Mulinian — From (Person)	(athasme Th	19 of	MSU1	Date	Time: 15012018 10-17am
Estimated Cos	t		Bill to:		4 11120
OD / Try / W: Fo Inspect Ve	TP RES / OD RE	S/EVA/INV/MV PC 879	//CS X	Insured:	GQ 5636K
at Workshop i		High Lex	7.		3453 1743
of		160 Sin Ming	Driv #05-17	101.	1140
olicy No:	B2892 74651	nkf J	Claim No:	5472	30
Sum Insured:			Excess:		
Make of Veh: Client's Record				D.O.	A. 23012018
CA / REV	REP. / REV 24 H	RSIWPI		H.C	D.D. <u>E</u> ndorsement;
Date/Time:	25012018 1059an	n_ Person Contacte	d: Han Wei	Vehicl	e (IN) OUT
Date/Time	Action/Instruction	( X ) FSfin			
	PC 824X - )			-	
	1 00 00-00	E			
	Gl 5636K-1				

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

	BFOLDER TRAC	KING	-						
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submi	tted 1	Ins Authled	Status	
Main	23 Jan 2018		25 Jan 2018 10:17 Assign					New Assignm Cancel Case	nent 
	Main	Re	ference	Cla	im Details		Docum	ents	Show All
CLAIM S	UBFOLDER DET	AILS					[Created b	y insurer]	ALPHANIE WHILE AND
Insured:		DAIKIN AIRC	ONDITIONING (S	INGAPORE)	PTE LTD, Co.	Reg. No.:	196800607Z		
Main Clai	imant:		PPING SERVICES						
Vehicle R	Reg. No.:	PC829X		Da	ate of Loss:		23/01/2018	13:00 - :59	
Claim Ty	pe:	<b>TP</b> / 547230		Po	olicy/Cover No	te No.:		MKF (Third Party 01/04/2017 - 31/	
Vehicle R (Insured		GQ5636K		Po	olicy No. (Clair	mant):			
				2000	cess:				
Repairer	1	Hiap Lek Auto 64531743	mobile Trading (	<b>HQ)</b> 160 Sin	Ming Drive, #0	5-17 Sin M	ing Autocity,	575722 Sin Ming	- Tel:
Handling	Insurer:	MSIG Insurar 2545]	ce (Singapore) P	te. Ltd. (HQ	) - Tel: +65 682	27 7888	[Handled by	Catherine Thia	<b>Shi Yi</b> - 659
* **	i	LKK Auto Con	sultants Pte Ltd (	HQ) - Tel: 6	256-3561 [I	mm.Adv	ice due 26,	/01/2018]	
Adjuster			N BIN SULEIMAN ()	, NRIC: S1	808590I, Tel:	+6590224	4471		
Driver/C		ABDUL RAHMA							
Driver/C (Insured		ABDUL RAHMA Third Party Pre	- 1 Commence - 1 C						
Driver/C (Insured Adj Asg.	):	Third Party Pre	- 1 Commence - 1 C				View A	All   Compos	e Case Mail
Driver/C (Insured Adj Asg. ASSOCIA	): Remarks:	Third Party Pre	- 1 Commence - 1 C				View /	All   Compos	e Case Mail
Driver/C (Insured Adj Asg. ASSOCIA	): Remarks: ATED MAIL REC	Third Party Pre	- 1 Commence - 1 C				View /	All   Compos	e Case Mail
Driver/C (Insured Adj Asg. ASSOCIA There are	): Remarks: ATED MAIL REC	Third Party Pre	- 1 Commence - 1 C		View All	Search Ta		Compose	e Case Mail

25012018 @ 1039am Han Wei Veh in MVA218011575 / VAC - Sin Mind ENTRY DATE & TIME: 23/01/2018 16:57 SUBMITTED BY: James Ng Wing Kin

### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- 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 available

	ACCIDENT STATEMENT	
Date Of Report	23/01/2018 16:57	
Date Of Accident	23/01/2018 13:15	
Exact Location Of Accident	EUNOS LINK	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	

Vehicle Registration Number	PC829X

Insured/Policyholder

Name Of Registered Owner

FRONTIER SHIPPING SERVICES PTE LTD

200516215H Co Reg No NOEMAIL Email Address

(LOCAL) +65-96561656 Mobile Phone No OFFICE-67759667 Alternative Phone No

**Vehicle Particulars** 

Manufacturer

TOYOTA

Model

HIACE COMMUTER BUS (D)

Exact Purpose for which vehicle was being used at WORK PURPOSE

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

BUS

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

5052789611-06

Cover Note Number

Driver

SIM POH WAH Name of Driver S1612000F NRIC No 21/04/1963 Date Of Birth

Date Of Driving Pass

OUTDOOR 17/03/1992

**Driving Experience** 

25 YEARS AND 10 MONTHS

Gender

Occupation

MALE

Mobile Number

(LOCAL) +65-96561656

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

BLK 952 HOUGANG AVENUE 9 #04-694

Postcode

530952

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 - 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

NO

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)

2

**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 STATEMENT (ATTENDED BY: JAMES NG)

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

GQ5636K

Vehicle Make/Model/Colour

MIT VAN

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 Pg. 1

### SKETCH PLAN

### **IMPORTANT NOTICE**

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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>repudiate 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.
- 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 aforesald.
- 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:
  - 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:
  - 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.

WOOD # 35

Policyholder's Signature Date & Time!

3 JAN 2018

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

2 3 JAN 2018

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.: NG WING KIN JAMES

S7927881E

### Sketch Plan #2 Pg. 1

(A) 8C 879 X 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(B) GQS636K	
(B) (no.5636)2   14	
(B) (no.15636)2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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MESS MAN	
DECLARATION	
I/We declare the foregoing particulars are true in every respect.	
SERVICEO TOLON TOLON	
Policyholder's Signatyce   Driver's Signature   Reporting Centre Personnel's Signature	ure
Date & Those Name: NG WING I	KIN JA
2 3 JAN 2018 Pate & Time: 2 3 JAN 2018 S792	7881E

Page 4 of 16

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

LAIM SUBF	OLDER TRA	CKING			-0.00					
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj !	Submitted	Ins Auth'ed	Statu	is	
Main	23 Jan 2018		25 Jan 2018 10:17 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0	.00 ew Rpt		Repo	ding for S ort noel Case	urvey
	Main	R	eference	Claim De	etails		Documen	its	] _	show All
	BFOLDER DI					- Company of the Comp	by insurer]			
Insured: Main Claimant:			NG (SINGAPORE)			and the second second	3			
Vehicle Reg. No.:	PC829X			Date o	f Loss:		8 13:00 - :59 s and <b>4</b> Days Fro	om LTA Reg	Date (Ma	an Yr)]
Claim Type:	<b>TP</b> / 547	230		Policy/ Note N			5MKF (Third Part 01/04/2017 - 3			
Vehicle Reg. No. (Insured):	GQ5636K			Policy (Claim						
B		*	H== (HO) 160 C/= 1	Excess		a a A stanitus	EZEZZZ Cia Mia	a Tal. 645	21742	
Repairer: Handling Insurer:			ding (HQ) 160 Sin N ore) Pte. Ltd. (HQ)							1
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62	56-3561 [Handle	ed by M	A CHIN FO	ок] [Imm.	Advice d	lue 26/0	1/2018]
Driver/Custo dian (Insured):	D	HMAN BIN SULEIN		08590I, Tel: +65						
Adj Asg. Remarks:	Third Part	y Pre-Repair Surve	2У		17					
ASSOCIAT	ED MAIL RE	CEIVED						View All	Compose	Case Mail
There are n	o mail for this	case.								
ALL ASSO	CIATED TAS	sks⊟				View All :	Search Tasks	Create Nev	w Task	Complete
Due Date	Priority	Type Task	Group Subjec	t Handler	Assign	ned By	Completed O	n Cre	ated On	Done

### **Claim Documents**

\*PC829X (547230) [GQ5636K] TP

# FRONTER SHIPPING SERVICES PTE LTD Jan 23 2018 1:00PM [DAIKIN AIRCONDITIONING (SINGAPORE) PTE LTD] Hiap Lek Automobile Trading

Ass	essment Reports		1 per pa	ge 🔻	~
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	1	humbnail	Prin
1	24/01/18 11:43	Accident Statement From:SC - Reg. No: GQ5636K, Claimant: DAJKIN AIRCONDITIONING (SINGAPORE) PTE LTD	0	Load HTM	
Pho	otos/Images		3 per pa	ge 🗸	V
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	1	Thumbnail	Prin
1	22/05/18 16:33	General View	0	Load JPG	~
2	22/05/18 16:33	General View	0	Load JPG	~
3	22/05/18 16:33	General View	0	Load JPG	4
4	22/05/18 16:33	General View	0	Load JPG	V
5	22/05/18 16:33	General View	0	Load JPG	V
6	22/05/18 16:33	General View	0	Load JPG	V
7	22/05/18 16:33	General View	0	Load JPG	V
8	22/05/18 16:33	General View	0	Load JPG	~
9	22/05/18 16:33	General View	0	Load JPG	4
10	22/05/18 16:33	General View	0	Load JPG	V
11	22/05/18 16:33	General View	0	Load JPG	V
12	22/05/18 16:33	General View	0	Load JPG	✓
13	22/05/18 16:33	General View	0	Load JPG	V
14	22/05/18 16:33	General View	0	Load JPG	~
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17	22/05/18 16:33	General View	0	Load JPG	~
18	22/05/18 16:33	General View	0	Load JPG	V
19	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	✓
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23	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	V
24	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	✓
25	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	~
26	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	V
27	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	~
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29	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	✓
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31	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	V
32	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	V
33	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	V

Ass	essment Reports		1 per p	age 🗸	<b>4</b>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	April 100 miles and the
34	22/05/18 16:35	Photographs of Damaged Parts	0	Load JPG	<b>V</b>
35	22/05/18 16:35 Photographs of Damaged Parts		O	Load JPG	V
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No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	1000	Thumbnail	
1	24/01/18 11:43	E-FILE REPORT (PC829X) From: SC - Reg. No: GQ5636K, Claimant: DAIKIN AIRCONDITIONING (SINGAPORE) PTE LTD	0	Load PDF	
2	24/01/18 11:43	TP PRI	0	Load PDF	
3	25/01/18 10:19	TP INFORMING WORKSHOP & CONTACT PERSON	0	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/MSG18001528/M1BE2

Date:

24/05/2018

REFERENCE

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

Policy No:

B28927465MKF

Claimant Vehicle PC829X

Insured Vehicle No:

GQ5636K

No: Date of Loss:

23/01/2018

Nature of Claim:

TP

Claim No: 547230

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

PC829X

Make & Model:

TOYOTA HIACE, 3.0 D Commuter (M)

Engine No:

1KD2123991

Reg. Date:

19/01/2012 (Man. Year: 2011)

Chassis No: Odometer:

JTFJT02P500001464

Colour:

296818 km

Engine Capacity:

2982 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):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

195 R15

Yes Engine Modification:

Rear Tyre Size:

195 R15

Front Left Side:

Michelin 7 mm

Rear Left Side:

Michelin 7 mm

Front Right Side: Michelin 7 mm The above values represent the remaining tyre treads depth

Rear Right Side: Michelin 7 mm

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	DIII 70
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:

25/01/2018

Date Inspected:

25/01/2018 Inspected At:

Hiap Lek Automobile Trading (HQ) 160 Sin Ming Drive, #05-17 Sin Ming

Autocity

Singapore 575722

Estimated Period of Repair:

0.0 days

Adjuster: MA CHIN FOOK

Manager:

CATHERINE CHONG KAI LING

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.

 $https://singapore.merimen.com/claims/index.cfm?fusebox = MTRadjuster\&fuseaction = gen\_... \ \ 24/5/2018$ 

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 \$3,500.00 -\$4,300.00

Adjuster Report Page 3 of 4

### REPAIR DETAILS

Reference

Part Source: (Last Synchronised: 24 May 2018)

Parts: N/A TOYOTA HIACE 3.0 D Commuter (M) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for PC829X)

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.

Page 4 of 4 Adjuster Report

# 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 >