

22/09/2003

ASS. REC. BY:

REF: CS/MSG18000488/ Ad352

Special Instructions:

SURVEYOR
Mehimen

Adrian

ASSIGNMENT (Office)

From (Person):

Irene Tan

of MSG

Date/Time: 09/01/18 @ 9.58am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLP 6435M

Insured:

SKS 1535L

at Workshop m/s

Freemotion Autodrive

Tel:

6702 3533

of

25kaki Bk + Rd + Synergy # 03-33

Policy No:

28912247amy

Claim No:

544102

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 03/01/2018

CA / REV / REP. / REV 24 HRS

'wp'

10/01/2018 @ After 2pm

H.O.D. Endorsement:

Date/Time: 11.33am @ 04/01/18

Person Contacted:

Lee Mei

Vehicle IN/OUT

Date/Time

Action/Instruction (4) Estimate

SLP 6435M-X

SKS 1535L-X

After repair:

26/01/18 1121am Email to Irene Tan thru mehimen.

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SLP6435M Yr Regn: 2017 / Jne
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Toyota CHR Hybrid 1787
 Colour: Silver A/C Insured / Std / NI / NA
 Sp. Reading: 15169 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: ZYX 102010098
 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: 215/60R17
 R: _____
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or

Front _____ Rear _____
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. _____ D.O.L. 10/01/18 @ 2.34pm
 Survey held at: Freection
 Des. of Damages: Fr / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time _____ Action / Instruction
TP MSIG. PRS.

Repair Cost Range: 2k - 2.5k
04 Days H.S.

URGENT

Date/Time, File Pass to?

1) 26/01/2018

Date/Time, File Return to?

2) _____

☐ : Preli. Report
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S-RS \$

Photo

Other

Report Format: PRS

Lump Sum / I.B.I: (\$ _____)

Add Fee: ☐ Site Insp (\$ _____)☐ Interview (\$ _____)☐ Tech. Insp (\$ _____)☐ Weekend (\$ _____)

TOTAL

Survey Department Check List (Case Handler)

Reference No.:

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

- 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

Y-Date	N-Date	Y-Date	N-Date
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

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

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Check By:

--	--

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 : CS3/MSG18000488/Ad3

16 RAFFLES QUAY
#24-01 HONG LEONG BLDG SINGAPORE 048581

Date : 09-01-2018



Code : MSG

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SKS 1535L	Veh. Inspected	SLP 6435M
Policy No.	28912247QMY	Coverage (\$)	0.00
Claim No.	544102	Excess (\$)	0.00
Assign From	MERIMEN (IRENE TAN)	Assign Date	09/01/2018

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	03/01/2018	Inspection Date	09/01/2018
Survey held at	FREESION AUTODRIVE 25 KAKI BUKIT ROAD 4 SYNERGY @ KB #03-33 SINGAPORE 417800		

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	03 Jan 2018		09 Jan 2018 09:58 Assign				New Assignment Cancel Case

[Main](#)[Reference](#)[Claim Details](#)[Documents](#)[Show All](#)

CLAIM SUBFOLDER DETAILS

[\[Created by insurer\]](#)

Insured:	NG SAY POH, ID: S7015656C		
Main Claimant:	CHIA SONG CHIM, ID: S1510658A		
Vehicle Reg. No.:	SLP6435M	Date of Loss:	03/01/2018 07:00 - :59
Claim Type:	TP / 544102	Policy/Cover Note No.:	28912247QMY (Comprehensive) Coverage: 27/03/2017 - 26/03/2018
Vehicle Reg. No. (Insured):	SKS1535L	Policy No. (Claimant):	
		Excess:	S\$500.00
Repairer:	Freesion Autodrive (Kaki Bukit) 25 Kaki Bukit Rd 4, Synergy @KB #03-33, 417800 Kaki Bukit - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Irene Tan Gek Ing - 6594 2541]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 10/01/2018]		
Driver/Custodian (Insured):	NG SAY POH (/ Male), NRIC: S7015656C		

ASSOCIATED MAIL RECEIVED

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

There are no mail for this case.

ALL ASSOCIATED TASKS

[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.									

MSMF 8001772 / SMF Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 04/01/2018 09:59
SUBMITTED BY: Chia Pei Ying

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 04/01/2018 09:59
Date Of Accident 03/01/2018 07:15
Exact Location Of Accident BLK 616 HOUGANG AVE 8 CARPARK
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLP6435M
Insured/Policyholder
Name Of Registered Owner CHIA SONG CHIM
NRIC No S1510658A
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-94232000
Alternative Phone No OFFICE-94232000

Vehicle Particulars

Manufacturer TOYOTA
Model CHR
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 AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number GA223088/1
Cover Note Number

Driver

Name of Driver CHIA SONG CHIM
NRIC No S1510658A
Date Of Birth 13/07/1961
Occupation INDOOR
Date Of Driving Pass 12/06/2003
Driving Experience 14 YEARS AND 6 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-94232000
Fax Number
Contact Number OFFICE-94232000
Email Address NOEMAIL

Address	BLK 616 HOUGANG AVE 8 #06-378
Postcode	530616
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 ON COLLISION
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

ON 03/01/2018 AT 7.13AM, I WAS PARKING MY CAR AT THE CARPARK LOT AT BLK 616 HOUGANG AVE 8. SUDDENLY, VEHICLE B (SKS1535L) SPEEDING TOWARDS ME AND HIT MY VEHICLE A (SLP6435M). THE VEHICLE B DRIVER IS RUSHING AND ADMITTED IT IS HIS FAULT. AS A RESULT, MY VEHICLE (SLP6435M) SUSTAINED DAMAGES ON THE FRONT AND RIGHT PORTION.

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

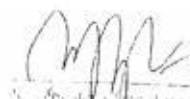
Vehicle Registration Number	SKS1535L
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	NG SAY POH
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

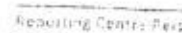
SKETCH PLAN

IMPORTANT NOTICE

1. This form must be completed by the Policyholder and/or the Author (see below).
2. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
3. Filing an acceptance of this form by insurance companies is not an admission of policy liability on the part of this insurance company.
4. Any other reporting may be referred to the Police for investigation.
5. 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.
6. By making a copy of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of this report being made available as stated.
7. Consent under the Personal Data Protection Act (PDPA)
 - (a) I understand, acknowledge, agree and consent that:
 - (i) 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/or 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 statutory Authority of Singapore and any relevant government agency/authority (such as the police), for the purposes 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 making of correspondence, statements, invoices, reports or notices to me, which may involve disclosure of certain personal data showing to bring about delivery of the same as well as on the external use of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively, the "Purposes");
 - (ii) 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
 - (iii) my Personal Information may/are be disclosed by any of the Insurers and/or GIA to their third party service providers or sub-contractors (their lawyers/law firms, which may be used outside of Singapore, for one or more of the above Purposes);
 - (iv) my Personal Information will also be collected and used to control claimant's for the purpose of fraud detection, investigation and management in present and all future claims;
 - (b) The information provided in under (a) 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 compliance with requirements under any regulations, laws or court orders;


 Policyholder Signature
 Date: 3/1/18
 Time: 12:10pm


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 3/1/18
 12:10pm


 Reporting Centre Personnel's Signature
 Name: MRIC/PHY/201
 MRIC/PHY/201

Sketch Plan #2 Pg. 1

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

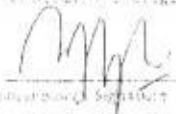
On 3/1/2019, at 7:13am, I was parking my car at car-park lot at B16 b16 Hongkong Ave 8.
Suddenly vehicle B SKS1535L speeding towards me and hit my vehicle A SLP6435M SLP6435M.

The vehicle B driver is making and admitted it is his fault.

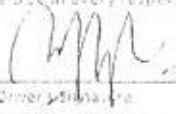
As a result, my vehicle SLP6435M sustained damages on the front and right portion.

DECLARATION

I hereby declare the foregoing particulars are true in every respect.


Policyholder's Signature
Date & Time

3/1/19
12:40pm


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

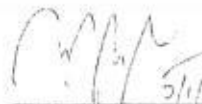
3/1/19
12:40pm

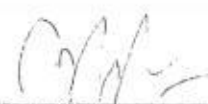
Reporting Centre Personnel's Signature
Name
NR/CC/IN/NT

Sketch Plan #3 Pg. 1

SKETCH PLANIMPORTANT NOTICE

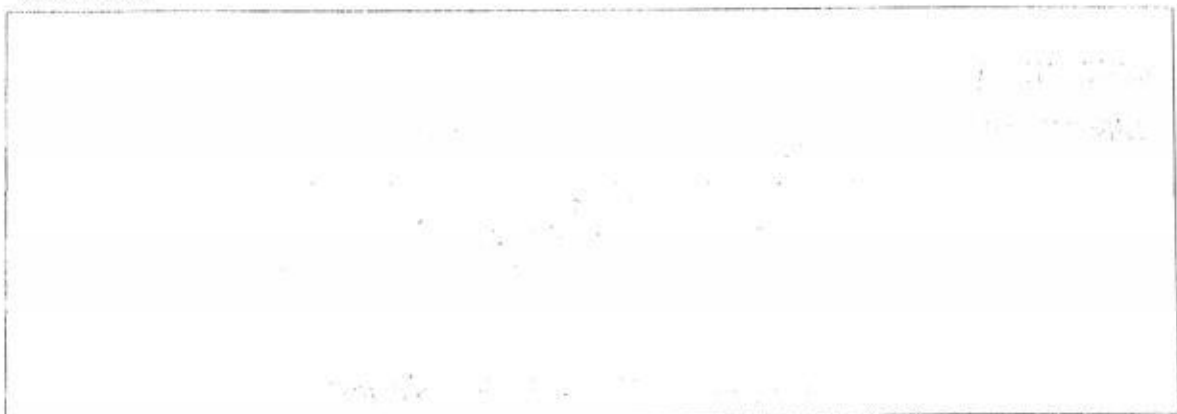
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 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.
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 purposes 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/rail 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.


 Policyholder's Signature / Date & Time
 12/1/19


 Driver's Signature (If driver is not the policyholder) / Date & Time
 12/1/19 12:12 PM

Witnessed by Reporting Centre Personnel

Sketch Plan



View Sent Message

This mail is associated with :

***SLP6435M (544102)**
[SKS1535L]

TP
CHIA SONG CHIM
Jan 3 2018 7:00AM
[NG SAY POH]
Freesion Autodrive

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

From LKK Auto Consultants Pte Ltd (LKK_HQ), sent on 26/01/2018 11:21 AM.
To MSI_ITAN
Subject Pre-repair Inspection

Dear Irene,

Refer to your assignment on 09.01.2018 at 9.58AM.

Please be informed that we have inspected the vehicle SLP 6435M on 10.01.2018 at 2.34PM.

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)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	03 Jan 2018		09 Jan 2018 09:58 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:		NG SAY POH, ID: S7015656C							
Main Claimant:		CHIA SONG CHIM, ID: S1510658A							
Vehicle Reg. No.:		SLP6435M	Date of Loss:	03/01/2018 07:00 - :59					
Claim Type:		TP / 544102	Policy/Cover Note No.:	28912247QMY (Comprehensive) Coverage: 27/03/2017 - 26/03/2018					
Vehicle Reg. No. (Insured):		SKS1535L	Policy No. (Claimant):						
			Excess:	S\$500.00					
Repairer:		Freesion Autodrive (Kaki Bukit) 25 Kaki Bukit Rd 4, Synergy @KB #03-33, 417800 Kaki Bukit - Tel:							
Handling Insurer:		MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Irene Tan Gek Ing - 6594 2541]							
Adjuster:		LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by ADRIAN LING] ... [Imm.Advice due 10/01/2018]							
Driver/Custodian (Insured):		NG SAY POH (/ Male), NRIC: S7015656C							
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS 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

*SLP6435M (544102)
[SKS1535L]
TP
CHIA SONG CHIM
Jan 3 2018 7:00AM
[NG SAY POH]
Freesion Autodrive

Upload Documents		Upload Photos	Compose New Letter	View View in Browser v
Assessment Reports 1 per page v ☒				
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	09/01/18 08:52	Accident Statement From: SC - Reg. No: SKS1535L, Claimant: NG SAY POH	Load HTM	☐
Photos/Images 3 per page v ☒				
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	26/01/18 11:20	General View	Load JPG	☒
2	26/01/18 11:20	Chassis Number	Load JPG	☒
3	26/01/18 11:20	General View	Load JPG	☒
4	26/01/18 11:20	General View	Load JPG	☒
5	26/01/18 11:20	General View	Load JPG	☒
6	26/01/18 11:20	General View	Load JPG	☒
7	26/01/18 11:20	General View	Load JPG	☒
8	26/01/18 11:20	General View	Load JPG	☒
9	26/01/18 11:20	General View	Load JPG	☒
10	26/01/18 11:20	General View	Load JPG	☒
11	26/01/18 11:20	General View	Load JPG	☒
12	26/01/18 11:20	General View	Load JPG	☒
13	26/01/18 11:20	General View	Load JPG	☒
14	26/01/18 11:20	General View	Load JPG	☒
15	26/01/18 11:20	General View	Load JPG	☒
16	26/01/18 11:20	Photo After Spray	Load JPG	☒
17	26/01/18 11:20	Photo After Spray	Load JPG	☒
18	26/01/18 11:20	Photo After Spray	Load JPG	☒
19	26/01/18 11:20	Photo After Spray	Load JPG	☒
20	26/01/18 11:20	Photo After Spray	Load JPG	☒
21	26/01/18 11:20	Photo After Spray	Load JPG	☒
22	26/01/18 11:20	Photo After Spray	Load JPG	☒
Documentation 1 per page v ☒				
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	09/01/18 08:55	PRI	Load PDF	☐
2	09/01/18 08:55	TP GIA REPORT	Load PDF	☐
3	09/01/18 09:58	EMAIL to TP reject their list of SJE	Load PDF	☐
4	24/01/18 16:39	LOD-Repair Bill-COI-GIA Search.pdf	Load PDF	☐
5	24/01/18 16:40	Surveyor report and photos	Load PDF	☐
6	24/01/18 18:03	our instruction to LKK for final survey report	Load PDF	☐

Documents Checklist

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

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer
Note: Remarks are private unless you show it to other parties.

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/MSG18000488/AD3S2

Date: 26/01/2018

REFERENCE

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

Policy No: 28912247QMY

Claimant Vehicle No : SLP6435M

Insured Vehicle No : SKS1535L

Date of Loss: 03/01/2018

Nature of Claim: TP

Claim No: 544102

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SLP6435M**

Make & Model: TOYOTA C-HR HYBRID, 1.8 S CVT (A)

Reg. Date: 13/06/2017 (Man. Year: 2017)

Colour: Silver

Engine Capacity: 1797 cc

Market Value/New Car Price: N/A

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

Engine No: 2ZR8027257

Chassis No: ZYX102010098

Odometer: 15169 km

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

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

CONDITION OF TYRES

Front Tyre Size: 215/60R17

Rear Tyre Size: 215/60R17

Front Left Side: Bridgestone 6 mm

Rear Left Side: Bridgestone 6 mm

Front Right Side: Bridgestone 6 mm

Rear Right Side: Bridgestone 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
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: 09/01/2018

Date Inspected: 10/01/2018 Inspected At:

Freesion Autodrive (Kaki Bukit)
25 Kaki Bukit Rd 4, Synergy @KB #03-33
Singapore 417800

Estimated Period of Repair: 0.0 days

Adjuster: ADRIAN LING

Manager: Nivitha Govindasamy

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 \$2,000.00 - \$2,500.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 26 Jan 2018)
Parts:	M1-SUV	TOYOTA C-HR HYBRID 1.8 S CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLP6435M)	
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.

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.

< END OF ESTIMATES >