MFL0000447_02
DRIVER	
Name of Driver NRIC No Address Address complement Postcode Does Driver Own Other Vehicles?	GAN CHIN KIAT SXXXX120J BLK 25 JALAN BERSEH #12-128 - 200025 No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Change/cross lane

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

CIRCUMSTANCES OF ACCIDENT

ON 03/03/2023 ARPUND 1920HRS I VEHICLE A BEARING REGISTRATION NUMBER (SMV6090E) WAS DRIVING ALONG BRAS BASAH ROAD NEARBY JUNCTION WITH NORTH BRIDGE ROAD, I WAS ON EXTREME RIGHT AND DECIDED TO CHANGE LANE TO LANE 2 AFTER CHECKING THE BLINDSPOT AND FOR UPCOMING VEHICLE I PROCEEDED WHEN I SEE THE ROUTE IS CLEAR, AS I HALF WAY MAKING MY LANE CHANGE THERE COMES VEHICLE B BEARING REGISTRATION NUMBER SNG5258M WAS COMING STRAIGHT AND FAST AND HIT MY FRONT LEFT PORTION, VEHICLE (A) FRONT BUMPER FELL OFF AND AND FLY TO A NEARBY UNKNOWN VEHICLE WHICH WAS INFRONT OF VEHICLE (A). NOBODY WAS INJURED DURING THE ACCIDENT.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration NumberSNG5258MVehicle ManufacturerMercedesVehicle Model-Vehicle Variant-Vehicle Colour-Vehicle CategoryPrivate hireName of DriverSOH HUI YING, SHARMAIN (SU HUIYING)Insurance Company Name-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please correctly report the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorized Driver.
- 3. 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.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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 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.
- (ii) 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 involvedisclosure 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.

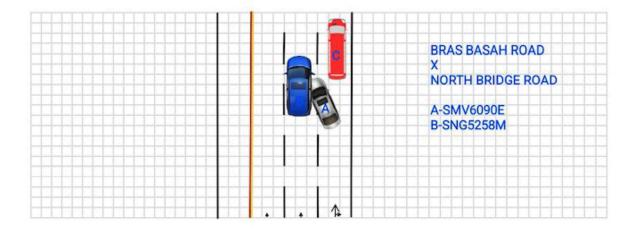
> FLASH ACCIDENT REPORTING OFFICER FRO VICKY

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 04/03/2023 - 1015

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

_	
	ON 03/03/2023 ARPUND 1920HRS I VEHICLE A BEARING REGISTRATION NUMBER (SMV6090E) WAS DRIVING ALONG BRAS BASAH ROAD NEARBY JUNCTION WITH NORTH BRIDGE ROAD, I WAS ON EXTREME RIGHT AND DECIDED TO CHANGE LANE TO LANE 2 AFTER CHECKING THE BLINDSPOT AND FOR UPCOMING VEHICLE I PROCEEDED WHEN I SEE THE ROUTE IS CLEAR, AS I HALF WAY MAKING MY LANE CHANGE THERE COMES VEHICLE B BEARING REGISTRATION NUMBER SNG5258M WAS COMING STRAIGHT AND FAST AND HIT MY FRONT LEFT PORTION, VEHICLE (A) FRONT BUMPER FELL OFF AND AND FLY TO A NEARBY UNKNOWN VEHICLE WHICH WAS INFRONT OF VEHICLE (A). NOBODY WAS INJURED DURING THE ACCIDENT.

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date & Time 04/03/2023 - 1015

Witnessed by Reporting Centre Personnel

FLASH ACCIDENT REPORTING OFFICER FRO VICKY



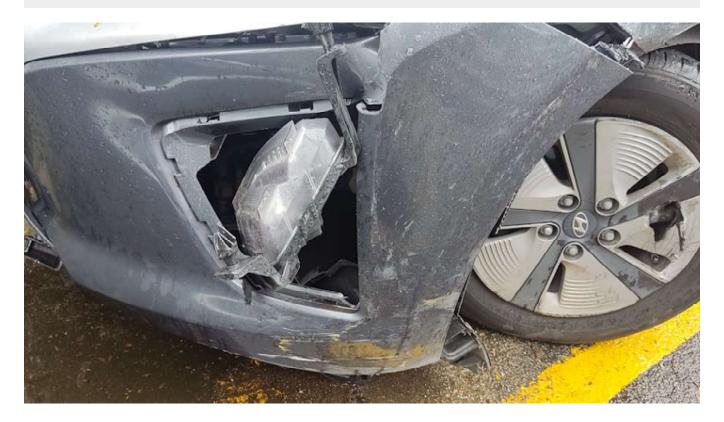


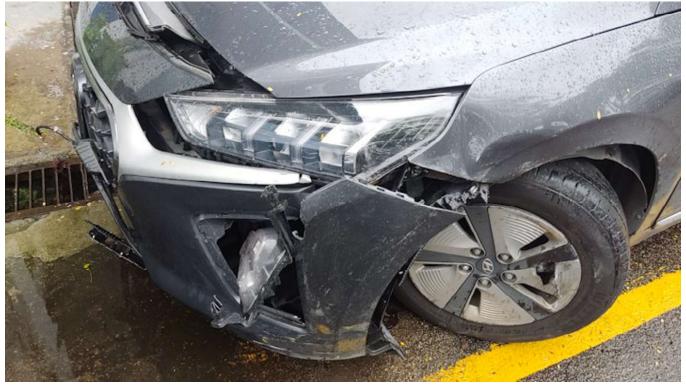


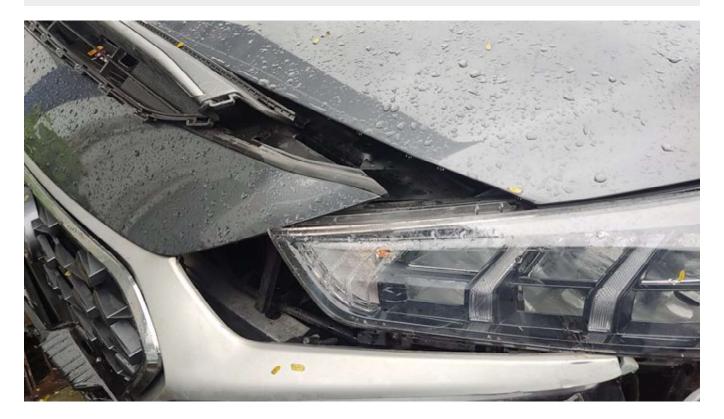






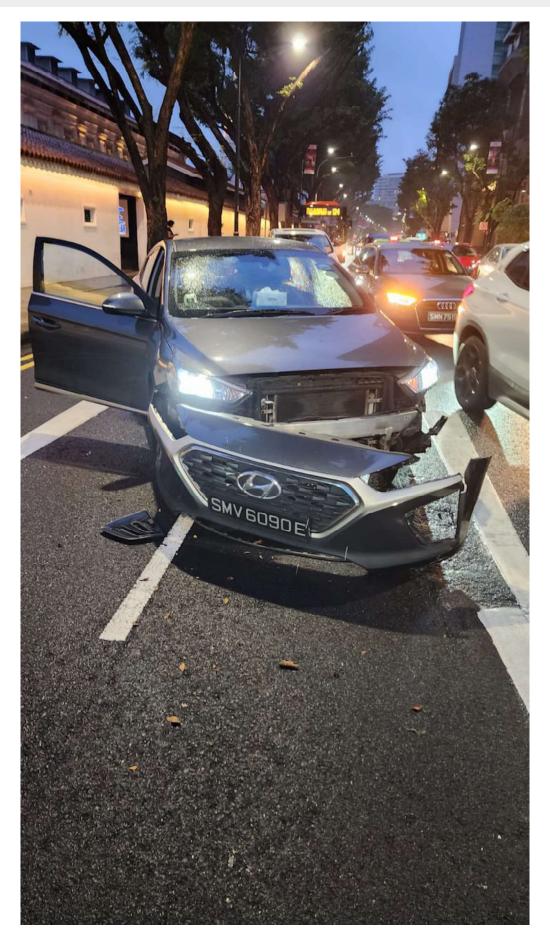


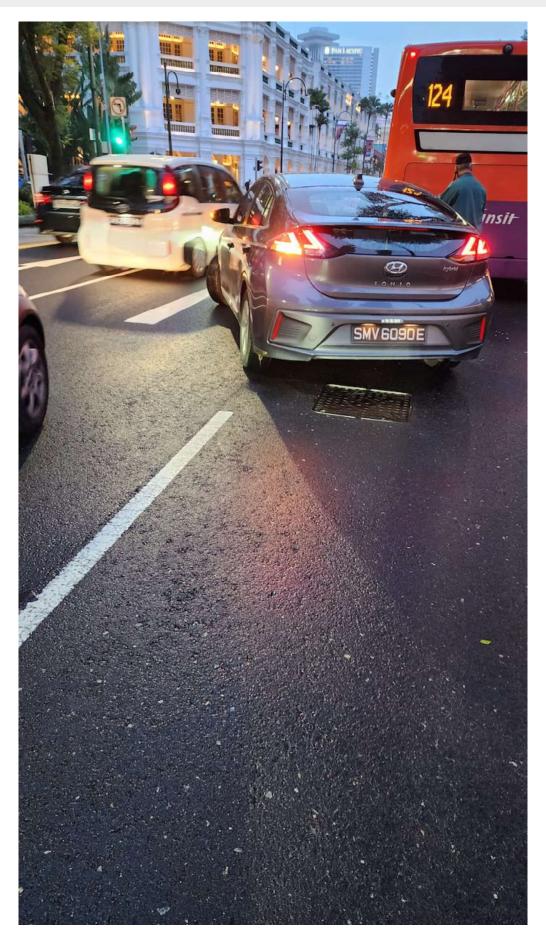


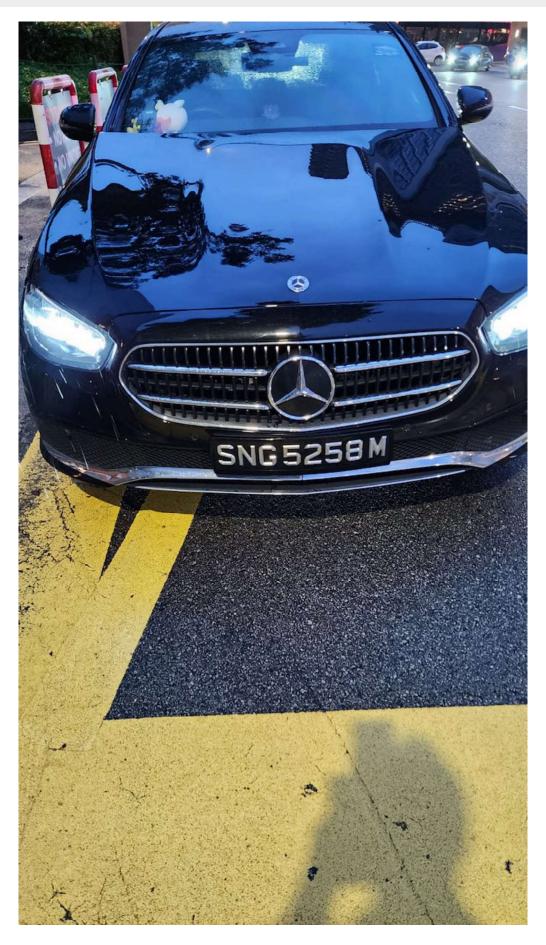


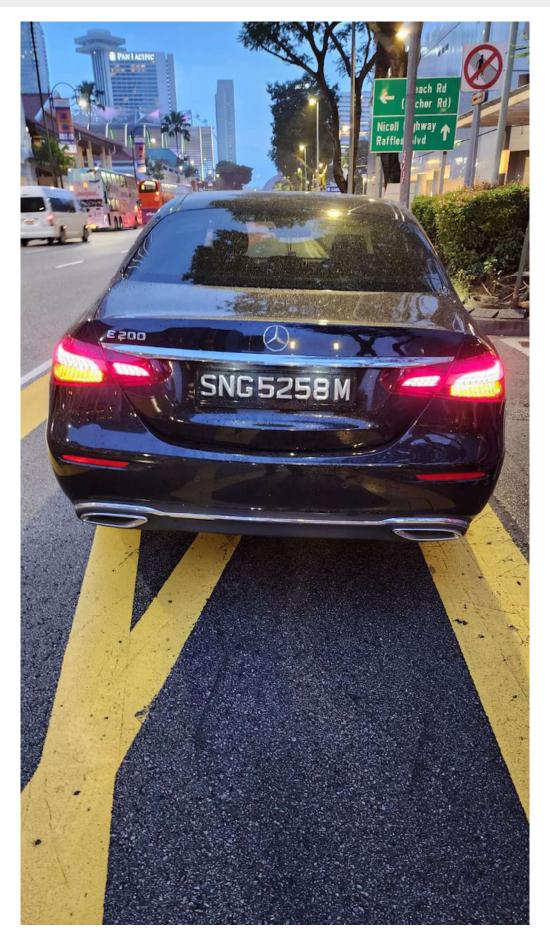


















India International Insurance Pte. Ltd.

6347 6100

RS GARAGE SERVICES PTE. LTD.

Co. Reg. No: 202229986W 2 Balestier Road #04-665 **Balestier Hii Shopping Centre**

Singapore 320002

Email: enquiry.rsg@gmail.com

TAX INVOICE

Invoice No.

: RSG2023 147 03

Invoice Date : 29 March, 2023

Vehicle No.

: SNG 5258 M

Make & Model: MERCEDES BENZ E200 SPORTS

Chassis No.

: W1K2130802B046597

Mileage Terms

: Due within 90 days

NO.	DESCRIPTION	QUANTITY	PER UNIT (SGD)	AMOUNT (SGD)
1	To Carry Out Repair & Respray on Accident	1	31,000.00	31,000.00
	Corresponding to Supply on Spare Parts & Labour			
	Charges			

GRAND TOTAL:	\$31,000.00
Amount Paid	\$0.00
Balance Due	\$31,000.00



Signature/Company Stamp

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

Tommie Lim Appraisal

Block 126 Bishan Street 12 #08-147 Singapore 570126

Handphone No.: +65 97475163 Email: tommie126@yahoo.com.sg

ROC: 53448442E

VEHICLE INSPECTION REPORT

To:

STARK HOLDINGS INN BIKE LEASING PTE LTD

c/o :

RS Garage Services Pte Ltd 2 Balestier Road #04-665 Balestier Hill Shopping Centre

Singapore 320002

REFERENCE

Ref. no. Accident on Assign on Inspection on Workshop name	: : :	TLA/2023/03/013 03 Mar 2023 08 Mar 2023 08 Mar 2023 RS Garage Services Pte Ltd	3rd party Veh. Claim tyre Claim number Policy number Finalize on	:	SMV6090E Third Party To be advice To be advice 27 Mar 2023
Workshop name	:	RS Garage Services Pte Ltd	Finalize on		
Inspection at	:	2 Balestier Road #04-665	Final report on	:	28 Mar 2023

Balestier Hill Shopping Centre

Singapore 320002

PARTICULARS OF DAMAGED VEHICLE

Vehicle number	:	SNG5258M	Registration date	:	13 Aug 2022
Make		MERCEDES BENZ	Chassis number	:	W1K2130802B046597
Model	:	E200 SPORTS	Engine number		26492030488112
Body colour	:	BLACK	Engine capacity	:	1991 CC
Odometer	:	28725 KM	Transmission	:	AUTOMATIC

PRE-ACCIDENT CONDITION OF VEHICLE (STATIC CHECK ONLY)

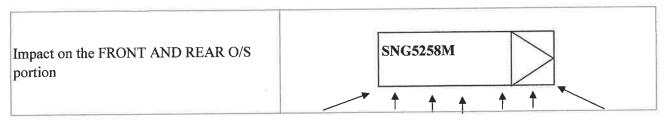
Steering	:	Affected	Paintwork	:	Good
Footbrake	:	In order	Undercarriage	:	Affected
Handbrake	:	In order	Gen. condition	:	Good

TYRE CONDITION ON VEHICLE

		Make	Size	Tread depth	Type of road wheel
Front N/S	:	Bridgestone	235/35ZR19	70%	Alloy
Front O/S	:	Bridgestone	235/35ZR19	70%	Alloy
Rear N/S	:	Laufenn	245/40ZR19	80%	Alloy
Rear O/S	:	Laufenn	245/40ZR19	80%	Alloy

NOTE: The above percentages represent the estimated remaining life of tyre threads.

POINT OF IMPACT



SYNOPSIS OF DAMAGES RESULTANT FROM THE ACCIDENT

The impact of the collision has damaged/affected the front bumper assy, front o/s headlamp assy, front o/s fender assy, front o/s door assy, rear o/s door assy, rear o/s fender, rear bumper assy, rear o/s taillamp, front o/s rim, front o/s undercarriage, rear o/s rim. rear o/s undercarriage and etc... Please refer to Annex A and Annex B (Appraisement Schedule) for a detailed account of the damages and

photographs taken.

Note: Reinspection of the vehicle on for repair is in progress.

RECOMMENDATION

as per schedule RS Garage Services Pte Ltd The estimate cost of repair submitted by Messrs attached has been revised and scrutinised, and in our opinion, we consider it to be fair and reasonable. The repairers have agreed to undertake the repairs to the owner's satisfaction at our revision. We have not authorised the repairs.

Our adjusted cost of repair is SGD 31,000.00 to carry out the repairs. Please refer to Annex A (Appraisement Schedule) for a detailed account of the cost estimates.

REMARKS

We have not authorised the repair. However, for information, under normal circumstances, the repair would takes approximately 16 (sixteen) working days to complete.

In accordance to your instruction, we have NOT AUTHORISED the repair to the damaged vehicle and the survey was conducted strictly on a "WITHOUT PREJUDICE" basis.

We are pleased to advise that the inspection work was carried out accordingly, and hereby submit our Appraisal Report, which includes evidence photographs.

Yours faithfully, Tommie Lim Appraisa

Tommie Lim

Motor Vehicle Appraise



Registration no : SNG5258M

Vehicle Model :

MERCEDES BENZ E200 SPORTS

S/N	Qty	Description	Condition	Estimate by Wshop SGD	Adjusted Amt SGD
		LIST ITEMS			
1	1	Front bumper	Deformed/Cracked	1,500.00	1,316.78
2	1	Front bumper side retainer	Deformed/Cracked	68.36	68.36
3	4	Front bumper sensor	2pc Malfunction	791.64	395.82
4	6	Front bumper sensor ring	Necessary	38.10	38.10
5	6	Front bumper sensor holder	Necessary	110.16	110.16
6	1	Front bumper sponge	Cracked/Deformed	200.00	186.69
7	1	Front bumper reinforcement	Serviceable	558.01	0.00
8	1	Front bumper top rubber	Necessary	300.00	268.21
9	1	Front bumper inner centre garnish	Deformed/Cracked	400.00	321.68
10	1	Front headlamp	Grazed/Cracked	4,000.00	3,520.82
11	1	Front headlamp control unit	Serviceable	692.71	0.00
12	1	Front headlamp top panel	Serviceable	171.55	0.00
13	1	Front fender	Buckled	1,200.00	1,042.06
14	1	Front fender inner shield	Serviceable	181.76	0.00
15	1	Front rim	Grazed/Dented	900.00	779.44
16	1	Front shock absorber	Bent	900.00	878.31
17	1	Front knuckle arm	Bent	1,800.00	1,659.44
18	1	Front knuckle arm bearing	Warp	700.00	548.21
19	1	Front upper arm	Bent/Deformed	1,000.00	831.24
20	1	Front lower arm	Bent/Deformed	800.00	628.31
21	1	Front spring link arm	Bent/Deformed	1,000.00	840.71
22	1	Front stabilizer bar	Serviceable	706.21	0.00
23	1	Front stabilizer bar link	Serviceable	115.68	0.00
24	1	Front door	Bent	2,500.00	2,144.85
25	1	Front door lock	Serviceable	432.21	0.00
26	1	Front door inner trim board	Serviceable	1,692.31	0.00
27	1	Front door weather strip	Necessary	400.00	305.97
28	1	Front door glass	Grazed	400.00	315.89
29	1	Front door glass outer moulding	Necessary	400.00	310.56
30	1	Front door glass regulator gear	Serviceable	690.71	0.00
31	1	Front door glass regulator motor	Serviceable	1,149.21	0.00
32	1	Rear door	Buckled	2,500.00	2,387.06
33	1	Rear door lock	Cracked/Jammed	500.00	452.51
34	1	Rear door inner trim board	Cracked	2,000.00	1,701.71
35	1	Rear door weather strip	Necessary	400.00	305.97
36	1	Rear door glass outer moulding	Necessary	400.00	340.51
37	1	Rear door glass regulator gear	Bent	800.00	679.31
38	1	Rear door glass regulator motor	Jammed	1,200.00	1,182.92
39	1	Rear fender	Buckled	2,500.00	2,344.99
40	1	Rear fender inner trim	Serviceable	1,140.91	0.00
41	1	Rear fender side shield	Serviceable	215.31	0.00
42	1	Rear windscreen glass moulding	Necessary	500.00	410.81
43	1	Rear rim	Grazed/Dented	900.00	779.44
44	1	Rear shock absorber	Serviceable	583.24	
45	1	Rear knuckle arm	Bent/Deformed	2,000.00	
46	1	Rear knuckle arm bearing	Warp	500.00	480.41
47	1	Rear upper arm	Serviceable	528.31	0.00
48	1	Rear trailing arm	Serviceable	601.31	0.00



Registration no : SNG5258M

Vehicle Model:

MERCEDES BENZ

E200 SPORTS

S/N	Qty	Description	Condition	Estimate by Wshop SGD	Adjusted Amt SGD
49	1	Rear lower arm	Serviceable	257.91	0.00
50	1	Rear adjustable arm	Serviceable	241.71	0.00
51	1	Rear bumper	Deformed/Cracked	2,500.00	2,072.82
52	1	Rear bumper side retainer	Deformed/Cracked	78.46	78.46
53	4	Rear bumper sensor	1pc Malfunction	729.92	182.48
54	6	Rear bumper sensor ring	Necessary	38.10	38.10
55	6	Rear bumper sensor holder	Necessary	110.16	110.16
56	1	Taillamp	Cracked	900.00	739.18
			Sub-total	47,923.96	32,508.13
			Less 5%	2,396.20	1,625.41
			Total	45,527.76	30,882.72
1 2	1set	Front bumper clips Front tyre	Cracked/Deformed Cut	80.00 500.00	50.00 350.00
3	1set	Front fender inner shield clips	Cracked/Deformed	80.00	50.00
4	1set	Front grille clips	Cracked/Deformed	80.00	50.00
5	lset	Front door inner trim board clips	Cracked/Deformed	80.00	50.00
6	1set	Rear door inner trim board clips	Cracked/Deformed	80.00	50.00
7	1set	Rear fender inner trim clips	Cracked/Deformed	80.00	50.00
8	1set	Rear fender side shield clips	Cracked/Deformed	80.00	50.00
9	1set	Rear windscreen glass sealant	Necessary	100.00	80.00
10	1set	Rear windscreen glass sponge	Necessary	80.00	60.00
11	1set	Rear windscreen glass clips	Necessary	80.00	50.00
12	1	Rear tyre	Serviceable	500.00	0.00
				1,820.00	890.00
		TOTAL FOR S	PARE PARTS	47,347.76	31,772.72



Registration no : SNG5258M

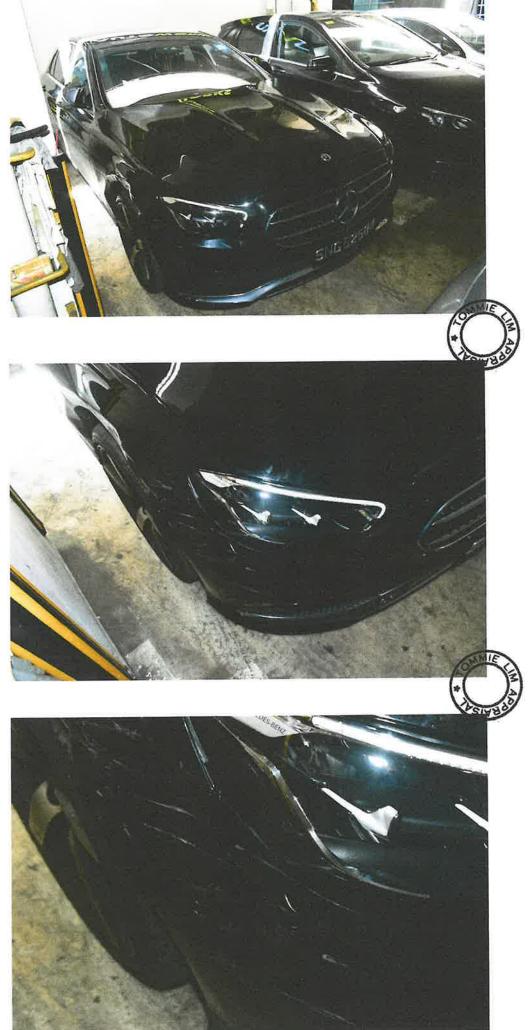
S/N	Qty	Description	Condition /	Estimate by Wshop SGD	Adjusted
D/14	×.2		Remarks	wsuob sen	Amt SGD
		LABOUR & MISC CHARGES			
1		To remove and refit all fittings to front RH door to facilitate the repair		150.00	100.00
2		To remove, renew and refit front sensor to facilitate the repair		200.00	120.00
3		To check the wiring system to facilitate the repair and refit the same (front)		100.00	50.00
4		Diagnostic & reset fault code		300.00	200.00
5		To conduct a water leakage test (front)		50.00	30.00
6		To spray anti-rust on accident-affected panel (front)		100.00	60.00
7		To conduct wheel alignment (Before and After)		200.00	140.00
8		To remove, renew and refit the front undercarriage to facilitate the repair		600.00	400.00
9		To conduct wheel balancing to facilitate the repair (front)		50.00	30.00
10		To remove, renew and refit tyre to facilitate the repair (from	t)	50.00	30.00
11		To remove, renew and refit all accident-damaged parts. Cut, weld, panel beat, and straighten all accident damage areas and fit the above same		1,500.00	1,200.00
12		To putty and spray paint on all accident damage parts and other accident-affected areas		1,500.00	900.00
13		To remove and refit all fittings to rear RH door to facilitate the repair		150.00	100.00
14		To remove, renew and refit front sensor to facilitate the repair		200.00	120.00
15		To check the wiring system to facilitate the repair and refit the same (rear)		100.00	50.00
16		To redo the sealant on the gap to facilitate the repair		100.00	60.00
17		To conduct a water leakage test (rear)		100.00	60.00
18		To spray anti-rust on accident-affected panel (rear)		100.00	60.00



Registration no : SNG5258M

	ADJUSTED PARTS AND LABOUT COST OF REPAIR		31,000.00				
	Total Parts and Labour Cost of Repair Less 20% (Lumpsum repair adjustment)	57,947.76	38,772.72 7,754.54 31,018.18				
SUMMARY							
	TOTAL FOR LABOUR AND SPRAY PAINTING	10,600.00	7,000.00				
26	To remove, renew and refit the rear windscreen glass to facilitate the repair	200.00	150.00				
25	To remove, and refit the fuel tank assy to facilitate the repair	150.00	80.00				
24	To remove, renew and refit tyre to facilitate the repair	50.00	30.00				
23	To conduct wheel balancing to facilitate the repair	50.00	30.00				
22	To remove, renew and refit the front undercarriage to facilitate the repair	300.00	100.00				
21	To remove and refit upholstery, carpets, and rear fender inner trims to facilitate the repair	300.00	200.00				
20	To putty and spray paint on all accident damage parts and other accident-affected areas	1,500.00	900.00				
19	To remove, renew and refit all accident-damaged parts. Cut, weld, panel beat, and straighten all accident damage areas and fit the above same	2,500.00	1,800.00				

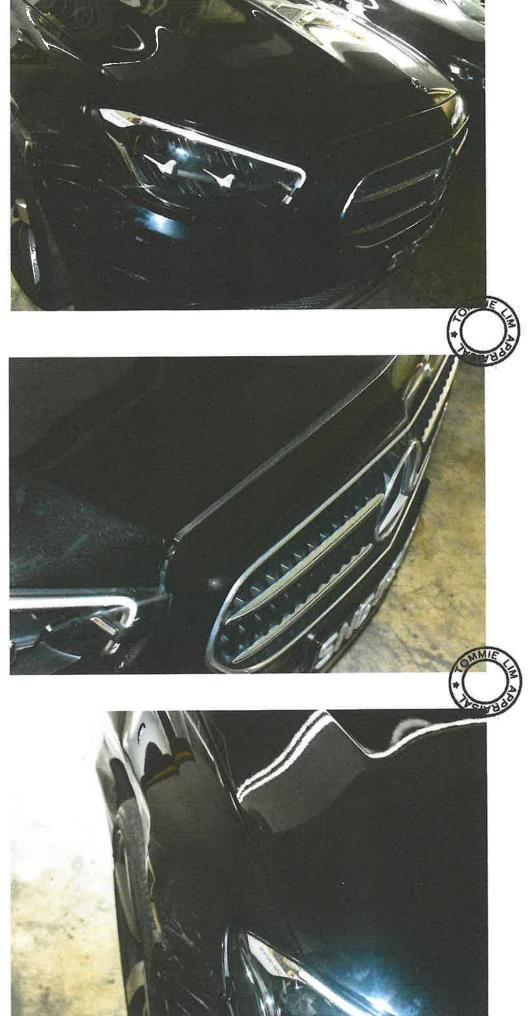
























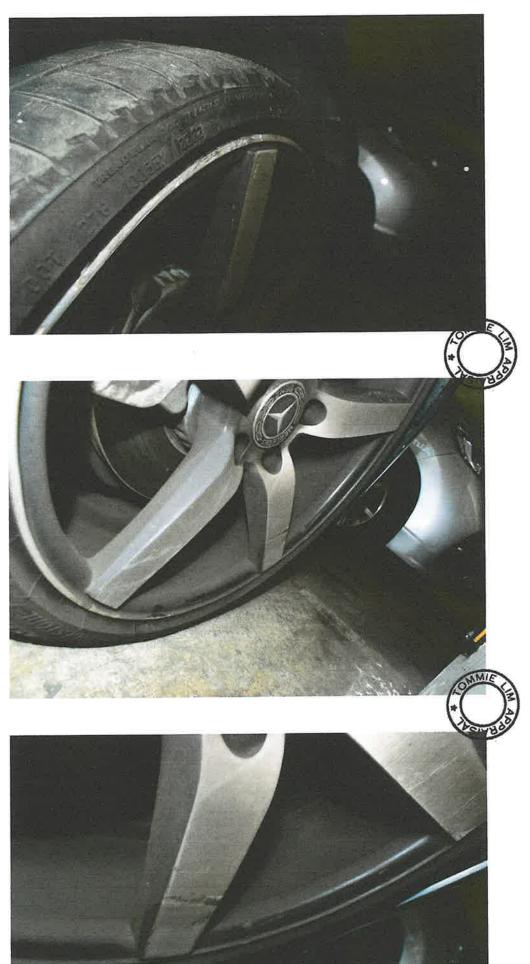








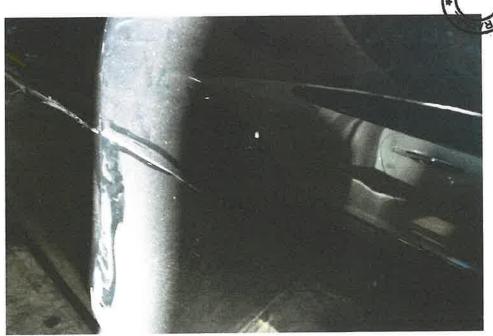
















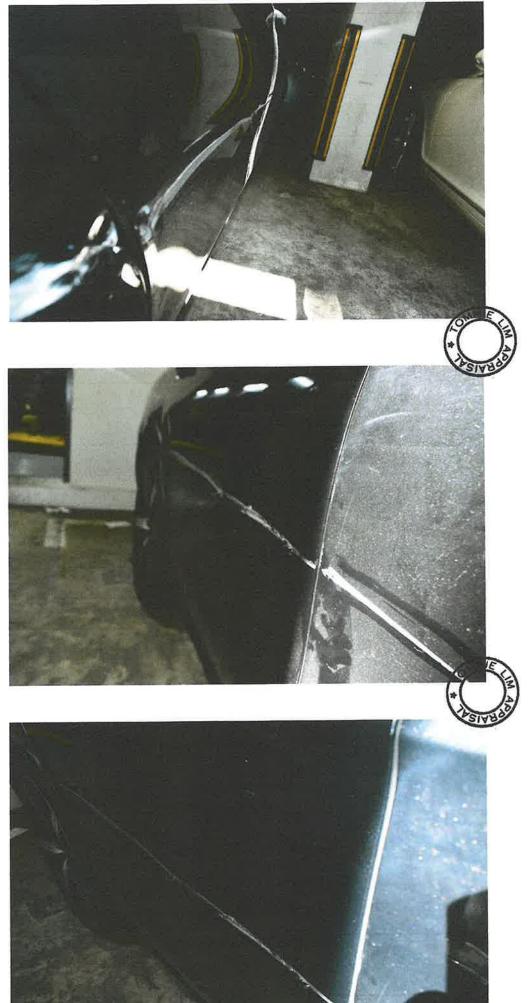




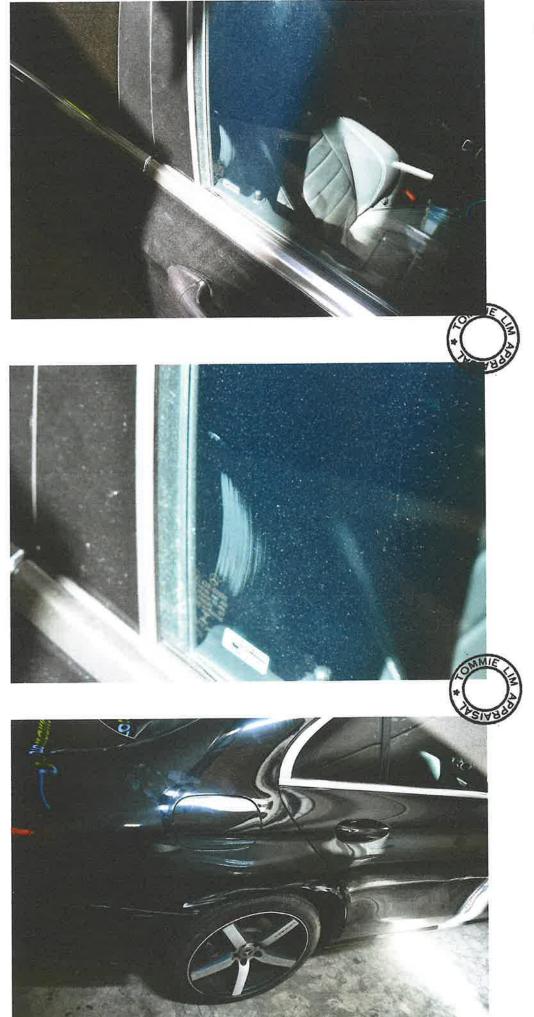








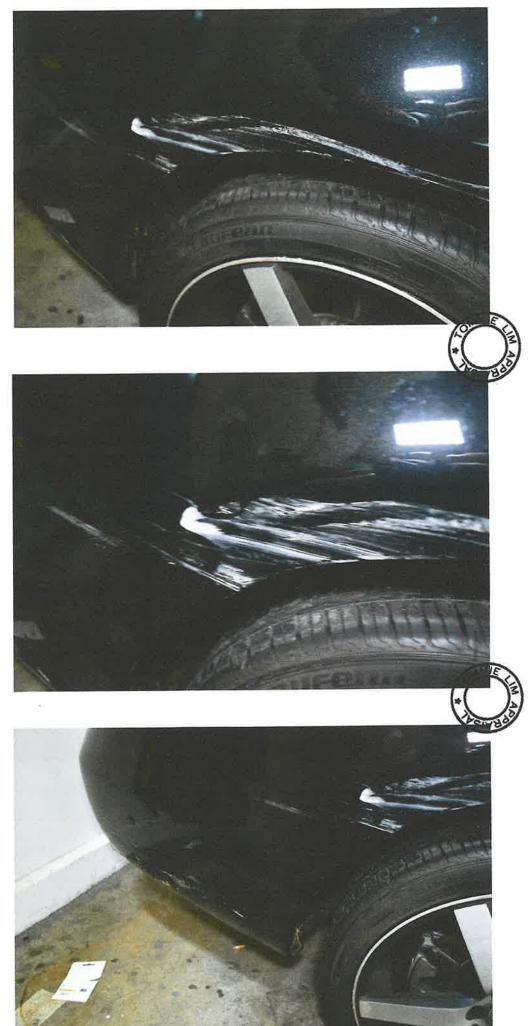




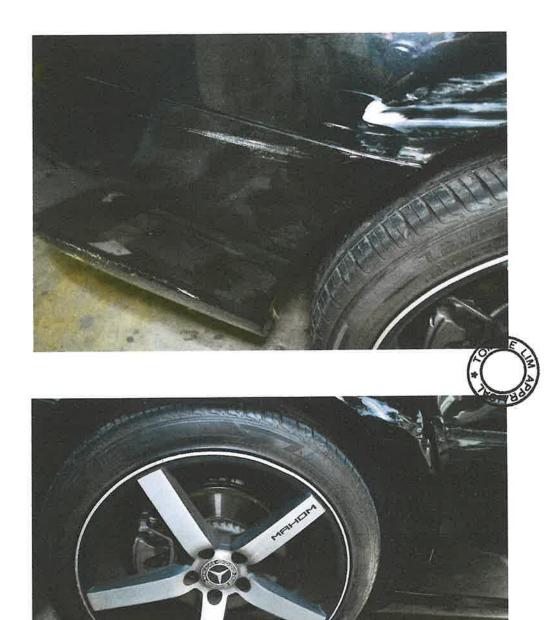


















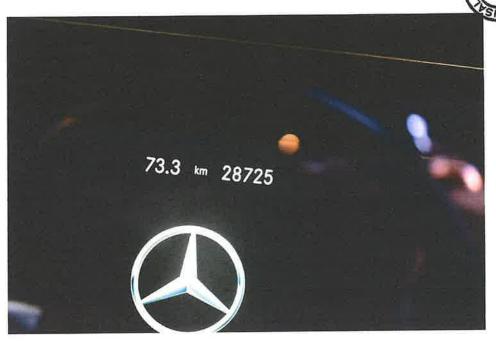
























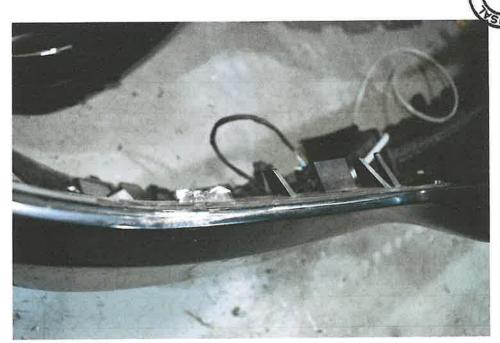




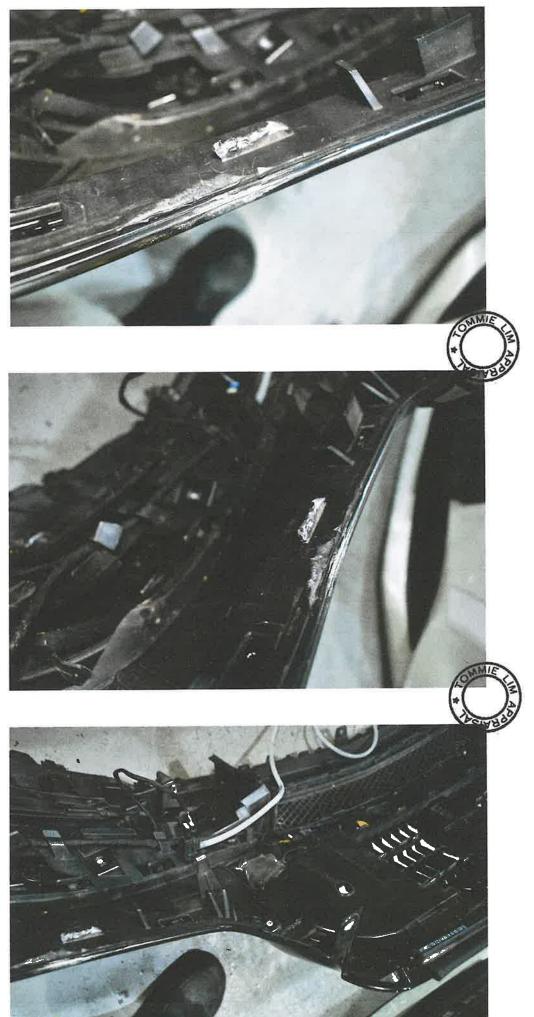












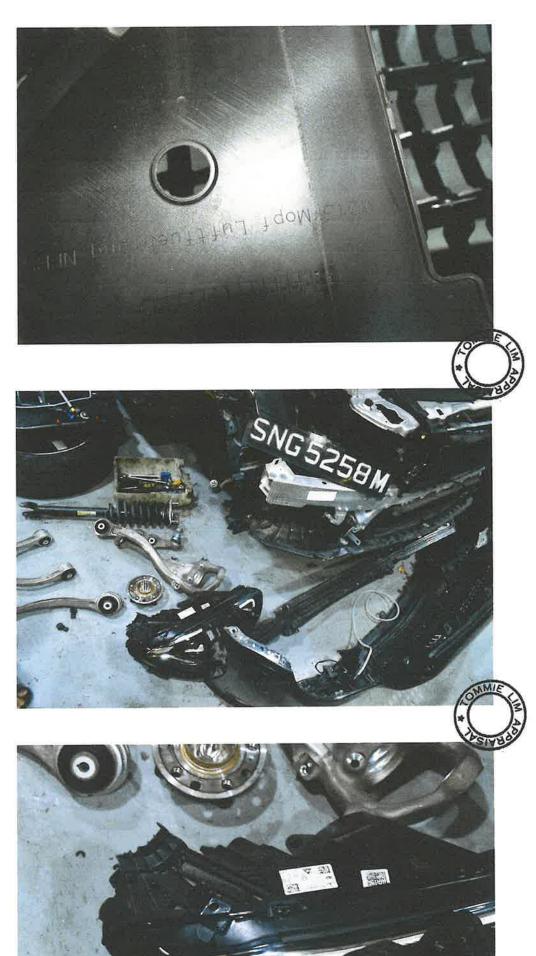




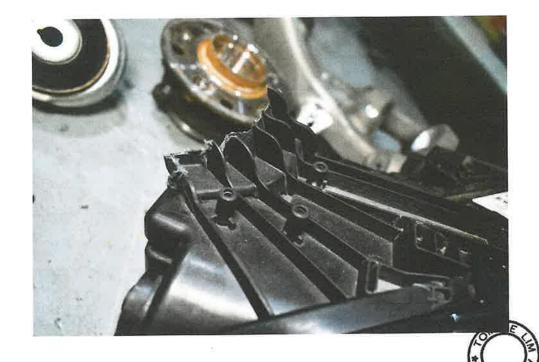


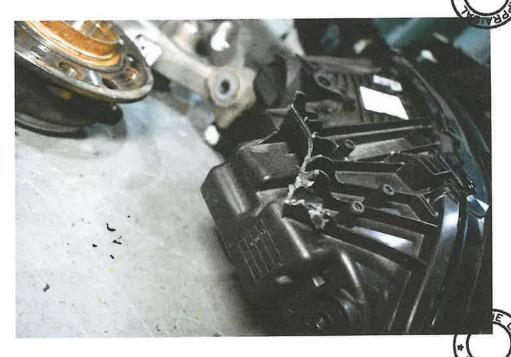




















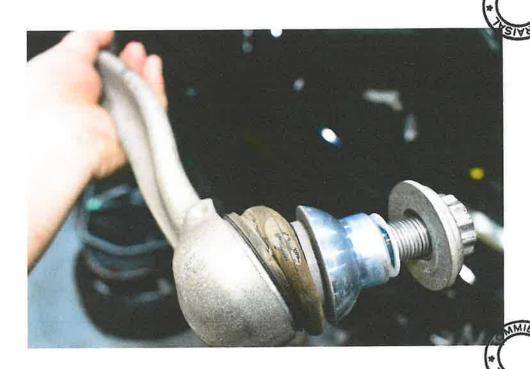
















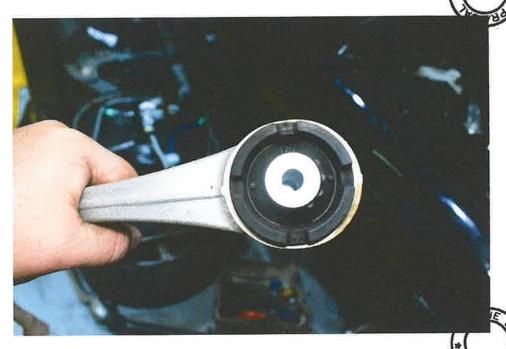


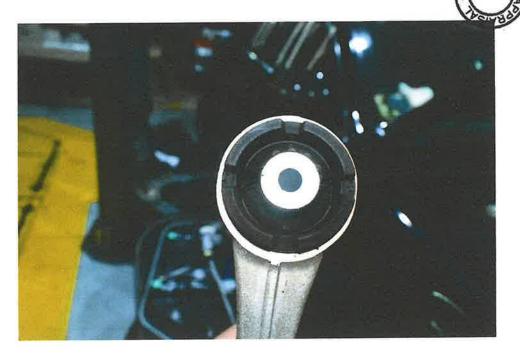














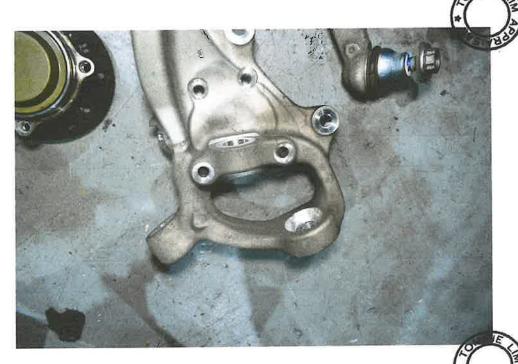


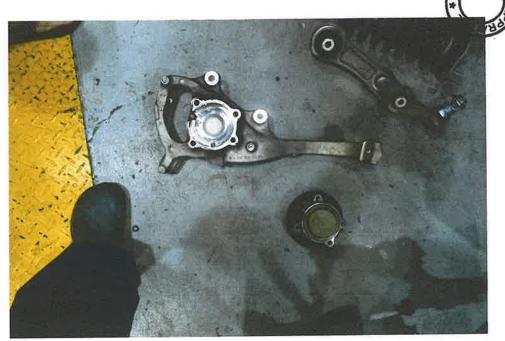












































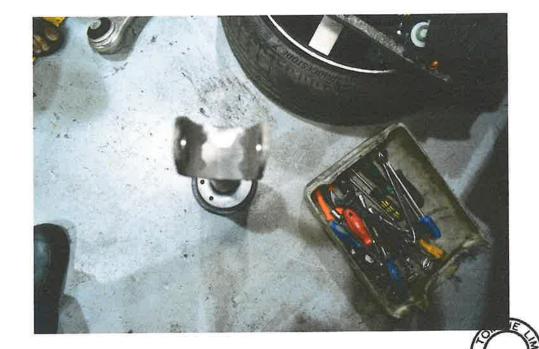


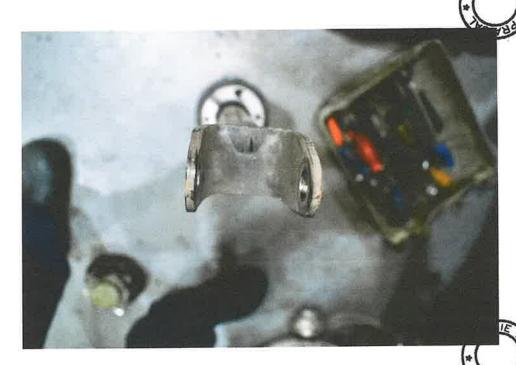










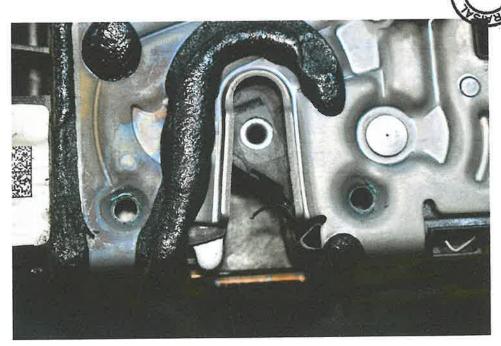




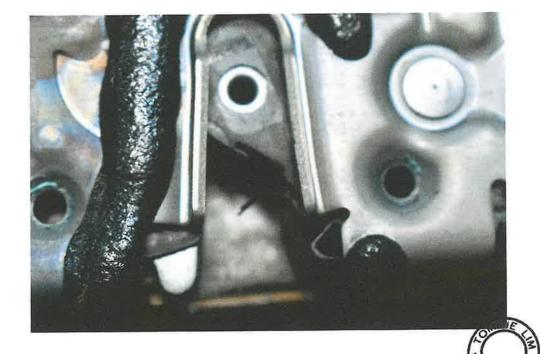








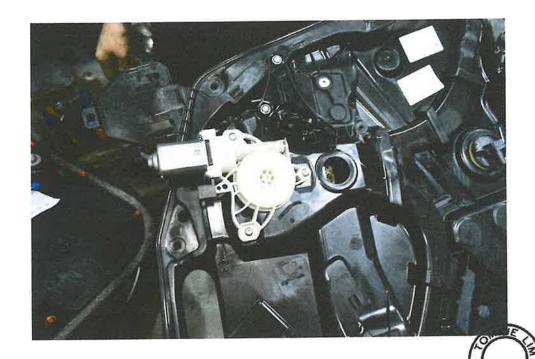


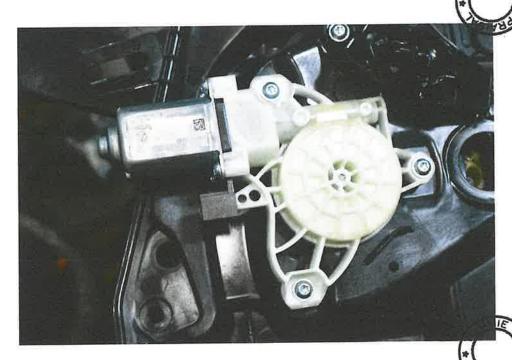


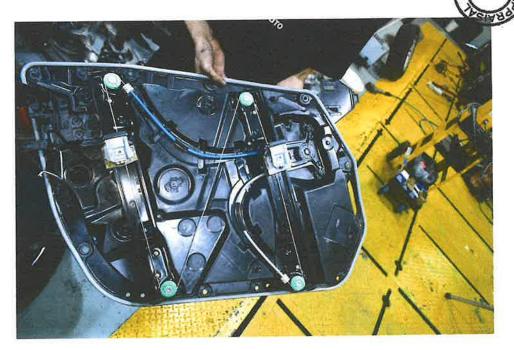




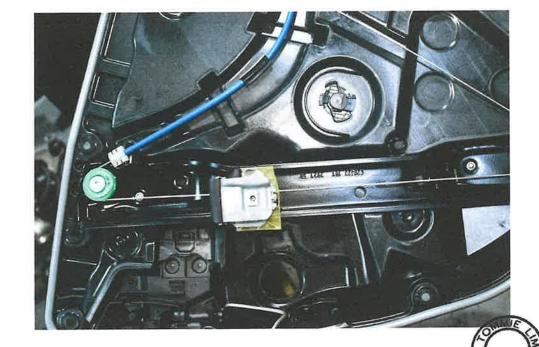








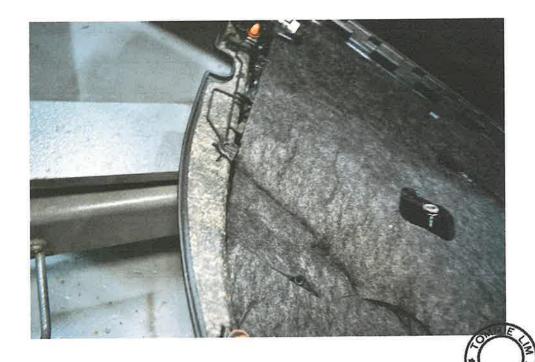








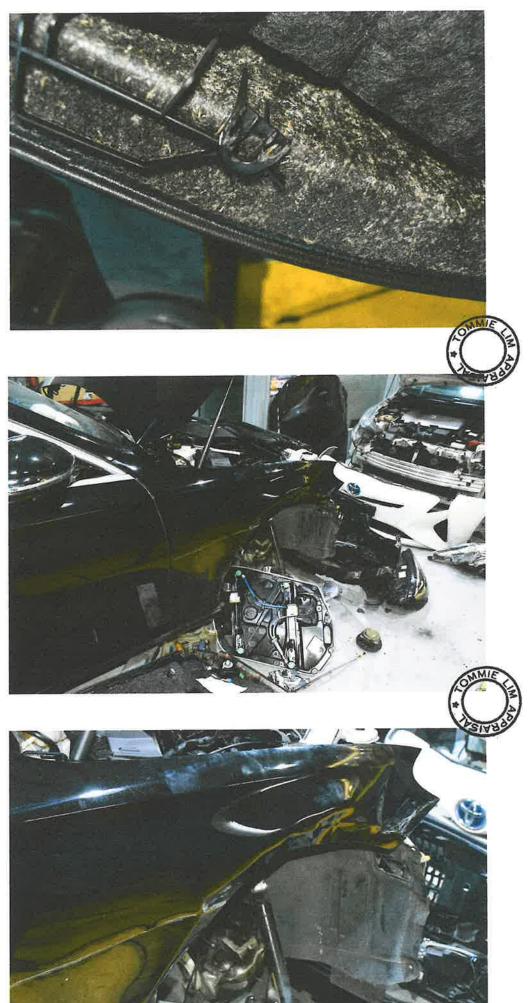






















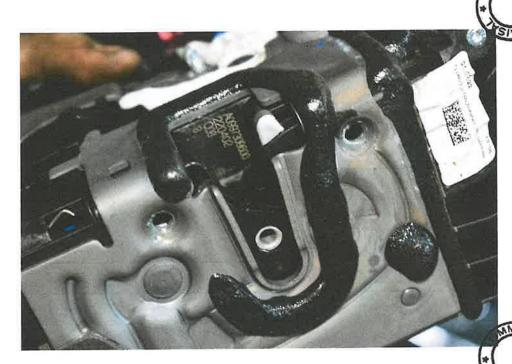


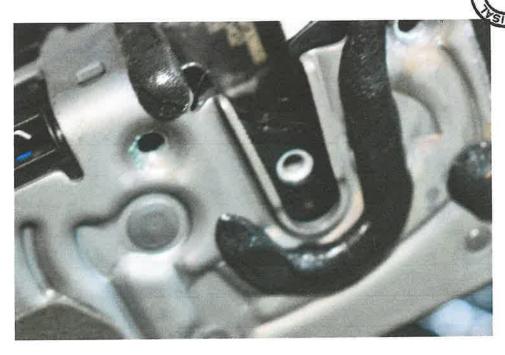








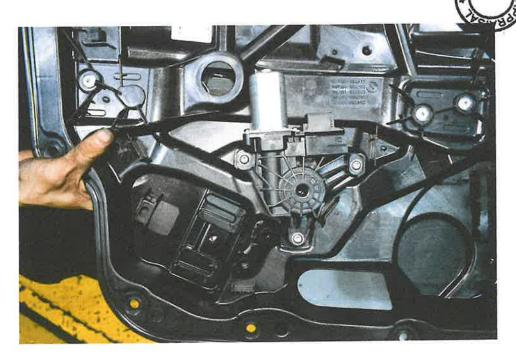




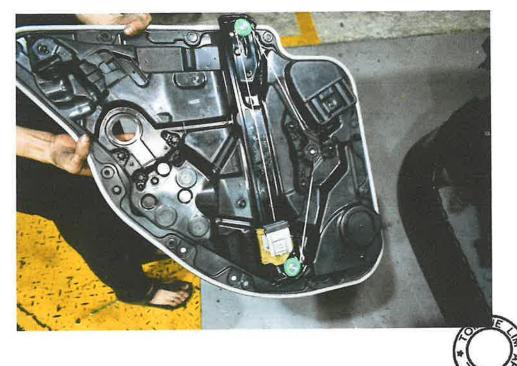












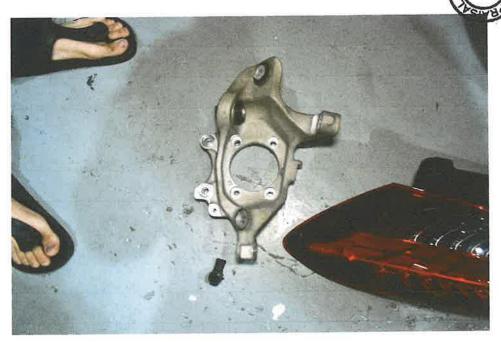




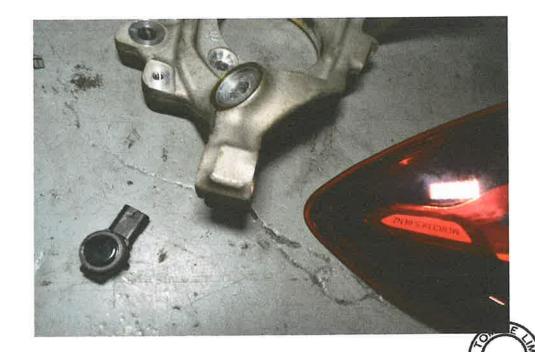
























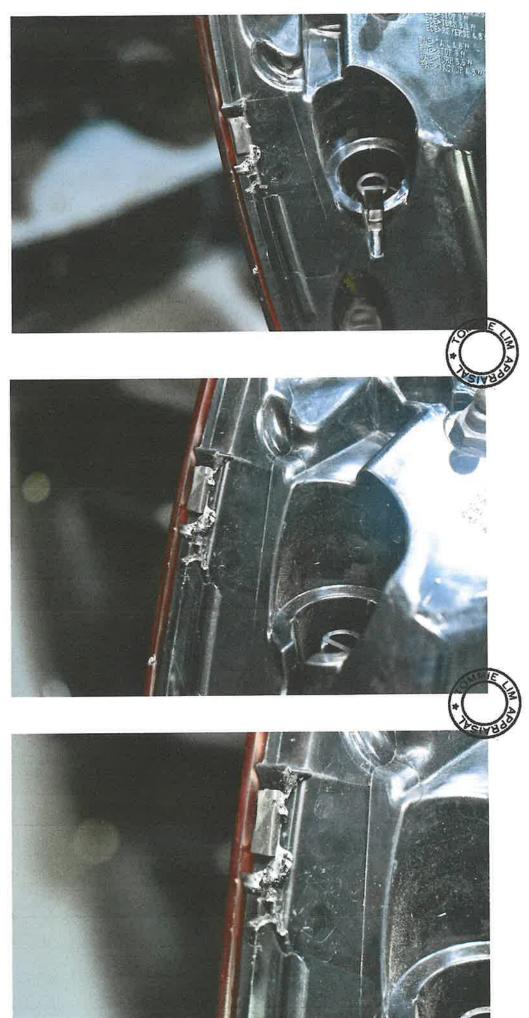














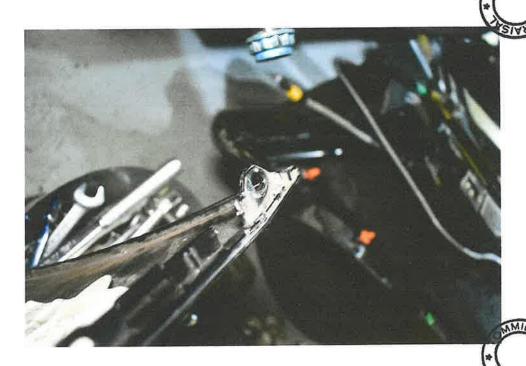










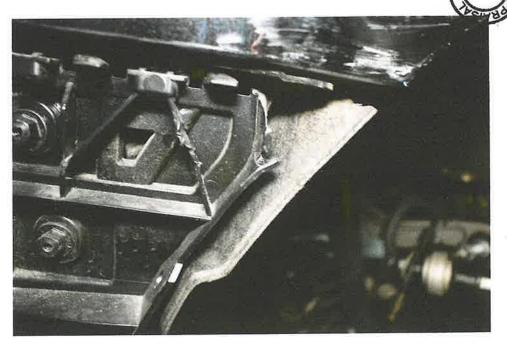




















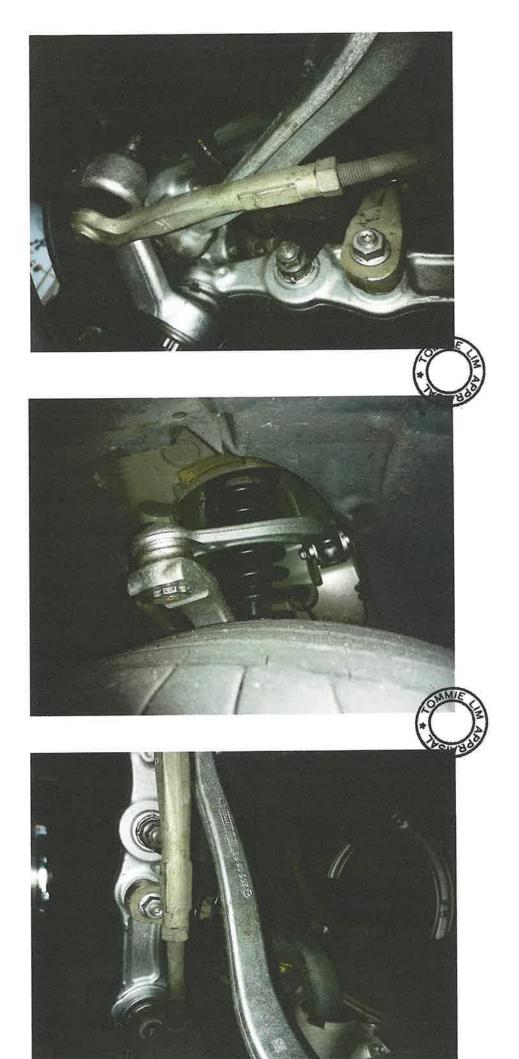




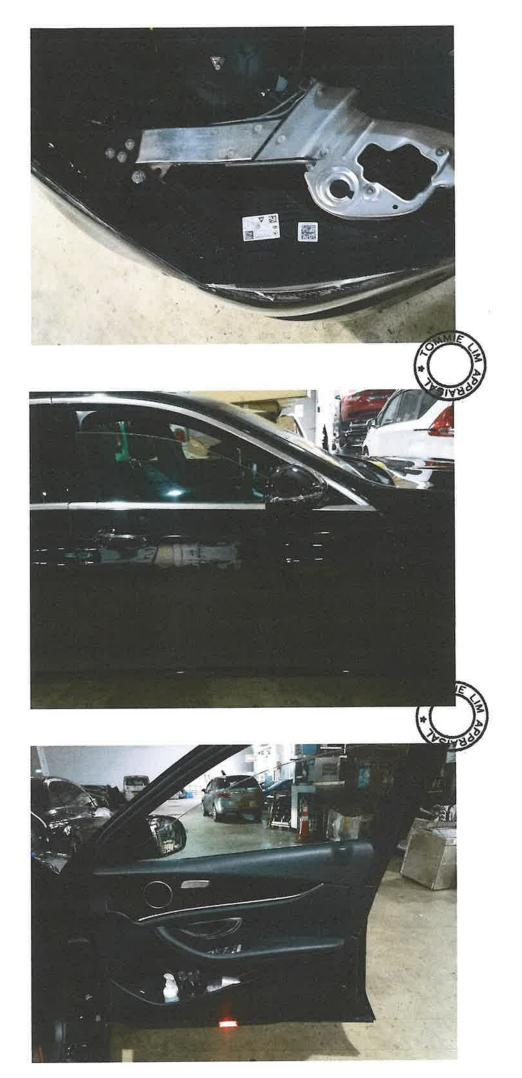




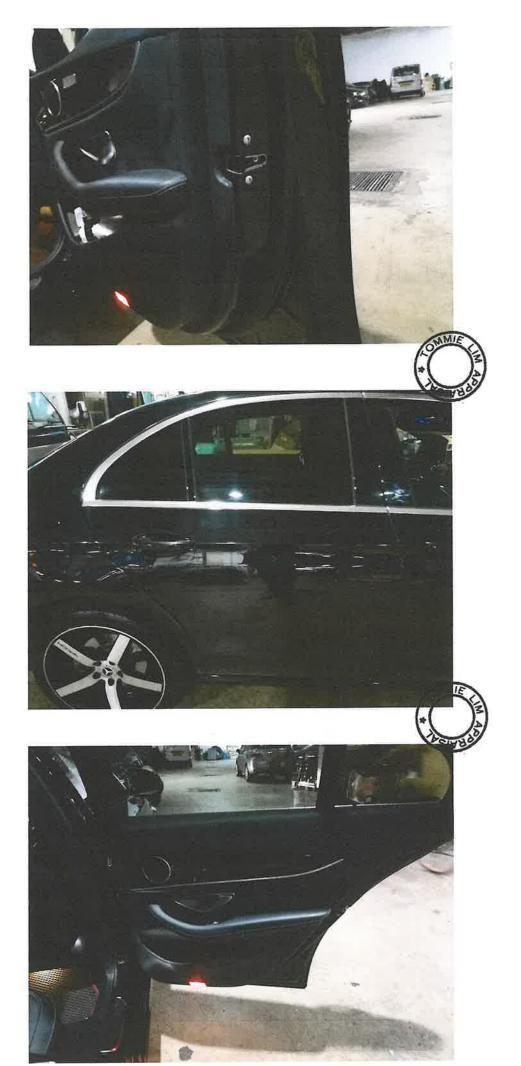




























GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

9 Temasek Boulevard, Suntec City Tower Two #42-01B Singapore 038989 E-mail: gears-support@shift-technology.com GST Registration: M400017735

TAX INVOICE

Date of Request: 07/03/2023

Your Ref No: RS

Dear Sir/Madam,

Date of Accident: 03/03/2023 00:00 (SGT)

Vehicle No: SNG5258M

Place of Accident: Bras Basah Rd, Singapore

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

			r	
DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SMV6090E	Bras Basah Rd, Singapore	(31.00)	1	(28.70)
GST Amount	(2.30)			
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.

> Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

07 Mar 2023 / 18:52:55

Receipt Date/Time: 07 Mar 2023 / 18:52:55

Tax Invoice/Receipt

Receipt No.: ITNET-00000-230307-003804

	A	CST	Amount
	Before GST (S\$)	Amount (S\$)	After GST (S\$)
9			
	24.77	1.98	26.75
Sub-Total	24.77	1.98	26.75
-	24.77	1.98	26.75
			0.00
Total Amount Payable			26.75
Paid By			26.75
559221XXXXXX7796	eNETS	eNETS Credit Card	
Total			26.75
Cash Change			0.00
Tendered Amount			26.75
Excess Refundable Amount			0.00
	Sub-Total Total Before Rounding Rounding Difference Total Amount Payable Paid By 559221XXXXXX7796 Total Cash Change Tendered Amount	Sub-Total 24.77 Total Before Rounding 24.77 Rounding Difference Total Amount Payable Paid By 559221XXXXXX7796 eNETS Total Cash Change Tendered Amount	Refore GST (S\$) 24.77 1.98 Sub-Total 24.77 1.98 Total Before Rounding 24.77 1.98 Rounding Difference Total Amount Payable Paid By 559221XXXXXX7796 eNETS Credit Card Total Cash Change Tendered Amount

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Save as PDF

OK →

Print Receipt



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

9 Temasek Boulevard, Suntec City Tower Two #42-01B Singapore 038989 E-mail: gears-support@shift-technology.com GST Registration: M400017735

TAX INVOICE

Date of Request: 07/03/2023

Your Ref No: RS

Dear Sir/Madam,

Date of Accident: 03/03/2023 00:00 (SGT)

Vehicle No: SNG5258M

Place of Accident: Bras Basah Rd, Singapore

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			r	
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SMV6090E	Bras Basah Rd, Singapore	(31.00)	1	(28.70)
GST Amount	(2.30)			
Total Amount Due (GST Inclusive)				(31.00)

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Thank you.

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