

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*
Our Ref: JW/ns/20231566-303[SLE8875X]

2 May 2023

Writer's name: Jade Wu
Writer's email: jadewu@mcplaw.com.sg
Writer's Secretary DID: +65 6812 0630 (Nicole)

PROPELL INTEGRATED PTE LTD
15 Bukit Batok Street 22
Propell Building
Singapore

By Certificate of Posting

Attn: Motor Claims Department
LONPAC INSURANCE BHD
300 Beach Road #17-04/07
The Concourse Singapore 199555

By email
mt_claim@lonpac.com

Dear Sirs,

Name of Claimant: **ZULKIFFLE BIN HUSSIN**
c/o Karr Autoworks Pte Ltd
11 Kallang Place
#07-01
Singapore 339155

ACCIDENT INVOLVING SLE8875X (OUR CLIENT'S VEHICLE) AND GBF9720R ALONG TAMPINES STREET 62 ON 6 MARCH 2023 AT 7:40PM

1. We are instructed by the abovenamed to claim damages against you in connection with a road traffic accident on 6 March 2023 along Tampines Street 62 involving our client's vehicle registration number SLE8875X and vehicle registration number GBF9720R owned by you and driven by your authorised driver at the material time.
2. We are instructed that the accident was caused by 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	8,600.00
b.	Rental Fee (7 days x S\$100.00)	700.00
c.	Surveyor Report Fee	784.00
d.	GIA Report Search	31.00
e.	GEAR Search Fee	2.00
f.	Costs (including GST)	864.00
		10,981.00

3. A copy of each of the following supporting documents is enclosed:
 - a) Our client's Singapore Accident Statement and Traffic Police Report;
 - b) Singapore Accident Statement of GBF9720R;
 - c) Repairer's invoice;
 - d) Surveyor Report and invoice;
 - e) Rental Invoice and Agreement;

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- f) Gears search receipt; and
 - g) 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;
 - 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.
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. In the circumstances, please provide the following information:
- a. The name, telephone number and address of the driver of your motor vehicle at the material time of the accident; and
 - b. Any document(s) i.e. correspondence, lease/rental agreement etc which shows that the party you have named was indeed the driver of your motor vehicle at the material time of the accident.

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

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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	07/03/2023 14:23 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	06/03/2023 19:40 (SGT)
Exact Location of Accident	Tampines St 62, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE8875X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ZULKIFFLE BIN HUSSIN
NRIC No	S8921647H
Email Address	zulkifflehussin@gmail.com
Mobile Phone No	(Phone) +65-94870524
Alternative Phone No	-

VEHICLE PARTICULARS

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

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/00722434

DRIVER

Name of Driver	ZULKIFFLE BIN HUSSIN
NRIC No	S8921647H
Date Of Birth	29/06/1989
Occupation	Indoor

Date Of Driving Pass	02/07/2012
Driving experience	10 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94870524
Alt. Phone Number	-
Email Address	zulkifflehussin@gmail.com
Address	BLK 112 TAMPINES ST 11 #04-179
Address complement	-
Postcode	521112
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	PAX 1
Gender	Male

PASSENGER 2

Name	PAX 2
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED
STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBF9720R
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Commercial vehicle
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person ZULKIFFLE BIN HUSSIN
Gender -
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SLE8875X
Were seat belts worn? -
Was this injured conveyed to hospital by ambulance? -

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver.
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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

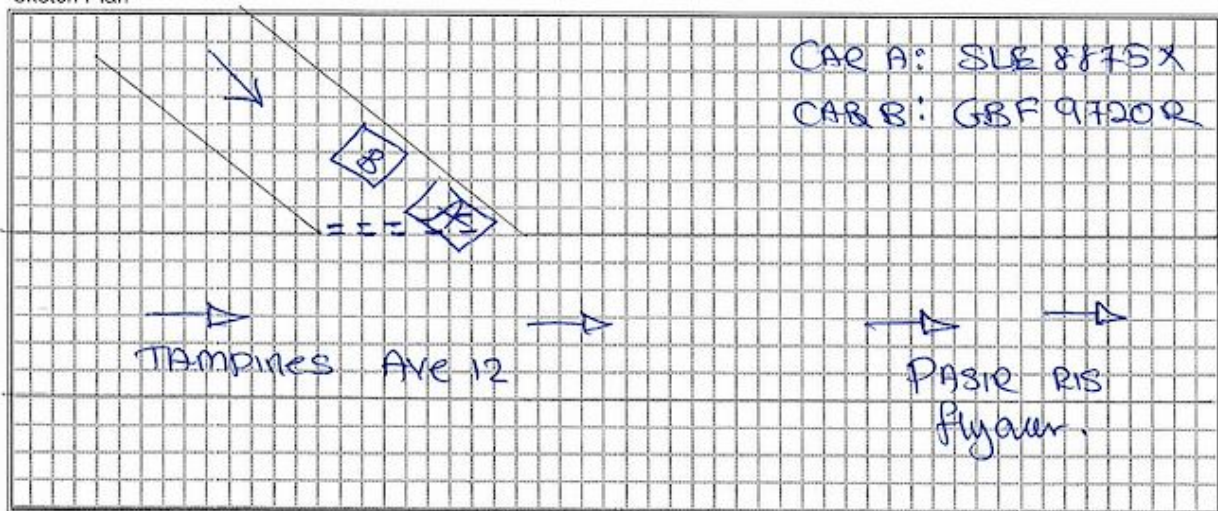


Policyholder's Signature / Date & Time

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

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

Sketch Plan



Police Report

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

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















**SINGAPORE
POLICE FORCE**



T/20230307/7033

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20230307/7033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/03/2023 13:11		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ZULKIFFLE BIN HUSSIN			Address: 112 TAMPINES STREET 11 #04-179 SINGAPORE 521112		
ID Type / ID No.: NRIC NO / S8921647H			Contact No.: Home/Office: Mobile: 94870524		
Nationality: SINGAPORE CITIZEN			Email: zulkifflehussin@gmail.com		
Sex: Male	Age: 33	Date of Birth: 29/06/1989	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: Service Engineer			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/03/2023 19:40	Type of Location: Bend
Location: TAMPINES STREET 62				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBF9720R	Car					0
SLE8875X	Car	HONDA	VEZEL 1.5X CVT	White		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20230307/7033

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20230307/7033

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLE8875X	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00722434/03	22/11/2019	04/02/2024

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ZULKIFFLE BIN HUSSIN		ID No. S8921647H
Related Vehicle	SLE8875X (Car)		Contact No. 94870524
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	07/03/2023		Date 07/03/2023
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the stated date and time, i was travelling along the stated place. I was at the filter lane waiting for the traffic at the main road to be clear. Suddenly, i felt a huge impact on the rear portion of my vehicle. I alighted and then realized that car GBF9720R has rear ended me. I felt pain and went to see a doctor at ANSAR CLINIC at Block 138 Tampines St and was awarded 3 days of MC.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20230307/7033

3 of 3

Report No. T/20230307/7033

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
TAY CHUN KEEN
Contact No.: 65476436

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
07/03/2023 13:11

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
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ACCIDENT STATEMENT

Date of Submission	07/03/2023 17:27 (SGT)
Reported by	Driver
Date of Accident	06/03/2023 19:45 (SGT)
Exact Location of Accident	Tampines Ave 12, Pasir Ris Flyover, Singapore
Additional Location Information	PASIR RIS DRIVE 1 FLYOVER
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF9720R
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	PROPELL INTEGRATED PTE LTD

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
Variant	-
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1461

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z22VC05011324

DRIVER

Name of Driver	SUBRAMANIAN VENKATESHVARAN
Passport No/FIN	GXXXX989M
Address	NA
Address complement	-
Postcode	-
Does Driver Own Other Vehicles?	No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
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Weather Conditions Clear

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) 1
Translator's name -
Translator's ID -
Translator's phone number -
Translator's email -
Original language used in the statement -

CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING FROM TPE EXITING PASIR RIS DRIVE 1 FLYOVER. VEHICLE B IN FRONT OF ME SUDDENLY E-BRAKE, I COULD NOT STOP IN TIME AND HIT ONTO HIS REAR PORTION.

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 Number SLE8875X
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver ZULKIFFLE BIN HUSSIN
Insurance Company Name -

SKETCH PLAN




IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
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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.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

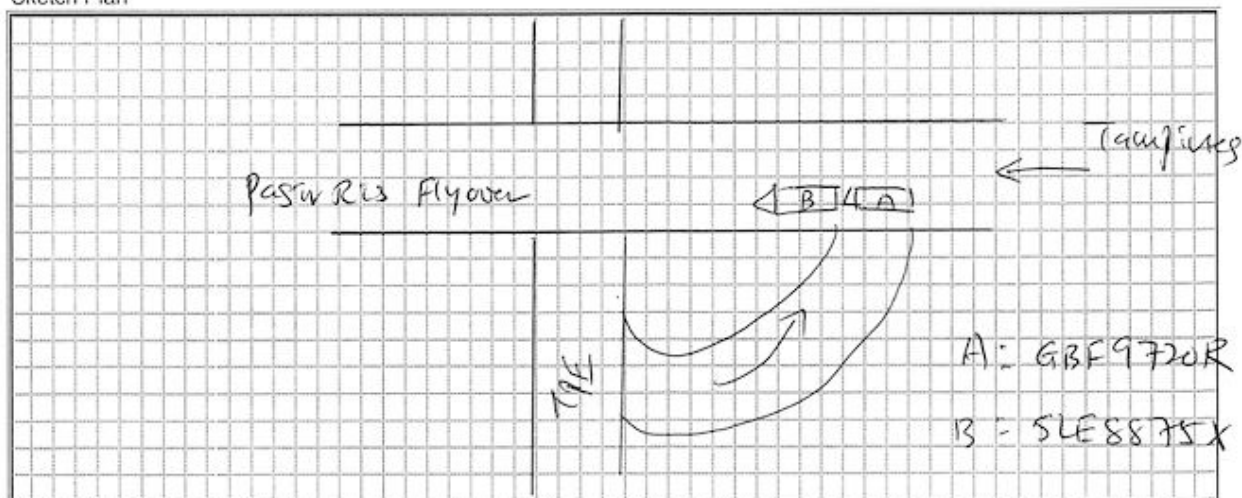
I understand, acknowledge, agree and consent that:

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

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

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

Sketch Plan



vJun2022

1

Describe Circumstance of the Accident

I was travelling from TPE exiting Pasir Ris Drive 1 Flyover. Vehicle 'B' in front of me suddenly brake, I could not stop in time and hit auto's rear portion.

Declaration

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




Policyholder's Signature / Date & Time



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



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



















Karr Autoworks Pte. Ltd.

Co. Reg. No: 202305401K

11 Kallang Place

#07-01 Singapore 339155

Email: accts.karrautoworks@gmail.com

TAX INVOICE

Lonpac Insurance Bhd

6250 7388

Invoice No. : KA2023 07 04

Invoice Date : 24 April, 2023

Vehicle No. : SLE 8875 X

Make & Model : Honda Vezel 1.5X CVT

Chassis No. : RU11112739

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	8,600.00	8,600.00

GRAND TOTAL: \$8,600.00

Amount Paid \$0.00

Balance Due \$8,600.00



Signature/Company Stamp

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

ALLIED AUTO APPRAISAL

22 Upper Serangoon Crescent #16-53 Singapore 534025

Company Registration No. 53127785B

Our Ref: Allied/TP/23-03002

Repairer : **Karr Autoworks Pte. Ltd.**
Address of Inspection
11 Kallang Place #07-01
Singapore 339155

Date Report :
Date of Accident : **15-Mar-23**
Date of Survey : **11-Mar-23**

Veh No : SLE 8875 X

VEHICLE PARTICULARS & CONDITION

Make & Model	: Honda Vezel 1.5X CVT	Date of Registration	: 04-Aug-16
Engine No	: L15B4032744	Engine c.c.	: 1494 cc
Chassis No	: RU11112739	COE Expiry Date	: 03-Aug-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)

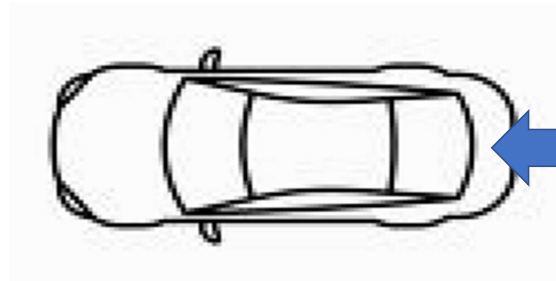
Front Tyre Size	: 215/55R17	Rear Tyre Size	: 215/55R17
Front Left Side	6mm Toyo	Rear Left Side	6mm Toyo
Front Right Side	6mm Toyo	Rear Right Side	6mm Toyo

GENERAL DESCRIPTION OF DAMAGE

The inspected vehicle sustained damage at the **REAR** portion.

During visual inspection, our surveyor noted that the tailgate, rear floor panel, rear end panel, rear bumper and among other parts were affected.

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



Repairer Estimate

Parts	: 9,130.80
Nett Item	: 100.00
Labour	: 4,110.00
Total	: 13,340.80

Our Recommendation

Parts :	7,085.25
Nett Item :	80.00
Labour :	3,610.00
GST (7.00%) :	-
Total :	10,775.25
Less 20% :	2,155.05
	8,620.20
Lump Sum (Estimated) :	8,600.00

The repairer agree to repair the vehicle on a **Lump Sum Basis** with our recommendation of **SGD 8,600.00 (SGD Eight Thousand and Six Hundred only)** and we are in the opinion the repairer would need about a **9.0** 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	TAILGATE ASSEMBLY	Badly Dented	1	1,281.60	1,068.00
2	TAILGATE WINDSHIELD GLASS MOULDING	Necessary	1	234.00	195.00
3	TAILGATE OUTER GARNISH	Broken	1	456.00	380.00
4	TAILGATE OUTER GARNISH CLIPS (11 PCS)	Necessary	1	96.00	80.00
5	TAILGATE LICENSE PLATE LAMP (2 PCS)	Cracked	1	300.00	250.00
6	TAILGATE COMBINATION LAMP (RH)	Broken	1	576.00	480.00
7	TAILGATE COMBINATION LAMP (LH)	Broken	1	576.00	480.00
8	TAILGATE VEZEL EMBLEM	Necessary	1	105.60	88.00
9	TAILGATE INTERIOR TRIM BOARD	Cracked	1	268.80	224.00
10	TAILGATE INTERIOR TRIM BOARD CLIPS (16 PCS)	Necessary	1	96.00	80.00
11	TAILGATE LOCK ASSEMBLY	Dented/Cracked	1	660.00	550.00
12	REAR FLOOR PANEL ASSEMBLY	Badly Dented/ Crumpled	1	780.00	650.00
13	TOOLS & STORAGE TRAY FOAM	Dented/Deformed	1	300.00	250.00
14	REAR COMPARTMENT LID COVER	Deformed/Warped	1	616.80	514.00
15	REAR END PANEL	Badly Dented/ Distorted	1	996.00	830.00
16	REAR END PANEL INNER GARNISH	Dented/Cracked	1	186.00	155.00
17	TAILGATE WEATHERSTRIP	Deformed/Kinked	1	186.00	155.00
18	REAR KEYLESS REMOTE ANTENNA	Serviceable	1	238.00	-
19	REAR SMART BUZZER	Cracked/Broken	1	180.00	150.00
20	REAR COMBINATION LAMP (RH)	Broken	1	216.00	180.00
21	REAR COMBINATION LAMP (LH)	Broken	1	216.00	180.00
22	REAR WHEEL ARCH PROTECTOR (RH)	Broken	1	307.20	256.00
23	REAR WHEEL ARCH PROTECTOR (LH)	Broken	1	307.20	256.00
24	REAR FENDER SPLASH GUARD (RH)	Torn	1	295.20	246.00
25	REAR BUMPER CENTRE FACE	Badly Dented/ Deformed	1	1,020.00	850.00
26	REAR BUMPER SIDE FACE (RH)	Serviceable	1	600.00	-
27	REAR BUMPER SIDE FACE (LH)	Snapped/Broken	1	600.00	500.00
28	REAR BUMPER CLIP	Necessary	1	96.00	80.00
29	REAR BUMPER SIDE SPACER (RH)	Broken	1	192.00	160.00
30	REAR BUMPER SIDE SPACER (LH)	Broken	1	192.00	160.00
Sub Total (\$\$) :				12,174.40	9,447.00
Discount (25%) :				3,043.60	2,361.75
Total Parts (\$\$) :				9,130.80	7,085.25

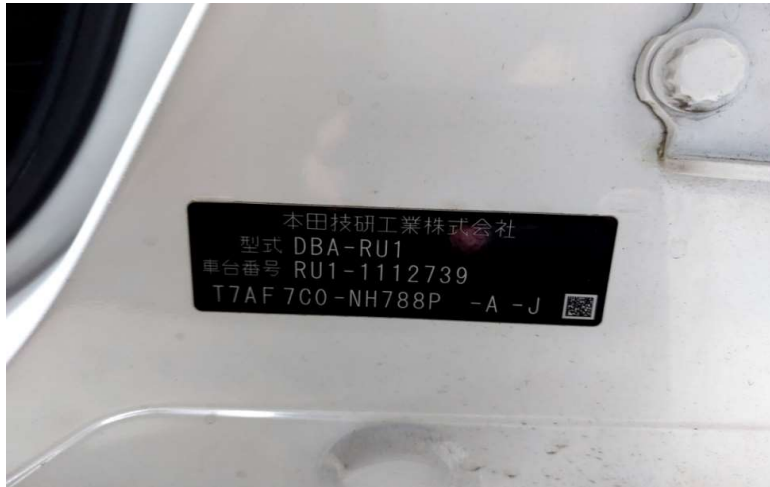
RECOMMENDED SPECIAL NETT ITEMS

No.	Descriptions	Condition	Repairer	Adjusted
1	TAILGATE INNER SEALER	Necessary	100.00	80.00
2	TAILGATE WINDSHIELD GLASS DAM KIT	Necessary	100.00	80.00
3	TAILGATE WINDSHIELD GLASS SEALANT	Necessary	100.00	80.00
4	REAR FLOOR PANEL JOINT SEALANT	Necessary	100.00	80.00
5	REAR END PANEL JOINT SEALANT	Necessary	100.00	80.00
6	REAR BUMPER PARKING SENSOR	Dented/Malfunction	500.00	300.00
7	REAR BUMPER REFLECTOR SET (AFTER MARKET)	Cracked/Broken	380.00	280.00
8	EXHAUST MUFFLER ASSEMBLY (SILENT) (AFTER MARKET)	Dented/Bent	3,200.00	2,800.00
			100.00	80.00

ALLIED AUTO APPRAISAL

RECOMMENDED LABOUR			
No.		Repairer	Adjusted
1	TO CUT/WELD REAR FLOOR PANEL AND REAR END PANEL TO RENEW INCLUDING REPLACEMENT OF THE REAR ACCIDENT DAMAGED PARTS.	1,800.00	1,600.00
2	TO REMOVE/INSTALL TAILGATE WINDSHIELD GLASS TO FACILITATE THE REPLACEMENT OF THE NEW TAILGATE.	200.00	150.00
3	TO TRANSFER TAILGATE LOCKING MECHANISM AND OTHER COMPONENTS TO NEW TAILGATE.	120.00	120.00
4	TO TRANSFER TAILGATE PARKING AID CAMERA AND WIRING TO NEW TAILGATE.	80.00	80.00
5	TO REMOVE/INSTALL REAR SEAT, REAR COMPARTMENT TRIM, GARNISHES AND INTERIOR UPHOLSTERY TO FACILITATE THE REPAIRS.	200.00	150.00
6	TO REMOVE/INSTALL FUEL TANK ASSEMBLY TO FACILITATE THE REPAIRS.	120.00	120.00
7	TO CHECK REAR LIGHTINGS AND ELECTRICAL WIRING SYSTEM.	50.00	50.00
8	TO INSTALL REAR BUMPER PARKING SENSORS TO NEW BUMPER FACE.	80.00	80.00
9	TO REMOVE/INSTALL EXHAUST PIPING SYSTEM TO RENEW EXHAUST MUFFLER ASSEMBLY.	120.00	120.00
10	RUST PROOFING ON THE REAR ACCIDENT AFFECTED PORTION.	160.00	160.00
11	TO PUTTY AND RESPRAY PAINTING ON THE TAILGATE, REAR FLOOR PANEL, REAR END PANEL AND LEFT REAR BUMPER SIDE FACE.	1,180.00	980.00
		4,110.00	3,610.00
COST OF CLAIMS		Repairer	Adjusted
1	TOTAL PARTS	9,130.80	7,085.25
2	TOTAL NETT ITEMS	100.00	80.00
3	LABOUR & SPRAY	4,110.00	3,610.00
	Gross Total (\$\$) :	13,340.80	10,775.25
	GST 7.00% (\$\$) :	-	-
	Total Amount (\$\$) :	13,340.80	10,775.25

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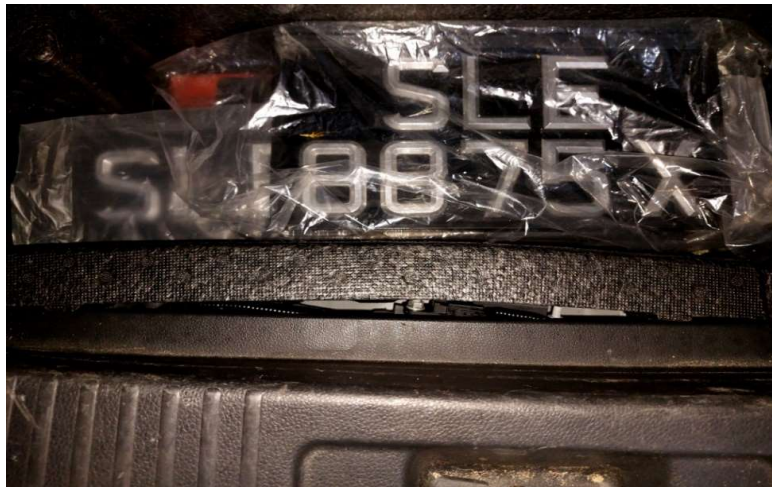
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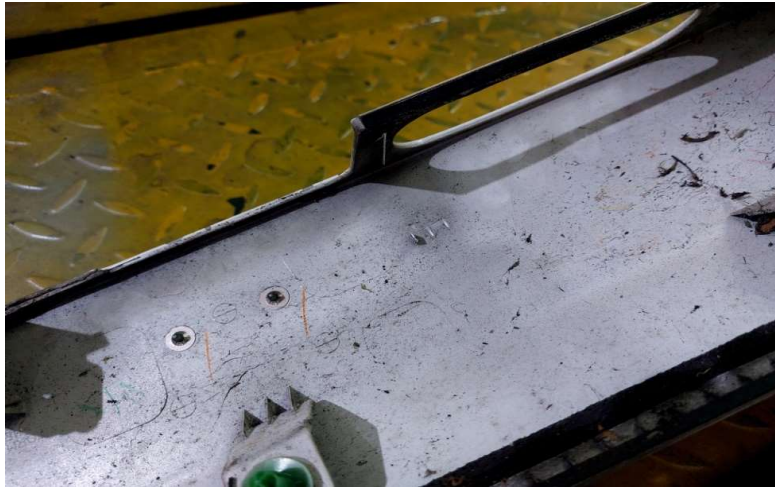
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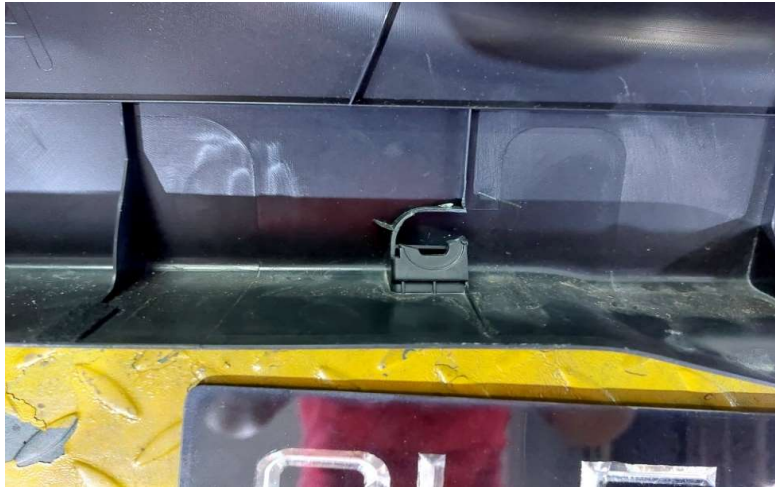
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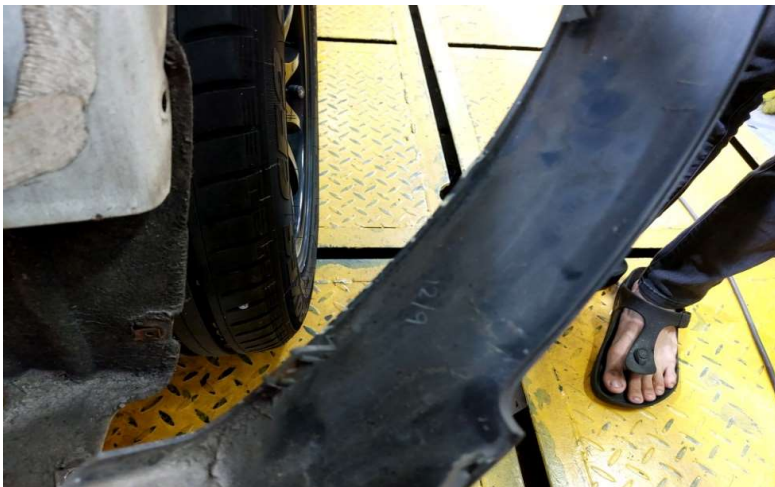
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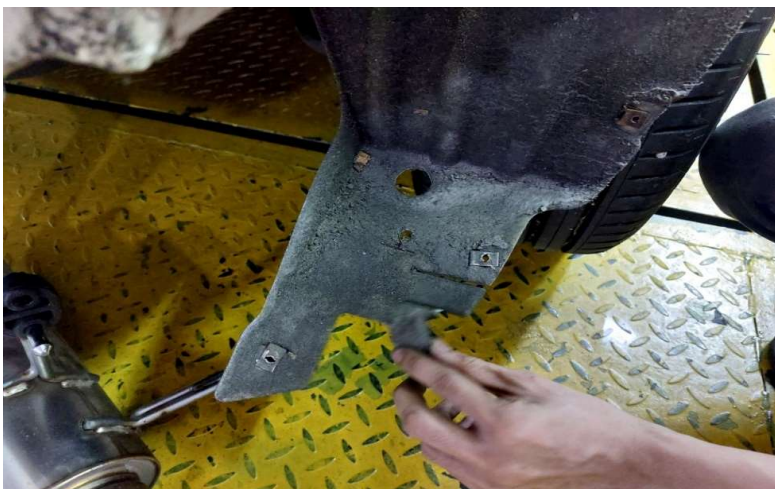
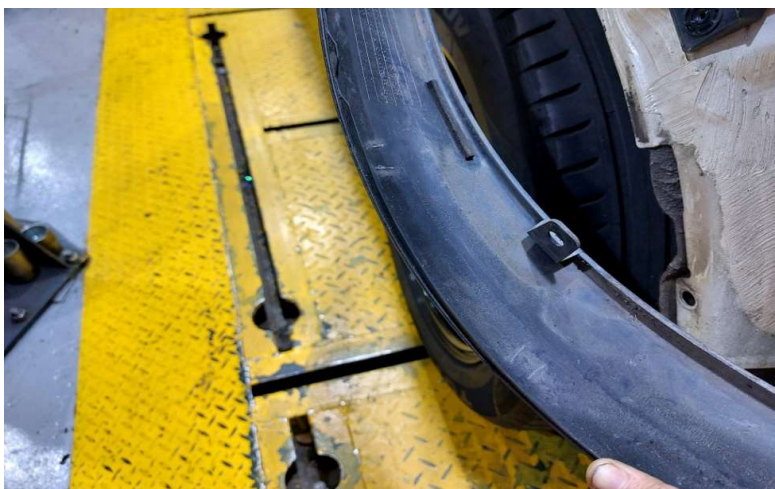
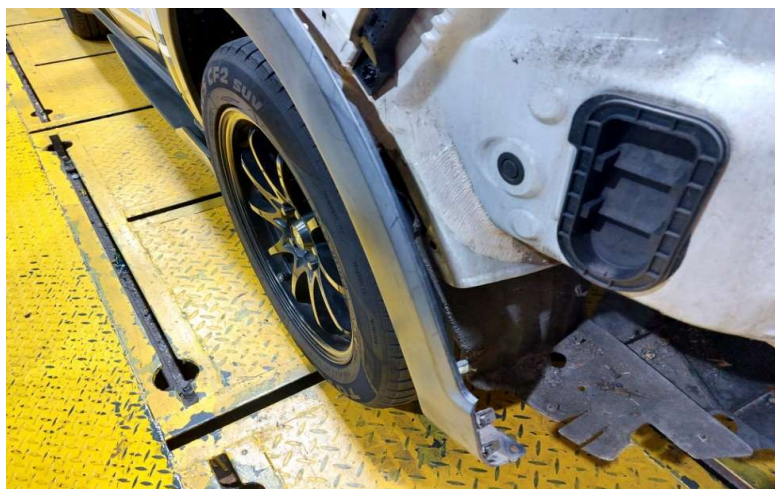
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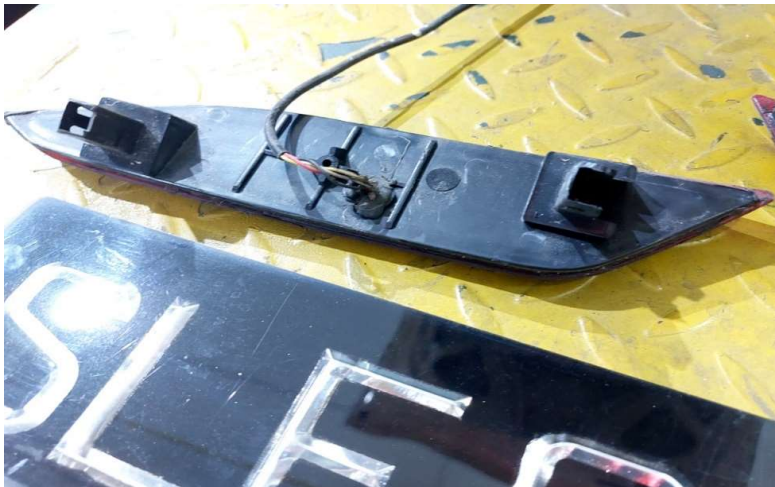
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Allied Auto Appraisal

22 Upper Serangoon Crescent #16-53 Singapore 534028

alliedauto@ymail.com

Reg 53127783B

Invoice

KARR AUTOWORKS PTE. LTD.

11 KALLANG PLACE #07-01

SINGAPORE 339155

Invoice No. ALLIED/SV/201

Date : 15-Mar-23

Case Ref : SV IND B3 03002

Sr	Description	Amount
1	Survey Inspection of SLE 8875 X	500.00
2	Transportation x 3	180.00
3	Photographs (Digital Printouts)	104.00
	Grand Total	SGD 784.00

Please cross a cheque of an amount **SGD 784.00 (SGD SEVEN HUNDRED AND EIGHTY-FOUR 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

Prepared & checked by Emily



LEVIN RENTAL PTE LTD

8 Kaki Bukit Ave 4 #08-41 @ Premier Kaki Bukit
Singapore 415875

SLE8975x

Karr

VEHICLE RENTAL AGREEMENT

Agreement No. :

Date :

Owner

Name : UEN :
Address : Contact No. :
Email :

Hirer

Name : NRIC :
Address : DOB :
Contact No. :
Email :

Relief Driver

Name : NRIC :
Address : Contact No. :

DESCRIPTION OF VEHICLE ("The Vehicle")




Make & Model : VW Passat Vehicle Registration No. : SKJ6608A
Engine No. : Chassis No. :

RENTAL PAYMENT DETAILS

1. Commencement Date : 7/3/2023 @ 2pm Hrs
2. Period of Hire : From to 14/3/2023
3. Rental Payment of SGD Per ("Rental") for period DAYS due on the Sunday
of each WEEKLY (payable in advance) ("Due Date") Late Payment will be charged at SGD50 for each
and every payment due. Total amount due for this agreement will be SGD 0.00
4. Upon signing The Agreement, The Hirer shall pay The Owner a security deposit amount of SGD 0.00
(hereinafter referred to as "The Deposit")

PURPOSE OF RENTING VEHICLE (Please tick the following:)

- Personal Usage
✓ Private Hire Usage
- Others (Please Specify):

The Owner's Signature	Date	The Hirer's Signature
 		

Terms and Conditions

1. RENTAL FEE

- a. The rental fee is hereby agreed by both parties at SGD _____ Per . An invoice will be sent to The Hirer for the rental fee on a weekly basis for Monday to Sunday (hereinafter referred to as "Billing Cycle") and the rental fee shall include: -
- Unlimited mileage
 - Road Tax and Radio License;
 - Motor Insurance Coverage (Excess applicable);
 - 24-hour breakdown and emergency service (In Singapore only)
- b. Rental fee should be paid by The Hirer to The Owner every Friday, following the Billing Cycle.
- c. Without prejudice to The Owner's rights, The Hirer shall pay an administrative fee of SGD 50.00 and late payment interest computable at a rate of 5% per month if the Rental Fee and/or other payment(s) remain(s) unpaid for more than seven (7) calendar days from due date of the invoice(s). Failing which, The Owner will, at its sole discretion, reserve all rights to repossess The Vehicle by lodging a lost vehicle report with the police and/or activation of a vehicle re-possession team to retrieve the vehicle. Consequentially, The Hirer will be deemed to have breached The Agreement, rendering it null & void, and The Owner reserves all rights to: -
- Forfeit the security deposit that has been withheld;
 - To recover the cost of re-possessing the vehicle, all outstanding amount in arrears and all other obligations to The Owner under The Agreement from The Hirer.




2. SECURITY DEPOSIT

- a. The Hirer shall, upon signing The Agreement, pay to The Owner a security deposit amount of SGD 0.00 (hereinafter referred to as The deposit)
- b. Without prejudice to The Owner's rights, The Owner shall be entitled to forfeit and/or retain and part of the Deposit in the event where The Hirer breaches the agreement, fails or neglects to pay any sums or charges due to or owing to The Owner.
- c. The Deposit will be fully refunded in fourteen (14) days from the date of collection, only if The Hirer is discharged of its obligations as stated in The Agreement.
- d. The Deposit cannot be used to off-set against any rental fees or any other payments.
- e. In the event where The Hirer fails to collect the vehicle within seven (7) days from the date of execution of this contract, the Deposit will be forfeited and The Owner reserves all rights to claim for any resultant or damages from The Hirer.

3. SERVICING & MAINTENANCE, REPAIR AND BREAKDOWN & EMERGENCY SERVICES

SERVICING & MAINTENANCE: -

- a. it shall be the responsibility & cost of The Hirer to send the vehicle for servicing & maintenance at The Owner's designated workshop's as follows: -
- Engine oil and oil filter change @ every 10,000KM or mileage otherwise determined by The Owner
 - Gearbox auto transmission oil change @ 40,000KM or mileage otherwise determined by The Owner
 - Tire rotation @ every 10,000KM or mileage otherwise determined by The Owner
 - Tire change @ every 50,000KM or mileage otherwise determined by The Owner
- b. The Owner reserves all rights to demand any resultant costs and/or damages from The Hirer for non-conformance of clause 5(b).
- c. In the event that The Hirer sends the vehicle to The Owner's workshop(s) without adhering to clause 5(b), The Hirer will still be liable to pay rental for the time spent under such circumstances.
- d. The Hirer must ensure that the vehicle has reasonable amount of fuel, engine oil, auto transmission oil, radiator water at all times. The Owner reserves all rights to recover all costs of damages resulting from the negligence of the aforementioned.
- e. The Owner shall provide 24-hour breakdown & emergency services at no extra cost to The Hirer if the vehicle suffers a breakdown or involves in an accident arising by means other than The Hirer's fault.
- f. The 24-hour breakdown & emergency services are applicable within Singapore only. All cost associated with any breakdown and emergency services arising from the use of the vehicle outside Singapore will be borne by The Hirer. The Hirer hereby also agrees that the following does not constitute a breakdown: -
- Key Locked
 - Changing of punctured tires
 - Stalling caused by empty fuel tank
- **The Hirer accepts a charge of SGD70.00 per occurrence if the 24-hour breakdown & emergency service is being called up for such instances.
- g. The cost of any request for replacement of faulty or lost car keys due to The Hirer's negligence will be borne by The Hirer.

The Owner's Signature	Date	The Hirer's Signature
 		

4. REPLACEMENT VEHICLE

- a. A replacement vehicle (if available), not necessary be of the same make and model, may be provided by The Owner's discretion in the event that the vehicle breaks down or is involved in an accident not arising from The Hirer's fault
- b. The Hirer shall be responsible for the fuel and still adhere to clause 5 for the replacement vehicle
- c. Insurance excess will also apply to the replacement vehicle
- d. If the replacement vehicle is not available pursuant to clause 6(a), Rental will be pro-rated by The Owner on a case-by-case basis.

5. USE OF VEHICLE

- a. The Hirer may use the vehicle for business solely, unless otherwise advised/assigned by The Owner. **The Hirer agrees not to use or permit for the vehicle to be used, for any illegal activities and purposes which are not specifically expressed, such as driving tuition, racing, pace-making, competing in any form of motor sport, drug-trafficking, smuggling of contraband cigarettes etc.**
- b. The Hirer shall be responsible for the petrol, electronic road pricing (ERP) charges parking charges and traffic /parking related fines provided by the other fees arising from the use of the vehicle or replacement vehicle provided by The Owner throughout the period of the agreement.
- c. The Hirer accepts that the use of the vehicle in Malaysia is subjected to the Legislations of the Malaysian Government.
- d. No additional driver(s) other than The Hirer is allowed to drive the vehicle, nor can the vehicle be sub-let to others without prior approval from The Owner; otherwise The Hirer shall be deemed to have breached the agreement resulting in the forfeiture of the deposit and shall still be liable for all other obligation to The Owner under the agreement.

6. HIRER'S COVENANTS

- a. The Hirer or any named driver must be between the age of 23 to 60 years old and possess a valid Singapore or international driving license with at least 2 years driving experience by law.
- b. The Hirer agrees not to:-
 - i. Make or permit to be made any repairs or adjustments to The Vehicle and must promptly notify The Owner of any damages;
 - ii. Remove or deface any identification marks or plates affixed to the vehicle;
 - iii. Fit any accessories to or to modify the vehicle in any way without the consent of The Owner; and
 - iv. Use or permit the vehicle to be used or operated in a manner that infringes the Singapore Law, **including touting or soliciting for customers publicly.**
- c. The Hirer agrees to indemnify The Owner against all claims arising from the use of The Vehicle.


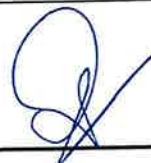
7. INSURANCE

- a. The Owner shall insure The Vehicle against:-
 - > All 3rd Party Ricks and Liabilities
 - > Loss or theft to The Vehicle; and
 - > Damage to The Vehicle, subject to the appended Non-Waiver Able Insurance Excess

OWN DAMAGE INSURANCE EXCESS & FEES PER ACCIDENT	
COUNTRY	AMOUNT
SINGAPORE	SGD 2500.00
WEST MALAYSIA	SGD 3000.00
THIRD PARTIES INSURANCE EXCESS & FEES PER ACCIDENT	
COUNTRY	AMOUNT
SINGAPORE	SGD 2500.00
WEST MALAYSIA	SGD 3000.00

b. Non-Waiver Excess & fees

- i. The Hirer will be responsible for the full amount of the insurance excess & fees upon reporting the accident.
- ii. The insurance excess will only be refunded to The Hirer upon confirmation from the insurer on the percentage of liability on The Hirer
- iii. A further insurance excess of **SGD3,000.00** will apply **if the driver responsible for the accident is under 27 years old and / or has less than 1 year of driving experience and /or is not The Hirer (if additional driver by The Owner)**

The Owner's Signature	Date	The Hirer's Signature
		




- c. In the event of an accident, The Hirer shall:
- Obtain vehicle registration numbers, name & address of the parties involved and of the witness (es);
 - Not admit fault or liability;
 - Not abandoning The Vehicle with adequate provision for safe guarding and securing the same;
 - Notify The Owner immediately; and
 - Make a police report if any party suffers injury.
 - A replacement vehicle can be arranged if the damage of the vehicle during the accident is claiming against 3rd parties. Otherwise, there will be NO replacement vehicle for claiming against own damages and The Hirer must continue to fulfil its obligations for the rental fee
 - The Owner reserves the rights to adjust the monthly rental fee accordingly for approval of additional driver (s)**

8. INSURANCE(CON'D)

- Any accident may result in an increase in the insurance premium for subsequent insurance renewals. The Owner reserves the right to adjust the monthly rental fee accordingly.
- The Hirer will be fully liable for all damages for any unreported accident.

9. TERMINATION

- The Owner reserves the right to terminate The Agreement if The Hirer: -
 - Fails to pay the rental fee or if other payment(s) remain unpaid for more than seven (7) days after due date;
 - commits a breach to any parts of this agreement;
 - does or allows any act or things to be done, which in the opinion of The Owner, that may jeopardize The Owner's vehicle.
- The transportation platform (such as GRAB, GoJek etc.) withdraws from the Republic of Singapore
- Does not accept the new amendment(s) / addendum(s) made by The Owner to the Agreement with prior notice.
- Upon the termination of the Agreement, The Hirer agrees to pay to The Owner: -
 - All arrears of the Rental and all other sums accrued and unpaid at the date of termination;
 - Cost of all repairs required at the date of termination;
 - Penalty computed as total rental fee for the remaining un-expired rental period;
 - All legal costs incurred if any course of legal actions is required to recover any amounts due by The Hirer to **LEVIN RENTAL PTE. LTD.** under the Agreement.

The Owner's Signature	Date	The Hirer's Signature
 		

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GBF9720R

Date of Accident

06/03/2023



Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **Lonpac Insurance Bhd**

Period of Insurance **25/04/2022 - 24/04/2023**

Requested By **SV AUTOWORKS (SV Autowork...**

Requested Date **07/03/2023 15:33**

Payment details

Request Amount: **S\$1.85**

GST Amount: **S\$0.15**

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

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**



**GENERAL
INSURANCE
ASSOCIATION**

RECORD MANAGEMENT CENTRE

**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: Karr

Dear Sir/Madam,

Date of Accident: 06/03/2023 00:00 (SGT)

Vehicle No: SLE8875X

Place of Accident: Tampines Ave 12, Pasir Ris Flyover, Singapore

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

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
GBF9720R	Tampines Ave 12, Pasir Ris Flyover, 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.