

ASS. REC. BY:

REF: CS/MS617024334 / Uqbnz Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): Muhd Ashik of msu Date/Time: 16/01/2018

Estimated Cost: _____ Bill to: _____

OD ~~TP~~ / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: XD 8672C Insured: SKD 6519Eat Workshop m/s Vfix Auto Tel: 6455 2957of 60 Kota Bukit Aie 6Policy No: _____ Claim No: 542083

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 20-12-2017
(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement: _____

Date/Time: _____ Person Contacted: _____ Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	XD 8672C - NA / FCL16007721 / d2
	SKD 6519E - X
18/1/18 @ 10:30am	revised to Muhd Ashik by email.

QA: 14/2/16

Summary

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: **XD 86 72 C**

at Workshop m/s: **Vfix**

of: _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

3/1/2018 10am Owner Waiting

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

ADAC Accident Report: _____ Consistent? : Yes or No

GA / FR Seen: _____ Consistent? : Yes or No

Est. Repairs: **2** days Res: Yes or No

Lump Sum: **20** % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

L1A 30790

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **XD8672C** Yr Regn: **3 14**

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

Truck / Trailer or (M)

Make: **ISUZU FX 277M** cc **9839**

Colour: **Blue** A/C: Insured / Std / NI / NA

Sp Reading: **22/277** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **JALFX 277MD7000036**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: **295/60R22.5**

R: _____

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

TOYO / YOKO or

Front

R/Bal: **6** mm

L/Bal: **0** mm

D.O.A.

Rear

R/Bal: **6/6** mm

L/Bal: **6/6** mm

D.O.I. **3/1/18**

Survey held at: _____

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

MSR

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

Date / Time Action / Instruction

3/1/18 conf. and L/S \$750 with m.chk
Chkd \$3157.04, 81%

18/1/18

RECEIVED 19 JAN 2018

Date/Time: File Pass to?

19/1/18

Date/Time: File Return to?

☐ : Preli. Report
☐ : Final Report

Days Of Repair: **2**

Resurvey No. of Trip: _____

Survey Fee

Transportation

3-HRS \$1

Photos

Other

TOTAL

Add Fee:

☐ Site Insp \$

☐ Interview \$

☐ Tech. Insp \$

☐ Weekend \$

Report Format: **TP**

Lump Sum / I.B. \$ **750**

200

10

210



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

MSG INSURANCE (SINGAPORE) PTE LTD

Ref : CS/MSG17024334/Uqb

16 RAFFLES QUAY

#24-01 HONG LEONG BLDG SINGAPORE 048581

Date : 26-12-2017

Code : MSG



1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SKD 6519E	Veh. Inspected	XD 8672C
Policy No.		Coverage (\$)	0.00
Claim No.	542083	Excess (\$)	0.00
Assign From	MUHD ASHIK	Assign Date	26/12/2017

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	20/12/2017	Inspection Date	03/01/2018
Survey held at	VFIX AUTO SERVICE PTE LTD 60 KAKI BUKIT AVE 6, ARK@KB, 417892 KAKI BUKIT SINGAPORE 417892		

5a. Remarks

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

INS. CASE OWNER:

CC6/QBE170 24334, 4/1ca3

LKK:

IDAC:

Surveyor:

mappus

DOI:

ASSIGNMENT

3/1/18

Date / Time:

26/12/2017

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SKD 6519E (MY16)

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : SS

D.O.A : 20/12/2017

Place of Accident : _____

Is driver the owner? (YES / NO)

Nature of Accident : _____

If NO, Driver Name / Age : _____

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

XD 8672C



INSRS:

WSP: V fix

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____

Date/ Time

XD 8672C. NA/PC11600274/d2 : 007. 14/02/16
SKD 6519E. X

* SKD 6519E is insured w msh.

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA :

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No. :

If NO or B 28, Ass. Lia :

Repair Cost:

S\$

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

(\$

x

days)

Loss of Income (LOI):

S\$

(\$

x

days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

Reference No.: C9/MSG/704334/Agp
Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

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

[illegible]

(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

C Damaged Vehicle Photographs Uploaded

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

✓	
✓	
✓	

C Resurvey photo Uploaded

--	--	--	--

Check By:

Case Handler

Date _____

Catherine Chong (LKK Auto)

From: Muhd Ashik B Madi <ashik_madi@sg.msig-asia.com>
Sent: Tuesday, 16 January, 2018 3:49 PM
To: Catherine Chong (LKK Auto)
Cc: assignments@lkkauto.com
Subject: RE: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Catherine,

Our file reference is 542083

Kindly let us have all the claims supporting documents.

Thank you.

Ashik Madi
Executive, Claims Services (Motor)
Direct line +65 6594 2548 | Direct fax +65 6225 7402 | ashik_madi@sg.msig-asia.com



MSIG



Insurer Claims
Team of the Year
2016

MSIG Insurance (Singapore) Pte Ltd 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | T: +65 6220 9644 | F: +65 6225 6371 | Co. Reg. No. 200412212G | msig.com.sg



A Member of **MS&AD** INSURANCE GROUP

From: Catherine Chong (LKK Auto) [mailto:admin-d@lkkauto.com]
Sent: Tuesday, 16 January, 2018 3:43 PM
To: Muhd Ashik B Madi <ashik_madi@sg.msig-asia.com>
Cc: assignments@lkkauto.com
Subject: RE: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Muhd Ashik,

Kindly provide us the claim number to submit report.

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: Muhd Ashik B Madi [mailto:ashik_madi@sg.msig-asia.com]
Sent: Thursday, 4 January, 2018 4:19 PM
To: vfix auto <vfixauto@gmail.com>

Catherine Chong (LKK Auto)

From: Muhd Ashik B Madi <ashik_madi@sg.msig-asia.com>
Sent: Thursday, 4 January, 2018 4:19 PM
To: vfix auto
Cc: Catherine Chong (LKK Auto)
Subject: RE: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Irene,

I have spoken to Ms Catherine of LKK Auto Consultants & requested her to submit the survey report to MSIG directly.

Please quantify your client's claim accordingly for our consideration.

Thank you.

Ashik Madi
Executive, Claims Services (Motor)
Direct line +65 6594 2548 | Direct fax +65 6225 7402 | ashik_madi@sg.msig-asia.com



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A Member of **MS&AD** INSURANCE GROUP

From: vfix auto [mailto:vfixauto@gmail.com]
Sent: Thursday, 4 January, 2018 4:14 PM
To: Muhd Ashik B Madi <ashik_madi@sg.msig-asia.com>
Subject: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Ashik

Please find attached copy for your attention. Survey done by LKK and we have not repai, need your advice.

Thanks
Irene

Vfix Auto Services Pte Ltd
60 Kaki Bukit Ave 6 Ark@KB Singapore 417892 | E: vfixauto@gmail.com | T: +65 64552957 | F: +65 64452368

CONFIDENTIALITY NOTICE

This e-mail (including any attachments) may contain information that is privileged or confidential. The sending of this e-mail to any

person other than the intended recipient is not a waiver of the privilege or confidentiality that attaches to it. If you are not the intended recipient, please notify the sender immediately, delete the email and do not copy, distribute or disclose its contents.

Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Thursday, 18 January 2018 10:23 AM
To: 'Muhd Ashik B Madi'
Cc: Admin-D (LKKAUTO); SUR
Subject: RE: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017
Attachments: CSMSG17024334Uqb.pdf

Dear Ashik,

Enclosed herewith preliminary advice of XD 8672C.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: sjewsc@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Muhd Ashik B Madi [mailto:ashik_madi@sg.msig-asia.com]
Sent: Thursday, 4 January 2018 4:19 PM
To: vfix auto <vfixauto@gmail.com>
Cc: Admin-D (LKKAUTO) <admin-d@lkkauto.com>
Subject: RE: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Irene,

I have spoken to Ms Catherine of LKK Auto Consultants & requested her to submit the survey report to MSIG directly.

Please quantify your client's claim accordingly for our consideration.

Thank you.

Ashik Madi
Executive, Claims Services (Motor)
Direct line +65 6594 2548 | Direct fax +65 6225 7402 | ashik_madi@sg.msig-asia.com



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A Member of **MS&AD** INSURANCE GROUP

From: vfix auto [<mailto:vfixauto@gmail.com>]
Sent: Thursday, 4 January, 2018 4:14 PM



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: 542083

Date: 18th January 2018

Our Ref: CS/MSG17024334/Uqb

The Motor Claims Department
MSIG Insurance

Attn: Muhd Ashik

Dear Sirs/Mdm

PRELIMINARY ADVICE OF VEHICLE NO. XD 8672C .

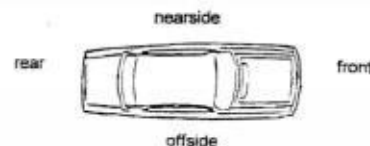
We thank you for the instruction on 16/01/2018.

Please be informed that we had conducted the inspection of the abovementioned vehicle on 03/01/2018 at the premises of M/s VFIX AUTO and have the following to report:-

Workshop Estimate Amount	: S\$ <u>3,907.04</u> .
Revised Estimate Amount	: S\$ <u>750.00 (Lump Sum)</u> .
"Check" Items Amount	: S\$ <u>-</u> .
Market Value	: S\$ <u>-</u> .
LTA Reimbursement Value	: S\$ <u>-</u> .
Nett Value	: S\$ <u>-</u> .

Description of Damage:

The vehicle sustained damages at the n/s front portion.



Comments/ Present Status:

Damages consistent.

Days of repair: 2 days.

We have NOT authorized repair.

Yours faithfully

MARCUS CHUA
Licensed Appraiser

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	21/12/2017 16:21
Date Of Accident	20/12/2017 17:05
Exact Location Of Accident	SIMS WAY > PIE(TUAS)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD8672C
Insured/Policyholder	
Name Of Registered Owner	EE HUP - JOHN PTE LTD
Co Reg No	200814584H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62954623
Vehicle Particulars	
Manufacturer	ISUZU
Model	FXZ77M
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5087877713-01
Cover Note Number	
Driver	
Name of Driver	SAVURIMUTHU KULANDAIRASU
Passport No/FIN	F8265432K
Date Of Birth	25/05/1979
Occupation	OUTDOOR
Date Of Driving Pass	04/08/2014
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85092979
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	22A BEATTY ROAD SINGAPORE 209948
Postcode	209948
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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 TO BELOW STATEMENT/SKETCH PLAN: ATTENDED BY SITI

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	SKD6519E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BENJAMIN HO YI WEI
NRIC/Passport Number	S9319336I
Contact Number	81838669
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.:

Sketch Plan #2 Pg. 1

SKETCH PLAN

A) XD8672C

B) 8KD 6519E



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20/12/2017 at about 1705 hrs, I was driving along Sims way towards PIE (Tuas). While reaching the merge lane vehicle B (SKD 6519E) collided into my left

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: _____ Fax: 67492305

NRIC/FIN No.: 001-77667633@csingnet.com.sg

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	4584H
Vehicle Details	
Vehicle No.:	XD8672C
Vehicle to be Exported:	No
Intended De-registration Date:	03 Jan 2018
Vehicle Make:	ISUZU
Vehicle Model:	FXZ77M
Primary Colour:	Blue
Manufacturing Year:	2013
Engine No.:	6UZ1478080
Chassis No.:	JALFXZ77MD7000036
Maximum Power Output:	-
Open Market Value:	\$81,793.00
Original Registration Date:	01 Mar 2014
First Registration Date:	01 Mar 2014
Transfer Count:	0
Actual ARF Paid:	\$4,090.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	29 Feb 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$50,001.00
COE Rebate Amount:	\$30,790.00
Total Rebate Amount:	\$30,790.00

The information contained herein is correct as at 03 Jan 2018

OK

Catherine Chong (LKK Auto)

From: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Sent: Thursday, 4 January, 2018 3:25 PM
To: vfix auto; assignments
Cc: SUR; Zaini (LKK Auto); Hsiao Tong (LKKAuto)
Subject: RE: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Irene,

Thank you for your email.

By copy to Catherine,

Kindly assist.

"Wishing you a Happy New Year 2018"

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

From: vfix auto [mailto:vfixauto@gmail.com]
Sent: Thursday, 4 January, 2018 3:23 PM
To: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Subject: Fwd: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Mei Kwan

As informed by MSIG officer, they need your good office to contact them officer-in-charge Ashik at 6594 2548.

Thanks
Irene

Vfix Auto Services Pte Ltd
60 Kaki Bukit Ave 6 Ark@KB Singapore 417892 | E: vfixauto@gmail.com | T: +65 64552957 | F: +65 64452368

----- Forwarded message -----

From: Zaini (LKK Auto) <Zaini@lkkauto.com>
Date: Wed, Jan 3, 2018 at 4:20 PM
Subject: RE: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017
To: vfix auto <vfixauto@gmail.com>
Cc: "Hsiao Tong (LKKAuto)" <chewht@lkkauto.com>, Admin A <admin-a@lkkauto.com>, "Mei Kwan (LKKAuto)" <Meikwan@lkkauto.com>

Without Prejudice

Dear Irene,

We refer to our previous tele-conversation.

We were informed by our principal, QBE Insurance (Singapore) Pte Ltd, that the policy V0013267 was cancelled wef 30.11.2017.

Kindly assist to confirm the correct insurer for your client's claim.

Best Regards,

Zaini Kusaini | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6841-2132 | email: Zaini@lkkauto.com | fax: 6741-4108

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

From: vfix auto [<mailto:vfixauto@gmail.com>]

Sent: Tuesday, 2 January, 2018 3:30 PM

To: Zaini (LKK Auto)

Subject: Fwd: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Zaini

Please find attached LTA search for your kind perusal.

Thanks

Irene

Vfix Auto Services Pte Ltd

60 Kaki Bukit Ave 6 Ark@KB Singapore 417892 | E: vfixauto@gmail.com | T: [+65 64552957](tel:+6564552957) | F: [+65 64452368](tel:+6564452368)

----- Forwarded message -----

From: **vfix auto** <vfixauto@gmail.com>

Date: Sat, Dec 23, 2017 at 8:56 AM

Subject: Re: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

To: "Mei Kwan (LKKAUTO)" <Meikwan@lkkauto.com>

Cc: Admin A <admin-a@lkkauto.com>, assignments <assignments@lkkauto.com>

Dear Mei Kwan

Please find attached copies as per your requested.

Thanks

Irene

Vfix Auto Services Pte Ltd

60 Kaki Bukit Ave 6 Ark@KB Singapore 417892 | E: vfixauto@gmail.com | T: [+65 64552957](tel:+6564552957) | F: [+65 64452368](tel:+6564452368)

On Fri, Dec 22, 2017 at 6:02 PM, Mei Kwan (LKKAUTO) <Meikwan@lkkauto.com> wrote:

Dear Irene,

We refer to the above matter.

Please provide us TP GIA report and estimated COR for our necessary action.

"Wishes you a Merry Christmas & Happy New Year 2018"

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

From: vfix auto [<mailto:vfixauto@gmail.com>]

Sent: Friday, 22 December, 2017 4:45 PM

To: assignments <assignments@lkkauto.com>

Subject: ACCIDENT INVOLVING XD8672C & SKD6519E ON 20/12/2017

Dear Catherine

Please find attached copy for your arrangement.

Thanks

Irene

Vfix Auto Services Pte Ltd

60 Kaki Bukit Ave 6 Ark@KB Singapore 417892 | E: vfixauto@gmail.com | T: [+65 64552957](tel:+6564552957) | F: [+65 64452368](tel:+6564452368)

MSIG INSURANCE (SINGAPORE) PTE LTD
16 RAFFLES QUAY
#24-01 HONG LEONG BLDG
SINGAPORE 069428

ESTIMATE

DATE : 22/12/2017
ACC DATE : 20/12/2017
REF NO. : VFIX-TP20170384
POLICY NO :

Attention: Motor Claim Department

RE : VEHICLE NO :XD8672C ISUZU FXZ 77M

DESCRIPTIONS	UNIT PRICE	AMOUNT S\$
1 1 STEP BOARD LOWER		17 322.00 X
2 1 STEP BOARD LOWER GARNISH		2 358.00
3 1 FRONT BUMPER		2 2,088.80 X
4 1 HEADLAMP RIM L		M.S 115.00
		\$ 2,883.80
	LESS 20%	\$ 576.76
		\$ 2,307.04

LABOUR & MISCELLANEOUS:	AMOUNT S\$
1 To remove damaged body panel with all necessary components/attachments apply hot-works where necessary	300 800.00
2 To spray paint replaced/repainted body panels inclusive of preparatory works and painting materials	300 800.00
	\$ 1,600.00

GRAND TOTAL : \$ 3,907.04

SINGAPORE DOLLARS : THREE THOUSAND NINE HUNDRED SEVEN &
CENTS FOUR ONLY

Vfix Auto Service Pte Ltd



LK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Pans 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:

not about
2/5 750
2/5 750
3/1/18
ok.
take photo after repair

QBE INSURANCE (S'PORE) PTE LTD
1 RAFFLES QUAY
#29-10 SOUTH TOWER
SINGAPORE 048583

ESTIMATE

DATE : 22/12/2017
ACC DATE : 20/12/2017
REF NO. : VFIX-TP20170384
POLICY NO :

Attention: Motor Claim Department

RE : VEHICLE NO :XD8672C ISUZU FXZ 77M

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		\$ 2,883.80
	LESS 20%	\$ 576.76
		\$ 2,307.04

473

LABOUR & MISCELLANEOUS:	AMOUNT S\$
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	\$ 1,600.00

GRAND TOTAL : \$ 3,907.04

SINGAPORE DOLLARS : THREE THOUSAND NINE HUNDRED SEVEN &
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Vfix Auto Service Pte Ltd



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- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

Not About
2/5 \$ 750/2
2 1/2
3/1/18
John. pho. A. H. 11/12/17

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/MSG17024334/UQBN2

Date: 19/01/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	A29050586MTR
Claimant Vehicle No :	XD8672C	Insured Vehicle No :	SKD6519E
Date of Loss:	20/12/2017	Nature of Claim:	TP
		Claim No:	542083

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	XD8672C	Engine No:	6UZ1478080
Make & Model:	ISUZU FXZ77M, 9.8 D (M)	Chassis No:	JALFXZ77MD7000036
Reg. Date:	01/03/2014 (Man. Year: 2013)	Odometer:	221277 km
Colour:	Blue		
Engine Capacity:	9839 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	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	295/80R22.5	Rear Tyre Size:	295/80R22.5 (D/D)
Front Left Side:	Pirelli 6 mm	Rear Left Side:	Pirelli 6/66/6 mm
Front Right Side:	Pirelli 6 mm	Rear Right Side:	Pirelli 6/66/6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	2,307.04	378.40	1,928.64	83.60
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,600.00	600.00	1,000.00	62.50
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	3,907.04	978.40	2,928.64	74.96
Approved Total (Overridden) (S\$)		750.00		
(S\$)	3,907.04	750.00	3,157.04	80.80
+ GST 7.00/7.00% (S\$)	273.49	52.50	220.99	80.80
Nett Amount (S\$)	4,180.53	802.50	3,378.03	80.80

INSPECTION

Date of Assignment:	18/01/2018		
Date Inspected:	03/01/2018	Inspected At:	Vfix Auto Service Pte Ltd (HQ) 60 Kaki Bukit Ave 6, ARK@KB Singapore 417892

Estimated Period of Repair: 2.0 days

Adjuster: MARCUS CHUA

Manager: SHIAU CHAN

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:	(Last Synchronised: 19 Jan 2018)	
Parts:	N/A	ISUZU FXZ77M 9.8 D (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for XD8672C)	
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		*STEP BOARD LOWER	Not Necessary	322.00 FL	*. FL
2	1		*STEP BOARD LOWER GARNISH	Deformed	358.00 FL	*358.00 FL
3	1		*FRONT BUMPER	Repair	2,088.80 FL	*. FL
4	1		*HEADLAMP RIM L	Missing	115.00 FL	*115.00 FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	2,883.80	473.00
- List Item Discount on L Items 20.00/20.00% (S\$)	576.76	94.60
Total Parts (S\$)	2,307.04	378.40

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	TO REMOVE DAMAGED BODY PANEL WITH ALL NECESSARY COMPONENTS/ATTACHMENTS APPLY HOT-WORKS WHERE NECESSARY	New	800.00	300.00
2	TO SPRAY PAINT EPLACED/REPAIRED BODY PANELS INCLUSIVE OF PREPARATORY WORKS AND PAINTING MATERIALS	New	800.00	300.00
Gross Labour Cost (S\$)			1,600.00	600.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >