

Surveyor:

Wilson

ASSIGNMENT (Office)

From (Person):

Bazlin Ahmed

of

EQI

Date/Time: 19/01/2018 @ 4:40pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBJ 3649 H

Insured:

SKX 6058M

at Workshop m/s

Wing Yap Motor

Tel:

6456 0018

of BLK 4003 #01-114 AMK AVE 10 Ind. Prk 1

Policy No:

Claim No:

DM18HD00216/FN

Sum Insured:

Excess:

Make of Veh:

D.O.A. 14/01/2018

(Client's Record)

22/01/2018

CA / REV / REP. / REV 24 HRS

wp

H.O.D. Endorsement:

Date/Time: 5:06pm @ 19/1/18

Person Contacted:

Kalvin

Vehicle ID: (OUT)

Date/Time

Action/Instruction (X) Estimate

FBJ 3649 H - NA/EQI18001012/h4

D.O.A: 14/01/2018

SKX 6058 M - NA/EQI18001012/h4

D.O.A: 14/01/2018

Dismantle Part: 29.01.2018

REF: EQI

ASSIGNMENT

From: Date: 22/01/2018

Estimated Cost:

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

To inspect Vehicle No: FB53649H

at Workshop m/s: Wing Yap Motor

of: BIK4003, #01-114 AMK AVE 10, Ind Prk 1

Insured:

Policy No:

Claims No:

Sum Insured:

Excess:

(Client's Record)

Afternoon

Make of Veh:

(Policy Condition)

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

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input checked="" type="checkbox"/>

Bal. or Market Value:

IDAC Accident Report: Consistent?: Yes or No

GIA / PR Seen: Consistent?: Yes or No

Est. Repairs: days: Res: Yes or No

Lump Sum: %: 3 Val: Yes or No

CA / REV / REP. / 24 HRS

wp

Date:

Person Contacted:

Vehicle: IN / OUT

Van No: FB53649H Vt Regn: 3/4/2014

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

Truck / Trailer:

Make:

Hawker NC 250X

cc: 745

Colour:

Red

A.C.

Insured / Std / NI / NA

Sp. Reading:

86754

T. Radio:

Insured / Std / NI / NA

Eng. No:

C. No:

JH2RC72ADEK 000404

Gen. Cond. Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orMod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

120/70ZR17

R:

160/60ZR17

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

TOYO / YOKO or

DIABLO (F)
PIRELLI (R)

Front

R. Bal:

2

mm

R. Bal:

3

mm

L. Bal:

mm

L. Bal:

mm

D.O.A:

D.O.I:

22/1/2018

Survey held at:

As Above @ 1pm

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

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

22/1/18 No Accident Report Given

#2900 - #3900

3 Days Repair

RECEIVED 04 APR 2018

3/4/2018

Date/Time File Pass to:

03042018

☐

Preli. Report

☐

Final Report

Date/Time File Return to:

SI:

Add Fee:

☐

Site Insp

\$

☐

Interview

\$

☐

Tech Insp

\$

☐

Witnessing

\$

Days Of Repair:

Resurvey No. of Trip:

Survey Fee

Transportation

US-PS-13

Phone

Other

Report Format:

PR2

Lump Sum (A.B. 11)

CPc

C PAGLAR & CO

ADVOCATES & SOLICITORS

UEN NO. 53130985A GST REG NO. M90371275E



50 Chin Swee Road
#05-03 Thong Chai Building
Singapore 169874
Telephone: (65) 6536 5456
Facsimile: (65) 6836 2195
Email: pri@cpaglar.com.sg
SERVICE OF COURT DOCUMENTS BY
FACSIMILE WILL NOT BE ACCEPTED

PLEASE QUOTE OUR FILE REFERENCE WHEN REPLYING

Your Reference: SKX 6058M
Our Reference: CP/PRI/FBJ3649/18.sc

Date : 19th January 2018

To : EQ INSURANCE COMPANY LTD
ATTN: MOTOR CLAIMS DEPT

BY FAX NO. 6224 3903

Dear Sirs,

- CORRESPONDENCE PURSUANT TO PARAGRAPH 2.4 & 2.6 OF THE PRE-ACTION PROTOCOL FOR NIMA CASES.
- ROAD TRAFFIC ACCIDENT ON 14TH JANUARY 2018 INVOLVING MOTOR VEHICLE NO. FBJ 3649H AND SKX 6058M ALONG 717 BEDOK RESERVOIR ROAD AT ABOUT 1535 HOURS.

We refer to your email dated 19th January 2018.

Our client does not agree to your list of surveyors.

We are instructed to propose the use of one of the motor surveyors named in the attached list to conduct the pre-repair survey as a single joint expert.

Please let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select one or more of the listed motor surveyors.

PLEASE REPLY BY EMAIL ONLY: pri@cpaglar.com.sg

Yours faithfully,



C PAGLAR & CO.

Enc.

cc. ROSET LIMOUSINE SERVICES PTE LTD
53 Ubi Avenue 1
#03-47 Paya Ubi Industrial Park
Singapore 408934

CERTIFICATE OF POSTING

CPc

C PAGLAR & CO.

ADVOCATES & SOLICITORS

UEN NO. 53130985A GST REG NO. M90371275E



50 Chin Swee Road
#05-03 Thong Chai Building
Singapore 169874
Telephone: (65) 6536 5456
Facsimile: (65) 6536 8706
Email: pri@cpaglar.com.sg
SERVICE OF COURT DOCUMENTS BY FACSIMILE
WILL NOT BE ACCEPTED

PLEASE QUOTE OUR FILE REFERENCE WHEN REPLYING

Your Reference: SKX 6058M
Our Reference: CP/PRI/FBJ3649/18.sc (sf)

Date: 17th January 2018

To: ROSET LIMOUSINE SERVICES PTE LTD
53 Ubi Avenue 1
#03-47 Paya Ubi Industrial Park
Singapore 408934

CERTIFICATE OF POSTING

Dear Sirs,

NOTICE OF ROAD TRAFFIC ACCIDENT ON ROAD TRAFFIC ACCIDENT ON 14TH January 2018 INVOLVING MOTOR VEHICLE NO. FBJ 3649H AND SKX 6058M ALONG 717 BEDOK RESERVOIR ROAD S(470717) AT ABOUT 1535 HOURS. PURSUANT TO PARAGRAPH 2.2 OF THE PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by Chew Shi Tiew (Zhou SiTian) to notify you of a road traffic on 14th January 2018 at about 1535 hours along 717 Bedok Reservoir Road S(470717) involving our client's vehicle registration number FBJ 3649H and vehicle registration number SKX 6058M driver by you/ your authorized driver, servant and/or agent at the material time. A copy of the Singapore accident statement report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

PLEASE REPLY BY EMAIL ONLY: pri@cpaglar.com.sg

DO NOT REPLY BY FAX.

Yours faithfully,



C PAGLAR & CO.

Enc.

cc. EQ Insurance Company Ltd
ATTN: MOTOR CLAIMS DEPT
cc. [Client by fax: 6451-3338] – (FBJ3649H)

Fax No. 6224 - 3903

LIST OF SURVEYORS

~~Contact Person~~ : ~~Mr. Alan Cheong~~

Contact Person : Mr. Willy Goh

Contact Person : Mr. B J Loi

Contact Person : Mr. Marc

Contact Person : Mr. Oh Han Cheong

Contact Person : Mr. TT Rajan

Contact Person : Mr. Andrew How

Contact Person : Mr. Ng Cheng Meng

Contact Person : Mr. Lee Kok Weng

Contact Person : Seah Kwang Boon

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	15/01/2018 13:15
Date Of Accident	14/01/2018 15:35
Exact Location Of Accident	717 BEDOK RESERVOIR ROAD S(470717)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBJ3649H
Insured/Policyholder	
Name Of Registered Owner	CHEW SHI TIEN (ZHOU SITIAN)
NRIC No	S8820389E
Email Address	CHEW.ST@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91710832
Alternative Phone No	OTHERS-91710832

Vehicle Particulars

Manufacturer	HONDA
Model	NC750X
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	MOTORCYCLE

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MC/00235385/02
Cover Note Number	

Driver

Name of Driver	CHEW SHI TIEN (ZHOU SITIAN)
NRIC No	S8820389E
Date Of Birth	13/06/1988
Occupation	INDOOR
Date Of Driving Pass	23/03/2012
Driving Experience	5 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91710832
Fax Number	
Contact Number	OTHERS-91710832
Email Address	CHEW.ST@HOTMAIL.COM

Address	BLK 225 TAMPINES STREET 23 #09-205
Postcode	521225
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
Number of vehicles involved in the accident	2
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

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKX6058M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JAMIL BIN CHELON
NRIC/Passport Number	S1299296C
Contact Number	97714025
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.



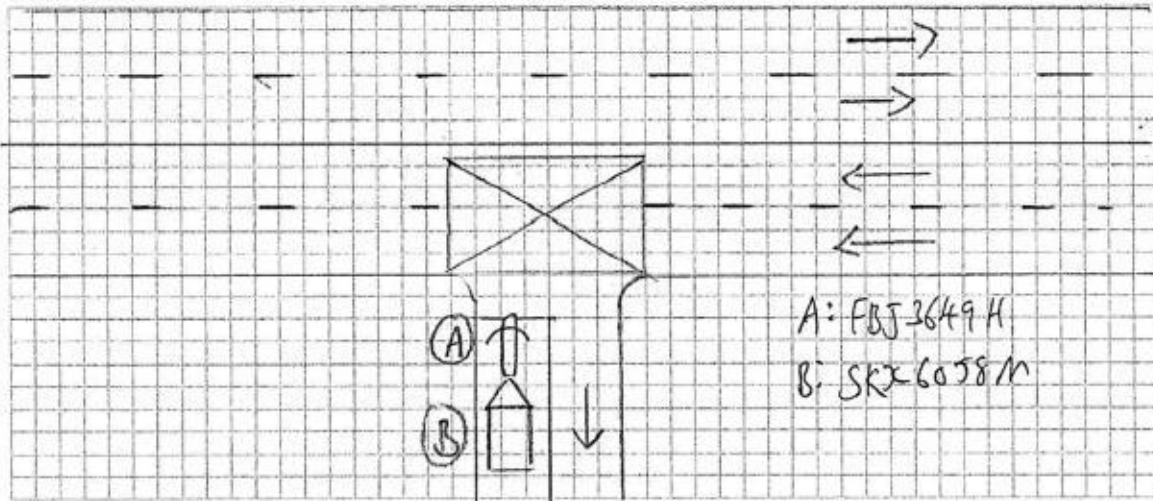
Policyholder's Signature
Date & Time:

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



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I'm was at the Carpark exit trying to turn right
when the other driver ~~was~~ knock me from behind.

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:
NRIC/FIN No.:

Nivitha (LKK Auto)

From: Shu Pei (LKKAuto) <shupeil@lkkauto.com>
Sent: Friday, 19 January 2018 4:40 PM
To: assignments
Subject: FW: NEW PRI REQUEST FOR ACCIDENT INVOLVING FBJ3649H & SKX6058M ON 14.01.2018 ALONG 717 BEDOK RESERVIOR ROAD
Attachments: FBJ3649H TP GIA.pdf; SKX6058M EQ INS GIA.pdf

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

From: Bazlin Ahmad [mailto:bazlin.ahmad@eqinsurance.com.sg]
Sent: Friday, 19 January 2018 4:06 PM
To: Admin A <admin-a@lkkauto.com>
Subject: RE: NEW PRI REQUEST FOR ACCIDENT INVOLVING FBJ3649H & SKX6058M ON 14.01.2018 ALONG 717 BEDOK RESERVIOR ROAD

Dear LKK

We refer to the above new assignment, please find attached both vehicles GIA report for easy reference.

Thank You.

Regards,

Lynn Ahmad

Executive | Claims



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110

did 65 6496 9881 | tel 65 6223 9433 ext 881 | fax 65 6223 4190

www.eqinsurance.com.sg



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From: Bazlin Ahmad

Sent: Friday, January 19, 2018 4:04 PM

To: 'pri@cpaglar.com.sg'; LKK AUTOCONSULTANTS (admin-a@lkkauto.com)

Subject: RE: NEW PRI REQUEST FOR ACCIDENT INVOLVING FB3649H & SKX6058M ON 14.01.2018 ALONG 717 BEDOK RESERVIROR ROAD

Dear Sirs,

We object to all the surveyors as proposed. We shall be appointing our surveyor, **LKK Auto Consultants** to attend to the pre-repair survey of your client's vehicle.

Meanwhile, we reserve our rights on Post-Repair Inspection, kindly contact us or our appointed surveyor before you return your client's vehicle to him/her.

Aside to LKK,

Please arrange to attend to the said Pre-repair survey.

Thank You.

Regards,

Lynn Ahmad

Executive | Claims



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110

did 65 6496 9881 | tel 65 6223 9433 ext 881 | fax 65 6223 4190

www.eqinsurance.com.sg



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From: Bazlin Ahmad

Sent: Thursday, January 18, 2018 5:42 PM

To: 'pri@cpaglar.com.sg'

Subject: NEW PRI REQUEST FOR ACCIDENT INVOLVING FB3649H & SKX6058M ON 14.01.2018 ALONG 717 BEDOK RESERVIROR ROAD

Without Prejudice

Dear Sir,

We refer to your Notice of Accident of even date.

We shall be appointing our surveyor to attend to the pre-repair survey of your client's vehicle.

Below is a list of motor surveyors in our panel. Please revert within 2 working days if you agree or have any objections to the appointment of any of the motor surveyors. If we do not

hear from you, you are deemed to have agreed to the appointment of any of the motor surveyors listed by us. Alternatively, please specify one or more of our proposed motor surveyors to the said assignment.

1) AJAX Inspection Services Pte Ltd Tel: 6255 0808 Fax: 6849 9155 Contact person : Joey/Joseh	2) Automobile Inspection Services Pte Ltd Tel: 6286 0155 Fax: 6284 1539 Contact Person: Sophia
3) LBS Automotive Appraisal Pte Ltd L.B.S. Auto Consultants Pte Ltd Tel: 6281 6690 / 62832866 Fax: 6281 8748 Contact Person: Amy/ Grace	4) Priority Services Tel: 62934822 Fax: 62963283 Contact Person: Sharon Kho
5) RT Appraisal Pte Ltd Tel: 67486076 Fax: 67480361 Contact Person: Ricky Teng	6) LKK Auto Consultants Pte Ltd Tel: 6256-3561 Fax: 6741-4108
7) Kelvin Automotive Appraising Services Tel: 81825263 Fax: 67461148 Contact Person: Kelvin	8) Automotive Appraiser & Surveying Services Tel: 96623655 Fax: 67655662 Contact Person: Mr Chee
9) JP Knights Pte Ltd Tel: 63450068 Fax: 63445328 Contact Person: Edna Lee	

If you object to all the motor surveyors as proposed by us, please provide a list of at least 10 motor surveyors whom you consider as suitable to appoint for our consideration. We shall revert to you within 2 working days.

Meanwhile, we reserve our rights on Post-Repair Inspection, kindly contact us or our appointed surveyor before you return your client's vehicle to him/her.

Thank You.

Regards,

Lynn Ahmad

Executive | Claims



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110

did 65 6496 9881 | tel 65 6223 9433 ext 881 | fax 65 6223 4190

www.eqnsurance.com.sg



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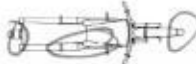
**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT			
EQ INSURANCE COMPANY LTD		Ref: CS3/EQ18001257/Wbs2	
5 MAXWELL ROAD #17-00 TOWER BLOCK MND		Date: 10-04-2018	
COMPLEXSINGAPORE 069110		Code: EQ1	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SKX 6058M	Veh. Inspected	FBJ 3649H
Policy No.		Coverage (\$)	0.00
Claim No.	DM18HO00216/FN	Excess (\$)	0.00
Assign From	BAZLIN AHMAD	Assign Date	19/01/2018
2. Vehicle Particulars & Condition			
Make & Model	HONDA NC750X	c.c	745
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	JH2RC72A0EK000404	Colour	RED
Odometer	86754 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	120/70ZR17	DIABLO	2 mm
L/H Front Tyre			mm
R/H Rear Tyre	160/60ZR17	PIRELLI	3 mm
L/H Rear Tyre			mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION AND O/S BODY.			
5. General Information			
Accident Date	14/01/2018	Inspect Date / Time	22/01/2018 (01:00 PM)
Survey held at	WING YAP MOTOR BLK 4003 #01-114 AMK AVE 10 IND PARK 1 SINGAPORE 569624		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,900-\$3,900			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days	

Report Ref No. CS3/EQ18001257/Wbs2

Inspected By



WILSON TEO CHENG MING

Automotive Assessor



K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEE, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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