

22/03/2002

ISS. REC. BY:

REF: CS / (7A1/70) 22269 / Klvbn2

Special Instruction:

Surveyor: Kevin

ASSIGNMENT (Office)

From (Person): Sharon Ng of GAL Date/Time: 22.11.2017 1238 am

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

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SHD 1658E Insured: YP 5287Bat Workshop m/s Premier Automotive Tel: 6544 6689of 23 Changi South Ave 2 #03-02Policy No: \_\_\_\_\_ Claim No: YP5287B

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

Make of Veh: \_\_\_\_\_ D.O.A. 21.11.2017  
(Client's Record)

CA / REV / REP. / REV 24 HRS Wp1

H.O.D. Endorsement: \_\_\_\_\_

Date/Time: 22.11.2017 9.29am Person Contacted: Vincent Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SHD 1658E - 703/msg14123086 / H14bdl1-1
	YP 5287B - X

DCA: 11/2/14



# Survey Department Check List (Case Handler)

Reference No. : CS 6A17022269 Klvb  
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

		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 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	✓			
---	-------------------------	---	--	--	--

Check By: VERON 27/11/17  
Case Handler Date

\*C: Critical \*N: Non-Critical

21/05/2014



# 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

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI17022269/K1vb

3 TEMASEK AVENUE  
#16-01 CENTENNIAL TOWER  
SINGAPORE 039190

Date : 22-11-2017



Code : GAI

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 5287B	Veh. Inspected	SHD 1658E
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	SHARON NG	Assign Date	22/11/2017

## 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	21/11/2017	Inspection Date	22/11/2017
Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443		

## 5a. Remarks

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

## Catherine Chong (LKK Auto)

---

**From:** Ng, Sharon <Sharon.Ng@sg.gaig.com>  
**Sent:** Wednesday, 22 November, 2017 12:38 AM  
**To:** SUR  
**Cc:** assignments  
**Subject:** FW: Pre-inspection SHD1658E & YP5287B, SKC8697R on 21.11.17  
**Attachments:** 21112017163717-0001.pdf; Insd - YP5287B.PDF

Dear Catherine

Please conduct TP survey to SHD1658E.

Regards  
Sharon Ng  
Great American

-----Original Message-----

**From:** Goh Wee Dek [mailto:weedek.goh@premiertaxi.com]  
**Sent:** Tuesday, November 21, 2017 4:39 PM  
**To:** General Claims <GeneralClaims@sg.gaig.com>  
**Cc:** Gary Shi <gary.shi@premiertaxi.com>; Vincent Chua <vincent.chua@premiertaxi.com>  
**Subject:** Pre-inspection SHD1658E & YP5287B, SKC8697R on 21.11.17

Dear All

We refer to the above mentioned.

Kindly arrange for survey

Regards

Goh Wee Dek  
Assistant Claims Manager  
Premier Automotive Services Pte Ltd

Address: 23 Changi South Ave 2, #01-02 Singapore 486443  
Tel: 6214 8880 Ext 068 | DID: 6544 6682 | Fax: 6214 1511 Visit us at: [www.premiertaxi.com.sg](http://www.premiertaxi.com.sg)

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The content of this e-mail message and any attachments are confidential and may be legally privileged, intended solely for the addressee. If you are not the intended recipient, be advised that any use, dissemination, distribution, or copying of this e-mail is strictly prohibited. If you receive this message in error, please notify the sender immediately by reply email and destroy the message and its attachments.

**Register New Vehicle (Acknowledgement)****Vehicle Particulars**

Vehicle No.:	SHD1658E ✓	Vehicle Scheme:	Taxi (Company)
Vehicle Type:	H11 - Public Transport Taxi (Station Wagon)		
Vehicle Attachment 1:	Air-Con (Taxi)		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HYUNDAI	Vehicle Model:	FD I30CW 1.6 MT 5DR TURBO 2WD
Chassis No.:	KMHDC81SLCU134896 ✓	Engine No.:	D4FBBU010216 ✓
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Diesel	Passenger Capacity:	4
Engine Capacity:	1582 cc	Power Rating:	-
Unladen Weight:	1334 kg	Maximum Laden Weight:	1860 kg
Primary Colour:	Silver	Secondary Colour:	-
First Registration Date:	25 Oct 2011 ✓	Original Registration Date:	25 Oct 2011
Manufacturing Year:	2011	Open Market Value:	\$11,111.00 ✓
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$6,666.00
No. of Transfers:	0		

**Owner Particulars**

Owner Name:	PREMIER TAXIS PTE. LTD.
Owner ID Type:	Company
Owner ID:	200304975H ✓
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.:	11
Registered Street Name:	KUNG CHONG ROAD
Registered Unit No.:	-
Registered Building Name:	ALEXANDRA INDUSTRIAL ESTATE
Registered Postal Code:	159147
COE No. / Expiry Date:	2011090101000356Z / 24 Oct 2019
COE Bid Category:	A - Car (1600cc & below) & Taxi
QP Paid:	\$39,041.00 ✓

**Transaction Details**

Business Transaction Ref. No.:	20111025092509194501
Business Transaction Date:	25 Oct 2011
Business Transaction Time:	09:25:09

**Message**

The above vehicle has been successfully registered.

Please note that \$43,352.00 will be deducted from your GIRO account.

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	21/11/2017 15:33
Date Of Accident	21/11/2017 11:15
Exact Location Of Accident	FARRER ROAD // EMPRESS ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD1658E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I30 CW-1.6 D CRDI (FD) (M)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

### Driver

Name of Driver	CHNG ENG SAN
NRIC No	S1318548D
Date Of Birth	28/03/1958
Occupation	OUTDOOR
Date Of Driving Pass	10/08/1976
Driving Experience	41 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98536983
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 361 #09-310 HOUGANG AVE 5
Postcode	530361
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	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
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)	4

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHANGKAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 109 TAMPINES STREET 11 #01-261 , POSTCODE: 521109 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7819999 - FAX NO: 67832722
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

VEH. A -3 PAX (FEMALE FOREIGNERS - BURMESE) VEH. B - NO PAX VEH. C - 1 PAX (FEMALE CHINESE)

#### 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	YP5287B
Vehicle Make/Model/Colour	TOWING TRUCK
Details Of Properties	VEH. B
Name of Driver	MALE CHINESE
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

#### Details of Witness

Name

Phone Number

Email Address

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKC8697R
Vehicle Make/Model/Colour	SUBARU
Details Of Properties	VEH. C
Name of Driver	HENG MAYLENE
NRIC/Passport Number	S8730079Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

#### Details of Witness

Name

Phone Number

Email Address

#### DETAILS OF INJURED PERSON 1

Name	CHNG ENG SAN - DRIVER OF VEH. A
Approximate Age	
Injuries Sustain	FELT UNWELL, WENT TO CLINIC & HAD 3 DAYS MC
Injured person in which vehicle?	SHD1658E
Were seat belts worn?	YES
Was injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Sketch Plan Pg. 1

### 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.



Policyholder's Signature  
Date & Time:

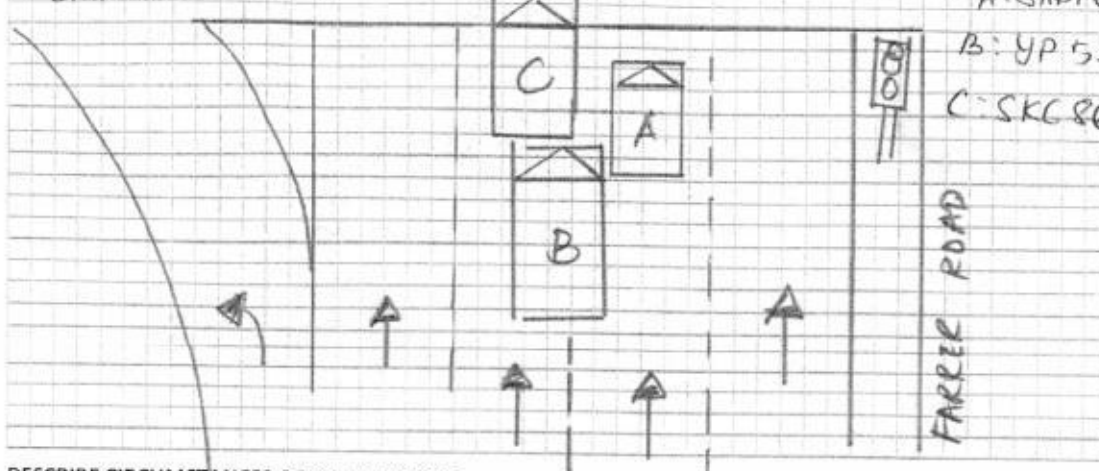
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

# Sketch Plan Pg. 2

SKETCH PLAN

EMPRESS ROAD



A: SHD1658E

B: YP 5287B

C: SKC8697R

FARRER ROAD

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As stated in police report, dated 21 NOV 2017, police report number T/2621121/2091  
at Changkat NPP

### Brief Details.

11-15 HRS

On 21/11/2017 at 11-15 HRS, I was driving along the Farrer Road, towards Lorrie Road direction on the second lane. The traffic volume was heavy at that point of time and raining heavily. I have three passengers onboard.

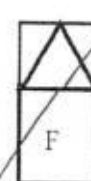
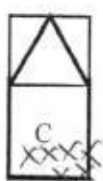
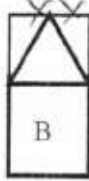
Reaching the T-junction of Farrer Road and Empress Road, the traffic light was red and I was the first vehicle of my second lane to stop. There is also a white Subaru (SKC8697R) stopped on my left (third lane).

Shortly later out of sudden, a lorry (YP5287B) which was travelling behind me, brushed past my left rear diagonally and collided towards the rear of the said white Subaru. Due to the impact, the Subaru car was pushed out of the stop line by one car length. All of us then came out and exchanged our particulars. I did not manage to obtain the lorry driver's particulars. Subsequently, traffic police arrived at scene.

I assessed that my rear bumper left portion was badly dented in. The white Subaru's rear bumper was badly smashed and debris were scattered on the ground. The lorry's front left bumper portion was also broken and dented.

Due to the accident, I went to Medlife Clinic and Surgery for my injury examination and was given 3 days of MC from 21/11/2017 to 23/11/2017. I do not know of any injuries the other parties may have sustained.

## DAMAGES FOUND ON VEHICLES INVOLVED IN THE ACCIDENT



## 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.:



**SINGAPORE  
POLICE FORCE**



T/20171121/2091

Police Station Of Origin:  
Changkat NPP  
109 Tampines Street 11 #01-261  
SINGAPORE 521109  
Tel No: 1800-7819999

1 of 4

Report No. T/20171121/2091

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/11/2017 14:41		Vide Report No.:		Station Diary No.: 30
<b>Informant's Particulars</b>				
Name of Informant: CHNG ENG SAN		Address: APT BLK 361 HOUGANG AVENUE 5 #09-310 SINGAPORE 530361		
ID Type / ID No.: NRIC NO / S1318548D		Contact No.: Home/Office: Mobile: 98536983		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 59	Date of Birth: 28/03/1958	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Taxi driver		Driving Licence Information: Class: 3,4,5		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/11/2017 11:35	Type of Location: T-Junction
Location: Along Road 1: FARRER ROAD EMPRESS ROAD T JUNCTION OF FARRER ROAD AND EMPRESS ROAD				
Weather: Heavy rain		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD1658E	Car	HYUNDAI	FD I30CW 1.6 MT 5DR TURBO 2WD	Silver	Seriously Damaged	3
SKC8697R	Car	SUBARU	FORESTER 2.0X AWD 4AT ABS	White	Seriously Damaged	1
YP5287B	Lorry	ISUZU	NHR85AUE4 AR1	White	Seriously Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20171121/2091

2 of 4

Report No. T/20171121/2091

Police Station Of Origin:  
Changkat NPP  
109 Tampines Street 11 #01-261  
SINGAPORE 521109  
Tel No: 1800-7819999

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver:			
Name	CHNG ENG SAN	ID No.	S1318548D
Related Vehicle	SHD1658E (Car)	Contact No.	98536983
Hospital/Clinic	MEDILIFE CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	21/11/2017	Date Discharge	21/11/2017
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Name			
Name	HENG MAYLENE	ID No.	S8730079Z
Related Vehicle	SKC8697R (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 21/11/2017 at 1137hrs, I was driving along the Farrer Road, towards Lornie Road direction on the second lane. The traffic volume was heavy at that point of time and raining heavily. I have three passengers onboard.

Reaching the T-junction of Farrer Road and Empress Road, the traffic light was red and I was the first vehicle of my second lane to stop. There is also a white Subaru (SKC8697R) stopped on my left (third lane).

Shortly later out of sudden, a lorry (YP5287B) which was travelling behind me, brushed past my left rear diagonally and collided towards the rear of the said white Subaru. Due to the impact, the Subaru car was pushed out of the stop line by one car length. All of us then came out and exchanged our particulars. I did not manage to obtain the lorry driver's particulars. Subsequently, traffic police arrived at scene.

I assessed that my rear bumper left portion was badly dented in. The white Subaru's rear bumper was badly smashed and debris were scattered on the ground. The lorry's front left bumper portion was also broken and dented.

Due to the accident, I went to Medilife Clinic and Surgery for my injury examination and was given 3 days of MC from 21/11/2017 to 23/11/2017. I do not know of any injuries the other parties may have sustained.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Changkat NPP  
109 Tampines Street 11 #01-261  
SINGAPORE 521109  
Tel No: 1800-7819999



T/20171121/2091

3 of 4

Report No. T/20171121/2091

CONTINUATION OF REPORT



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Changkat NPP  
109 Tampines Street 11 #01-261  
SINGAPORE 521109  
Tel No: 1800-7819999



T/20171121/2091

4 of 4

Report No. T/20171121/2091

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:  
G /  
Sgt 2 NG ZHONG QIAN

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
Staff Sgt LEE GUANG HUI  
Contact No.: 65476138

Author Stamp  
NP18



Signature:

Singapore Police Force

SN 107

Signature Of Informant:

*San*

Date/Time:  
21/11/2017 14:41

Classification Of Case:

Sketch Plan Pg. 7

<b>PREMIER TAXIS</b>	<b>HIRER / RELIEF / SUPER RELIEF</b>
VEHICLE NO.	SHD 1658E
CONTACT NO.	9853 6983
NEW MAILING ADDRESS (if any)	✓

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1318548D



Name  
**CHNG ENG SAN**

Chinese name  
**庄永山**

Race  
**CHINESE**

Date of Birth  
**28-03-1958**

Country of Birth  
**SINGAPORE**

Sex  
**M**

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S1318548D**

Name

**CHNG ENG SAN**

Birth Date: **28 Mar 1958**

Issue Date: **30 JUN 2003**



NRIC No. **S1318548D**



Blood Group: **B+** Date of issue: **06-06-2000**

Address  
**APT BLK 361 HOUGANG AVENUE 5  
#09-310  
SINGAPORE 530361**

3160948

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	10 Aug 1976
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	00 Jan 1980
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	25 Jan 1980

NP 428A



Land Transport Authority



**VOCATIONAL LICENCE**

Licence No. **S1318548D**

Name: **CHNG ENG SAN**

Issue Date: **11/3/2014**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

Accident Photo



Accident Photo



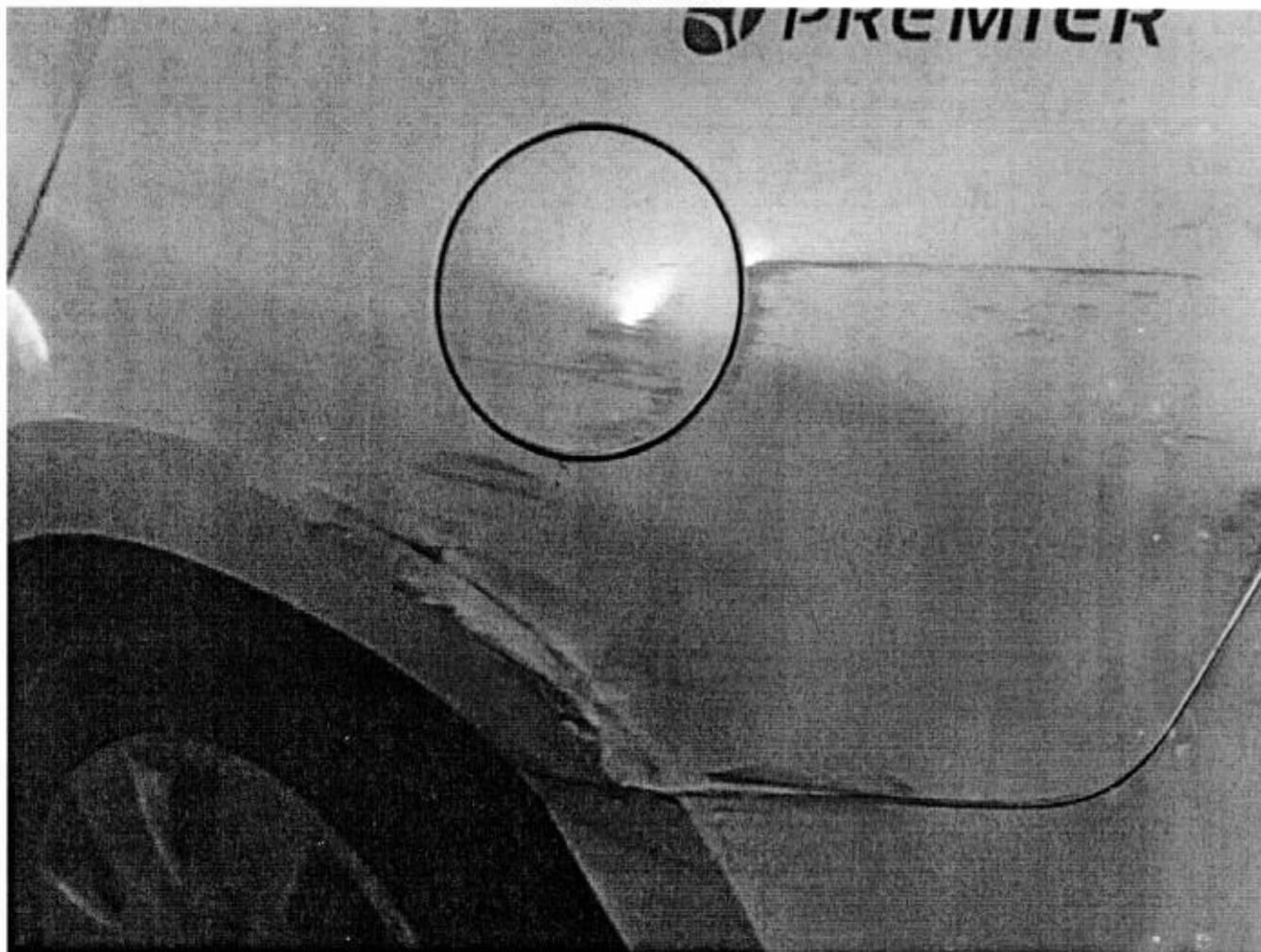
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



# PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02

SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511

CO. REG:200707743D GST REG:200707743D

21-Nov-17

## ESTIMATE REPAIR BILL FOR HYUNDAI I30 WAGON REGN NO: SHD 1658 E

1 pc	Rear bumper <i>— paint</i>	\$	447.00
1 pc	Rear bumper inner sponge <i>X sue</i>	\$	129.00
1 pc	Rear bumper beam <i>X sue</i>	\$	270.00
1 pc	Rear bumper tow hook cap <i>X sue</i>	\$	38.20
1 pc	Rear bumper beam lower bracket - centre <i>X sue</i>	\$	13.70
2 pcs	Rear bumper beam lower bracket - RH & LH @ \$16.20 <i>X sue</i>	\$	32.40
2 pcs	Rear bumper beam o/s & n/s upper bracket @ \$13.70 <i>X sue</i>	\$	27.40
2 pcs	Rear bumper o/s & n/s side bracket @ \$16.00 <i>n/s X o/s X sue</i>	\$	32.00
2 pcs	Rear bumper o/s & n/s side upper bracket @ \$15.20 <i>n/s X o/s X sue</i>	\$	30.40
2 pcs	Rear bumper o/s & n/s upper bracket @ \$13.30 <i>n/s X o/s X sue</i>	\$	26.60
1 pc	Rear license plate lamp <i>X sue</i>	\$	60.00
1 pc	Rear n/s fender <i>X repair</i>	\$	1,736.30
1 pc	Rear n/s fender inner shield <i>X sue</i>	\$	120.00
1 pc	n/s tail lamp <i>— brazed</i>	\$	477.50
		\$	3,440.50
		Less 20%	\$ 688.10
			\$ 2,752.40

### S/NETT

1 set	Rear bumper clips <i>— sue</i>	\$	48.00
1 set	Reverse sensor <i>X sue</i>	\$	280.00
1 set	n/s door sticker <i>X sue</i>	\$	100.00
1 pc	Rear n/s fender sticker <i>— sue</i>	\$	60.00
1 pc	Rear n/s fender inner shield clips <i>X sue</i>	\$	32.00

21-Nov-17

**ESTIMATE REPAIR BILL FOR HYUNDAI I30 WAGON REGN NO: SHD 1658 E**

Sundry <i>new</i>	\$	<del>50.00</del> 20
To Dismantle and replace reverse sensor and test system	\$	<del>80.00</del> 20
To dismantle / refit the inner garnishes, inner linings, inner trims, cushion seat, carpet, etc to facilitate repairs.	\$	<del>120.00</del> 50
To labour charge for dismantle and renew the accident damaged parts. To cut/heat and weld on the rear n/s fender. Including to knock-out, straighten, repair, reshape of the end panel, rear n/s door etc	\$	<del>1,200.00</del> 400
To putty and spray painting on the rear bumper, rear end panel, rear n/s fender, rear n/s door	\$	<del>800.00</del> 860
To apply rustproofing on the repaired and replaced panels	\$	<del>250.00</del> 50
<b>Total</b>	\$	<u>5,772.40</u>

( ALL THE REPAIR COSTS ARE SUBJECTED TO GST )

**THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.**

Kalwa 11/11/14  
22/11/17 1340hrs  
3 Days  
L/S  
After Repair photo

LKK Auto Consultants hence notify the Repairer of the following:

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

Acknowledged by Repairer  
Signature: \_\_\_\_\_  
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

Affiliated to Federation Internationale Des Experts En Automobile

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI17022269/K1vbn2

3 TEMASEK AVENUE  
#16-01 CENTENNIAL TOWER  
SINGAPORE 039190

Date : 28-11-2017



Code : GAI

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 5287B	Veh. Inspected	SHD 1658E
Policy No.		Coverage (\$)	0.00
Claim No.	YP 5287B	Excess (\$)	0.00
Assign From	SHARON NG	Assign Date	22/11/2017

### 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I30	c.c	1582
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	KMHDC81SLCU134896	Colour	SILVER
Odometer	699250	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	185/65 R15	MAXXIS	7 mm
L/H Front Tyre	185/65 R15	MAXXIS	7 mm
R/H Rear Tyre	185/65 R15	MAXXIS	7 mm
L/H Rear Tyre	185/65 R15	MAXXIS	7 mm

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S REAR PORTION. DAMAGES SEE DETAILS.
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### 5. General Information

Accident Date	21/11/2017	Inspection Date	22/11/2017
Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443		

### 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 1658E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	DEFORMED	447.00	447.00
1	REAR BUMPER INNER SPONGE	SERVICEABLE	129.00	-
1	REAR BUMPER BEAM	SERVICEABLE	270.00	-
1	REAR BUMPER TOW HOOK CAP	SERVICEABLE	38.20	-
1	REAR BUMPER BEAM LOWER BRACKET-CENTRE	SERVICEABLE	13.70	-
2	REAR BUMPER BEAM LOWER BRACKET-RH & LH @\$16.20	SERVICEABLE	32.40	-
2	REAR BUMPER BEAM O/S & N/S UPPER BRACKET @\$13.70	SERVICEABLE	27.40	-
2	REAR BUMPER O/S & N/S SIDE BRACKET @\$16.00	SERVICEABLE	32.00	-
2	REAR BUMPER O/S & N/S SIDE UPPER BRACKET @\$15.20	SERVICEABLE	30.40	-
2	REAR BUMPER O/S & N/S UPPER BRACKET @\$13.30	SERVICEABLE	26.60	-
1	REAR LICENSE PLATE LAMP	SERVICEABLE	60.00	-
1	REAR N/S FENDER	TO REPAIR SEE LABOUR	1,736.30	-
1	REAR N/S FENDER INNER SHIELD	SERVICEABLE	120.00	-
1	N/S TAIL LAMP	GRAZED	477.50	477.50
	LESS 20% DISCOUNT		-688.10	-184.90
			2,752.40	739.60
<b><u>SPECIAL NETT ITEMS</u></b>				
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	48.00	48.00
1	SET REVERSE SENSOR (SN)	SERVICEABLE	280.00	-
1	SET N/S DOOR STICKER (SN)	NOT NECESSARY	100.00	-
1	REAR N/S FENDER STICKER (SN)	NECESSARY	60.00	60.00
1	REAR N/S FENDER INNER SHIELD CLIPS (SN)	NOT NECESSARY	32.00	-
1	SUNDRY (SN)	NECESSARY	50.00	20.00
			570.00	128.00
<b><u>LABOUR</u></b>				
	TO DISMANTLE AND REPLACE REVERSE SENSOR AND TEST SYSTEM.		80.00	20.00
	TO DISMANTLE/REFIT THE INNER GARNISHES, INNER LININGS, INNER TRIMS, CUSHION SEAT, CARPET, ETC TO FACILITATE REPAIRS.		120.00	50.00



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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO LABOUR CHARGE FOR DISMANTLE AND RENEW THE ACCIDENT DAMAGED PARTS.TO CUT/HEAT AD WELD ON THE REAR N/S FENDER.INCLUDING TO KNOCK-OUT,STRAIGHTEN,REPAIR,RESHAPE OF THE END PANEL,REAR N/S DOOR ETC.INCLUSIVE OF THE REPAIR OF REAR N/S FENDER.		1,200.00	400.00
	TO PUTTY AND SPRAY PAINTING ON THE REAR BUMPER,REAR END PANEL.REAR N/S FENDER,REAR N/S DOOR.		800.00	360.00
	TO APPLY RUSTPROOFING ON THE REPAIRED AND REPLACED PANELS.		250.00	50.00
			2,450.00	880.00
	<b>GRAND TOTAL</b>		<b>5,772.40</b>	<b>1,747.60</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>1,400.00</b>

Report Ref No. CS/GAI17022269/K1vbn2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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