

22/03/2002

ASS. REC. BY:

REF: CS3/

SM018004192/ Gd3

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person):

Grace Teo

of

SMD

Date/Time:

5/3/18 @ 10.46am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLP1458E

Insured:

GBE 5126M

at Workshop n/s

United SG Automobile

Tel:

6747 4454

of

53 Ubi Ave 1 # 01-56

Policy No:

Claim No:

CMTD1800944/THE

Sum Insured:

Excess:

Make of Veh:

D.O.A.

28/02/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS

lwp

H.O.D. Endorsement:

Date/Time:

12.23pm 5/3/18

Person Contacted:

Pam

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

SLP1458F - NA/CTI18003944/h4

D.O.A. 28/2/18

GBE 5126M - NA/CTI18003944/h4

D.O.A. 28/2/18

Dismantle - 7/3/2018

After repair - 13/3/2018



## Nivitha (LKK Auto)

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**From:** Teo, Grace <grace.teo@sompo.com.sg>  
**Sent:** Monday, 5 March 2018 10:46 AM  
**To:** Jerone; admin-d@lkkauto.com; assignments@lkkauto.com  
**Cc:** Choo, Thelma; Henry, Irene James  
**Subject:** CMTD1800944/THE - ACCIDENT INVOLVING GBE5126M & SLP1458E ON 28.02.18  
**Attachments:** UNITED.pdf

Our Reference : CMTD1800944/THE  
Your Reference: SLP1458E (Jr)

**Without Prejudice**

Date: 5<sup>th</sup> March 2018

**Attention:**  
**M/S CHIA S ARUL LLC**

Dear Jerone,

**ACCIDENT INVOLVING GBE5126M & SLP1458E ON 28.02.18**

We refer to your reply dated 05/03/2018.

We do not agree to your list of surveyors.

As such, we will be appointing our motor surveyor, **LKK AUTO** to conduct the pre-repair survey of your client's vehicle.

The pre-repair survey will include a survey of the vehicle when its damaged parts are being dismantled prior to the commencement of repairs.

We would like our motor surveyor to conduct a post repair inspection once your client's vehicle has been repaired.

The survey is conducted on a without Prejudice basis and without any admission of liability.

Yours faithfully,

Best Regards  
**Grace Teo**  
Claims Division  
D: 6329 5170 | T: 6461 6555 | F: 6221 3147



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**A Century of Trust**

**Sompo Insurance Singapore Pte. Ltd.**

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

**Website:** [www.sompo.com.sg](http://www.sompo.com.sg) | **Facebook:** [www.facebook.com/SompoSG](https://www.facebook.com/SompoSG)

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**From:** Jerone [mailto:jerone@chiaarul.com]

**Sent:** Monday, March 05, 2018 10:30 AM

**To:** Teo, Grace

**Cc:** Choo, Thelma

**Subject:** RE: CMTD1800944/THE - ACCIDENT INVOLVING GBE5126M & SLP1458E ON 28.02.18

Dear Grace,

We thank you for your email below.

Kindly be informed that our client is not agreeable to your list of surveyors and we hereby propose the following:

<u>Name of Surveyor</u>	<u>Company</u>
Andrew How	Prominent Appraiser Services
Winson Goh	WG Appraisal Services

Please feel free to contact us should you have any queries thereof.

Yours faithfully,

**Mr. Jerone Lee**

M/s Chia S Arul LLC

151 Chin Swee Road

#03-09 Manhattan House

Singapore 169876

Tel: (65) 6733 4647 Fax: (65) 6733 8183

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**From:** Teo, Grace [mailto:grace.teo@sompo.com.sg]

**Sent:** Friday, March 2, 2018 3:21 PM

**To:** [info@chiaarul.com](mailto:info@chiaarul.com)

**Cc:** Choo, Thelma <thelma.choo@sompo.com.sg>

**Subject:** CMTD1800944/THE - ACCIDENT INVOLVING GBE5126M & SLP1458E ON 28.02.18

Our Reference : CMTD1800944/THE

Your Reference: SLP1458E (Jr)

Date: 2<sup>nd</sup> March 2018

**Without Prejudice**  
**EMAIL ONLY**

**Attention:**

**M/S CHIA S ARUL LLC**

Dear Sir/Madam,

**ACCIDENT INVOLVING GBE5126M & SLP1458E ON 28.02.18**

We refer to your Notice of Accident dated 01/03/2018.

Please be informed that Thelma Choo the handler of this case.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert.

**Pre-Repair Survey**

	Motor Surveyor	Surveyor	Selection (Indicate as tick)
1	Raleigh Services	Andrew Ow Yong	
		Vincent Ng	
2	LKK Auto Consultants	Kenneth Kong (North area)	
		Marcus Chua (East area)	
		Mohd Rasul (West area)	
		Mohd Taufikh (West area)	
3	Priority Services	Jimmy Lee	
		Lawrence Ng	
		Jeffery Ong	
4	JP Knights Adjusters & Surveyors	Jason Lek	
5	In House surveyor	Teo See Ling	

Please let us know within **two (2) working days** whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Best Regards

**Grace Teo**

Claims Division

D: 6329 5170 | T: 6461 6555 | F: 6221 3147



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**CHIA S ARUL LLC**  
ADVOCATES & SOLICITORS  
UEN 201330709H

ARULCHELVAN S

Our Ref: SLP 1458E (Jr)

Your Ref:

1 March 2018

**SOMPO INSURANCE SINGAPORE PTE LTD**  
50 Raffles Place  
#05-01/06 Singapore Land Tower  
Singapore 048623

**BY FACSIMILE ONLY**  
Fax: 6221 3302

Dear Sir,

RE: PROPERTY DAMAGE CLAIM  
CLAIMANT : WONG HO KI  
ACCIDENT INVOLVING SLP 1458E & GBE 5126M ALONG BUKIT BATOK  
EAST AVENUE 3 ON 28 FEBRUARY 2018

1. We act for WONG HO KI, the owner of motor vehicle no. SLP 1458E, which was involved in the aforesaid accident.
2. We hereby give you **NOTICE** that we are claiming against your insured motor vehicle no. GBE 5126M for damages, costs and disbursements as a result of your insured driver's negligence.
3. Kindly let us know if you wish to conduct a pre-repair inspection on our client's motor vehicle at M/s United SG Automobile Pte Ltd at 53 Ubi Avenue 1 #01 - 56 Paya Ubi Industrial Park Singapore 408934 and kindly arrange with Vicky at 6747 4454
4. If we do not hear from you within the next **two (2) working days**, we shall advise our client to proceed with their own inspection and repairs.
5. Please reply either by fax at 6733 8183 or by email to [jerone@chiaarul.com](mailto:jerone@chiaarul.com).

Yours faithfully,

**MR ARULCHELVAN S**  
cc: Client (By Email)

Sampo Insurance Singapore Pte. Ltd.	
Chennai	
07 MAR 2018	

## 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	01/03/2018 10:37
Date Of Accident	28/02/2018 16:00
Exact Location Of Accident	BUKIT BATOK EAST AVE 3
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP1458E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MR WONG HO KI
NRIC No	S2619873I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81814530
Alternative Phone No	OFFICE-81814530

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA 2.4X 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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3052681700
Cover Note Number	-

### Driver

Name of Driver	MR WONG HO KI
NRIC No	S2619873I
Date Of Birth	19/11/1967
Occupation	INDOOR
Date Of Driving Pass	03/10/1991
Driving Experience	26 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81814530
Fax Number	
Contact Number	OFFICE-81814530
Email Address	NOEMAIL



Address	BLK 470 TAMPINES ST 44 #02-186
Postcode	520470
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
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

PLEASE REFER TO ATTACHED STATEMENT.

### 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	GBE5126M
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)	

### DETAILS OF INJURED PERSON 1

Name	WONG HO KI
Approximate Age	

Injuries Sustain

BODY

Injured person in which vehicle?

SLP1458E

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

## Accident Sketch Plan

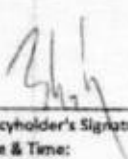
### SKETCH PLAN

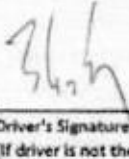
#### IMPORTANT NOTICE


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.
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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.

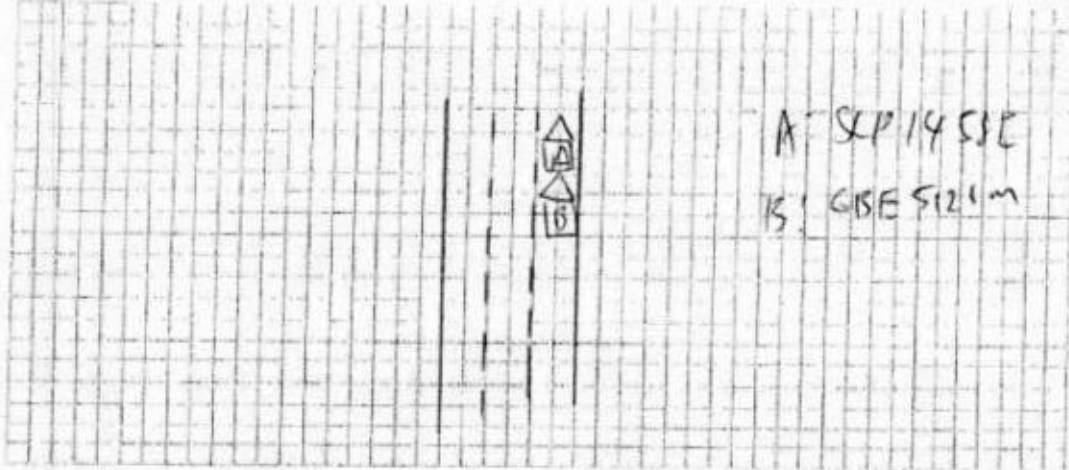
  
Policyholder's Signature  
Date & Time:

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

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

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Bukit Batok East Ave 3. The vehicle in front slowed down & stop. I then slow down & stop. Suddenly, I felt a huge impact from the rear. I got down & realised vehicle B (CBE 5126m) hit me, the rear portion of my vehicle.

## 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:

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

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	9873I
Vehicle Details	
Vehicle No.:	SLP1458E
Vehicle to be Exported:	No
Intended De-registration Date:	04 Apr 2018
Vehicle Make:	TOYOTA
Vehicle Model:	ESTIMA 2.4X A
Primary Colour:	Gold
Manufacturing Year:	2008
Engine No.:	2AZF180808
Chassis No.:	ACR507067071
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$26,861.00
Original Registration Date:	01 Sep 2008
First Registration Date:	01 Sep 2008
Transfer Count:	2
Actual ARF Paid:	\$16,845.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Aug 2018
PARF Rebate Amount:	\$8,422.00
Intended COE Rebate Details	
COE Expiry Date:	31 Aug 2018
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$11,216.00
COE Rebate Amount:	\$563.00
<b>Total Rebate Amount:</b>	<b>\$8,985.00</b>

The information contained herein is correct as at 04 Apr 2018

OK


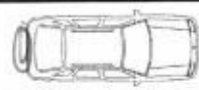


**LKK Auto Consultants Pte Ltd**  
51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

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

Page No.: 1 of 1

PRE-REPAIR INSPECTION REPORT			
SOMPO INSURANCE SINGAPORE PL		Ref: CS3/SMO18004192/Gd3s2	
50 RAFFLES PLACE #05-01/06		Date: 06-04-2018	
SINGAPORE LAND TOWERS SINGAPORE 048623		Code: SMO	
<b>1. Policy Particulars :- (THIRD PARTY CLAIM)</b>			
Insured Veh.	GBE 5126M	Veh. Inspected	SLP 1458E
Policy No.		Coverage (\$)	0.00
Claim No.	CMTD1800944/THE	Excess (\$)	0.00
Assign From	GRACE TEO	Assign Date	05/03/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA ESTIMA 2.4	c.c	2362
Engine No.	HIDDEN	Year of Reg.	2008
Chassis No.	ACR507067071	Colour	SILVER
Odometer	150291 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	215/60R16	MICHELIN	6 mm
L/H Front Tyre	215/60R16	MICHELIN	6 mm
R/H Rear Tyre	215/60R16	MICHELIN	6 mm
L/H Rear Tyre	215/60R16	MICHELIN	6 mm
<b>4. Description of Damages</b>			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
<b>5. General Information</b>			
Accident Date	28/02/2018	Inspect Date / Time	06/03/2018 ( 05:00 PM )
Survey held at	UNITED SG AUTOMOBILE 53 UBI AVE 1 #01-56 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934		
<b>5a. Remarks</b>			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$5,500-\$6,800.00			
<b>5b. Estimate Days of Repair</b>			
ESTIMATED NORMAL PERIOD FOR REPAIR:		6 Working Days	

Report Ref No: CS3/SMO18004192/Gd3s2

Inspected By



XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MinstAEE, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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