

ASS. REC. BY: \_\_\_\_\_ REF: CS/ms617019899/Wrb02 Special Instruction: \_\_\_\_\_

Surveyor: Wilson ASSIGNMENT (Office)

From (Person): Margaret of ms61 Date/Time: 17-10-2017

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

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

To inspect Vehicle No: GBC 2324M Insured: SKT 29114P

at Workshop m/s Heng Motor Tel: 8112 3936

of Blk 5 Duta Lane 10

Policy No: 535030 Claim No: 29040568MCL

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 09-10-2017

(Client's Record) \_\_\_\_\_

CA / REV / REP. / REV 24 HRS 'wpi' 19-10-2017 @ morning

Date/Time: 17-10-2017 11:41am Person Contacted: Ah Heng H.O.D. Endorsement: \_\_\_\_\_

Vehicle: IN / OUT

Date/Time	Action/Instruction ( X ) Estimate
	GBC 2324M - NS/ENC14005653 / H44603 DOA: 230214
	SKT 29114P - x
	sent prei through merimen
	confirm L1S \$1,800.00, 4 days
	Rd: \$ 2378.70, 571.

PRS

REF: MSLH

Signature:

Wilson

# ASSIGNMENT

From: Date: 15.10.2017

Estimated Cost:

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

To Inspect Vehicle No: GBC 2324M

at Workshop/m/s

of Blk 5 Dehu Lane 10

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh: An Hong - 6112 3936

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: GBC 2324M Yr Regn: 6/9/2011

Type: ☒ Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make: Nissan Albitan c.c 2953

Colour: white A/C: Insured / Std / NI / NA

Sp.Reading: 190648 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: 3N1SC21F2420850105

Gen. Cond: Good / Fair / Poor / Burnt

Steering: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt or

Brake: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt or

Modi: Nil / S/Rim / ☒ STD A/Rim or

Tyre Size: F: 185 / R15C

R: 165 / R13C

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

TOYO / YOKO or West Lake (R)

Front Chao Yang (R)

R/Bal. 4 mm R/Bal. mm

L/Bal. 4 mm L/Bal. mm

D.O.A. D.O.I. 19/10/2017

Survey held at Blk 5, Dehu Lane 10

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 Action / Instruction

Accident Report Not Given

RECEIVED 30 JAN 2018

Date/Time, File Pass to?

☐ : Preli. Report

1) typist

☒ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Report Format : TP

Lump Sum / H.B. (\$ 1800.00)

200

10

210




# 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			
MSG INSURANCE (SINGAPORE) PTE LTD		Ref : CS/MSG17019899/Wrb	
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 17-10-2017	
		Code : MSG	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	SKT 2914P	Veh. Inspected	GBC 2324M
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	17/10/2017
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer		Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	09/10/2017	Inspection Date	19/10/2017
Survey held at	5 DEFU LANE 10		
Repairer	HENG MOTOR SERVICES		
<b>5a. Remarks</b>			
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.			

## 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	10/10/2017 12:06
Date Of Accident	09/10/2017 14:00
Exact Location Of Accident	186 JOO CHIAT TERRACE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC2324M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	F & C ENTERPRISE (S) PTE LTD
Co Reg No	199602295R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68582020

### Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA264612
Cover Note Number	

### Driver

Name of Driver	NG KENNY
NRIC No	S7922213E
Date Of Birth	01/08/1979
Occupation	INDOOR
Date Of Driving Pass	26/11/2007
Driving Experience	9 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97931513
Fax Number	
Contact Number	
Email Address	NGKENNY_2010@YAHOO.COM.SG

Address	BLK 103 TAMPINES STREET 11 #04-41
Postcode	520103
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	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)	1

#### 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

I WAS TRAVELLING STRAIGHT. SUDDENLY, VEHICLE B FROM THE LEFT TURN OUT RIGHT FROM THE CONDO AND HIT ONTO MY VEHICLE LH PORTION.

#### 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	SKT2914P
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Name of Driver	TNG HUI SHAN GINA
NRIC/Passport Number	S8502452C
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 Pg. 1

### SKETCH PLAN

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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.



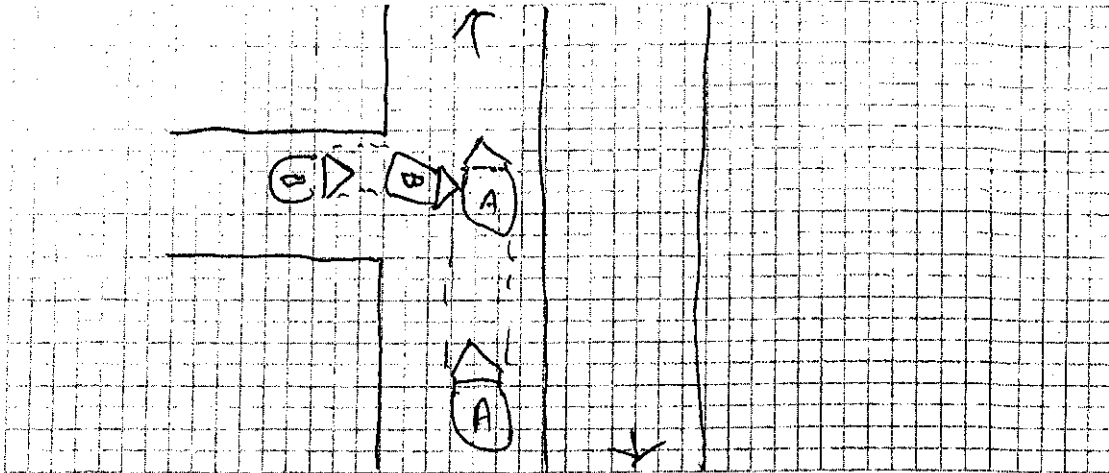
Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

**Sketch Plan #2 Pg. 1**

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling straight, suddenly vehicle B  
from the left turn our right from  
the canal and hit onto my vehicle LH  
portion.

### 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)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

LETTER OF UNDERTAKING

I/We, F & C ENTERPRISE (S) PTE LTD, the owner of vehicle no. ABC 2324M

My/Our Insurance is under M/s AXA Insurance Singapore Pte Ltd, I/we shall decide whether to claim under my/our Policy or against the Third Party and if the former shall submit such a claim to M/s AXA Insurance Singapore Pte Ltd with all relevant facts and documents within 14(fourteen) days of occurrence or discovery of damage.

My/Our Third Party claim is handle by my/our preferred workshop, \_\_\_\_\_

Signed and Acknowledge by:




[Signature]  
Nric no. and signature of policyholder

\_\_\_\_\_  
Company Stamp

10/10/2017  
Date



**REPUBLIC OF SINGAPORE**  
IDENTITY CARD NO. **S7922213E**




Name  
**NG KENNY**  
(HUANG KENNY)

Race  
**CHINESE**

Date of birth  
**01-08-1979**

Sex  
**M**

Country of birth  
**SINGAPORE**




**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**




**NG KENNY**  
(HUANG KENNY)

**01-08-1979**


**001546247E**



**4487038**



NRIC No: **S7922213E**



Date of issue  
**12-11-2009**

**APT BLK 103 TAMPINES STREET 11 #04-41**  
**SINGAPORE 520103**

NRIC No: **S7922213E** Date: **08/05/2011** No: **6888175**

**YOU ARE PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES**

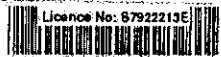
Class	Description	Valid Until
Class 3	Motor cars < 3500 kg with not > 9 passengers, exclusive of the driver; and motor tractors/vehicles < 2500 kg	26 Nov 2009
Class 4	Heavy motor cars and motor tractors > 2500 kg	14 Jun 2014
Class 5	Motor vehicles > 7250 kg not constructed to carry any load	13 Mar 2014

**S7922213E**

**S / No. 9000203170**

**NP 428A**

**Licence No: S7922213E**





redefining / insurance

AXA Insurance Pte Ltd  
 1800 880 4888 (Within Singapore)  
 (65) 6880 4888 (International)  
 (65) 6880 4740  
 customer.care@axa.com.sg  
 www.axa.com.sg

date  
 05/09/2017

policy number  
 CV1 / GA264612

## Certificate of Insurance

Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Commercial Vehicles (Third-Party Risks and Compensation) Rules, 1960 - Road Transport Act, 1987 (Malaysia); Commercial Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

### Policy details

Policyholder name	F & C ENTERPRISE (S) PTE LTD	Certificate number	GA264612 / 1
Cover	Comprehensive	NCD	0%
Engine number	ZD30289696K	Chassis number	JN1SC2F24Z0850105
Vehicle Registration number	QBC2324M		
Period of Insurance	from 06/09/2017 to 05/09/2018 (both dates inclusive)		
Sum Insured	Market Value at The Time of Loss		
Finance Loan Company	Nil		

### Persons or classes of persons entitled to drive

Any person who is driving on the Policyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

### Limitations as to use\*

- (a) Use in connection with the Policyholder's business.
- (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (c) Use for social, domestic and pleasure purposes.

The Policy does not cover

- (a) Use for the hire or reward or for racing, pace-making, reliability trial or speed testing.
- (b) Use whilst drawing a trailer except the towing of anyone disabled mechanically propelled vehicle.

\* Limitations rendered inoperative by Section 8 of the Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

### Excess

Section 1	SGD700.00
Windscreen	SGD140.00

An additional excess is applicable as follows:

Additional Own Damage Excess of S\$1,000 is applicable for any named/unnamed drivers who:

- a) is 22 years old to 24 years old and/or
- b) is 66 years old to 70 years old and/or
- c) with driving experience of 1 year to less than 2 years on the relevant classes of driving license

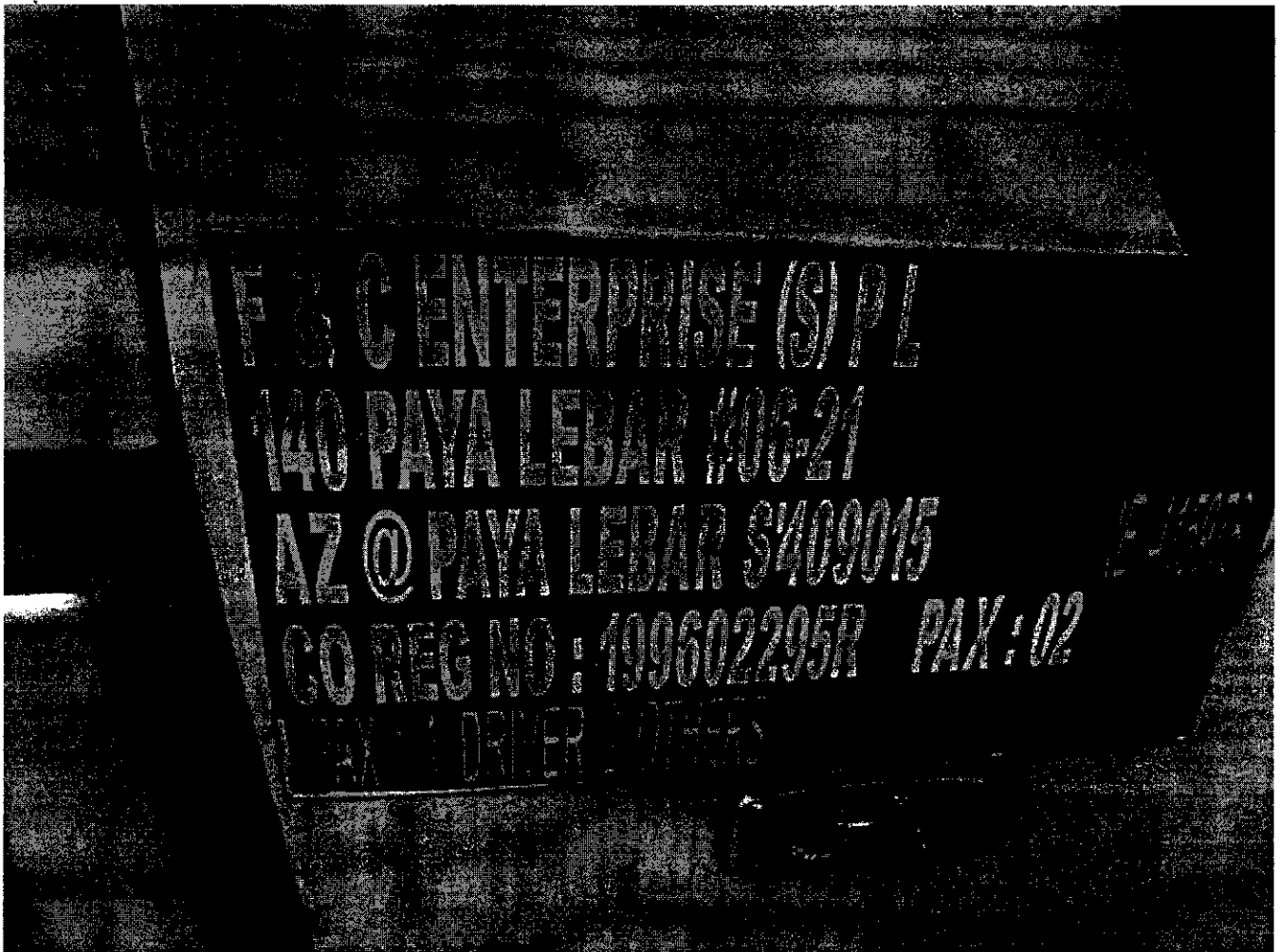
Additional All Claims excess of \$2,000.00 is applicable for any named/unnamed drivers who:

- a) is 18 years old to 21 years old and/or
- b) is 71 years old and above and/or
- c) with driving experience of less than 1 year on the relevant classes of driving license

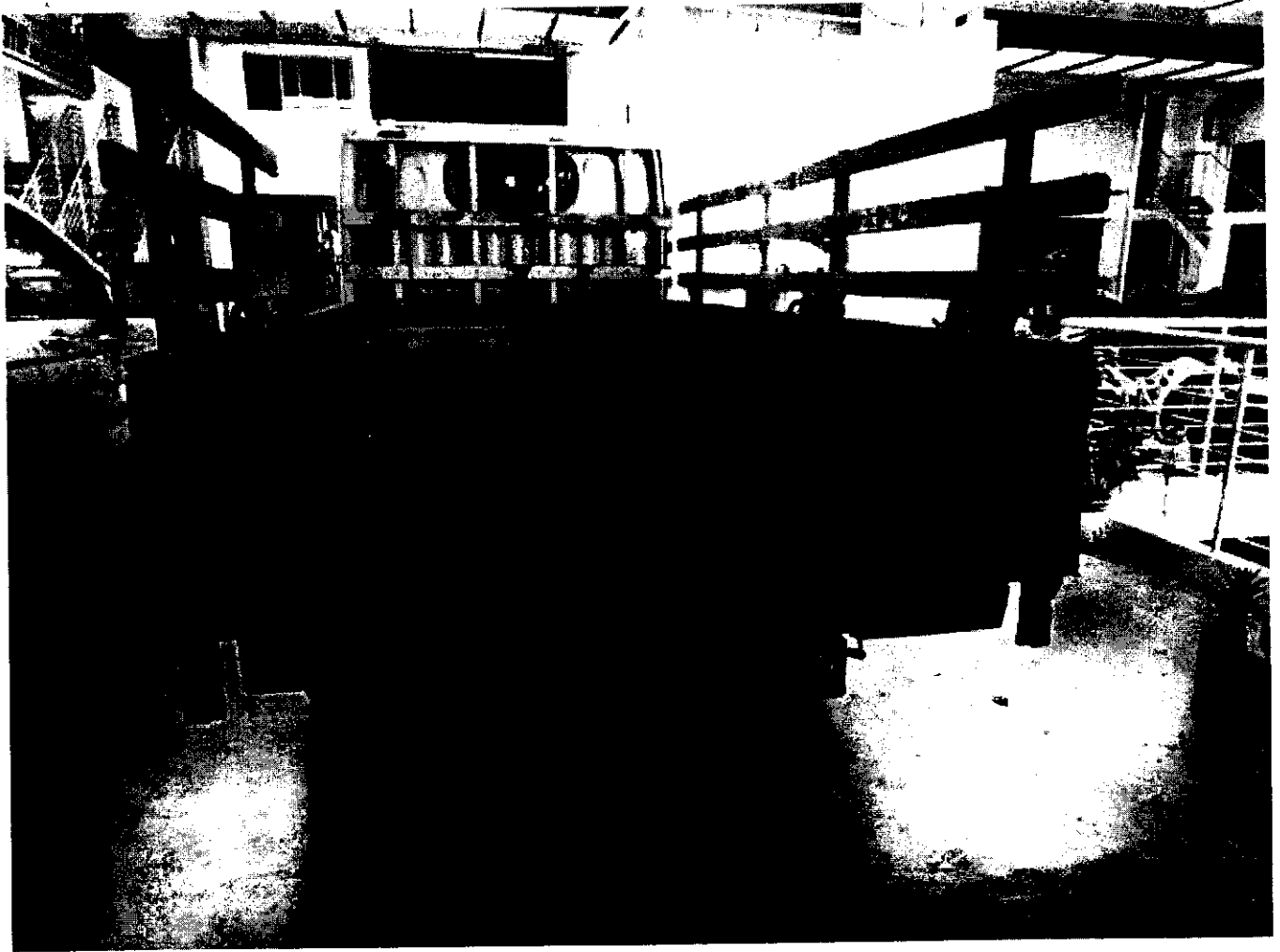
AXA Insurance Pte Ltd (199903512M)  
 8 Shenton Way, #24-01, AXA Tower,  
 Singapore 068811  
 Customer Centre, #81-01

1 of 3

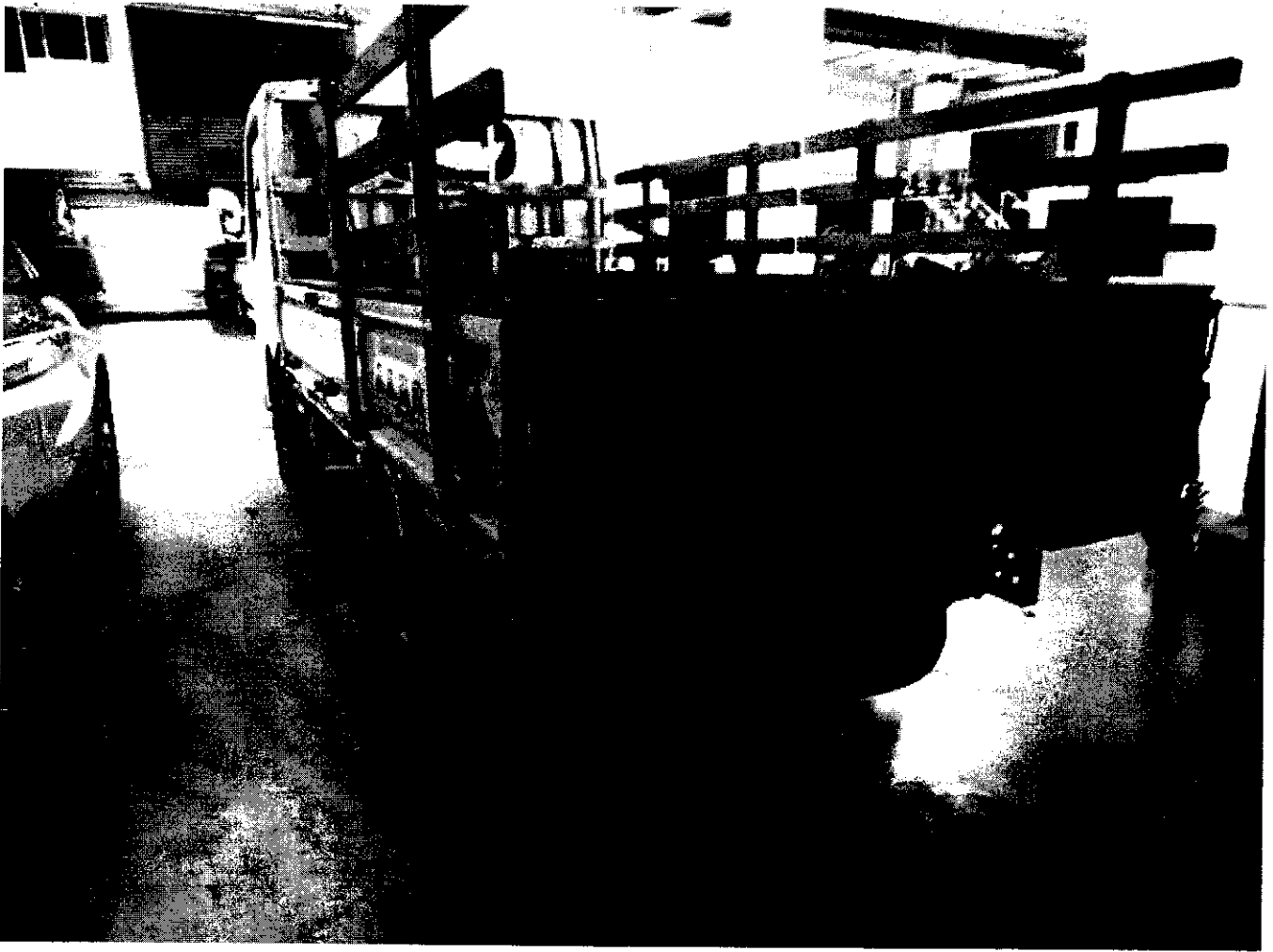
Accident Photo



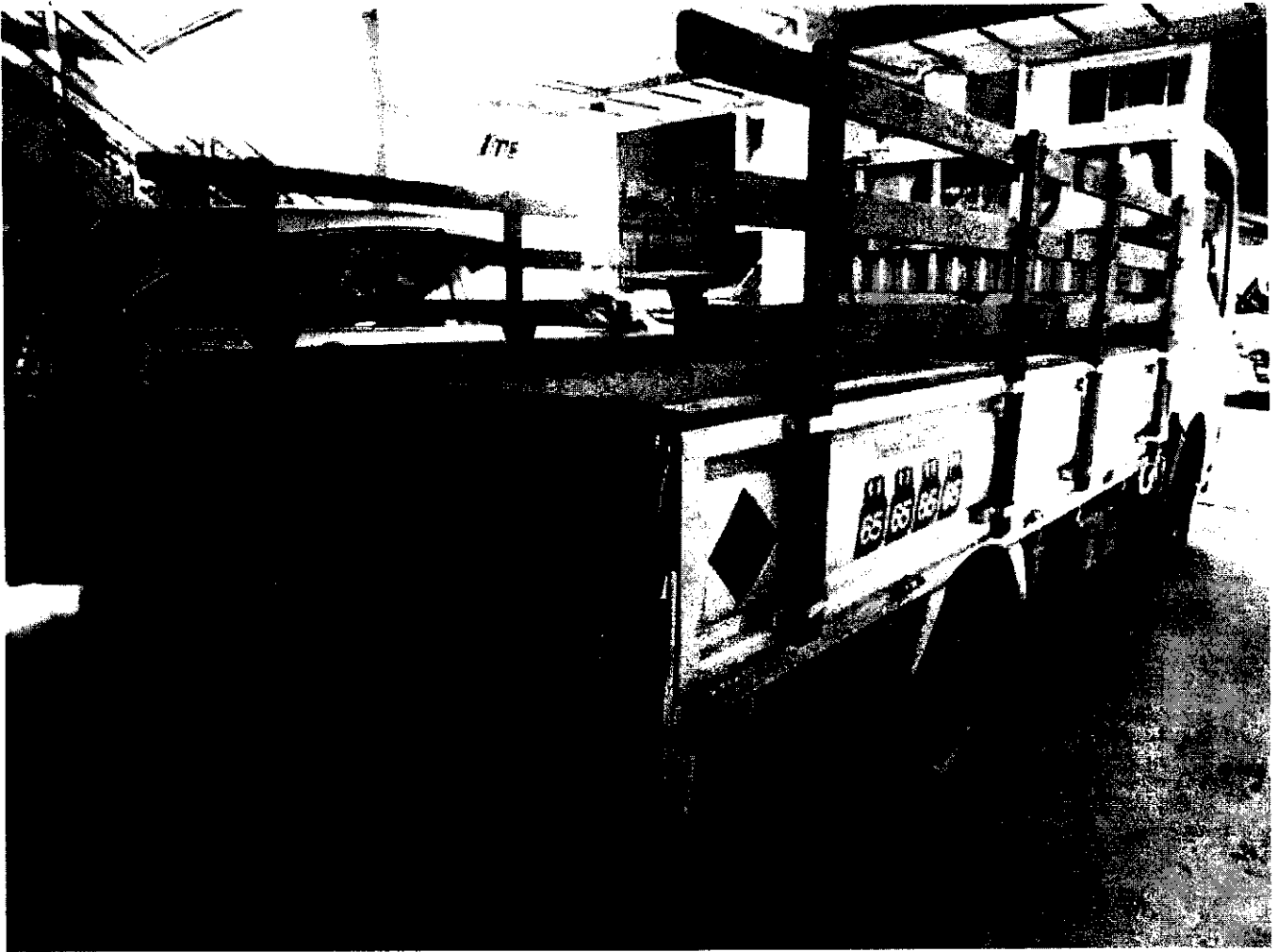
Accident Photo



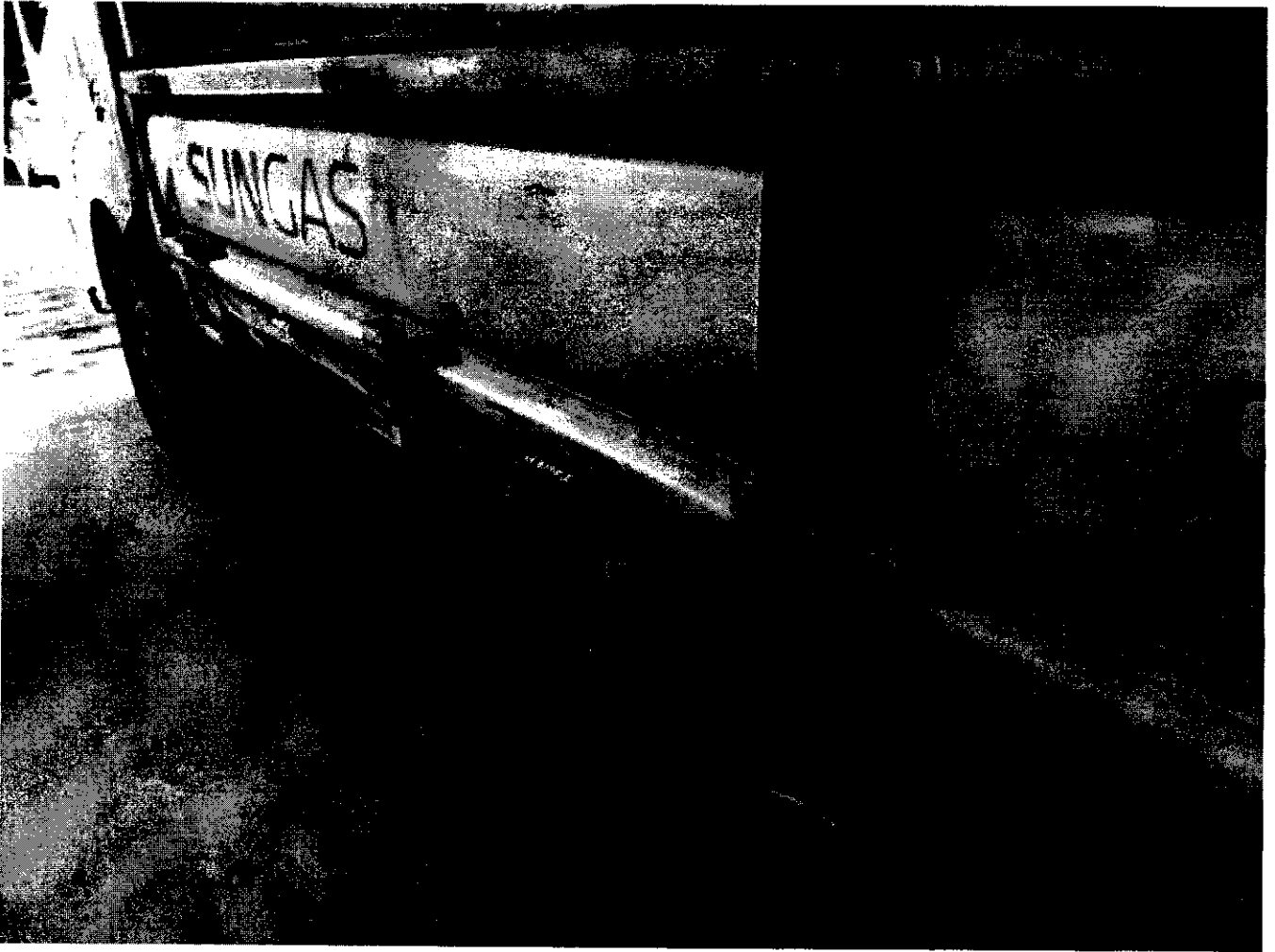
Accident Photo



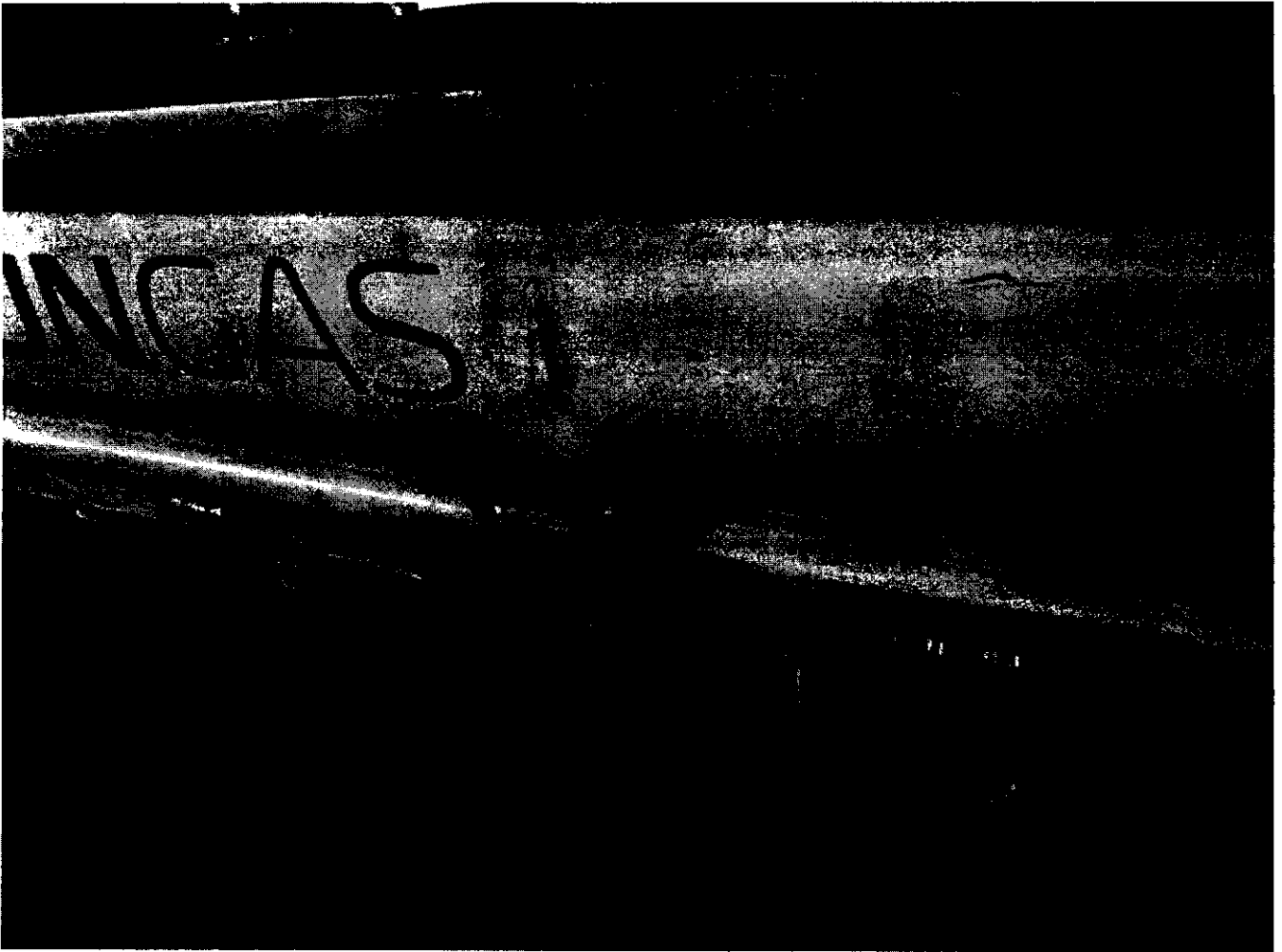
Accident Photo



Accident Photo



Accident Photo

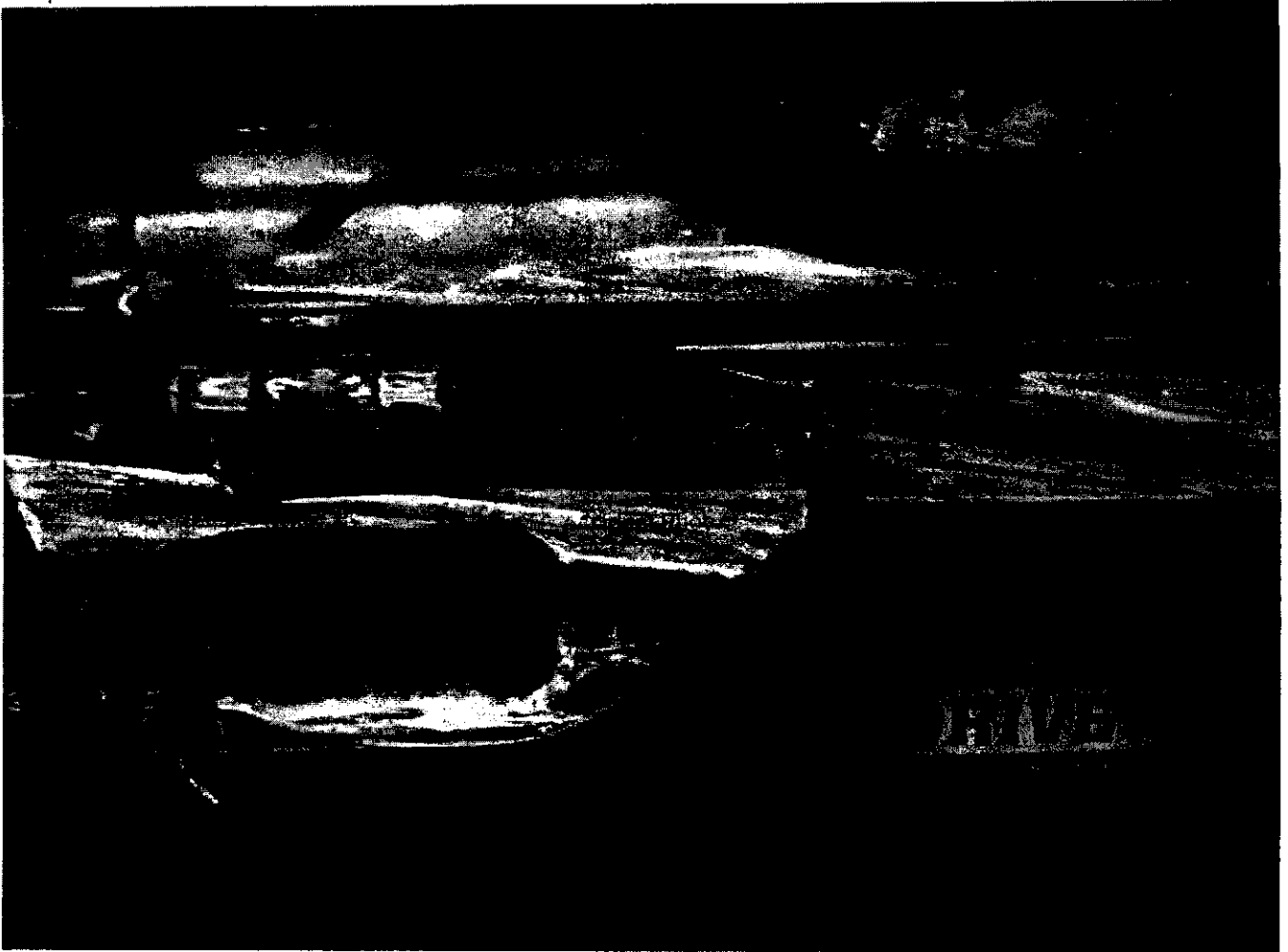




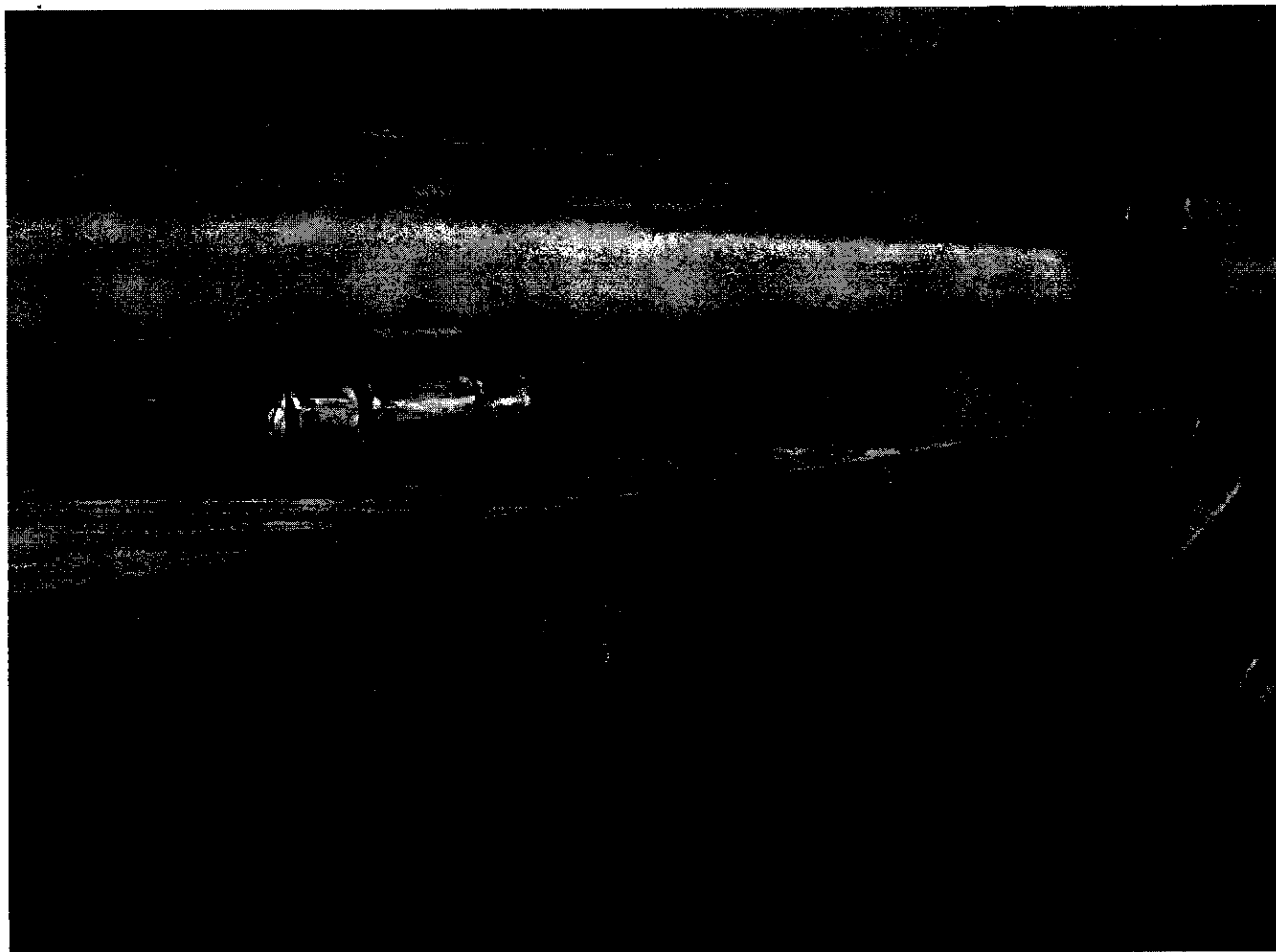
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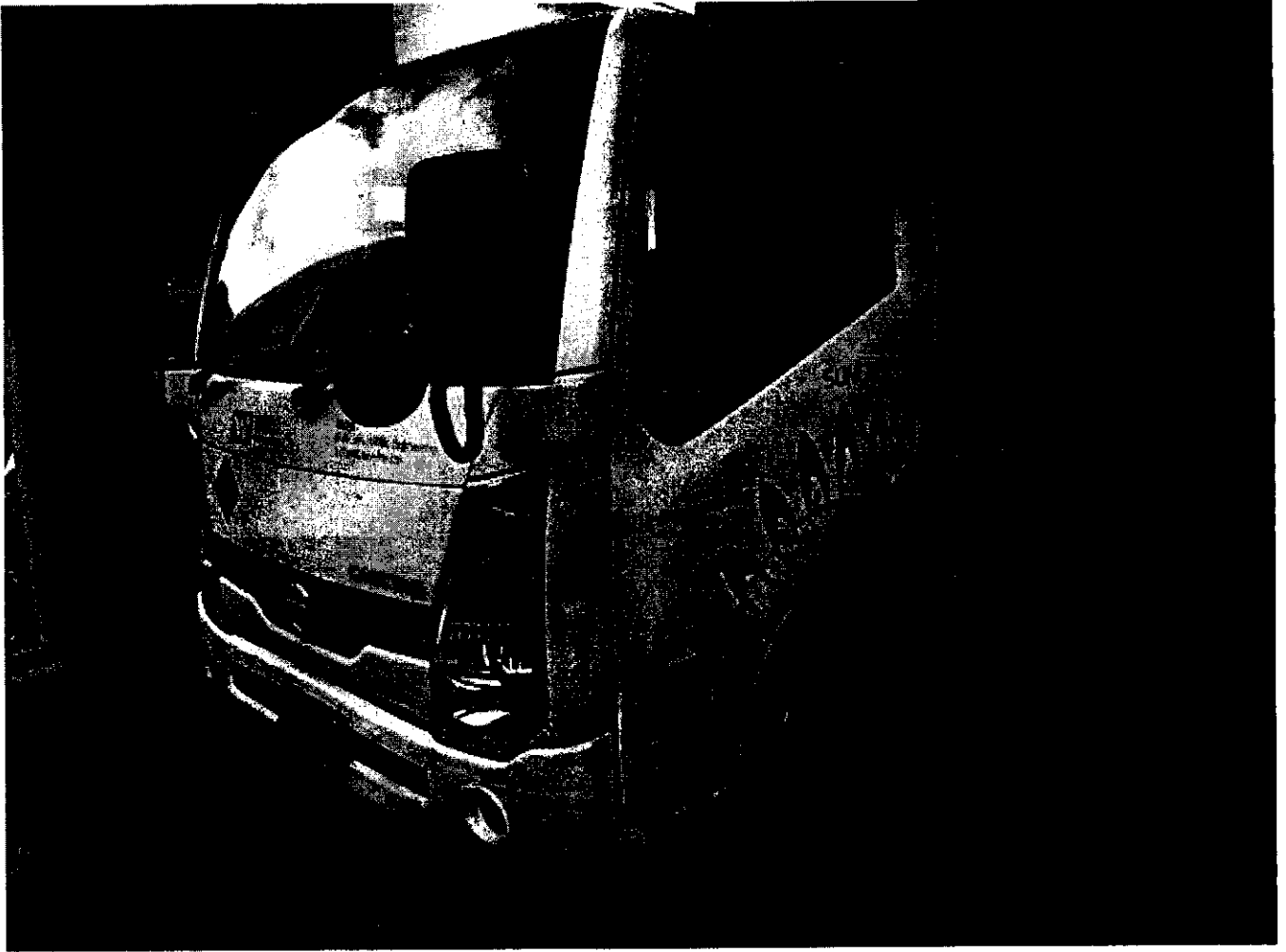
Accident Photo



Accident Photo



Accident Photo



### 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	12/10/2017 13:17
Date Of Accident	09/10/2017 14:00
Exact Location Of Accident	186 JOO CHIAT TERRACE
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT2914P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE LTD
Co Reg No	199400399N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96457921

#### Vehicle Particulars

Manufacturer	BMW
Model	316
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	13202430

#### Driver

Name of Driver	GINA TNG HUIZHAN
NRIC No	S8502452C
Date Of Birth	19/01/1985
Occupation	INDOOR
Date Of Driving Pass	01/07/2011
Driving Experience	6 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97350011
Fax Number	
Contact Number	
Email Address	GINATNG11@GMAIL.COM

Address	628 JURONG WEST ST 65 #05-392
Postcode	640628
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	1

#### 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 ATTACH.

#### 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	GBC2324M
Vehicle Make/Model/Colour	NISSAN CABSTAR WHITE
Details Of Properties	
Name of Driver	NG KENNY
NRIC/Passport Number	S7922213E
Contact Number	97931513
Address	BLK 103 TAMPINES ST 11 #04-41
Postcode	520103
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	LEFT
No. Of Passenger (Including Driver)	1

#### Details of Witness

Name	
Phone Number	
Email Address	

# SKETCH PLAN

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(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

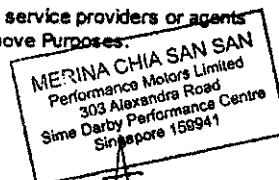
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

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

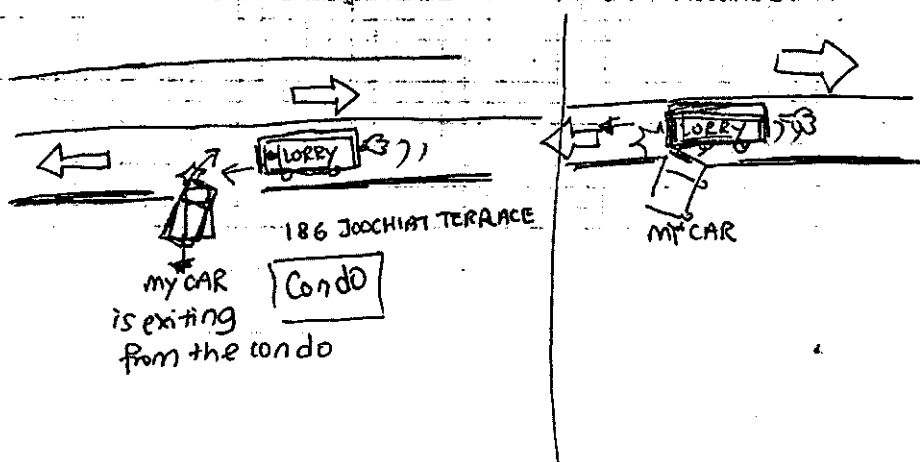


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



**Describe Circumstances of the Accident**

Today at 2pm, I was at 186 JOO CHIAT TERRACE, about to exit the condominium to make a right turn. I was stationary when a speeding aggressive lorry drove towards my direction and crashed into the front left corner of my car. Due to the high speed he was driving, the impact was huge and the front left portion of my car was badly damaged. The driver was very aggressive in his driving, reckless and seemed to be disorientated.

**Declaration**

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

*[Signature]*

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

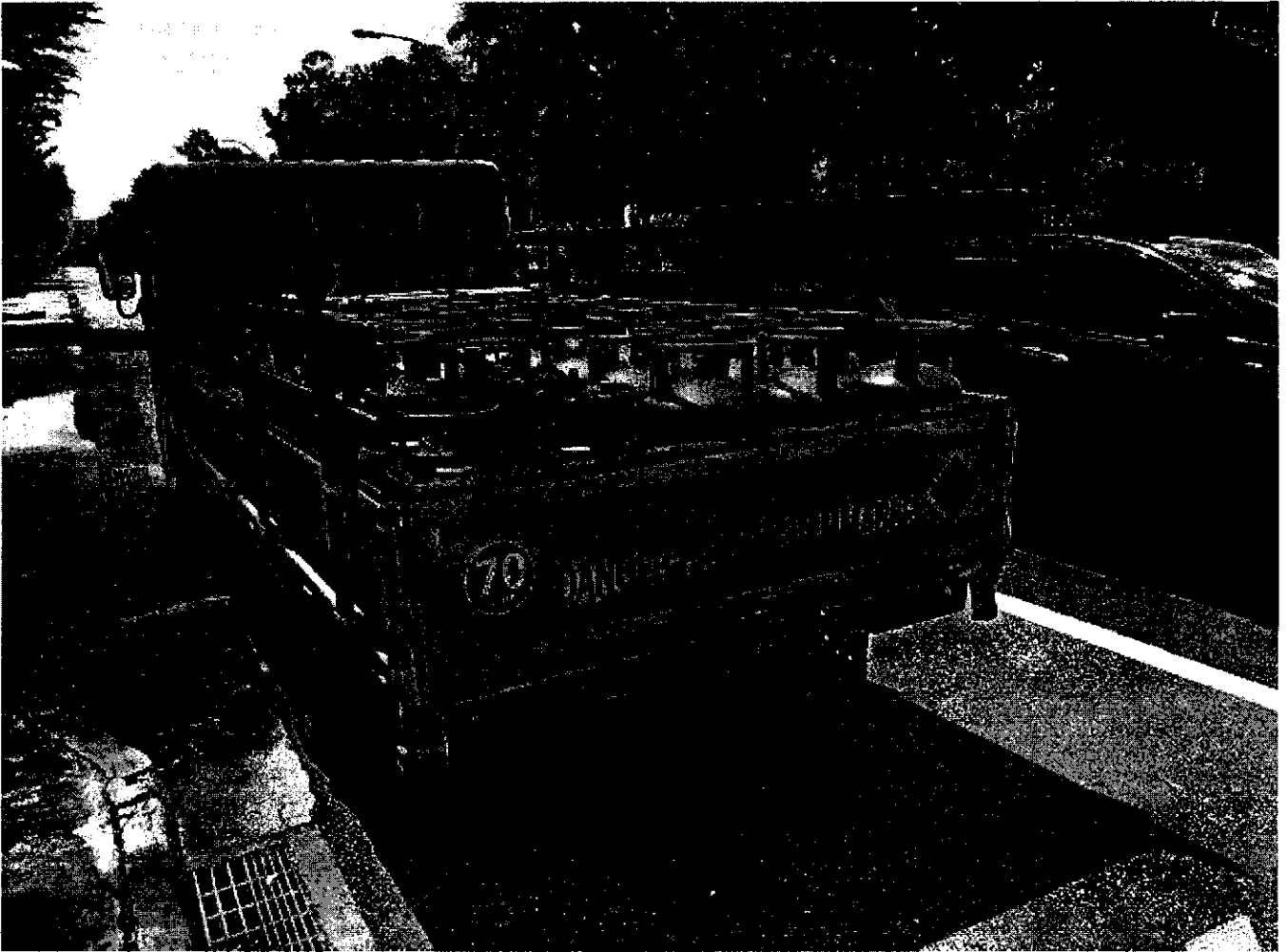
7pm . 9/10/17

MERINA CHIA SAN SAN  
Performance Motors Limited  
303 Alexandra Road  
Sime Darby Performance Centre  
Singapore 159841

Witnessed by Reporting Centre Personnel



Accident Photo



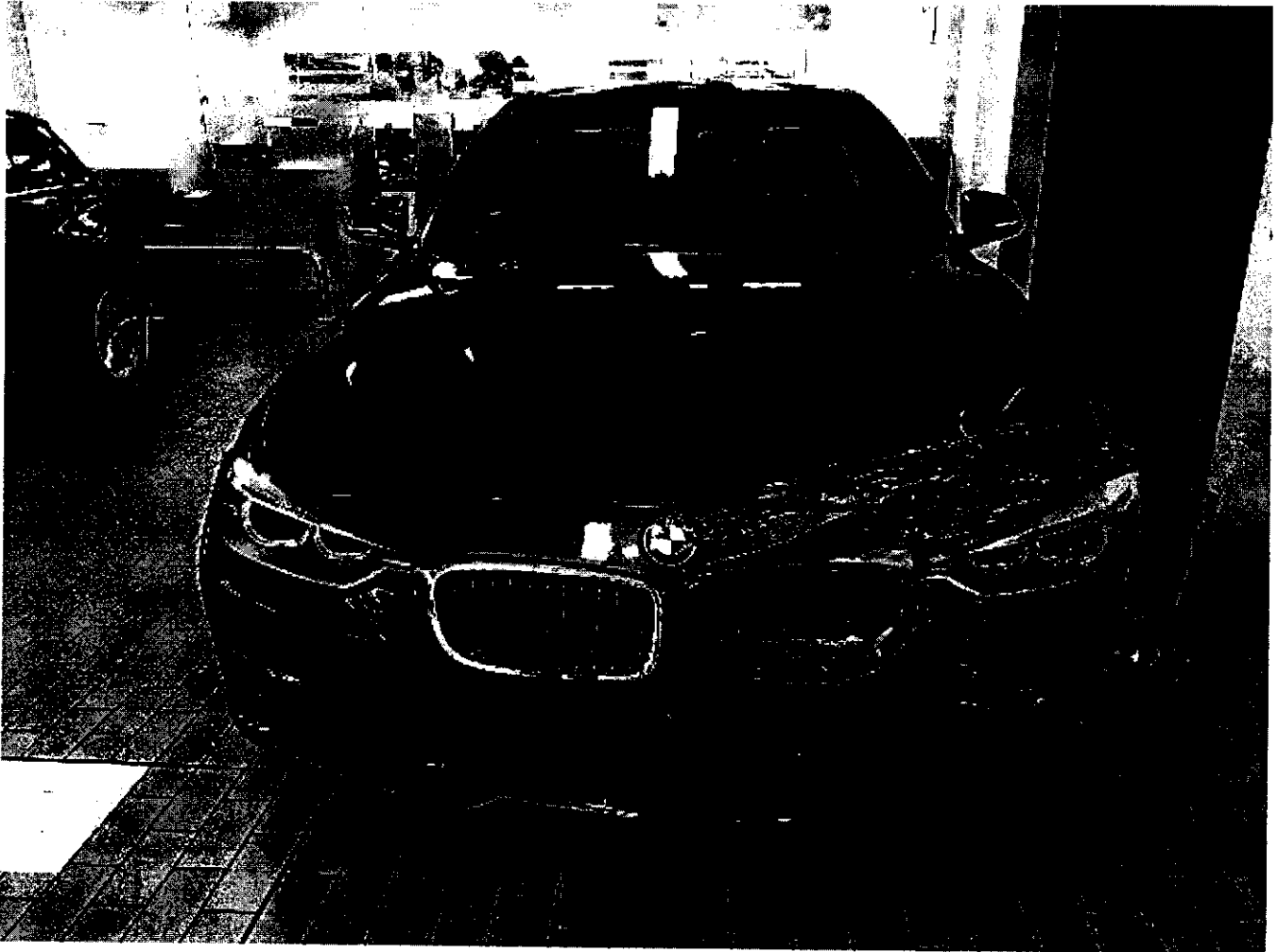
Accident Photo



Accident Photo



Accident Photo



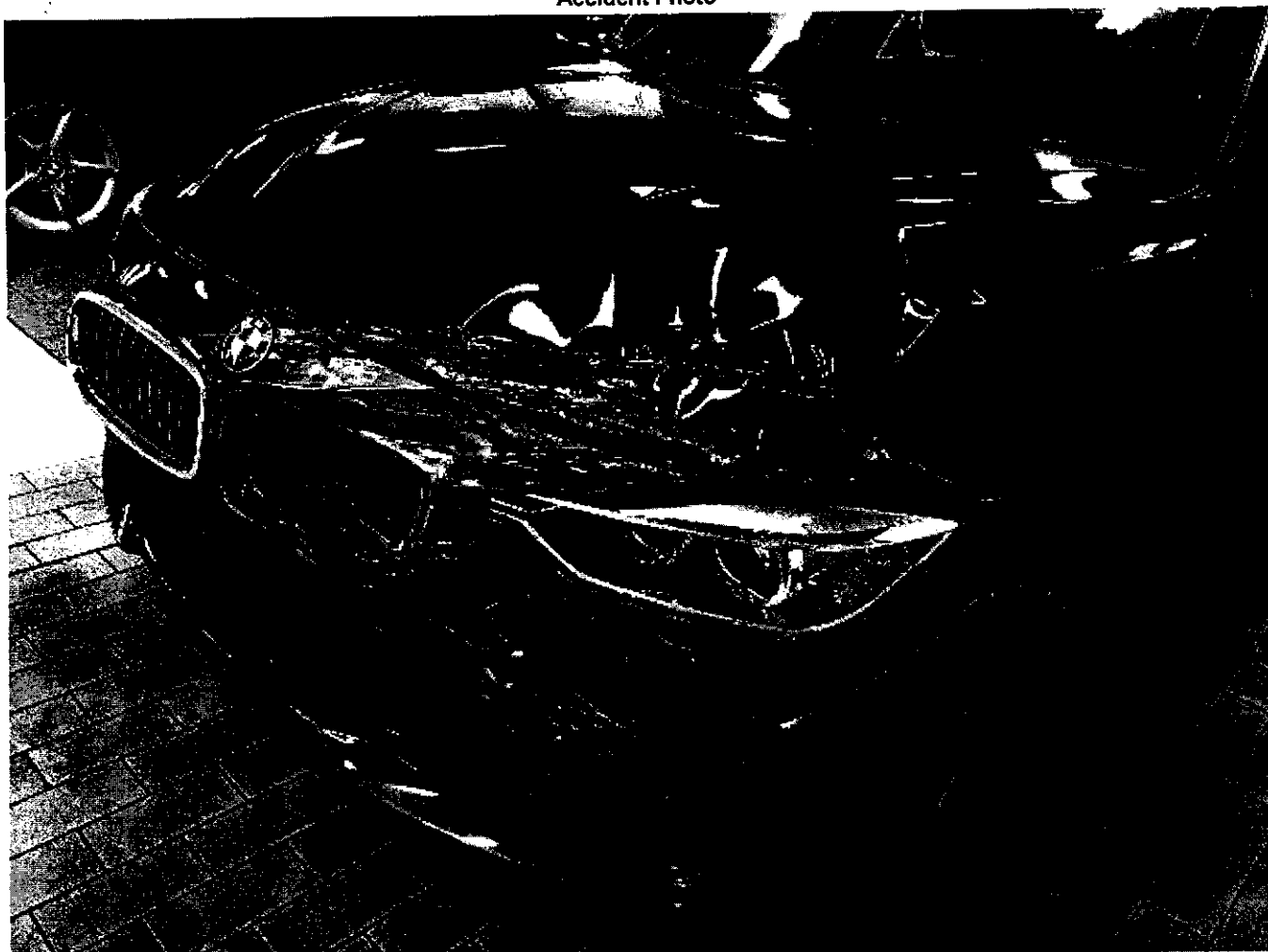
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Accident Photo



Accident Photo

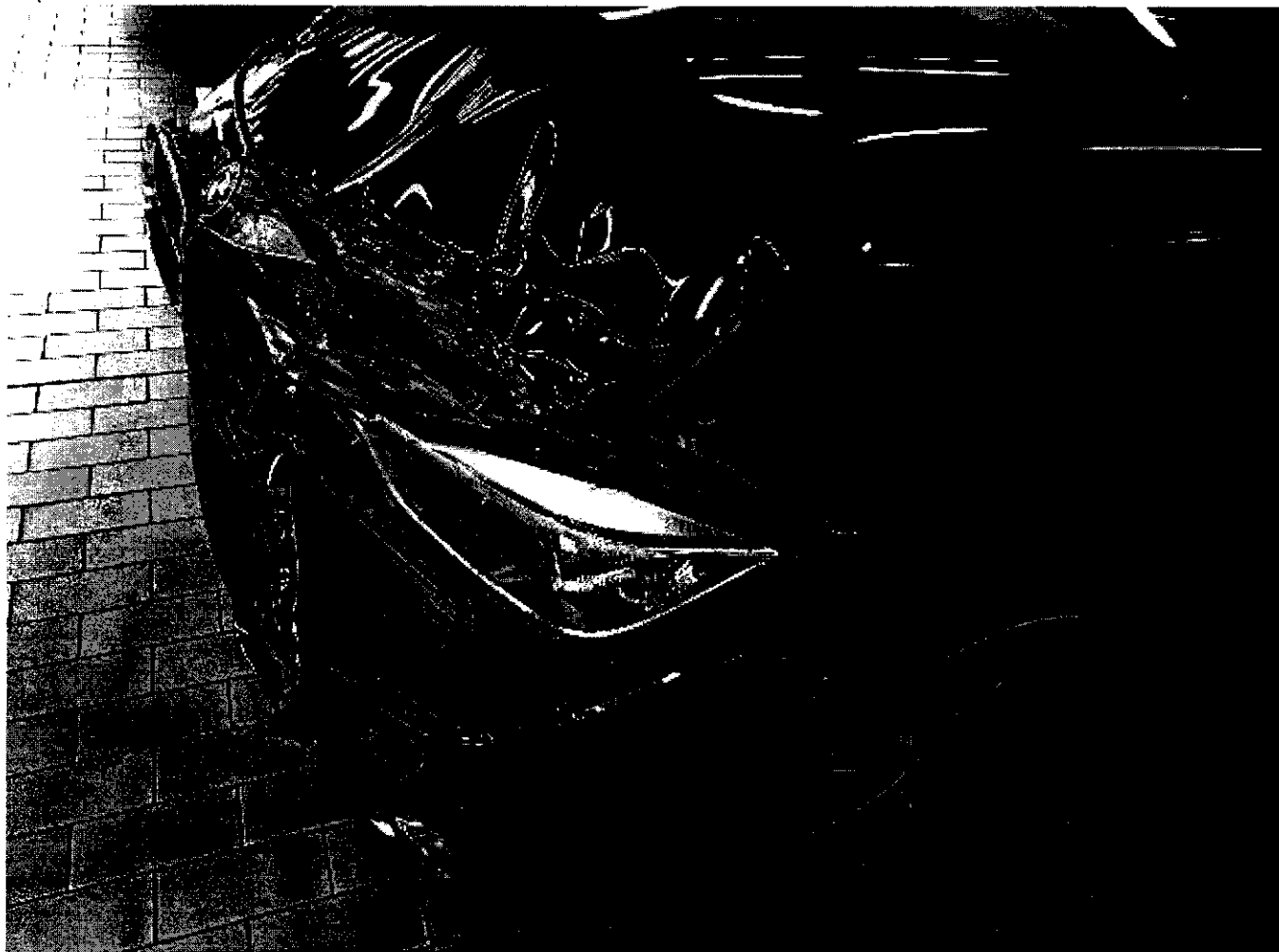


Accident Photo





Accident Photo



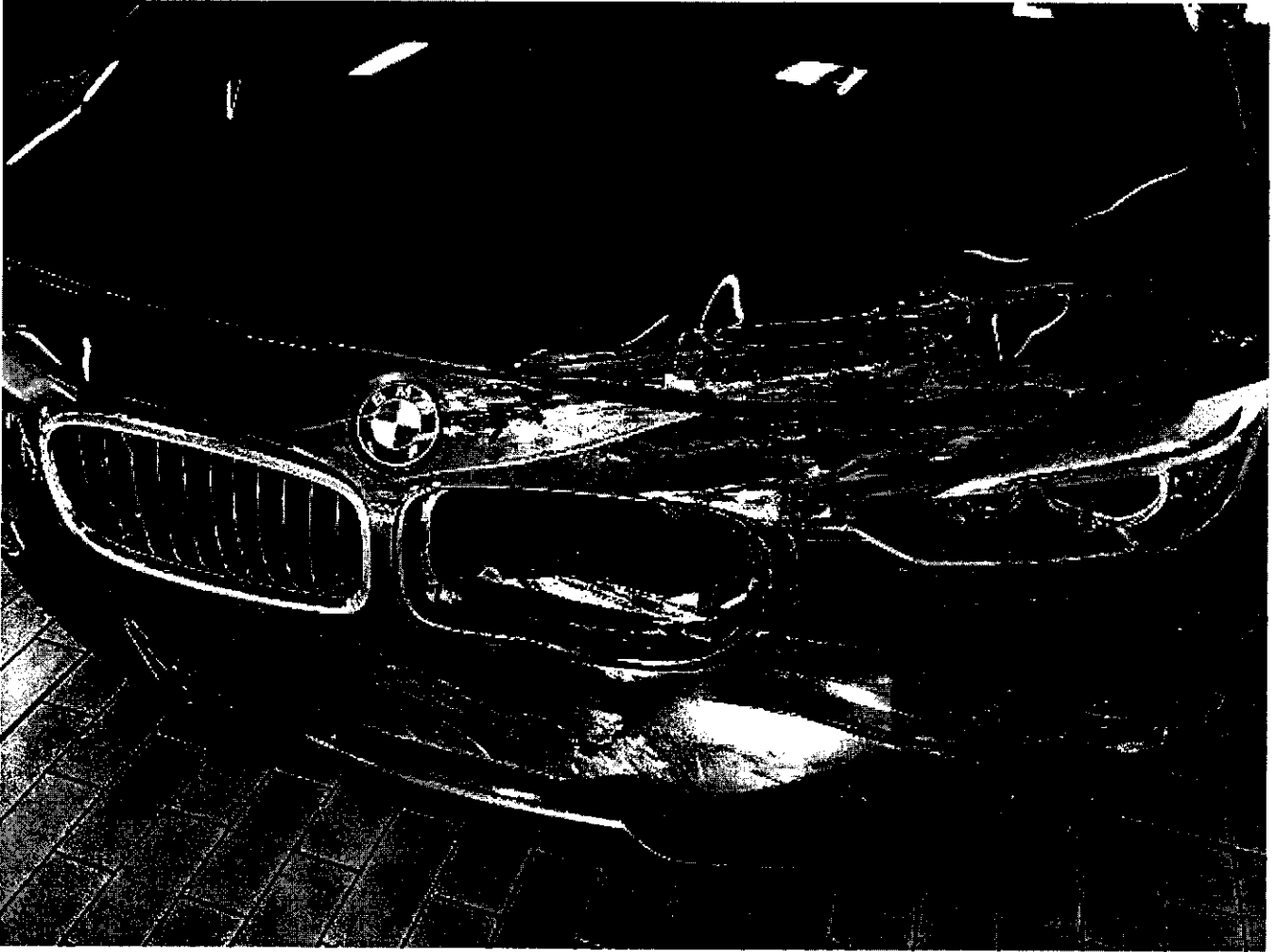
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Accident Photo



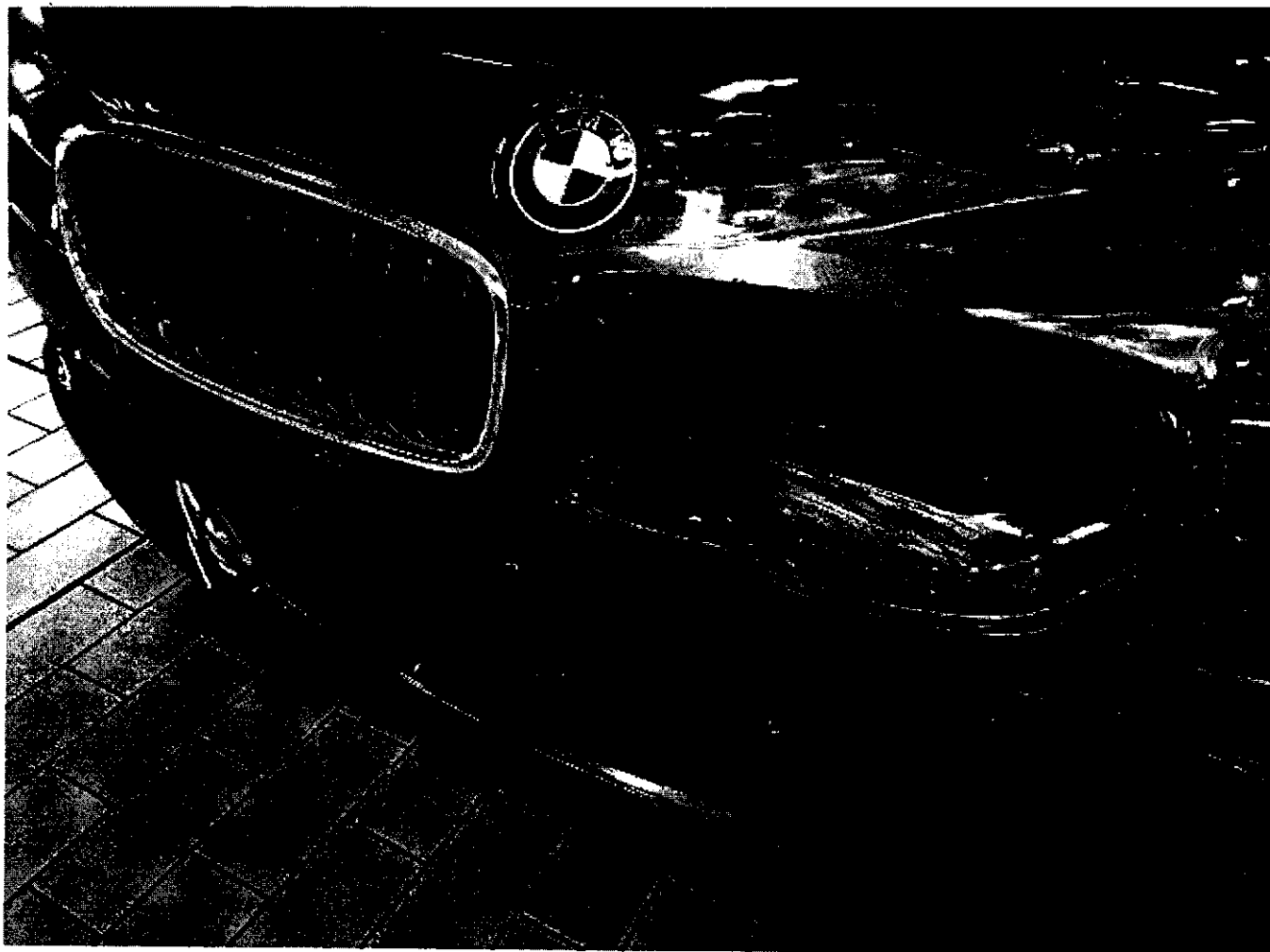
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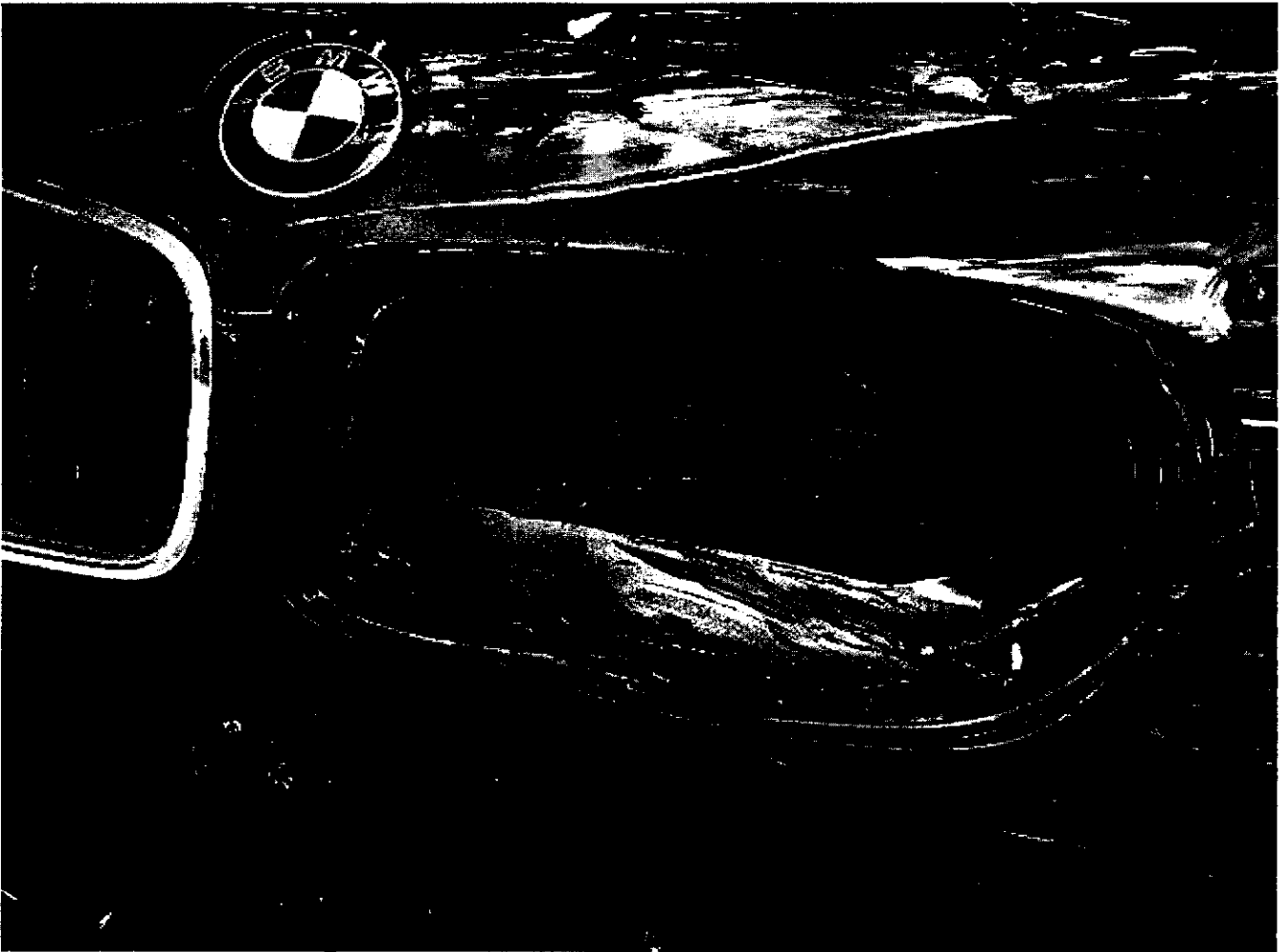
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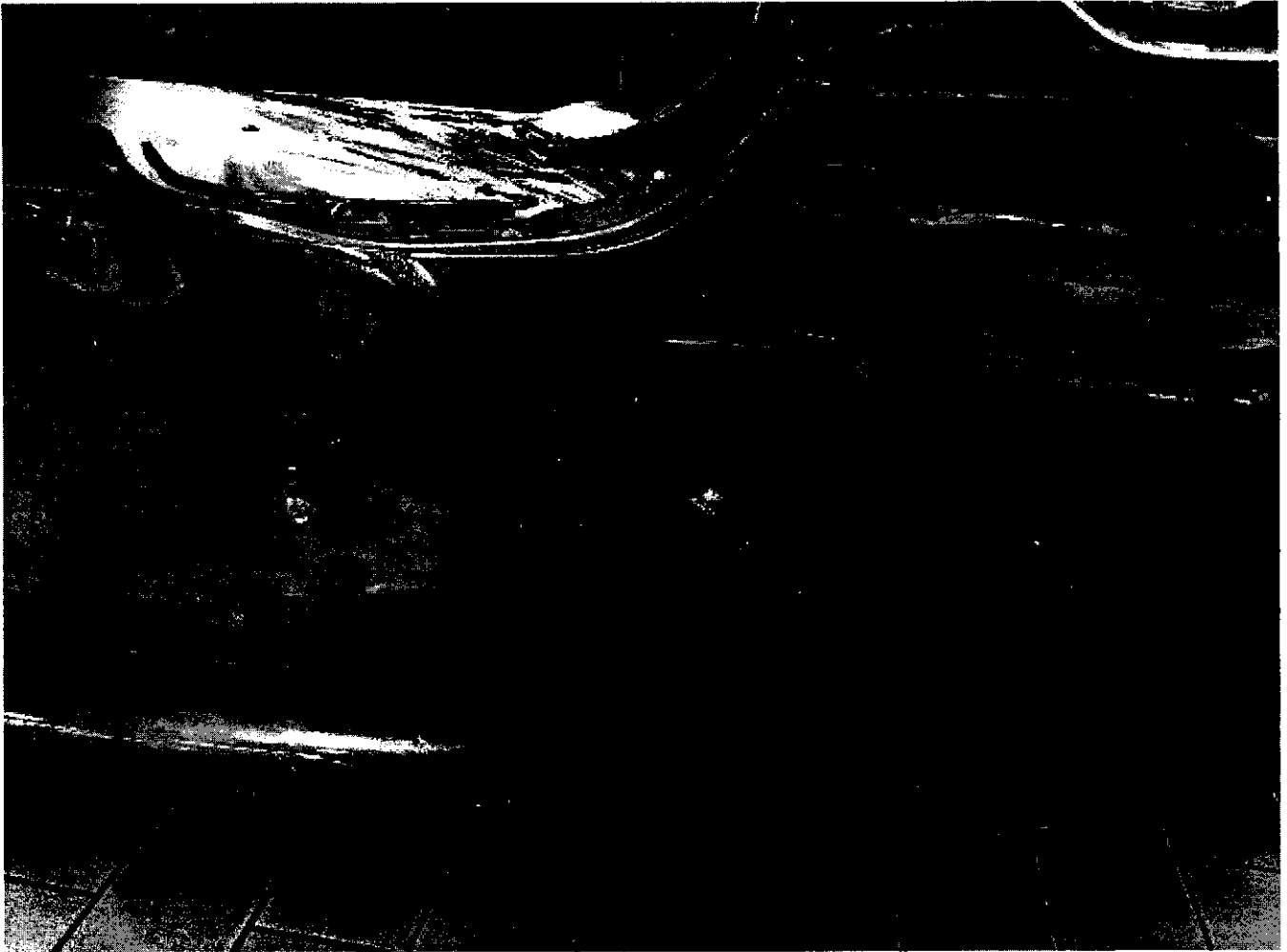
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Accident Photo



Accident Photo





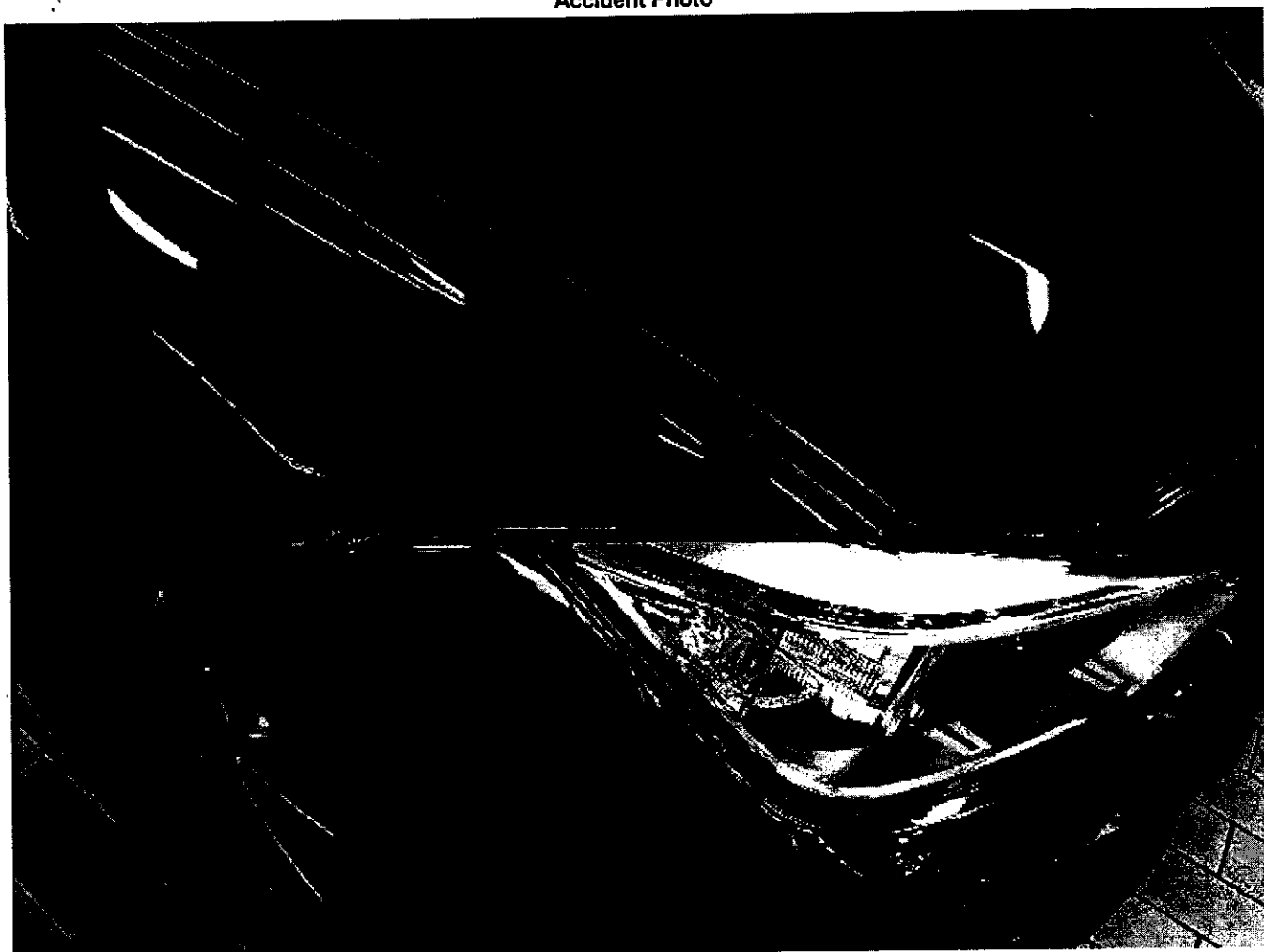
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Accident Photo



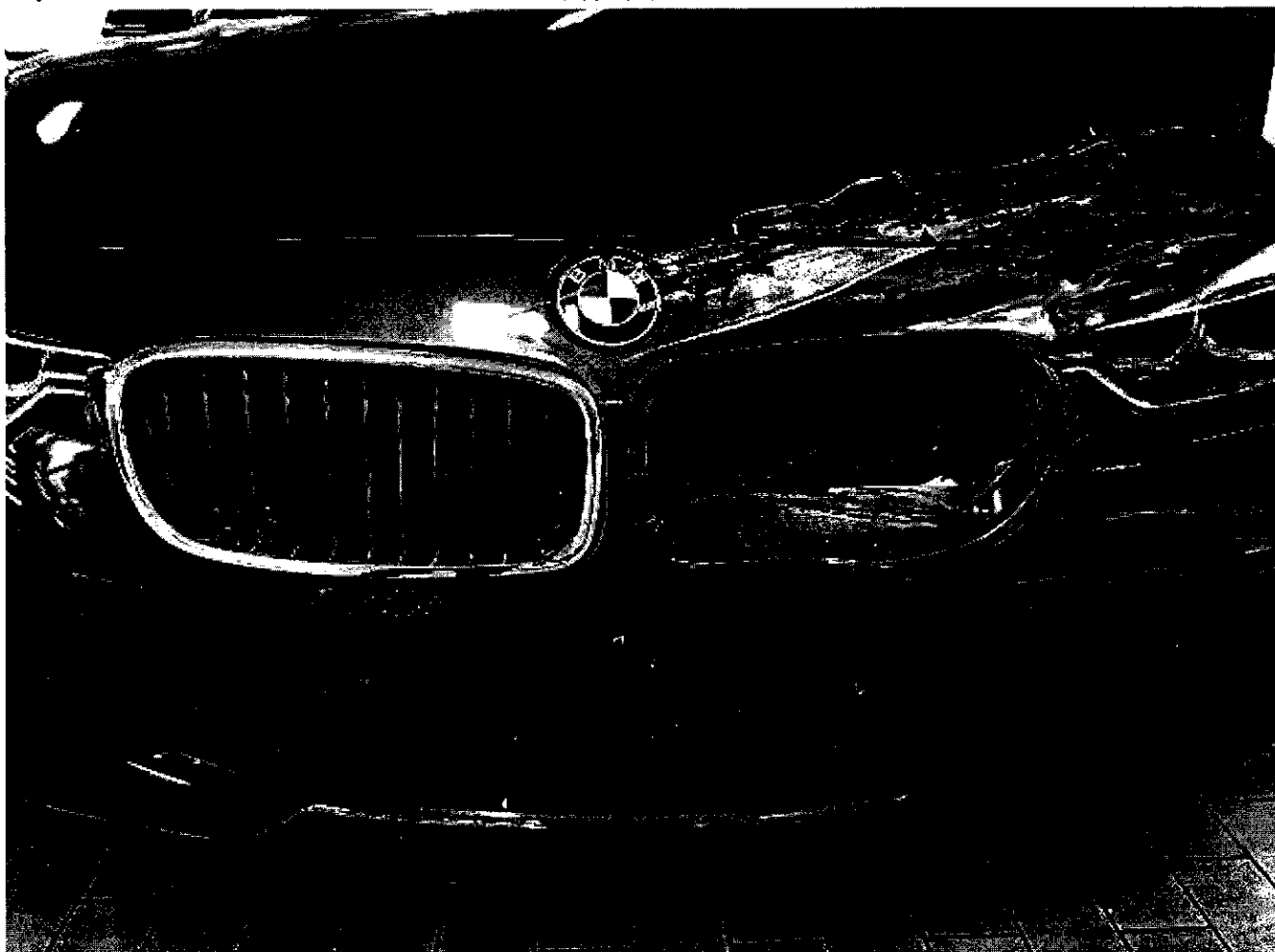
Accident Photo



Accident Photo



Accident Photo



Accident Photo



# Heng Motor Services

Blk 5 Defu Lane 10, #01-582, Singapore 538186

Mobile: 8112 3936 / 9726 8981 Email: wkh\_tsj@hotmail.com

Business Reg. No. : 53029928C

MSIG

## Invoice

Date : 24/10/2017  
Ref: GBC2324M  
Vehicle model : Nissan Cabstar  
Chassis no. : JN1SC2F24Z0850105

Item	Description	Condition	Qty	Unit Price	Workshop est
<b>Vehicle Parts</b>					
<u>List items</u>					
1	Air cleaner body ✓ CRA	Damaged	1	382.10	382.10
2	Front LH fender ✓ DD	Dented	1	313.10	313.10
3	Front LH inner fender X NN	Dented	1	220.00	220.00
4	Front LH fender splash shield ✓ DD	Dented	1	75.40	75.40
5	Front LH fender splash shield clips NN		8	0.00	0.00
6	Engine cover -below X NN	Dented	1	250.00	250.00
7	Side Gate step panel XR	Dented / repair	1	0.00	0.00
8	Battery 105D31R ✓ DD	Dented	1	250.00	125 250.00
9	Battery Bracket X R	Dented / repair	1	0.00	0.00
10	Side body panel LH X R	Dented / repair	1	0.00	0.00
11	Rear LH fender X R	Dented	1	313.10	313.10
12	Side body panel hinge XR	Dented / repair	2	0.00	0.00
13	Side body panel handle X R	Dented / repair	1	0.00	0.00
14	Rear Tyre X NN	Dented	1	115.00	115.00
15	Frame Assy - LH X R	Dented / repair	1	0.00	0.00
<b>Total for Vehicle Spare Parts</b>				<b>\$895.60</b>	<b>\$1,918.70</b>
<b>Labour &amp; Painting</b>					
1	To remove / replace air cleaner body.				60.00
2	To remove / replace front LH fender, front LH fender splash shield, front LH fender splash shield clip, rear LH fender & etc , air cleaner body				200.00
3	Panel beating of dented battery bracket, side body panel LH, side body panel hinge , side body panel handle, side gate step panel & etc . Repair rear LH wheel mudguard				700.00
4	Painting on affected parts				800.00
5	Labour for changing of damage parts, and to check, align, straighten, weld parts as required				500.00
<b>Total Labour &amp; Spray Painting</b>				<b>1600</b>	<b>\$2,260.00</b>

Grand Total Repair Costs

**\$4,178.70**

Part (list)

Discount (30%)

\$895.60

- \$268.68

\$626.92

\$1600.00

\$2226.92

- \$445.39

\$1781.53

For & on behalf of, Heng Motor Services

Labour

Discount 25% (hump sum)

\* hump sum → \$1800

Repair Days → 4 days.

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	12 Oct 2017		13 Nov 2017 10:28 <a href="#">Edit Adj Rpt</a>	<b>S\$1,800.00</b> <a href="#">Edit Estimates</a>	<b>S\$1,800.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

<b>Main</b>	<b>Reference</b>	<b>Claim Details</b>	<b>Documents</b>	<b>Show All</b>
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CLAIM SUBFOLDER DETAILS			[Created by Insurer]
Insured:	<b>SIME DARBY SERVICES PTE LTD</b> , Co. Reg. No.: 199602295R		
Main Claimant:	<b>F &amp; C ENTERPRISE (S) PTE LTD</b> , Co. Reg. No.: 199602295R		
Vehicle Reg. No.:	<b>GBC2324M</b>	Date of Loss:	09/10/2017 14:00 - :59
Claim Type:	<b>TP / 535030</b>	Policy/Cover Note No.:	29040568MCY (Comprehensive) Coverage: 01/10/2017 - 30/09/2018
Vehicle Reg. No. (Insured):	<b>SKT2914P</b>	Policy No. (Claimant):	
		Excess:	S\$1,000.00
Repairer:	<b>Heng Motor Services (HQ)</b> BLK 91 DEFU LANE 10 #01-05B SWEE HENG BUILDING, 539221 Defu Lane - Tel: 81123936		
Handling Insurer:	<b>MSIG Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: +65 6827 7888 ... [Handled by <b>Jasmine Lok Kheng Kwei</b> - 6594 2550]		
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>Teo Cheng Ming Wilson</b> ] ... [Final Rpt due 13/12/2017]		
Driver/Custodian (Insured):	GINA TNG HUIZHAN (32 / Female), NRIC: S8502452C		
Adj Asg. Remarks:	Third Party Pre-Repair Inspection		

ASSOCIATED MAIL RECEIVED	<a href="#">View All</a>	<a href="#">Compose Case Mail</a>
There are no mail for this case.		

ALL ASSOCIATED TASKS <input type="checkbox"/>										<a href="#">View All</a>	<a href="#">Search Tasks</a>	<a href="#">Create New Task</a>	<a href="#">Complete</a>
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?				
No results.													



## Claim Documents

\*GBC2324M (535030)

[SKT2914P]

TP

F & C ENTERPRISE (S) PTE LTD

Oct 9 2017 2:00PM

[SIME DARBY SERVICES PTE LTD]

Heng Motor Services

<a href="#">Upload Documents</a>   <a href="#">Upload Photos</a>   <a href="#">Compose New Letter</a>			<b>View</b> <a href="#">View in Browser</a>		
<b>Assessment Reports</b>			1 per page	<input checked="" type="checkbox"/>	
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<b>Photos/Images</b>			3 per page	<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
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				1 per page	<input checked="" type="checkbox"/>
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2	16/10/17 10:10	E-FILE REPORT (SKT2914P)	1	Load PDF	
3	16/10/17 10:10	E-FILE REPORT (GBC2324M)	1	Load PDF	

## Documents Checklist

DOCUMENTS CHECKLIST		Reset	Save	Print
There are no document checklists configured.				
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>				
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>				

# 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/MSG17019899/WRBE2

Date: 10/01/2018

### REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	29040568MCY
Claimant Vehicle No :	GBC2324M	Insured Vehicle No :	SKT2914P
Date of Loss:	09/10/2017	Nature of Claim:	TP
		Claim No:	535030

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	<b>GBC2324M</b>		
Make & Model:	NISSAN CABSTAR, 3.0 5M/T ABS 2DR 2WD EURO 5 (A)	Engine No:	ZD30289696K
Reg. Date:	06/09/2011 (Man. Year: 2011)	Chassis No:	JN1SC2F24Z0850105
Colour:	White	Odometer:	190648 km
Engine Capacity:	2953 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	<b>Market Value/New Car Price</b>		

### 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:	185 R15C	Rear Tyre Size:	165 R13C
Front Left Side:	West Lake 4 mm	Rear Left Side:	CHAO YANG 4 mm
Front Right Side:	West Lake 4 mm	Rear Right Side:	CHAO YANG 4 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,918.70	626.92	1,291.78	67.33
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,260.00	1,600.00	660.00	29.20
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>4,178.70</b>	<b>2,226.92</b>	<b>1,951.78</b>	<b>46.71</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>1,800.00</b>		
<b>Nett Amount (S\$)</b>	<b>4,178.70</b>	<b>1,800.00</b>	<b>2,378.70</b>	<b>56.92</b>

### INSPECTION

Date of Assignment:	13/11/2017	
Date Inspected:	19/10/2017 Inspected At:	Heng Motor Services (HQ) BLK 91 DEFU LANE 10 #01-05B SWEE HENG BUILDING Singapore 539221
Estimated Period of Repair:	4.0 days	

Adjuster: Teo Cheng Ming Wilson

Manager: Janice Lee Si Hua

*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

<b>Part Source:</b>	(Last Synchronised: 10 Jan 2018)	
<b>Parts:</b>	N/A	NISSAN CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5 (A) (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for GBC2324M)	
<b>Validity:</b>	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	
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.	

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*AIR CLEANER BODY	Cracked	382.10 F	*382.10 FL
2	1		*FRONT LH FENDER	Dented	313.10 F	*313.10 FL
3	1		*FRONT LH INNER FENDER	Not Necessary	220.00 F	*- FL
4	1		*FRONT LH FENDER SPLASH SHIELD	Dented	75.40 F	*75.40 FL
5	8		*FRONT LH FENDER SPLASH SHIELD CLIPS (NPA)	Not Necessary	0.00 F	*- FL
6	1		*ENGINE COVER - BELOW	Not Necessary	250.00 F	*- FL
7	1		*SIDE GATE STEP PANEL (NPA)	Repair	0.00 F	*- FL
8	1		*BATTERY 105D31R	Dented	250.00 F	*125.00 FL
9	1		*BATTERY BRACKET (NPA)	Repair	0.00 F	*- FL
10	1		*SIDE BODY PANEL LH (NPA)	Repair	0.00 F	*- FL
11	1		*REAR LH FENDER	Repair	313.10 F	*- FL
12	2		*SIDE BODY PANEL HINGE (NPA)	Repair	0.00 F	*- FL
13	1		*SIDE BODY PANEL HANDLE (NPA)	Repair	0.00 F	*- FL
14	1		*REAR TYRE	Not Necessary	115.00 F	*- FL
15	1		*FRAME ASSY - LH (NPA)	Repair	0.00 F	*- FL

F=Franchise part. L=ListItemDisc.

<b>Sub Total (\$\$)</b>	<b>1,918.70</b>	<b>895.60</b>
<b>- List Item Discount on L Items 0.00/30.00% (\$\$)</b>	<b>0.00</b>	<b>268.68</b>
<b>Total Parts (\$\$)</b>	<b>1,918.70</b>	<b>626.92</b>

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
<b>Labour Items</b>				
1	TO REMOVE / REPLACE AIR CLEANER BODY	New	60.00	0.00
2	TO REMOVE / REPLACE FRONT LH FENDER, FRONT LH FENDER SPLASH SHIELD, FRONT LH FENDER SPLASH SHIELD CLIP, REAR LH FENDER & ETC, AIR CLEANER BODY	New	200.00	200.00
3	PANEL BEATING OF DENTED BATTERY BRACKET, SIDE BODY PANEL LH, SIDE BODY PANEL HINGE, SIDE BODY PANEL HANDLE, SIDE GATE STEP PANEL & ETC	New	700.00	600.00
4	PAINTING ON AFFECTED PARTS	New	800.00	800.00
5	LABOUR OF CHANGING OF DAMAGE PARTS, AND TO CHECK, ALIGN, STRAIGHTEN, WELD PARTS AS REQUIRED	New	500.00	0.00
Gross Labour Cost (S\$)			2,260.00	1,600.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >