Surveyor :	Koisul	ASSIG	NMENT (Office)		
From (Person):	Keny Ona	of	MS167	Date/Time: 8 Jun 30	17
Estimated Cost			Bill to:		
OD /TP/WS To Inspect Vel	TP RES / OD RES	ZAZUN	AV i CS	Insured: WCD430R	
at Workshop m	/sW00	n Mena		Tel:	
of	50,	Bulet B	artor Street	23 \$01-06 midview	Building
Policy No: 1	528790354r	nke	Claim No:	517692	
Sum Insured:			Excess:		
Make of Veh: (Client's Record)				D.O.A. 6/6/17	
CA / REV /	REP. / REV 24 HF	ts		H.O.D. Endorsement:	
Date/Time:			cted:	Vehicle_IN/OUT	
Date/Time	Action/Instruction () Estin	mate		
transition of the state of the	lump Sum	3550 (Red- 3687	52 (50%)	

Date/Time, File Pass to? Preli. Report Days Of Repair: Final Report Resurvey No. of Trip: Survey Fee: Date/Time, File Return to? Transportation:

Add Fee: : Site Insp (\$ Interview (\$

Report Format: Tech. Invs (\$ Lump Sum / I.B.I: (\$ Weekend (\$ 200 10 210

S+RS.

Photos

Others

TOTAL

...CLAIM SUBFOLDER...(Pending for Survey Report)

Case N	lotified	Est Submitted	Adj Assigned	Adj Rpt	Adj Sub	mitted	Ins Auth'ed	Status		
	7 Jun 2017		08 Jun 2017 14:33 Edit Adj Rpt					Report Cancel	g for Sur	vey
М	ain	Re	ference	1 (Claim Details		Docume	nts	<u></u>	show All
CLAIM SUB	FOLDER DE	TAILS	STATE OF STA	ENGLES I		[Create	d by insurer]			ESPECIAL DESIGNATION OF THE PERSON OF T
Insured:	ALLIANCE	E CONCRETE SIN	GAPORE PTE L	TD, Co. Reg	, No.: 2005162	66D				
Main Claimant:	SIOW KI	M MOI, ID: S25	70387A							
Vehicle Reg. No.:	SJR372	10			Date of Loss:	06/06/20 [95 Mon	017 10:00 - :59 ths and 15 Days	From LTA Re	eg Date (f	Man Yr)]
Claim Type:	TP / 517	692			Policy/Cover Note No.:	B28790354MKF (Comprehensive) Coverage: 01/07/2016 - 30/06/2017				
Vehicle Reg. No. (Insured):	WC2430F	·			Policy No. (Claimant):					
(Excess:	S\$1,500				
Repairer:	Woon Me 1131	ng Motor Pte Ltd	(Bukit Batok)	50 Bukit Bat	ok Street 23,, a	#01-06 Mid	dview Building, 6	59578 Bukit	Batok - To	el: 6316
Handling Insurer:		urance (Singapo					7707 02			
Adjuster:	09/06/2	Consultants Pte 017]	Ltd (HQ) - Tel:	6256-3561	[Handled by	MOHD TA	UFIKH BIN HAN	1ID] [In	ım.Adv	ice due
Driver/Custo dian (Insured):		ON HOCK (), NR	IC: S1335830C,	Tel: +6590	626653					
ASSOCIATI	ED MAIL RE	CEIVED						View All	Compose	e Case Ma
There are no	mail for this	case.								
ALL ASSO	CIATED TAS	sks⊡				View A	II Search Tasks	Create N	ew Task	Complet
Due Date	Priority	Type Task	Group Sub	ject Han	dler Assig	ned By	Completed C	n Cre	ated On	Done

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 Authorised Oriver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful interopresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 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 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.

By the lodgement of this report to the insurers, you hereby con aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
PERSONAL PROPERTY NAMED IN THE PARTY NAMED IN	ACCIDENT STATEMENT
Date Of Report	06/06/2017 14:03
Date Of Accident	06/06/2017 10:50
Exact Location Of Accident	UPPER BUKIT TIMAH ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJR3721U
Insured/Policyholder	
Name Of Registered Owner	SIOW KIM MOI
NRIC No	S2570387A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92984316
Alternative Phone No	OFFICE-92984316
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	130-1.6 (FD) DOHC (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	

Name of Insurance Company

ETIQA INSURANCE PTE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

DMAP16S502128

Cover Note Number

Driver

Name of Driver SIOW KIM MOI NRIC No S2570387A Date Of Birth 23/05/1956 Occupation INDOOR Date Of Driving Pass 29/12/1988

Driving Experience 28 YEARS AND 5 MONTHS

Gender

FEMALE

Mobile Number

(LOCAL) +65-92984316

Fax Number

Contact Number

OFFICE-92984316

EMail Address

NOEMAIL

Address

21 HAZEL PARK TERRACE # 02-11

Postcode

678946

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

/objete

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

UNKNOWN - REFER TO SKETCH PLAN

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Was any body injured in the Accident?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

WC2430R

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

LOH KHOON HOCK

NRIC/Passport Number

S1335830C

Contact Number

90626653

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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)

l understand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the 'Insurers'), the Insurers' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
- (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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

A-SJR3JAU B-WCX430R

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

Witnessed by ng Centre Personnel

Sketch Plan

CASHEW MRISTATION

SJR 37214

WC 2430R

Please note that you might be able to submit an Own Damage Claim under own policy within 14 days. () Claim Own Damage (JClaim TP () Reporting Only

() Claim OD/TP at other workshop

Workshop name:

	ribe Circumstances o		along	honov	6-16	4 +	1 1	INTIPAT
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	aut in to	, my	lane (left &	·de)			
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								March March 1990
				1411				

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnet

email to LCC (Rasul) on 19/6/17

sent the extinuate to Denvis on 27/4/18

Woon Meng Motor Pte Ltd

Office : 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578 Workshop: 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578

Tel: 6316 1131 HP: 9730 2017 Fax: 6316 7050 42, Sungei Kadut Ave, Singapore 729666 Tel: 63268523

(Email Adress: woonmeng@singnet.com.sg)

Co Reg No. 200603678M GST Reg No. 20-0603678M

Estimate

TP Claim

To : MSIG Insurance (Singapore) Pte Ltd

Motor Claims Dept

Date: 14 Jun 2017

Dear Sirs : Fax : 6224 1047

RE: ESTIMATE COST FOR HYUNDAI 130 - SJR3721U ALONG UPPER BUKIT TIMAH ROAD ON 06.06.2017

ITEMS	DESCRIPTION	QTY		PRICE
1	Front door o/s.	1pc	\$	1,197.2014
2	Front door hinge o/s @\$42.4ea.	2pcs	\$	84.80 ×7
3	Front door lock o/s.	1pc	S	227.10×5 8cc
4	Front door chek o/s.	1pc	\$	45.00 ⊀
5	Front door sticker @\$18ea	2pcs	\$	36.00 No
6	Front door inner trim.	1pc	\$	703.70×7 54
7	Front power window motor o/s.	1pc	\$	229.70× 8
8	Rear door o/s.	1pc	\$	1,228.30 74
9	Rear door hinge o/s @\$42.4ea.	2pcs	\$	84.80 × 🥎
10	Rear door lock o/s.	1pc	\$	246.50 × ()
11	Rear door chek o/s.	1pc	\$	45.00 × 1
12	Rear door sticker @\$18ea	2pcs	\$	36.00M
13	Rear door inner trim.	1pc	\$	632.20 × 2 gre
14	Rear power window motor o/s.	1pc	\$	229.70 🗡
15	Rear mudguard o/s.	1pc	\$	483.00 P4
16	Rear side mirror o/s.	1pc	\$	487.90 CRA
			\$	5,996.90
	Less 20%	3468.40	\$	(1,199.38)
	Sum Carried Forward	20%	\$	4,797.52

2774,72

Sum Carried Forward			\$ 4,797.52
Labour Charge & Misc			
To remove, repair, replace & install front damaged parts.	}		\$ 1.000.00 200
To R & R wiring.		1680	\$ 60.00
To R & R front/ rear door mechanism & check for function front/ rear.	}		\$ 18900 120
To putty & spray painting.			\$ 1,200.00 700
Total			\$ 7,237.52

All prices quoted are subjected to 7% GST.

This is a computer generated document. No signature is required.

LKK Auto Consultants hence notify the Repairer of the following:

- . To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from insurance Company

Acknowledged by Repeirer

Signeture:

Date:

Pasur 40000068 7 days 4/06/17@1710

20% 77 20% 7 days

LKK Auto Consultants Pte Ltd (Co.Reg. No: 199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/MSG17011190/R1TBN2

Date:

31/08/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

B28790354MKF

Claimant

SJR3721U

Insured Vehicle No :

: WC2430R

Vehicle No : Date of Loss:

06/06/2017

Nature of Claim: TI

TP

Claim No: 517692

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SJR3721U

Make & Model:

HYUNDAI 130, 1.6 (FD) DOHC (A) 22/06/2009 (Man. Year: 2009)

Engine No: Chassis No: G4FC9U665625

Reg. Date: Colour:

Grev

Odometer:

KMHDC51DR9U184391 97796 km

Engine Capacity:

1591 cc

Market Value/New Car

N/A

Price: Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable):
No Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

195/65R15

Rear Tyre Size:

195/65R15

Front Left Side:

Yokohama 5 mm

Rear Left Side:

Yokohama 5 mm

Front Right Side:

Yokohama 5 mm

Rear Right Side:

Yokohama 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,797.52	2,774.72	2,022.80	42.16
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,440.00	1,680.00	760.00	31.15
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	7,237.52	4,454.72	2,782.80	38.45
Approved Total (Overridden) (S\$)		3,550.00		
(S\$)	7,237.52	3,550.00	3,687.52	50.95
+ GST 7.00/7.00% (S\$)	506.63	248.50	258.13	50.95
Nett Amount (S\$)	7,744.15	3,798.50	3,945.65	50.95

INSPECTION

Date of Assignment:

08/06/2017

Date Inspected:

14/06/2017 Inspected At:

Woon Meng Motor Pte Ltd (Bukit Batok)

50 Bukit Batok Street 23,, #01-06

Midview Building Singapore 659578

Estimated Period of Repair:

7.0 days

Adjuster: MOHD RASUL

Manager: DENISE TAY KWEE CHENG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our

knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 31 Aug 2018)

Parts: 143 HYUNDAI 130 1.6 (FD) DOHC (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SJR3721U)

Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page

numbers with the END OF ESTIMATES marker on the last estimate page

Further Info: Items/values not in reference catalogue are prefixed with an asterisk *.

No.	Qty F	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT DOOR O/S	Bent	1,197.20 FL	*1,197.20 FL
2	2		*FRONT DOOR HINGE O/S	Serviceable	84.80 FL	*- FL
3	1		*FRONT DOOR LOCK O/S	Serviceable	227.10 FL	*- FL
4	1		*FRONT DOOR CHEK O/S	Serviceable	45.00 FL	*-FL
5	2		*FRONT DOOR STICKER	Necessary	36.00 FL	*36.00 FL
6	1		*FRONT DOOR INNER TRIM	Serviceable	703.70 FL	*-FL
7	1		*FRONT POWER WINDOW MOTOR O/S	Serviceable	229.70 FL	*- FL
8	1		*REAR DOOR O/S	Bent	1,228.30 FL	*1,228.30 FL
9	2		*REAR DOOR HINGE O/S	Serviceable	84.80 FL	*- FL
10	1		*REAR DOOR LOCK O/S	Serviceable	246.50 FL	*- FL
11	1		*REAR DOOR CHEK O/S	Serviceable	45.00 FL	*- FL
12	2		*REAR DOOR STICKER	Necessary	36.00 FL	*36.00 FL
13	1		*REAR DOOR INNER TRIM	Serviceable	632.20 FL	*- FL
14	1		*REAR POWER WINDOW MOTOR O/S	Serviceable	229.70 FL	*-FL
15	1		*REAR MUDGUARD O/S	Bent	483.00 FL	*483.00 FL
16	1		*REAR SIDE MIRROR O/S	Cracked	487.90 FL	*487.90 FL
F=Fr	anchise pa	art. L=ListIte	mDisc.			
				Sub Total (S\$)	5,996.90	3,468.40
			- List Item Discount on L Items	3 20.00/20.00% (S\$)	1,199.38	693.68
				Total Parts (S\$)	4,797.52	2,774.72

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TO REMOVE, REPAIR, REPLACE & INSTALL FRONT DAMAGED PARTS	New	1,000.00	800.00
2	TO R&R WIRING	New	60.00	60.00
3	TO R&R FRONT/REAR DOOR MECHANISM & CHECK FOR FUNCTION FRONT/REAR	New	180.00	120.00
4	TO PUTTY & SPRAY PAINTING	New	1,200.00	700.00
	Gross Labo	our Cost (S\$)	2,440.00	1,680.00
	Report was unsubmitted du	ring this print-out.		

< END OF ESTIMATES >