

22/03/2002

ASS. REC. BY:

REF: CS3/LPC17022540/WV157 Special Instruction:

Surveyor: Wilson

ASSIGNMENT (Office)

From (Person): Gerold Poh of LPC Date/Time: 27/11/17 @ 9:09am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

PA 7225 C

Insured: GBD1785S

at Workshop m/s

Sin Yu Sin Workshop

Tel: 91993103

of 1 Kaki Bukit Ave 6 #01-52 Autobay #17 883

Policy No:

Claim No:

17/17/17 VC00 00234

Sum Insured:

Excess:

Make of Veh:

D.O.A. 24/11/2017

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10:06am @ 27/11/17

Person Contacted:

Kong

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	PA 7225 C - X
	GBD1785S - NA/MSG16004705/d2 - D.O.A: 10/03/2016
28/12/17	Submit PRS report

REF:

ASSIGNMENT

From _____ Date _____
 Estimated Cost _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No **PA7225C**
 at Workshop m/s **Sin Yu Sin**
 of **1 veh - Bulok A6 #01-52**
 Insured _____
 Policy No _____
 Claims No _____
 Sum Insured _____ Excess _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value _____
 IDAC Accident Report: 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

Date / Time _____ Action / Instruction _____

Chain Collision

Veh No **PA7225C** Yr Regn **07**
 Type: M.Car / M.Cycle / Bus Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make **Toyota** CC **3494**
 Colour **Silver** AC Insured / Std / NI / NA
 Sp. Reading **497322** T Radio Insured / Std / NI / NA
 Eng No _____
 C No **KDH 222 - 0037094**
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Mod: Nil / S/Rim STD A/Rim or
 Tyre Size: F: **195 R15C**
 R: **195 R15C**
 BS / DUN / EXNOVA / GY / FS / LIZA MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front _____ Rear _____
 R. Bal. **4** mm R. Bal. **4** mm
 L. Bal. **4** mm L. Bal. **4** mm
 D.O.A. **24/11/2017** D.O.I. **27/11/2017**
 Survey held at **At Above** 10.22am
 Des. of Damages: Fr / Rear / O/S / N/S / U/C / Rooftop or _____

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

RECEIVED 2-9-DEC 2017

Date/Time File Pass to:

☐

: Preli. Report

☐

: Final Report

Date/Time File Return to:

28/12- typist

Report Format:

Lump Sum / I.B.I. / S

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐
☐
☐
☐

Site Insp. / S

Interview / S

Tech. Insp. / S

Weekend / S

Survey Fee:

Transportation:

Lump Sum / S

Photo:

Other:

Total:

Survey Department Check List (Case Handler)

Reference No.: CS3 LP17022540 WVB

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

(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

28/12/17

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

LONPAC INSURANCE BHD

Ref : CS3/LPC17022540/Wgb

300 BEACH ROAD
#17-04/07 THE CONCOURSESINGAPORE 199555

Date : 27-11-2017



Code : LPC2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	GBD 1785S	Veh. Inspected	PA 7225C
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	GERALD POH	Assign Date	27/11/2017

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

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5. General Information

Accident Date	24/11/2017	Inspection Date	27/11/2017
Survey held at	SIN YU SIN WORKSHOP 1 KAKI BUKIT AVE 6 #01-82 AUTOBAY SINGAPORE 417883		

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.
--

Veron Chen (LKKAUTO)

From: GERALD POH WEE BIN <geraldpoh@lonpac.com>
Sent: Wednesday, 27 December, 2017 2:07 PM
To: Admin-D (LKKAUTO)
Cc: MT_Claim_SG
Subject: RE: 2nd Notice to Conduct Pre-Repair Survey -Accident involving PA 7225C, GBD 1785S & SDW 8515K along Upp Changi East towards SG Expo on 24.11.2017 Your ref: GBD 1785S
Our ref: PA 7225C/WL/sy/ch

Dear Catherine,

Our claim reference is 17/17/17/VC00/00234.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

From: Catherine Chong (LKK Auto) [mailto:admin-d@lkkauto.com]
Sent: Wednesday, 27 December, 2017 12:59 PM
To: GERALD POH WEE BIN; 'assignments'
Cc: MT_Claim_SG; sur@lkkauto.com
Subject: RE: 2nd Notice to Conduct Pre-Repair Survey -Accident involving PA 7225C, GBD 1785S & SDW 8515K along Upp Changi East towards SG Expo on 24.11.2017 Your ref: GBD 1785S Our ref: PA 7225C/WL/sy/ch

Dear Mr Gerald,

Kindly provide us the claim number.

"WISHES YOU A HAPPY NEW YEAR 2018"

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Nivitha (LKK Auto) [mailto:admin-d@lkkauto.com]
Sent: Monday, 27 November, 2017 10:11 AM
To: 'GERALD POH WEE BIN' <geraldpoh@lonpac.com>; 'assignments' <assignments@lkkauto.com>
Cc: 'MT_Claim_SG' <mt_claim@lonpac.com>; sur@lkkauto.com
Subject: RE: 2nd Notice to Conduct Pre-Repair Survey -Accident involving PA 7225C, GBD 1785S & SDW 8515K along Upp Changi East towards SG Expo on 24.11.2017 Your ref: GBD 1785S Our ref: PA 7225C/WL/sy/ch

Dear Sir/Mdm,

Thank you for the assignment.

Best Regards,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: GERALD POH WEE BIN [<mailto:geraldpoh@lonpac.com>]

Sent: Monday, 27 November, 2017 9:09 AM

To: accident@kscgp.com

Cc: MT_Claim_SG; assignments@lkkauto.com

Subject: RE: 2nd Notice to Conduct Pre-Repair Survey -Accident involving PA 7225C, GBD 1785S & SDW 8515K along Upp Changi East towards SG Expo on 24.11.2017 Your ref: GBD 1785S Our ref: PA 7225C/WL/sy/ch

WITHOUT PREJUDICE

Dear See Yee,

We are not agreeable to your list of Single Joint Experts and we shall appoint LKK Auto Consultants Pte Ltd for the pre-repair survey

Aside to LKK – Kindly proceed with the pre-repair survey.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

From: accident@kscgp.com [<mailto:accident@kscgp.com>]

Sent: Friday, 24 November, 2017 5:32 PM

To: ONG LI LI; MT_Claim_SG; assignments@lkkauto.com; admin-d@lkkauto.com

Cc: motor@kscgp.com

Subject: 2nd Notice to Conduct Pre-Repair Survey -Accident involving PA 7225C, GBD 1785S & SDW 8515K along Upp Changi East towards SG Expo on 24.11.2017 Your ref: GBD 1785S Our ref: PA 7225C/WL/sy/ch

Dear Sir/Mdm,

Please find enclosed our 2nd Notice to Conduct Pre-Repair Survey.

Thank you.

Regards,

Chit Yee

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0989 / Fax: 6538 3708

Email: accident@kscgp.com

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

From: ONG LI LI [mailto:llong@lonpac.com]

To: accident@kscgp.com, mt_claim@lonpac.com, assignments@lkkauto.com, admin-d@lkkauto.com

Cc: motor@kscgp.com

Sent: Fri, 24 Nov 2017 07:56:46 +0000

Subject:

Without Prejudice
Save as to Costs

Dear Sir/Mdm

We will proceed to conduct a pre-repair survey of the damage to your client's vehicle jointly with your workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert. (Please see attached).

Please let us know within 2 working days whether you are agreeable to the appointment of any of the motor surveyors provided to you as a single joint expert. You may select one of the listed motor surveyors.

Regards,
Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

From: accident@kscgp.com [mailto:accident@kscgp.com]

Sent: Friday, 24 November, 2017 2:23 PM

To: MT_Claim_SG; GERALD POH WEE BIN

Cc: motor@kscgp.com

Subject: Notice to Conduct Pre-Repair Survey - Accident involving PA 7225C, GBD 1785S & SDW 8515K along Upp Changi East towards SG Expo on 24.11.2017 Your ref: GBD 1785S Our ref: PA 7225C/WL/sy/ch

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Thank you.

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Chit Yee
KSCGP Juris LLP
10 Hoe Chiang Road
#13-03A Keppel Towers
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Nivitha (LKK Auto)

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Attachments: 27112017090547.pdf

WITHOUT PREJUDICE

Dear See Yee,

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Aside to LKK – Kindly proceed with the pre-repair survey.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

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Regards,

Chit Yee

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0989 / Fax: 6538 3708

Email: accident@kscgp.com

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

From: ONG LI LI [mailto:llong@lonpac.com]

To: accident@kscgp.com, claim@lonpac.com, assignments@lkkauto.com, admin-d@lkkauto.com

Cc: motor@kscgp.com

Sent: Fri, 24 Nov 2017 07:56:46 +0000

Subject:

Without Prejudice
Save as to Costs

Dear Sir/Mdm

We will proceed to conduct a pre-repair survey of the damage to your client's vehicle jointly with your workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert. (Please see attached).

Please let us know within 2 working days whether you are agreeable to the appointment of any of the motor surveyors provided to you as a single joint expert. You may select one of the listed motor surveyors.

Regards,
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Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

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To: MT_Claim_SG; GERALD POH WEE BIN
Cc: motor@kscgp.com
Subject: Notice to Conduct Pre-Repair Survey - Accident involving PA 7225C, GBD 1785S & SDW 8515K along Upp Changi East towards SG Expo on 24.11.2017 Your ref: GBD 1785S Our ref: PA 7225C/WL/sy/ch

Dear Sir/Mdm,

Please find enclosed the Notice to Conduct Pre-Repair Survey.

Thank you.

Regards,
Chit Yee
KSCGP Juris LLP
10 Hoe Chiang Road
#13-03A Keppel Towers
Singapore 089315
Tel: 6538 3611 / DID: 3152 0989 / Fax: 6538 3708
Email: accident@kscgp.com

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susceptible to change and we shall not be liable for the improper or incomplete transmission of the information contained in this communication nor for any delay in its receipt or damage to your system. We do not guarantee that the integrity of this communication has been maintained nor that this communication is free of viruses, interceptions or interference.

Your Insured's vehicle : GBD 1785S
Our client's vehicle ; ref: PA 7225C ; WL/sy/ch
Date : 24 November 2017

Lonpac Insurance Berhad

By Email Only

Dear Sirs,

DATE OF ACCIDENT: 24 NOVEMBER 2017
NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS

We refer to the above matter and your email of even date.

Please be informed that our client is not agreeable to your proposed motor surveyors. Instead we propose you to choose a surveyor from our client's list of surveyors as appended below:-

- | | |
|--------------------------|-----------------------------|
| 1. Chang Fuh Keong, Dave | 6. Lim Yong Tian, Sebastian |
| 2. Ho Joo Loong, Danny | 7. Ong Ah Keng, Kent |
| 3. How Andrew | 8. Ong Poh Meng |
| 4. Kelvin, Teo Hoon Tong | 9. Philip Foo |
| 5. Lee Kok Weng | 10. Liaw Leong San |

Please be informed that if we do not hear from you within 2 working days from the date hereof, we will assume, as per the Protocol, that you have no objections to our list of motor surveyors. You will be deemed to have agreed to any of the above motor surveyors as a "single joint expert". We will inform you who the "single joint expert" is in due course.

If you object to our client's list of motor surveyors, we will accordingly inform the client to instruct his choice of motor surveyor to conduct the pre-repair survey. Also, please let us know within 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle failing which our client will commence repairs thereafter without any further notice or reference to you. Please also let us know if you required a Post-Repair Survey/Inspection for our client's consideration. Please be informed that the said vehicle can be surveyed / inspected at:

Address : Sin Yu Sin Workshop
1 Kaki Bukit Avenue 6
#01-52 Autobay@Kaki Bukit
Singapore 417883
Contact Person/Hp/Fax : Mr. Wei Leang / 9199 3103 / 6816 3103

Kindly acknowledge upon inspection in the acknowledgement box below.

Yours sincerely,

Acknowledgement

This is to confirm that I _____ [Full Name of Surveyor] of _____ [Surveyor's Company] have completed as follows:-

(a) Pre- Repair Survey/Inspection on _____ [Date] at _____ [Time].

Signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date

(b) Pre- Repair Survey/Inspection (after dismantling) on _____ [Date] at _____ [Time].

Signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date

(c) Post - Repair Survey/Inspection on _____ [Date] at _____ [Time].

Signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date

MYHM17185438 / Yew Hook Motor - Tampines
ENTRY DATE & TIME: 24/11/2017 13:01

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 Authorized 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 24/11/2017 13:01
Date Of Accident 24/11/2017 07:35
Exact Location Of Accident UPPER CHANGI EAST TOWARD SINGAPORE EXPO
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number PA7225C
Name Of Registered Owner NG THENG CHUAN
Co Reg No 53098899A
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-96717217
Alternative Phone No OFFICE-98717217
Manufacturer TOYOTA
Model HIACE
Exact Purpose for which vehicle was being used at time of accident WORK 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 COMMERCIAL VEHICLE
Name of Insurance Company ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
Fleet Policy NO
Policy Number BVBPSB0005141701
Cover Note Number
Name of Driver NG THENG CHUAN
NRIC No S1302949J
Date Of Birth 29/06/1958
Occupation OUTDOOR
Date Of Driving Pass 16/10/1978
Driving Experience 39 YEARS AND 1 MONTH
Gender MALE
Mobile Number (LOCAL) +65-96717217
Fax Number
Contact Number
Email Address NOEMAIL

781 UPPER CHANGI ROAD EAST 803-07
480099

Is an employee of the Insured's Company? NO
Relationship of the Driver with the Insured? OWNER
Vehicle Registration Number of Driver's Own Vehicle? SD083695
Insurance Company of Driver's Own Vehicle? NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Accident? CHAIN COLLISION
Weather Conditions? CLEAR
Road Surface? DRY
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)? 1
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?
PLEASE SEE ATTACHED SKETCH PLAN
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
Vehicle Make/Model/Colour

GBD17955

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (including Driver)

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SDW0315K

Vehicle Make/Model/Colour

Page 2 of 11

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (including Driver)

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name

NG THENG CHUAN

Approximate Age

50

Injuries Sustained

Injured person in which vehicle?

PAT225C

Were seat belts worn?

YES

Was injured conveyed to hospital by ambulance?

Address

781 UPPER CHANGI ROAD EAST 803-07

Postcode

480099

SKETCH PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of 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;

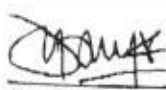
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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.


Policyholder's Signature / Date & Time

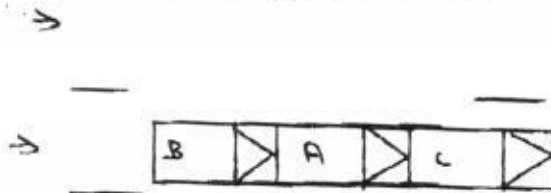



Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

Sketch Plan

Upper Changi East Toward Singapore Expo



Vehicle A - PA7225C

Vehicle B - G301785S

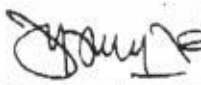
Vehicle C - SDW8515K

Describe Circumstances of the Accident

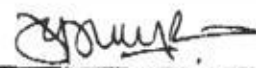
Vehicle C stop as I stop on time suddenly I feel an impact on my rear portion. Vehicle B fail to stop and hit onto my rear portion due to the impact my vehicle was push forward and hit onto vehicle C rear portion. It was a 3 vehicle chain collision.

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


Witnessed by Reporting Centre Personal

Insurance Co. _____	
Vehicle No. _____	Date of accident _____
<input type="checkbox"/> Reporting Only	
<input type="checkbox"/> Own Damage Claim	
<input type="checkbox"/> Third Party Claim	

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	6899A
Vehicle Details	
Vehicle No.:	PA7225C
Vehicle to be Exported:	No
Intended De-registration Date:	27 Dec 2017
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE 2.5 A
Primary Colour:	Silver
Manufacturing Year:	2007
Engine No.:	2KD1678883
Chassis No.:	KDH2220037094
Maximum Power Output:	-
Open Market Value:	\$28,710.00
Original Registration Date:	31 Oct 2007
First Registration Date:	31 Oct 2007
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	

COE Expiry Date:	31 Jul 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$34,070.00
COE Rebate Amount:	\$32,687.00
Total Rebate Amount:	\$32,687.00

The information contained herein is correct as at 27 Dec 2017

OK

Enquire Transfer Fee

Vehicle Details	
Vehicle No. :	PA7225C
Vehicle Type :	Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus
Vehicle Attachment 1 :	Air-Conditioned
Vehicle Scheme :	Public Service Vehicle (Others)
Vehicle Make :	TOYOTA
Vehicle Model :	HIACE 2.5 A
Chassis No. :	KDH2220037094
Propellant :	Diesel
Engine No. :	2KD1678883
Engine Capacity :	2494 cc
Maximum Power Output :	-
Maximum Laden Weight :	2965 kg
Unladen Weight :	2120 kg
Year Of Manufacture :	2007
Original Registration Date :	31 Oct 2007
Lifespan Expiry Date :	30 Oct 2027
COE Category :	C - Goods Vehicle & Bus
PQP Paid :	\$34,070.00
COE Expiry Date :	31 Jul 2027

Road Tax Expiry 30 Oct 2018
Date :

Inspection Due 30 Oct 2018
Date :

Intended Transfer 27 Dec 2017
Date :

CO2 Emission : -

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use [Enquire Road Tax Payable](#) for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

Message

This vehicle has a road tax Over Payment of \$114.00. This Over Payment may be used to offset Road Tax payable and Transfer Fees respectively, where applicable.

You may print this page for reference.

OK

Print



**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: 199607196R GST Reg. No. 19-9607196-R

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT				
LONPAC INSURANCE BHD		Ref: CS3/LPC17022540/Wvbs2		
300 BEACH ROAD		Date: 02-01-2018		
#17-04/07 THE CONCOURSESINGAPORE 199555		Code: LPC2		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	GBD 1785S	Veh. Inspected	PA 7225C	
Policy No.		Coverage (\$)	0.00	
Claim No.	17/17/17/VCO0/00234	Excess (\$)	0.00	
Assign From	GERALD POH	Assign Date	27/11/2017	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA	c.c	2494	
Engine No.	HIDDEN	Year of Reg.	2007	
Chassis No.	KDH2220037094	Colour	SILVER	
Odometer	497322 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195 15C	MICHELIN	4 mm	
L/H Front Tyre	195 15C	MICHELIN	4 mm	
R/H Rear Tyre	195 15C	MICHELIN	4 mm	
L/H Rear Tyre	195 15C	MICHELIN	4 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION.				
5. General Information				
Accident Date	24/11/2017	Inspect Date / Time	27/11/2017 (10:22 AM)	
Survey held at	SIN YU SIN WORKSHOP 1 KAKI BUKIT AVE 6 #01-82 AUTOBAY SINGAPORE 417883			
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/LPC17022540/Wvbs2

Inspected By



WILSON TEO CHENG MING

Automotive Assessor



K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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