

ASS. REC. BY:

REF: CS3/CTI/8001858/Tlcd302

Special Instruction

Surveyor:  
MehmenTau Fikih  
Jayn Jay

ASSIGNMENT (Office)

From (Person):

of CTI

Date/Time: 29/1/18 @ 4:51pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SBY 3743P

Insured:

SGB6410S

at Workshop m/s

S &amp; T Automotive

Tel:

9877 9879

of

48 Toh Guan Rd East #05-139

Policy No:

DMPCSN3091371700

Claim No:

SNM18D0050102/0

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

21/01/18

CA / REV / REP. / REV 24 HRS

'wp'

31/01/18 @ 3pm owner waiting

H.O.D. Endorsement:

Date/Time:

5:30pm @ 29/1/18

Person Contacted:

Mr. Tong

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SBY 3743P - x
	SGB 6410S - x
02/8/18 @ 4:17pm	checked Mr Tong, they have not yet prepare estimate due to awaiting owner <del>decide</del> decision.
16/1/19 @ 2:45pm	checked with Mr Tong, the owner decide to withdraw claim

Tanpin

ETI

CoE 2019 April-  
1993 July 1

Form 31/01/18

Estimated Cost

③ WS TR RES OD RES EVA INT MV

SBY 3743P  
ST & T Automotive  
48, Toh Guan Rd East #05-139

Insured

Policy No

Claims No

Sum Insured Excess

Clients Record

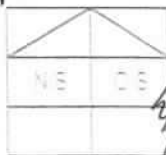
3pm @ owner waiting

Make of Van

Mr. Tong @ 9877 9879

Policy Condition

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



Ball on/Market Value

QAC Accident Report Consistent? Yes or No

Q14 PR Seen Consistent? Yes or No

Est. Repairs days Reps Yes or No

Sum Surp % Q Val: Yes or No

QA REV REP 24 HRS 'wps

Date Person Contacted

Vehicle IN/OUT  
Running

Date Time Action Instruction

W/D will mail estimate

\$3000 - \$4000  
6 days

Can The Repairs

☐ Prelim. Report  
☐ Final Report

Days Of Repair

6

Resurvey No. of Trip

1

Add Fee

☐ 1st Fee  
☐ 2nd Fee  
☐ 3rd Fee  
☐ 4th Fee

5th Fee

6th Fee

7th Fee

8th Fee

Extra Fee

Transport

1st Fee

2nd Fee

3rd Fee

4th Fee

150

150

Report Format

PRS

Printed Name

①

SBY 3743P

Toyota Corona GLI m

Make

Toyota Corona GLI m

1587

Color

Blue

Insured Std N / N4

Se. Feeding

430024

TR Insured Std N / N4

Eng No

AT1900083312

Chassis

Gen Cond Good Fair Poor Burnt

Steering In order Jammed Leaked Burnt or

Brake In order Jammed Leaked Burnt or

Mod. Nil STD A/Rim or

Tyre Size

195/60R15

SE/DUN/EXNOVA BY PS LIZA MID/OHTSU RIR SUMI

TOYO/YOKO or

Front

R.Bal

6

--

Rear

R.Bal

6

--

L.Bal

6

--

L.Bal

6

--

D.O.A

D.O

Survey report

ST&T Auto 31/1/18 @ 3pm

Des. of Damages Fr. Rear ③ NIS UIC Roof top or

The UIC Chassis frame Body Structure affected due to collision



# LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile				
CHINA TAIPING INSURANCE (S) PTE LTD		Ref : CS/CTI18001858/T1qd3		
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 31-01-2018		
		Code : CTI		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SGB 6410S	Veh. Inspected	SBY 3743P	
Policy No.	DMPCSN3091371700	Coverage (\$)	0.00	
Claim No.	SNM18D00501C02/0	Excess (\$)	0.00	
Assign From	MERIMEN (JOWYN TAY)	Assign Date	31/01/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	c.c		0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	21/01/2018	Inspection Date	31/01/2018	
Survey held at	48 TOH GUAN RD EAST #05-139			
Repairer	ST&T AUTOMOTIVE PTE LTD			
<b>5a. Remarks</b>				
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.				

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	30 Jan 2018		30 Jan 2018 18:57 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	SYED AHMED ABDUILLAH BIN SYED OMAR		
Main Claimant:	KOI KONG MUN, ID: S1766877C		
Vehicle Reg. No.:	SBY3743P	Date of Loss:	21/01/2018 10:00 - :59
Claim Type:	TP / SNM18D00501C02	Policy/Cover Note No.:	DMPCSN3091371700
Vehicle Reg. No. (Insured):	SGB6410S	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	St & T Automotive Pte Ltd (toh Guan) (HQ) 48 Toh Guan Road East Enterprise Hub #05-139, 608586 Jurong East - Tel: 98779879 / 63566738		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 08/02/2018]		
Adj Asg. Remarks:	PLEASE SURVEY THIRD PARTY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE BASIS. KINDLY LET US HAVE YOUR RECOMMENDED REPAIR AMOUNT IF THERE IS NO ESTIMATE PROVIDED DURING PRE REPAIR.		

### 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.

**Nivitha (LKK Auto)**

---

**From:** Shiau Chan (LKKAuto) <siewsc@lkkauto.com>  
**Sent:** Monday, 29 January 2018 4:51 PM  
**To:** assignments  
**Subject:** FW: OUR REF: PRS/SNM18D00501C02/0 & YR REF: SBY3743P -TO CONDUCT PREREPAIR SURVEY -SBY3743P

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315

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

---

**From:** Angie Foo [mailto:[angie.foo@sg.cntaiping.com](mailto:angie.foo@sg.cntaiping.com)]  
**Sent:** Monday, 29 January 2018 4:46 PM  
**To:** HockHing <hh.tong@sttautomotive.com>  
**Cc:** Jowyn Tay <jowyn.tay@sg.cntaiping.com>; SUR <sur@lkkauto.com>; Admin A <admin-a@lkkauto.com>; Denise Tay (LKKAuto) <denisetay@lkkauto.com>  
**Subject:** RE: OUR REF: PRS/SNM18D00501C02/0 & YR REF: SBY3743P -TO CONDUCT PREREPAIR SURVEY -SBY3743P

Without Prejudice

Dear Mr Tong,

We refer to your email on even date.

We had appointed Mr Calvin Ang of M/S LKK Auto Consultants Pte Ltd to survey your client's vehicle.

Please ensure that your client's vehicle is available for survey within 2 working days.

REMARKS:

Dear Calvin,

Please arrange to conduct survey, checking consistency of the damages on without prejudice.

Kindly take note, the claim handler on this case is Jowyn Tay 6389 6171.

Thank you.

Regards,  
Angie Foo  
Executive  
Motor Division  
Claims Department  
China Taiping Insurance (Singapore) Pte Ltd  
3 Anson Road #16-00  
Springleaf Tower  
Singapore 079909  
Co.Reg.No.200208384E  
DID: 6389 6186

Fax: 6224 7478 / 6224 7175  
Email: [angie.foo@sg.cntaiping.com](mailto:angie.foo@sg.cntaiping.com)  
Email: [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)  
Website: [www.sg.cntaiping.com](http://www.sg.cntaiping.com)

*Disclaimer:*

*This message is confidential; its contents do not constitute a commitment by China Taiping Insurance (Singapore) Pte. Ltd. except where provided for in a written agreement between you and China Taiping Insurance (Singapore) Pte. Ltd. Any unauthorized disclosure, use or dissemination, either in whole or partial, is prohibited. If you are not the intended recipient of the message, please notify the sender immediately.*

---

**From:** HockHing [<mailto:hh.tong@sttautomotive.com>]  
**Sent:** Monday, 29 January, 2018 4:41 PM  
**To:** Angie Foo  
**Cc:** Jowyn Tay  
**Subject:** RE: OUR REF: PRS/SNM18D00501C02/0 & YR REF: SBY3743P -TO CONDUCT PREREPAIR SURVEY -SBY3743P

WITHOUT PREJUDICE

Dear Angie,

Thank you for your reply. Selection as below:

Surveyor : Calvin Ang

Location : 48 Toh Guan Road East, Enterprise Hub, #05-139

Date : 31 Jan 2018

Time : 1000am

Thank you.

Best regards,

Warmest regards,

Tong Hock Hing  
Operations Manager  
ST & T Automotive Pte Ltd  
48 Toh Guan Road East  
Enterprise Hub #05-139

---

**From:** [Angie Foo](#)  
**Sent:** Monday, 29 January 2018 3:21 PM  
**To:** [hh.tong@sttautomotive.com](mailto:hh.tong@sttautomotive.com)  
**Cc:** [Jowyn Tay](#)  
**Subject:** OUR REF: PRS/SNM18D00501C02/0 & YR REF: SBY3743P -TO CONDUCT PREREPAIR SURVEY -SBY3743P

WITHOUT PREJUDICE

Dear Mr Tong,

We intend to conduct a pre-repair survey of the damage to your client's vehicle jointly with your client/your motor workshop.

We propose to use one of the following motor surveyors to conduct the joint pre-repair survey as a single joint expert.

TAY BENG HEE
SAMUEL PHUN
SEE CHEW SENG
MOHD FADHILAH BIN OSMAN
DEREK OH SIONG WEE
KALVIN ANG
MARCUS CHUA
SIMON HO
LOW SAR HUEI
HONG FOOK CHOY

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 of the listed motor surveyors and we will bear the cost of the pre-repair survey carried out by the single joint expert.

Kindly let us hear from you.

**REMARKS:**

Kindly take note, the claim handler on this case is Jowyn Tay 6389 6171.

Thank you.

Regards,  
Angie Foo  
Executive  
Motor Division  
Claims Department  
China Taiping Insurance (Singapore) Pte Ltd  
3 Anson Road #16-00  
Springleaf Tower  
Singapore 079909  
Co.Reg.No.200208384E  
DID: 6389 6186  
Fax: 6224 7478 /6224 7175  
Email: [angie.foo@sg.cntaiping.com](mailto:angie.foo@sg.cntaiping.com)  
Email: [claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)  
Website: [www.sg.cntaiping.com](http://www.sg.cntaiping.com)

*Disclaimer:*

*This message is confidential, its contents do not constitute a commitment by China Taiping Insurance (Singapore) Pte. Ltd. except where provided for in a written agreement between you and China Taiping Insurance (Singapore) Pte. Ltd. Any unauthorized disclosure, use or dissemination, either in whole or partial, is prohibited. If you are not the intended recipient of the message, please notify the sender immediately.*

---

This email has been scanned by the Symantec Email Security.cloud service.  
For more information please visit <http://www.symanteccloud.com>

---

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1766877C**

Name: **KOI KONG MUN**

Birth Date: **04 May 1966**

Issue Date: **03 Oct 2003**

0008878898



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S1766877C**



Name

**KOI KONG MUN**

歐 光 文

Race

**CHINESE**

Date of birth

**04-05-1966**

Sex

**M**

Country/Place of birth

**SINGAPORE**

**S1766877C**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles not exceeding 200 cc  
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

**22 May 1984**  
**26 Feb 1991**



NP 428A

5228957



NRIC No: **S1766877C**



Date of issue

**16-10-2013**

Address

**APT BLK 484A CHOA CHU KANG AVENUE 5**  
**#09-30**  
**SINGAPORE 681484**



## 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 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	24/01/2018 13:28
Date Of Accident	21/01/2018 10:10
Exact Location Of Accident	CAUSEWAY S'PORE WOODLANDS CHECKPOINT TWDS MALAYSIA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBY3743P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KOI KONG MUN
NRIC No	S1766877C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97992877
Alternative Phone No	OTHERS-97992877

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CORONA 1.6 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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	GA209751/1
Cover Note Number	

### Driver

Name of Driver	KOI KONG MUN
NRIC No	S1766877C
Date Of Birth	04/05/1966
Occupation	INDOOR
Date Of Driving Pass	26/02/1991
Driving Experience	26 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97992877
Fax Number	
Contact Number	OTHERS-97992877
EEmail Address	NOEMAIL

Address	BLK 484A CHOA CHU KANG AVE 5 #09-30
Postcode	641484
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : WU QIN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

KINDLY REFER TO ATTACHED POLICE REEPORT NO.J20180122/2253.

#### 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	SGB6410S
Vehicle Make/Model/Colour	TOYOTA PICNIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
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:

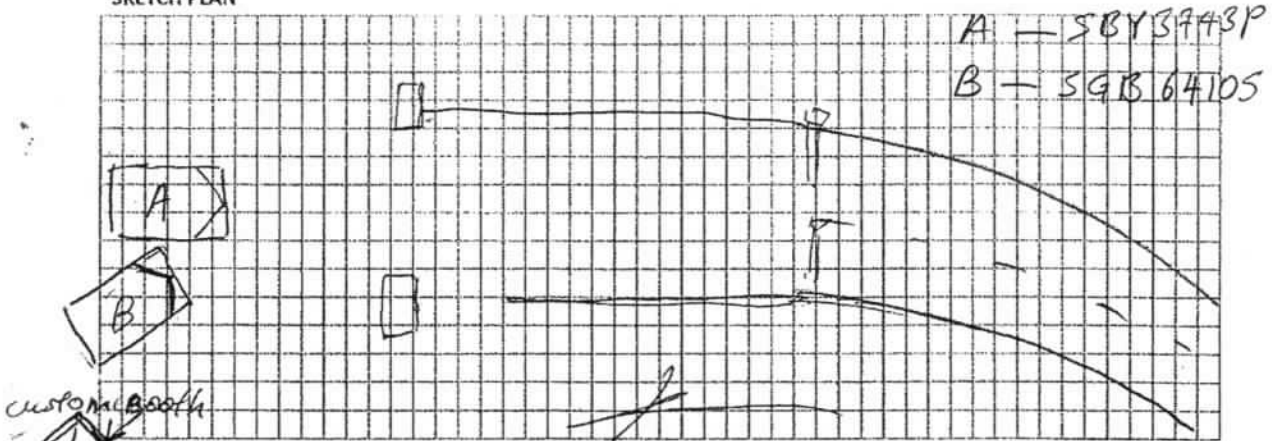
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 24/1/2018

\_\_\_\_\_  
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

Refer To Police Report

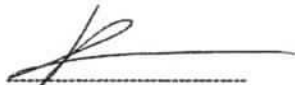
**Important:**

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE** WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

- |                                     |                                 |
|-------------------------------------|---------------------------------|
| <input type="checkbox"/>            | - Reporting Only                |
| <input type="checkbox"/>            | - Claim OD                      |
| <input type="checkbox"/>            | - Claim TP                      |
| <input checked="" type="checkbox"/> | - Claim OD/TP at other workshop |

DECLARATION

I/WE declare the foregoing particulars are true in every respect.



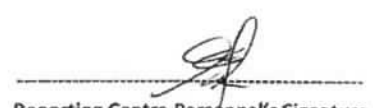
Policyholder's signature

Date & Time 24/1/2018

Driver's Signature

(if driver not the policyholder)

Date & Time



Reporting Centre Personnel's Signature

Name:

Nric/Fin No.



# SINGAPORE POLICE FORCE



J/20180122/2253

1 of 2

**POLICE REPORT (NP299)**

Report No. J/20180122/2253

Police Station Of Origin  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

Date/Time Report Made 22/01/2018 23:51	Vide Report No.	Station Diary No. 192
Name Of Informant KOI KONG MUN	Address APT BLK 484A CHOA CHU KANG AVENUE 5 #09-30 SINGAPORE 681484	
ID Type / ID No. NRIC NO / S1766877C	Contact No. Home/Office Mobile 97992877	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Self-Employed	Sex Male	Age 51
Institution/School Name	Date of Birth 04/05/1966	Race Chinese
Date/Time Of Incident 21/01/2018 10:10	Location Of Incident CAUSEWAY SINGAPORE	

**Brief details.**

On 21/01/2018 at about 1011hrs, I was driving my vehicle (SBY3743P, Blue Toyota Corona) towards Malaysia at Woodlands Checkpoint. I was queuing up at the clearance counter at the point of time. Normally there will be vehicles cutting into the lane for clearance. However, when I noticed that a vehicle (SGB6410S, Blue Toyota Pinic) that was cutting into lane not moving, I then moved forward. Suddenly, the vehicle moved forward and collided to the right side of my vehicle, causing a long scratch. I alighted from my vehicle and wanted to approach the driver, but he gestured me to move off. As such, I went back into my vehicle and proceeded to clear the Customs. While at the Causeway, about 100 meters from

Signature Of Officer Recording The Report

J / Sgt 2 TAN XIANG WEI

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
J / Jurong Police Divisional Investigation Branch /  
Insp MUHAMMAD ZHARIF BIN RAIHAN  
Contact No.: 67910000



Authentication Stamp

Signature : \_\_\_\_\_

Signature Of Informant:

Date/Time:  
22/01/2018 23:51

Classification Of Case:

**Singapore Police Force**



**SINGAPORE  
POLICE FORCE**



J/20180122/2253

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20180122/2253

Woodlands Checkpoint, I alighted from my vehicle again and wanted to settle the matter with him amiably. The driver who was a Malay man about 30s, came out from his vehicle in an aggressive manner. He pointed at me and said, "You see me not happy? Want to fight we settle outside." I felt threatened. As such, I took a photo of his vehicle and went into my vehicle before driving off.

Signature Of Officer Recording The Report:

J / Sgt 2 TAN XIANG WEI

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

J / Jurong Police Divisional Investigation Branch /  
Insp: MUHAMMAD ZHARIF BIN RAIHAN  
Contact No.: 67910000

 Authentication Stamp  
Signature:

Singapore Police Force

Signature Of Informant:

Date/Time:  
22/01/2018 23:51

Classification Of Case:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	30 Jan 2018		30 Jan 2018 18:57 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>




  

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured:	SYED AHMED ABDUILLAH BIN SYED OMAR, Co. Reg. No.: -								
Main Claimant:	KOI KONG MUN, ID: S1766877C								
Vehicle Reg. No.:	SBY3743P	Date of Loss:	21/01/2018 10:00 - :59 [294 Months and 20 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM18D00501C02	Policy/Cover Note No.:	DMPCSN3091371700						
Vehicle Reg. No. (Insured):	SGB6410S	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	St & T Automotive Pte Ltd (toh Guan) (HQ) 48 Toh Guan Road East Enterprise Hub #05-139, 608586 Jurong East - Tel: 98779879 / 63566738								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 08/02/2018]								
Adj Asg. Remarks:	PLEASE SURVEY THIRD PARTY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE BASIS. KINDLY LET US HAVE YOUR RECOMMENDED REPAIR AMOUNT IF THERE IS NO ESTIMATE PROVIDED DURING PRE REPAIR.								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									



## Claim Documents

**\*SBY3743P (SNM18D00501C02)**  
**[SGB6410S]**  
**TP**  
**KOI KONG MUN**  
**Jan 21 2018 10:00AM**  
**[SYED AHMED ABDUILLAH BIN SYED OMAR]**  
**St & T Automotive Pte Ltd (toh Guan)**

<a href="#">Upload Documents</a> <a href="#">Upload Photos</a> <a href="#">Compose New Letter</a>			<b>View</b> <a href="#">View in Browser</a>	
<b>Photos/Images</b>			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	21/01/19 11:26	<b>General View</b>	 Load PDF	
<b>Documentation</b>			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	30/01/18 18:58	<b>THIRD PARTY SBY3743P -PRS EMAIL BTW CIC AND ST &amp; T AUTOMOTIVE</b>	 Load PDF	
2	30/01/18 19:02	<b>THIRD PARTY SAS REPORT SBY3743P</b>	 Load PDF	

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>	<a href="#">Reset</a>	<a href="#">Save</a>	<a href="#">Print</a>
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

## 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/CT18001858/T1D3E2

Date: 23/01/2019

## REFERENCE

Handling Insurer: China Taiping Insurance  
(Singapore) Pte. Ltd.

Policy No: DMPCSN3091371700

Claimant Vehicle  
No : SBY3743PInsured Vehicle  
No : SGB6410S

Date of Loss: 21/01/2018

Nature of Claim: TP

Claim  
No: SNM18D00501C02

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: SBY3743P

Make &amp; Model: TOYOTA CORONA, 1.6 GLi (A)

Engine No: HIDDEN

Reg. Date: 01/07/1993 (Man. Year: 1993)

Chassis No: AT1900083312

Colour: Blue

Odometer: 430024 km

Engine Capacity: 1587 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: 195/60 R15

Rear Tyre Size: 195/60 R15

Front Left Side: Bridgestone 6 mm

Rear Left Side: Bridgestone 6 mm

Front Right Side: Bridgestone 6 mm

Rear Right Side: Bridgestone 6 mm

*The above values represent the remaining tyre treads depth*

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

## INSPECTION

Date of Assignment: 30/01/2018

Date Inspected: 31/01/2018 Inspected At:

St &amp; T Automotive Pte Ltd (toh Guan) (HQ)

48 Toh Guan Road East Enterprise Hub

#05-139

Singapore 608586

Estimated Period of Repair: 6.0 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:** MRM-SG      **Version:** 1.0 (Last Synchronised: 23 Jan 2019)

**Parts:** 143      TOYOTA CORONA 1.6 GLi (A) (Catalogue:Merimen Singapore 1.0)

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

**Print Code:** (Unsubmitted, no print-code for SBY3743P)

**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 >