

ASS. REC. BY:

REF: CS3/MSG18003006/R1d342

Special Instruction:

Surveyor:
Menimen

Pasul

ASSIGNMENT (Office)

From (Person):

Jasmine Lok

of

MSG

Date/Time:

13/02/18 @ 4:19pm

Estimated Cost:

Bill to:

OD (IP) WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

GBC 9745K

Insured:

SGX 7874P

at Workshop m/s

Ah Koon Motor

Tel:

62707113

of

BLK 1001-BK Merah Lane 3 # 01-69

Policy No:

S28902443 SMA

Claim No:

548266

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

30/01/2018

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

9:29am @ 14/2/18

Person Contacted:

Anthony

Vehicle IN / (OUT)

Date/Time

Action/Instruction (X) Estimate

GBC 9745K-X

SGX 7874P-X

Demanded: 28/2/2018

Surveyor *K. Kuan*

MS19

51860

ASSIGNMENT

Date: 22/12/18

Estimated Cost:

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

To inspect Vehicle No: GBC 9745K

at Worksite: Ah Koon Motor

at Bk1001, Bk1 Merch June 3 # 01-69

Insured:

Policy No:

Claims No:

Sum Insured: Excess:

Claims Record: Anthony @ 9665 9141

Name of Ins:

9:30 am - 12 pm

(Policy Condition)

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



Salvage Market Value:

ODAD Accident Report: Consistent? Yes or No

Q/A PR Seen: Consistent? Yes or No

Est. Repairs: days Repair: Yes or No

Est. Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS 1 wp

Date: Person Contacted:

Vehicle IN / OUT

Vehicle: GBC 9745K Date: 2014 APR

Type: M/Car M/Cycle Bus/Truck Lorry Taxi Other Motor

Truck Trailer:

Make: CITROEN BERLINGO 1.6 1560

Color: WHITE

So. Passing: 076237

Eng No:

Chassis: VF 77B9H8E J566789

Gen. Cond: Good Poor Burnt

Steering: Locked Jammed Leaked Burnt

Brake: Locked Jammed Leaked Burnt

Mod: Nil Std A/R

Tyre Size: 195/65R15

BS/DUN/EXNOVA/GH/PS/LIZA/MID/OHTS/PR/SUM

TOYO (YORK)

Front:

R/Ba: 5 R/Ba: 5

L/Ba: 3 L/Ba: 5

Q/A: 30/01/18 Q/A: 22/02/18

Surveyor: AH Koon Motor

Obs. of Damages: PR CS NS UC Ratched

The U/C Chassis frame Body Structure affected due to a/c

Date Time Action/Instruction

Estimate repair range \$5,000 - \$6,000

Anthony
22/5/2018

RECEIVED 23 MAY 2018

Date Time File Pass:

☐ Prelim. Report

Days Of Repair:

☐ Final Report

Resurvey No. of Trip: 1

Date Time File Report:

Survey Fee:

Add Fee:

Site Fee:

Transportation:

Project Number:

PR3

Repair Fee:

Test Fee:

Other Fee:

120

50

10

180

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	31 Jan 2018		13 Feb 2018 16:19 Assign				New Assignment Cancel Case

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

Insured:	CHUNG VUI LEONG, ID: S7661941G, Tel: +6596752714, Email: NOEMAIL		
Main Claimant:	SIEMENS PTE LTD, Co. Reg. No.: 199605166D		
Vehicle Reg. No.:	GBC9745K	Date of Loss:	30/01/2018 17:00 - :59
Claim Type:	TP / 548266	Policy/Cover Note No.:	S28902443SMA (Comprehensive) Coverage: 22/04/2017 - 21/04/2018
Vehicle Reg. No. (Insured):	SGX7874P	Policy No. (Claimant):	
		Excess:	
Repairer:	Ah Koon Motor (1960) Pte Ltd (HQ) BLK 1001 BUKIT MERAH LANE 3, #01-69, 159718 Bukit Merah - Tel: 62707113		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jasmine Lok Kheng Kwei - 6594 2550]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 14/02/2018]		
Driver/Custodian (Insured):	CHUNG VUI LEONG (41 / Male), NRIC: S7661941G, Tel: +6596752714		
Adj Asg. Remarks:	Third Party Pre-Repair Survey		

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.									



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

MSIG INSURANCE (SINGAPORE) PTE LTD

Ref : CS3/MSG18003006/R1d3

16 RAFFLES QUAY
#24-01 HONG LEONG BLDG SINGAPORE 048581

Date : 14-02-2018



Code : MSG

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SGX 7874P	Veh. Inspected	GBC 9745K
Policy No.	S28902443SMA	Coverage (\$)	0.00
Claim No.	548266	Excess (\$)	0.00
Assign From	MERIMEN (JASMINE LOK)	Assign Date	14/02/2018

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	30/01/2018	Inspection Date
Survey held at	-	

5a. Remarks

<p>A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.</p> <p>B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.</p> <p>C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.</p>
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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	31/01/2018 17:49
Date Of Accident	30/01/2018 17:50
Exact Location Of Accident	UPPER THOMSON RD TOWARDS SEMBAWANG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC9745K
Insured/Policyholder	
Name Of Registered Owner	SIEMENS PTE LTD
Co Reg No	199605166D
Email Address	BENNY.CHUA@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-97774859

Vehicle Particulars

Manufacturer	CITROEN
Model	BERLINGO 1.6L
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	BVFCSB0006801712
Cover Note Number	NA

Driver

Name of Driver	CHUA KIAN HUA
NRIC No	S6846665B
Date Of Birth	08/12/1968
Occupation	OUTDOOR
Date Of Driving Pass	11/11/1992
Driving Experience	25 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97774859
Fax Number	
Contact Number	
EMail Address	BENNY.CHUA@GMAIL.COM

Address	HDB PUNGGOL, 205A PUNGGOL FIELD #10-360
Postcode	821205
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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

PLEASE REFER TO THE POLICE REPORT T20180130/2155 : On the 30/01/2018 at about 1750hrs, I was driving the company van, GBC9745K along Upper Thomson Road towards Sembawang and it was heavy traffic along the said road. After the junction of Yio Chu Kang road, my vehicle came to a stop as there was a traffic jam ahead. As my vehicle was about to move off, I suddenly felt an impact coming from the rear of my van. I made a check on my rear view mirror and notice there is a car, SGX7874P which was behind me has hit against the rear of my van. I then made a further checked and it was actually a chain collision. A bus, CB7000H which was 2 cars away behind me has hit this car, SBQ50S and the impact made the car to move forward and hit against this car, SGX7874P till the said car hit against my van. The traffic police was called and attended to the incident. One of the passenger from this vehicle SBQ50S was conveyed by the ambulance as the said passenger suffered an injury. That's all.

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	SGX7874P
Vehicle Make/Model/Colour	HYUNDAI / HD AVANTE 1.6 A
Details Of Properties	NA
Vehicle Category	PRIVATE CAR
Name of Driver	CHONG
NRIC/Passport Number	
Contact Number	96752714
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SBQ50S
Vehicle Make/Model/Colour	BMW / 730LI AT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE
NRIC/Passport Number	
Contact Number	98489116
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	CB7000H
Vehicle Make/Model/Colour	MITSUBISHI / ROSA BE637
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHIN
NRIC/Passport Number	
Contact Number	94893808
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	UNKNOWN PASSENGER
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SBQ50S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of 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 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.
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.

1522 pm
31/1/18

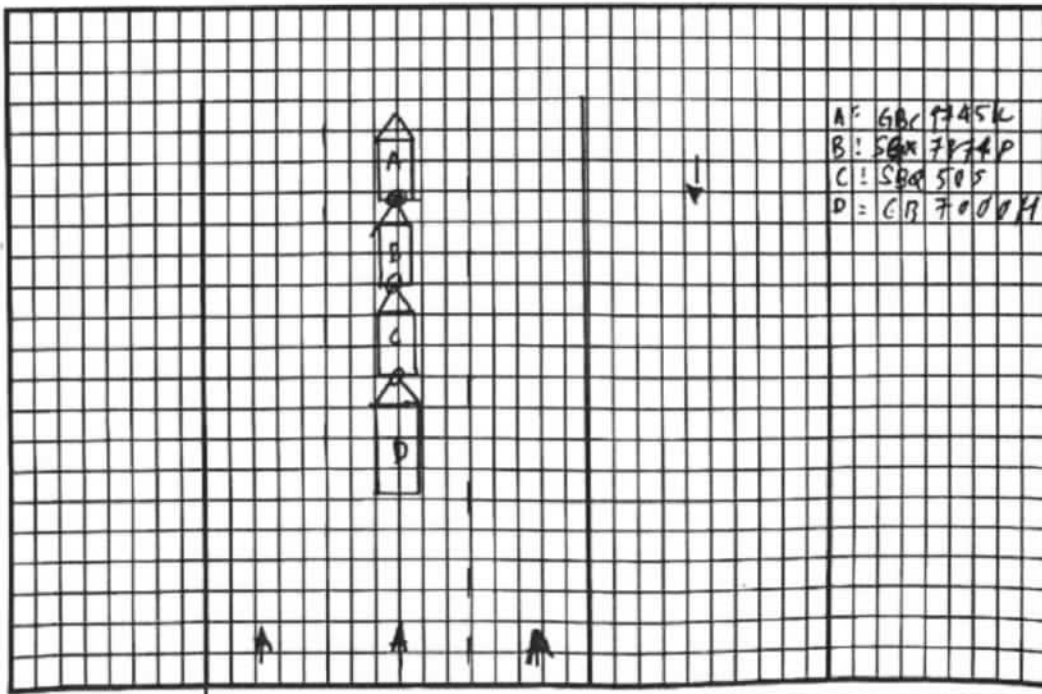
VERIFIED BY AJAX MARS
REPORTING OFFICER
THOMAS NG CHIN CHUN

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel

Sketch Plan



Common Statement

ACCIDENT STATEMENT (2000 characters)

PLEASE REFER TO THE POLICE REPORT.

Taxi Voucher No.:

Are you claiming your own insurance
policy for the repair of your vehicle?

No, Reporting only

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
NG CHIN CHUN

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

31 January 2018 at 3:30 PM

Date/Time:

31 January 2018 at 3:30 PM

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180130/2155

1 of 4

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20180130/2155

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/01/2018 20:19	Vide Report No.: F/20180130/0245	Station Diary No.: 157
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Informant's Particulars

Name of Informant: CHUA KIAN HUA			Address: APT BLK 205A PUNGGOL FIELD #10-360 SINGAPORE 821205	
ID Type / ID No.: NRIC NO / S6846665B			Contact No.: Home/Office:	Mobile: 97774859
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 49	Date of Birth: 08/12/1968	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: SERVICE ENGINEER			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/01/2018 17:50	Type of Location: Straight Road
Location: Along Road 1 UPPER THOMSON ROAD UPP THOMSON RD TWDS SEMBAWANG , AFTER YIO CHU KANG JUNCTION, OPP MEADOWS AT PIERCE CONDOMINIUM				
Weather: Drizzling	Road Surface: Wet		Road Speed Limit:	
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head On	Anyone conveyed by ambulance: Yes			

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
CB7000H	Bus/Coach/Minibus	MITSUBISHI	ROSA BE637	Multi-Colored		0
GBC9745K	Van	CITROEN	BERLINGO 1.6L EHDI ETG6	White		0
SBQ50S	Car	BMW	730LI AT ABS D/AB 2WD 4DR NAV HID SR	Silver		1

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999



T/20180130/2155

2 of 4

Report No. T/20180130/2155

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SGX7874P	Car	HYUNDAI	HD AVANTE 1.6 A S/R	Grey		1

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	Mr Chin			ID No.	NIL
Related Vehicle	CB7000H (Bus/Coach/Minibus)			Contact No.	94893808
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL			Date Discharge	NIL
No. of Days granted Medical Leave	NIL			Degree of Injury	NIL
Driver					
Name	CHUA KIAN HUA			ID No.	S6846665B
Related Vehicle	GBC9745K (Van)			Contact No.	97774859
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL			Date Discharge	NIL
No. of Days granted Medical Leave	NIL			Degree of Injury	NIL
Driver					
Name	Mr Lee			ID No.	NIL
Related Vehicle	SBQ50S (Car)			Contact No.	98489116
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL			Date Discharge	NIL
No. of Days granted Medical Leave	NIL			Degree of Injury	NIL

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180130/2155

3 of 4

Report No. T/20180130/2155

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

CONTINUATION OF REPORT

Driver:			
Name	Mr Chong	ID No.	NIL
Related Vehicle	SGX7874P (Car)	Contact No.	96752714
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 30/01/2018 at about 1750hrs, I was driving the company van, GBC9745K along Upper Thomson Road towards Sembawang and it was heavy traffic along the said road. After the junction of Yio Chu Kang road, my vehicle came to a stop as there was a traffic jam ahead. As my vehicle was about to move off, I suddenly felt an impact coming from the rear of my van. I made a check on my rear view mirror and notice there is a car, SGX7874P which was behind me has hit against the rear of my van. I then made a further checked and it was actually a chain collision. A bus, CB7000H which was 2 cars away behind me as hit this car, SBQ50S and the impact made the car to move forward and hit against this car, SGX7874P till the said car hit against my van. The traffic police was called and attended to the incident. One of the passenger from this vehicle SBQ50S was conveyed by the ambulance as the said passenger suffered an injury. That's all

POLICE REPORT

**SINGAPORE
POLICE FORCE**

T/20180130/2155

4 of 4

Report No. T/20180130/2155

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

F /

Sgt 2 MUHAMMAD FAIRUZ ZAMEEN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

30/01/2018 20:19

Officer In Charge Of Case:

TP / GIT /

SI THABAGESH JEYATHESH

Contact No.: 65476232

Classification Of Case:

SN 035

Authentication Stamp
NP168



Signature:

Singapore Police Force

Meilin

From: Ong, Connie <connie.ong.ext@siemens.com>
Sent: Thursday, 8 February, 2018 8:10 PM
To: meilin@ajaxmars.com
Cc: Chua, Benny; Johar, Juseri
Subject: RE: GIA Report - GBC9745K
Attachments: GIA REPORT-GBC9745K.PDF

Dear Mei Lin,

We refer to the attached GIA report filed on 31st Jan 2018.

Please assist to file the report for 3rd party claim.

Currently, the vehicle has been inspected by the surveyor and is waiting for further advise.

Kindly let us know if we need to submit any document or requirements for sending the vehicle to our Authorized workshop for repair.

Please let me know if you required any clarification.

Thank you & Best regards,
Connie Ong

Siemens Pte Ltd
RC-SG BT CDC SSP
60 MacPherson Road
Singapore 348615, Singapore
Tel: +65 6494 5602
<mailto:connie.ong.ext@siemens.com>
www.siemens.com

From: Chua, Benny (RC-SG BT SSP SV FS)
Sent: Friday, February 02, 2018 9:42 AM
To: Ong, Connie (EXT) (SER)
Subject: Fwd: GIA Report - GBC9745K

Sent from my iPhone

Begin forwarded message:

From: "Meilin" <meilin@ajaxmars.com>
To: "Chua, Benny (RC-SG BT SSP SV FS)" <benny.chua@siemens.com>
Subject: GIA Report - GBC9745K

Dear Sir/Madam,

Please find attached file, the GIA Accident Report for your perusal.

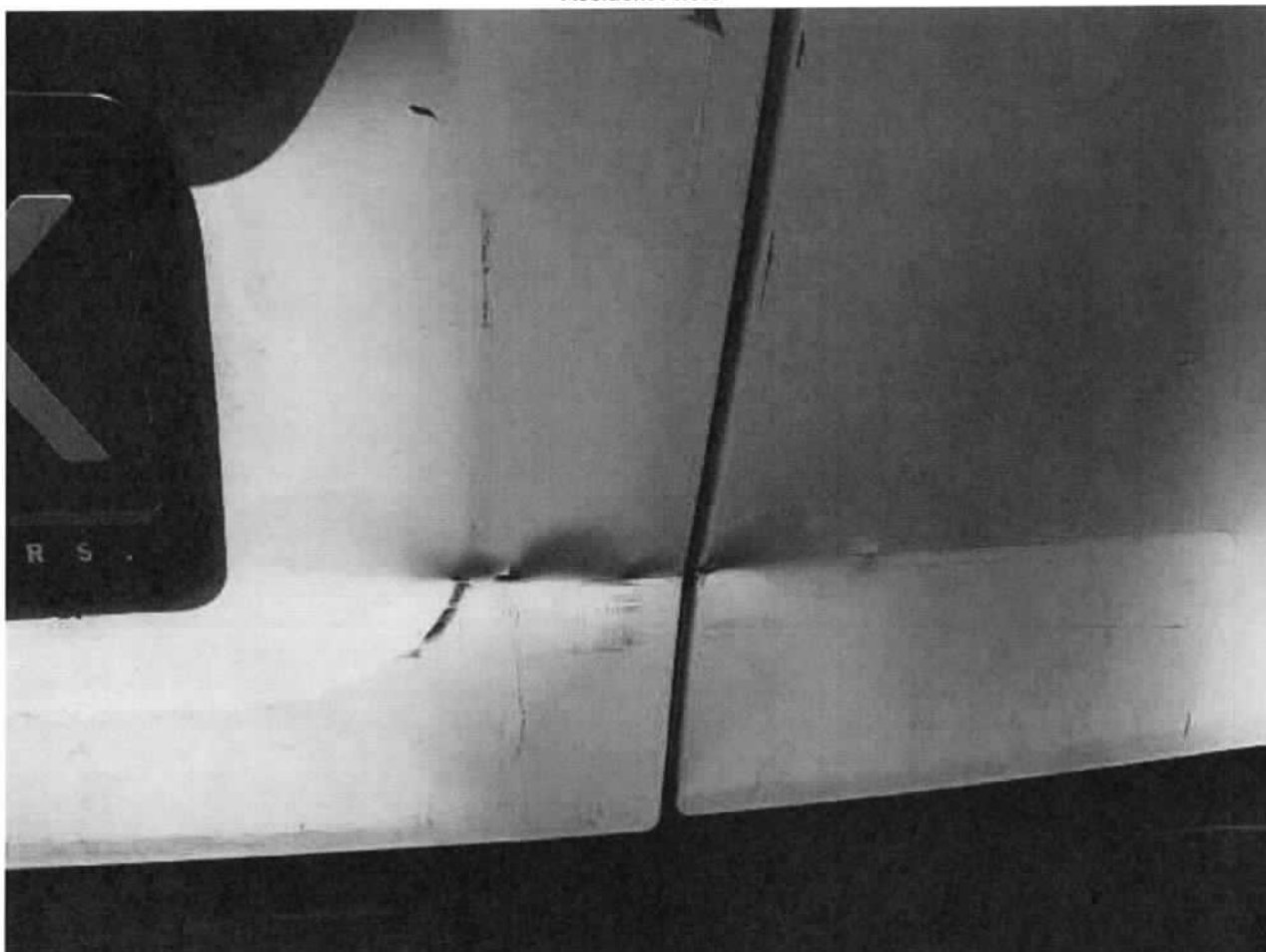
Accident Photo



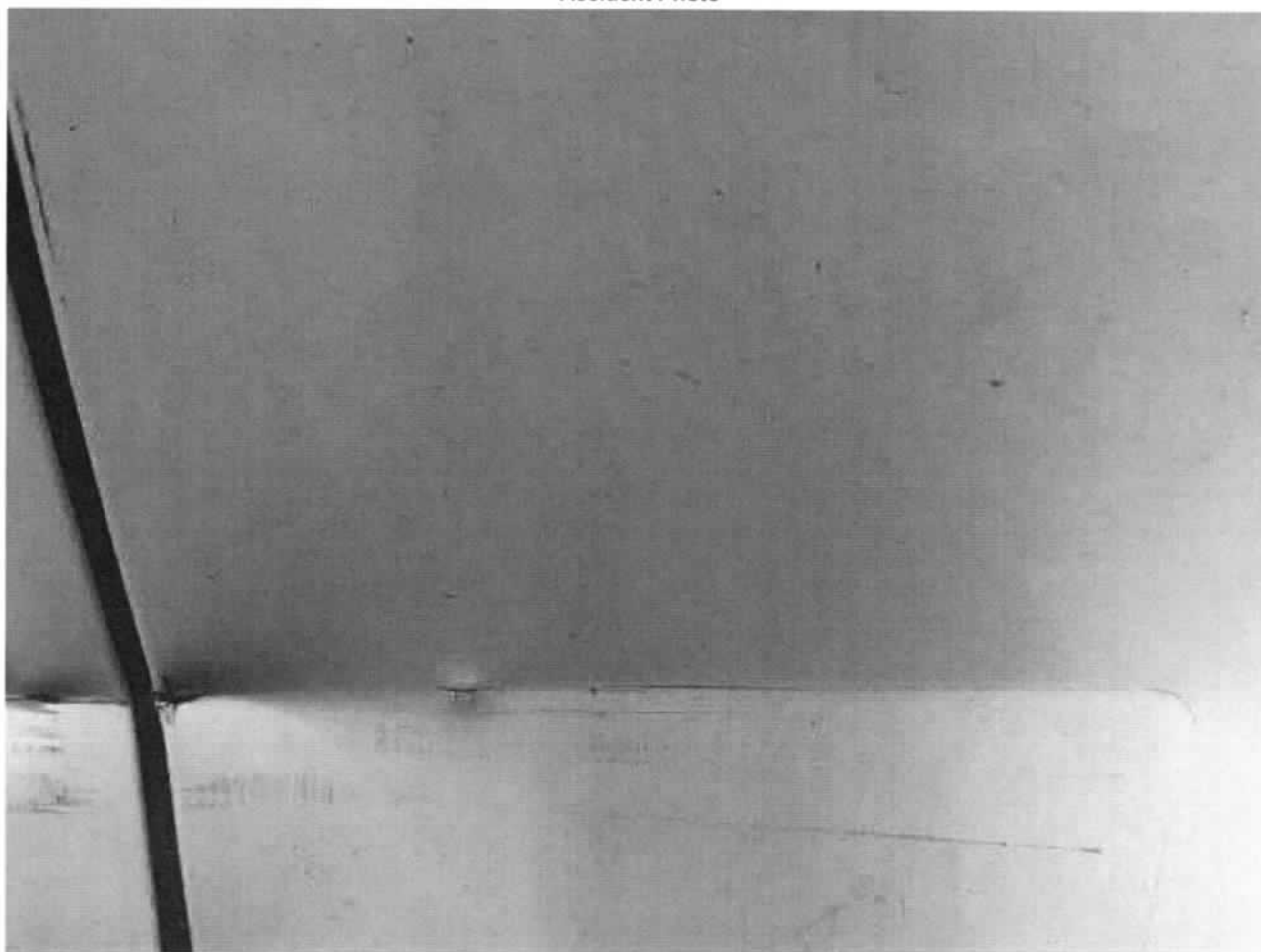
Accident Photo



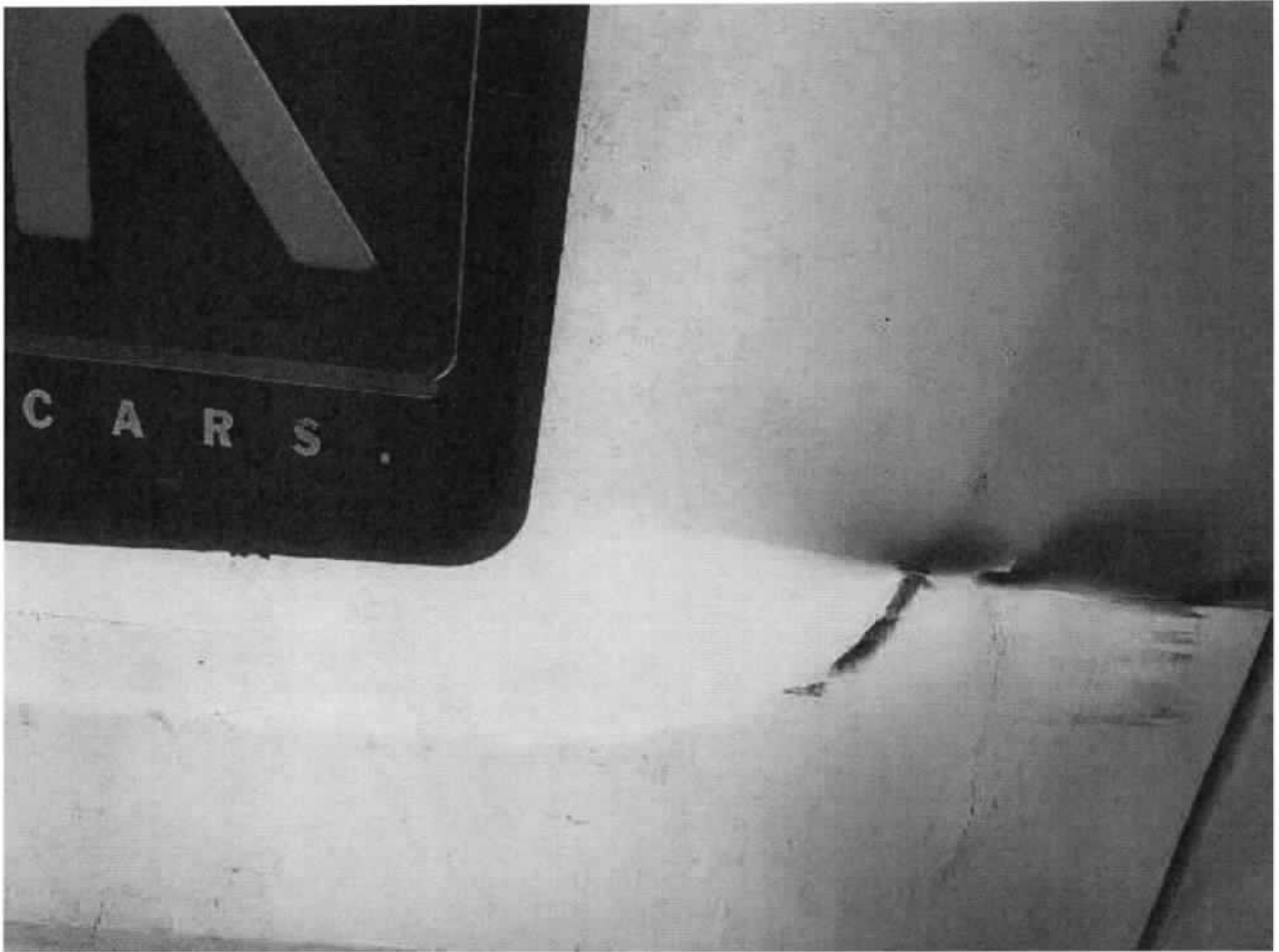
Accident Photo



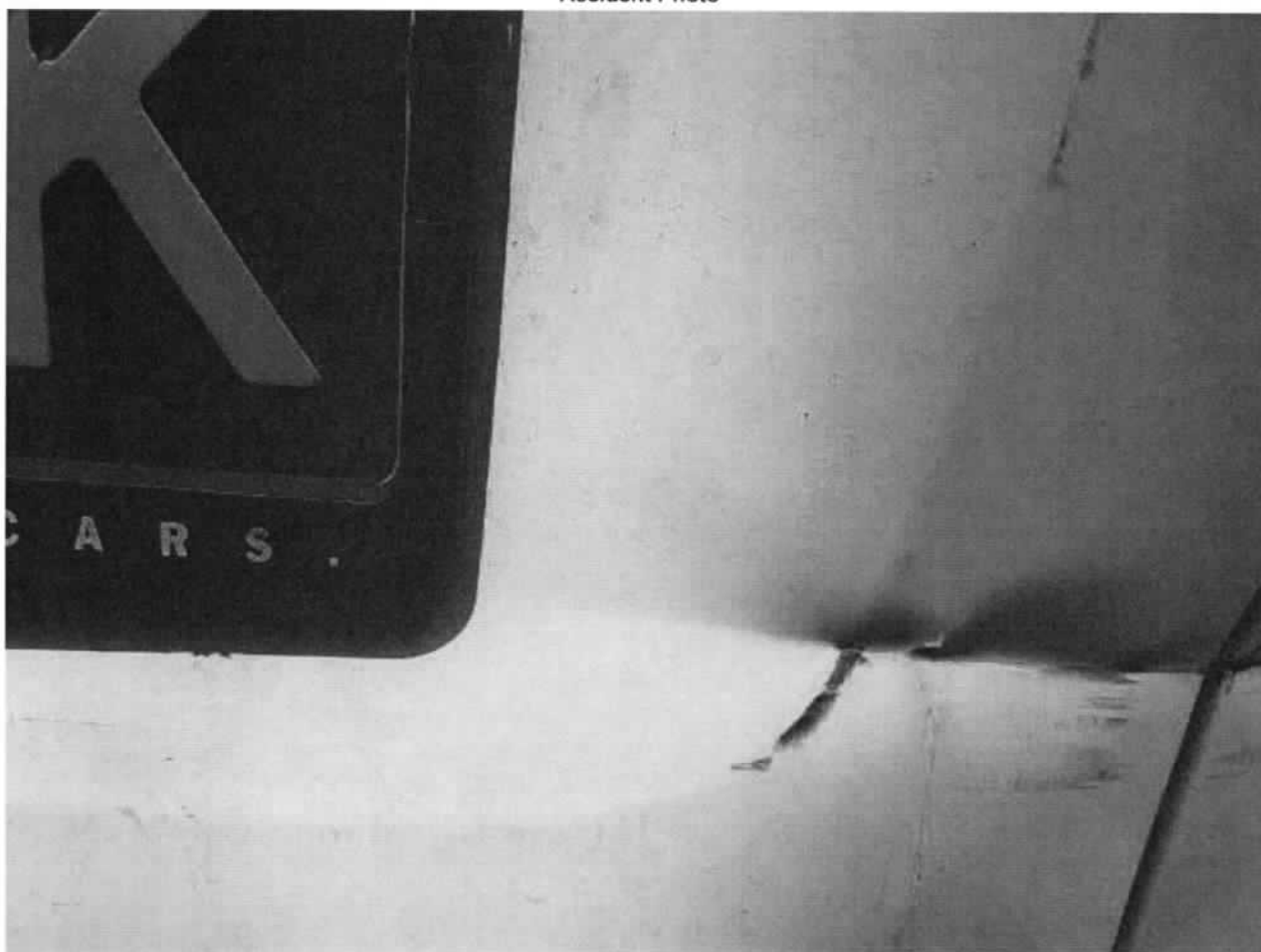
Accident Photo



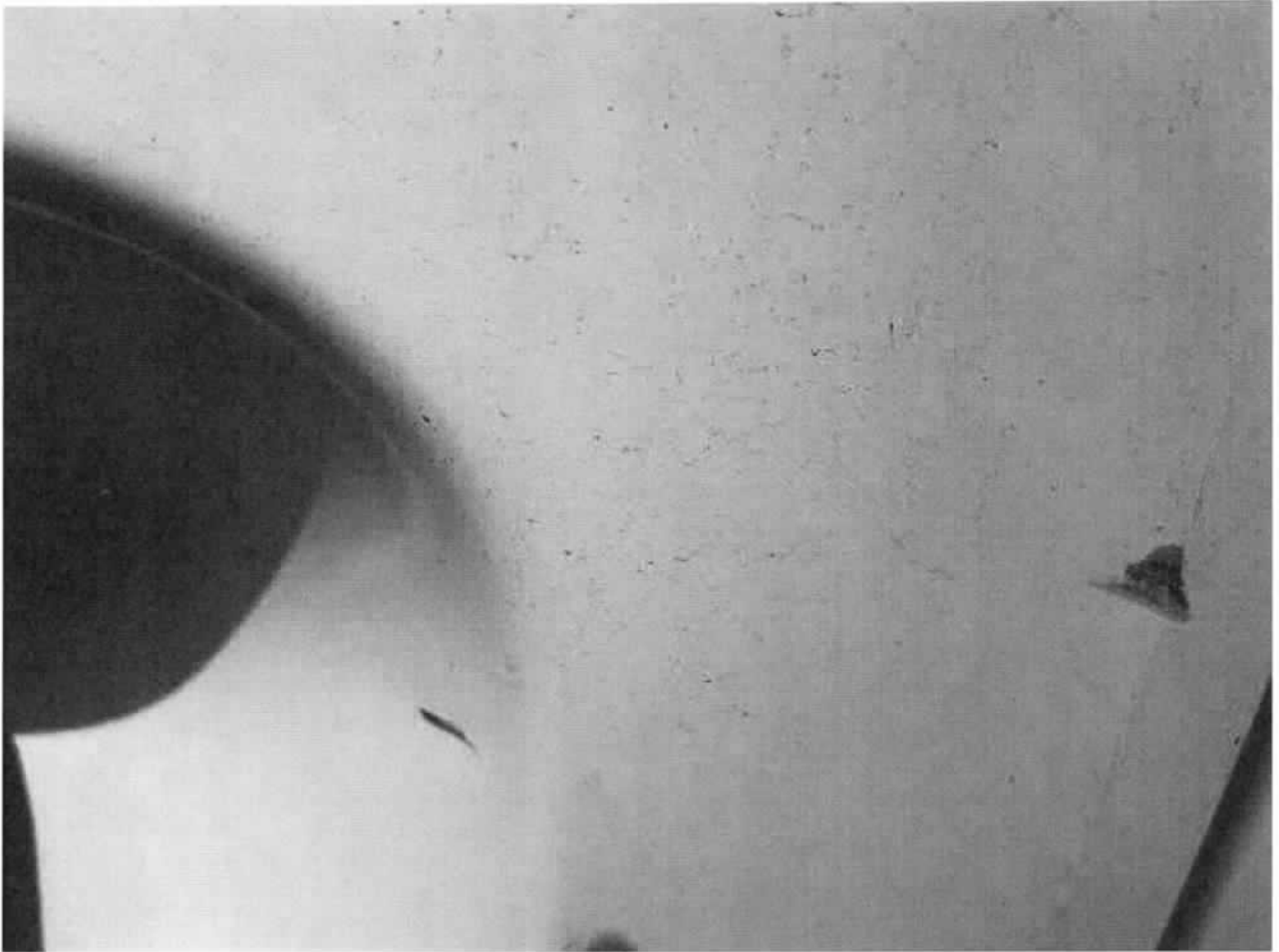
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S6846665B**
Name
CHUA KIAN HUA

Birth Date: **08 Dec 1968**
Issue Date: **25 Oct 2003**

000948473J



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S6846665B**

Name
CHUA KIAN HUA

Race
CHINESE

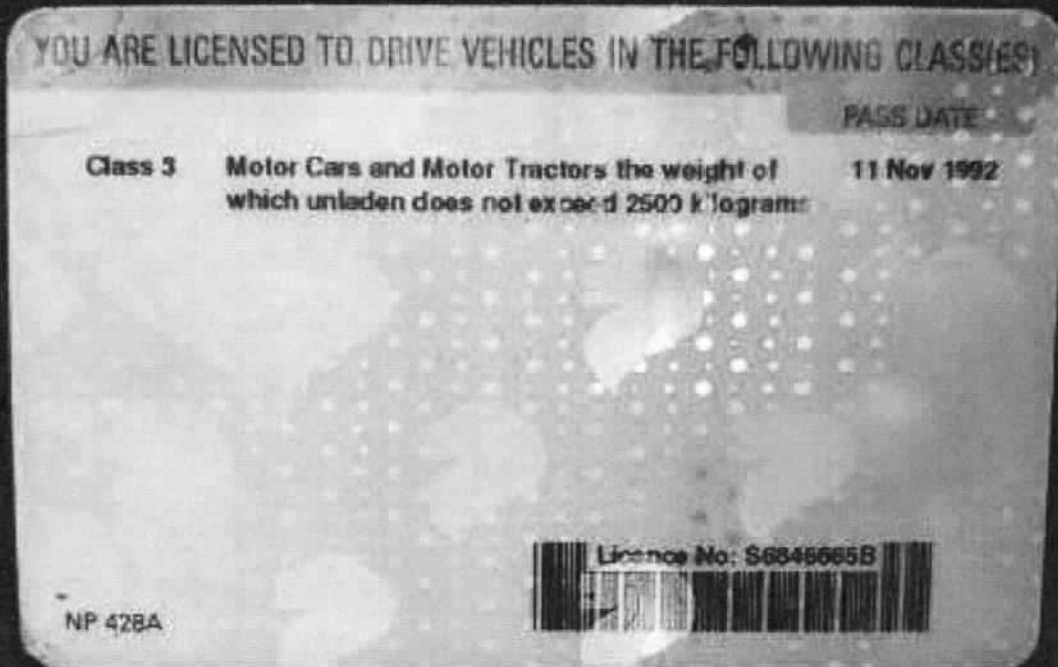
Date of Birth
08-12-1968

Country of Birth
SINGAPORE

Sex
M



Driving License



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MBHH18015571 Vehicle Registration No: GBC9745K
Name(as shown in NRIC) : CHUA KIAN HUA NRIC/FIN/Passport No : S6846665B
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Singapore()
Contact (Tel) : Mobile No. : 97774859
Email Address :
Date of Accident : 30/01/2018 Time of Accident : 17:50hrs
Place of Accident : UPPER THOMSON RD TOWARDS SEMBAWANG
Insurance Company: ALLIED WORLD ASSURANCE COMPANY, LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend to Third Party Claims

Policyholder / Driver's Signature
Date: 13.02.18

Meilin Chai
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: 841119016058
Date: 09 Feb 18

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	31 Jan 2018		13 Feb 2018 16:19 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:	CHUNG VUI LEONG , ID: S7661941G, Tel: +6596752714, Email: NOEMAIL		
Main Claimant:	SIEMENS PTE LTD , Co. Reg. No.: 199605166D		
Vehicle Reg. No.:	GBC9745K	Date of Loss:	30/01/2018 17:00 - :59 [45 Months and 16 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 548266	Policy/Cover Note No.:	S28902443SMA (Comprehensive) Coverage: 22/04/2017 - 21/04/2018
Vehicle Reg. No. (Insured):	SGX7874P	Policy No. (Claimant):	
		Excess:	
Repairer:	Ah Koon Motor (1960) Pte Ltd (HQ) BLK 1001 BUKIT MERAH LANE 3, #01-69, 159718 Bukit Merah - Tel: 62707113		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jasmine Lok Kheng Kwei - 6594 2550]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD RASUL] ... [Imm.Advice due 14/02/2018]		
Driver/Custodian (Insured):	CHUNG VUI LEONG (41 / Male), NRIC: S7661941G, Tel: +6596752714		
Adj Asg. Remarks:	Third Party Pre-Repair Survey		

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

***GBC9745K (548266)**
[SGX7874P]
TP
SIEMENS PTE LTD
Jan 30 2018 5:00PM
[CHUNG VUI LEONG]
Ah Koon Motor (1960) Pte Ltd

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	13/02/18 14:57	Accident Statement From: SC - Reg. No: SGX7874P, Claimant: CHUNG VUI LEONG	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
2	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
3	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
4	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
5	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
6	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
7	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
8	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
9	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
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11	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
12	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
13	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
14	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
15	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
16	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
17	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
18	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
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20	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
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26	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
27	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
28	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
29	30/04/18 11:39	General View	 Load JPG	<input checked="" type="checkbox"/>
30	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
31	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
32	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
33	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
34	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
35	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
36	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
37	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
38	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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40	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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47	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
48	22/05/18 16:20	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
49	22/05/18 16:20	Photographs of Damaged Parts	 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	13/02/18 14:55	TP PRI	 Load PDF	
2	13/02/18 14:57	E-FILE REPORT (GBC9745K) From: SC - Reg. No: SGX7874P, Claimant: CHUNG VUI LEONG	 Load PDF	
3	13/02/18 14:57	E-FILE REPORT (CB7000H) From: SC - Reg. No: SGX7874P, Claimant: CHUNG VUI LEONG	 Load PDF	
4	13/02/18 16:15	TP REJECTION REPLY	 Load PDF	
5	13/02/18 16:18	OUR REJECTION REPLY & NOMINATED LKK TO BE SJE	 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/MSG18003006/R1D3E2

Date: 24/05/2018

REFERENCE

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

Policy No: S28902443SMA

Claimant Vehicle No : GBC9745K

Insured Vehicle No : SGX7874P

Date of Loss: 30/01/2018

Nature of Claim: TP

Claim No: 548266

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: GBC9745K

Make & Model: CITROEN BERLINGO, 1.6 (A)

Engine No: 10JBFR0007546

Reg. Date: 14/04/2014 (Man. Year: 2014)

Chassis No: VF77B9HF8EJ566789

Colour: White

Odometer: 76237 km

Engine Capacity: 1560 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: 195/65 R15

Rear Tyre Size: 195/65 R15

Front Left Side: Yokohama 5 mm

Rear Left Side: Yokohama 5 mm

Front Right Side: Yokohama 5 mm

Rear Right Side: Yokohama 5 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: 13/02/2018

Date Inspected: 22/02/2018 Inspected At:

Ah Koon Motor (1960) Pte Ltd (HQ)

BLK 1001 BUKIT MERAH LANE 3, #01-69

Singapore 159718

Estimated Period of Repair: 0.0 days

Adjuster: MOHD RASUL

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 \$5,000.00 -\$6,000.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 24 May 2018)
Parts:	M1-MPV	CITROEN BERLINGO 1.6 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for GBC9745K)	
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 >

