22/03/2002

ASS. REC. BY: | REF: CS/CTL17011634 /Dv bez | Special Instruction:

Surveyor: Bryan Meliman

ASSIGNMENT (Office)

From (Person): Joel Goh of CTL Date/Time: 15062017 11.17am

Estimated Cost: ______ Bill to: ______

OD / ~~TP~~ / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SKS 1919 M Insured: SKE 3805T

at Workshop m/s Teamwork Garage Tel: 6844 2475

of 53 Ubi Ave 1 #01-24

Policy No: DMPCSN 1710 241900 Claim No: SHM17D 03500C02/5

Sum Insured: ______ Excess: ______

Make of Veh: (Client's Record) ______ D.O.A. 13062017

CA / REV / REP. / REV 24 HRS 'Wp'

H.O.D. Endorsement: ______

Date/Time: 15062017 9.19am Person Contacted: Chris Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SKS 1919M - x
	SKE 3805T . CC3 [illegible] / R[illegible] DOA 130613
5.42pm@16/10/17	According to

SKS 1919 M   Rec 2007

From   Date

Estimated Cost

CD / TP / WS / TP RES / OD RES / EVA / INV / MV

Type: (Car) M'Cycle Bus Van Lorry Taxi Prime Mover Truck Trailer

Make: Honda S2000   CC: 2156

Colour: Yellow

Od Reading: 122004

Eng No: F22C1000940

C No: AP21000938

Gen Cond: (Good) Fair Poor Burnt

Steering: (In Order) Jammed Leaked / Burnt or

Brake: (In Order) Jammed Leaked / Burnt or

Modi: Nil (S Rim) STD A/Rim or

Tyre Size: Fr: 225/40 R18

R: —"—

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Yokohama

Front: R.Ba. 5 — L.Ba. 5 —

Rear: R.Ba. 5 — L.Ba. 5 —

D.O.A. 13/06/2017   D.O. 19/06/2017

Survey held at: Premwork Paya Ubi

Des of Damages: (Front) Rear O.S. N.S. U/C Rooftop or

Front

The U/C Chassis frame / Body Structure affected due to collision

Insured

Policy No

Claims No

Sum Insured   Excess

Clients Report

Make of Veh

Policy Condition

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal or Market Value

DAC Accident Rpt: Consistent? Yes or No

G.A / PP Seen: Consistent? Yes or No

Est. Repairs: 28 days   Reas: Yes or No

Lum Sum: 20 %   S Val: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date   Person Contacted

Date Time   Action / Instruction

China Taiping SKE 3805T

07/02/18 Finalise L/S ~~1800~~/- 1700/- with 2 days of repair (Recd 8068.68, 8290)

MV 22 K — MV based on LTA rebate plus body of ~~3K~~. 3K

LTA 19.5K

NL 2.5K

Date Time File Pass to: [ ] Preli. Report [ ] Final Report

Days Of Repair: 2

Resurvey No. of Trip: 2

Survey Fee: 150

Date Time File Return to: 7/2 - typist

Add Fee:

Report Format: menmen

Lump Sum (BE): 1700/-

150

Survey Department Check List (Case Handler)

Reference No. : CS/CTI/19011634/ DVB
Policy Type: OD / TP / TP RES / TL / EVA

Admin (**):** Case handler to make sure all Information created by the assignment team are **ACCURATE.**

		Case Handler		Typist	
	(1) Office Assign Form	**Y-Date**	**N-Date**	**Y-Date**	**N-Date**
C	Reference No.	✓			
C	Customer Code				
N	Assign From				
C	Assign Date	✓			
C	Veh No (Inspected)	✓			
C	Veh No (Insured)	✓			
C	D.O.A	✓			
C	Policy No	✓			
C	Claim No	✓			
C	Insurance Authorisation (CA /REV/REP)				
C	Report Type	✓			
C	Weekend Charges				
N	Survey held at/Repairer	✓			
C	Excess				

Surveyor (**):** Case handler to make sure the surveryor completed all required information.

	(1) Assignment Form				
C	Vehicle No	✓			
C	Regn Month/Year	✓			
N	Vehicle Type	✓			
N	Make & Model	✓			
C	Engine Capacity. (C.C)	✓			
N	Colour	✓			
C	Odometer. (Sp.Reading)	✓			
C	Chassis No	✓			
N	General Condition	✓			
N	Steering	✓			
N	Brake	✓			
N	Modification (Modi)	✓			
C	Tyre Size	✓			
N	Tyre Make	✓			
C	Tyre Balance	✓			
C	Date of Inspection	✓			
N	Survey held	✓			
N	Des.of Damages	✓			
	(2) System - (Views/Merimen)				
C	Damaged Vehicle Photographs Uploaded	✓			
	(3) Workshop Estimate/Assignment Form				
N	ALL Parts condition	✓			
C	Market Value for OD cases				
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				
C	Days of repair	✓			
C	Finalised Amount	✓			
C	Re-inspection Cases to Finalize within 5 Days				
	(4) System - (Views/Merimen)				
C	Resurvey photo Uploaded	✓			

Check By: VERON (Case Handler) 7/7/18 (Date)

*C: Critical *N: Non-Critical

21/05/20

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

Affiliated to Federation Internationale Des Experts En Automobile

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CS/CTI17011634/Dvb

3 ANSON ROAD #16-00
SPRINGLEAF TOWERSINGAPORE 079909

Date : 15-06-2017

Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SKE 3805T	Veh. Inspected	SKS 1919M
	Policy No.	DMPCSN1710241700	Coverage ($)	0.00
	Claim No.	SNM17D03500C02/5	Excess ($)	0.00
	Assign From	MERIMEN (JOEL GOH)	Assign Date	15/06/2017

2. Vehicle Particulars & Condition

	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	-	Steering	
	Brakes		Modification	
	General			

3. Conditions of Tyres

		Size	Make	Balance
	R/H Front Tyre			mm
	L/H Front Tyre			mm
	R/H Rear Tyre			mm
	L/H Rear Tyre			mm

4. Description of Damages

5. General Information

	Accident Date	13/06/2017	Inspection Date	15/06/2017
	Survey held at	TEAMWORK GARAGE PTE LTD 53 UBI AVENUE 1 #01-24 SINGAPORE 408934.		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	14 Jun 2017		15 Jun 2017 11:17 Assign				*New Assignment* Cancel Case

Main | Reference | Claim Details | Documents | Show All

CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:			
Main Claimant:	**KOH SAW TIN**		
Vehicle Reg. No.:	**SKS1919M**	**Date of Loss:**	13/06/2017 00:00 - :59
Claim Type:	**TP** / SNM17D03500C02/5	**Policy/Cover Note No.:**	DMPCSN1710241700
Vehicle Reg. No. (Insured):	**SKE3805T**	**Policy No. (Claimant):**	
		Excess:	S$0.00
Repairer:	**Teamwork Garage Pte Ltd (HQ)** 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475		
Handling Insurer:	**China Taiping Insurance (Singapore) Pte. Ltd. (HQ)** - Tel: 6389 6111 ... [Handled by **Joel Goh**]		
Adjuster:	**LKK Auto Consultants Pte Ltd (HQ)** - Tel: 6256-3561 ... [**Final Rpt** due 27/06/2017]		
Adj Asg. Remarks:	NO ESTIMATES. ASSIGNED AS SJE FOR WP PRS. KINDLY PROVIDE US WITH YOUR RECOMMENDATION		

ASSOCIATED MAIL RECEIVED View All | Compose Case Mail

There are no mail for this case.

ALL ASSOCIATED TASKS View All | Search Tasks | Create New Task | Complete

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?

No results.

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	6315H

Vehicle Details

Vehicle No.:	SKS1919M
Vehicle to be Exported:	Yes
Intended De-registration Date:	13 Jun 2017
Vehicle Make:	HONDA
Vehicle Model:	S2000 2.2 M
Primary Colour:	Yellow
Manufacturing Year:	2007
Engine No.:	F22C1000940
Chassis No.:	AP21000938
Maximum Power Output:	178.0 kW (238 bhp)
Open Market Value:	$35,896.00
Original Registration Date:	19 Dec 2007
First Registration Date:	19 Dec 2007
Transfer Count:	3
Actual ARF Paid:	$37,657.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Dec 2017
PARF Rebate Amount:	$18,828.00

Intended COE Rebate Details

COE Expiry Date:	18 Dec 2017
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	$6,941.00
COE Rebate Amount:	$673.00
Total Rebate Amount:	**$19,501.00**

The information contained herein is correct as at 13 Jun 2017

OK

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 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 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.
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 Report	13/06/2017 14:58
Date Of Accident	13/06/2017 07:50
Exact Location Of Accident	ROAD 1 SUNGEI KADUT STREET 1
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKS1919M
Insured/Policyholder	
Name Of Registered Owner	KOH SAW TIN
NRIC No	S6826315H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90185314
Alternative Phone No	OFFICE-98005054
Vehicle Particulars	
Manufacturer	HONDA
Model	S2000-
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA104870
Cover Note Number	
Driver	
Name of Driver	TAN CHANG HUI JEREMY
NRIC No	S9428599B
Date Of Birth	08/08/1994
Occupation	INDOOR
Date Of Driving Pass	09/07/2013
Driving Experience	3 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	UNKNOWN - REFER TO ATTACHMENT
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	CHOA CHU KANG NPC
Police Station Address	**ROAD**: 20 CHOA CHU KANG ST 52 #01-02 , **POSTCODE**: 689286 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO: - FAX NO:**
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO ATTACHMENT. STATEMENT RECORDED BY HONG LIANG (PROGRESSIVE AUTOMOTIVE PTE LTD. TEL: 6741 5761)

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	SKE3805T
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
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

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 this 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 claim (including the mailing of correspondences, 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

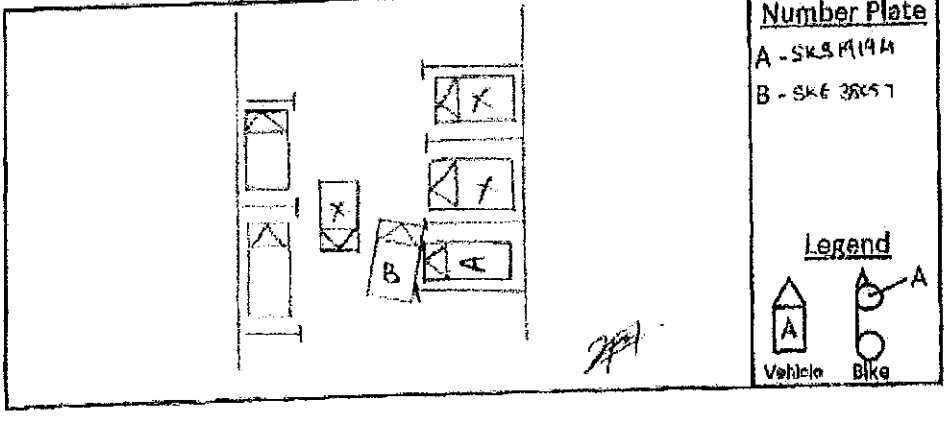
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
Progressive Automotive Pte Ltd
Blk 3022A Ubi Road 1 #01-45/46
Singapore 408718

Sketch Plan



ACCIDENT STATEMENT (Part I) *Reporting Centre: Progressive Automotive Pte Ltd*

This is NOT an admission of blame / liability, but a summary of identities and facts which will speed up the settlement of claims

To be signed by BOTH drivers

[1] Date of accident: 13/06/2019 Time: 07:39 [2] Exact location of accident: ALONG ROAD 1 SUNGEI KADUT ST 1 [3] Injuries even if slight: No ☐ Yes ☐

[4] Material damage To vehicles other than vehicles A and B: No ☐ Yes ☐ To objects other than vehicles: No ☐ Yes ☐ [5] Witness' name, address and tel no. (to be underlined if he/she is passenger in vehicle A or vehicle B) | Vehicle Video Camera Available: No ☐ Yes ☐

[12] CIRCUMSTANCES

Put a cross (X) in each of the relevant boxes applicable to your vehicle

1	parked / stopped (at the roadside)	A
2	leaving a parking space / opening the door (at the roadside)	
3	entering a parking space (at the roadside)	
4	emerging from a car park, from private ground, over a pavement	
5	entering a car park, private ground, a driveway	
6	entering a roundabout or similar traffic system	
7	circulating in a roundabout or similar traffic system	
8	striking the rear of the other vehicle while going in the same direction and in the same lane	
9	going in the same direction but different lane	
10	changing lanes	
11	overtaking	
12	turning to the right, making a U-turn (except U-turn)	
13	turning to the left	
14	reversing	
15	encroaching in the opposite traffic lane	
16	coming from the right (at road junctions)	
17	not observing a right-of-way sign (e.g. red traffic light, stop sign, etc)	

State TOTAL number of boxes marked with a cross

Registration No. (VEHICLE A) SKS 1919 M

[6] Insured / policyholder (see insurance cert.)

Name (capital letters): KOH SIAU TIN

Address: 19 TU FU AVENUE SINGAPORE 599326

NRIC / Passport no.: S6806315H

Tel no. (from 9am to 5pm):

HP: 9018 5514

[7] Vehicle

Make, type: HONDA S2000

[8] Insurance company: ☐ C ☐ TPFT ☐ TPO

Does the policy cover damage to vehicle A? No ☐ Yes ☐

Policy no.: CA 1018370/1

[9] Driver ☐ Same as Owner

Name (capital letters): THN CHING HAN JEREMY

NRIC / Passport no.: S9123599B

Class of licence: 3

HP: 9854 3054

Gender: Male ☐ Female ☐

Registration No. (VEHICLE B) SKE 3506T

[6] Insured / policyholder (see insurance cert.)

Name (capital letters):

Address:

NRIC / Passport no.:

Tel no. (from 9am to 5pm):

HP:

[7] Vehicle

Make, type: VOLVO

[8] Insurance company: ☐ C ☐ TPFT ☐ TPO

Does the policy cover damage to vehicle B? No ☐ Yes ☐

Policy No. (if available):

[9] Driver (See driving licence) (if different from Insured B above)

Name (capital letters):

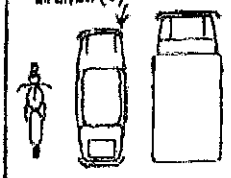
NRIC / Passport no.:

Class of licence:

HP:

Gender: Male ☐ Female ☐

[10] Indicate the point of initial impact with an arrow (⇒)



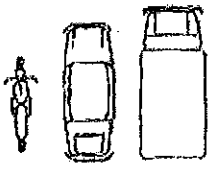
[11] Sketch of accident when impact occurred [13]

Please indicate 1. layout of the road - 2. the direction of vehicles A and B with arrows - 3. their position at the time of impact - 4. the road signs - 5. names of the streets or roads

REFER TO ATTACHED

Alternatively, please make reference to one of the sketches on page 4: ☐

[10] Indicate the point of initial impact with an arrow(⇒)



[12] Visible damage to vehicle A

[12] Visible damage to vehicle B

[14] My remarks

[14] My remarks

[15] Signature of driver [15]

A

B

I agree to damage to property other than mentioned above

Do not sign anything in the statement after signing. Subsequently, each driver should take one copy.

For witness's statement (Part II) see overleaf →

Individual Statement

Reporting Centre: Progressive Automotive Pte Ltd

INDIVIDUAL STATEMENT (Part II)

To be completed and submitted within 24 hours to your insurer or your approved workshop (Use a separate sheet of paper where necessary).

General

1 Occupation (if more than one, state all): ST40071 — Birth

2 Vehicle registration no.: SKS[illegible] C.C. — If commercial vehicle, state permitted carrying capacity

3 Is driver the owner? Yes [ ] No [✓] If no, state relationship of driver with owner: Brother — state the vehicle number and name of owner of driver's own vehicle (where applicable)

Of which vehicle are you the owner? [✓] A [ ] B

4 Exact purpose for which vehicle was being used at time of accident: [✓] Private use [ ] Commercial use [ ] Hire & reward [ ] Others – please specify

5 Is the vehicle still in use? Yes [✓] No [ ] If no, state where it is at present — Tel no.

6 Are you claiming under your own insurance policy for repair to your vehicle? Yes [ ] No [✓]

If no, state action to be taken: [ ] Third Party [ ] Reporting Only [✓] Third Party (Own Workshop)

Driver or person in charge of vehicle at the time of accident (including insured)

7 Date of birth	Occupation		Date of license pass	Was vehicle driven with the insured's permission?		Was driver an employee of the insured's company?	
0[illegible]-0[illegible]-1994	Indoor ✓	Outdoor	[illegible]-07-2013	Yes ✓	No	Yes	No

8 Give details of any pre-existing impairment of sight or hearing and of any other disability

9 Full details of all driving convictions including pending prosecutions in the last 36 months

Date	Offence	Penalty

Injured persons

10 Name(s), address(es) and approximate age(s)	Injuries sustained	If vehicle occupants, state in which vehicle	Were seat belts being worn?		Was injured conveyed to hospital by ambulance?	
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No

Damage to property & vehicles (other than vehicles A and B)

11 Name(s) and address(es) of owner(s)	Vehicle registration no. or details of property	Nature of damage	Insurer's name and address (if known)

Police action

12 Was the accident reported to the Police? Yes [✓] No [ ]

If yes, please state which Police station: CHUA CHU KANG NPC

13 Was notice of intended prosecution given? Yes [ ] No [ ]

If yes, against whom?

Accident details

14 Weather conditions: Clear [✓] Raining [ ] Others [ ]

15 Road surface: Wet [ ] Dry [✓] Others [ ]

16 Speed of vehicles: A 0 km/hr B km/hr

17 What warnings were given by driver or other party?

18 Were street lights illuminated? Yes [ ] No [ ]

19 What lights were displayed on your vehicle/the other vehicle(s)?

20 If your vehicle is commercial, state weight of load carried at time of accident

21 State how accident happened, width of roads, speed limits, etc (Points to illustrate)

22 State number of Passengers (Including Driver)

Declaration

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

Policyholder's signature ______ Date ______

Driver's signature (if driver is not the policyholder) ______ Date ______

LETTER OF AUTHORIZATION

Accident involving vehicles Nos. :-

.....

on .....

I ..... NRIC No. .....

owner of vehicle no. ..... hereby

authorize ..... NRIC No. .....

to log an accident report with regards to the above accident.

I hereby also release my full authorization and give permission

to ..... NRIC No. .....

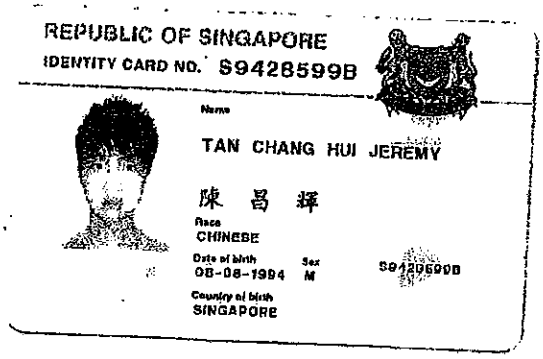
to drive my vehicle .....

Signature of Owner of vehicle:- .....

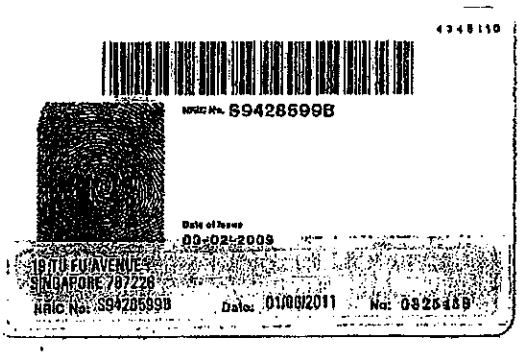
Name of Owner of vehicle:- Koh Saw Tan

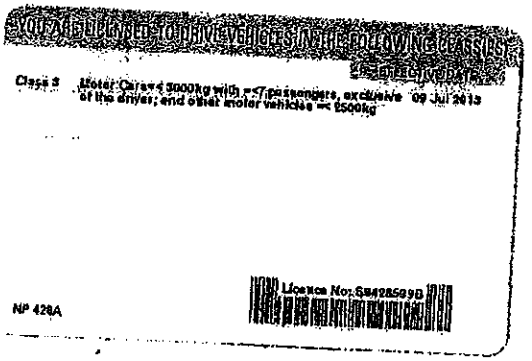
NRIC No.:- S6826315H

Owner of vehicle no.:- SKS1919M


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9428599B
Name
TAN CHANG HUI JEREMY
陳 昌 輝
Race
CHINESE
Date of birth
08-08-1994
Sex
M
S9428599B
Country of birth
SINGAPORE


REPUBLIC OF SINGAPORE
DRIVING LICENCE


NRIC No. S9428599B
Date of Issue
09-02-2009
19 TU FU AVENUE
SINGAPORE 787228
NRIC No: S9428599B
Date: 01/09/2011


Class 3
09 Jul 2013
NP 428A
Licence No: S9428599B

SINGAPORE POLICE FORCE

T/20170613/2063

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

Report No. T/20170613/2063

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
13/06/2017 12:50		74

Informant's Particulars

Name of Informant: TAN CHANG HUI JEREMY			Address: 19 TU FU AVENUE SINGAPORE 787226	
ID Type / ID No.: NRIC NO / S9428599B			Contact No.: Home/Office: Mobile: 98005054	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 22	Date of Birth: 08/08/1994	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name: SIM
Occupation: Student			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 13/06/2017 07:50	Type of Location: Open Carpark

Location:
Along Road 1
SUNGEI KADUT STREET 1

55 SUNGEI KADUT STREET 1 SINGAPORE 729358
Open carpark

Weather: Clear	Road Surface: Dry	Road Speed Limit:
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled	Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side		Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SKE3805T	Car	VOLVO		White	No Damage	0
SKS1919M	Car	HONDA		Yellow	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

SINGAPORE POLICE FORCE

T/20170613/2063

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

Report No. T/20170613/2063

CONTINUATION OF REPORT

Driver			
Name	TAN CHANG HUI JEREMY	ID No.	S9428599B
Related Vehicle	SKS1919M (Car)	Contact No.	98005054
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 13/06/2017 at about 0730hrs, I parked my vehicle SKS1919m at the said location. Everything was intact and nothing was amiss. On the same day at 0755hrs, I came back to the vehicle and discovered that my front right bumper and near the light was slightly damaged. There was a black mark on it however the car is still able to move.

This is not the first time such incident happened. I have an in-car camera recording and I saw one White Volvo had hit my car. In the video it shows that the car that hit my car was SKE3805T. No notes was left on my vehicle. I have no enemy or dispute with anyone. The car belongs to my mother and she is aware of it.

TeamWork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Spore 408934
Paya Ubi Industrial Park
Tel : 6844 2475 Fax : 6844 2474
E-mail : claims@teamworkgarage.com
ROC: 201015366H

3RD PARTY CLAIM ESTIMATION

China Taiping Insurance (Singapore) Pte Ltd
105 Cecil Street #19-00
The Octagon
Singapore 069534

Vehicle number	: SKS1919M
Make / Model	: HONDA/S2000
Chassis number	: AP21000938
Accident date	: 13 June 2017
Reference	: 1706-37

Qty	Particulars	Unit Price - SGD $
	PARTS REPLACEMENT - LIST ITEMS	
1	FRONT BUMPER distributor	1798.20
1	FRONT BUMPER EMBLEM LOGO - H Nec	40.00
1	FRONT BUMPER REINFORCEMENT NH	290.40 X
1	FRONT BUMPER TOP BEAM NH	140.21 X
1	FRONT BUMPER TOP RUBBER NH	30.00 X
1	FRONT BUMPER LOWER GRILLE NH	460.30 X
2	FRONT RH FENDER INNER SHIELD NH	490.30 X
1	FRONT RH HEADLAMP NH 1838.20	2350.94 X
2	FRONT RH HEADLAMP BRACKET Nec	380.50 X
1	AIRCON CONDENSER ASSY NH 1470.56	1080.00 X
		7060.85
	Less 20 %	1412.17
	Subtotal	5648.68
	Balance C/F	5648.68
	PARTS REPLACEMENT - SPECIAL NETT ITEMS	
	Balance B/F	5648.68
1 SET	FRONT BUMPER CLIP Nec	~~60.00~~ 30/-
1 SET	FRONT FENDER INNER SHIELD CLIP NH 30/-	50.00 X
1	FRONT BUMPER LOWER LIP (CARBON FIBER) NH	1200.00 X
	Subtotal	1310.00
	Balance C/F	6958.68
	LABOUR AND MISCELLANEOUS CHARGES	
	Balance B/F	6958.68
1	CHECK FRONT WIRING AND LIGHTNING SYSTEM	~~60.00~~ 30/-
2	REMOVE AND RENEW CONDENSER AND TOP UP GAS 630/-	200.00 NH
	PANEL BEATING ON AFFECTED AREAS	~~1200.00~~ 300/-
	SPRAY PAINTING ON AFFECTED AREAS 19/06/2017 @ 1430 Hrs Andrew	~~1200.00~~ 300/-
	POLISH AND BUFF AFFECTED AREAS 2/5mm	150.00 NH
	Subtotal	2810.00
	Grand total 1 lady 2 days	9768.68

LKK Auto Consultants hence notify the Repairer of the following:
- To re-survey 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 requested and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

2130.56
4/5 1700/-

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	14 Jun 2017		15 Jun 2017 11:17 Edit Adj Rpt	**S$1,700.00** Edit Estimates	**S$1,700.00** View Rpt		**Pending for Survey Report** Cancel Case

Main | Reference | Claim Details | Documents | Show All

CLAIM SUBFOLDER DETAILS			[Created by Insurer]
Insured:	-, Co. Reg. No.: -		
Main Claimant:	**KOH SAW TIN**		
Vehicle Reg. No.:	**SKS1919M**	Date of Loss:	13/06/2017 00:00 - :59
Claim Type:	**TP** / SNM17D03500C02/5	Policy/Cover Note No.:	DMPCSN1710241700
Vehicle Reg. No. (Insured):	**SKE3805T**	Policy No. (Claimant):	
		Excess:	S$0.00
Repairer:	**Teamwork Garage Pte Ltd (HQ)** 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475		
Handling Insurer:	**China Taiping Insurance (Singapore) Pte. Ltd. (HQ)** - Tel: 6389 6111 ... [Handled by **Joel Goh**]		
Adjuster:	**LKK Auto Consultants Pte Ltd (HQ)** - Tel: 6256-3561 ... [Handled by **BRYAN TANI**] ... [**Final Rpt** due 27/06/2017]		
Adj Asg. Remarks:	NO ESTIMATES. ASSIGNED AS SJE FOR WP PRS. KINDLY PROVIDE US WITH YOUR RECOMMENDATION		

ASSOCIATED MAIL RECEIVED View All | Compose Case Mail

- CHINA_TAIPING (08/01/2018): **STATUS OF TP SURVEY**
- CHINA_TAIPING (05/01/2018): **Alert - Adj Mandate Approved (S$0.00) - SKS1919M - Claim Handler: Joel Goh**

ALL ASSOCIATED TASKS View All | Search Tasks | Create New Task | Complete

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?

No results.

Claim Documents

***SKS1919M (SNM17D03500C02/5)**
[SKE3805T]
TP
KOH SAW TIN
Jun 13 2017 12:00AM
[-]
Teamwork Garage Pte Ltd

Upload Documents | Upload Photos | Compose New Letter

View: View in Browser

Photos/Images				3 per page	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	07/02/18 09:41	**Front View Left**		Load JPG	☑
2	07/02/18 09:41	**Front View Right**		Load JPG	☑
3	07/02/18 09:41	**General View**		Load JPG	☑
4	07/02/18 09:41	**General View**		Load JPG	☑
5	07/02/18 09:41	**General View**		Load JPG	☑
6	07/02/18 09:41	**General View**		Load JPG	☑
7	07/02/18 09:41	**General View**		Load JPG	☑
8	07/02/18 09:41	**General View**		Load JPG	☑
9	07/02/18 09:41	**General View**		Load JPG	☑
10	07/02/18 09:41	**General View**		Load JPG	☑
11	07/02/18 09:41	**General View**		Load JPG	☑
12	07/02/18 09:41	**General View**		Load JPG	☑
13	07/02/18 09:41	**General View**		Load JPG	☑
14	07/02/18 09:41	**General View**		Load JPG	☑
15	07/02/18 09:41	**General View**		Load JPG	☑
16	07/02/18 09:41	**General View**		Load JPG	☑
17	07/02/18 09:41	**Odometer Reading**		Load JPG	☑
18	07/02/18 09:41	**Chassis Number**		Load JPG	☑
19	07/02/18 09:42	**Reinspection Photo**		Load JPG	☑
20	07/02/18 09:42	**Reinspection Photo**		Load JPG	☑
21	07/02/18 09:42	**Reinspection Photo**		Load JPG	☑
22	07/02/18 09:42	**Reinspection Photo**		Load JPG	☑
23	07/02/18 09:42	**Reinspection Photo**		Load JPG	☑
24	07/02/18 09:42	**Reinspection Photo**		Load JPG	☑
25	07/02/18 09:42	**Finishing Photo**		Load JPG	☑
26	07/02/18 09:42	**Finishing Photo**		Load JPG	☑
27	07/02/18 09:42	**Finishing Photo**		Load JPG	☑
28	07/02/18 09:42	**Finishing Photo**		Load JPG	☑
29	07/02/18 09:42	**Finishing Photo**		Load JPG	☑
30	07/02/18 09:42	**Finishing Photo**		Load JPG	☑
31	07/02/18 09:42	**Finishing Photo**		Load JPG	☑
32	07/02/18 09:42	**Finishing Photo**		Load JPG	☑

Documents Checklist

DOCUMENTS CHECKLIST Reset | Save | Print

There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

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/CTI17011634/DVBE2
Date: 08/02/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN1710241700		
Claimant Vehicle No :	SKS1919M	**Insured Vehicle No :**	SKE3805T		
Date of Loss:	13/06/2017	Nature of Claim:	TP	Claim No:	SNM17D03500C02/5

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	**SKS1919M**		
Make & Model:	HONDA S2000,	Engine No:	F22C1000940
Reg. Date:	19/12/2007 (Man. Year: 2007)	Chassis No:	AP21000938
Colour:	Yellow	Odometer:	122004 km
Engine Capacity:	2156 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S$):	**Market Value/New Car Price**		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:		Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	

CONDITION OF TYRES

Front Tyre Size:	225/40 R18	Rear Tyre Size:	225/40 R18
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	6,958.68	1,500.56	5,458.12	78.44
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,810.00	630.00	2,180.00	77.58
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S$)	**9,768.68**	**2,130.56**	**7,638.12**	**78.19**
Approved Total (Overridden) (S$)		**1,700.00**		
(S$)	9,768.68	1,700.00	8,068.68	82.60
+ GST 7.00/7.00% (S$)	683.81	119.00	564.81	82.60
Nett Amount (S$)	**10,452.49**	**1,819.00**	**8,633.49**	**82.60**

INSPECTION

Date of Assignment:	15/06/2017		
Date Inspected:	19/06/2017	Inspected At:	Teamwork Garage Pte Ltd (HQ) 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park Singapore 408934
Estimated Period of Repair:	2.0 days		

Adjuster: BRYAN TANI **Manager:** VERON CHEN

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:		(Last Synchronised: 08 Feb 2018)
Parts:	N/A	HONDA S2000 (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SKS1919M)	
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 *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		***FRONT BUMPER**	Distorted	1,798.20 FL	*1,798.20 FL
2	1		***FRONT BUMPER EMBLEM LOGO - H**	Necessary	40.00 FL	*40.00 FL
3	1		***FRONT BUMPER REINFORCEMENT**	Not Necessary	290.40 FL	*- FL
4	1		***FRONT BUMPER TOP BEAM**	Not Necessary	140.21 FL	*- FL
5	1		***FRONT BUMPER TOP RUBBER**	Not Necessary	30.00 FL	*- FL
6	1		***FRONT BUMPER LOWER GRILLE**	Not Necessary	460.30 FL	*- FL
7	2		***FRONT RH FENDER INNER SHIELD**	Not Necessary	490.30 FL	*- FL
8	2		***FRONT RH HEADLAMP**	Not Necessary	2,350.94 FL	*- FL
9	2		***FRONT RH HEADLAMP BRACKET**	Repair	380.50 FL	*- FL
10	1		***AIRCON CONDENSER ASSY**	Not Necessary	1,080.00 FL	*- FL
11	1		***SET FRONT BUMPER CLIP**	Necessary	60.00 FS	*30.00 FS
12	1		***SET FRONT FENDER INNER SHIELD CLIP**	Not Necessary	50.00 FS	*- FS
13	1		***FRONT BUMPER LOWER LIP (CARBON FIBER)**	Not Necessary	1,200.00 FS	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S$)	**8,370.85**	**1,868.20**
- List Item Discount on L Items 20.00/20.00% (S$)	1,412.17	367.64
Total Parts (S$)	**6,958.68**	**1,500.56**

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
Labour Items				
1	**CHECK FRONT WIRING AND LIGHTNING SYSTEM**	New	60.00	30.00
2	**REMOVE AND RENEW CONDENSER AND TOP UP GAS**	New	200.00	0.00
3	**PANEL BEATING ON AFFECTED AREAS**	New	1,200.00	300.00
4	**SPRAY PAINTING ON AFFECTED AREAS**	New	1,200.00	300.00
5	**APPLY ANTI RUST ON AFFECTED AREAS**	New	150.00	0.00
		Gross Labour Cost (S$)	**2,810.00**	**630.00**

Report was unsubmitted during this print-out.

< END OF ESTIMATES >