M 445 TI W 41	Mr.	ASSI	GNMEN	T (Office)			
NAMUN rom (Person):	Ikne Tay	of		CTI	Date/	Time: 20-11-2017	130pm
stimated Cost:				Bill to:			
	TP RES / OD R					000 00170	
	cle No:				Insured:	afore als	
	/s				Tel:		
of	POFI HESHMG	BIK 160 Sir	1 mmg	Drive #07			
Policy No:	DWHC3H 14041	491 700		Claim No: _	OF IMINS	0668601	
Sum Insured:_				Excess:			
Make of Veh: (Client's Record)					D.0.4	1411 2017	
	REP. / REV 24 00-11-1017 2-30		itacted:	Shann	H.O Vehicle	D.D. Endorsement:	
		n (×) Es					
Date/Time	SI TAIH-		10140				
Date/Time	1 > 1 / 1 / 1 1 -			a. /Vm20	0	O.A. 3	Попи
Date/Time		- ner lovo	Trees IS	C S / SUPPY			1 4 4
Date/Time	SJD 8747D	THAT	and the same of th	15/ The	-		
Date/Time	SID 8767D Dismuntle	05/11-PC : true F105-11-40	and the same of th	15 / Php			

ASSESSMENT OF CARRIED	: Prell. Report	Days Of Mahair		
05/12/2017	: Final Report	Resurvey No. of T	rip: Survey?	ea.
Cara Time: File Raturn to 1			71919\$173	nor l
3		Add Fee: Stellas	\$	_0
		Intérvés	\$ +5000	
Report Format	PRS	Teon in a	Š men	
Lump Sum I.B.h.		(1) +3 (4) (5)		

Survey Department Check List (Case Handler)

Reference		CHECK LIST	case man	idicij	
Policy Ty	pe: OD / TP / TP RES / TL / EVA	Case H	landler	Тур	oist
Admin (): Case handler to make sure all Inform	mation created	by the assi	gnment tea	m are ACCURATE
(1) Office	Assign Form	Y-Date	N-Date	Y-Date	N-Date
С	Reference No.			-	
С	Customer Code	1			
N	Assign From	/			
C	Assign Date	1			
С	Veh No (Inspected)	/			
C	Veh No (Insured)	1			
C	D.O.A	1			
C	Policy No	/			
С	Claim No	/			
C	Insurance Authorisation (CA /REV/REP)				
С	Report Type				
c	Weekend Charges				
N	Survey held at/Repairer	1			
С	Excess				
		Marie Control Control Control		220000000000000000000000000000000000000	
Surveyo		the surveryor c	ompleted a	ll required	information.
Subjective Spiriters	nment Form			-	
С	Vehicle No	/,			
С	Regn Month/Year	/			
Ν.	Vehicle Type	V			
N	Make & Model	/			
C	Engine Capacity. (C.C)				± 1
N	Colour	/			- 25-52-11-2
С	Odometer. (Sp.Reading)	/			
С	Chassis No	V			
N .	General Condition	V			
N	Steering	1			
Ν	Brake	/			
N	Modification (Modi)	1			
С	Tyre Size				1.5
N	Tyre Make				
C	Tyre Balance				
С	Date of Inspection				
N	Survey held	/			
N	Des.of Damages	/			
(2) Syste	m - (Views/Merimen)				
С	Damaged Vehicle Photographs Uploaded				
(3) Morl	shop Estimate/Assignment Form			3	
(3) Work	ALL Parts condition				
C	Market Value for OD cases		-	-	
			100	-	
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)		-		-
c	Days of repair			-	
C	Finalised Amount		-		1
C (A) Systo	Re-inspection Cases to Finalize within 5 Days m - (Views/Merimen)				
(4) Syste	Resurvey photo Uploaded		-		

*C: Critical *N: Non-Critical

Check By:

Case Handler

Date



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

CHI	NA TAIPING INSU	RANCE (S) PTE LTD	Ref : CS3/CTI17022	20° 30.0° 1
3 A1	NSON ROAD #16-		Date : 20-11-2017	
1.	TARREST	Policy Particula	rs :- (THIRD PARTY CLA	IM)
	Insured Veh.	SJD 8767D	Veh. Inspected	SLT 7291H
	Policy No.	DMHCSN1709491700	Coverage (\$)	0.00
	Claim No.	SNM17D06668C02	Excess (\$)	0.00
	Assign From	MERIMEN (IRENE TAY)	Assign Date	20/11/2017
2.		Vehicle Pa	articulars & Condition	v sport til til men til
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	V=0	Steering	V 19 9 = = -
	Brakes		Modification	
	General			- W - St
3.		Cone	ditions 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.	September 1	Descri	ption of Damages	
5.	September 1	Gene	eral Information	
	Accident Date	14/11/2017	Inspection Date	20/11/2017
	Survey held at	160 SIN MING DRIVE #07-09		
	Repairer	CHUAN HO AUTO SERVICE		
5a.	diament 13		Remarks	
	B) THE REPAIR E THE REPAIRER V	ON WAS CONDUCTED ON A ' STIMATE WAS NOT PRESEN VAS TOLD TO PREPARE THE EASE FIND DAMAGED VEHIC	TED AT THE TIME OF INSPI ESTIMATE.	SIS. ECTION.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Ad) Submit	ted Ins Auth'e	d Status	
Main	17 Nov 2017		20 Nov 2017 14:30 Assign				New Assig Cancel Ca	
	Main	Re	ference	Clair	m Details	Doc	uments	Show All
CLAIM S	UBFOLDER DET	TAILS				[Create	ed by insurer]	
Insured:								
Main Cla	imant:	YAM MENG YO	OKE			Paramonia and		
Vehicle F	Reg. No.:	SLT7291H			te of Loss:		017 07:00 - :59	
Claim Ty	pe:	TP / SNM17	D06668C02	Po	licy/Cover No	te No.: DMHCS	N1709491700	
Vehicle Reg. No. (Claimant): (Insured):			nant):					
				Ex	cess:	5\$0.00		
Repairer	:					, 575722 Sin Ming		
Handling	Insurer:	China Taiping 638986192]	Insurance (Sin	gapore) Pte. L	td. (HQ) - Tel:	6389 6111 [Hai	ndled by Irene Ta	ay Hui Ping -
Adjuster						inal Rpt due 29,	/11/2017]	
Adj Asg.	Remarks:	PLEASE ASSIST	T TO CONDUCT PR	RS AND REVERT	WITH YOUR RE	ECOMMENDATION		
ASSOCI	ATED MAIL REC	EIVED				V	ew All Com	pose Case Mail
There are	no mail for this	case.						
8					200			4
ALL ASS	SOCIATED TASK	(S			View All	Search Tasks	Create New Task	Complete
Due Da	ate Priority	Type Task (iroup Subjec	t Handler	Assigned I	By Complete	d On Create	ed On Done
No result	5.							

Catherine Chong (LKK Auto)

From: Irene Tay <irene.tay@sg.cntaiping.com>

Sent: Monday, 20 November, 2017 12:59 PM
To: Kuru & Co; assignments@lkkauto.com

Cc: assignments@lkkauto.com

Subject: URGENT URGENT CTP REF NO. SJD8767D KURU REF NO. SLT7291H -

ACCIDENT INVOLVING SJD8767D AND SLT7291H ON 14 NOVEMBER 2017

WITHOUT PREJUDICE

Dear Sir/Mdm,

We refer to the above matter and the email below.

Please assist to get your surveyor to liaise with Chuan Ho Auto Service.

Regards

Irene Tay

Claims Department China Taiping Insurance (Singapore) Pte. Ltd. 3, Anson Road, #16-00 Springleaf Tower, Singapore 079909 Co. Reg. No. 200208384E

DID; 6389-6192 Fax: 6224 7175

Email: claimsdept@sg.cntaiping.com Email: irene.tay@sg.cntaiping.com Website: www.sg.cntaiping.com

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

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.

	ACCIDENT STATEMENT
Date Of Report	15/11/2017 15:21
Date Of Accident	14/11/2017 07:15
Exact Location Of Accident	ALONG YISHUN AVE 1 TOWARDS SELETAR WEST LINK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLT7291H
Insured/Policyholder	
Name Of Registered Owner	YAM MENG YOKE
NRIC No	S1514500E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81884198
Alternative Phone No	OFFICE-81884198
M. Link, Donathandana	

Vehicle Particulars

HONDA Manufacturer

Model 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?

THIRD PARTY If No. Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

AXA INSURANCE PTE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

GA288575/1 Policy Number

Cover Note Number

Driver

ALEXANDRA THAM CAIZHU Name of Driver

S8306719E NRIC No 13/02/1983 Date Of Birth INDOOR Occupation 27/06/2002 Date Of Driving Pass

15 YEARS AND 4 MONTHS **Driving Experience**

FEMALE Gender

Mobile Number Fax Number Contact Number

NOEMAIL EMail Address

Email Address

DETAILS OF INJURED PERSON 1

Name

ALEXANDRA THAM CAIZHU

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLT7291H

Were seat belts worn?

Was injured conveyed to hospital by ambulance?

YES

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

YAM MENG YOKE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLT7291H

Were seat belts worn?

Was injured conveyed to hospital by ambulance?

YES

Address Postcode

DETAILS OF INJURED PERSON 3

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SJD8767D

Were seat belts worn?

Was injured conveyed to hospital by ambulance?

YES

Address

Postcode

Sketch Plan #2 Pg. 1

TCH PLAN	
100 NO. 101 NO	
	- A) SLT 729 B) SJD 8767
	B (20.8767
A CONTRACTOR OF THE PARTY OF TH	DX III
	KO TOTAL TOT
A CCIDENT	
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
Attacked Police Report	
	and the late of the second
	18-7
DECLARATION	
DECLARATION I/We declare the foregoing particulars are true in every respect.	A
DECLARATION I/We declare the foregoing particulars are true in every respect.	
DECLARATION I/We declare the foregoing particulars are true in every respect.	× A
I/We declare the foregoing particulars are true in every respect.	Reporting Centre Personnel's Signature
Policyholder's Signature Driver's Signature Oriver's Signature	Reporting Centre Personnel's Signature Name:
Policyholder's Signature Oriver's Signature (if driver is not the policyholder)	Reporting Centre Personnel's Signature
Policyholder's Signature Driver's Signature Oriver's Signature	Reporting Centre Personnel's Signature Name:



Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999



2 of 3 Report No. T/20171114/2079

CONTINUATION OF REPORT

Driver	and the same of the same of the	electric control of	es never d			
Name	ALEXANDRA THAM CAIZHU			ID No.		S8306719E
Related Vehicle	SLT7291H (Car)			Contact No.		81884198
Hospital/Clinic	KHOO TECK PUAT HOSPITAL			6.000 N.C. C.C. C.C.		Class: 3 Date of Expiry: NIL
Date Treatment	14/11/2017		Date Disch	narge	14/11	/2017
No. of Days gran	ted Medical Leave	04	Degree of	Injury	Slight	
Passenger		51 30 35		100		
Name	YAM MENG YOKE			ID No		S1514500E
Related Vehicle	SLT7291H (Car)			Contact No.		90461818
Hospital/Clinic	KHOO TECK PUAT HOSPITAL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	14/11/2017	Market Samuel	Date Disc	harge	NIL	1
No. of Days gran	ited Medical Leave	NIL	Degree of	Injury	NIL	essential manufacture of the second

Brief Details.

On 14.11.2017 at about 0715hrs, I was driving my mum's car registration plate number SLT7291H (Dark Grey Honda Freed) with my mother who is seated at the front passenger seat and the car had stationary at along Yishun Ave 1 towards Seletar Wet Link as the traffic light was in red. When the traffic light turns to green, the front vehicle moves off follow by my car. Moment later, a car (Grey Honda Civic) turn in from opposite direction from filter lane (believed coming from Seletar West Link towards Yishun Ave 1) had crash into the centre divider railing before crashing in to my front right side of driver's door. Traffic came down and all three of us sustained injuries and was convey by ambulance to Khoo Teck Puat Hospital.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status				
Main	17 Nov 2017		20 Nov 2017 14:30 Edit Ad) Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Cancel Case	Survey Report			
	Main	Re	ference	Claim	Details	Documer	nts]	Show All			
CLAIM S	UBFOLDER DET	TAILS				[Created by	insurer]				
Insured:		-, Co. Reg. No	.: +								
Main Cla	imant:	YAM MENG YO	KE								
Vehicle F	Reg. No.:	SLT7291H		Date	of Loss:	14/11/2017 0	7:00 - :59				
Claim Ty	pe:	TP / SNM17	006668C02	Polic	cy/Cover Note No.:	DMHCSN1709	491700				
Vehicle F		SJD8767D		Polic	cy No. (Claimant):						
				Exce	ess:	S\$0.00					
Repairer	;				Ming Autocity, 57572						
Handling	Insurer:	China Taiping 638986192]	Insurance (Sin	gapore) Pte. Ltd	d. (HQ) - Tel: 6389 6	5111 [Handled	by Irene Tay	Hui Ping -			
Adjuster		29/11/2017]	sultants Pte Ltd	(HQ) - Tel: 625	6-3561 [Handled b	y MA CHIN FOO	K] [Final	Rpt due			
Adj Asg.	Remarks:	PLEASE ASSIST	TO CONDUCT PE	RS AND REVERT V	VITH YOUR RECOMM	ENDATION					
ASSOCI	ATED MAIL REC	CEIVED				View All	Compos	se Case Mail			
There are	no mail for this	case.						-			
E ALL ASS	SOCIATED TASE	KS			View All Search	Tasks Crea	ate New Task	Complete			
Due Da		Type Task 0	roup Subjec	ct Handler	Assigned By	Completed On	Created	On Done?			

Claim Documents

*SLT7291H (SNM17D06668C02) [SJD8767D] YAM MENG YOKE Nov 14 2017 7:00AM [-] Chuan Ho Auto Service

18	Upload Documents	Upload Photos Compose New Letter	View Use Viewe	r 🔻
Doc	umentation		1 per page ▼	V
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	20/11/17 14:32	EMAIL FROM KURU (1)	1 Load PDF	
2	20/11/17 14:32	EMAIL FROM KURU (2)	1 Load PDF	
No		LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	05/12/17 19:37	LKKPhotosIn6-1	1 Load PDF	
2	05/12/17 19:37	LKKPhotosIn6-2	■ Load PDF	
3	05/12/17 19:37	LKKPhotosIn6-3	1 Load PDF	

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:

CS3/CTI17022079/M1BS2

Date:

08/12/2017

REFERENCE

Handling Insurer:

China Taiping Insurance

(Singapore) Pte. Ltd.

Policy No:

DMHCSN1709491700

Claimant

Vehicle No:

Date of Loss:

SLT7291H

14/11/2017

No:

Insured Vehicle SJD8767D

TP

Nature of

Claim:

Claim No:

SNM17D06668C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SLT7291H

Make & Model:

HONDA FREED, 1.5 (A) 09/11/2017 (Man. Year: 2017) Engine No: Chassis No: Odometer:

LEB5576423 GB71047054

501 km

Reg. Date: Colour:

Grey

Engine Capacity: Market Value/New Car Price: 1496 cc N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Good Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

185/65R15

Rear Tyre Size:

185/65R15

Front Left Side:

Dunlop 8 mm

Rear Left Side:

Dunlop 8 mm

Front Right Side:

Dunlop 8 mm

Rear Right Side:

Dunlop 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:

20/11/2017

Date Inspected:

20/11/2017 Inspected At:

Chuan Ho Auto Service

Blk 160 #07-09, Sin Ming Autocity

Singapore 575722

Estimated Period of Repair:

0.0 days

Adjuster: MA CHIN FOOK

Manager: CATHERINE CHONG KAI LING

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.

- 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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$20,000.00 - \$22,000.00

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 08 Dec 2017)

Parts: M1-MPV HONDA FREED 1.5 (A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: (Unsubmitted, no print-code for SLT7291H)

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

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >