

12/03/2018

ASS REC BY:

REF: CS3/MSG18002373/Wd362

Special Instructions:

Surveyor:

Kimen

ASSIGNMENT (Office)

From (Person):

Christina Wong

of

MSIG

Date/Time:

5/2/18 @ 3:50pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No.:

SKK 3022D

Insured:

GBD 9237E

at Workshop m/s

Galaxy Autocare

Tel:

9010 8488

of

13, Kaki Bkt Rd # # 01-23

Policy No.:

28973603MKC

Claim No.:

548631

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 01/02/2018

CA / REV / REP. / REV 24 HRS

lwp

07/02/18 @ Morning

H.O.D. Endorsement:

Date/Time:

2:43pm @ 6/2/18

Person Contacted:

Mr. Ang

Vehicle IN/OUT:

Date/Time

Action/Instruction (X) Estimate

SKK 3022D - X

GBD 9237E - CC4/EQI16007695/Ang392

D.O.A.: 25/4/16

Dismantle Part: 09022018

After repair: 13022018

REF: MSIG

ASSIGNMENT

Form: Date: 07/02/2018

Estimated Cost:

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

To inspect Vehicle No: SKK 3022D
at Workshop/mis: Galaxy Autocare
of 13 karki Bkt Rd 4 # 01-23

Insured:

Policy No:

Claims No:

Sum Insured:

Excess:

(Client's Record)

Morning

Make of Veh:

(Policy Condition)

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

N/S	O/S

Bel. or Market Value:

IDAC Accident Report: Consistent? : Yes or No

GIA / PR. Seed: Consistent? : Yes or No

Est. Repairs: days: Res: Yes or No

Lump Sum: %: 3 Val: Yes or No

CA / REV / REP. / 24 HRS ^{lwp}

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: SKK 3022D Page: 27/6/2013

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

Truck / Trailer or

Make: Nissan Sylphy : 1598

Colour: Black A.C. Insured: Std / Nil / NA

Sp. Reading: 77839 T. Radio: Insured: Std / Nil / NA

Eng No:

C.No: MNTBBABITZ0005569

Gen. Cond: Good (Fair) Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S Rim / STD A/Rim or

Tyre Size: F: 205/55 R L6

R: 205/55 R 16

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

TOYO / YOKO or:

CRUCERO

Front:

Rear:

R. Bel: 4 mm R. Bel: 4 mm

L. Bel: 4 mm L. Bel: 4 mm

D.O.A: DO 7/2/2018

Survey held at: As Above

Des. of Damages: Frt / Rear / O/S / N/S / U/O / Rooftop or

Right Front

The U/O / Chassis frame / Body Structure affected due to collision

7/2/18 Accident Report Not Given

Range #3900 - #4900

5 Day Repairing.

RECEIVED 02 APR 2018

4/6/2018

Date/Time File Pass to:

☐

Prell. Report

06042018

☐

Final Report

Date/Time File Return to:

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Site Fee:

G.P.S:

Other:

Total:

Add Fee:

☐

Site Insp: \$

☐

Interp: \$

☐

Tech: \$

☐

Assess: \$

120

50

10

120

Report Format:

frs

Lump Sum / I.B.I.S:

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

CLAIM SUBFOLDER TRACKING						
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd
Main	05 Feb 2018		05 Feb 2018 15:50 Assign			
						New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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[Created by insurer]

CLAIM SUBFOLDER DETAILS

Insured:	JIAXING HOLDINGS PTE LTD, Co. Reg. No.: 201510104W		
Main Claimant:	TEO EN HUI GRACE, ID: S8525380H		
Vehicle Reg. No.:	SKK3022D	Date of Loss:	01/02/2018 00:00 - :59
Claim Type:	TP / 548631	Policy/Cover Note No.:	28973603MKC Coverage: 15/07/2017 - 14/07/2018
Vehicle Reg. No. (Insured):	GBD9237E	Policy No. (Claimant):	
		Excess:	
Repairer:	Galaxy Autocare Pte Ltd (HQ) 13 Kaki Bukit Road 4 #01-23 Bartley Biz Centre, 417807 Kaki Bukit - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 06/02/2018]		

[View All](#) [Compose Case Mail](#)

ASSOCIATED MAIL RECEIVED

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.									

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	02/02/2018 13:33
Date Of Accident	01/02/2018 16:00
Exact Location Of Accident	PUNGGOL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK3022D
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Insured/Policyholder

Name Of Registered Owner	TEO EN HUI GRACE
NRIC No	S8525380H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97710636
Alternative Phone No	OTHERS-97710636

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY-1.6 CVT ABS D/AIRBAG 2WD 4DR (A)

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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00387018
Cover Note Number	

Driver

Name of Driver	SAMMY SAITO
NRIC No	S8572964J
Date Of Birth	03/09/1985
Occupation	INDOOR
Date Of Driving Pass	19/06/2007
Driving Experience	10 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96314181
Fax Number	
Contact Number	
EMail Address	SAMMMY@GMAIL.COM

Address	BLK 323 YISHUN CENTRAL # 09-273 SINGAPORE
Postcode	760323
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	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)	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

TP CHANGE LANE HIT INSURED REFER TO ATTACH STATEMENT RECORDED BY JIA MIN - PROGRESSIVE AUTOMOTIVE PTE LTD TEL 67415336

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	GBD9237E
Vehicle Make/Model/Colour	
Details Of Properties	JIA XING AIRCON PTE LTD
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MAI XIANMING
NRIC/Passport Number	G2858352X
Contact Number	90857888
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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); end/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:

2/2/18
1.30pm

Driver's Signature

(if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jia Min

SKETCH PLAN

	Vehicle No A-SKK3022D B-GBO9237E
	Legend

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was making a right turn into Punggol Road at 3:59pm. Upon finishing my turn and moving in a forward direction in my lane I noticed vehicle B gradually moving into my lane. I attempted to avoid an accident by braking and pressing the horn. However vehicle B continued to come into my lane, impacting my vehicle driver side.

After exchanging particulars and returning to the vehicle I noticed my right rear view mirror does not operate electronically. After driving a distance I noticed the front right wheel alignment was off.

DECLARATION

I/We declare the foregoing particulars are true in every respect. Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

Policyholder's Signature

Date & Time:

 2/2/18
 1:30pm

GLA/NC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

 Jia Min
 2

Common Statement

ACCIDENT STATEMENT (Part I)

Reporting Centre: Progressive Automotive Pte Ltd

This is NOT an admission of blame / liability, but a summary of identities and facts which will speed up the settlement of claims.

To be signed by BOTH drivers

1. Date of accident: 12/18/18 Time: 15:59 2. Exact location of accident: Punggol Road

3. Injured even if slight: No ☒ Yes ☐

4. Material damage: To vehicles other than vehicles A and B: No ☒ Yes ☐ To objects other than vehicles: No ☒ Yes ☐

5. Witness' name, address and tel no. (to be undated if he/she is passenger in vehicle A or vehicle B):

Vehicle Video Camera Available: No ☐ Yes ☒

Registration No. (VEHICLE A): SKK 3022 D

6. Insured / policyholder (see insurance cert.):

Name: Teo En Hui Grace (capital letters)

Address:

NRIC / Passport no.: S8505380

Tel no. (from 8am till 5pm): 97710636

HP:

7. Vehicle: Nissan Sylphy 1.6 CVT ABS

Make, type: 3 AIR BAGS

8. Insurance company: Direct Asia

Does the policy cover damage to vehicle A? No ☒ Yes ☐

Policy No.: MT/00387018

9. Driver: Sammy Saito

Class of licence: 3

HP: 96314181

Gender: Male ☒ Female ☐

12. CIRCUMSTANCES

Put a cross (X) in each of the relevant boxes applicable to your vehicle

12.1 Chain Collision ☐

12.2 Collided into Waychart ☐

12.3 Collided into Motorcyclist ☐

12.4 Collided into Parked Vehicle ☐

12.5 Collided into Pedestrian ☐

12.6 Collided into Property ☐

12.7 Collision - Change of Lane ☐

12.8 Collision - Cross Junction ☐

12.9 Collision - Head on Collision ☐

12.10 Collision - Head to Rear ☐

12.11 Collision - Mirror/Mirror Hit ☐

12.12 Collision - Opening Door of Vehicle ☐

12.13 Collision - Roundabout ☐

12.14 Collision - U Turn ☐

12.15 Drink Driving / Drug Influence ☐

12.16 Fire, Explosion or Lightning ☐

12.17 Flood ☐

12.18 Hit and Run / Vanishing / Damages subject Marked

12.19 Hit by Fallen Tree / Other Objects

12.20 No Collision

12.21 Side Swipe

12.22 Touch

12.23 State TOTAL number of boxes marked with a cross

Registration No. (VEHICLE B): GRD 9237E

6. Insured / policyholder (see insurance cert.):

Name: Jia Xing Aircon Pte Ltd (capital letters)

Address:

NRIC / Passport no.:

Tel no. (from 8am till 5pm):

HP:

7. Vehicle:

Make, type:

8. Insurance company:

Does the policy cover damage to vehicle B? No ☐ Yes ☐

Policy No. (if available):

9. Driver (See driving licence) (if different from insured in above):

Name: Jia Xing Ming (capital letters)

NRIC / Passport no.: G2858350X

Class of licence:

HP: 90867888

Gender: Male ☒ Female ☐

10. Indicate the point of initial impact with an arrow (→)

11. Visible damage to vehicle A:

13. Sketch of accident when impact occurred

Please indicate 1. layout of the road - 2. the direction of vehicles A and B with arrows - 3. their positions at the time of impact - 4. the spot where - 5. routes of the drivers or goods

REFER TO ATTACHED

10. Indicate the point of initial impact with an arrow (→)

11. Visible damage to vehicle B:

14. My remarks:

15. Signatures of drivers

A: [Signature]

15. My remarks:

B: [Signature]

* In the event of injuries or in the event of damage to property other than to vehicles A and B, give information needed

Do not alter anything in the statement after signing. Subsequently, each driver should take one copy.

For insured's Individual Statement (Part II) see overleaf →

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

CLAIM SUBFOLDER TRACKING



































Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	05 Feb 2018		05 Feb 2018 15:50 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured: JIA XING HOLDINGS PTE LTD , Co. Reg. No.: 201510104W									
Main Claimant: TEO EN HUI GRACE , ID: S8525380H									
Vehicle Reg. No.: SKK3022D		Date of Loss: 01/02/2018 00:00 - :59 [55 Months and 5 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / 548631		Policy/Cover Note No.: 28973603MKC Coverage: 15/07/2017 - 14/07/2018							
Vehicle Reg. No. (Insured): GBD9237E		Policy No. (Claimant):							
		Excess:							
Repairer: Galaxy Autocare Pte Ltd (HQ) 13 Kaki Bukit Road 4 #01-23 Bartley Biz Centre, 417807 Kaki Bukit - Tel:									
Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Teo Cheng Ming Wilson] ... [Imm.Advice due 06/02/2018]									
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SKK3022D (548631)
[GBD9237E]
TP
TEO EN HUI GRACE
Feb 1 2018 12:00AM
[JIAXING HOLDINGS PTE LTD]
Galaxy Autocare Pte Ltd

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
2	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
3	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
4	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
5	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
6	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
7	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
8	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
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10	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
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16	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
17	05/04/18 18:44	General View	Load JPG	<input checked="" type="checkbox"/>
18	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
19	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
20	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
21	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
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23	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
24	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
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31	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
32	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
33	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
34	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
35	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
36	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>
37	06/04/18 15:26	Photographs of Damaged Parts	Load JPG	<input checked="" type="checkbox"/>

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
38	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
39	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
40	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
41	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
42	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
43	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
44	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
45	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
46	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
47	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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49	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
50	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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53	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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56	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
57	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
58	06/04/18 15:26	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
59	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
60	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
61	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
62	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
63	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
64	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
65	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
66	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
67	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
68	06/04/18 15:26	Private Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	05/02/18 15:22	Email frm TP - PRI	 Load PDF	
2	05/02/18 15:24	SKK3022D GIA Rpt	 Load PDF	
3	05/02/18 15:24	PRI Memo	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <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/MSG18002373/WD3E2

Date: 09/04/2018

REFERENCE

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

Policy No: 28973603MKC

Claimant Vehicle No: SKK3022D

Insured Vehicle No: GBD9237E

Date of Loss: 01/02/2018

Nature of Claim: TP

Claim No: 548631

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SKK3022D

Make & Model: NISSAN SYLPHY, 1.6 CVT ABS D/AIRBAG 2WD 4DR (A)

Engine No: HR16990175A

Reg. Date: 27/06/2013 (Man. Year: 2013)

Chassis No: MNTBBAB17Z0008569

Colour: Black

Odometer: 77839 km

Engine Capacity: 1598 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:	205/55 R16	Rear Tyre Size:	205/55 R16
Front Left Side:	Crucero 4 mm	Rear Left Side:	Crucero 4 mm
Front Right Side:	Crucero 4 mm	Rear Right Side:	Crucero 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: 05/02/2018

Date Inspected: 07/02/2018 Inspected At:

Galaxy Autocare Pte Ltd (HQ)
13 Kaki Bukit Road 4 #01-23 Bartley Biz
Centre
Singapore 417807

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 \$3,900.00 - \$4,900.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 09 Apr 2018)
Parts:	143	NISSAN SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SKK3022D)	
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 >