

22/03/2002

ASS. REC. BY:

REF:

CG/SMO/7022844 / Amber

Special Instruction:

Surveyor: AdrianASSIGNMENT (Office)From (Person): Irene

of

SMODate/Time: 01-12-2017 1026am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

STQ 9519D

Insured:

YP 6053C

at Workshop m/s

Fastech Auto

Tel:

6746 5445

of

Blk 1 Kaki Bukit Ave 6 #01-46

Policy No:

Claim No:

CM701704315 / THE

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

25-11-2017 30/11/17CA / REV / REP. / REV 24 HRS wpr

H.O.D. Endorsement:

Date/Time:

Person Contacted:

JasonVehicle: IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>STQ 9519D - PC4 / 90217022838 / Apb3</u>
	<u>YP 6053C - X</u>
<u>11/12/17</u>	<u>Informed Irene pending est from repairer by email</u>
<u>22/3/18</u>	<u>Adrian confirmed LS \$ 2100 (Red 3433.30, 60%)</u>
<u>23/3/18</u>	<u>Email preli revised to Irene</u>

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 At Workshop no: _____
 of: _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 Client's Report: _____
 Make of Veh: _____

(Policy Condition)
 Remark: The veh had commenced its
 repair at the time of inspection.

N/S	O/S

Body or Market Value: _____
 DAC Accident Report: _____ Consistent? Yes or No
 G.A. / P.P. Seen: _____ Consistent? Yes or No
 Est. Repairs: _____ days Res: Yes or No
 Lump Sum: _____ % 3 Val: Yes or No

04 / REV / REP / 24 HRS

Date: _____ Person Contacted: _____ Vehicle IN / OUT

Veh No: **53895190** Reg: **09**
 Type: **M.C.** / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover
 Truck / Trailer or
 Make: **Toyota Rush** 1495
 Colour: **Blue** A.C. Insured: Std / Nil / NA
 Sp Reading: **118111** T-Fact: Insured: Std / Nil / NA
 Eng No: _____
 C/No: **5500E** 0022198
 Gen. Cond: **Good** / Fair / Poor / Burnt
 Steering: **Good** / Jammed / Leaked / Burnt
 Brake: **Good** / Jammed / Leaked / Burnt
 Mod: Nil / S/Rim / STD A/Rim
 Tyre Size: F: **215/60R16**
 R: **215/60R16**
 BS / DUN / EXNOVA / GY / **FS** / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or

Front	Rear
R/Bal: 06	R/Bal: 06
L/Bal: 06	L/Bal: 06
D.O.A: _____	D.O.A: 30/11/17
Survey held at: Fastech	11/12/17

Dist. of Damages: Fnt / Rear / O/S / **N/S** / U.C. / Rectrop or

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

Date Time Action Instruction

TP EQ
TP Sampo

REC'D

Time of Report: ☐ Prelim. Report
☐ Final Report

Days Of Repair: **3**
 Resurvey No. of Trip: **1**

23/3-tpst

Add Fee: ☐ Stamped \$
☐ Marked \$
☐ Taxed \$
☐ Leased \$

Report Format: **TP**
 Lump Sum / M.B. / C: **2100/2**

290

290



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

SOMPO INSURANCE SINGAPORE PL

Ref : CS/SMO17022844/Avb

50 RAFFLES PLACE

#05-01/06

SINGAPORE LAND TOWERS SINGAPORE 048623

Date : 01-12-2017



Code : SMO

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 6053C	Veh. Inspected	SJQ 9519D
Policy No.		Coverage (\$)	0.00
Claim No.	CMTD1704315/THE	Excess (\$)	0.00
Assign From	IRENE	Assign Date	01/12/2017

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	25/11/2017	Inspection Date	01/12/2017
Survey held at	FASTECH AUTO PTE LTD 1 KAKI BUKIT AVENUE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883		

5a. Remarks

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

Veron Chen (LKKAUTO)

From: Veron Chen (LKKAUTO)
Sent: Friday, 23 March 2018 12:47 PM
To: 'Henry, Irene James'
Cc: 'Wong, Shi Yi Shery'; SUR
Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D
Attachments: SJQ 9519D PRELI ADVISED.pdf

Dear Irene,

Enclosed preliminary revised of vehicle SJQ 9519D

Date of survey: 1/12/2017

Number of days: 3 days

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

From: Veron Chen (LKKAUTO)

Sent: Friday, 1 December 2017 4:32 PM

To: 'Henry, Irene James' <irene.henry@sompo.com.sg>

Cc: 'Wong, Shi Yi Shery' <Shery.Wong@sompo.com.sg>; SUR <sur@lkkauto.com>

Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Dear Irene,

Please be informed that we have inspected the vehicle SJQ 9519D on 1/12/2017.

We are pending estimate from repairer.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

From: Admin-D (LKKAuto)

Sent: Friday, 1 December, 2017 10:59 AM

To: 'Henry, Irene James' <irene.henry@sompo.com.sg>; assignments <assignments@lkkauto.com>

Cc: 'Wong, Shi Yi Shery' <Shery.Wong@sompo.com.sg>; SUR <sur@lkkauto.com>

Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF:SJQ9519D

Dear Irene,

Thank you for the assignment.

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: Henry, Irene James [<mailto:irene.henry@sompo.com.sg>]

Sent: Friday, 1 December, 2017 10:26 AM

To: assignments <assignments@lkkauto.com>

Cc: Admin-D (LKKAuto) <admin-d@lkkauto.com>; Wong, Shi Yi Shery <Shery.Wong@sompo.com.sg>

Subject: FW: REQUEST FOR PRE-REPAIR INSPECTION OUR REF:SJQ9519D

Our Reference: CMTD1704315/THE

Hi,

Kindly assign your motor surveyor to conduct motor survey of the mentioned (SJQ 9519D).

Please refer to the email correspondence below.

Best Regards

Irene Henry

Claims Division

D: 6322 4618 | T: 6461 6555 | F: 6221 3147



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50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

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From: Nancy Lam [<mailto:nancy.lam@fastechauto.com.sg>]

Sent: Friday, 1 December, 2017 10:06 AM

To: Wong, Shi Yi Shery <Shery.Wong@sompo.com.sg>

Cc: Henry, Irene James <irene.henry@sompo.com.sg>; Choo, Thelma <thelma.choo@sompo.com.sg>
Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Without Prejudice

Dear Sir,

Please arrange LKK Auto Consultants to survey the car.

Thank you.

Regards,
Jason Tang
Fastech Auto Pte Ltd
Tel: 6746 5405
Fax: 6745 8520

From: Wong, Shi Yi Shery [mailto:Shery.Wong@sompo.com.sg]
Sent: Thursday, November 30, 2017 2:30 PM
To: 'nancy.lam@fastechauto.com.sg' <nancy.lam@fastechauto.com.sg>
Cc: Henry, Irene James <irene.henry@sompo.com.sg>; Choo, Thelma <thelma.choo@sompo.com.sg>
Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Our Reference: CMTD1704315/THE
Your Reference: SJQ9519D

Date: 30TH November 2017

Without Prejudice

BY EMAIL ONLY

Attention:

M/S FASTECH AUTO

Accident involving SJQ9519D and YP6053C on 25/11/2017

Dear Sir

We refer to your Notice of Accident via email dated 30/11/2017.

Please be informed that Thelma is the handler of this case.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor 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.

Pre-Repair Survey

	Motor Surveyor	Surveyor	Selection (Indicate as tick)
1	Raleigh Services	Andrew Ow Yong	
		Vincent Ng	
2	LKK Auto Consultants	Kenneth Kong (North area)	
		Marcus Chua (East area)	
		Ma Chin Fook (North area)	

		Mohd Rasul (West area)	
		Mohd Taufikh (West area)	
3	Priority Services	Jimmy Lee	
		Lawrence Ng	
		Jeffery Ong	
4	JP Knights Adjusters & Surveyors	Jason Lek	
5	In House surveyor	Teo See Ling	

Please let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Best Regards

Shery Wong

Claims Division

T: 6461 6555 | F: 6221 3147



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50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

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From: Nancy Lam [<mailto:nancy.lam@fastechauto.com.sg>]

Sent: Thursday, November 30, 2017 11:57 AM

To: Motor Survey

Subject: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Hi Sir

My client claiming your insured YP 6053C.

Please kindly arrange PRS for SJQ 9519D .

Date of accident 30.11.2017

In accordance to APPENDIX C Pre-action Protocol for Non-Injury Motor Accident Cases of PRACTICE DIRECTIONS AMENDMENT NO. 1 OF 2016 paragraph 2.3, you are require to provide a list of at least 10 motor surveyors within 2 days of the notice.

Regards,
Nancy Lam
Fastech Auto Pte Ltd
Tel: 6746 5405
Fax: 6745 8520



Auto
Consultants
Pte Ltd

Company Registration No. 19960711

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564

Your ref: CMTD1704315/THE
Our ref: CS/SMO17022844/Avb

Date: 23/3/2018

The Motor Claims Department
M/s SOMPO INSURANCE SINGAPORE PTE LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO. SJQ 9519D

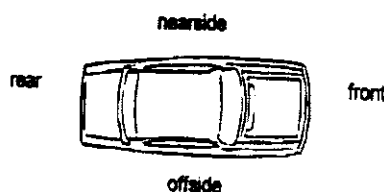
We thank you for your instruction on 1/12/2017

Please be informed that we had conducted the inspection of the above mentioned vehicle
1/12/2017 at the premises of M. FASTECH AUTO PTE LTD
and have the following to report:-

Workshop Estimate Amount	: S\$5,533.30
Revised Estimate Amount	: S\$2,100.00 (LUMP SUM)
"Check" Items Amount	: S\$
Market Value	: S\$
LTA Reimbursement Value	: S\$
Nett Value	: S\$

Description of Damage:

The vehicle sustained damages at the
n/s front portion



Comments/Present Status:

Damages Consistent

Yours faithfully,

ADRIAN LING WAI PING
B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI
Licensed Appraiser

Veron Chen (LKKAuto)

From: Veron Chen (LKKAuto)
Sent: Friday, 1 December, 2017 4:32 PM
To: 'Henry, Irene James'
Cc: 'Wong, Shi Yi Shery'; SUR
Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Dear Irene,

Please be informed that we have inspected the vehicle SJQ 9519D on 1/12/2017.

We are pending estimate from repairer.

Best Regards,

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Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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Subject: FW: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Our Reference: CMTD1704315/THE

Hi,

Kindly assign your motor surveyor to conduct motor survey of the mentioned (SJQ 9519D).

Please refer to the email correspondence below.

Best Regards

Irene Henry

Claims Division

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Cc: Henry, Irene James <irene.henry@sompo.com.sg>; Choo, Thelma <thelma.choo@sompo.com.sg>

Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF:SJQ9519D

Without Prejudice

Dear Sir,

Please arrange LKK Auto Consultants to survey the car.

Thank you.

Regards,

Jason Tang

Fastech Auto Pte Ltd

Tel: 6746 5405

Fax: 6745 8520

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Cc: Henry, Irene James <irene.henry@sompo.com.sg>; Choo, Thelma <thelma.choo@sompo.com.sg>

Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF:SJQ9519D

Our Reference: CMTD1704315/THE

Your Reference: SJQ9519D

Date: 30TH November 2017

Without Prejudice

BY EMAIL ONLY

Attention:

M/S FASTECH AUTO

Accident involving SJQ9519D and YP6053C on 25/11/2017

Dear Sir

We refer to your Notice of Accident via email dated 30/11/2017.

Please be informed that Thelma is the handler of this case.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor 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.

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		Vincent Ng	
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Claims Division

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Date of accident 30.11.2017

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Regards,
Nancy Lam
Fastech Auto Pte Ltd
Tel: 6746 5405
Fax: 6745 8520

Nivitha (LKK Auto)

From: Henry, Irene James <irene.henry@sompo.com.sg>
Sent: Friday, 1 December, 2017 10:26 AM
To: assignments
Cc: Admin-D (LKKAuto); Wong, Shi Yi Shery
Subject: FW: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Our Reference: CMTD1704315/THE

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Irene Henry

Claims Division

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Without Prejudice

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Cc: Henry, Irene James <irene.henry@sompo.com.sg>; Choo, Thelma <thelma.choo@sompo.com.sg>
Subject: RE: REQUEST FOR PRE-REPAIR INSPECTION OUR REF: SJQ9519D

Our Reference: CMTD1704315/THE
Your Reference: SJQ9519D

Date: 30TH November 2017

Without Prejudice

BY EMAIL ONLY

Attention:

M/S FASTECH AUTO

Accident involving SJQ9519D and YP6053C on 25/11/2017

Dear Sir

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		Mohd Taufikh (West area)	
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Best Regards
Shery Wong
Claims Division
T: 6461 6555 | F: 6221 3147



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Please kindly arrange PRS for SJQ 9519D .

Date of accident 30.11.2017

In accordance to APPENDIX C Pre-action Protocol for Non-Injury Motor Accident Cases of PRACTICE DIRECTIONS AMENDMENT NO. 1 OF 2016 paragraph 2.3, you are require to provide a list of at least 10 motor surveyors within 2 days of the notice.

Regards,
Nancy Lam
Fastech Auto Pte Ltd
Tel: 6746 5405
Fax: 6745 8520

Enquire Transfer Fee

Vehicle Details

Vehicle No.	SJQ9519D
Vehicle Type	P11 - Passenger Station Wagon/Jeep/Land Rover
Vehicle Attachment 1	No Attachment
Vehicle Scheme	Normal
Vehicle Make	TOYOTA
Vehicle Model	RUSH 1.5X A
Chassis No.	J200E0022198
Propellant	Petrol
Engine No.	3SZ2130071
Engine Capacity	1495 cc
Maximum Power Output	80.0 kW (107 bhp)
Maximum Laden Weight	1425 kg
Unladen Weight	1150 kg
Year Of Manufacture	2008
Original Registration Date	01 Jun 2009
Lifespan Expiry Date	-
COE Category	A - Car (1600cc & below)
Quota Premium	\$9,889.00
COE Expiry Date	31 May 2019
Road Tax Expiry Date	31 May 2018
PARF Eligibility Expiry Date	31 May 2019
Inspection Due Date	31 May 2018
Intended Transfer Date	01 Dec 2017
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	11.00	-	11.00

Total Amount Payable

11.00

You may print this page for reference.

OK Print



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Last updated on 19 Nov 2017 at 12:12 AM

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	30/11/2017 12:45
Date Of Accident	30/11/2017 09:10
Exact Location Of Accident	ALONG JLN BOON LAY X-JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ9519D
Insured/Policyholder	
Name Of Registered Owner	HONG,LAI PENG
NRIC No	S7326097C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92348375
Alternative Phone No	OTHERS-92348375

Vehicle Particulars

Manufacturer	TOYOTA
Model	RUSH
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00269314/01
Cover Note Number	

Driver

Name of Driver	HONG,LAI PENG
NRIC No	S7326097C
Date Of Birth	24/07/1973
Occupation	INDOOR
Date Of Driving Pass	29/06/1994
Driving Experience	23 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92348375
Fax Number	
Contact Number	OTHERS-92348375
EEmail Address	NOEMAIL

Address 1 FERNVALE CLOSE
#20-03
Postcode 797485
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OWNER
Vehicle Registration Number of Driver's Own Vehicle -
-
-
Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE
Weather Conditions CLEAR
Road Surface DRY

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) 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

PLS REFER TO THE ATTACHED STATEMENT.

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 YP6053C
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF INJURED PERSON 1

Name HONG, LAI PENG

Approximate Age

Injuries Sustain SLIGHT

Injured person in which vehicle? SJQ9519D

Were seat belts worn? YES

Was injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan


SKETCH PLAN


IMPORTANT NOTICE

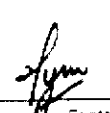
1. Please report correctly the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorized Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy 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

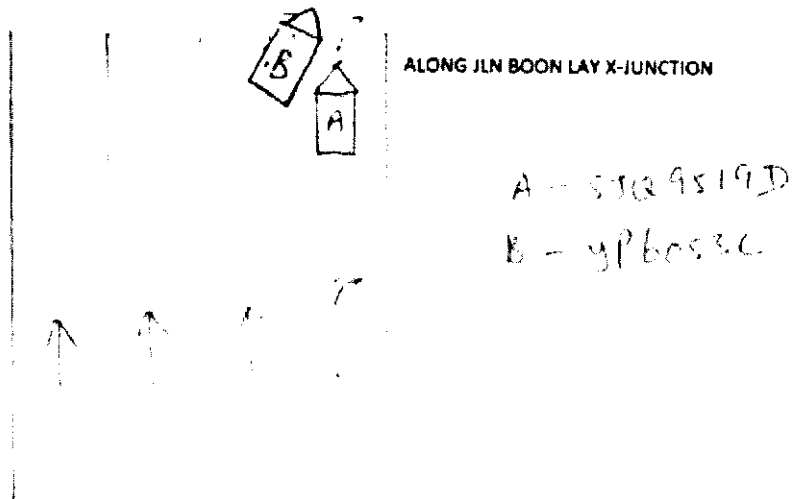

Policyholder's Signature
Date & Time


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

 20/6/17
Reporting Centre Personnel's Signature
Name
NRIC/TIN No.

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 30/11/17 at 9.10am, I was driving my vehicle (A)
along Jalan Boon Lay cross-junction, suddenly vehicle (B)
cut into my lane and hit on my LH side portion.

STQ 9519D - no passenger

DECLARATION

I do declare the foregoing statement is true and correct.

Policyholder's Signature
Date & Time

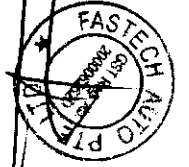
Driver's Signature
If driver is not the policyholder:
Date & Time

Report Centre Personnel's Signature
Name
NRIC/FIN No

STG 9519 D

Sompoo

Toyota Rust



- 1 pc left front fender ^{needed} - 382.10
- 1 pc left front fender ^{needed} - 422.10
- 1 pc left head lamp ^{at} - 824.50
- 1 pc front bumper ^{to} - 1210 - 881.10
- 1 pc left front bumper side ^{retainer} - 43.20
- 1 pc left head lamp panel - 221.50

parts less 25%

25097

188227

next item.

- 1 sec left front fender inner shield clip - 50
- 1 sec front bumper clip - 30

Labour Charge.

knock dents on left damage portion, cut & welding & renew parts - 1200 - 300

Respray painting - 1100 - 400

check wiring - 50 - 30

553330 730

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 resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

Adrian

L/S 30/11/17 total 2642.27

03 days. 4/2 2.1K.



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

SOMPO INSURANCE SINGAPORE PL

Ref : CS/SMO17022844/Avbe2

50 RAFFLES PLACE

#05-01/06

SINGAPORE LAND TOWERS SINGAPORE 048623

Date : 26-03-2018



Code : SMO

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YP 6053C	Veh. Inspected	SJQ 9519D
Policy No.		Coverage (\$)	0.00
Claim No.	CMTD1704315/THE	Excess (\$)	0.00
Assign From	IRENE	Assign Date	01/12/2017

2. Vehicle Particulars & Condition

Make & Model	TOYOTA RUSH	c.c	1495
Engine No.	HIDDEN	Year of Reg.	2009
Chassis No.	J200E0022198	Colour	BLUE
Odometer	118111	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	FIRESTONE	6 mm
L/H Front Tyre	215/60 R16	FIRESTONE	6 mm
R/H Rear Tyre	215/60 R16	FIRESTONE	6 mm
L/H Rear Tyre	215/60 R16	FIRESTONE	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	30/11/2017	Inspection Date	01/12/2017
Survey held at	FASTECH AUTO PTE LTD 1 KAKI BUKIT AVENUE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJQ 9519D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	LH FRONT FENDER	DENTED	382.10	382.10
1	LH FRONT FENDER TOP WING MIRROR	CRACKED	422.00	422.00
1	LH HEAD LAMP	CUT	824.50	824.50
1	FRONT BUMPER	TORN	1,210.00	881.10
1	LH FRONT BUMPER SIDE RETAINER	NOT NECESSARY	43.20	-
1	LH HEAD LAMP PANEL	NOT NECESSARY	221.50	-
	LESS 25% DISCOUNT		-	-627.42
			3,103.30	1,882.28
SPECIAL NETT ITEMS				
1	SET LH FRONT FENDER INNER SHIELD CLIP (SN)	NOT NECESSARY	50.00	-
1	SET FRONT BUMPER CLIP (SN)	NECESSARY	30.00	30.00
			80.00	30.00
LABOUR				
	LABOUR CHARGE KNOCK DENTS ON LH DAMAGE PORTION.CUT,WELDING & RENEW PARTS.		1,200.00	300.00
	RESPRAY PAINTING.		1,100.00	400.00
	CHECK WIRING.		50.00	30.00
			2,350.00	730.00
GRAND TOTAL			5,533.30	2,642.28
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,100.00

Report Ref No. CS/SMO17022844/Avbe2

ADRIAN LING WAI PING

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

Licensed Appraiser

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