



## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

### TAX INVOICE

EQ INSURANCE COMPANY LTD

5 MAXWELL ROAD  
#17-00 TOWER BLOCK  
MND COMPLEX  
SINGAPORE 069110

INV No. AC2304728

INV Date 21/07/2023

Reference CS/EQI23006344/Kqp3m4

Code EQI

### PROFESSIONAL SERVICE FEE

Vehicle No. SKE 4444U

Insured Veh. GBF 8827Z

Claim No. DM23HO01334/JW

Policy No.

Accident Date 19/06/2023

Inspection Date 27/06/2023

Description	Total
Survey Inspection	160.00
Resurvey Inspection	
Digital Photographs	
Transportation	
<b>Subtotal</b>	<b>160.00</b>
<b>GST (8%)</b>	<b>12.80</b>
<b>Grand Total</b>	<b>172.80</b>

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to **'LKK Auto Consultants Pte Ltd'**

LKK Auto Consultants Pte Ltd

**SML**



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Affiliated to Federation Internationale Des Experts En Automobile			
EQ INSURANCE COMPANY LTD 5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGAPORE 069110		Ref: CS/EQI23006344/Kqp3m4 Date: 21/07/2023 Code: EQI	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	GBF 8827Z	Veh. Inspected	SKE 4444U
Policy No.		Coverage (\$)	0.00
Claim No.	DM23HO01334/JW	Excess (\$)	0.00
Assign From	NEO JIE SI	Assign Date	22/06/2023
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TESLA MODEL Y (A)	c.c	0
Engine No.	HIDDEN	Year of Reg.	2023
Chassis No.	LRWYHCFS9PC891577	Colour	M. P. WHITE
Odometer	852 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	255/45 R19	HANKOOK	9 mm
L/H Front Tyre	255/45 R19	HANKOOK	9 mm
R/H Rear Tyre	255/45 R19	HANKOOK	9 mm
L/H Rear Tyre	255/45 R19	HANKOOK	9 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	19/06/2023	Inspection Date	27/06/2023
Survey held at	OPTIMA WERKZ PTE LTD 10 ANG MO KIO INDUSTRIAL PARK 2A #01-05 AMK AUTOPOINT SINGAPORE 568047		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		5 Working Days	



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKE 4444U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR FENDER RH	BENT	1,551.40	1,551.40
1	REAR FENDER QUARTER GLASS RH	NECESSARY	121.50	121.50
1	REAR FENDER WHEEL ARCH RH	SERVICEABLE	65.42	-
1	REAR BUMPER	CRACKED	836.45	836.45
1	REAR BUMPER SIDE BRACKET RH	CRACKED	5.61	5.61
	LESS 10% DISCOUNT		-258.04	-251.50
			2,322.34	2,263.46
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	REAR FENDER QUARTER GLASS SEALANT RH (SN)	NECESSARY	80.00	40.00
1	REAR FENDER WHEEL ARCH CLIPS RH (SN)	NOT NECESSARY	40.00	-
1	REAR BUMPER CLIPS (SN)	NECESSARY	50.00	50.00
1	CERAMIC COATING FOR AFFECTED AREAS (SN)	NECESSARY	1,000.00	100.00
			1,170.00	190.00
	<b><u>LABOUR</u></b>			
	LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST REAR ACCIDENT AREAS & ETC.		700.00	600.00
	LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT REAR FENDER RH, REAR BUMPER & ETC.		600.00	440.00
	LABOUR CHARGES TO REMOVE & REPLACE REAR FENDER QUARTER GLASS, REAR FENDER QUARTER GLASS SEALANT & ETC.		150.00	60.00
	LABOUR CHARGES TO REMOVE & REFIX REAR FENDER INNER TRIM RH, UPHOLSTERY CUSHION SET & ETC. TO EFFECT REPLACE OF REAR FENDER RH.		400.00	100.00
	TO TUFF KOTE & UNDERSEAL MATERIALS.		150.00	30.00
	TO CHECK WIRING & ELECTRICAL SYSTEM.		120.00	20.00
			2,120.00	1,250.00
	<b>GRAND TOTAL</b>		<b>5,612.34</b>	<b>3,703.46</b>

Report Ref No. CS/EQI23006344/Kqp3m4



RECOMMENDED COST OF REPAIRS			3,703.46
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Report Ref No. CS/EQI23006344/Kqp3m4

A handwritten signature in black ink, appearing to read 'KSC'.

KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

## 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 .....	20/06/2023 18:19 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	19/06/2023 16:36 (SGT)
Exact Location of Accident .....	782E Woodlands Cres, Singapore 735782
Additional Location Information .....	-
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKE4444U
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	JULIYATI BT ABDULLAH
NRIC No .....	SXXXX361D
Email Address .....	juliyatia@gmail.com
Mobile Phone No .....	(Phone) +65-91805393
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Tesla
Model .....	MODEL Y RWD
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 .....	1999

#### INSURANCE COMPANY

Name of Insurance Company .....	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number .....	SD23V07762 /VPS /R00

#### DRIVER

Name of Driver .....	MUHAMMAD SOFIAN BIN MOHD SHARIFF
NRIC No .....	SXXXX355F
Date Of Birth .....	01/10/1984
Occupation .....	Outdoor

Date Of Driving Pass .....	02/01/2003
Driving experience .....	20 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-94873574
Alt. Phone Number .....	-
Email Address .....	sofian_yan@yahoo.com.sg
Address .....	788 WOODLANDS AVENUE 6
Address complement .....	#02-625
Postcode .....	730788
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 .....	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions .....	DRIZZLING
Road Surface .....	Wet

#### 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) .....	4
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 .....	MARYAM BINTE MUHAMMAD SOIFAN
Gender .....	Female

#### PASSENGER 2

Name .....	SARAH BINTE MUHAMMAD SOFIAN
Gender .....	Female

#### PASSENGER 3

Name .....	SOFIA BINTE MUHAMMAD SOFIAN
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Woodlands Division Headquarters
Police Station Phone No .....	(Phone) +65-18004660000
Police Station Address .....	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

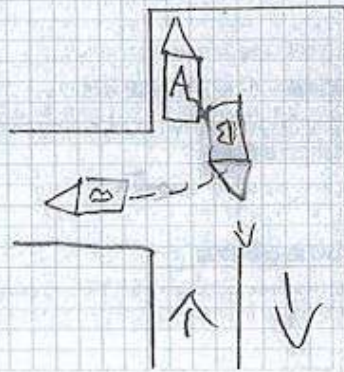
#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT

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 ..... GBF8827Z  
 Vehicle Manufacturer ..... Toyota  
 Vehicle Model ..... Dyna  
 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) ..... -



A = SKIE 4444U  
B = GIBF 8827Z

Refer to Police Report

*[Handwritten signature]*

*J. H. H. H.*

W





# SKETCH PLAN

## IMPORTANT NOTICE

1. Please report **accurately** the details of the accident to speed up the claims process.
2. 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 companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers to the Civil Records Management Centre established by the General Insurance Association of Singapore (GIAS) for archiving and that copies of the report will for a fee be made available upon application by interested parties.
7. By the lodging 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)**  
Understand, acknowledge, agree and consent that:  
(a) My insurer, my workshop and the General Insurance Association of Singapore (GIAS) 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 insurers who have insured my vehicle(s) involved in this accident (all insurers) who have insured my vehicle(s) involved in this accident shall be collectively referred to as the "Insurers". The Insurers' lawyer/slaw firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police) for the purpose(s) as:  
(i) protecting, handling and/or dealing with my claims including the settlement of the claims and any necessary investigation 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 my vehicle(s) involved in this accident and the insurers' lawyer/slaw 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/are be disclosed by any of the insurers and/or GIAS to their third party service providers or agents/including their lawyer/slaw firms, which may be listed outside of Singapore, for one or more of the above purposes.  
(d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.  
(e) the information collected under (d) above may be shared / disclosed:  
(i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulation, law enforcement and government agencies as reasonably required for the purposes stated; or  
(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: **Sally J. Tan**  
MCDPA No: **12345**





**SINGAPORE  
POLICE FORCE**



L/20230619/7084

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**POLICE REPORT (NP299)**

Report No. L/20230619/7084

Police Station Of Origin  
Woodlands Division HQ  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No:1800-4660000

Date/Time Report Made 19/06/2023 22:57	Vide Report No.	Station Diary No.
Name Of Informant MUHAMMAD SOFIAN BIN MOHD SHARIFF	Address 788 WOODLANDS AVENUE 6 #02-625 SINGAPORE 730788	
ID Type / ID No. NRIC NO / S8431355F	Contact No. Home/Office:	Mobile: 94873574
Nationality SINGAPORE CITIZEN	Email Address SOFIAN_YAN@YAHOO.COM.SG	
Occupation Fire-fighting and rescue officer	Sex Male	Age 38
Institution/School Name	Date of Birth 01/10/1984	Race Malay
Date/Time Of Incident 19/06/2023 16:40 - 19/06/2023 17:00	Location Of Incident 788 WOODLANDS AVENUE 6 #02-625 SINGAPORE 730788	

**Brief details.**

The incident occurred when a silver lorry with the registration number GBF8827Z (Toyota/Dyna 150 SMT) reversed and collided with the right rear area, trunk, bumper, and right rear wheel of my mother's white Tesla Model Y (registration number SKE4444U) while I was walking towards it with my three daughters after picking them up from Riverside Primary School at approximately 4:35 PM along the drop-off point between block 782E Woodlands Crescent and block 781D Woodlands Crescent.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 19/06/2023 22:57
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



L/20230619/7084

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230619/7084

Upon witnessing the collision, my daughters were traumatized and began crying, prompting me to shout at the driver and attempt to catch up with the speeding lorry. Unfortunately, my efforts to stop the driver were unsuccessful.

Following the incident, I promptly contacted the police for assistance, and within 15 minutes, Traffic Police Officer SSGT Lee Jiajun (T05391) arrived on a motorcycle. I handed him a thumb drive containing the video footage capturing the entire incident.

As a result of the accident, my mother's car sustained a dent on the rear bumper, deep scratches, and paint damage, exposing the underlying metal. Additionally, there are scratches on the rear right wheel rim. There is uncertainty regarding the functionality of the sensor located in the bumper and the rear bumper camera following the incident.

The Traffic Police advised me to closely observe my three daughters' behavior for the next 48 hours following the accident. If any abnormality or concerning changes in their behavior arise as a result of the incident, I have been instructed to take them to the hospital for a check-up.

Subjects Involved			
Suspect			
Person Name	Not Sure		
Gender	Unknown		
Victim			
Person Name	MUHAMMAD SOFIAN BIN MOHD SHARIFF		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 19/06/2023 22:57
Officer In-Charge Of Case:	Classification Of Case:





**SINGAPORE  
POLICE FORCE**



L/20230619/7084

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230619/7084

ID Type	NRIC NO	ID No	S8431355F
Gender	Male	Age	38
Race	Malay	Language	English
Occupation	Fire-fighting and rescue officer	Address	788 WOODLANDS AVENUE 6 #02-625 SINGAPORE 730788
Mobile No	94873574	Is Informant A Victim?	Yes
Person Name	Maryam Binte Muhammad Sofian		
ID Type	NRIC NO	ID No	T1505821D
Gender	Female	Age	8
Race	Malay	Language	English
Occupation	Student	Address	788 WOODLANDS AVENUE 6 #02-625 SINGAPORE 730788
Mobile No	94873574	Relation To Informant	Daughter
Person Name	Sofia Binte Muhammad Sofian		
ID Type	NRIC NO	ID No	T1634814C
Gender	Female	Age	7
Race	Malay	Language	English
Occupation	Student	Address	788 WOODLANDS AVENUE 6 #02-625 SINGAPORE 730788
Mobile No	94873574	Relation To Informant	Daughter

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 19/06/2023 22:57
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



L/20230619/7084

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230619/7084

Person Name	Sarah Binte Muhammad Sofian		
ID Type	NRIC NO	ID No	T1825711J
Gender	Female	Age	5
Race	Malay	Language	English
Occupation	Student	Address	788 WOODLANDS AVENUE 6 #02-625 SINGAPORE 730788
Mobile No	94873574	Relation To Informant	Daughter
Person Name	MUHAMMAD SOFIAN BIN MOHD SHARIFF (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 19/06/2023 22:57
Officer In-Charge Of Case:	Classification Of Case:



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### PHOTOGRAPHS FOR VEHICLE NO. SKE 4444U

### INSPECTION



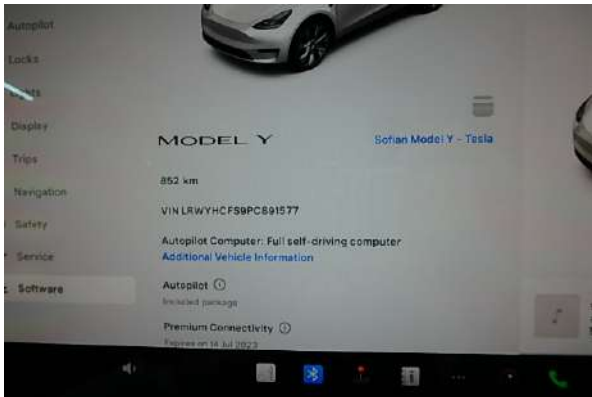


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### PHOTOGRAPHS FOR VEHICLE NO. SKE 4444U

### RE-INSPECTION

