

23/03/2002

ASS. REC. BY:

REF: CS/MSG17023968 / M1vd 304

Special Instructions:

Surveyor:

Merimen

MA

ASSIGNMENT (Office)

From (Person):

Katherine Wong

of

MSIG

Date/Time:

18/12/17 @ 3.59 pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJJ 5995A

Insured:

SKQ 4103R

at Workshop in/s

Kian Teong Auto

Tel:

64556268

of

Blk 176 Sin Ming Drive #01-08

Policy No:

28946874 MCX

Claim No:

541178

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

15/12/2017

CA / REV / REP. / REV 24 HRS

(wp)

19/12/17

H.O.D. Endorsement:

Date/Time:

4.35pm @ 18/12/17

Person Contacted:

Lyn

Vehicle IN / OUT

Date/Time

Action/Instruction

(✓) Estimate

SJJ 5995A - X

SKQ 4103R - X

20/12/17

Informed Katherine Wong pending est from repairer by Merimen

19/3/18

LS \$ 2800 confirmed by email (Ref 3966, 5915)

19/3/18

Send preli revised by merimen

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s

of _____

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 Rpt: _____ 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

Veh No: _____

Yr Regn: _____

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: _____

Colour: _____

Sp. Reading: _____

Eng/No: _____

C/No: _____

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: _____

F: _____

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. _____

mm

R/Bal. _____

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. _____

D.O.I. _____

Survey held at _____

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

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

Date / Time Action / Instruction

No estimate upon Survey.

Date/Time. File Pass to?

☐

Preli. Report

☐

Final Report

1)

Date/Time. File Return to?

2)

19/3- typist

Report Format :

Merimen

Lump Sum / I.B.I. / S

2800k

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

200

10

210

Survey Department Check List (Case Handler)

Reference No. : CS/MSG/7023968/ML/vcb

Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

Admin (_____ **)**: Case handler to make sure all information created by the assignment team are **ACCURATE**.

(1) Office Assign Form

		Y-Date	N-Date	Y-Date	N-Date
C	Reference No.	✓			
C	Customer Code				
N	Assign From				
C	Assign Date	✓			
C	Veh No (Inspected)	✓			
C	Veh No (Insured)	✓			
C	D.O.A	✓			
C	Policy No	✓			
C	Claim No	✓			
C	Insurance Authorisation (CA /REV/REP)				
C	Report Type	✓			
C	Weekend Charges				
N	Survey held at/Repairer	✓			
C	Excess				

Surveyor (_____ **)**: Case handler to make sure the surveyor completed all required information.

(1) Assignment Form

C	Vehicle No	✓			
C	Regn Month/Year	✓			
N	Vehicle Type	✓			
N	Make & Model	✓			
C	Engine Capacity. (C.C)	✓			
N	Colour	✓			
C	Odometer. (Sp.Reading)	✓			
C	Chassis No	✓			
N	General Condition	✓			
N	Steering	✓			
N	Brake	✓			
N	Modification (Modi)	✓			
C	Tyre Size	✓			
N	Tyre Make	✓			
C	Tyre Balance	✓			
C	Date of Inspection	✓			
N	Survey held	✓			
N	Des.of Damages	✓			

(2) System - (Views/Merimen)

C	Damaged Vehicle Photographs Uploaded	✓			
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(3) Workshop Estimate/Assignment Form

N	ALL Parts condition	✓			
C	Market Value for OD cases				
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)				
C	Days of repair	✓			
C	Finalised Amount	✓			
C	Re-inspection Cases to Finalize within 5 Days				

(4) System - (Views/Merimen)

C	Resurvey photo Uploaded	✓			
---	-------------------------	---	--	--	--

Check By: VERON 19/3/19
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				
MSIG INSURANCE (SINGAPORE) PTE LTD		Ref : CS/MSG17023968/M1vd3		
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 18-12-2017		
		Code : MSG		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SKQ 4103R	Veh. Inspected	SJJ 5995A	
Policy No.	28946874MCX	Coverage (\$)	0.00	
Claim No.	541178	Excess (\$)	0.00	
Assign From	MERIMEN (KATHERINE WONG)	Assign Date	18/12/2017	
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				
5. General Information				
Accident Date	15/12/2017	Inspection Date		
Survey held at	KIAN TEONG AUTO CENTRE BLK 176 SIN MING DRIVE #01-08 SIN MING CARE SINGAPORE 575721			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	18 Dec 2017		18 Dec 2017 15:59 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

Insured:	Premier Rent A Car Pte Ltd, Co. Reg. No.: 200612929E		[Created by insurer]	
Main Claimant:	LIM YINGJIE EUGENE, ID: S8306085I			
Vehicle Reg. No.:	SJJ5995A	Date of Loss:		15/12/2017 18:00 - :59
Claim Type:	TP / 541178	Policy/Cover Note No.:		28946874MCX
Vehicle Reg. No. (Insured):	SKQ4103R	Policy No. (Claimant):		Coverage: 01/05/2017 - 30/04/2018
		Excess:		
Repairer:	Kian Teong Auto Centre (HQ) BLK 176 SIN MING DRIVE #01-08 SIN MING AUTOCARE, 575721 Sin Ming - Tel:			
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Katherine Wong Chew Shong - 6594 2544]			
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 19/12/2017]			

ASSOCIATED MAIL RECEIVED

There are no mail for this case.

[View All](#) [Compose Case Mail](#)

ALL ASSOCIATED TASKS

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

[View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)

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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Katherine Wong Chew Shong

Date: 19 Mar 2018

Preliminary Advice

Insured Vehicle No : SKQ4103R

TP Vehicle No : SJJ5995A

Make : MERCEDES-BENZ E250

Date of Inspection : 19/12/2017

Inspection At : KIAN TEONG AUTO CENTRE (HQ)
BLK 176 SIN MING DRIVE #01-08 SIN MING AUTOCARE
SINGAPORE 575721

Accident Date : 15/12/2017

Assignment Date : 18/12/2017

Est. Duration of Repair : 2.00

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	6,766.00
Revised Amount	:S\$	3,588.36
Check Items (Estimated)	:S\$	0.00
Total	:S\$	3,588.36

Lump Sum Repair :S\$

Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

Remarks

() The vehicle is economical/not economical for repair.

(X) The above survey was conducted on a 'without prejudice' basis.

View Sent Message

This mail is associated with :

***SJJ5995A (541178)**

[SKQ4103R]

TP

LIM YINGJIE EUGENE

Dec 15 2017 6:00PM

[Premier Rent A Car Pte Ltd]

Kian Teong Auto Centre

[Resend](#)[View Recipients](#)[Print Message](#)[Delete Message](#)[Forward](#)

From LKK Auto Consultants Pte Ltd (LKK_HQ), sent on 20/12/2017 09:29 AM.

To MSI_WCS

Subject TP SURVEY SJJ 5995A

Dear Katherine,

Please be informed that we have inspected the vehicle SJJ 5995A on 19/12/17.

We are pending estimate from repairer.

Best Regards,

Veron Chen

DOCUMENTS SUMMARY

There are no documents.



HOTLINE TEL: (65) 8419 3000
FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.X.I

AUTOPLUS	OWN DAMAGE EXCESS	SS\$1000.00 (1)
CERTIFICATE NO. 2100398734-02000	WINDSCREEN EXCESS	SS\$100.00
	(for policies with effect from 1st November 2002)	
	SUM INSURED	Market Value
1) VEHICLE REGISTRATION NO.	INSURING WITH COE/PARF	Yes
2) NAME OF INSURED	SJI5995A	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	LIM YINGJIE EUGENE	
4) DATE OF EXPIRY OF INSURANCE	11 Jan 2017	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *	10 Jan 2018	
SUBJECT TO AGE CONDITION :30 years old and above		
a) The Insured.		
b) Any other person who is driving on the Insured's order or with his permission.		
A Young and/or Inexperienced Driver Excess ("YIDR") of SS\$3,000.00, in addition to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.		
<p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.</p>		
6) LIMITATION AS TO USE *		
Use only for social, domestic and pleasure purposes and for the Insured's business.		
The Policy does not cover use for hire or rewards, tuition, driving test, racing, pace-making, reliability trial speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.		
SOLE AGENT'S WORKSHOP : For new vehicles less than 3 years from initial registration, you have the option for claims-related repairs to be done at Sole Agent's workshop.		
APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)		
1. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 2. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only		
3. Ethoz - 30 Bukit Batok Cres (Tel: 66547777) 4. DPS Body & Paint (Subsidiary of C & C) - 209 Pandan Gardens (Tel: 65684501)		
5. Kan Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 6. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)		
7. Mova Automotive - 1008 Bukit Merah Lane 3 (Tel: 62723892) 8. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)		
9. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)		
LOSS OF USE Loss of Use 10 Days (1600cc) - Refer to policy wordings for details		
NAMED DRIVER NA		
HIRE PURCHASE COMPANY MayBank		
/ EMPLOYER'S LOAN		
* 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).

Issued At Singapore 13 Dec 2016

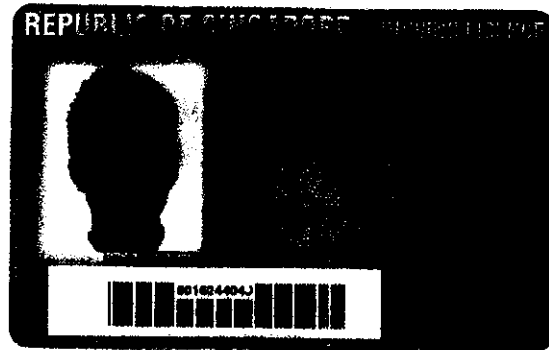
AIG Asia Pacific Insurance Pte. Ltd.

692243-000
E CAPITAL ASSETS PTE LTD
CRAWFORD POST OFFICE
P O BOX 699
SINGAPORE 911907

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPEMC.



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S83060851



Name

LIM YINGJIE EUGENE
(LIN YINGJIE)

林英劼

Race

CHINESE

Date of birth

02-03-1983

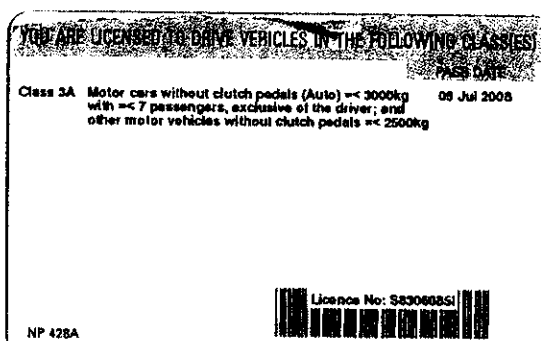
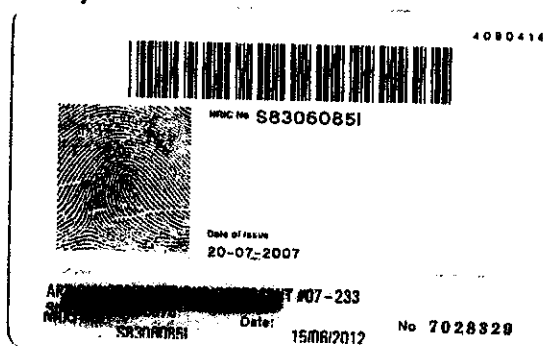
Sex

M

Country of birth

SINGAPORE





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	16/12/2017 13:12
Date Of Accident	15/12/2017 18:45
Exact Location Of Accident	UPPER CROSS ST (BEFORE CHINA SQUARE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ5995A
Insured/Policyholder	
Name Of Registered Owner	LIM YINGJIE EUGENE
NRIC No	S8306085I
Email Address	EUGENELIM1983@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94778051
Alternative Phone No	OTHERS-94778051

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250

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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100398734-02000
Cover Note Number	11/01/2017 TO 10/01/2018

Driver

Name of Driver	LIM YINGJIE EUGENE
NRIC No	S8306085I
Date Of Birth	02/03/1983
Occupation	INDOOR
Date Of Driving Pass	09/07/2008
Driving Experience	9 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94778051
Fax Number	
Contact Number	OTHERS-94778051
Email Address	EUGENELIM1983@GMAIL.COM

Address APT BLK 978D BUANGKOK CRESCENT #07-233 (S) 536978

Postcode

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 - HEAD TO REAR
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 SKQ4103R

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

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:

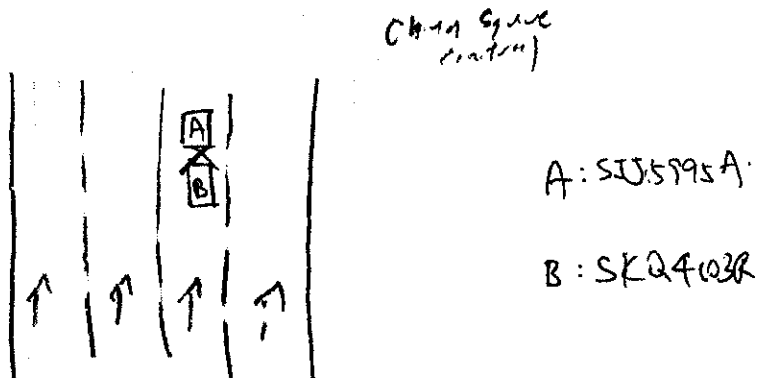
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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



Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On ~~the~~ 15/12/2017, at about 645pm, I was travelling along Upper Cross Street. Traffic was heavy. My vehicle was stationary. When I was about to move off, I felt an impact from the rear.

I alighted and realised SKQ4103R, could not stop in time & collided with the rear of my vehicle.

I had history of back problem and felt impact on my neck. I may visit a doctor to do a check up.

After the accident, I spoke to the driver of SKQ4103R. He told me to claim his company car insurance as this is a company car.

Insurance Co.	AGS Asia Insurance
Vehicle No.	SJ55495A
Date of Accident	15/12/2017
<input type="checkbox"/> Reporting Only	
<input type="checkbox"/> Own Damage Claim	
<input type="checkbox"/> Third Party Claim	
<input type="checkbox"/> Other Workshop	
Kian Teong Auto Centre	

DECLARATION

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

Policyholder's Signature

Date & Time: 16/12/17
12:53pm

Driver's Signature

(If driver is not the policyholder)
Date & Time: 16/12/17
12:53pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : Lim Ying Jie Eugene
VEHICLE NUMBER : SJ1 5995A
DATE/TIME OF ACCIDENT : 15/12/2017 @ 1245hrs
PLACE OF ACCIDENT : upper cross st (before ching square)
THIRD PARTY VEHICLE (IF ANY) : SKD 4103A

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

From Robinson Road to Buangkok Crescent.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Front to Rear Collision

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No.


Name:

I Affirmed The Above Information Is Given To My Best Knowledge.

KIAN TEONG AUTO CENTRE

Blk 176 Sin Ming Drive #01-08
Sin Ming AutoCare Singapore 575721
Tel No. : 64556268 Fax No. : 64555166
E-Mail : info@ktauto.com.sg
Website : www.ktauto.com.sg
Tax Reg. No. : 52991859E Buss. Reg. No. : 52991859E

AIG ASIA PACIFIC INSURANCE PTE LTD

Estimate : ES000422

Attention : Motor Claim Department
Contact : 64193000 Fax No. : 64153727

Date : 28/12/2017
Vehicle Num. : SJJ 5995 A
Make/Model : MEC E250-2011
Chassis/Eng# : WDD2073472F149060/2718603036138
Accident Date : 28/12/2017
Claim No. :
Reference :
Policy No. :

S/N	Quantity	Particular	Unit Price	Amount S\$
		LIST ITEMS :		
1.	1	REAR BUMPER UNIT		1,391.00
2.	2	REAR BUMPER SENSOR	632.00 x 2	1,264.00
3.	1	REAR BUMPER LOWER SPOILER		393.00
4.	1	REAR BUMPER REINFORCEMENT		818.00
5.	2	REAR BUMPER BRACKET	180.00 x	360.00
				<u>4,226.00</u>

List Total S\$:

LABOUR :
LABOUR FEES:
PROVISION OF LABOUR TOOLS AND CONSUMABLES
TO REMOVE AND CHANGE ALL DAMAGED PARTS
TO KNOCK AND REPAIR ALL DAMAGED PARTS
TO SPRAY PAINT ALL DAMAGED PARTS
TO DIAGNOSE AND RESET ECU USING DIAGNOSTIC TOOLS
TO CHECK AND REPAIR AIR BAG ASSY
TO DIAGNOSE AND REPROGRAMME AIR BAG UNIT
TO REMOVE AND REFIT HEADLAMP ASSY
TO CHECK ALL ELECTRICAL WIRING

250 1,120.00
250 780.00
250 480.00
30 160.00
2,540.00

Labour Total S\$:

E. & O.E.

Total S\$: 6,766.00
=====

for KIAN TEONG AUTO CENTRE

Please do not hesitate to contact us at the above number if there is any other further quire.
We thank you for your kind attention. Your prompt reply is greatly appreciated.

45 \$ 2800/2
2w days
16/3/18

Veron Chen (LKKAUTO)

From: Veron Chen (LKKAUTO)
Sent: Monday, 19 March 2018 10:29 AM
To: 'info@ktauto.com.sg'
Cc: SUR
Subject: RE: SJJ 5995A-DOA: 15/12/2017 (MSIG TP)

Dear Wendy,

Noted with thanks.

LOD sent over to MSIG.

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: info@ktauto.com.sg [mailto:info@ktauto.com.sg]
Sent: Monday, 19 March 2018 10:21 AM
To: Veron Chen (LKKAUTO) <veronchen@lkkauto.com>
Subject: Re: SJJ 5995A-DOA: 15/12/2017 (MSIG TP)

Dear Veron,

We are pleased to confirmed your offered amount. Kindly advice if LOD sent over to LKK or MSIG.

Yours faithfully
Wendy Siew
On and behalf of
Kian Teong Auto Centre
176 Sin Ming Drive
Sin Ming autocare #01-08
Singapore 575721
Tel: 65 64556268
Fax: 65 64555166
HP: 91786498
Website: www.ktauto.com.sg

From: "Veron Chen (LKKAUTO)" <veronchen@lkkauto.com>
Sent: 3/16/18 3:30 PM
To: "info@ktauto.com.sg" <info@ktauto.com.sg>
Subject: SJJ 5995A-DOA: 15/12/2017 (MSIG TP)
undefinedundefined

Dear Sir,

Kindly confirmed Lump Sum \$2800 @2 working 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)

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	18 Dec 2017		18 Dec 2017 15:59 Edit Adj Rpt	S\$2,800.00 Edit Estimates	S\$2,800.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS			[Created by insurer]
Insured:	Premier Rent A Car Pte Ltd , Co. Reg. No.: 200612929E		
Main Claimant:	LIM YINGJIE EUGENE , ID: S83060851		
Vehicle Reg. No.:	SJJ5995A	Date of Loss:	15/12/2017 18:00 - :59
Claim Type:	TP / 541178	Policy/Cover Note No.:	28946874MCX Coverage: 01/05/2017 - 30/04/2018
Vehicle Reg. No. (Insured):	SKQ4103R	Policy No. (Claimant):	
		Excess:	
Repairer:	Kian Teong Auto Centre (HQ) BLK 176 SIN MING DRIVE #01-08 SIN MING AUTOCARE, 575721 Sin Ming - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Katherine Wong Chew Shong - 6594 2544]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MA CHIN FOOK] ... [Final Rpt due 17/01/2018]		

ASSOCIATED MAIL RECEIVED	View All	Compose Case Mail
There are no mail for this case.		

ALL ASSOCIATED TASKS <input type="checkbox"/>										View All	Search Tasks	Create New Task	Complete
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?				
No results.													

Claim Documents

***SJJ5995A (541178)**
[SKQ4103R]
TP
LIM YINGJIE EUGENE
Dec 15 2017 6:00PM
[Premier Rent A Car Pte Ltd]
Kian Teong Auto Centre

Upload Documents Upload Photos Compose New Letter			View View in Browser		
Assessment Reports			1 per page	<input checked="" type="checkbox"/>	
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	20/12/17 11:47	Accident Statement From: SC - Reg. No: SKQ4103R, Claimant: PREMIER RENT A CAR PTE LTD	1	Load HTM	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	19/03/18 12:49	Adjuster Immediate Advice	1	Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
2	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
3	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
4	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
5	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
6	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
7	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
8	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
9	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
10	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
11	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
12	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
13	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
14	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
15	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
16	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
17	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
18	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
19	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
20	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
21	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
22	16/01/18 16:08	General View	1	Load JPG	<input checked="" type="checkbox"/>
23	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>
24	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>
25	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>
26	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>
27	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>
28	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>
29	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>
30	16/01/18 16:09	Reinspection Photo	1	Load JPG	<input checked="" type="checkbox"/>

					<input checked="" type="checkbox"/>
31	16/01/18 16:09	Reinspection Photo		Load JPG	<input checked="" type="checkbox"/>
32	16/01/18 16:09	Reinspection Photo		Load JPG	<input checked="" type="checkbox"/>
33	16/01/18 16:09	Reinspection Photo		Load JPG	<input checked="" type="checkbox"/>
34	16/01/18 16:09	Reinspection Photo		Load JPG	<input checked="" type="checkbox"/>
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	18/12/17 14:54	SJJ5995A E-Report		Load PDF	
2	18/12/17 14:54	TP Request for PRI		Load PDF	
3	18/12/17 16:14	TP agreement on SJE		Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

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: CS/MSG17023968/M1VD3E2

Date: 20/03/2018

REFERENCE

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

Policy No: 28946874MCX

Claimant Vehicle No : SJJ5995A

Insured Vehicle No : SKQ4103R

Date of Loss: 15/12/2017

Nature of Claim: TP

Claim No: 541178

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SJJ5995A

Make & Model: MERCEDES-BENZ E250, 2.0 (A)

Engine No: 27186030361383

Reg. Date: 11/01/2012 (Man. Year: 2011)

Chassis No: WDD2073472F149060

Colour: White

Odometer: 107490 km

Engine Capacity: 1796 cc

Market Value/New Car Price: N/A

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

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Yes

CONDITION OF TYRES

Front Tyre Size: 215/40 R18

Rear Tyre Size: 215/40 R18

Front Left Side: Michelin 6 mm

Rear Left Side: Michelin 6 mm

Front Right Side: Michelin 6 mm

Rear Right Side: Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,226.00	2,808.36	1,417.64	33.55
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,540.00	780.00	1,760.00	69.29
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (\$\$)	6,766.00	3,588.36	3,177.64	46.96
Approved Total (Overridden) (\$\$)		2,800.00		
(\$\$)	6,766.00	2,800.00	3,966.00	58.62
+ GST 7.00/7.00% (\$\$)	473.62	196.00	277.62	58.62
Nett Amount (\$\$)	7,239.62	2,996.00	4,243.62	58.62

INSPECTION

Date of Assignment: 18/12/2017

Date Inspected: 19/12/2017 Inspected At:

Kian Teong Auto Centre (HQ)
BLK 176 SIN MING DRIVE #01-08 SIN
MING AUTOCARE
Singapore 575721

Estimated Period of Repair: 2.0 days

Adjuster: MA CHIN FOOK**Manager:** VERON CHEN

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.

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 20 Mar 2018)
Parts: 143 MERCEDES-BENZ E250 2.0 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SJJ5995A)
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

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER UNIT	Deformed	1,391.00 F	*1,391.00 FL
2	2		*REAR BUMPER SENSOR	Shorted	1,264.00 F	*518.40 FL
3	1		*REAR BUMPER LOWER SPOILER	Distorted	393.00 F	*393.00 FL
4	1		*REAR BUMPER REINFORCEMENT	Bent	818.00 F	*818.00 FL
5	2		*REAR BUMPER BRACKET	Serviceable	360.00 F	*- FL
					Sub Total (\$\$)	4,226.00 3,120.40
					- List Item Discount on L Items 0.00/10.00% (\$\$)	0.00 312.04
					Total Parts (\$\$)	4,226.00 2,808.36

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PROVISION OF LABOUR TOOLS AND CONSUMABLES TO REMOVE AND CHANGE ALL DAMAGED PARTS TO KNOCK AND REPAIR ALL DAMAGED PARTS	New	1,120.00	250.00
2	TO SPRAY PAINT ALL DAMAGED PARTS TO DIAGNOSE AND RESET ECU USING DIAGNOSTIC TOOLS	New	780.00	250.00
3	TO CHECK AND REPAIR AIR BAG ASSY TO DIAGNOSE AND REPROGRAMME AIR BAG UNIT TO REMOVE AND REFIT HEADLAMP ASSY	New	480.00	250.00
4	TO CHECK ALL ELECTRICAL WIRING	New	160.00	30.00
Gross Labour Cost (S\$)			2,540.00	780.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >