

22/02/2002

ASS. REC. BY:

REF: CS/EG18004312/ Dvd3b

Special Instruction:

Surveyor: Bryan

ASSIGNMENT (Office)

From (Person): Yee Pei Li

of

EGTDate/Time: 6/3/18 @ 11:42am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SGH999T

Insured:

YP 2009 H

at Workshop m/s

Team Work

Tel:

65684501

of

209 Pandan Gardens

Policy No:

Claim No:

DSMcv1800447

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

02/03/2018

CA / REV / REP. / REV 24 HRS

lwp

H.O.D. Endorsement:

Date/Time: 211pm @ 6/3/18

Person Contacted:

Mr. Tay

Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>SGH 999T - cv110CB08022229 / SKg</u>
	<u>YP 2009 H - x</u>
<u>15/3/18 3:25pm</u>	<u>Received email from Jian Ye will cancel this case</u>
	<u>Please be informed change of workshop from cycle &amp; carriage to Teamwork Garage</u>

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_  
 Insured: \_\_\_\_\_

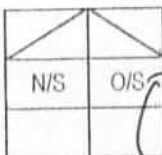
Policy No. \_\_\_\_\_  
 Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 3 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SGH 999 T Yr Regn: 2016, Sept

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

Truck / Trailer or

Make: Kia ~~Cerato~~ Forte K3 1591

Colour: Grey A/C: Insured / Std / NI / NA

Sp. Reading: 30456 T/Radio: Insured / Std / NI / NA

Eng/No: G4F GGH658678

C/No: KNAF2411MH5668615

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/45 R17

R: 11

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

TOYO / YOKO or Nexen

Front

Rear

R/Bal. S mm R/Bal. S mm

L/Bal. S mm L/Bal. S mm

D.O.A. 02/03/2018 D.O.I. 19/03/2018

Survey held at Teamwork Page ubi

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

O/S Rev

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Ergo YP2009H

29/04/19 Johnnie 2/S 1850/- with 3 dgs 7 r/v (Red 5133.12, 7419)

29/04/19 Email preli revised to ERGO

RECEIVED 29 APR 2019

Date/Time, File Pass to?



: Preli. Report

1)



: Final Report

Date/Time, File Return to?

2) 29/04 - typst

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee:



: Site Insp (\$)



: Interview (\$)



: Tech. Invs (\$)



: Weekend (\$)

Report Format :

TP

Lump Sum / I.B.I. (\$)

1850/2

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

250

290

## Veron Chen (LKKAUTO)

---

**From:** Veron Chen (LKKAUTO)  
**Sent:** Monday, 29 April 2019 12:49 PM  
**To:** 'Survey Report (ERGO Insurance Pte. Ltd.)'  
**Cc:** SUR  
**Subject:** RE: YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018 (DSMCV1800447)  
**Attachments:** SGH 999T PRELI REVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SGH 999T  
Date of survey: 19/3/2018  
Number of days :3 days

Best Regards,

**Veron Chen** | Case Handler

**LKK Auto Consultants Pte Ltd**

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

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

---

**From:** Admin-D (LKKAUTO)  
**Sent:** Monday, 19 March 2018 11:19 AM  
**To:** 'Survey Report (ERGO Insurance Pte. Ltd.)' <Survey.Report@ergo.com.sg>; assignments <assignments@lkkauto.com>  
**Cc:** SUR <sur@lkkauto.com>  
**Subject:** RE: YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018 (DSMCV1800447)

Dear Sir/Mdm,

Thank you for the assignment.

BEST REGARDS,

**G.Nivitha** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6841-1972 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

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

---

**From:** Survey Report (ERGO Insurance Pte. Ltd.) [<mailto:Survey.Report@ergo.com.sg>]  
**Sent:** Monday, 19 March 2018 10:24 AM  
**To:** 'admin-d@lkkauto.com' <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>  
**Subject:** OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018 (DSMCV1800447)

Dear Catherine,

Please be informed there's a change of workshop from Cycle & Carriage KIA Pte Ltd to **TEAMWORK GARAGE PTE LTD @ 53 UBI AVENUE 1 #01-24 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934**

Kindly arrange survey at TEAMWORK GARAGE, PTC – DARREN NG @ 6844 2475

Rgds  
Pei Li

---

**From:** Survey Report (ERGO Insurance Pte. Ltd.)  
**Sent:** Tuesday, 6 March, 2018 11:42 AM  
**To:** 'admin-d@lkkauto.com'  
**Subject:** OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018

Dear Catherine,

In compliance with "State Courts Practice Directions Amendment No.1 of 2016" in regards to the Pre Repair Survey, both TP repairer and ERGO Insurance Pte Ltd have agreed on your company **LKK AUTO CONSULTANTS PTE LTD** to be the "Single Joint Expert".

Please assist to conduct this survey from **CYCLE & CARRIAGE KIA PTE LTD,**

ADDRESS : 209 PANDAN GARDENS  
SINGAPORE 609339

PERSON TO CONTACT : TAY JIAN YE @ 6568 4501

ERGO OFFICER-IN-CHARGE : STEVE LIM

***Note: To survey on without prejudice basis. Please note that our insured/insured driver has yet to e-file their SAS for this accident. Obtain estimate and advise the consistency of damages to third party vehicle that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.***

Please fill up the necessary on ERGO PRS Form from workshop and return to us together on your update of the survey status via [Survey.Report@ergo.com.sg](mailto:Survey.Report@ergo.com.sg).

Attached are estimate and TP's SAS (note: reports not to be released to any Third Party).

Kindly acknowledge receipt of this email.

Thank you.

**Yee Pei Li**

Claims Assistant (Motor)  
ERGO Insurance Pte. Ltd.  
5 Temasek Boulevard  
#04-01 Suntec Tower Five  
Singapore 038985  
Tel.: 65 6829 9199 DID: 65 6829 9194  
Website: [www.ergo.com.sg](http://www.ergo.com.sg)

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: YP 2009H/SE/pl

Our ref: CS/EGH18004312/Dvd3

DATE: 29/4/2019

The Motor Claims Department  
M/s ERGO INSURANCE PTE LTD

Dear Sir/Madam,

**PRELIMINARY ADVICE OF VEHICLE NO.**

**SGH 999T**

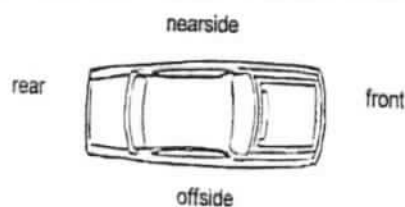
We thank you for your instruction on 6/3/2018

Please be informed that we had conducted the inspection of the above mentioned vehicle on 19/03/2018 at the premises of M/s TEAMWORK GARAGE PTE LTD and have the following to report:-

Workshop Estimate Amount	: S\$6,983.12
Revised Estimate Amount	: S\$1,850.00 (LUMP SUM)
"Check" Items Amount	: S\$
Market Value	: S\$
LTA Reimbursement Value	: S\$
Nett Value	: S\$

Description of Damage:

The vehicle sustained damages at the  
o/s rear portion



Comments/Present Status:

Damages Consistent

Yours faithfully,

Bryan Ang  
Motor Surveyor / Investigator

## Nivitha (LKK Auto)

---

**From:** Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>  
**Sent:** Monday, 19 March 2018 10:24 AM  
**To:** 'admin-d@lkkauto.com'  
**Subject:** OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018 (DSMCV1800447)  
**Attachments:** RE: (DSMCV1800447) PRE-REPAIR INSPECTION FOR SGH999T // OUR REF: 1803-14 (18.1 KB); RE: TP CLAIM SGH999T AGAINST YOUR INSURE YP2009H (47.7 KB)

Dear Catherine,

Please be informed there's a change of workshop from Cycle & Carriage KIA Pte Ltd to **TEAMWORK GARAGE PTE LTD @ 53 UBI AVENUE 1 #01-24 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934**

Kindly arrange survey at TEAMWORK GARAGE, PTC – DARREN NG @ 6844 2475

Rgds  
Pei Li

---

**From:** Survey Report (ERGO Insurance Pte. Ltd.)  
**Sent:** Tuesday, 6 March, 2018 11:42 AM  
**To:** 'admin-d@lkkauto.com'  
**Subject:** OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018

Dear Catherine,

In compliance with "State Courts Practice Directions Amendment No.1 of 2016" in regards to the Pre Repair Survey, both TP repairer and ERGO Insurance Pte Ltd have agreed on your company **LKK AUTO CONSULTANTS PTE LTD** to be the "Single Joint Expert".

Please assist to conduct this survey from **CYCLE & CARRIAGE KIA PTE LTD**,

ADDRESS : 209 PANDAN GARDENS  
SINGAPORE 609339

PERSON TO CONTACT : TAY JIAN YE @ 6568 4501

ERGO OFFICER-IN-CHARGE : STEVE LIM

***Note: To survey on without prejudice basis. Please note that our insured/insured driver has yet to e-file their SAS for this accident. Obtain estimate and advise the consistency of damages to third party vehicle that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.***

Please fill up the necessary on ERGO PRS Form from workshop and return to us together on your update of the survey status via [Survey.Report@ergo.com.sg](mailto:Survey.Report@ergo.com.sg).

Attached are estimate and TP's SAS (**note: reports not to be released to any Third Party**).

Kindly acknowledge receipt of this email.

Thank you.

**Yee Pei Li**

Claims Assistant (Motor)  
ERGO Insurance Pte. Ltd.  
5 Temasek Boulevard  
#04-01 Suntec Tower Five  
Singapore 038985  
Tel.: 65 6829 9199 DID: 65 6829 9194  
Website: [www.ergo.com.sg](http://www.ergo.com.sg)

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## Catherine Chong (LKK Auto)

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**From:** Tay Jian Ye <jianye.tay@cyclecarriage.com.sg>  
**Sent:** Thursday, 15 March, 2018 3:25 PM  
**To:** Nivitha (LKK Auto)  
**Subject:** RE: OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018

**Importance:** High

Dear Nivitha,

This case will be cancel and close

Tay Jian Ye  
Claim Division Operations  
209 Pandan Gardens  
Singapore 609339



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Cycle & Carriage Singapore • 209 Pandan Gardens, Singapore 609339  
T: +65 6568 4501 • F: +65 6565 1240 • [www.cyclecarriage.com.sg](http://www.cyclecarriage.com.sg)

 A member of the Jardine Cycle & Carriage Group

---

**From:** Nivitha (LKK Auto) [mailto:admin-d@lkkauto.com]  
**Sent:** Tuesday, 6 March, 2018 2:33 PM  
**To:** Tay Jian Ye  
**Subject:** RE: OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018

Dear Mr.Tay,

Noted, with thanks.

BEST REGARDS,

G.Nivitha | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6841-1972 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

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

---

**From:** Tay Jian Ye [mailto:jianye.tay@cyclecarriage.com.sg]  
**Sent:** Tuesday, 6 March 2018 2:30 PM  
**To:** Nivitha (LKK Auto) <admin-d@lkkauto.com>  
**Subject:** RE: OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018

Dear Nivitha,

Is not in the workshop



## Nivitha (LKK Auto)

---

**From:** Tay Jian Ye <jianye.tay@cyclecarriage.com.sg>  
**Sent:** Thursday, 15 March 2018 3:11 PM  
**To:** ERGO Insurance Pte. Ltd. (Claims Department)  
**Cc:** Andre Chow En De; Don Bong Kiong Hua; Coco Lu Ting; Edwin Abcede Caina; Yusof Bin Hashim  
**Subject:** RE: TP CLAIM SGH999T AGAINEST YOUR INSURE YP2009H  
**Importance:** High

Dear Officer in Charge,

My client will cancel this claim .

Thank you

Tay Jian Ye  
Claim Division Operations  
209 Pandan Gardens  
Singapore 609339



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Cycle & Carriage Singapore • 209 Pandan Gardens, Singapore 609339  
T: +65 6568 4501 • F: +65 6565 1240 • [www.cyclecarriage.com.sg](http://www.cyclecarriage.com.sg)

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---

**From:** ERGO Insurance Pte. Ltd. (Claims Department) [mailto:claims@ergo.com.sg]  
**Sent:** Thursday, 8 March, 2018 10:28 AM  
**To:** Tay Jian Ye  
**Cc:** Andre Chow En De; Don Bong Kiong Hua; Coco Lu Ting; Edwin Abcede Caina; Yusof Bin Hashim  
**Subject:** RE: TP CLAIM SGH999T AGAINEST YOUR INSURE YP2009H

Dear Sir,

Our Insured / insured driver has yet to e-file their SAS for this accident. We are therefore not in a position to discuss on liability at this juncture.

OIC is Siti.

Rgds  
Pei Li

---

**From:** Tay Jian Ye [mailto:jianye.tay@cyclecarriage.com.sg]  
**Sent:** Thursday, 8 March, 2018 10:08 AM  
**To:** ERGO Insurance Pte. Ltd. (Claims Department)  
**Cc:** Andre Chow En De; Don Bong Kiong Hua; Coco Lu Ting; Edwin Abcede Caina; Yusof Bin Hashim  
**Subject:** RE: TP CLAIM SGH999T AGAINEST YOUR INSURE YP2009H  
**Importance:** High

Dear officer in charge ,

Can I have the liability ,

Tay Jian Ye  
Claim Division Operations  
209 Pandan Gardens  
Singapore 609339



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T: +65 6568 4501 • F: +65 6565 1240 • [www.cyclecarriage.com.sg](http://www.cyclecarriage.com.sg)

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**From:** ERGO Insurance Pte. Ltd. (Claims Department) [<mailto:claims@ergo.com.sg>]

**Sent:** Tuesday, 6 March, 2018 9:57 AM

**To:** Tay Jian Ye

**Cc:** Andre Chow En De; Don Bong Kiong Hua; Coco Lu Ting; Edwin Abcede Caina; Yusof Bin Hashim

**Subject:** RE: TP CLAIM SGH999T AGAINST YOUR INSURE YP2009H

WITHOUT PREJUDICE

Dear Sirs,

Our Insured / insured driver has yet to e-file their SAS for this accident. We are therefore not in a position to discuss on liability at this juncture.

Please find enclosed surveyor list for your action. Kindly indicate your selection in the box \* upon completion, please email back for our action.

Await reply within 2 working days.

For PRS request, kindly reply via [claims@ergo.com.sg](mailto:claims@ergo.com.sg).

Appreciated your co-operation.

Thank you.

**Yee Pei Li**

Claims Assistant (Motor)  
ERGO Insurance Pte. Ltd.  
5 Temasek Boulevard  
#04-01 Suntec Tower Five  
Singapore 038985  
Tel.: 65 6829 9199 DID: 65 6829 9194  
Website: [www.ergo.com.sg](http://www.ergo.com.sg)

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-----Original Message-----

From: Tay Jian Ye [<mailto:jianye.tay@cyclecarriage.com.sg>]

Sent: Monday, 5 March, 2018 1:14 PM

To: ERGO Insurance Pte. Ltd. (Claims Department)

Cc: Andre Chow En De; Don Bong Kiong Hua; Coco Lu Ting; Edwin Abcede Caina; Yusof Bin Hashim

Subject: TP CLAIM SGH999T AGAINST YOUR INSURE YP2009H

Importance: High

To Officer In charge,

My client who is driving SGH 999T want to claims against YP2009H which was insured by you.

Attach is the SAS report and repair quotation for your reference.

Please let me know the liability

Tay Jian Ye

Claim Division Operations

209 Pandan Gardens

Singapore 609339

Cycle & Carriage Singapore \* 209 Pandan Gardens, Singapore 609339

T: +65 6568 4501 \* F: +65 6565 1240 \* [www.cyclecarriage.com.sg](http://www.cyclecarriage.com.sg)

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## Nivitha (LKK Auto)

---

**From:** Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>  
**Sent:** Tuesday, 6 March 2018 11:42 AM  
**To:** 'admin-d@lkkauto.com'  
**Subject:** OI : YP2009H / TP : SGH999T/LKK / DOA : 02/03/2018  
**Attachments:** SGH999T - ESTIMATE n SAS.pdf; SGH999T - PRS FORM.pdf

Dear Catherine,

In compliance with "State Courts Practice Directions Amendment No.1 of 2016" in regards to the Pre Repair Survey, both TP repairer and ERGO Insurance Pte Ltd have agreed on your company **LKK AUTO CONSULTANTS PTE LTD** to be the "Single Joint Expert".

Please assist to conduct this survey from **CYCLE & CARRIAGE KIA PTE LTD**,

ADDRESS : 209 PANDAN GARDENS  
SINGAPORE 609339

PERSON TO CONTACT : TAY JIAN YE @ 6568 4501

ERGO OFFICER-IN-CHARGE : STEVE LIM

***Note: To survey on without prejudice basis. Please note that our insured/insured driver has yet to e-file their SAS for this accident. Obtain estimate and advise the consistency of damages to third party vehicle that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.***

Please fill up the necessary on ERGO PRS Form from workshop and return to us together on your update of the survey status via [Survey.Report@ergo.com.sg](mailto:Survey.Report@ergo.com.sg).

Attached are estimate and TP's SAS (**note: reports not to be released to any Third Party**).

Kindly acknowledge receipt of this email.

Thank you.

**Yee Pei Li**

Claims Assistant (Motor)  
ERGO Insurance Pte. Ltd.  
5 Temasek Boulevard  
#04-01 Suntec Tower Five  
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Tel.: 65 6829 9199 DID: 65 6829 9194  
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# ERGO

Date: 06.03.2018  
Our Reference: YP 2009H/SE/pl  
Your Reference: SGH 999T

Sent via Fax

or

Email

jianye.tay@cyclecarriage.com.sg

To: CYCLE & CARRIAGE KIA PTE LTD

## Pre-Repair Survey (PRS) Acknowledgement

Vehicle For Inspection: SGH 999T  
Insured's Vehicle: YP 2009H  
Date Of Accident: 02.03.2018

We acknowledge receipt of your request for PRS on: 05.03.2018



In compliance with "State Courts Practice Directions Amendment No.1 of 2016", do select an assessor from the list below and indicate your selection in the box marked \*.

\* LKK

AIS	Automobile Inspection Services Pte Ltd	LBS	L.B.S Auto Consultants Pte Ltd
FTA	FormTeam Consultancy Pte Ltd	LKK	LKK Auto Consultants Pte Ltd
IAS	Infiniti Appraisal Service	PS	Priority Services
JPX	JP Knights Pte Ltd	VAC	Vicom Ltd

- ☐ Your request for inspection does not have your client's cost of repair estimate, kindly forward a copy.
- ☐ Your request for inspection does not have your client's GIA report, kindly forward a copy.
- ☐ We acknowledge your interest for direct settlement, we will assess & revert soon upon receipt of estimate.
- ☒ Our Insured's driver has not reported the accident to us to date.
- ☒ Others: We are therefore not in a position to discuss on liability at this juncture.

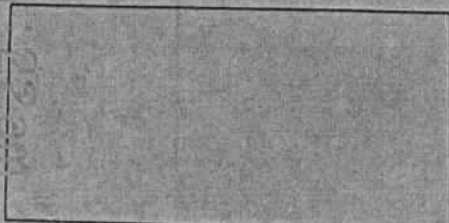
OFFICER-IN-CHARGE - SIT

Prepared by:   
Signature:   
Pei Li 6829 9194 claims@ergo.com.sg  
FAX : 6829 9247

### Assessor use only:

Assignment Date: \_\_\_\_\_  
Assignment Time: \_\_\_\_\_

Remarks:



### Workshop use only:

#### Assessor attended workshop on:

Date: \_\_\_\_\_  
Time: \_\_\_\_\_  
Inspector: \_\_\_\_\_

☐ Vehicle not available at the appointed date and time.

Kindly acknowledge our Assessor presence for the above job.

Workshop Acknowledgement & Stamp.

Note: Our inspection is on a without admission to liability basis.

## 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 05/03/2018 09:36  
Date Of Accident 02/03/2018 21:40  
Exact Location Of Accident VEERASAMY ROAD  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SGH999T  
**Insured/Policyholder**  
Name Of Registered Owner LEE CHEE FULL  
NRIC No S8611510G  
Email Address WINLOC@GMAIL.COM  
Mobile Phone No (LOCAL) +65-96364534  
Alternative Phone No OTHERS-96364534  
**Vehicle Particulars**  
Manufacturer KIA  
Model CERATO K3-1.6 (A)  
Exact Purpose for which vehicle was being used at time of accident LEISURE  
Are you claiming under your own insurance policy for repair to your vehicle? NO  
If No, Please state action to be taken THIRD PARTY  
Vehicle Category PRIVATE CAR  
**Insurance Company**  
Name of Insurance Company AXA INSURANCE PTE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number GA126706  
Cover Note Number  
**Driver**  
Name of Driver LEE CHEE FULL  
NRIC No S8611510G  
Date Of Birth 03/05/1986  
Occupation INDOOR  
Date Of Driving Pass 23/11/2006  
Driving Experience 11 YEARS AND 3 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-96364534  
Fax Number  
Contact Number OTHERS-96364534  
Email Address WINLOC@GMAIL.COM

Address	BLK 113B MCNAIR ROAD #35-268
Postcode	323113
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	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)	2
Passenger 1	
	NAME: : JESSICA LOW XUYAN
	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 ATTACHMENT

#### 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	YP2009H
Vehicle Make/Model/Colour	ISUZU/BLUE
Details Of Properties	LORRY
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SIVAKUMAR
NRIC/Passport Number	
Contact Number	91319208
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF INJURED PERSON 1**

Name	LEE CHEE FULL
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SGH999T
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
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 reassess policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature

Date & Time:

31st Mar '18  
1130 Hours

Driver's Signature

(If driver is not the policyholder)  
Date & Time.

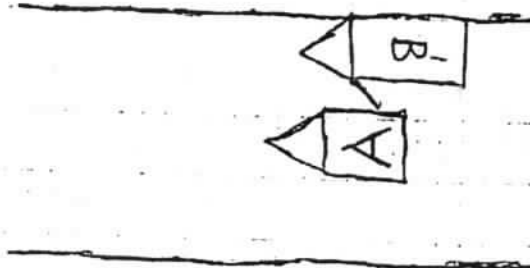
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 2nd MAR 13, on 2141 hour @ Veerasamy Rd.  
I was traveling straight suddenly I felt a impact.  
on the rear RH position the B vehicle open  
door and hit the my vehicle RH Row

### DECLARATION

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

Policyholder's Signature

Date & Time:

3rd Mar 13  
1130 hours

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Person's Signature

Name:

NRIC/FIN No.:



Pte Ltd

TeamWork Garage Pte Ltd

53 Ubi Avenue 1 #01-23/24 Spore 408934

Paya Ubi Industrial Park

Tel : 6844 2475

E-mail : claims@teamworkgarage.com

Register number : 201015366H

3RD PARTY CLAIM ESTIMATION

ERGO Insurance Pte Ltd

302 Orchard Road #09-01

Tong Building

Singapore 238862

Vehicle number	SGH999T
Make / Model	KIA/CERATO
Chassis number	KNAFZ411MH5668615
Accident date	02 March 2018
Reference	1803-14

Qty Particulars

Unit Price - SGD \$

<u>PARTS REPLACEMENT - LIST ITEMS</u>		
1	REAR RH DOOR PANEL <i>huc</i>	1220.40 ✓
1	REAR RH DOOR LOCK ASSY <i>HH</i>	370.80 X
1	REAR RH DOOR REGULATOR <i>HH</i>	321.60 X
1	REAR RH DOOR INNER TRIM <i>HH</i>	624.00 X
1	REAR RH DOOR OUTER HANDLE <i>broken</i>	146.00 ✓
1	REAR RH DOOR TAPE <i>huc</i>	48.00 ✓
1	REAR RH FENDER <i>ray</i>	1177.20 X
1	REAR WINDSCREEN MOULDING <i>HH</i>	183.40 X
		1414.40
		1131.52
		4091.40
	Less 20%	818.28
	Subtotal	3273.12
	Balance C/F	3273.12
<u>PARTS REPLACEMENT - SPECIAL NETT ITEMS</u>		
	Balance B/F	3273.12
1	JOINT SEALANT <i>HH</i>	150.00 X
1	WINDSCREEN SEALANT <i>HH</i>	150.00 X
1 SET	REAR RH DOOR INNER TRIM <i>HH</i>	50.00 X
	Subtotal	350.00
	Balance C/F	3623.12
<u>LABOUR AND MISCELLANEOUS CHARGES</u>		
	Balance B/F	3623.12
1	CHECK WIRING AND LIGHTNING SYSTEM	60.00 HH
2	REMOVE AND REFIT REAR LINING, TRIM AND GARNISH	200.00 120/-
3	TRANSFER PARTS, ATTACHEMENT FROM OLD DOOR TO NEW	200.00 60/-
4	REMOVE AND REFIT REAR WINDSCREEN	150.00 HH
5	PANEL BEATING ON AFFECTED AREAS	1400.00 500/-
6	SPRAY PAINTING ON AFFECTED AREAS	1200.00 500/-
7	APPLY ANTI RUST ON AFFECTED AREAS	150.00 40/-
		1220/-

		3360.00
	Grand total	6983.12

19/03/18 @ 1100ms

Not Actual

L/Sun

2351.52

L/S 1850/-

ryan 3 days

LKK Auto

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:




# 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				
ERGO INSURANCE PTE LTD			Ref : CS/EGI18004312/Dvd3e2	
5 TEMASEK BOULEVARD #04-01 SUNTEC TOWER FIVE SINGAPORE 038985			Date : 02-05-2019	
			Code : EGI	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	YP 2009H	Veh. Inspected	SGH 999T	
Policy No.		Coverage (\$)	0.00	
Claim No.	DSMCV1800447	Excess (\$)	0.00	
Assign From	YEE PEI LI	Assign Date	06/03/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	KIA FORTE K3	c.c	1591	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	KNAFZ411MH5668615	Colour	GREY	
Odometer	30456	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	215/45 R17	NEXEN	5 mm	
L/H Front Tyre	215/45 R17	NEXEN	5 mm	
R/H Rear Tyre	215/45 R17	NEXEN	5 mm	
L/H Rear Tyre	215/45 R17	NEXEN	5 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	02/03/2018	Inspection Date	19/03/2018	
Survey held at	209 PANDAN GARDENS			
Repairer	TEAMWORK GARAGE PTE LTD			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>3 Working Days</b>		



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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. SGH 999T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR RH DOOR PANEL	BUCKLED	1,220.40	1,220.40
1	REAR RH DOOR LOCK ASSY	NOT NECESSARY	370.80	-
1	REAR RH DOOR REGULATOR	NOT NECESSARY	321.60	-
1	REAR RH DOOR INNER TRIM	NOT NECESSARY	624.00	-
1	REAR RH DOOR OUTER HANDLE	BROKEN	146.00	146.00
1	REAR RH DOOR TAPE	NECESSARY	48.00	48.00
1	REAR RH FENDER	TO REPAIR SEE LABOUR	1,177.20	-
1	REAR WINDSCREEN MOULDING	NOT NECESSARY	183.40	-
	LESS 20% DISCOUNT		-818.28	-282.88
			3,273.12	1,131.52
<b><u>SPECIAL NETT ITEMS</u></b>				
1	JOINT SEALANT (SN)	NOT NECESSARY	150.00	-
1	WINDSCREEN SEALANT (SN)	NOT NECESSARY	150.00	-
1	SET REAR RH DOOR INNER TRIM (SN)	NOT NECESSARY	50.00	-
			350.00	-
<b><u>LABOUR</u></b>				
	CHECK WIRING AND LIGHTNING SYSTEM.	NOT NECESSARY	60.00	-
	REMOVE AND REFIT REAR LINING, TRIM AND GARNISH.		200.00	120.00
	TRANSFER PARTS, ATTACHEMENT FROM OLD DOOR TO NEW.		200.00	60.00
	REMOVE AND REFIT REAR WINDSCREEN.	NOT NECESSARY	150.00	-
	PANEL BEATING ON AFFECTED AREAS. INCLUSIVE OF THE REPAIR OF REAR RH FENDER.		1,400.00	500.00
	SPRAY PAINTING ON AFFECTED AREAS.		1,200.00	500.00
	APPLY ANTI RUST ON AFFECTED AREAS.		150.00	40.00
			3,360.00	1,220.00
<b>GRAND TOTAL</b>			<b>6,983.12</b>	<b>2,351.52</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>1,850.00</b>



Report Ref No. CS/EGI18004312/Dvd3e2

ANG BRYAN TANI

Automotive Assessor / Investigator

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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