mans - SS, REC.BY:	REF: CS3 MSG18001295	Wd3 Special Instructions
VITURUOT W VEIMEN N TOM (Person)	Oilson Assignment (Office Molica Chung of Molica Bill to:	Date/Time: 11 01 2018@ 3.10pm
To Inspect Vehic	TP RES / OD RES / EVA / ENV / MV / CS  Cle No: SLH 6996C  C's Automotive	Insured: SDG 7288 G Tel: 9767 7794
of 1, ke Policy No: B Sum Insured:	aki Bukit Ave 6 # 01-68 Autok 027633014 SMP Claim N Exces	546469
Make of Veh: (Client's Record) CA / REV / Date/Time:	ND - NOTE OF LITTEE	H.O.D. Endorsement:
Date/Time	Action/Instruction (X) Estimate  SLH 6996 (-X	
	Ager repair: 24.01.2018	
020218 23	Ism Email to monica Chung thru n	Numen.

"Pls call before goin	9' <u>asai</u>	GNMENT	
From	22/01/2018	SW 69960	10 16
Estimated Cost		Type M.Car / M.Gycle / Bus / Van / Lo	
OD TP WS TP RES OD R	ES / EVA / INV / MV	Truck / Trailer or	
Ta inspect Verticie No.	SLH 6996C	Make Conter Oell F	re 2493
at Workshop mis DC'S	Automotive	Colour Black	A.C. Insured / Std / N/ / NA
1 Kaki BK+ Ave	6 # 01-68 Autobay	Sp. Reading 75333	TiPadic Insured / Std / NI / NA
Insured	<b>J</b>	Eng No:	
Policy No.		ONO AGH 30-	
Claims No.		Gen. Cond. Good / Ealt Poor / Burnt	
Sum insured	Excess	Steering (norder Jammed / Leaked	
(Client's Record) Donal	d @ 9767 7794	Brake Thorder Jammed / Leaked	
Make of Ven	- 110 1 1 1 1 1	Mod NII /8/Rim STD A/RIM S	
		Tyre Size F: 245	
(Policy Condition)			145RIG
Ramark. The veh had comme		BS / DUN / EXNOVA / GY / FS / LIZA	TMIC PHTSU/PIR/SUMI/
repair at the time of	inspection.	TOYO / YOKO or	
Ball or Narket Value		Front	Rear
DAC Assident Room:	Consistent? : Yes or No	R.Bal Lt mm	R.Bal. Lt mm
GIA / PR Seen	Consistent? : Yes or No	L'Bal. 4 mm	UBall 4 mm
	days Res. Yes or No	0.0.A (6 ((125(8	22/1/2018
Lum Sum	% 3 Val: Yes or No		Have CIPM
CA / REV / REP. / 24		Desirof Damages : Fit. / Rear / O/S	
Date Person	Vehicle, IN / OUT Contacted:		y Structure laffected due to collision
Date Time Action Inst	ruction		
	Renge =	\$ 2700 -	\$ 2806
	,		
	-, -	- Days Ro	fere,
REC	EIVED 09 FEB 2018		
OsteTime File Pass 107	: Prell. Report	Days Of Repair:	
04 113 5018	Final Report	Resurvey No. of Trip:	Survey Fee
Cate Time File Return to 1			Transportation
69	Add Fe	e: Site Insp. 18	
		intenten 18	Propt
Report Format :	S	Tech Hys \$	E-en
Lump Sum / I.B.Ir. 3		Nessent 5	

## Survey Department Check List (Case Handler)

Reference No.: Policy Type: OD / TP / TP RES / TL / EVA Case Handler Typist ): Case handler to make sure all Information created by the assignment team are ACCURATE. Admin ( Y-Date N-Date Y-Date N-Date (1) Office Assign Form Reference No. C C Customer Code Assign From N C Assign Date C Veh No (Inspected) C Veh No (Insured) C D.O.A C Policy No C Claim No C Insurance Authorisation (CA /REV/REP) C Report Type C Weekend Charges N Survey held at/Repairer C Excess Surveyor ( ): Case handler to make sure the surveryor completed all required information. (1) Assignment Form C Vehicle No C Regn Month/Year N . Vehicle Type Make & Model N C Engine Capacity. (C.C) N Colour C Odometer. (Sp.Reading) Chassis No. General Condition N Steering Brake N N Modification (Modi) C Tyre Size N Tyre Make C Tyre Balance C Date of Inspection Survey held N Des. of Damages (2) System - (Views/Merimen) Damaged Vehicle Photographs Uploaded (3) Workshop Estimate/Assignment Form ALL Parts condition Market Value for OD cases C Estimate Repair Cost for PRI (RSI, TMI, MSIG) C Days of repair Finalised Amount Re-inspection Cases to Finalize within 5 Days (4) System - (Views/Merimen) Resurvey photo Uploaded Check By:

\*C: Critical \*N: Non-Critical

Case Handler

Date



## 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 Internation	nale Des	Experts En Autom	oblie
MSI	G INSURANCE (SI	NGAPORE) PTE LTD	Ref:	CS3/MSG18001	295/Wd3
	RAFFLES QUAY -01 HONG LEONG	BLDG SINGAPORE 048581	Date :	22-01-2018 MSG	
1.		Policy Particulars	- (THIR	D PARTY CLAIR	M)
	Insured Veh.	SDG 7288G	Veh. I	nspected	SLH 6996C
	Policy No.	B27633014SMP	Cover	age (\$)	0.00
	Claim No.	546459	Exces	s (\$)	0.00
	Assign From	MERIMEN (MONICA CHUNG)	Assig	n Date	22/01/2018
2.		Vehicle Parti	culars &	& Condition	
	Make & Model		c.c		0
	Engine No.	HIDDEN	Year	of Reg.	
	Chassis No.		Colou	r.	
	Odometer	н	Steeri	ng	
	Brakes		Modif	ication	
	General				
3.		Condit	ions 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.		Descript	ion of D	amages	
5.		Genera	al Inform	nation	
	Accident Date	16/01/2018	Inspe	ction Date	22/01/2018
	Survey held at	1 KAKI BUKIT AVE 6 # 01-68 A	UTOBA	1	
	Repairer	DC'S AUTOMOTIVE PTE LTD			
			Remarks	and the same of the	THE WALL SHOW THE SECOND

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.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Subm	tted I	ns Authred	Status		
Main	17 Jan 2018		19 Jan 2018 15:10 Assign					New Ass Cancel Ca	The second second	
	Main	Refere	ence	Claim	Details	De	ocuments	S	how All	
CLAIM SI	UBFOLDER DET	AILS			OC - THE TAX PROPERTY.	UNIO NE GIOLENOIS	[Created by	insurer]		
Insured:		LAU WOON	CHAN, ID: S00	96814E						
Main Claim	nant:	MILLENNIA	L TRANSPORT,	Co. Reg. No	o.: 53345379L					
Vehicle Re	g. No.:	SLH69960	SLH6996C				16/01/2018	17:00 - :59		
Claim Type: <b>TP</b> / 546459		59	Poli	Policy/Cover Note No.:		B27633014SMP (Comprehensive Coverage: 27/12/2017 - 26/12/2				
Vehicle Re	ehicle Reg. No. (Insured): SDG7288G Policy No. (Claimant):									
Vernere ive	9. 110. (21.00.00)				LACCOOL			S\$500.00		
Repairer:		Dc's Autom	otive Pte Ltd (F	(Q) 60 Ark @	Kaki Bukit, Kaki	Bukit Ave 6	5, 417892 Kaki	Bukit - Tel: 9	7677794	
Handling I	Insurer:	MSIG Insur	ance (Singapor 25521	e) Pte. Ltd.	(HQ) - Tel: +65	5827 7888	[Handled b	y Monica Chu	ıng Pei	
Adjuster:		LKK Auto Co	onsultants Pte I	Ltd (HQ) - To	el: 6256-3561	[Imm.A	dvice due 2	0/01/2018]		
Driver/Cus	stodian (Insured):	MOHD YAZID	BIN MOHD NOR	(), NRIC:	51668351E, Tel	: +659339	1353			
Adj Asg. R	Remarks:	PRI SURVEY		- 900 He						
ASSOCIA	ATED MAIL REC	EIVED					View /	All Compose	Case Mail	
There are	no mail for this c	ase.								
ALL ASS	OCIATED TASK	s=			View A	II Searc	h Tasks   Crea	te New Task	Complete	
Due Da		Type Task Gro	oup Subject	Handler	Assigned By	Comp	pleted On	Created On	Done	

## Rashitha Binte Shahuthuman

From: Sent: Kuru & Co <kurulegal@yahoo.com.sg> Friday, 19 January, 2018 3:42 PM

To:

Rashitha Binte Shahuthuman; 'sur@lkkauto.com'

Cc:

Monica Chung

Subject:

Re: PRE REPAIR SURVEY - SDG7288G(OI) / SLH6996C ON 16/01/2018 - OUR REF

546459

Dear Sir

We confirm that you have **objected** to our client's list of surveyors. Our client's vehicle is at the following

DC's AutoMotive Pte Ltd 1 KAKI BUKIT AVE 6 #01-68 AUTOBAY@KAKI BUKIT SINGAPORE 417883 CONTACT:DONALD/9767 7794

Please inform your surveyor to conduct the pre-repair survey within 2 working days, failing which our client will have no alternative but to proceed with the repair of his vehicle.

Regards Anne Kuru & Co 150 South Bridge Road #04-06 Fook Hai Building Singapore 058727

Tel: 6532 2009 Fax: 6532 2007

From: Rashitha Binte Shahuthuman <rashitha\_shahuthuman@sg.msig-asia.com>
To: 'Kuru & Co' <kurulegal@yahoo.com.sg>; "'sur@lkkauto.com" <sur@lkkauto.com>
Cc: Monica Chung <Monica\_Chung@sg.msig-asia.com>; Rashitha Binte Shahuthuman

<rashitha\_shahuthuman@sg.msig-asia.com>

Sent: Friday, 19 January 2018, 15:10

Subject: FW: PRE REPAIR SURVEY - SDG7288G(OI) / SLH6996C ON 16/01/2018 - OUR REF 546459

### OUR REF - 546459

### WITHOUT PREJUDICE

Dear Sir/Madam.

We refer to your list of surveyors .

We regret to inform you that we are unable to accept your list of nominated Single Join Experts (SJE). We will proceed to appoint a surveyor from M/s LKK Auto Consultants Pte Ltd for your client's claim.

Please be informed that our surveyor will also be conducting the post repair inspection within the timeline stipulated under the protocol.

Dear LKK.

We will grant rights to you in merimen. Fyna.

Rashitha

Senior Admin Officer Direct line +65 6594 2582 | Direct fax +65 6225 7402 | Rashitha\_shahuthuman@sg.msig-asia.com



MSIG

2016 Insurer Claims Team of the Year

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A member of MS&AD INSURANCE GROUP

From: Kuru & Co [mailto:kurulegal@yahoo.com.sg]

Sent: Friday, 19 January, 2018 2:54 PM

To: Rashitha Binte Shahuthuman <rashitha\_shahuthuman@sg.msig-asia.com>

Cc: Monica Chung < Monica\_Chung@sg.msig-asia.com>

Subject: Re: PRE REPAIR SURVEY - SDG7288G(OI) / SLH6996C ON 16/01/2018 - OUR REF 546459

Dear Sirs

We refer to your email of 18.01.18.

Our client is objecting to your list of surveyors. Attached is our client's list of proposed surveyors for your consideration.

Please state the surveyor you will be appointing to be the single joint expert or that you are objecting to our client's proposed list of surveyors.

If we do not hear from you within 2 working days, it shall be deemed that you have agreed to the appointment of any of the surveyors listed by our client.

Regards Anne Kuru & Co 150 South Bridge Road #04-06 Fook Hai Building Singapore 058727

Tel: 6532 2009 Fax: 6532 2007

From: Rashitha Binte Shahuthuman < rashitha shahuthuman@sg.msig-asia.com>

To: 'Kuru & Co' < kurulegal@yahoo.com.sg >

Cc: Monica Chung < Monica Chung@sg.msig-asia.com >; Rashitha Binte Shahuthuman

<rashitha shahuthuman@sq.msiq-asia.com>

Sent: Friday, 19 January 2018, 13:46

Subject: FW: PRE REPAIR SURVEY - SDG7288G(OI) / SLH6996C ON 16/01/2018 - OUR REF 546459

### Reminder.

#### Rashitha

Senior Admin Officer
Direct line +65 6594 2582 | Direct fax +65 6225 7402 | Rashitha shahuthuman@sg.msig-asia.com



MSIG Insurance (Singapore) Pte. Ltd. 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | Tel +65 6220 9644 | Fax +65 6225 6371 | Co. Reg. No. 200412212G | www.msig.com.sg | Follow us on

A member of MS&AD INSURANCE GROUP

From: Rashitha Binte Shahuthuman

Sent: Thursday, 18 January, 2018 4:04 PM To: 'Kuru & Co' < <a href="mailto:kurulegal@yahoo.com.sg">kurulegal@yahoo.com.sg</a>

Cc: Monica Chung < Monica Chung@sg.msig-asia.com >; Rashitha Binte Shahuthuman

<rashitha shahuthuman@sq.msig-asia.com>

Subject: PRE REPAIR SURVEY - SDG7288G(OI) / SLH6996C ON 16/01/2018 - OUR REF

546459

#### **OUR REF - 546459**

#### WITHOUT PREJUDICE

Dear Sirs,

We refer to your fax dated 18/01/2018.

We propose one of the motor surveyor name in the list below to conduct the joint pre-repair survey as the single joint expert.

- 1) LKK Auto Consultants Pte Ltd
- 2) Formteam Consultancy Pte Ltd
- 3) Automobile Inspection Services Pte Ltd

To facilitate an expeditious claim settlement, we hope you are agreeable for any of the above surveyor to be the SJE (Single Joint Expert) .

If not, you may wish to nominate any of the 9 surveyors listed below as the SJE, depending on their availability:

- Adrian Ling
- 2) Kenneth Kong
- 3) Marcus Chua
- 4) Henry Ng
- 5) Lau Kwok Kwong
- 6) Frankie Pang
- 7) Ng You Han
- 8) Gary Soon
- 9) Chow Bo Xiong

In your response, please also provide us a list of 10 surveyors as your nominated SJE, regardless of whether you agree or disagree to our above nominated SJE. We may consider appointing one of your nominated SJE in case of any of our nominated SJE is not available.

NB: If both of us could not agree with each other's list of nominated SJE, we may still proceed to appoint a motor surveyor to conduct a pre repair survey & post repair inspection within the timeline stipulated under the NIMA protocol.

Thank you.

#### Rashitha

Senior Admin Officer Direct line +65 6594 2582 | Direct fax +65 6225 7402 | Rashitha shahuthuman@sg.msig-asia.com



MSIG Insurance (Singapore) Pte. Ltd. 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | Tel +65 

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## 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 witholding 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 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 ladgement 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	17/01/2018 10:25
Date Of Accident	16/01/2018 17:25
Exact Location Of Accident	CARPARK OF 3 DOVER ROAD 130003
Country/State of Loss	SINGAPORE
A Diposition Name (1975) and the Control of	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLH6996C
Insured/Policyholder	
Name Of Registered Owner	MILLENNIAL TRANSPORT
Co Reg No	53345379L
Email Address	GABKHOO@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-86696996
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VELLFIRE 2.5Z A-EDITION CVT 2WD 5DR
Exact Purpose for which vehicle was being used at time of accident	VEHICLE WAS STATIONARY, WIFE(PASSENGER INSIDE THE VEHICLE
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	NO
Policy Number	5084812023-01
Cover Note Number	
Driver	

#### Driver

KHOO FOO YONG , GABRIEL Name of Driver

S7906007J NRIC No 20/02/1979 Date Of Birth OUTDOOR Occupation 03/07/2009 Date Of Driving Pass

8 YEARS AND 6 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-86696996 Mobile Number

Fax Number

Contact Number

GABKHOO@GMAIL.COM EMail Address

Address

BLK 32 DOVER CRESCENT #03-352

Postcode

130022

OWNER

Was driver an employee of the Insured's Company NO

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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?

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO:

Number of Passengers (Including Driver)

3

**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 SKETCH

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

SDG7288G

Vehicle Make/Model/Colour

WHITE BMW

Details Of Properties

Vehicle Category

Name of Driver

MOHD YAZID BIN MOHD NOR

NRIC/Passport Number

S1668351E

Contact Number

96289091(BOSS)

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

#### SKETCH PLAN

## IMPORTANT NOTICE

THE STATE OF

VEHICLE NO: SIH 6996C. ACCIDENT DATE: [7/1/16.

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repud late policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)

l 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:
  - 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 insur.r(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.

NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY, PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.

Policyholder's Signatuse

ennial 7

Driver's Signature

(If driver is not the policyholder)

Date & Time:

CHARM' SCHOTOMCRAFT

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.: 

	Front		
1	1		
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  COT WAS PARK at CAT PO White BMW SDG 7288G of Course bumper to be dame it bash myself so I can drive The incident occurred on  gablehoo@gmail.c.  OWN DAMAGE() 3RD PARTY CLAIM( DECLARATION	E E		
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  (or was park of carpark with my wife white BMW SDG 72886 reverse into my commerce to be damage and distology it bash myself so lear drive the corthe incedent occurred on 16/01/18 on approximately and approximately			
	1-6		
1	Total .		
	Lie.		
AMAZON DE CONTROL MONTANO DE MESTA DE CARA			
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111 to novel	SNG 77886 000	ces into and	w rear and
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course bumpe	r to be damage	- and distolly	I have to place
it back myce	& so lean drive +	he cor.	
the incident	occurred on 16,	loc/18 on approxi	mately 17.25 hi
	9		V
9.1	school@anail.com		
)	7,000		
ONOT DATE OF A	2DD DADTV /T ATAK	DEPORTING ONLY Y	OWN WORKSHOP ( )
	3RD PARTY CLAIM ( )	REPORTING ONLY	OWN WORKSHOP ( )
ECLARATION		REPORTING ONLY	OWN WORKSHOP ( )
ECLARATION		REPORTING ONLY	OWN WORKSHOP()
ECLARATION We declare the pregaing pa		REPORTING ONLY (	OWN WORKSHOP()
ECLARATION We declare the pregoing pa		CHAR	May

MPML 18008771 / Performance Motors Limited - Alexandra ENTRY DATE & TIME: 17/01/2018 18:01 . SUBMITTED BY: Caroline Tan Shirui

### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding 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 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

ACCIDENT STATEMENT

Date Of Report

17/01/2018 18:01

Date Of Accident

16/01/2018 17:25

Exact Location Of Accident

DOVER CRESCENT

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SDG7288G

Insured/Policyholder

Name Of Registered Owner

LAU WOON CHAN

NRIC No.

S0096814E

Email Address

NOEMAIL

Mobile Phone No

(LOCAL) +65-96289091

Alternative Phone No

Office-96289091

Vehicle Particulars

Manufacturer

BMW

Model

316

Exact Purpose for which vehicle was being used

at time of accident

NORMAL USAGE

Are you claiming under your own insurance policy YES

for repair to your vehicle?

If No, Please state action to be taken

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

MSIG INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

B27633014

Cover Note Number

Driver

Name of Driver

MOHD YAZID BIN MOHD NOR

NRIC No

S1668351E

Date Of Birth

06/10/1964

Occupation

INDOOR

Date Of Driving Pass

03/12/2005

Driving Experience

12 YEARS AND 1 MONTH

Gender

MALE

Mobile Number

(LOCAL) +65-93391353

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

174 LOMPANG ROAD #03-63

Postcode

670174

Was driver an employee of the Insured's

Company

NO

If No, Relationship of the Driver with the Insured

PAID DRIVER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLIDED INTO PARKED VEHICLE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

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

REFER TO ATTACH.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLH6996C

Vehicle Make/Model/Colour

TOYOTA VELLFIRE

**Details Of Properties** 

Vehicle Category

PRIVATE HIRE

Name of Driver

KHOO FOO YANG GABRIEL

NRIC/Passport Number

S7906007J

Contact Number

86696996

Address

Postcode

Insurance Company Name

Nature Of Damage

REAR

No. Of Passenger (Including Driver)

1

#### Sketch Plan

#### 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
- 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
- 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:

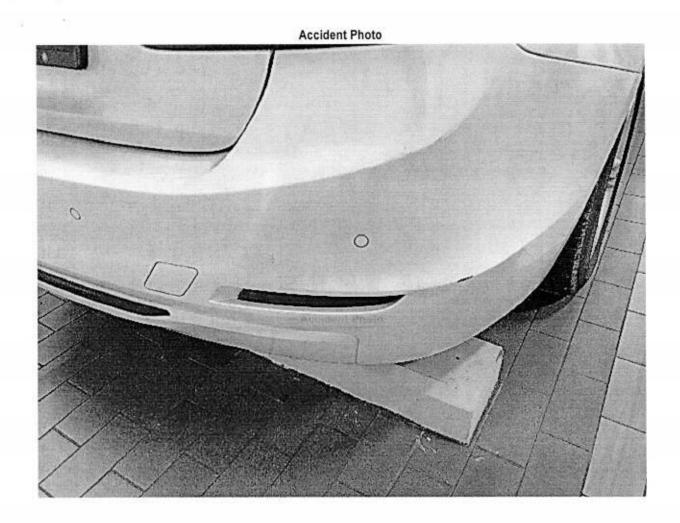
- My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal 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)
  - (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.

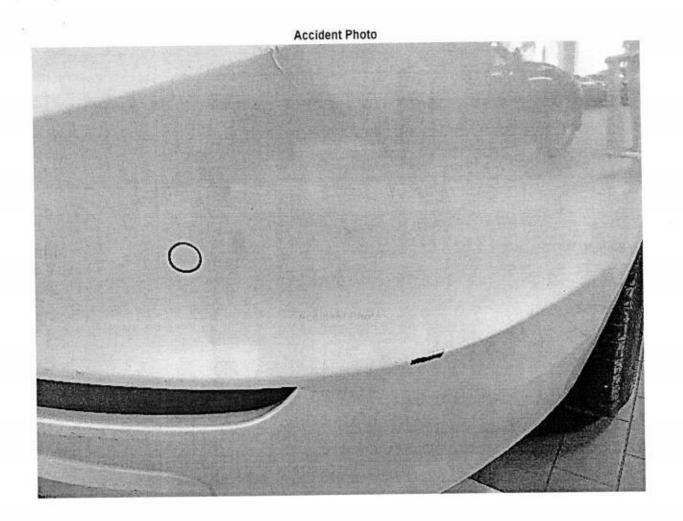
Driver's Signat (If driver is not (holder) Reporting Certise Personnel's Signature

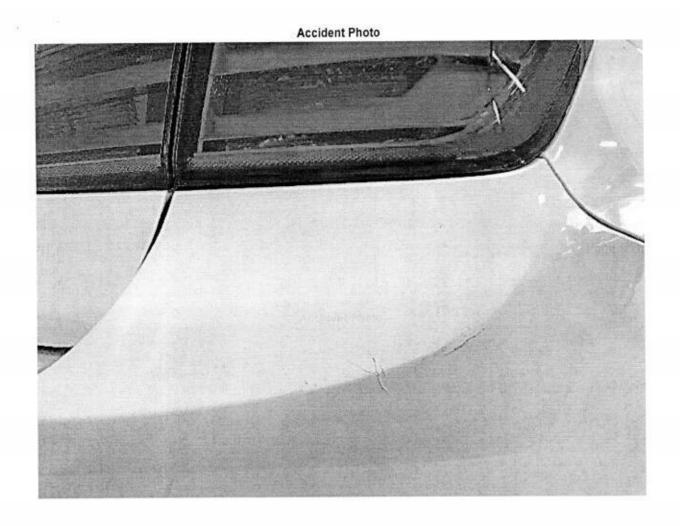
Name: NRIC/FIN No.:

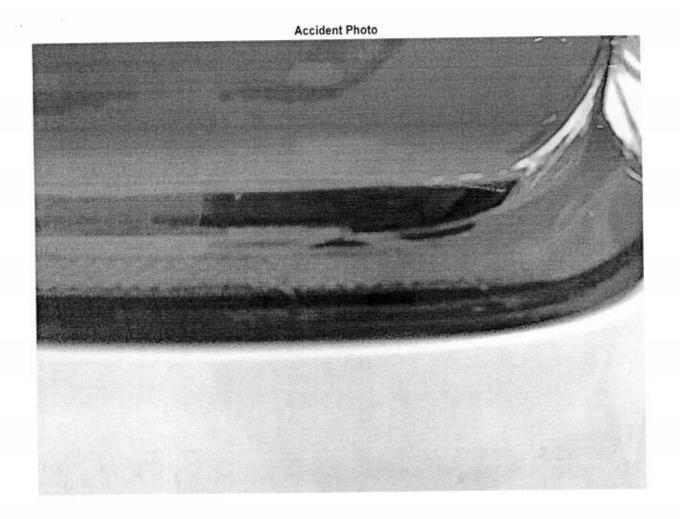
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bocause there is o	mby one lot available.
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when without realising	ig that the year side (right) had hit the
said vehicle abo	and damage
A minor slight so	cratch impact to the both cars.
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DECLARATION	
I/We declare the foregoing particulars	are true in every respect.
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Can we	que de la companya della companya de
Policyholder's Signature	Driver's Signature Reporting Centre Personnel's Signature
Date & Time:	If debugge all the collected Name:
	Date & Time: 13/21/18 . NRIC/FIN No.: 17/01/2018
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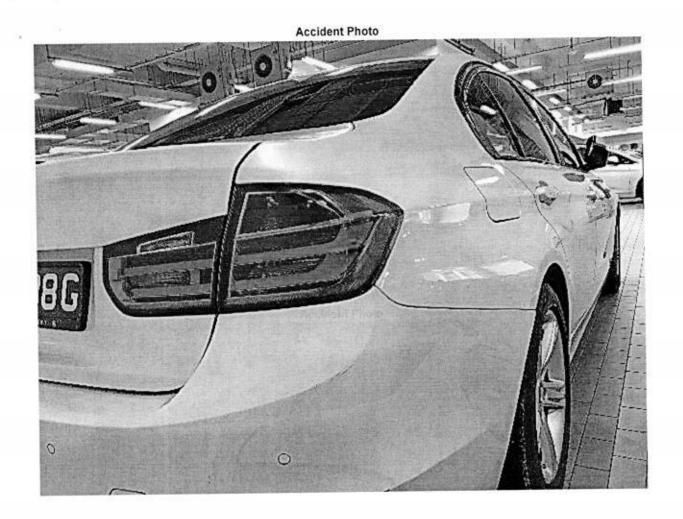
















## View Sent Message

This mail is associated with:

\*SLH6996C (546459) [SDG7288G] TP

MILLENNIAL TRANSPORT Jan 16 2018 5:00PM [LAU WOON CHAN] Dc's Automotive Pte Ltd

Print Message Delete Message Forward View Recipients Resend

LKK Auto Consultants Pte Ltd (LKK\_HQ), sent on 02/02/2018 14:29 PM. From

MSIG\_CPZ

Pre-repair Inspection Subject

Dear Monica,

Refer to your assignment on 19.01.2018 at 3.10PM.

Please be informed that we have inspected the vehicle SLH 6996C on 22.01.2018 at 1PM.

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)

	FOLDER TRACK	Est Submitted	Adj Assigned	Adi Rot	Adj Submitted	Ins Auth'ed	Status
Case Main	17 Jan 2018	EST Satisfactor	19 Jan 2018 15:10 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case
	Main	Refere	nce	Claim Details		ocuments	Show All
CI ATM SI	UBFOLDER DETA	ILS	THE RESERVE OF THE PARTY OF THE	The second second		[Created by in	surer]
Insured:	DDI OLDER DET		CHAN, ID: 50096	814E	->	****	
Main Clain	nant:	MILLENNIA	L TRANSPORT,	Co. Reg. No.: 53345	5379L		
		SLH69960		Date of Loss		16/01/2018 17:	
Vehicle Reg. No.: Claim Type:		TP / 54645			Policy/Cover Note No.:		(Comprehensive) 2/2017 - 26/12/2018
Vehicle Reg. No. (Insured):		SDG7288G	SDG7288G		Policy No. (Claimant):		
venicie Reg. No. (Insureo).				Excess:			
Repairer:		Dc's Autom	otive Pte Ltd (HQ	) 60 Ark @ Kaki Bu	kit, Kaki Bukit Ave	6, 417892 Kaki Bu	ıkit - Tel: 97677794
Handling 1	Insurer:	MSIG Insur	ance (Singapore)	Pte. Ltd. (HQ) - 7	el: +65 6827 7888	3 [Handled by N	Monica Chung Pei
Adjuster:		[Imm.Adv	rice due 20/01/	<b>d (HQ) -</b> Tel: 6256- 2018]			ng Wilson]
Driver/Cu	stodian (Insured):	MOHD YAZID	BIN MOHD NOR (	), NRIC: S166835	1E, Tel: +65933	91353	
Adj Asg. F	Remarks:	PRI SURVEY					
ASSOCIA	ATED MAIL RECI	IVED				View All	Compose Case Mail
There are	no mail for this ca	ise.					
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Due Da	te Priority	Type Task Gr	oup Subject	Handler Assig	gned By Con	npleted On C	reated On Done

# **Claim Documents**

\*SLH6996C (546459) [SDG7288G] TP MILLENNIAL TRANSPORT Jan 16 2018 5:00PM [LAU WOON CHAN] Dc's Automotive Pte Ltd

	sement Deports		1 per	page ▼	•
1818	essment Reports	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	Finalized On 18/01/18 16:15	Accident Statement From:OD - Reg. No: SDG7288G, Claimant: LAU WOON CHAN	•	Load HTM	
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No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	0	Load PDF	1
1	18/01/18 16:14	PRI FROM KURU & CO / TP GIA REPORT TP SLH6996C GIA Report	0	Load PDF	
2	18/01/18 16:15	From: OD - Reg. No: SDG7288G, Claimant: LAU WOON CHAN	0	Load PDF	
3	19/01/18 15:11	WE REJECT TP SURVEYORS & APPOINT LKK TO BE THE SJE	0	Load PDF	
4	22/01/18 09:17	THE PROPERTY OF MAME & ADDRESS	-	2000,00	

# **Documents Checklist**

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
A Secondary Tea Wandling Incurer	
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/MSG18001295/WD3S2

Date:

09/02/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

B27633014SMP

Claimant Vehicle

SLH6996C

Insured Vehicle No:

SDG7288G

No: Date of Loss:

16/01/2018

Nature of Claim:

TP

546459 Claim No:

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

**SLH6996C** 

Make & Model:

TOYOTA VELLFIRE, 2.5 Z G-EDITION CVT (A)

Engine No:

2ARH667245

Reg. Date: Colour:

19/10/2016 (Man. Year: 2016) Black

Chassis No: Odometer:

AGH300051241 75333 km

Engine Capacity: Market Value/New Car Price: 2493 cc N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Fair

Inspected At:

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Engine Modification: Yes

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

245/45R19

Rear Tyre Size:

245/45R19

Front Left Side:

Michelin 4 mm

Rear Left Side:

Michelin 4 mm

Front Right Side:

Michelin 4 mm

Rear Right Side:

Michelin 4 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:

19/01/2018

1 KAKI BUKIT AVE 6 # 01-68 AUTOBAY

Repairer: DC'S AUTOMOTIVE PTE LTD

Date Inspected:

22/01/2018

25 KAKI BUKIT ROAD 4 #06-43 SYNERGY @ KB

SINGAPORE 417800

Estimated Period of Repair:

0.0 days

Adjuster:

Teo Cheng Ming Wilson

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 \$2,700.00 - \$2,800.00

# REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 09 Feb 2018)

Parts:

M1-MPV

TOYOTA VELLFIRE 2.5 Z G-EDITION CVT (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SLH6996C)

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 >