

ISSUED BY

REF: CS3/MSG18001015/Tld3er

1/1/18

Meimen Taufikh

ASSIGNMENT (Office)

From Person: Jasmine Lok of MSIG

Date/Time: 17/01/2018 @ 10:41am

Estimated Cost: BEL to

OD: IP/AS/TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: GV5116T

Insured: YL 27842

to Workshop no: Ama Autocare

Tel: 8778 3636

at 36, Toh Guan Rd East #01-36

Policy No: B28718557MKF

Cover No: 546594

Sum Insured

Excess

Make of Veh:

CBorn's Record

10/01/2018

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

DATE: 10/01/2018

Date/Time: 10:54am @ 17/1/18

Person Insured

Melvin

DATE: 10/01/2018

Date/Time: 10:54am @ 17/1/18

X

GV 5116T - x

YL 27842 - x

\$3000 - \$4000 #days

[illegible]

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

CLAIM SUBFOLDER TRACKING

| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Assigned | Status |
|------|-------------|---------------|--|---------|---------------|--------------|--|
| Main | 11 Jan 2018 | | 17 Jan 2018 10:41 Assign | | | | New Assignment Cancel Case |

| | | | | |
|-------------|------------------|----------------------|------------------|--------------------------|
| Main | Reference | Claim Details | Documents | Show All |
|-------------|------------------|----------------------|------------------|--------------------------|

CLAIM SUBFOLDER DETAILS [Created by insurer]

| | | | |
|-----------------------------|--|------------------------|--|
| Insured: | CWT INTEGRATED PTE. LTD, Co. Reg. No.: NA | | |
| Main Claimant: | THE MANAGEMENT CORPORATION - STRATA TITLE PLANE NO. 3, Co. Reg. No.: T07MC3175K | | |
| Vehicle Reg. No.: | GV5116T | Date of Loss: | 10/01/2018 12:00 - :59 |
| Claim Type: | TP / 545594 | Policy/Cover Note No.: | B28718557MKF (Third Party Only) Coverage: 01/04/2017 - 31/03/2018 |
| Vehicle Reg. No. (Insured): | YL2784Z | Policy No. (Claimant): | |
| | | Excess: | |
| Repairer: | Ama Autocare Pte Ltd (HQ) 36 Toh Guan Road East, #01-36, 608580 Jurong East - Tel: | | |
| Handling Insurer: | MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jasmine Lok Kheng Kwei - 6594 2550] | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 18/01/2018] | | |
| Driver/Custodian (Insured): | MOHAMED ROSDI BIN ABDUL MAJID (), NRIC: S1701050F, Tel: +6596711265 | | |
| Adj Asg. Remarks: | Third Party Pre-Repair Survey | | |

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. | | | | | | | | | |

CHIA S ARUL LLC
ADVOCATES & SOLICITORS
UEN 201330709H

ARULCHELVAN S

Our Ref : GV 5116T(AY)

Your Ref :

16 January 2018

MSIG INSURANCE (SINGAPORE) PTE LTD
16 Raffles Quay
#24 - 01
Hong Leong Building
Singapore 048581

BY FACSIMILE ONLY
(Fax: 6225 7402)

Dear Sir,

RE: PROPERTY DAMAGE CLAIM
CLAIMANT : THE MANAGEMENT CORPORATION - STRATA TITLE PLAN
NO. 3
ACCIDENT INVOLVING GV 5116T & YL 2784Z ALONG 50 BUKIT BATOK ST 23
(DRIVEWAY OF MIDVIEW BLDG) ON 10 JANUARY 2018

1. We act for THE MANAGEMENT CORPORATION - STRATA TITLE PLAN NO. 3, the owner of motor vehicle no. GV 5116T, which was involved in the aforesaid accident.
2. We hereby give you **NOTICE** that we are claiming against your insured motor vehicle no. YL 2784Z for damages, costs and disbursements as a result of your insured driver's negligence.
3. Kindly let us know if you wish to conduct a pre-repair inspection on our client's motor vehicle at M/s AMA Autocare Pte Ltd at 36 Toh Guan Road East #01 - 36 Singapore 608580 and kindly arrange with Mr. Melvin at 8778 3636.
4. If we do not hear from you within the next **two (2) working days**, we shall advise our client to proceed with their own inspection and repairs.
5. Please reply either by fax at 6733 8183 or by email to alywin@chiaarul.com.

Yours faithfully,

MR ARULCHELVAN S
cc: Client (By Email)

Enquire Transfer Fee

Vehicle Details

Vehicle No.: GV5116T
 Vehicle Type: C13 - Goods Cum Passenger Twin Cabin Goods Vehicle
 Vehicle Attachment 1: No Attachment
 Vehicle Scheme: Normal
 Vehicle Make: NISSAN
 Vehicle Model: P/UP D/CAB
 Chassis No.: JN1CHGD22Z0730371
 Propellant: Diesel
 Engine No.: TD27695937
 Engine Capacity: 2664 cc
 Maximum Power Output: -
 :
 Maximum Laden Weight: 2490 kg
 :
 Unladen Weight: 1470 kg
 Year Of Manufacture: 2002
 Original Registration Date: 10 Jul 2002
 Lifespan Expiry Date: 09 Jul 2022
 COE Category: C - Goods Vehicle & Bus
 PQP Paid: \$44,018.00
 COE Expiry Date: 31 Mar 2022
 Road Tax Expiry Date: 09 Jul 2018
 Inspection Due Date: 09 Jul 2018
 Intended Transfer Date: 30 Apr 2018
 CO2 Emission: -
 CO Emission: -
 HC Emission: -
 NOx Emission: -
 PM Emission: -

The current road tax expiry is 09 Jul 2018. You may renew the road tax from 10 Apr 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 09 Jul 2018, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable (From 10 Jul 2018 to 09 Jan 2019)

| | Amount Before GST (S\$) | GST Amount (S\$) | Amount After GST (S\$) |
|---|----------------------------|---------------------|---------------------------|
| Transfer Fee: | 25.00 | - | 25.00 |
| Sub Total: | | | 25.00 |
| Nett Road Tax Amount (After Offsetting Over Payment): | 0.00 | - | 0.00 |
| Total Amount Payable: | | | 25.00 |

Message

This vehicle has a road tax Over Payment of \$492.00. This Over Payment may be used to offset Road Tax payable and Transfer Fees respectively, where applicable.

You may print this page for reference.

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

| | |
|----------------|-------------------------------|
| Owner ID Type: | Club/Association/Organisation |
| Owner ID: | 3175K |

Vehicle Details

| | |
|--------------------------------|-------------------|
| Vehicle No.: | GV5116T |
| Vehicle to be Exported: | No |
| Intended De-registration Date: | 30 Apr 2018 |
| Vehicle Make: | NISSAN |
| Vehicle Model: | P/UP D/CAB |
| Primary Colour: | Blue |
| Manufacturing Year: | 2002 |
| Engine No.: | TD27695937 |
| Chassis No.: | JN1CHGD22Z0730371 |
| Maximum Power Output: | - |
| Open Market Value: | \$18,292.00 |
| Original Registration Date: | 10 Jul 2002 |
| First Registration Date: | 10 Jul 2002 |
| Transfer Count: | 2 |
| Actual ARF Paid: | \$23,780.00 |

Intended PARF Rebate Details

| | |
|-------------------------------|--------|
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |

Intended COE Rebate Details

| | |
|-----------------------------|-------------------------|
| COE Expiry Date: | 31 Mar 2022 |
| COE Category: | C - Goods Vehicle & Bus |
| COE Period(Years): | 10 |
| PQP Paid: | \$44,018.00 |
| COE Rebate Amount: | \$17,240.00 |
| Total Rebate Amount: | \$17,240.00 |

The information contained herein is correct as at 30 Apr 2018

OK

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 | 11/01/2018 09:13 |
| Date Of Accident | 10/01/2018 12:20 |
| Exact Location Of Accident | 50 BUKIT BATOK ST 23 (DRIVEWAY OF MIDVIEW BLDG) |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--|
| Vehicle Registration Number | GV5116T |
| Insured/Policyholder | |
| Name Of Registered Owner | THE MANAGEMENT CORPORATION-STRATA TITLE PLAN NO. 3 |
| Co Reg No | T07MC3175K |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-93887911 |
| Alternative Phone No | OFFICE-93887911 |

Vehicle Particulars

| | |
|--------------|----------------------|
| Manufacturer | NISSAN |
| Model | DOUBLE-CAB-2.7 D (M) |

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 COMMERCIAL VEHICLE

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | 5072105693-02 |

Cover Note Number

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | TEO YAW SING PETER |
| NRIC No | S0042443I |
| Date Of Birth | 21/10/1954 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 06/06/1975 |
| Driving Experience | 42 YEARS AND 7 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-93887911 |
| Fax Number | |
| Contact Number | OFFICE-93887911 |
| EMail Address | NOEMAIL |

| | |
|---|------------------------|
| Address | 12 YORK HILL #06-62 |
| Postcode | S163012 |
| Was driver an employee of the Insured's Company | YES |
| If No, Relationship of the Driver with the Insured | |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |

General Information of the Accident

| | |
|--------------------|-------------------------------------|
| Type Of Accident | COLLISION - OPENING DOOR OF VEHICLE |
| 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? | |
| 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

PLEASE SEE ATTACHED STATEMENT . ATTENDED BY : SUSAN

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 | YL2784Z |
| Vehicle Make/Model/Colour | LORRY |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

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:

11 JAN 2018



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

IDAC BUKIT BATOK (VAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

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

SKETCH PLAN

See attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

See attached

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:

11 JAN 2018

Signature of Reporting Centre Personnel

IDAC BUKIT BATOK (VAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

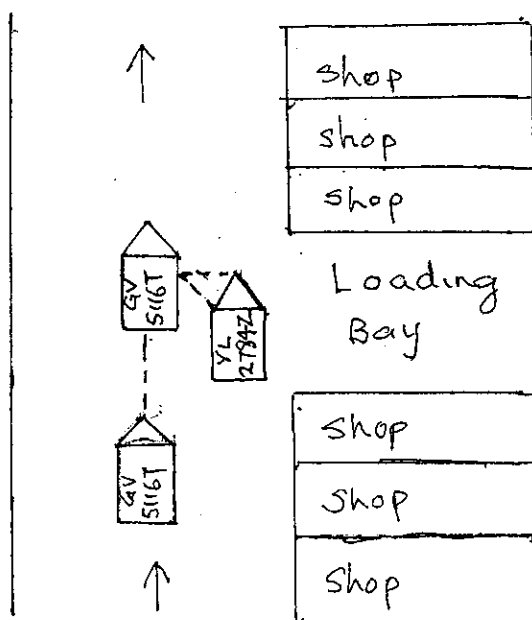
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident report of GV5116T Vs YL2784Z on 10 January 2018 at about 12.20 pm

I was driving vehicle GV5116T along driveway of Midview Building, located on 50 Bukit Batok Street 23 at about 12.20 pm. The driveway is a one-way street, wide enough for at least 3 vehicles in parallel. While approaching the loading and unloading bay of the building, I saw lorry YL2784Z stationery with its hazard light flashing.

Assuming the driver is waiting at the location, I decided to overtake the lorry on the left side. Just as my vehicle was passing the lorry, it suddenly turned left with its left front wheel crashing into the right front door of my vehicle causing it to be badly dented.

There was no injury to anyone and I made this report for insurance claim purpose.



Teo Yew Sing

Teo Yew Sing Peter

IC No. S00424431

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S0042443I



Name

TEO YEW SING PETER



张友成

Race

CHINESE

Date of Birth

Sex

21-10-1954

M

Country of Birth

SINGAPORE

1840843



NRIC No. S0042443I



Blood Group

Date of issue

O+

30-03-1994

APT BLK 12 YORK HILL #02-62
SINGAPORE 163012

S0042443I

17/07/2013

NRIC No:

Date:

No:

1919903

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

| CLAIM SUBFOLDER TRACKING | | | | | | | |
|--------------------------|-------------|---------------|--|--|--|-------------|---|
| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'ed | Status |
| Main | 11 Jan 2018 | | 17 Jan 2018 10:41 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: | CWT INTEGRATED PTE. LTD. , Co. Reg. No.: NA | | | | | | | | |
| Main Claimant: | THE MANAGEMENT CORPORATION - STRATA TITLE PLANE NO. 3 , Co. Reg. No.: T07MC3175K | | | | | | | | |
| Vehicle Reg. No.: | GV5116T | Date of Loss: | 10/01/2018 12:00 - :59 [186 Months From LTA Reg Date (Man Yr)] | | | | | | |
| Claim Type: | TP / 545594 | Policy/Cover Note No.: | B28718557MKF (Third Party Only) Coverage: 01/04/2017 - 31/03/2018 | | | | | | |
| Vehicle Reg. No. (Insured): | YL2784Z | Policy No. (Claimant): | | | | | | | |
| | | Excess: | | | | | | | |
| Repairer: | Ama Autocare Pte Ltd (HQ) 36 Toh Guan Road East, #01-36, 608580 Jurong East - Tel: | | | | | | | | |
| Handling Insurer: | MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jasmine Lok Kheng Kwei - 6594 2550] | | | | | | | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Imm.Advice due 18/01/2018] | | | | | | | | |
| Driver/Custodian (Insured): | MOHAMED ROSDI BIN ABDUL MAJID (), NRIC: S1701050F, Tel: +6596711265 | | | | | | | | |
| Adj Asg. Remarks: | Third Party Pre-Repair Survey | | | | | | | | |
| 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

***GV5116T (545594)**
[YL2784Z]

TP

THE MANAGEMENT CORPORATION - STRATA TITLE PLANE NO. 3

Jan 10 2018 12:00PM

[CWT INTEGRATED PTE. LTD]

Ama Autocare Pte Ltd

[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 | 16/01/18 17:36 | Accident Statement <small>From: SC - Reg. No: YL2784Z, Claimant: CWT INTEGRATED PTE. LTD</small> | 1 Load HTML | <input type="checkbox"/> |

| Photos/Images | | | 3 per page | <input checked="" type="checkbox"/> |
|----------------------|-----------------|-----------------------------------|------------|-------------------------------------|
| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | Thumbnail | Print |
| 1 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 2 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 3 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 4 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 5 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 6 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 7 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 8 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 9 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 10 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 11 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 12 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 13 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 14 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 15 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 16 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 17 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 18 | 30/04/18 11:51 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 19 | 08/05/18 15:41 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 20 | 08/05/18 15:41 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 21 | 08/05/18 15:41 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 22 | 08/05/18 15:41 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 23 | 08/05/18 15:41 | General View | 1 Load JPG | <input checked="" type="checkbox"/> |
| 24 | 08/05/18 15:41 | General View | 1 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 | 16/01/18 17:35 | TP PRI | 1 Load PDF | <input type="checkbox"/> |
| 2 | 16/01/18 17:36 | E-FILE REPORT (GV5116T) <small>From: SC - Reg. No: YL2784Z, Claimant: CWT INTEGRATED PTE. LTD</small> | 1 Load PDF | <input type="checkbox"/> |
| 3 | 17/01/18 10:28 | TP LIST OF SJE & OUR REPLY & NOMINATED LKK TO BE SJE | 1 Load PDF | <input type="checkbox"/> |

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/MSG18001015/T1D3E2

Date: 09/05/2018

REFERENCE

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

Policy No: B28718557MKF

Claimant Vehicle No : GV5116T

Insured Vehicle No : YL2784Z

Date of Loss: 10/01/2018

Nature of Claim: TP

Claim No: 545594

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: GV5116T

Make & Model: NISSAN DOUBLE-CAB, 2.7 D (M)

Engine No: TD27695937

Reg. Date: 10/07/2002 (Man. Year: 2002)

Chassis No: JN1CHGD22Z0730371

Colour: Silver

Odometer: 259557 km

Engine Capacity: 2664 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: 185 R14

Rear Tyre Size: 185 R14

Front Left Side: Journey 6 mm

Rear Left Side: Journey 6 mm

Front Right Side: Journey 6 mm

Rear Right Side: Journey 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: 17/01/2018

Date Inspected: 17/01/2018 Inspected At:

Ama Autocare Pte Ltd (HQ)
36 Toh Guan Road East, #01-36
Singapore 608580

Estimated Period of Repair: 0.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

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 \$3,000.00 -\$4,000.00

REPAIR DETAILS

Reference

Part Source: (Last Synchronised: 09 May 2018)
Parts: N/A NISSAN DOUBLE-CAB 2.7 D (M) (Model not available in database)
Labour: Repairer's (Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for GV5116T)
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 >