

22/03/2002

A/S REC. BY:

REF: CS3/EG17023896/Wd3

Special Instructions:

Surveyor: Wilson

ASSIGNMENT (Office)

From (Person): Yee Pei Li

of

EGIDate/Time: 15/12/17 @ 5.08pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLS6935X

Insured:

SGP 3670D

at Workshop m/s

6 Speed Autowerks

Tel:

8533 2934

of

Ge Keeki Bukit Ave 6 #02-05; 417896

Policy No:

Claim No:

DSM PL1702958

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 14/12/2017

CA / REV / REP. / REV 24 HRS (wp)

H.O.D. Endorsement:

Date/Time: 903am @ 18/12/17

Person Contacted:

Sun SunVehicle IN / OUT

Date/Time Action/Instruction (X) Estimate

SLS6935X - XSGP 3670D - X

REF:

ASSIGNMENT

From _____ Date _____

Estimated Cost _____

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

To inspect Vehicle No SLS 6935 X
at Workshop no 6 Speed Autowork
of 68, Keki Bhat Ave. 6 #22

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.

N/S	O/S

Bal. or Market Value _____

IDAC Accident Report _____

Consistent? Yes or No

G/A PR Seen _____

Consistent? Yes or No

Est. Repairs _____

days _____

Res.: Yes or No

Lump Sum _____

%

3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted _____

Vehicle: IN / OUT

Date / Time Action / Instruction -

Veh No SLS 6935 X Regn 18/10/201Type M.Cap / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make AudiColour Black

Insured / Std / NI / NA

Sp Reading 105943

Radio Insured / Std / NI / NA

Eng No _____

Ch No WAM 2228R 2CA 228 298Gen Cond Good / Fair / Poor / BurntSteering Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size F: 255/45R20R: 255/45R20BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R Bal 3 mmR Bal 3 mmL Bal 3 mmL Bal 3 mm

D.O.A

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Right Frt

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

Range \$10500 - \$11800

3 days

Repair 6/4/2018

RECEIVED 1-2 APR 2018

Date/Time File Pass to:

11/04/2018

☐ : Preli. Report
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee

Transportation

3-400

Photos

Ings

Add Fee:

☐ Site Insp. \$
☐ Interview \$
☐ Tech Invs \$
☐ Weekend \$

Report Format:

PRS

Lump Sum / I.B.I. \$

50
50

Nivitha (LKK Auto)

From: Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>
Sent: Friday, 15 December, 2017 5:08 PM
To: 'admin-d@lkkauto.com'
Subject: OI : SGP3670D / TP : SLS6935X/LKK / DOA : 14/12/2017
Attachments: SGP3670D - SAS.pdf; SLS6935X - SAS.pdf; RE: RE: PRE-REPAIR INSPECTION OF VEHICLE SLS 6935X ACCIDENT ON 14.12.201... (21.1 KB); SLS6935X - PRI NOTICE.pdf

Dear Catherine,

We have rejected to their PRS list, please assist to conduct this survey from **K KRISHNA & PARTNERS**,

ADDRESS : **6 SPEED AUTOWERKS PTE LTD**
68 KAKI BUKIT AVE 6
#02-05 ARK @ KB2
SINGAPORE 417896

PERSON TO CONTACT : 8533 2934

ERGO OFFICER-IN-CHARGE : ROHAINI

Note: To survey on without prejudice basis. Please advise the consistency of damages to third party vehicle. Try to obtain estimate from workshop and inform the repairer in writing, that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.

Please update the survey status via Survey.Report@ergo.com.sg.

Attached are our insured and third parties' SAS (note: reports not to be released to any Third Party). No estimates was provided.

Kindly acknowledge receipt of this email.

Thank you.

Yee Pei Li

Claims Assistant (Motor)
ERGO Insurance Pte. Ltd.
5 Temasek Boulevard
#04-01 Suntec Tower Five
Singapore 038985
Tel.: 65 6829 9199 DID: 65 6829 9194
Website: www.ergo.com.sg

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.

K. KRISHNA & PARTNERS

Advocates & Solicitors
Commissioner for Oaths/Notary Public
(UEN No. 53131210X)
GST Registration No. M90371530C
101 Cecil Street #24-03/04 Tong Eng Building, Singapore 069533
Tel : 6323 3038 Fax : 6323 2120 (not for service of Court documents)
E-mail : kkrishna@singnet.com.sg

Krishnamoorthi
LLB (Hons) (London)
Barrister-at-Law (Gray's Inn)
B.Sc (Hons) (Est. Man) (S'pore)

S. Manohar
LLB (Hons) (S'pore)

Vengadesh s/o Kumaravelu
LLB (Hons)

Our Ref : SM.PRI-SLS 6935X(6SPEED)

15th December 2017

IMMEDIATE ATTENTION PRE-REPAIR INSPECTION

Email : ergoinsurance@ergo.com.sg

ERGO INSURANCE PTE LTD
5 Temasek Boulevard
#04-01
Suntec Tower Five
Singapore 038985

Attention: Motor Claims Department

Dear Sirs

PRE-REPAIR INSPECTION OF VEHICLE SLS 6935X ACCIDENT ON 14.12.2017 INVOLVING SLS 6935X AND SGP 3670D AT ONE SHENTON CARPARK LEVEL 3

We act for Ms Chu Yuen Lin, the owner of motor vehicle no. **SLS 6935X** which was involved in the above captioned accident

We are instructed that the accident was caused by the negligence of the driver of motor vehicle no. **SGP 3670D**. Our search shows that you are the insurers of motor vehicle no. **SGP 3670D**.

We are requested to inform you that our client's vehicle is available for pre-repair inspection at the following address :-

M/S 6 SPEED AUTOWERKS PTE LTD
68 Kaki Bukit Avenue 6
#02-05 ARK@KB2
Singapore 417896
Tel : 85332934 Fax : 6384 7039
Email : 6speedautowerkz@gmail.com

K. KRISHNA & PARTNERS

Advocates & Solicitors

15th December 2017

ERGO INSURANCE PTE LTD

Please note that our client wishes to appoint her own surveyor to carry out the PRI. Kindly let us hear from you.

Alternatively, kindly contact Ms Sun Sun of M/s 6 Speed Autowerkz Pte Ltd at her mobile no. 85332934 **within forty-eight (48) hours** from receipt of this fax to arrange for the inspection.

Yours faithfully

A handwritten signature in black ink, appearing to be 'K. Krishna', with a large circular flourish at the top right and a horizontal line at the bottom.

cc. workshop - (by email)

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	15/12/2017 12:45
Date Of Accident	14/12/2017 13:30
Exact Location Of Accident	ONE SHENTON CAR PARK LEVEL 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS6935X
Insured/Policyholder	
Name Of Registered Owner	CHU YUEN LIN
NRIC No	S7470402F
Email Address	CHU_TERESA@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-98009171
Alternative Phone No	OTHERS-98009171

Vehicle Particulars

Manufacturer	AUDI
Model	Q5

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	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ17-005639
Cover Note Number	27/10/2017 TO 26/10/2018

Driver

Name of Driver	CHU YUEN LIN
NRIC No	S7470402F
Date Of Birth	16/06/1974
Occupation	INDOOR
Date Of Driving Pass	16/10/2002
Driving Experience	15 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-98009171
Fax Number	
Contact Number	OTHERS-98009171
Email Address	CHU_TERESA@YAHOO.COM.SG

Address.

Postcode

APT BLK 703 WEST COAST RD #09-379 (S) 120703

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? 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) 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

refer with attach.

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 SGP3670D

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver ALAN SHEN

NRIC/Passport Number

Contact Number 93878104

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Accident 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:

15/12/17

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

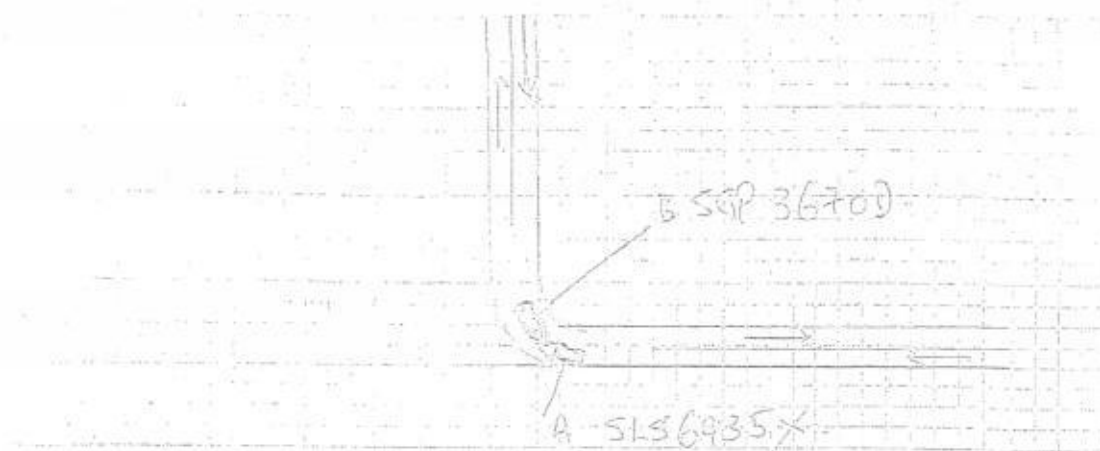
18/12/17

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



Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14th Dec 2017 @ 1330hrs, I was driving my vehicle SLS6935X in One Shenton level 3 carpark. I was driving along level 3 while making a right turn to level 4 a black vehicle SGP36700 collided onto me on my right front.

At the scene of accident, not wanting to go into long discussion and there was no injury, I was prepared to pay for the repair cost at a reasonable price. A note was signed stating that I will be responsible for the repairs. I therefore deny that by signing the note I was responsible or negligent in causing the accident.

Insurance	EQ
Vehicle	SLS6935X
Date of Accident	14.12.2017
<input type="checkbox"/> Reporting Only	
<input type="checkbox"/> Own Damage Claim	
<input type="checkbox"/> Third Party Claim	
<input checked="" type="checkbox"/> Other Workshop	6 Speed AutoWares Pte Ltd

DECLARATION

I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature

Date & Time: 15/12/17

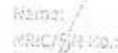

Driver's Signature

(If driver is not the policyholder)

Date & Time: 15/12/17



Reporting Centre Personnel's Signature

Name: 
Date & Time: 15/12/17

REPUBLIC OF SINGAPORE
IDENTIFICATION CARD No. S7470402F



CHU YUEN LIN

CHINESE

16-06-1974 F

MALAYSIA



S7470402F

MALAYSIAN

B+ 13-06-1996

201 BLK 703 WEST COAST ROAD #09-379
SINGAPORE 110703

S7470402F

16- (1-2001)

No. 4159696

Licence Number: **S7470402F**
 Name: **CHU YUEN LIN**
 Birth Date: **16 Jun 1974**
 Issue Date: **27 Sep 2003**




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	16 Oct 2007

NP 425A





Yusuf G. Farooq

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

**PRIVATE CAR
Comprehensive Classic**

Certificate No. : DMPPHQ17-005639

Classic Plan - EQ Authorised Workshop Only

Form: MX2

Excess:

Insured & Named Driver

Unnamed Driver

YEIDR

Wind Screen

SS\$800.00 (Section 1 - Own Damage)
SS\$1,100.00 (Section 1 - Own Damage)
Additional SS\$3,000.00
SS\$100.00

1. Index Mark and Registration Number of Vehicles
SLS6935X

2. Name of Policyholder
CHU YUEN LIN

3. Effective Date of the Commencement of Insurance for the purpose of the Act
27/10/2017

4. Date of Expiry of Insurance
26/10/2018

5. Person or Classes of persons entitled to drive*

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purpose in connection with the Motor Trade

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : MALAYAN BANKING BERHAD

A000248/LQ Business Pte Ltd
Date of Issue : 25/10/2017 17:39

Authorised Signatory
EQ Insurance Company Limited

Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.



**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

PRE-REPAIR INSPECTION REPORT				
ERGO INSURANCE PTE LTD		Ref: CS3/EGI17023896/Wd3e2		
5 TEMASEK BOULEVARD #04-01 SUNTEC TOWER		Date: 18-04-2018		
FIVE SINGAPORE 038985				
Code: EGI				
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SGP 3670D	Veh. Inspected	SLS 6935X	
Policy No.		Coverage (\$)	0.00	
Claim No.	DSMPC1702958	Excess (\$)	0.00	
Assign From	YEE PEI LI	Assign Date	15/12/2017	
2. Vehicle Particulars & Condition				
Make & Model	AUDI Q5	c.c	1984	
Engine No.	HIDDEN	Year of Reg.	2011	
Chassis No.	WAUZZZ8R2CA028298	Colour	BLACK	
Odometer	105943 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	255/45 R20	MICHELIN	3 mm	
L/H Front Tyre	255/45 R20	MICHELIN	3 mm	
R/H Rear Tyre	255/45 R20	MICHELIN	3 mm	
L/H Rear Tyre	255/45 R20	MICHELIN	3 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION.				
5. General Information				
Accident Date	14/12/2017	Inspect Date / Time	18/12/2017 (11:27 AM)	
Survey held at	6 SPEED AUTOWERKZ - 68 KAKI BUKIT AVE 6 #02-05			
Repairer	-			
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. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$10,800-\$11,800				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:			5 Working Days	

Report Ref No. CS3/EGI17023896/Wd3e2

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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