

3020970524

WITHOUT PREJUDICE**CERTIFICATE OF POSTING****COMFORT TRANSPORTATION PTE LTD**

383 SIN MING DRIVE
GAS BUILDING
SINGAPORE 575717
OWNER OF SH 8154U



JK LAW CHAMBERS

(UEN No.: 53394571B)



58 Pagoda Street
#02-01
Singapore 059217

60226121

Tel: +65 6980 0135 / 0138
E-mail: general@jklc.com.sg

CERTIFICATE OF POSTING**TAN THAI HWA**

17A TELOK BLANGAH CRESCENT
#28-266
SINGAPORE 091017
DRIVER OF SH 8154U

BY HAND & ELECTRONIC MAIL

(mt.doc@mail.life.hsbc.com.sg)



SPS258726

HSBC LIFE (SINGAPORE) PTE LTD

20 PASIR PANJANG ROAD
#11

MAPLETREE BUSINESS CITY, EAST LOBBY
SINGAPORE 117439

ATTN: MOTOR CLAIMS DEPARTMENT**YOUR REF: SH 8154U**

Writer / Secretary Contact

Email: jeekin@jklc.com.sg /
yujun@jklc.com.sg /
prestina@jklc.com.sg

Date:
7 June 2023

Our Ref:
JK.hg.23.1077.EA.PD

JUN 9 '23 15:41

Dear Sirs,

WEST WAY CAR RENTAL PTE LTD, UEN NO. 2XXXXX941M

**PROPERTY DAMAGE CLAIM DUE TO A ROAD TRAFFIC ACCIDENT ON 9 MAY 2023 INVOLVING
SMN 7662R AND SH 8154U ALONG UBI ROAD 1, IN FRONT OF COMFORT DELGRO
ENGINEERING**

We act for WEST WAY CAR RENTAL PTE LTD, UEN NO. 2XXXXX941M, who is the owner of motor vehicle no. SMN 7662R.

We are instructed by the above named to claim damages against you/your insured in connection with a road traffic accident on 9 May 2023 along Ubi Road 1, in front of Comfort Delgro Engineering involving our client's motor vehicle registration no. SMN 7662R and motor vehicle registration no. SH 8154U driven by you/your insured at the material time.

We are instructed that the accident was caused by you/your insured's negligence in the driving and/or management of your/your insured 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:-

- | | |
|---|------------|
| 1) Cost of repairs | \$5,800.00 |
| 2) Loss of use (8 days @ \$120/day) | \$ 960.00 |
| 3) Loss of use (2 days @ \$120/day) - PRS | \$ 240.00 |

Page 1 of 2

CONFIDENTIALITY CAUTION

This message is intended only for the use of the individual or entity to whom it is addressed and contains information that is privileged and confidential. If you, the reader of this message, are not the intended recipient, you should not disseminate, distribute or copy this communication. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address at our expenses. Thank you.

4) Survey report fee	\$ 500.00
5) LTA search fee	\$ 26.75
6) GIA report fee	\$ 31.00
7) Costs	\$1,000.00
8) Facsimile, photocopying, printing, postage, transport, telephone charges and other incidental disbursements	\$ 150.00
	<u>\$8,707.75</u>

Copies of the following supporting documents are enclosed for your consideration:-

- a) Our client's GIA report;
- b) Invoice being GIA report fee of SH 8154U;
- c) LTA search on vehicle no. SH 8154U;
- d) Invoice being LTA search fee on SH 8154U;
- e) Repair bill;
- f) Survey invoice;
- g) Survey report;
- h) Fifty five (55) copies of scanned coloured photographs showing damage to our client's vehicle; and
- i) Our client's accident video footage.

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.

Please note that you or your insurer should send to us an acknowledgment of receipt of this letter within 14 days of your receipt of this letter.

Should you fail to acknowledge receipt of this letter within 14 days, our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.

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 8 weeks of your receipt of this letter.

Yours Sincerely

JK Law

JK LAW CHAMBERS

Enc. to HSBC Life (Singapore) Pte Ltd

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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	10/05/2023 16:27 (SGT)
Reported by	Actual Driver
Date of Accident	09/05/2023 15:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UBI ROAD 1 , INFRONT OF COMFORTDELGRO ENGINEERING
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN7662R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	WEST WAY CAR RENTAL PTE LTD
Company Reg No	2XXXXX941M
Email Address	dreamcarrentalsg@gmail.com
Mobile Phone No	(Phone) +65-81288789
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
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 your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SD23V04302/VPZ/R03

DRIVER

Name of Driver	LEE SOO LYE
NRIC No	SXXXX806J
Date Of Birth	23/03/1953
Occupation	Outdoor

Date Of Driving Pass	25/10/1977
Driving experience	45 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96267278
Alt. Phone Number	-
Email Address	dreamcarrentalsg@gmail.com
Address	2 SIANG KUANG AVENUE
Address complement	-
Postcode	347920
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	RAYMOND TAN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

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	SH8154U
Vehicle Manufacturer	Hyundai
Vehicle Model	I40
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN TAI HWA
NRIC No	SXXXX329E
Contact Number	-
Address	APT BLK 17A TELOK BLANGAH CRESCENT
Address complement	# 28-266
Postcode	091017
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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**.
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5. **Any False reporting may be referred to the Police for investigation.**
6. The Report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

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

I understand, acknowledge, agree and consent that:

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



Policyholder's Signature / Date & Time

R

10/05/23
1202

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

10/05/23
1202

Witnessed by Reporting Centre Personnel

10/05/23

Sketch Plan area with grid and handwritten notes:

Comfort Delgro Engineering

Vehicle A: SMN 7662R

Vehicle B: SH 8154U

UBI ROAD

Diagram showing vehicle positions and directions on a grid. Vehicle A is in a box labeled 'A'. Arrows indicate directions: up, down, left, right.

Image As per Original
--CSU--

Describe Circumstances of the Accident

On 9th May 2023 3:45pm I was travelling along UBI Road 1 when suddenly a blue taxi vehicle B (SH 8154U) came out of the building exit and hit onto car vehicle A (SMN 7662R) which I drove. I had a passenger with me at the time of accident.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time
10/05/23
1202

Driver's Signature (If driver is not the policyholder) / Date & Time
10/05/23
1202

Witnessed by Reporting Centre Personnel
10/05/2023

















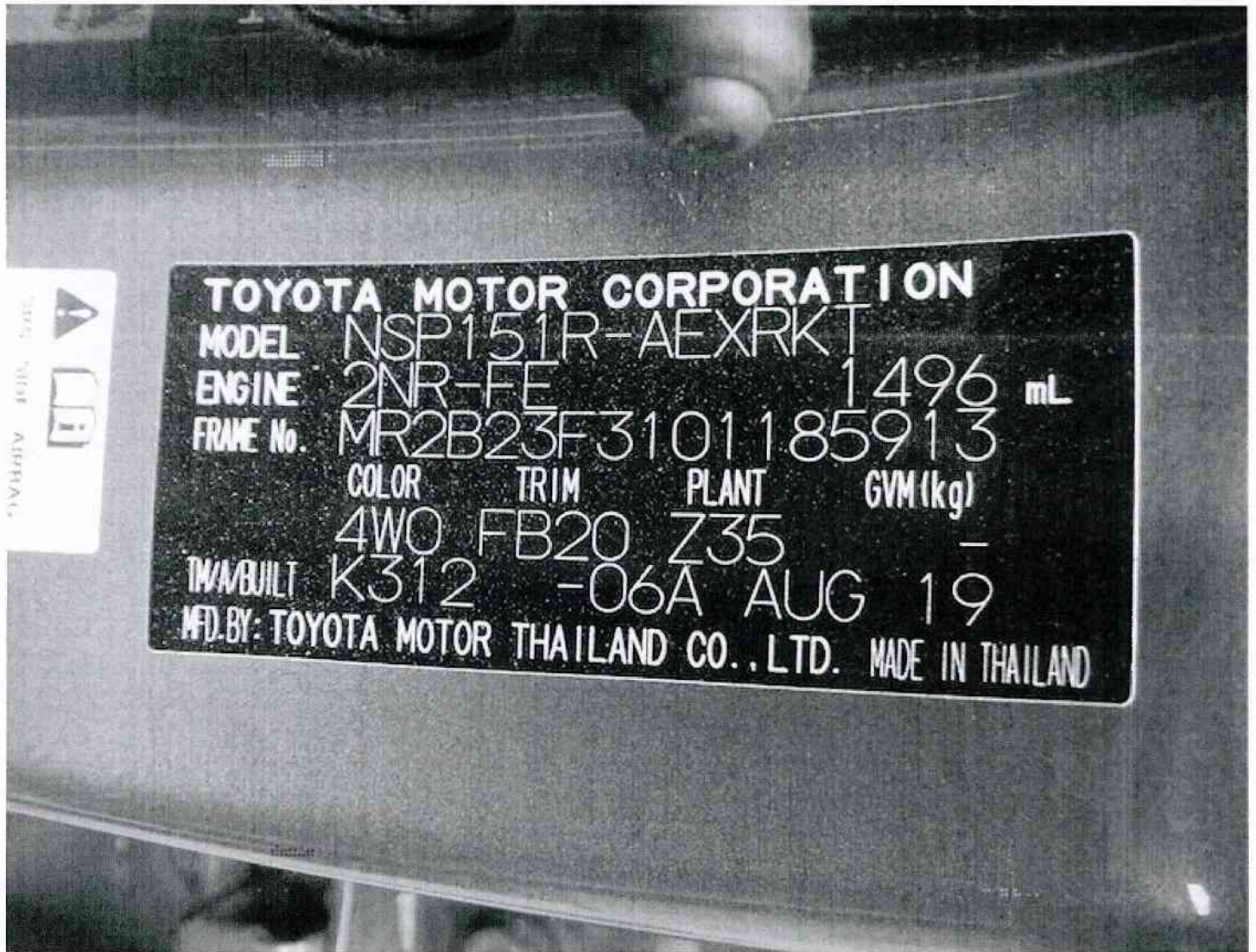






Image As per Original
--CSU--

Dream Car Leasing Pte. Ltd. (Co.Reg. 201420013Z)
 155 Kaki Bukit Shun Li Industrial Park S416012 | Tel: +65 6748 9747 Fax: +65 6748 3762
 Email : dreamcarrentalsg@gmail.com | Web : www.dreamcarrental.com.sg

AGREEMENT FORM

Name:	LEE SOO LYE	Nric:	S0077806J
Mobile:	9626 7278	Email:	Soolye@gmail.com
Address:	2 SIANG KUANG AVENUE	S/	347920

Hereby declare that I will take over this stated vehicle for the stated period and shall abide to the terms and conditions as listed behind.

Vehicle No.:	Model:	Color:	From	Time	Till	Time
JNN7662R	TOYOTA VIOS	SILVER	20/3/21	1700 Hrs	/ /	Hrs

1. The above vehicle is insured for use on Singapore roads only. As such using of this vehicle outside Singapore territory is strictly prohibited. Whilst the vehicle is in your possession and is driven in or outside of Singapore if applicable, you will be held fully responsible for any, but not limited to, vehicular accident, damages, loss, fire or theft caused to this vehicle.

2. The use of this vehicle during the period from the date of taking over until the termination date of this agreement will be under the full responsibility of the driver.

3. **ONLY** the driver above named / authorized may use the vehicle. In any circumstances another driver apart from the named / authorized driver found using the vehicle, the owner will have the right to repossess the vehicle stated above and arise while the driver will be held fully responsible for any, but not limited to, vehicular accident, damages, loss, fire or theft caused to this vehicle.

4. Should the vehicle be involved in any traffic offence during the period, you agreed to be liable for any issues with the vehicle that arise under your care and agree to pay all fines and any amount government or semi-government authorities shall levy or impose.

5. Upon claiming the vehicle's insurance which the driver stated above shall be liable to pay an excess of S\$10,000/- NETT to the owner.

6. At any point of time if the vehicle breakdown due to driver's negligence, flat battery, tire puncture, empty petrol tank, loss of keys, keys locked in car or any other breakdown not due to vehicle maintenance or wear and tear, a nominal fee of S\$50/- (from weekdays 12PM to 8PM) and S\$100/- (from 8PM to 12PM, Saturday and Sunday, PH 24Hours)

7. The maintenance of the vehicle will be borne by the owner. Driver must keep note of the vehicle engine temperature, any overheating due to driver's negligence, repair and any misc cost shall be borne by the driver. If there is any problem due to wear and tear or vehicle breakdown, the driver is to report to the owner immediately and seek for advice/permission before proceeding to fix the issue.

8. If the vehicle stated met with an accident, the driver is to inform the owner immediately. NO repairs are to be done without the owner's approval. If the driver is caught repairing the vehicle at any workshop unauthorized by the owner, the owner reserve the rights to repossess the vehicle with a S\$3000/- compensation.

9. Any damage which includes physical damage or any other general damages to the vehicle, payment of repair cost has to be made immediately unless any other alternative arrangements is made.

10. DREAM CAR LEASING PTE. LTD. will not be responsible for loss of or damage to personal belongings and the contents therein (including any valuables, even if we have been advised) during storage or during the disposal process caused and you hereby release DREAM CAR LEASING PTE. LTD. from any liability in respect thereof.

11. The driver needs to return vehicle's fuel at the same level when he or she collects at the level of ____% otherwise, a payment of S\$20.00/- NETT will be charge to the driver for every 10% of fuel used.

12. Vehicle is handed over clean and it should be returned clean. If vehicle is returned dirty, a nominal charged of S\$10.00/- shall be collected.

13. No Smoking, Durians and Transportation of Pets are allowed. Hirer is responsible for a penalty of S\$500/-.

14. No Speeding, Reckless Driving, Racing or ANY illegal activities shall be carried out during the use of this vehicle. The owner reserves the rights to repossess the vehicle with an additional S\$1500/- compensation and any other cost incurred. (If any)

15. Should there be any breaches to any of the above clauses; the owner reserves the right to repossess the vehicle without any refund with a compensation of S\$2000/- imposed.

Agreed and Acknowledge the above stated by:

Name: LEE SOO LYE



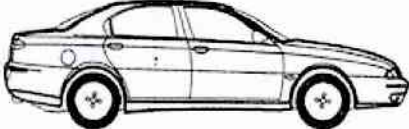

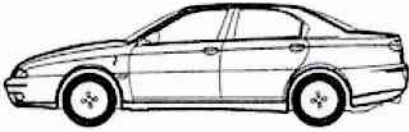
Signature:

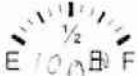



Nric: S0077806J

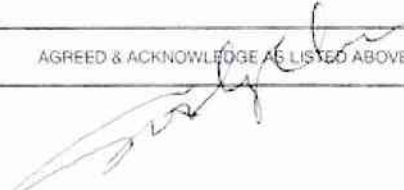
I have read and fully understood the content of this agreement. I will not dispute to the claims made against me for any incident occurring during the stated period and thus this agreement.

Image As per Original
--CSU--

EXISTING DEFECTS & FAULT / TIME & DATE OF HANDING OVER OF VEHICLE

TOP 	REAR 	RIGHT SIDE 
	FRONT 	LEFT SIDE 

COLLECTION OF VEHICLE				RETURN OF VEHICLE			
IN DATE 19/3/21	TIME 18:53	MILEAGE OUT in KM	FUEL LEVEL 	IN DATE 11	TIME 11:00	MILEAGE IN in KM	FUEL LEVEL 
CHECK OUT BY: 				CHECK OUT BY: 			

GPS	Model	P-PLATE	CLEAN CAR: Y N	REFUNDABLE DEPOSIT: \$	OTHERS:
Remarks: Rtn. 1700					
VEHICLE HANDED OVER CLEAN, SHALL BE RETURNED CLEAN OR A PENALTY OF SGD10 WILL BE IMPOSED.			AGREED & ACKNOWLEDGE AS LISTED ABOVE STATED:		
VEHICLE ARE STRICTLY FOR LOCAL (SINGAPORE) USE ONLY.			 <div style="border: 1px solid black; border-radius: 50%; padding: 5px; text-align: center;"> Sign ← Here </div>		
ONLY NAMED DRIVER ARE ALLOWED TO USE THE VEHICLE AT ALL TIMES.					

I have read and fully understand the content of this agreement. I will not dispute to the claims made against me for any incident occurring during the stated period and thus this agreement.

RETURNING OF VEHICLE

Upon Returning Remarks:

SIGNED UPON RETURNING OF VEHICLE: _____ DATE: _____



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: 11/05/2023

Your Ref No: JK.23.SMN7662R.EA.PD

Dear Sir/Madam,

Date of Accident: 09/05/2023 15:55 (SGT)

Vehicle No: SMN7662R

Place of Accident: 320 Ubi Rd 3, Singapore 408649

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\$)
SH8154U	320 Ubi Rd 3, Singapore 408649	(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.

Enquire Vehicle Owner Details

Enquire Vehicle Owner Details (As At 09 May 2023 / 15:45:00)

Vehicle Owner Details



Owner ID Type:

Company

Owner ID:

199303821R

Owner Name:

COMFORT TRANSPORTATION PTE LTD

Registered Address Type:

Free Format

Registered Block/House No.:

383

Registered Street Name:

SIN MING DRIVE

Registered Unit No.:

-

Registered Building Name:

GAS BUILDING

Registered Postal Code:

575717

Vehicle Insurance Details



Vehicle No.:

SH8154U

Make Description/Model:

HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR

Insurance Company Name:

HSBC LIFE (SINGAPORE) PTE. LTD.

Save as PDF

OK →

Print



Thank you

You have successfully logged out.

Your last login date and time was 11 May 2023, 11:17:31.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

S/No. 	Asset Type 	Asset ID 	Transaction Type 	Transaction Amount(\$\$) 	Log Date/Time 
1	Vehicle	SH8154U	18.19 Enquire Veh Owner Info (Others) by Law Firm	26.75	11 May 2023 / 11:18:50

ECLIPSE AUTO PTE LTD

155 KAKI BUKIT AVENUE 1, SHUN LI INDUSTRIAL PARK LEVEL 1 & 2, SINGAPORE 416012

TEL : (65) 6844 2814 FAX : (65) 6748 3762

Co. Reg. No.: 201221209k

Vehicle No: SMN 7662R

Made / Model: TOYOTA VIOS 1.5 E(AUTO)

Name: WEST WAY CAR RENTAL PTE LTD

Address: 155 KAKI BUKIT AVENUE 1

#C1-00, SHUN LI INDUSTRIAL PARK

Singapore 416012

Accident Date: 9 MAY 2023

RE: FINAL BILL FOR VEHICLE NO. SMN 7662R

(LUMP SUM REPAIR)

\$ 5,800.00

Singapore Dollars: Five Thousand Eight Hundred Only.



INVOICE

TO : WEST WAY CAR RENTAL PTE LTD
C/O: ECLIPSE AUTO PTE LTD
155 KAKI BUKIT AVE 1 #01-00,
SHUNLI INDUSTRIAL PARK
SINGAPORE 416012

Invoice No.: 0423/EA620
Date: 29-May-2023

PARTICULARS

Vehicle Registration No.: SMN 7662 R
Date of Loss: 09-May-2023
Date of Assessment: 16-May-2023

SERVICES

FEES

1. Assessment with report Photographs -
Including developing, storage and Transport.

\$500.00

TOTAL \$500.00

SINGAPORE DOLLARS FIVE HUNDRED ONLY

We would appreciate your cheque crossed and made payable to:
"AEON AUTO CONSULTANTS LLP" with our invoice no. written on the back of the cheque.

AEON AUTO CONSULTANTS LLP



AEON AUTO CONSULTANTS LLP

50 Chin Swee Road #09-04 Thong Chai Building Singapore 169874
Tel: +65 97687958 Fax +65 68264112 Email amas@aeonac.com.sg/amasopm@gmail.com
Reg. No. T07LL1273E (registered with limited liability)

AUTOMOBILE ASSESSMENT REPORT

TO: WEST WAY CAR RENTAL PTE LTD
C/O: ECLIPSE AUTO PTE LTD
155 KAKI BUKIT AVE 1 #01-00,
SHUNLI INDUSTRIAL PARK
SINGAPORE 416012

Our Reference: 0423/EA620
Date: 29-May-2023

ASSESSMENT OF VEHICLE NO. SMN 7662 R

DATE OF LOSS: 09-May-2023

We have carried out a physical assessment at ECLIPSE AUTO PTE LTD,
155 Kaki Bukit Ave 1 #01-00 Shunli Industrial Park, Singapore 416012, according to your instruction
on 16-May-2023 and are pleased to submit our report herewith.

1. VEHICLE PARTICULARS

Registration No.:	SMN 7662 R
Make & Model:	TOYOTA VIOS 1.5 E(AUTO)
Year of Registration:	2019
Engine Capacity:	1496
Chassis No.:	MR2B23F3101185913
Engine No.:	2NR5386539
Colour:	BROWN
Mileage (km):	117268

2. VEHICLE CONDITION

Body Paint:	GOOD
Steering:	SERVICEABLE
Foot Brake:	SERVICEABLE
Parking Brake:	SERVICEABLE
Modification:	NIL

3. TYRE PARTICULARS & CONDITION

Front

RH Make/Size/Thread:	KAPSEN 185/60 R15 – 70%
LH Make/Size/Thread:	KAPSEN 185/60 R15 – 70%

Rear

RH Make/Size/Thread:	BRIDGESTONE 185/60 R15 – 70%
LH Make/Size/Thread:	BRIDGESTONE 185/60 R15 – 70%

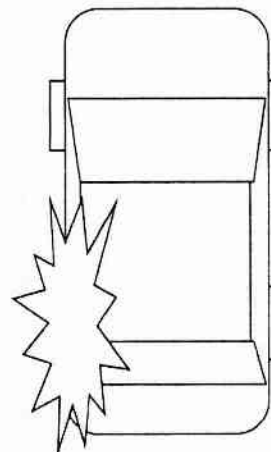
4. DESCRIPTION OF DAMAGE

At the time of the inspection, the vehicle sustained damages to the LHS portion.

5. REMARKS

Market Value: Na
Salvage Value: Na
Repair Limit: Na

Estimated Amount: \$9,036.70
Adjusted Amount: \$7,252.80
Lump Sum: **\$5,800.00**
Estimated Repair Days: 8 days



Pursuant to your instruction, we have **NOT AUTHORISED** repair.

The assessment was conducted on a **"Without Prejudice"** basis.

If we are not notified of anything to the contrary within **14 days** from the date hereof, this report shall be treated as correct.

Disclaimer

This report is intended for the exclusive use of the addressee solely in relation to the loss occurrence in which the assessed vehicle is involved. No liability or responsibility whatsoever shall be held by Aeon Auto Consultants LLP for any reliance on this report by any third party.

ASSESSMENT REPORT FOR VEHICLE NO. SMN 7662 R

PARTS (LIST ITEMS)

Qty	Description	Condition	Workshop's Estimate	Our Assessment
1	REAR LH DOOR	Bent	950.00	950.00
2	REAR LH DOOR HINGES (TOP & LOWER)	Bent	148.00	148.00
1	REAR LH DOOR CHECKER	Bent	96.20	96.20
1	REAR LH DOOR OUTER HANDLE	Repair	69.80	-
1	REAR LH DOOR POWER WINDOW SWITCH	Repair	84.00	-
1	REAR LH DOOR INNER TRIMBOARD	Bent	511.90	511.90
1	REAR LH DOOR POWER WINDOW MOTOR	Faulty	399.00	399.00
1	REAR LH DOOR POWER WINDOW REGULATOR	Bent	209.00	209.00
1	REAR LH DOOR LOCK STRIKER	Bent	40.00	40.00
1	REAR LH DOOR MECHANISM LOCK	Bent	301.70	301.70
1	REAR LH DOOR WEATHER STRIP	Reuse	108.70	-
1	REAR LH FENDER	Bent	806.10	806.10
1	REAR LH FENDER INNER AIR VENT	Repair	100.40	-
1	REAR LH ORIGINAL 'TOYOTA' R15 SPORT RIM	Bent	520.00	520.00
1	REAR LH SHOCK ABSORBER	Bent	216.00	216.00
1	REAR LH COIL SPRING	Repair	101.20	-
1	REAR LH WHEEL HUB BEARING	Jammed	420.00	420.00
1	REAR AXLE LH SIDE BRACKET	Bent	110.00	110.00
1	REAR AXLE	Repair	1,098.00	-
1	REAR BUMPER	Cracked	595.10	595.10
1	REAR BUMPER LH CORNER BRACKET	Bent	66.00	66.00
1	REAR BUMPER LH SIDE RETAINER	Bent	138.20	138.20
1	REAR BUMPER LH REFLECTOR LAMP	Cut	223.20	223.20
1	REAR BUMPER REINFORCEMENT	Repair	203.10	-

	7,515.60	5,750.40
Less 25% discount	1,878.90	1,437.60
Parts Total:	5,636.70	4,312.80

ASSESSMENT REPORT FOR VEHICLE NO. SMN 7662 R

SPECIAL NETT ITEMS

1	REAR LH DOOR INNER TRIM BOARD CLIPS - SET	Necessary	30.00	30.00
1	REAR BUMPER CLIPS - SET	Necessary	50.00	50.00
1	REAR BUMPER REVERSE SENSOR - SET	Faulty	300.00	300.00

Special Nett Total :	380.00	380.00
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LABOUR

S/N	Description	Workshop's Estimate	Our Assessment
1	To remove, reinstall electrical wiring harness, check lighting and rewire for parking sensor.	120.00	100.00
2	To remove, reinstall top trim, trim garnish, trim liner.	100.00	80.00
3	To re-spray painting on the change bodyparts, repair portion, and where consistent to the accident.	1,200.00	1,000.00
4	To provide labour to change the above damaged bodyparts, repair, re-construct and re-align body structures consistent to the accident.	1,500.00	1,300.00
5	To apply anti-rust chemical on repaired and replaced panel.	100.00	80.00
Labour Total :		3,020.00	2,560.00
TOTAL (PARTS & LABOUR) \$		9,036.70	7,252.80

The workshop has agreed to undertake the repair on a Lump Sum basis.

The final adjusted Lump Sum contract amount is

\$5,800.00 (SINGAPORE DOLLARS FIVE THOUSAND EIGHT HUNDRED ONLY)



Amas Ong
Automobile Assessor



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	10/05/2023 16:27 (SGT)
Reported by	Actual Driver
Date of Accident	09/05/2023 15:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UBI ROAD 1 , INFRONT OF COMFORTDELGRO ENGINEERING
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN7662R
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	WEST WAY CAR RENTAL PTE LTD
Company Reg No	2XXXXX941M
Email Address	dreamcarrentalsg@gmail.com
Mobile Phone No	(Phone) +65-81288789
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
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 your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SD23V04302/VPZ/R03

DRIVER

Name of Driver	LEE SOO LYE
NRIC No	SXXXX806J
Date Of Birth	23/03/1953
Occupation	Outdoor



Date Of Driving Pass	25/10/1977
Driving experience	45 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96267278
Alt. Phone Number	-
Email Address	dreamcarrentalsg@gmail.com
Address	2 SIANG KUANG AVENUE
Address complement	-
Postcode	347920
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	RAYMOND TAN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

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	SH8154U
Vehicle Manufacturer	Hyundai
Vehicle Model	I40
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN TAI HWA
NRIC No	SXXXX329E
Contact Number	-
Address	APT BLK 17A TELOK BLANGAH CRESCENT
Address complement	# 28-266
Postcode	091017
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Image As per Original
--CSU--

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The Report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that:
 - (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may / are permitted to collect, use, disclose and / or process my personal data / personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers / law firms, the Monetary Authority of Singapore and any relevant government agency / Authority (such as the police), for the purpose(s) of
 - (i) processing, handling and / or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and / or my claims;
 - (iii) carrying out and / or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes / mail packages); and / or
 - (v) complying with applicable law in administering, processing, handling and / or dealing with my claims. (Collectively the "Purposes")
 - (b) All insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers / law firms, may / are permitted to collect, use, disclose and / or process my Personal Information for one or more of the above Purposes; and
 - (c) My Personal Information may / can be disclosed by any of the Insurers and / or GIA to their third-party service providers or agents (including their lawyers / law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



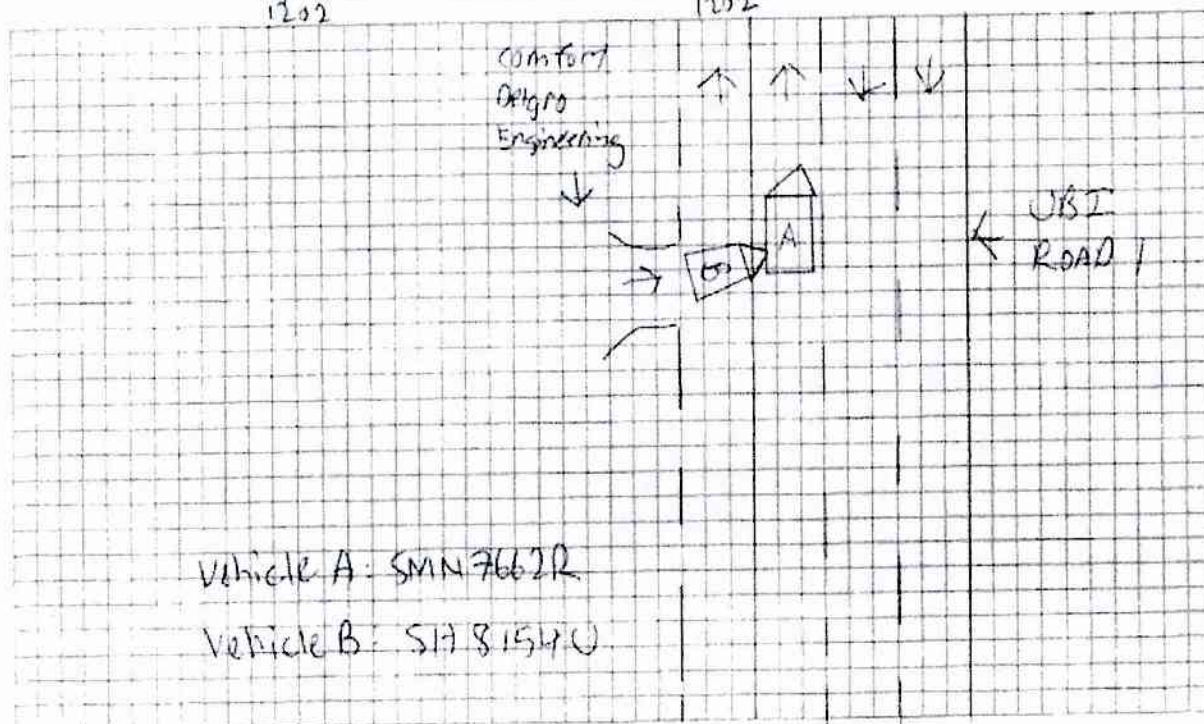
Policyholder's Signature / Date & Time

10/05/23
12:02

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

10/05/23
12:02

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

On 9th May 2023 3:45pm I was travelling along UBI Road 1 when suddenly a blue taxi vehicle B (SH 8154U) came out of the building exit and hit onto car vehicle A (SMN 1662R) which I drove. I had a passenger with me at the time of accident.

Declaration

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

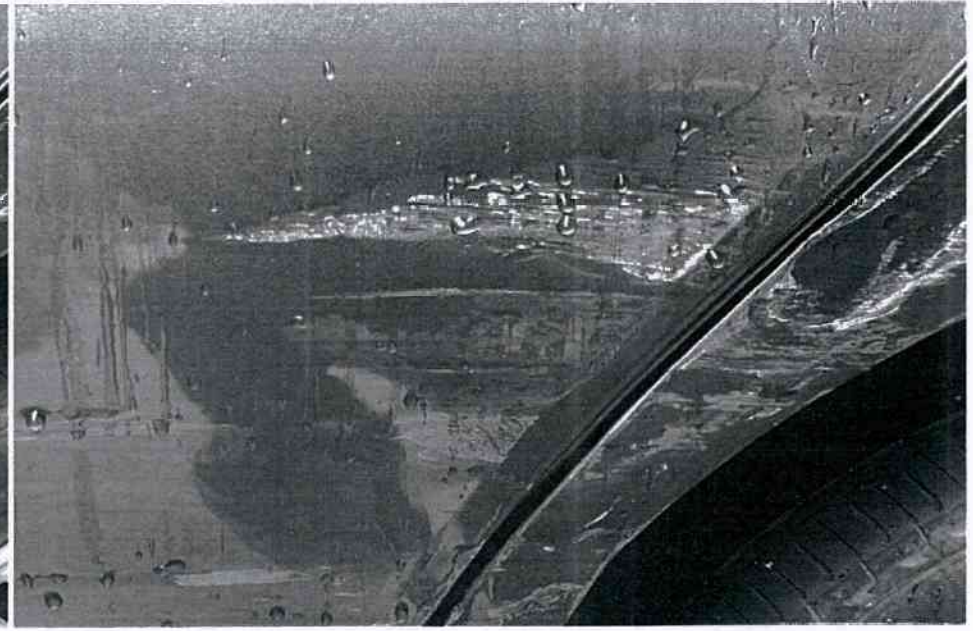


Policyholder's Signature / Date & Time
10/05/23
12:2

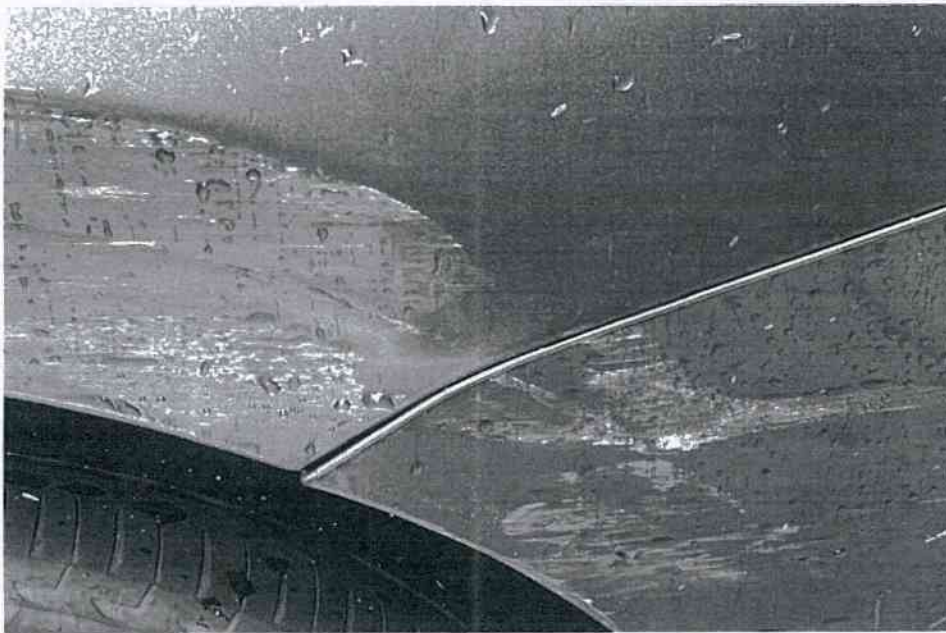
Driver's Signature (if driver is not the policyholder) / Date & Time
10/05/23
12:2

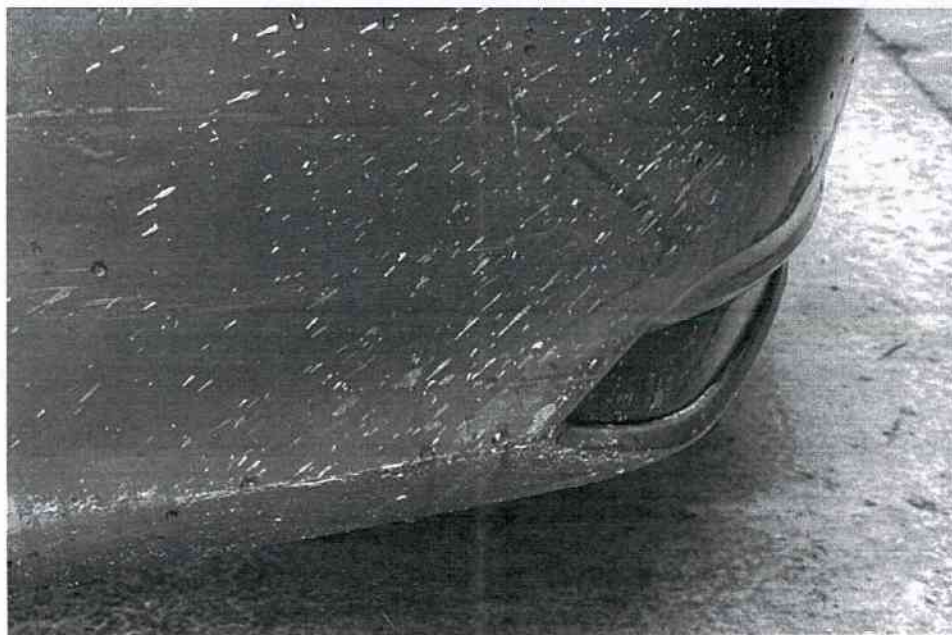
Witnessed by Reporting Centre Personnel
10/05/2023

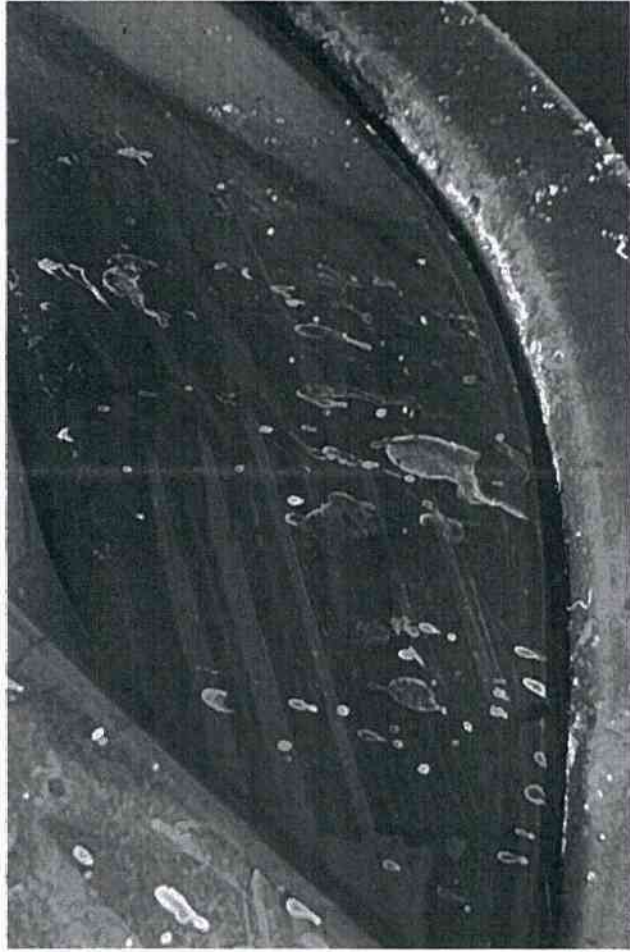


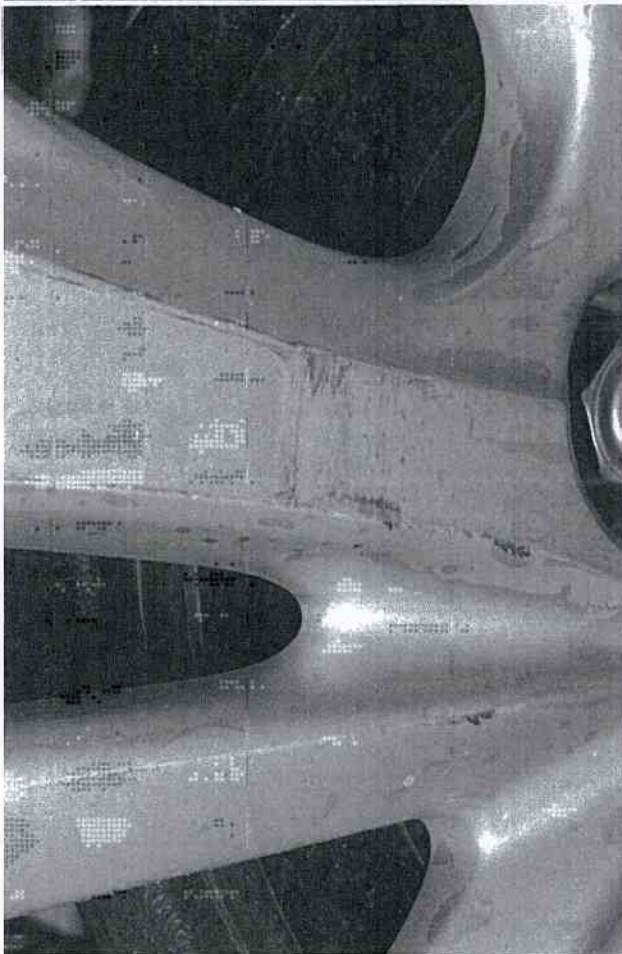
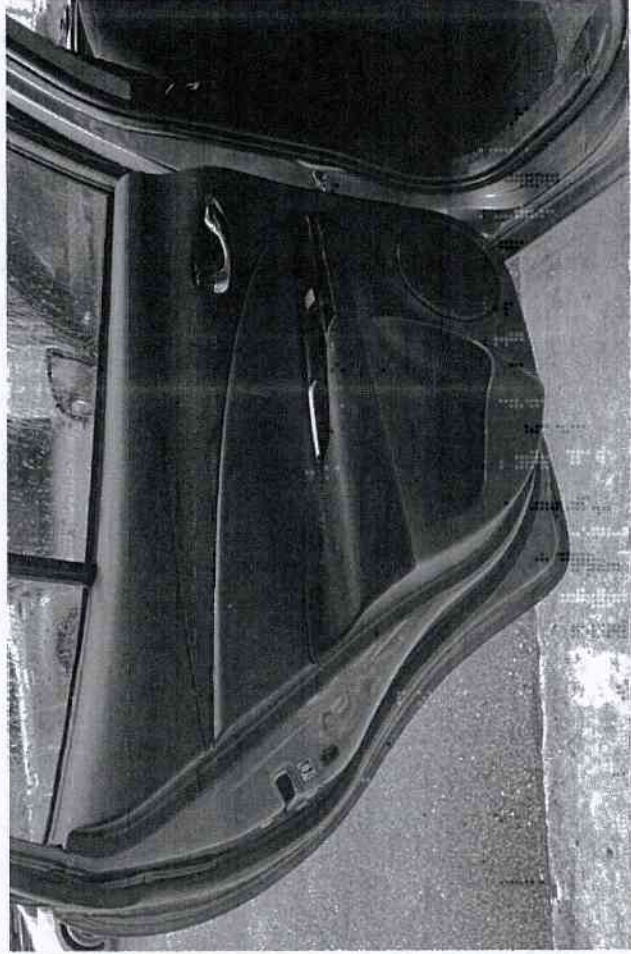


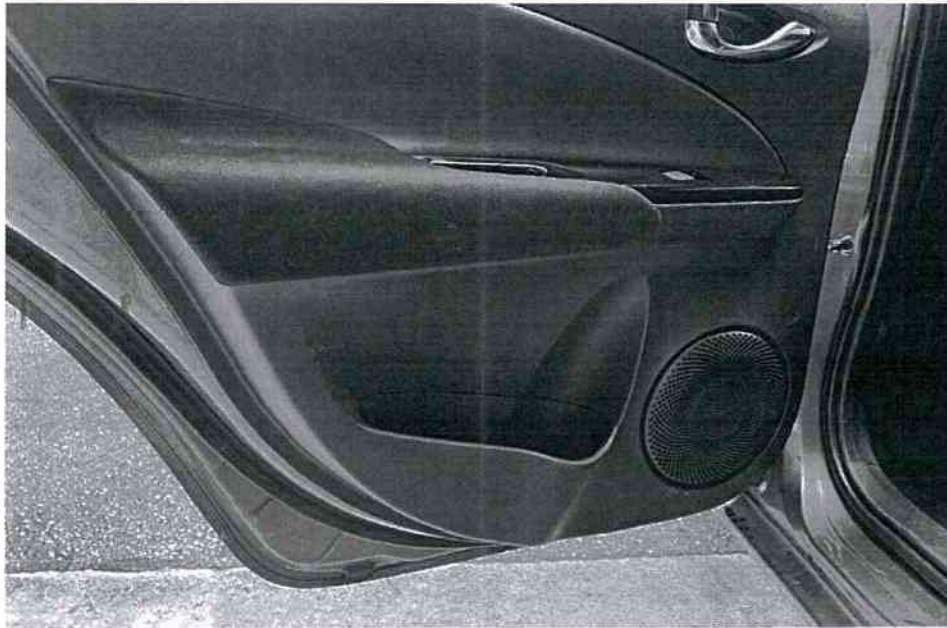


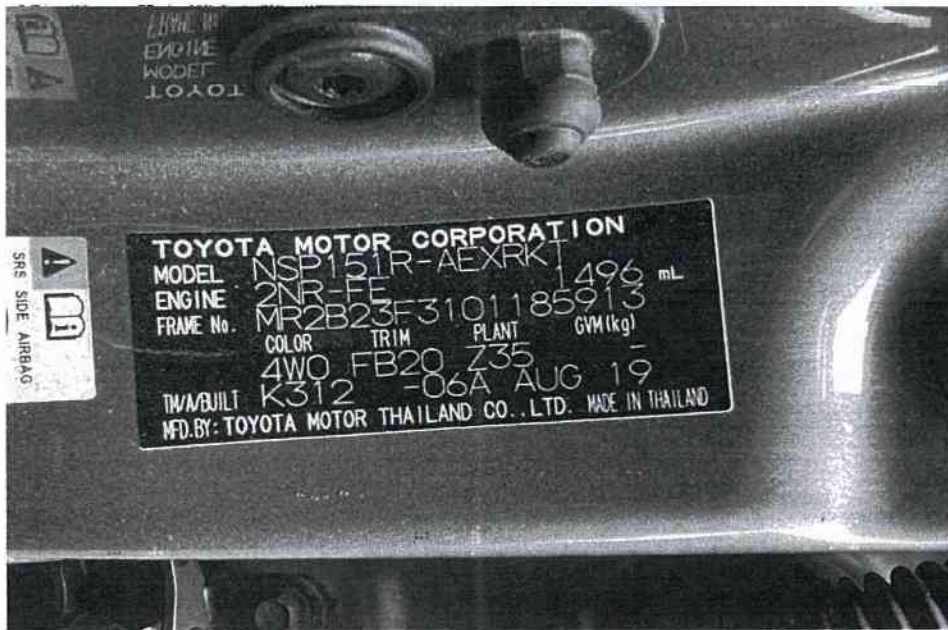


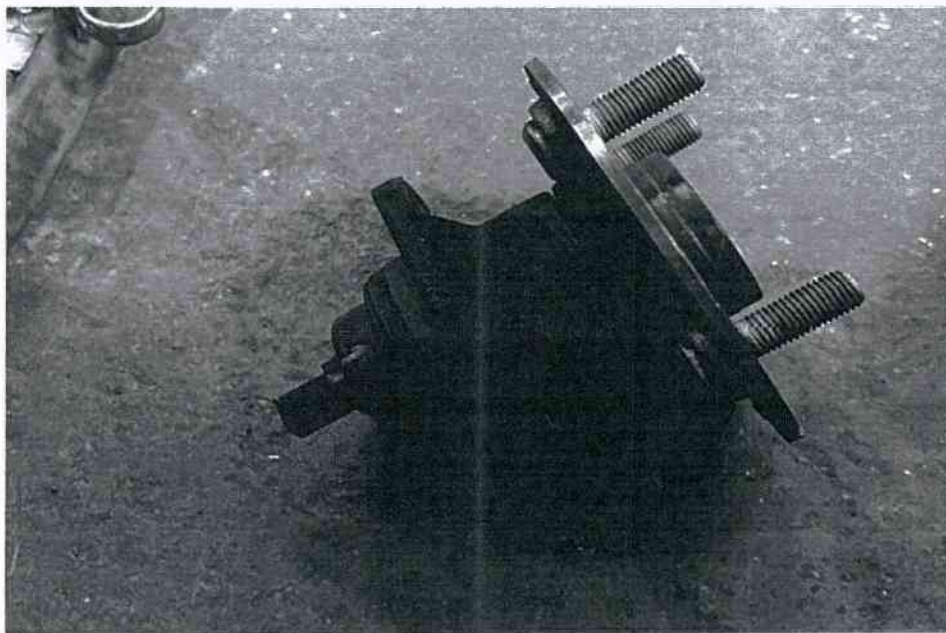


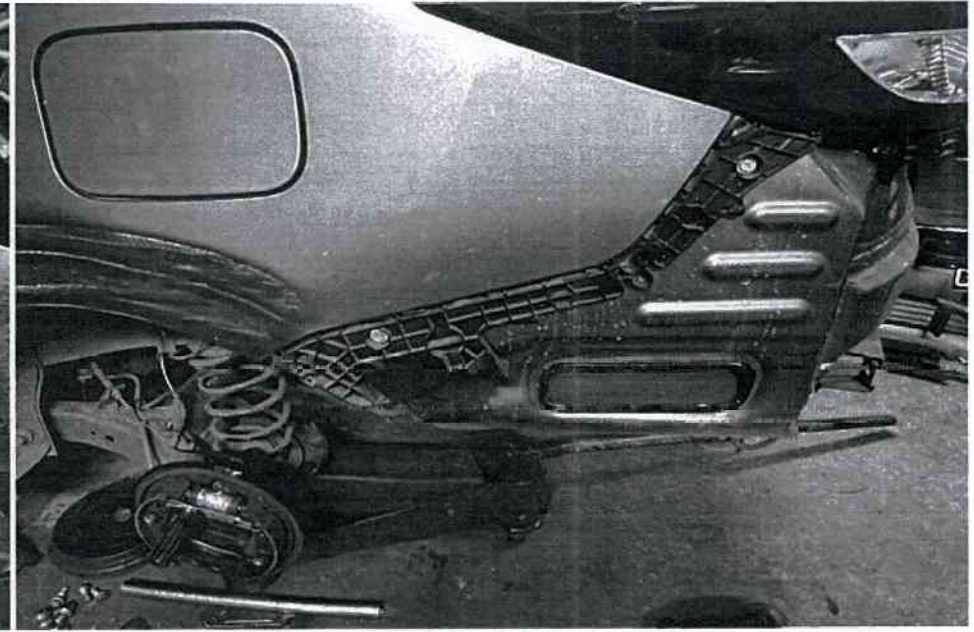
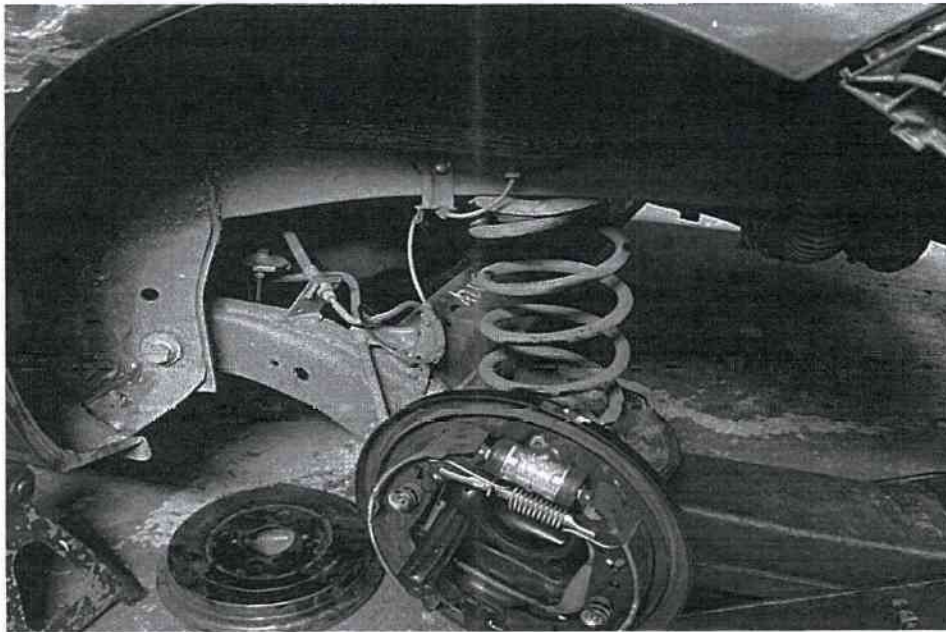
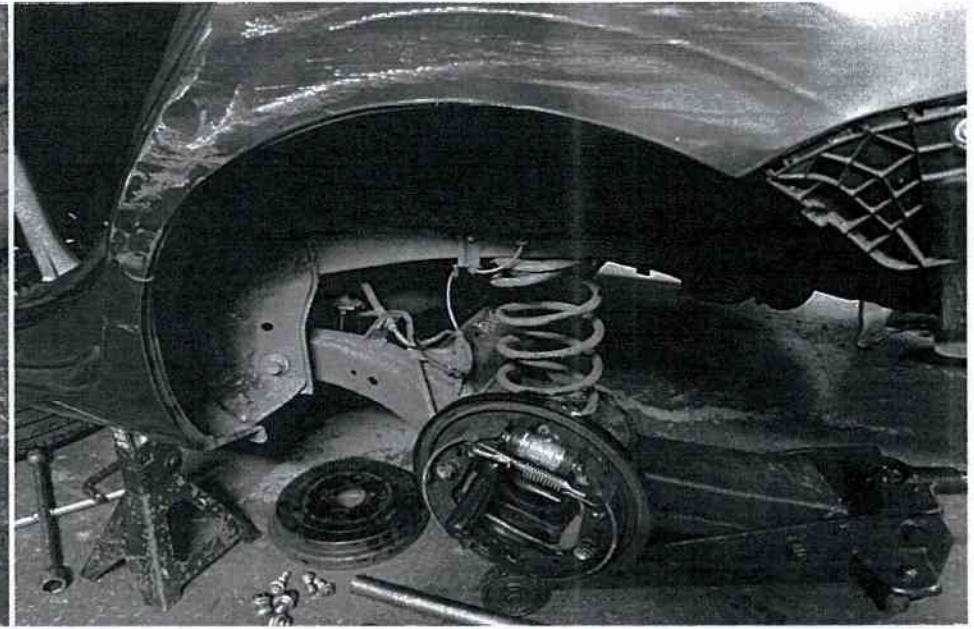


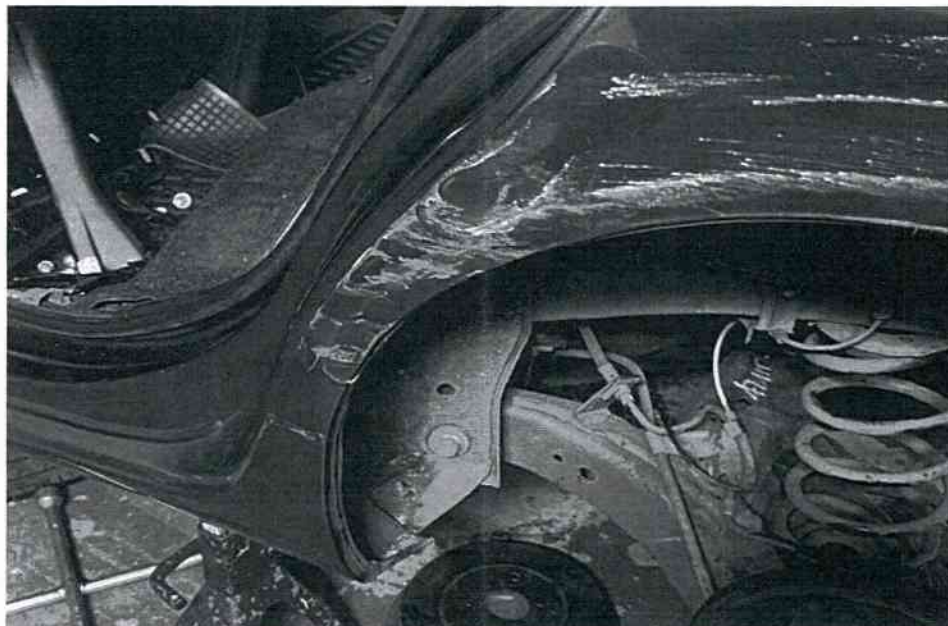


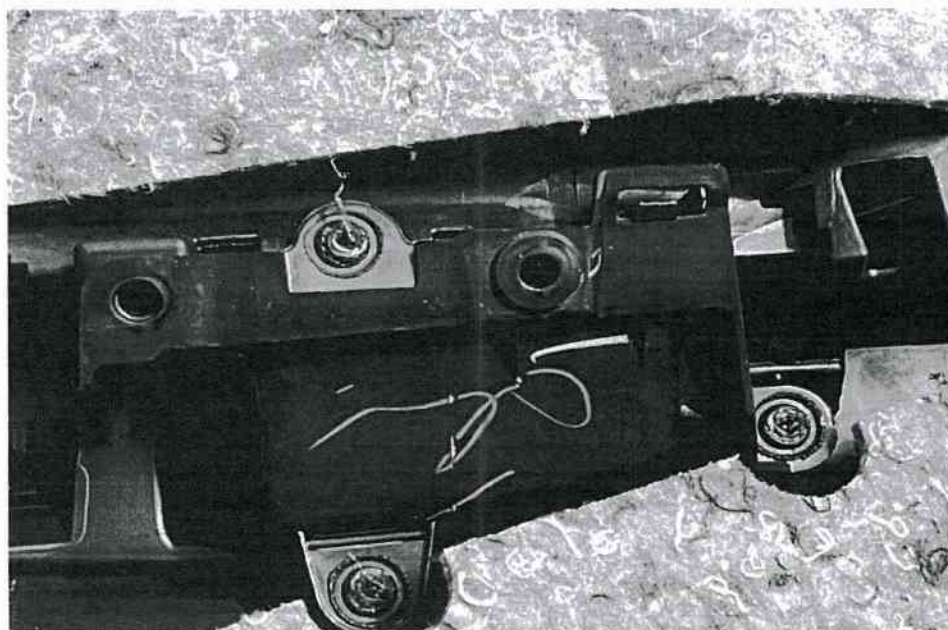
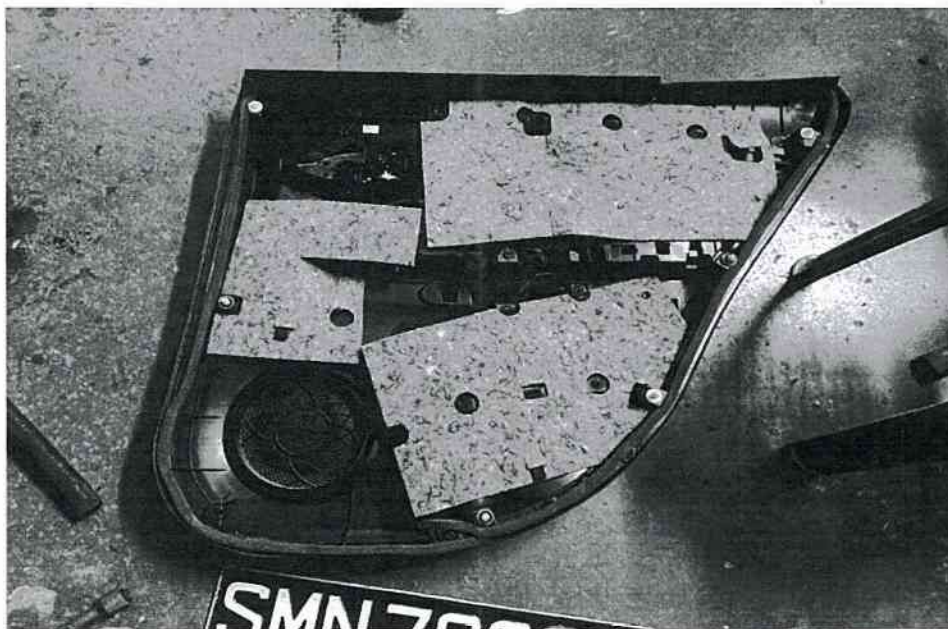


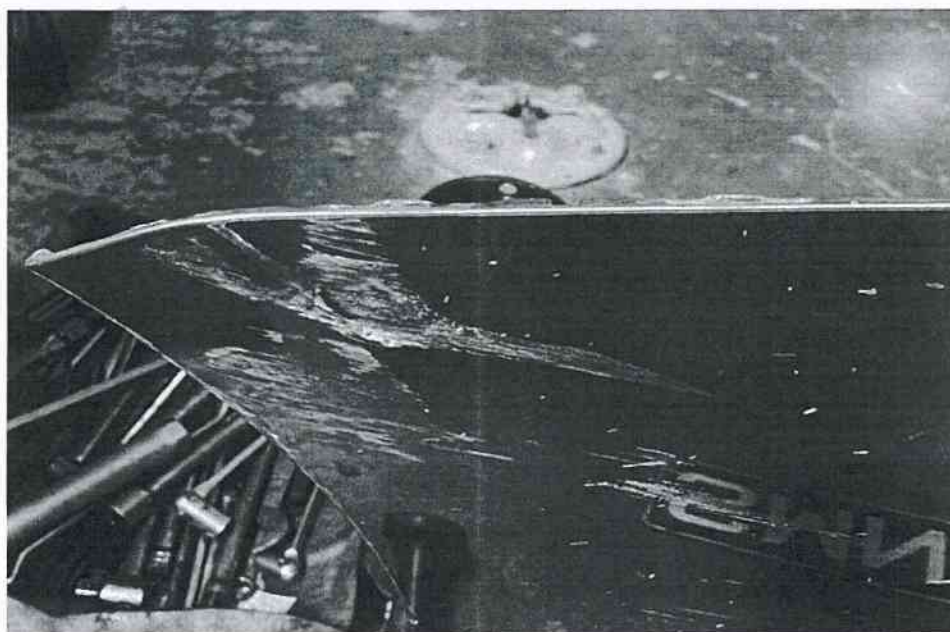














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	FIRM: _____ Tel #: _____ SENDER'S NAME: <u>JK Law Chambers</u> FILE REF: <u>JK. 23.1077.EA. PD</u> DATE: <u>8 June 2023</u> REMARKS: <u>For sending</u> OFFICIAL USE: _____	TO RETURN ACKNOWLEDGEMENT SLIP  RECEIVED BY: _____ CO.STAMP / SIGNATURE / TIME



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