ZUIVEYET :	WISTR ASSIGNME	NT (Office)	
YUMMUN From (Person)	Mulhod Ashik M	SIG	Dete-Time 12/10/17 @ 4-25 pm
Estunated Cos	L	BIII to:	
To Inspect Ve	hicle No: SKE 7857S		Insured: SJQ 6689R
at Workshop r	Kent Auto Service	es	Tel: 9754 7573
of Blk 2	Kaki Bukit Ave 2, #01-21		
Policy No:	사용 경우 경기 :	Claim No:	540443
Sum Insured:		Excess:	
Make of Veh			D.O.A. 9/12/2017
(Client's Recer:	(In)	13/12/	2017
	REP. / REV 24 HRS		H,O,D. Endorsement:
Date/Time:	1.53pm O 12/12/17 Person Contacted	Mr. Ken	Vehicle IN OUT
Date/Time	Action/Instruction (X) Estimate	2	
	SkE78575-X		
	SIQ 6689 R-X	All Helica	
	Dismantle Part: 19-122017	1	

ASSIGNMENT

From: Date 13/12/17	Ven No. SKE 78578 YFREST 30 3 20	212
Estimated Cost:	Type M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /	
OD (F) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	
To Inspect Vehicle No: SKE7857S	Make Jaquer 00 296	1
at Workshop m/s Kent Auto Services	Colour A/S Insured / Std / NI / NA	,
Blk 2 kaki Bukit Ave 2#01-21	Sp Reading (3865) T/Radio; Insured / Std / NI / N/	A.
Insured	Eng/No:	
Policy No.	ONO SAJACOSDECES 3700	14
Claims No.	Gen. Cond Good / Fair / Poor / Burnt	
Sum Insured Excess	Steering: Inordes / Jammed / Leaked / Burnt or	
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or	
Make of Veh.	Modi: Nil/S/Rim / STD A/Rim or	
· -	Tyre Size: F: 245 45 R18	
(Policy Condition)	R: 345/45818	
Remark: The veh had commenced its N/S O	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU PIR / SUMI /	
repair at the time of inspection.	TOYOTYOKO OF PICALLE CF)	
Bal. or Market Value:	Front CONTROL (P)	
IDAC Accident Rport: Consistent? Yes or No	R/Bal. 4 mm R/Bal. 4 m	nm
GIA / PR Seen: Consistent? : Yes or No		nm "
Est Repairs: days Res.: Yes or No	D.O.A. 19 12 26 D.O.I. 12	17
Lum Sum: % 3 Val.: Yes or No		0.26am
CA / REV / REP. / 24 HRS WP	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or	
Vehicle: IN / 0	The U/C / Chassis frame / Body Structure affected due to collis	enn.
Date / Time Action / Instruction	The Orc / Chassis frame / Body structure anadied doe to some	
Date / Time Action / Insudction		
Rame # 1	00981# - OOPT	
	\\ \ \	
W.	Juma 40	
RECEIVED 0 9 APR	2019	18
	The state of the s	
Date/Time: File Pass to? : Prelli. Report	Days Of Repair:	
09042018 : Final Report	Resurvey No. of Trip: Survey Fee 120	
Date/Time File Return 107	Transportation 50	
	Fee: Site Insp (\$)3-753	
	Interview (\$ 1 Anges	
Report Format : PR9-	Tech Invs (\$ 1 Jeen 10	- 1
Lump Sum / I.B.I: (S	· Weakend (\$	
	180	



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 Internation	Remarks and the second		
MSIG	INSURANCE (SI	NGAPORE) PTE LTD	Ref : CS3/MSG1702	3597/Wb	
16 R/ #24-0	AFFLES QUAY 01 HONG LEONG	BLDG SINGAPORE 048581	Date: 12-12-2017 Code: MSG		
1.	COMPANIE AND	Policy Particulars	:- (THIRD PARTY CLAI	M)	
	Insured Veh.	SJQ 6689R	Veh. Inspected	SKE 7857S	
	Policy No.	B27497548SMP	Coverage (\$)	0.00	
	Claim No.	540443	Excess (\$)	0.00	
	Assign From	MERIMEN (MUHD ASHIK)	Assign Date	12/12/2017	
2.		Vehicle Parti	culars & Condition		
	Make & Model		c.c	0	
	Engine No.	HIDDEN	Year of Reg.		
	Chassis No.		Colour		
	Odometer		Steering		
	Brakes		Modification		
	General				
3.	VI SE SIE	Condit	ions 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.	TO THE SECOND	Descript	ion of Damages	Service Committees	
5.	Engline No.		al Information	10400017	
	Accident Date	09/12/2017	Inspection Date	13/12/2017	
	Survey held at	KENT AUTO SERVICES			
		2 KAKI BUKIT AVE 2 #01-21 KAKI BUKIT AUTOHUE SINGAPORE 417921	3		
5a.		Condi	Remarks		
	B) THE REPAIR E	ON WAS CONDUCTED ON A "W STIMATE WAS NOT PRESENTE WAS TOLD TO PREPARE THE E LEASE FIND DAMAGED VEHICL	ED AT THE TIME OF INSP STIMATE.	ASIS. ECTION.	

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

Case	FOLDER TRAC	Est Submitted	Adi Assigned	Adj Rpt	Adj Submitted	Ins Auth ed	Status
Case	Salar Carayan		12 Dec 2017				New Assignment
Main	11 Dec 2017		16:25				Cancel Case

Main	Reference	Claim Details	Documen	ts Si	now All
CLAIM SUBFOLDER DETAI	LS		[Creat	ed by insurer]	
Insured:	KHUA SOH KHIM, ID: S1683	3286C, Tel: +6596821515			
Main Claimant:	LIAN HOE LEONG & BROTHE		198202357C	2017 16:00 -F0	
Vehicle Reg. No.:	SKE7857S	Date of Loss:		2017 16:00 - :59	
Claim Type:	TP / 540443	Policy/Cover Note No.	: B27497 Covera	7548SMP (Comprehe ge: 19/04/2017 - 18	nsive) /04/2018
Vehicle Reg. No. (Insured):	SJQ6689R	Policy No. (Claimant):			
vernere read that (allowers)		Excess:	S\$500.		
AND THE COURT	Kent Auto Services - Kaki Bi	ukit (HQ) BLOCK 2 KAKI BUKI	T AVE 2, #01-21	KAKI BUKIT AUTOHU	JB,
Repairer:	417021 Kaki Bukit - Tel:				
Repairer: Handling Insurer:	417921 Kaki Bukit - Tel: MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6	827 7888 [Han	dled by Muhd Ashik	
	417921 Kaki Bukit - Tel: MSIG Insurance (Singapore 6594 2548] LKK Auto Consultants Pte Li	td (HQ) - Tel: +65 6	827 7888 [Han Imm.Advice o	dled by Muhd Ashik	
Handling Insurer:	417921 Kaki Bukit - Tel: MSIG Insurance (Singapore	td (HQ) - Tel: +65 6	827 7888 [Han Imm.Advice o	dled by Muhd Ashik	
Handling Insurer: Adjuster:	MSIG Insurance (Singapore 6594 2548] LKK Auto Consultants Pte LI LIM KAY WEE ELVIS (), NRIC	td (HQ) - Tel: +65 6	827 7888 [Han Imm.Advice o	dled by Muhd Ashik	B Madi
Handling Insurer: Adjuster: Driver/Custodian (Insured):	MSIG Insurance (Singapore 6594 2548] LKK Auto Consultants Pte Li LIM KAY WEE ELVIS (), NRIC	td (HQ) - Tel: +65 6	827 7888 [Han Imm.Advice o	dled by Muhd Ashik due 13/12/2017]	B Madi
Handling Insurer: Adjuster: Driver/Custodian (Insured): ASSOCIATED MAIL RECEI There are no mail for this case	417921 Kaki Bukit - Tel: MSIG Insurance (Singapore 6594 2548] LKK Auto Consultants Pte LIM KAY WEE ELVIS (), NRIC	td (HQ) - Tel: +65 6	827 7888 [Han Imm.Advice o	dled by Muhd Ashik due 13/12/2017]	B Madi
Handling Insurer: Adjuster: Driver/Custodian (Insured): ASSOCIATED MAIL RECEI	417921 Kaki Bukit - Tel: MSIG Insurance (Singapore 6594 2548] LKK Auto Consultants Pte Li LIM KAY WEE ELVIS (), NRIC	td (HQ) - Tel: +65 6 td (HQ) - Tel: 6256-3561 [C: S9313683G, Tel: +658282	827 7888 [Han Imm.Advice o	dled by Muhd Ashik due 13/12/2017] View All Compose Create New Task	B Madi

12-12-17;15:14 :Daniel Poch & Co.





133 New Bridge Road #11-02 Chinatown Point Singapore 059413 Tel: +65 6227-2469 Fax: +65 6225-2579 Email: law@dpco.com.sg (UEN: 53130838C)

FAX (6225-7402) ONLY

Daniel Poon Choon Kow LL. B. (Hons), LLM

Our Ref:

DP.sl.isk.10268.17.KAS

Your Ref:

Please quote our reference number when replying

Date: 12 DECEMBER 2017

M/S MSIG INSURANCE (S) PTE LTD 4 SHENTON WAY #23-01 SGX CENTRE 2 SINGAPORE 068807 ATTN: MOTOR CLAIMS DEPARTMENT

DEAR SIRS,

PRE-REPAIR INSPECTION

YOUR INSURED VEHICLE REGISTRATION NO: SJQ 6689R ACCIDENT ON 09 DECEMBER 2017 INVOLVING SKE 7857S AND SJQ 6689R ALONG TELOK KURAU ROAD TOWARDS LORONG M TELOK KURAU ROAD

We are instructed by Lian Hoe Leong & Brothers Pte Ltd to notify you of a road traffic accident on 09th December 2017 at about 17:00 along Telok Kurau Road towards Lorong M Telok Kurau Road involving our client's vehicle registration number SKE 7857S and vehicle registration number SJQ 6689R driven by your insured at the material time. A copy of the Singapore accident statement /traffic police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair inspection of the vehicle, by the attached list of ten (10) surveyor which our client deemed suitable to be appointed.

If the aforesaid is not agreeable, kindly therefore instruct your appointed surveyor for a prerepair inspection of our client's vehicle at by making a prior appointment with the repairer stated below:-

M/S KENT AUTO SERVICES 2 KAKI BUKIT AVENUE 2 #01-21, KAKI BUKIT AUTOHUB SINGAPORE 417921 ATTN: MR KENT TAN (9754-7573) Page 2 Messrs Daniel Poon & Co. Our Ref: DP.sl.isk.10268.17.KAS

Date: 12th December 2017

If we do not receive any agreement from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully,

M/S KENT-AUTO SERVICES

FAX (6741-2539) ONLY

Survey Department Check List (Case Handler)

dmin (): Case handler to make sure all Inform Assign Form	Y-Date N-Date	
C	Reference No.	1-Date N-Date	1-Date M-Date
C	Customer Code		
N	Assign From		
C	Assign Date		
C	Veh No (Inspected)	7	
C	Veh No (Insured)	1	
C	D.O.A		-
C	Policy No	V	
C	Claim No	Y	
C	Insurance Authorisation (CA /REV/REP)		
C	Report Type	V	-
C	Weekend Charges	V	
N	Survey held at/Repairer		
C	Excess	V	
urvey	or (): Case handler to make sure t	he surveryor complete	d all required information
.) Assig	nment Form		
С	Vehicle No	V	
C	Regn Month/Year	/	
	Vehicle Type	V,	
N	Make & Model		
С	Engine Capacity. (C.C)	V	
N	Colour		
C	Odometer. (Sp.Reading)	V	
C	Chassis No	/	
N	General Condition	V	
N.	Steering	/	
N	Brake		_
N	Modification (Modi)		
С	Tyre Size		_
N	Tyre Make		
C	Tyre Balance	V	_
C	Date of Inspection		4
N	Survey held	V	
N	Des.of Damages	V	
	em - (Views/Merimen)		_
С	Damaged Vehicle Photographs Uploaded	V	
3) Wor	kshop Estimate/Assignment Form		
N	ALL Parts condition		
С	Market Value for OD cases		
С	Estimate Repair Cost for PRI (RSI, TMI, MSIG)		
С	Days of repair		
С	Finalised Amount		
C	Re-inspection Cases to Finalize within 5 Days		
4) Syst	em - (Views/Merimen)		
C	Resurvey photo Uploaded		

Reference No: :

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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 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.
- 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.

THE RESERVE OF THE PARTY OF THE	ACCIDENT STATEMENT
Date Of Report	11/12/2017 11:25
Date Of Accident	09/12/2017 17:00
Exact Location Of Accident	369 TELOK KURAU ROAD
Country/State of Loss	SINGAPORE
the says are sort of the	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKE7857S
Insured/Policyholder	
Name Of Registered Owner	LIAN HOE LEONG & BROTHERS PTE LTD
Co Reg No	198202357C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97622202
Vehicle Particulars	
Manufacturer	JAGUAR
Model	XF-3.0 V6 LUXURY (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	ECICS LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MPC17A00087501
Cover Note Number	
Driver	
Name of Driver	LIM SIOW LONG, LOUIS (LIN XIAOLONG, LOUIS)
NRIC No	S8031696H
Date Of Birth	15/10/1980
Occupation	INDOOR
Date Of Driving Pass	20/02/2006
Driving Experience	11 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97622202
Fax Number	

NOEMAIL

Address

18 FLORA DRIVE #01-32

SINGAPORE

Postcode

506946

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - 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?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

MARINE PARADE NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 300 MARINE PARADE ROAD, POSTCODE: 449296, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4428999 - FAX NO: 62447678

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE AUTOMOTIVE PTE LTD TEL 6741 5336

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

SJQ6689R

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

LIM KAY WEE ELVIS

NRIC/Passport Number

S9313683G

Contact Number

82826148

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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 Singapora (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)
 - (ii) 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
- 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:

LIAA

Driver's Signature (If driver is not the po

Date & Time:

Reporting Centre Feru

NRIC/FIN No.:

Sketch Plan #2

T	1	Vehicle No A - SKE 7857 B - SJQ 6680
B		Legend A Vehicle Bike
SCRIBE CIRCUMSTANCES OF T	HE ACCIDENT	
tofer	to police repo	nrt.
10/61	To Police 191	V -
DECLARATION		
DECLARATION Please be advised that your insure stipulated time from the dat	rs are true in every respect. r may have a 14 day clause whereby the e of occurrence. Kindly check your policy	claim against own policy must be made within the for more details.
DECLARATION I/We declare the foregoins particular please be advised that your insure stipulated time from the dat	_m	claim against own policy must be made within the for more details.
DECLARATION I/We declare the foreaping particular Please be advised that you insure stipulated time from the dat Policyholder's Sanatore Date & Time:		claim against own policy must be made within the for more details. Reporting Ceptre Phisonnel's Signature Name: NRIC/FIN No.:

POLICE REPORT PAGE 1 Pg. 1





1 of 3

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Report No. T/20171210/2002

Tel No: 1800-4428999

REPORT (OF A	TRAFFIC	ACCIDENT

Date/Time Report Made: 10/12/2017 01:08		fade:	Vide Report No.:	Station Diary No.: 8	
Informa	nt's Particu	ulars			
Name of Informant: LIM SIOW LONG, LOUIS			Address: 18 FLORA DRIVE #01-32 SINGAPORE 506946		
	/ ID No.: D / S803169	96H	Contact No.: Home/Office: Mobile: 97622202		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age:	Date of Birth: 15/10/1980	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupat Sales ar	ion: nd marketin	g manager	Driving Licence Information Class: 3	: Date of Expiry:	

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 09/12/2017 17:0	Type of Location Straight Road
Location: Along Road 1 TELOK KUR/ Along 369 Te Weather: Clear		Road Surface:		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Wo	orking	Traffic Volume: Light
Type of Collis Between Mov	sion: ving Vehicles - Head	Γο Side		Anyone conveyed by ambulance:

Details of V	ehicle Invo	lved		10 10 2 had 20 50		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJQ6689R	Car	BMW		White	Slightly Damaged	0
SKE7857S	Car	JAGUAR		White	Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT PAGE 2 Pg. 1





2 of 3 Report No. T/20171210/2002

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

CONTINUATION OF REPORT

Driver					
Name	Lim Kay Wee Elvis		ID No.		S9313683G
Related Vehicle	SJQ6689R (Car)		Conta	ct No.	82826148
Hospital/Clinic	NIL		Class Driving Licence Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	NIL	
Driver					
Name	LIM SIOW LONG, LOUIS		ID No.		S8031696H
Related Vehicle	SKE7857S (Car)		Conta	ct No.	97622202
Hospital/Clinic	NIL		Class Driving Licent Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	22 SETHINUS
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	NIL	

Brief Details.

On 09/12/2017 at about 1700hrs, I was driving along Telok Kurau Road heading towards Lorong M Telok Kurau Road. I was driving on the right side of the two lane road. As I was driving, there was another vehicle (SJQ6689R) driving beside me on the left side of the two lane road. As I was driving, suddenly the said vehicle turned right and cut in front of me. However, I managed to swerve to the right to prevent direct impact. As a result of that, the said vehicle collided onto my vehicle on the front left bumper. Thereafter, both drivers exchanged contact details.

The other vehicle sustained damage on the front right bumper. No one was injured. No ambulance and no Police Officers came down to accident location. I do not have any in-car camera in my vehicle.

My wife was with me at the point of accident whom currently complains of giddiness after the accident. However, have yet to seek medical treatment.

My wife's particulars are as follows:

Name: Wei Shu Ting

Passport Number: 306865448

POLICE REPORT PAGE 3





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296 3 of 3 Report No T/20171210/2002

Tel No: 1800-4428999

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 JEREMY GOH ZEN KIAT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/12/2017 01:08
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65476430	Classification Of Case
Authentication Stamp	

View Sent Message

This mail is associated with:

*SKE7857S (540443) [SJQ6689R]

TP LIAN HOE LEONG & BROTHERS PTE LTD Dec 9 2017 4:00PM [KHUA SOH KHIM] Kent Auto Services - Kaki Bukit

View Recipients | Print Message Delete Message

From LKK Auto Consultants Pte Ltd (LKK_HQ), sent on 20/01/2018 12:22 PM.

Subject Pre-repair Inspection

Dear Muhd Ashik,

Refer to your assignment on 12.12.2017 at 4.25PM.

Please be informed that we have inspected the vehicle SKE 7857S on 13.12.2017 at 10.26AM.

At the time of inspection the repairer did not present their estimation to the damaged vehicle.

We will submit our report accordingly.

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)

DOCUMENTS SUMMARY

There are no documents.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj	Submitted	Ins Auth'ed	Status	
Main	11 Dec 2017		12 Dec 2017 16:25 Edit Adj Rpt	S\$0.00 Edit Estim	100 CO	0.00 lew Rpt		Pending for Report Cancel Case	
	Main	R	eference	Clai	m Details		Document	-	Show All
CLAIM SL	BFOLDER DE	TAILS				[Created	by insurer]		
Insured:	KHUA SO	H KHIM, 1D: S1	683286C, Tel: +65	96821515					
Main Claimant:	LIAN HOE	LEONG & BROT	HERS PTE LTD,	Co. Reg. No.:	198202357	С			
Vehicle Re No.:	SKE785	75		D	ate of Loss:	[68 Months	7 16:00 - :59 s and 9 Days Fron	and department of the Complete	(Man Yr)]
Claim Type	r: TP / 540)443		1.00	olicy/Cover ote No.;		3SMP (Comprehen 19/04/2017 - 18/		
Vehicle Rei No. (Insured):	sJQ6689	R			olicy No. Claimant);				
					xcess:	S\$500.00			
Repairer:	Kent Auto	Services - Kaki	Bukit (HQ) BLOCK	2 KAKI BUKI	T AVE 2, #0	11-21 KAKI B	UKIT AUTOHUB, 4	17921 Kaki Buk	it - Tel:
Handling Insurer:			ore) Pte. Ltd. (HQ)						
Adjuster:	13/12/2		Ltd (HQ) - Tel: 62	56-3561 [1	landled by	Teo Cheng M	ling Wilson] [Imm.Advice	due
Driver/Cus dian (Insured):		VEE ELVIS (), N	RIC: S9313683G,	Tel: +658282	6148				
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There are	no mail for this	case.							
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Due Dat		Type Tasi	Group Subjec	t Handler	Assig	ned By	Completed On	Created C	n Done

Claim Documents

*SKE7857S (540443) [SJQ6689R] TP
LIAN HOE LEONG & BROTHERS PTE LTD
Dec 9 2017 4:00PM
[KHUA SOH KHIM] Kent Auto Services - Kaki Bukit

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Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
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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/MSG17023597/WBE2

Date:

10/04/2018

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

B27497548SMP

Claimant Vehicle SKE7857S No:

Insured Vehicle No:

SJQ6689R

Date of Loss:

09/12/2017

Nature of Claim:

TP

Claim No: 540443

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SKE7857S

Make & Model:

JAGUAR XF, 3.0 V6 LUXURY (A)

Engine No:

603786334FC

Reg. Date:

30/03/2012 (Man. Year: 2012)

Chassis No:

SAJAC05D8CFS39094

Colour:

Odometer:

138601 km

Engine Capacity:

2967 cc

Market Value/New Car Price: N/A Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Footbrake (Serviceable):

Handbrake (Serviceable):

CONDITION OF TYRES Front Tyre Size:

245/45 R18

Rear Tyre Size:

245/45 R18

Pre-accident Condition:

Front Left Side:

Pirelli 4 mm

Rear Left Side:

Continental 4 mm

Front Right Side:

Pirelli 4 mm

Rear Right Side:

Continental 4 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00		DIII /0
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:

12/12/2017

Date Inspected:

13/12/2017 Inspected At:

Kent Auto Services - Kaki Bukit (HQ) BLOCK 2 KAKI BUKIT AVE 2, #01-21

KAKI BUKIT AUTOHUB

Singapore 417921

Estimated Period of Repair:

0.0 days

Adjuster: Teo Cheng Ming Wilson

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 \$17,900.00 -\$18,900.00

Page 3 of 4

REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 10 Apr 2018)

Parts:

JAGUAR XF 3.0 V6 LUXURY (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SKE7857S)

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.

Adjuster Report

Page 4 of 4

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.

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