

ASS. REC. BY:

REF CS/ASM18002934 / M1rd3er

Surveyor:

ASSIGNMENT (Office)

From (Person): Kitty Teo

of ASM

Date/Time: 13/02/2018

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKZ 8617B

Insured:

at Workshop n/s

Sin Heng Long

Tel: 6481 6078

of

Blk 5032, AMK Ave 3 Ind. Prk 2 #01-305

Policy No:

Claim No:

S8M008QR

Sum Insured:

Excess:

\$900.00

Make of Veh:

(Client's Record)

D.O.A. 6/2/2018

CA / ☒ REV / REP. / REV 24 HRS

14/02/18 @ 12pm-3pm

H.O.D. Endorsement:

Date/Time:

108pm @ 13/2/18

Person Contacted:

lanjan

Vehicle IN ☒ OUT

Date/Time

Action/Instruction (✓) Estimate

Pls check Insured's driving license and confirm he possess valid driving license prior to any authorisation -

SKZ 8617B - X

15/2/18

Informal Kitty pending workshop est by SMART claim

23/2/18

Smt pali to Kitty thru smart claim

ASSIGNMENT

Right: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop no: _____
 of: _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 Client's Record: _____
 Make of Van: _____

(Policy Condition)

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

Est. or Market Value: **\$182K**

ODAO Accident Report: _____ Consistent? Yes or No

GIA / PR Seen: _____ Consistent? Yes or No

Est. Repairs: _____ days Fee: Yes or No

Unit Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle IN / OUT

Vehicle No: **SK78617B** Page: **FEB 2016**
 Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: **PEUGEOT** CC: **1560**
 Colour: **Blue** R/C: Insured / Std / Nil / NA
 Sp. Reading: **30178** T/Reco: Insured / Std / Nil / NA
 Eng No: _____
 O No: **YF38DBXH ZTF L044008**
 Gen. Cond: **Good** / Fair / Poor / Burnt
 Steering: **Order** / Jammed / Leaked / Burnt or
 Brake: **Order** / Jammed / Leaked / Burnt or
 Mod: Nil / **CR** / STD A/Rim or
 Tyre Size: F: **215/55/17**
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **MIC**
 Front: _____ Rear: _____
 R Bal: **2** mm R Bal: **2** mm
 L Bal: **2** mm L Bal: **2** mm
 D.O.A: **6/2/2018** D.O: **14/2/2018**
 Survey held at: _____
 Des. of Damages: Frt / Rear / O/S / NIS / UIC / Rooftop or
REAR NS.
 The UIC / Chassis frame / Body Structure affected due to collision



Date / Time Action / Instruction

NO ESTIMATE UPON SURVEY.

26/2/18 Anthony repair and inform repairer to proceed repair

Confirm \$2054.00, 3 days
Red: \$3110.60, 60%

RECEIVED 08 MAY 2018

Date/Time File Path (U)

typical

Date/Time File Path (U)

File Path (U)

Report Format

Lump sum / I.E.R. **2054.00**



Prel. Report



Final Report

Days Of Repair: **3**

Resurvey No. of Trip: **1**

Survey Fee

Transport

Other

Other

Other

Other

Add Fee:



Site Visit



Interim



Traveling



Visiting

200

200



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

AXA INSURANCE PTE LTD

Ref : CS/ASM18002934/M1rd3

8 SHENTON WAY #24-01
AXA TOWERS SINGAPORE 068811

Date : 13-02-2018



Code : ASM

1. Policy Particulars :- OWN DAMAGE

Insured Veh.	Veh. Inspected	SKZ 8617B
Policy No.	Coverage (\$)	0.00
Claim No. S8M008Q8	Excess (\$)	900.00
Assign From SMARTCLAIM (KITTY TEO)	Assign Date	13/02/2018

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No. HIDDEN	Year of Reg.	
Chassis No.	Colour	
Odometer -	Steering	
Brakes	Modification	
General		

3. Conditions 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. Description of Damages

--

5. General Information

Accident Date 06/02/2018	Inspection Date
Survey held at SIN HENG LONG MOTOR WORK BLK 5032 ANG MO KIO INDUSTRIAL PARK 2 #01-287/305 SINGAPORE 569535	

5a. Remarks

A) THE MARKET VALUE IS S\$----- (EST. AVERAGE) B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.
--



Service Request Details

Claim

S8M008Q8

Reference

None 

Loss Date

February 6, 2018

Request Date

February 13, 2018

Due Date

February 21, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (OD)

Type of Loss

Own Damage

Services

Accelerated workshop survey

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SKZ8617B

Make

PEUGEOT



Service Address

Block 5032 Ang Mo Kio Ave, , , 569535

Primary Contact/Insured

CHUA CHENG HIANG
5 JALAN GIRANG, 359177, Singapore
94566145
h_leo@bdlarch.com.sg

Claim Handler

TEO Kitty
6568804602
kitty.teo@axa.com.sg

Additional Instructions

EXCESS \$400 + \$500(UNNAMED) = \$900

[Messages](#)[Invoices](#)[History](#)[Documents](#)[Assessment](#)[Metrics](#)[Notes](#)[New Message](#)

TYPE



SENT

2/13/18 11:06 AM

FROM

TEO Kitty

SUBJECT

SKZ8617B - CAR @ SIN HENG LONG

BODY

Hi Please survey WP and get estimate from worksho...





PENDING ESTIMATE FROM REPAIRER

Type

🔔 Question

Message

Dear Kitty, Please be informed the we have inspected the vehicle SKZ 8617B on 14/2/2018.We are pending estimate from repairer.Thanks Veron Chen on behalf of Janice.

Reply

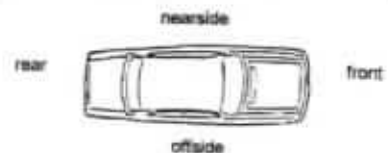
Your Ref: S8M008Q8Date: 23 February 2018Our Ref: CS/ASM18002934/M1rd3The Motor Claims Department
AXA INSURANCE PTE LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO. SKZ 8617BWe thank you for the instruction on 13/02/2018Please be informed that we had conducted the inspection of the abovementioned vehicle 14/02/2018 at the premises of m/s: SIN HENG LONG MOTOR WORK and have the following to report:-

Repairer's Estimate (Gross)	: S\$ <u>5,164.60</u>
Revised Estimate Amount	: S\$ <u>2,054.00</u>
"Check" Items (Estimated)	: S\$ <u> </u>
Total Repair (Estimated)	: S\$ <u>2,054.00</u>
Pre-Accident Value	: S\$ <u>82,000.00</u>
COE/PARF value	: S\$ <u>48,874.00</u>
Nett Value	: S\$ <u>33,126.00</u>

Description of Damage:

The vehicle sustained damages
at the rear n/s portion.

Comments:

We have not authorize repair.Repair day: 3 daysYours faithfully
MA CHIN FOOK
Automotive Assessor

<< Re:SKZ 8617B OD PRELIMINARY REVISED UPLOADED

Type

🔔 Question

Message

Hi Please authorise at \$2054 before excess of \$900. Thanks.

[Reply](#)

Helen

From: Daniel Koh [daniel.koh@income.com.sg]

Sent: Tuesday, 6 March, 2012 1:26 PM

To: SUR, Susan Ting

Cc: Eddie Loke, Jenny Pei, Toh Choon Hin, Gan Boon Chuan, Azhari Afidi, Yon Kai Jie, Corinne Hoo, David Phua, Bennie Tan, Josephine Wong

Subject: FW: TP CASES TO BE SURVEYED BY LKK TODAY, 6-3-2012

Dear Veron,

Please assist to survey the following vehicles today as per Surveyor Toh's instruction

	THIRD PARTY	OUR INSURED	WORKSHOP / CONTACT	DOA / REF / OFFICER
1	SJP5697D	SGA2182G	AUTOWORX HOUSE / Me Me San 64528211	5-3-2012 / MT-0746042-001 / Azhari
2	SJB4843D	SJK8120H	THIAM SOON MOTOR SERVICE / Ah Soon 93383693	2-3-2012 / MT-0746005-002 / Susan Ting
3	SGY8717Z	SFU5077P	KWEE SENG MOTOR SERVICE / Low 91478165	5-3-2012 / MT-0745948-002 / Yon Kai Jie
4	SGY9344J	SGK5482T	P S AUTO SERVICE / Andy 94568196	2-3-2012 / MT-0745806-002 / Corinne Hoo
5	SJE9375P	SKB4481C	Z-ONE AUTOMOTIVE / Evon 66342112	4-3-2012 / MT-0745992-001 / David Phua
6	JKG6915	SKE580K	ASIA MOTORSPORTS SOLUTIONS / 67453811	29-2-2012 / MT-0745518-002 / Yon Kai Jie
7	YN163T	PA2458E	LEE BROTHERS AUTOMOTIVE / Pei Chen 65095521	3-3-2012 / MT-0745812-002 / Bennie Tan
8	SGK3366J	SGK8375A	LBA AUTOMOTIVE / Pei Chen 65095524	4-3-2012 / MT-0746023-002 / Susan Ting
9	SKC3384B	SDK7110P	SK AUTOMOBILE HUB / Mohamed 67895155	3-3-2012 / MT-0745988-002 / Yon Kai Jie
10	FX3408R	GBA9898M	HL CYCLE / Michael 64844842/65094743	20-2-2012 / MT-0744561-002 / Josephine Wong
11	FBB7710D	GR7636S	KIM KOCK MOTOR / Ah Chern 62650226	2-3-2012 / MT-0746024-001 / Susan Ting

Please revert to Ms Susan Ting at susan.ting@income.com.sg after survey

Janice Lee (LKKAUTO)

From: Janice Lee (LKKAUTO)
Sent: Monday, February 26, 2018 3:52 PM
To: 'shlmotorwork@gmail.com'
Cc: SUR
Subject: SKZ 8617B AXA OD DOA: 06.02.2018

Dear Sir,

As instructed by our client, please proceed to repair the insured vehicle **SKZ 8617B (excess \$900/-)**.

If there are any check items or supplementary items please inform our office's Assignment Team at Tel: 6741 8434 to arrange our surveyor for inspection.

All supplementary items and unconfirm items are subjected to further approval from insurance company before completion of the repair.

*Our client reserve their right **not to pay** if there is no valid approval obtained before repair.

Thank you.

Best Regards,

Jannice Lee (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: jannicelee@lkkauto.com | fax: 6256-4315

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



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.: 1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SGK 3366J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR TAILGATE	TO REPAIR SEE LABOUR	1,093.60	-
1	REAR TAILGATE LOGO	NOT NECESSARY	68.50	-
1	REAR TAILGATE EMBLEM "SUBARU"	NOT NECESSARY	68.50	-
1	REAR TAILGATE EMBLEM "FORESTER"	NOT NECESSARY	85.60	-
1	REAR TAILGATE INNER LOCK	NOT NECESSARY	186.20	-
1	REAR BUMPER	DENTED / DEFORMED	708.60	708.60
1	REAR BUMPER TOP STEP CHROME PLATE	BENT	416.50	416.50
1	REAR BUMPER REINFORCEMENT	BENT	423.50	423.50
2	REAR BUMPER SIDE RETAINERS-R/L @\$32.60	NOT NECESSARY	65.20	-
1	REAR BUMPER TOW HOOK COVER	TWISTED	28.20	28.20
1	REAR END PANEL	TO REPAIR SEE LABOUR	518.60	-
	LESS 10% DISCOUNT		-366.30	-
	LESS 20% DISCOUNT		-	-315.36
			3,296.70	1,261.44
<u>SPECIAL NETT ITEMS</u>				
1	SET REAR REVERSE SENSOR (SN)	SHORTED	280.00	200.00
1	SET REAR BUMPER CLIP (SN)	NECESSARY	35.00	35.00
			315.00	235.00
<u>LABOUR</u>				
	TO REMOVE,REFIX REVERSE SENSOR. }		60.00	50.00
	TO CHECK REAR ELECTRICAL WIRING. }		40.00	-
	TO RESPRAY PAINTING AND ETC.		900.00	500.00
	TO REMOVE,REFIX INTERIOR UPHOLSTERY TO ASSIST REPAIR.	NOT NECESSARY	120.00	-
	PANEL BEATING,REMOVE AND REPLACING.INCLUSIVE OF THE REPAIR OF REAR TAILGATE AND REAR END PANEL.		800.00	300.00
	-		-	-
	-		-	-
	-		-	-
			1,920.00	850.00
GRAND TOTAL			5,531.70	2,346.44

Report Ref No. CS/INC12004658/Uqn

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	4701I
Vehicle Details	
Vehicle No.:	SKZ8617B
Vehicle to be Exported:	No
Intended De-registration Date:	15 Feb 2018
Vehicle Make:	PEUGEOT
Vehicle Model:	508 ALLURE 1.6 BLUEHDI EAT6
Primary Colour:	Blue
Manufacturing Year:	2015
Engine No.:	10JBHC3022252
Chassis No.:	VF38DBHZTFL044008
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$27,558.00
Original Registration Date:	05 Feb 2016
First Registration Date:	05 Feb 2016
Transfer Count:	0
Actual ARF Paid:	\$15,582.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 Feb 2026
PARF Rebate Amount:	\$11,686.00
Intended COE Rebate Details	
COE Expiry Date:	04 Feb 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):	10
QP Paid:	\$46,651.00
COE Rebate Amount:	\$37,188.00
Total Rebate Amount:	\$48,874.00

The information contained herein is correct as at 15 Feb 2018

OK

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	08/02/2018 13:00
Date Of Accident	06/02/2018 07:20
Exact Location Of Accident	JUNCTION JALAN GIRANG / SERANGOON AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ8617B
Insured/Policyholder	
Name Of Registered Owner	CHUA CHENG HIANG
NRIC No	S16347011
Email Address	H_LEO@BDLARCH.COM.SG
Mobile Phone No	(LOCAL) +65-90693144
Alternative Phone No	OTHERS-94566145

Vehicle Particulars

Manufacturer	PEUGEOT
Model	508-1.6 TURBO (A)

Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
--	-------------

Are you claiming under your own insurance policy for repair to your vehicle?	YES
--	-----

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
------------------	-------------

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA164380
Cover Note Number	05/02/2018 - 04/02/2019

Driver

Name of Driver	LEO HEE HENG
NRIC No	S1108965H
Date Of Birth	07/06/1955
Occupation	INDOOR
Date Of Driving Pass	01/10/1979
Driving Experience	38 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94566145
Fax Number	
Contact Number	
EMail Address	H_LEO@BDLARCH.COM.SG

Address	5 JALAN GIRANG
Postcode	359177
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	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: : SUYANTI
	GENDER: : FEMALE

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 ATTACHED STATEMENT AND SKETCH

Attachment(s)

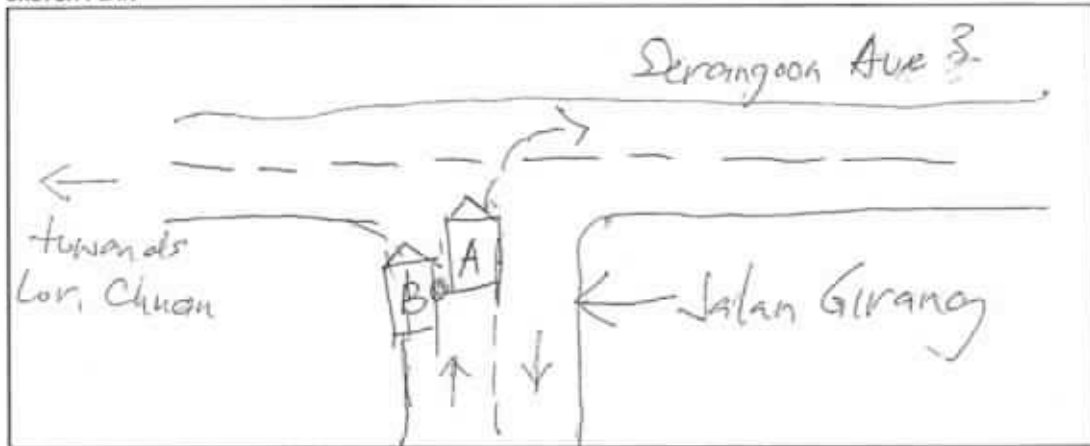
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB588L
Vehicle Make/Model/Colour	
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. 2

Date of accident: 6/2/18 Time: 7.20am Location: Junction of Jalan Girang Serangoon Ave 3
 My Vehicle A: 9K28617B Vehicle B: 5BB 588L Vehicle C: _____
 SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

In morning of 6/2/18, 7.20am, I was stopping at junction of Jalan Girang waiting for traffic to clear so I can turn right to Serangoon Ave 3.
 A lorry at my rear try to squeeze through the left side of my car and turn left. The lorry hit the left rear of my car. The driver did not stop his vehicle. I chase after him and managed to stop him at Lorong Chuan Bus stop. A photo was taken. (as attached)
 The rear light of my vehicle was damaged and shattered.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :
 Email address :
 & myself :
 Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

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

Policyholder's Signature
 Date & Time:

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 8/2/18

AH LIM MOTOR COMPANY
 No. 10 Ang Mo Kio Industrial Park 2A
 #01-09 AIAK Autopoint, Singapore 569047
 Tel: 6444 1244 Fax: 6444 8170

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

AH LIM MOTOR COMPANY

SKETCH PLAN

IMPORTANT NOTICE

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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:



Driver's Signature
(If driver is not the policyholder)
Date & Time: 8/2/18

AH LIM MOTOR COMPANY
No. 10 Ang Mo Kio Industrial Park 2A
#01-09 AMK Autopoint, Singapore 568047
Tel: 6443 1245 Fax: 6443 8177

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

Status of Driving Licence

QUALIFIED DRIVING LICENCE

Qualified Driving Licence No. :	S16347011
Status of Qualified Driving Licence :	Valid
Class of Qualified Driving Licence :	3
Expiry Date :	Valid for life unless revoked, suspended or disqualified.

PROVISIONAL DRIVING LICENCE

You (S16347011) are not a valid Provisional Driving Licence Holder.

The above information is accurate as at 20/02/2018 12:01 AM.

Sketch Plan Pg.1

SKETCH PLAN

IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorized Driver.
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Sketch Plan

← [A] ← [B] ← [C] ← [D]	A: SHB 4480R
← TPE towards SLE	B: SCR 6262R
← Celstar Flyover	C: SGV 691G
←	D: SFE 9519H

Describe Circumstances of the Accident

On 2/3/2012 @ about 17:30hrs, my taxi (A) was travelling along TPE towards SLE. As the vehicles in front were stopped, as I followed suit. Few seconds later, Veh B suddenly cut to my taxi from rear. After not down to check then realized that my taxi had involved in a chain collision, total 4 cars involved.

I had 2 pax and no injury at the point of accident. However, I had neck and shoulder pain after that had consult doctor and given 3 days mc.

Declaration

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

PORT TRANSPORTATION PTE LTD

303 SIN MING DRIVE

SINGAPORE 575717

TEL: 6555 1188 FAX: 6453 3183

Policyholder's Signature: [Signature]

Date:

& Time

Driver's Signature (If driver is not the policyholder) / Date

2/3/2012

9:24 am

Witnessed by Reporting Centre Personnel

Status of Driving Licence

QUALIFIED DRIVING LICENCE

Qualified Driving Licence No. :	S1108965H
Status of Qualified Driving Licence :	Valid
Class of Qualified Driving Licence :	3
Expiry Date :	Valid for life unless revoked, suspended or disqualified.

PROVISIONAL DRIVING LICENCE

You (S1108965H) are not a valid Provisional Driving Licence Holder.

The above information is accurate as at 20/02/2018 12:01 AM.

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SHB4480R

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

AEJI KARMAK

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

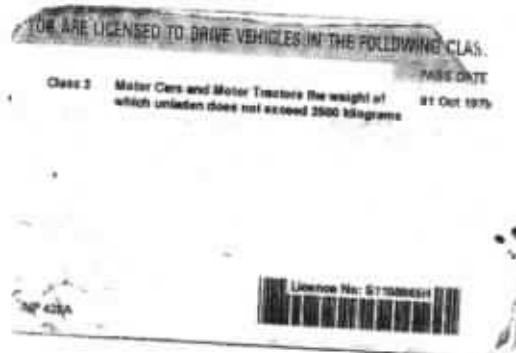


Email: h_lee@bdlarch.com.sg

Office: 6293 8218

Hq: 945 661451

9069 3144 (Volume)
and claim at your own risk



Dry
wg: N.
ca: Yes
Total: 2.
Su Yanti. (CF)





redefining / insurance

AXA Insurance Pte Ltd
 ☎ 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 📠 (65) 6880 4740
 ✉ customer.care@axa.com.sg
 🌐 www.axa.com.sg

account number
 04437

Certificate of Insurance

Motor Vehicles (Third-Party Risk and Compensation) Act, (Chapter 189) Motor Vehicles (Third-Party Risk and Compensation) Rules, 1960 Road Transport Act, 1967 (Malaysia)
 Motor Vehicles (Third-Party Risk) Rules, 1969 (Malaysia)

Policy details

Policyholder name	CHUA CHENG HIANG	Certificate number	GA164380 / 1
Cover	Comprehensive	Chassis number	VF38DBH2TFL044008
Plan name	Road	Engine number	10/BHC3022252
NCD applicable	50%		
Vehicle registration number	SK286178		
Period of insurance	from 05/02/2018 to 04/02/2019 (both dates inclusive)		
Finance loan company	UNITED OVERSEAS BANK LIMITED		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	500 400.00
	Windscreen Excess	500 300.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed Authorised Driver
2. S\$500 for declared Young and Inexperienced Driver
3. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if you have chosen AXA Premium Workshop.

Additional clauses & endorsements to your policy

N/A

We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risk and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1967 (Malaysia).

AXA Insurance Pte Ltd

Authorized signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risk and Compensation) Act (Cap. 189). The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

Sketch Plan Pg. 5



redefining / insurance

Date: 8/4/2017

To: Owner of Vehicle Number: SKZ 9617B

The following has been advised to you via your workshop, Ah Lim Motor Company through their staff, Zila / Eileen / Mui Hong.

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☐ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☐ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☐ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☐ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
- ☐ For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using any combination of genuine original parts and/or original equipment manufacturer (OEM) parts.
- ☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☐ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- ☐ Others claim of own works

Signed and acknowledge by:

Name and signature of policyholder/authorised driver

AH LIM MOTOR COMPANY
10 Ang Mo Kio Industrial Park 2A
Singapore 568047
Name and signature of workshop personnel 6670 company stamp

Sketch Plan Pg. 6

To Whom It May Concern,

Accident involving my vehicle no. SKZ 8617B on 6/2/18 (date) with
GBB 588L (other vehicle no) along Junction of Jalan Gerbang /
Serangoon Ave 3

I, Chua Cheng Heng Nric No. S16347011

Owner of vehicle no. SKZ 8617B am aware of the accident of my vehicle on
6/2/18 (Date) while car was driven by Lee Hui Heng

Nric No. S11082654 I hereby, authorise him / her to make the report.

X

Name Chua Cheng Heng

Date:

To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the
above accident.

X

Name

Date:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





ATTN: MOTOR CLAIM DEPT

T/P VEH. NO:

GBB588L

ESTIMATE REPORT 1st QUOTATION

OWNER'S PARTICULAR

NAME: CHUA CHENG HIANG

CONTACT:

90693144

ADDRESS:

LICENSE NO: SKZ8617B

CHASSIS NO:

VF38DBHZTFL044008

MAKE/MODEL: PEUGEOT 508 1.6

ENGINE NO:

YEAR OF MAKE:

OWNER'S INSURER: AXA INSURANCE PTE LTD

JOB-CODE: TP

CLAIM DETAIL

MATERIALS

S/N

1 REAR BUMPER

2 LEFT REAR TAIL LAMP

3 LEFT REAR BUMPER RETAINER

QTY QUO-PRICE DISC. % DISC-PRICE

1.00 \$1,904.60

1.00 \$1,754.80

1.00 \$185.20

\$3,844.60

TOTAL (PARTS):

SPECIAL NETT ITEM

1 LEFT REAR TAIL LAMP CLIP

2.00 \$20.00

TOTAL (PARTS):

LABOR

1 DISMANTLE & REFIT BUMPER, REVERSE SENSORS, ETC

2 SPRAY PAINTING ON REAR BUMPER, AND REAR FENDERS

1.00 \$400.00

1.00 \$900.00

TOTAL (LABORS):

TOTAL (PARTS & LABORS):

EXCESS:

\$ 900.00

NO. OF DAYS:

Re-Survey: Before / After Painting

Part-by-Part / Lump-Sum

DATE OF SURVEY:

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Revert.
PIP Repair
Before paint
Photo
LKK Auto
3w days
26/2/18

Before Paint
2054 (Before XS)

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

Fastlane

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Mar 2012 00:00 Edit Reg		05 Mar 2012 00:00 Edit Adj Rpt	S\$10,600.00 Edit Estimates	S\$10,600.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	----------

CLAIM SUBFOLDER DETAILS [Created by adjuster]

Insured:	Goh Kok Peng, NRIC: S8415135A		
Main Claimant:	NORAH BINTE NOH, NRIC: S7102803H		
Vehicle Reg. No.:	SJS3882H	Date of Loss:	03/03/2012 17:00 - :59
Claim Type:	TP / 800557147	Policy/Cover Note No:	2100276476 (Comprehensive) Coverage: 09/11/2011 - 08/11/2012
Vehicle Reg. No. (Insured):	SGN1326Y	Policy No. (Claimant):	SI11V08343/VPE/R01
Repairer:	Sk Automobile Hub (HQ) Blk 5, Tanah Merah Kechil Road #17-05, 466665 Tanah Merah - Tel: 67895155		
Handling Insurer:	Chartis Singapore Insurance Pte Ltd (SG) - Tel: 65-6419-3000 ... [Handled by MdNoor, Norsiah]		
Claimant's Insurer:	Liberty Insurance Pte Ltd (HQ) - Tel: 63280716		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Final Rpt due 15/03/2012]		
Driver/Custodian:	Goh Kok Peng (), NRIC: S8415135A		

ASSOCIATED MAIL RECEIVED

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

- AHA_SG (16/04/2012): Alert - Adj Mandate Approved (S\$11600.00) - SJS3882H - Claim Handler: MdNoor, No...

ALL ASSOCIATED TASKS

[View All](#)
[Search Tasks](#)
[Create New Task](#)
[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Done?
No results.								



Janice Lee (LKKAUTO)

From: meng yeow chan <shlmotorwork@gmail.com>
Sent: Tuesday, February 27, 2018 12:45 AM
To: Janice Lee (LKKAUTO)
Cc: SUR
Subject: Re: SKZ 8617B AXA OD DOA: 06.02.2018

Dear Janice,

Please have the surveyor contact me, I would like to find out where did he get the list price from. As the list price I got from agent is higher than that of his, I would like to dispute on that amended estimate.

Best Regards,
Ian Chan

On Mon, 26 Feb 2018 at 4:01 PM, Janice Lee (LKKAUTO) <JaniceLee@lkkauto.com> wrote:

Dear Ian,

Enclosed document as per request.

Thank you.

Best Regards,

Jannice Lee (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: janicelee@lkkauto.com | fax: 6256-4315

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

From: meng yeow chan [<mailto:shlmotorwork@gmail.com>]
Sent: Monday, February 26, 2018 3:54 PM
To: Janice Lee (LKKAUTO) <JaniceLee@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: Re: SKZ 8617B AXA OD DOA: 06.02.2018



Registered No: 25546200W
BLOCK 5032 ANG MO KIO INDUSTRIAL PARK 2
#01-305 Singapore 569535
Tel No. : 6481 6078 Fax No.: 6483 0905
E-mail : shlmotorwork@gmail.com

Attention To : CHUA CHENG HIANG
Invoice No : SHLMW18-0381
Invoice Date : 28/02/2017

Nric No : S1634701I
Car Model : PEUGEOT 508
Car Plate No : SKZ8617B

S/N	Description	Amount S\$
1	LUMP SUM repair for providing replacement parts, repair service to panels, and providing putty and re-spray on affected areas.	2,054.00

Sub-Total \$ 2,054.00
=====

Date and Customer's Signature/Co. Stamp

SIN HENG LONG MOTOR WORK



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.: 1 of 5

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJG 2435K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	NUMBER PLATE WITH CASING-L (SN)	BENT	45.00	45.00
1	FACE,FR BUMPER (SN)	DEFORMED	427.65	427.65
1	FACE,FR BUMPER LOWER (SN)	DISTORTED	321.00	321.00
1	GARNISH,R.FR.SIDE (SN)	DEFORMED	14.55	14.55
1	GARNISH,R.FR.FOGLIGHT (SN)	NOT NECESSARY	5.47	-
1	GARNISH,L.FR.FOGLIGHT (SN)	NOT NECESSARY	5.47	-
1	GARNISH,L.FR.SIDE (SN)	DEFORMED	14.55	14.55
1	BEAM,FR BUMPER (SN)	BENT	182.32	182.32
1	BEAM,R.FR.BUMPER UPPER (SN)	BENT	21.82	21.82
1	STAY,R.FR.BUMPER BEAM (SN)	BENT	10.95	10.95
1	BASE,FR.LICENCE (SN)	DEFORMED	40.05	40.05
1	BEAM,FR.BUMPER UPPER (SN)	BENT	23.70	23.70
1	STAY,L.FR.BUMPER BEAM (SN)	BENT	10.95	10.95
2	NUT (SN)	NOT NECESSARY	10.20	-
1	BEAM,L.FR.BUMPER UPPER (SN)	BENT	21.82	21.82
1	SPACER,R.FR.BUMPER SIDE (SN)	NECESSARY	9.15	9.15
1	SPACER,L.FR.BUMPER SIDE (SN)	NECESSARY	9.15	9.15
22	CLIP A,BUMPER (SN)	NECESSARY	64.35	64.35
1	BASE,FR.GRILLE (SN)	CRACKED	127.65	127.65
1	MOLDING,FR.GRILLE (SN)	CRACKED	109.42	109.42
1	COVER,FR.GRILLE (SN)	CRACKED	49.27	49.27
1	MOLDING,R.FR.GRILLE UPPER (SN)	CRACKED	29.17	29.17
1	MOLDING,L.FR.GRILLE UPPER (SN)	CRACKED	29.17	29.17
1	MOLDING,FR.GRILLE CENTER (SN)	CRACKED	67.50	67.50
1	MOLDING,FR.GRILLE LOWER (SN)	CRACKED	67.50	67.50
1	BASE,FR.GRILLE UPPER (SN)	CRACKED	182.32	182.32
1	PLATE,EMBLEM (SN)	NECESSARY	14.55	14.55
1	SPACER,R.FR.GRILLE (SN)	NECESSARY	9.15	9.15
1	SPACER,L.FR.GRILLE (SN)	NECESSARY	9.15	9.15
1	EMBLEM,FR (SN)	NECESSARY	18.22	18.22
2	NUT,PUSH 3MM (SN)	NECESSARY	2.85	2.85
2	NUT,PUSH (SN)	NECESSARY	2.25	2.25
5	CLIP A,BUMPER (SN)	NECESSARY	14.62	14.62
4	CLIP B,BUMPER (SN)	NECESSARY	7.20	7.20

Report Ref No. CS/III12022517/Aqn



SIN HENG LONG
MOTOR WORK

Your Ref: SKZ8617B

Our Ref: SKZ8617B

02 March 2018

Discharge Voucher

I, Chua Cheng Hiang

hereby acknowledge and confirm that I have received from Sin Heng Long Motor Work my aforesaid vehicle which has been repaired to my satisfaction and is now in good running condition. In consideration of AXA INSURANCE PTE LTD (hereinafter referred to as "Insurers") settling the cost of repairs with the said Workshop. I agree that excess of S\$900.00 and the payment by AXA INSURANCE PTE LTD to Sin Heng Long Motor Work shall be full satisfaction liquidation and discharge the Insurers from all further obligations in respect of damage to my aforesaid motor vehicle.

Signature : 

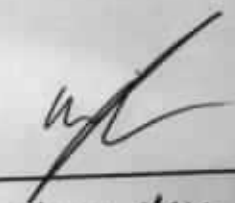
Name : Chua Cheng Hiang

(Include company stamp if applicable)

NRIC/UEN : S16347011

Date : 5 March 2018

Witness

Signature : 

Name : Chan Meng Yeow

NRIC : S88247888F

Address : 325 Sembawang Crescent

#15-66 Singapore (710325)