

22/03/2002

ASS. REC. BY:

REF:

CS3/AXA17019292/Wb

Special Instruction:

Surveyor:

Wilson

ASSIGNMENT (Office)

Smart claim

From (Person):

Tan Kwee May

of

AXA

Date/Time:

06/10/2017 @ 5.14pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJA 7657K

Insured:

GBD 5757Y

at Workshop m/s

Allswell

Tel:

9147 8545

of

25 Debu Lane 9

Policy No:

Claim No:

S7M002M2

Sum Insured:

Excess:

Make of Veh:

D.O.A.

04.10.2017

(Client's Record)

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

10.10.2017 @ 10am

H.O.D. Endorsement:

Date/Time:

09/10/2017 11.18am

Person Contacted:

Ben

Vehicle IN 1017

Date/Time	Action/Instruction (X) Estimate
	SJA 7657K - X
	GBD 5757Y - X
	Dismantle Part : 30.10.2017
27-11-17 7:16pm	Email to Tan Kwee May thru agent claim

PRS
W. L. L. L.

REF: AXA

ASSIGNMENT

From: _____ Date: 10/10/17
 Estimated Cost: _____
 OD / P / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: SJA 7657 K
 at Workshop: Allswell
 at: 25 Defu Lane 9
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record) _____
 Make of Ven: _____

Policy Condition

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



Bas or Market Value: _____
 D/C Accident Report: _____ Consistent? Yes or No
 G/A PR Seen: _____ Consistent? Yes or No
 Est. Repairs: _____ days Res: Yes or No
 Lump Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle IN / OUT

Date Time Action Instruction

Veh No: SJA 7657 K Yr Reg: 19/12/2007
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda Stream cc: 1799
 Colour: Silver AC: _____ Insured / Std / Nil / NA
 Se Reading: 189141 T Ratio: Insured / Std / Nil / NA

Eng No: _____
 C/Vo: JHM RN 684085200712
 Gen Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: NIK / S/Rim / STD A/Rim or

Tyre Size F: 205 / 65 R 15

R: 205 / 65 R 15

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or: Weather

Front: _____ Rear: _____
 R Ba: 3 mm R Ba: 3 mm
 L Ba: 3 mm L Ba: 3 mm
 D/OA: 4/10/2017 D/OA: 15/10/2017

Survey held at: No. 25 Defu Lane 9

Des. of Damages: Frt: Rear / O/S / N/S / U/C / Rooftop or

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

Date Time File Pass to:

27/11/2017

Date Time File Return to:

☐ : Preli. Report
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RE: \$

Photos:

Others:

Add Fee:

☐ Site Insp (\$)
☐ Interview (\$)
☐ Tech Invs (\$)
☐ Weekend (\$)

Report Format: PRS

Lump Sum / I.B.I: (\$)

TOTAL

**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

AXA INSURANCE PTE LTD

Ref : CS3/AXA17019292/Wb

8 SHENTON WAY #24-01
AXA TOWERSINGAPORE 068811

Date : 09-10-2017



Code : AXA2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	GBD 5757Y	Veh. Inspected	SJA 7657K
Policy No.		Coverage (\$)	0.00
Claim No.	S7M002MQ	Excess (\$)	0.00
Assign From	SMART CLAIM (TAN KWEE MAY)	Assign Date	06/10/2017

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

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5. General Information

Accident Date	04/10/2017	Inspection Date	10/10/2017
Survey held at	25 DEFU LANE 9		
Repairer	ALLSWELL MOTOR TRADERS		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.
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Service Request Details

Claim

S7M002MQ

Reference

None 

Loss Date

4 October 2017

Request Date

6 October 2017

LKK AUTO CONSULTANTS PTE LTD (TP) ▼

Due Date

13 October 2017

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pre-Repair Survey

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SJA7657K

Make

TPVD HONDA

Service Address

PIE TO TUAS, , ,

Primary Contact

NG NAM BEE MARKETING PTE LTD
67570555

Claim Handler

Kwee May TAN
6568804084
kweemay.tan@axa.com.sg

Additional Instructions

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message

Catherine Chong (LKK Auto)

From: Shu Pei (LKKAuto) <shupe@lkkauto.com>
Sent: Friday, 6 October, 2017 5:51 PM
To: assignments
Subject: FW: Accident between SJA7657K and GBD5757Y (your insured)

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupe@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: OOI, Ben [<mailto:ben@allswellmotor.com.sg>]
Sent: Thursday, 5 October, 2017 8:59 PM
To: SG AXA Insurance SM AXA SGP - Motor Survey <motor.survey@axa.com.sg>
Subject: Accident between SJA7657K and GBD5757Y (your insured)

Dear Motorsurvey (AXA)

Your insured has met an accident with our vehicle. We are doing a 3rd party claim against AXA. Please arrange your surveyor to assess the damaged and we will get our own surveyor to assess, too.

Please expedite this case as soon as possible to avoid any inconveniences.

Please call the undersigned for a date to survey because we need to call the hirer to come down at your stipulated time and date.

Thanks in advance

Truly

OOI, Ben

Allswell Motor Traders
25, Defu Lane 9
Singapore 539266
Office: +65 6679 1146
Mobile: +65 9147 8545
Email: ben@allswellmotor.com.sg

Survey Department Check List (Case Handler)

Reference No. :

Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

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

(1) Office Assign Form

- 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

Y-Date	N-Date	Y-Date	N-Date
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

Surveyor () : Case handler to make sure the surveyor 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

✓			
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(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

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Check By:

Case Handler Date

*C: Critical *N: Non-Critical

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 05/10/2017 11:58
Date Of Accident 04/10/2017 16:50
Exact Location Of Accident PIE TOWARDS TUAS (BEFORE STEVEN ROAD)
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJA7657K
Insured/Policyholder
Name Of Registered Owner ALLSWELL LEASING & LIMOUSINE PTE LTD
Co Reg No 201432541Z
Email Address NOEMAIL
Mobile Phone No
Alternative Phone No OFFICE-64625405

Vehicle Particulars

Manufacturer HONDA
Model STREAM-1.8 L (A)
Exact Purpose for which vehicle was being used at time of accident GRAB
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 HIRE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy YES
Policy Number 5085700497
Cover Note Number

Driver

Name of Driver LUAH ZHIWEI
NRIC No S8301845C
Date Of Birth 17/03/1983
Occupation OUTDOOR
Date Of Driving Pass 10/05/2004
Driving Experience 13 YEARS AND 4 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-86793744
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 OTHER - HIRER & LEASEE

Vehicle Registration Number of Driver's Own Vehicle

-

-

-

Insurance Company of Driver's Own Vehicle

-

-

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

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

While i driving towards PIE / TUAS my vehicle is on the right second hand ,i was trying to avoid a malaysia lorry that a metal stick fly out of his lorry.I step the brake the lorry behind me bang my back.

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 GBD5757Y

Vehicle Make/Model/Colour NISSAN NV200

Details Of Properties

Name of Driver LEE MING WAI

NRIC/Passport Number

Contact Number 97772688

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Sketch Plan

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 lodgment 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.
- (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 so 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, regulators, 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.

Buly



[Signature]

am



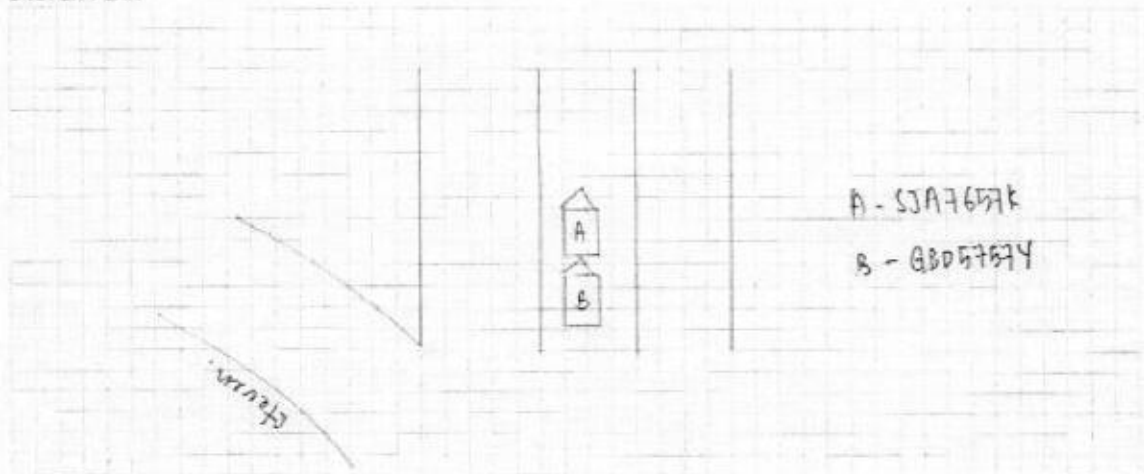
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: *Yan Yee*
NRIC/HIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While I driving toward PIE / was my vehicle is on the right second hand I was trying to avoid a malaysia lorry that a metal stick fly out of his lorry. I step the brake on the lorry behind me bang my back.

DECLARATION

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

Policyholder's Signature
Date & Time:



Driver's Signature
(if driver is not the policyholder)

10-320m
5/10/2017

Reporting Centre Personnel's Signature
Name:

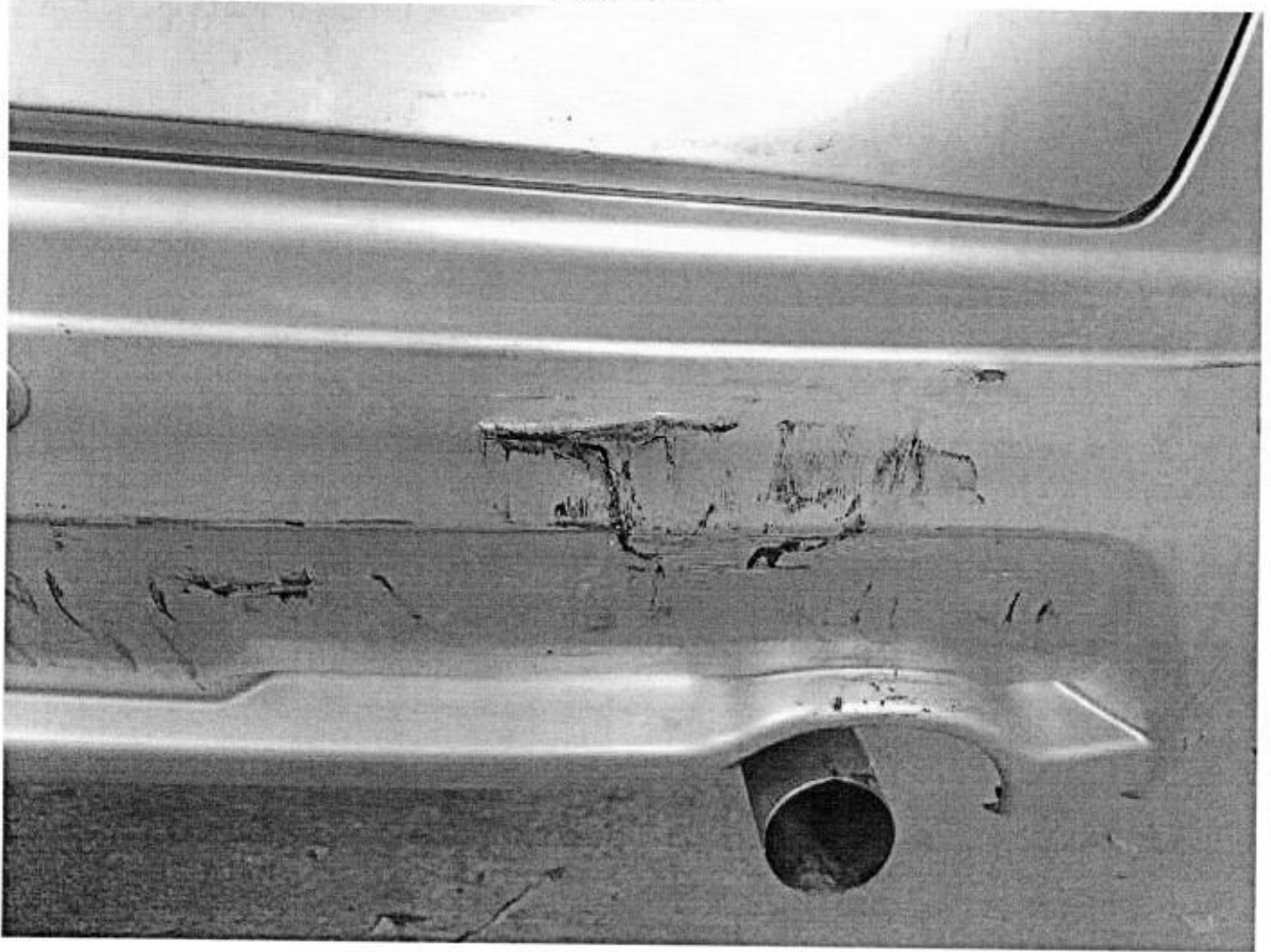




Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Assessment Details

[General & Workshop Details](#)[Vehicle & Driver Details](#)[Vehicle Condition](#)[Taxes & Ratio](#)[Parts & Labour](#)[Miscellaneous](#)[Summary](#)

General Details

Involving

TPVD HONDA STREAM-1.8 L (A) (SJA7657K)

Date of Loss

October 4, 2017

Time of Loss

17.00

Loss Description

GBD5757Y (INSD) C/W SJA7657K (TP) & JQP9285

Comment

Workshop Details

Total Rebate Amount

Nett Loss Amount

\$0.00

Assigned Workshop

LKK AUTO CONSULTANTS PTE LTD (TP)

Target Date of Completion *

Days of work completion *



Assessment Details

[General & Workshop Details](#)[Vehicle & Driver Details](#)[Vehicle Condition](#)[Taxes & Ratio](#)[Parts & Labour](#)[Miscellaneous](#)[Summary](#)

Vehicle & Driver Details

Vehicle Registration#

SJA7657K

Registration State

SINGAPORE

Mileage

189141

Purchase Date

mm/dd/yyyy



Registration Date *

12/19/2007



Age of Vehicle

9

CATEGORY

Manufacturing Year

POLICY INFORMATION

ASSESSMENT INFORMATION

2007

CATEGORY

Make

POLICY INFORMATION

TPVD HONDA

ASSESSMENT INFORMATION

TPVD HONDA

CATEGORY

Model



Assessment Details

[General & Workshop Details](#)[Vehicle & Driver Details](#)[Vehicle Condition](#)[Taxes & Ratio](#)[Parts & Labour](#)[Miscellaneous](#)[Summary](#)

Detailed Assessment

Inspection Date *

10/10/2017



Total Loss

Yes

No

Towing Charges

0

Voluntary Excess

0

Compulsory Excess

0

Young/Inexperienced/Unnamed Driver Excess

0

Other Excess

Condition of Vehicle at time of survey

General condition

Fair ▾

Steering (Serviceable)

Yes

No





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

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT			
AXA INSURANCE PTE LTD 8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN : TAN KWEE MAY		Ref: CS3/AXA17019292/Wbe2 Date: 02-01-2018 Code: AXA2	
			
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	GBD 5757Y	Veh. Inspected	SJA 7657K
Policy No.		Coverage (\$)	0.00
Claim No.	S7M002MQ	Excess (\$)	0.00
Assign From	TAN KWEE MAY	Assign Date	06/10/2017
2. Vehicle Particulars & Condition			
Make & Model	HONDA STREAM	c.c	1799
Engine No.	HIDDEN	Year of Reg.	2007
Chassis No.	JHMRN68408S200712	Colour	SILVER
Odometer	189141 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/65 R15	WEST LAKE	3 mm
L/H Front Tyre	205/65 R15	WEST LAKE	3 mm
R/H Rear Tyre	205/65 R15	WEST LAKE	3 mm
L/H Rear Tyre	205/65 R15	WEST LAKE	3 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
5. General Information			
Accident Date	04/10/2017	Inspect Date / Time	10/10/2017 (11:29 AM)
Survey held at	25 DEFU LANE 9		
Repairer	ALLSWELL MOTOR TRADERS		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.			

Report Ref No. CS3/AXA17019292/Wbe2

Inspected By

WILSON TEO CHENG MING

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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