

REC. BY:

REF: CS3

III 18004796/Tld327

Special Instruction:

Surveyor: Taukh

ASSIGNMENT (Office)

From (Person): Gabriel Wee

of

III

Estimated Cost:

Date/Time:

13/3/18 @ 3:22pm

Bill to:

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

To Inspect Vehicle No:

SJM 5714D

Insured:

PC 3880D

at Workshop m/s

AMA Autocare

Tel:

8778 3636

Policy No:

MH85742

Claim No:

MC20182193

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

28/2/2018

CA / REV / REP. / REV 24 HRS

lwp

- 14/3/18

Date/Time: 4:51pm @ 13/3/18

Person Contacted:

Melvin

H.O.D. Endorsement:

Vehicle IN / OUT

Date/Time

Action/Instruction

(✓) Estimate

SJM 5714D - NA / INC 100 22799 / CO

PC 3880D - X

D.O.A. 12/11/2010

Tanph

III

WIE 2019 Jan

Date 14/3/18

SJM 5714D

2007 Jan

Estimated Cost

OD PWS ATP RES OD RES EVA INV W

To inspect vehicle No SJM 5714D

at Workshop this AMA Autocare

36 Toh Guan Rd East #01-36

Insured

Policy No

Dams No

Sum Insured

Excess

Claims Record

Make of car

Policy Condition

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

NS	OS

Salv or Market Value

DAD Accident From Consistent? Yes or No

G/A PR Seen Consistent? Yes or No

Est Repairs days Res: Yes or No

Lim Sum % G/Valt: Yes or No

CA / REV / REP / 24 HRS / w/p

PRS.

Date Person Contacted

Vehicle IN/OUT

Date Time Action Instruction

7/5

Submit PRE report.

RECEIVED 2018

Date Time File Passed

☐

Preli. Report

☐

Final Report

Date Time File Returned

Days Of Repair

Resurvey No. of Trip

Survey Fee

Transport

Add Fee

☐
☐
☐
☐

Site Fee

Inter

Tag

Fee

Record Format

PRE

Jump Sum

80

10

90

Make of Car Bus Van Car Truck Other

Make of Car

Make

Honda Fit

Color

Black

So Reading

Eng No

C No

GE81020571

Gen Cond Good Fair Poor Burnt

Steering Order Jammed Leaked Burnt or

Brake Order Jammed Leaked Burnt or

Mod All Spec STD A/R or

Tire Size

195/50R15

BS/DUN EXNOVA 3+ PS UZA MO CHTSU PR SUM
TOYO YOKO

Front

Rear

R/Sa

R/Sa

L/Sa

L/Sa

C/D

C/D

Survey report

AMA Autocare

Des of Damages Fr Rear OS NS UC Footage

Frnt o/s, w/c

The UC Chassis Name Body Structure referred due to car

Nivitha (LKK Auto)

From: Motor Claim - III <motorclaim@iii.com.sg>
Sent: Tuesday, 13 March 2018 3:22 PM
To: Alywin; 'sur@lkkauto.com'; Catherine Chong (LKK Auto)
Cc: Lalitha Krishnan - III
Subject: RE: PRI FOR SJM 5714D
Attachments: 20180313105239152.pdf

Dear Sir / Mdm

This Pre-Repair Survey is on Without Prejudice Basis.

THIRD PARTY VEHICLE NO. : SJM5714D
III INSURED VEHICLE NO. : PC3880B
DATE OF LOSS : 28.02.18

We acknowledge receipt of your email.

In compliance to Pre-Action Protocol for NIMA cases, we note that

We disagree to the list of motor surveyors that you have proposed.

Therefore, we have appointed our surveyor LKK AUTO CONSULTANTS to conduct the pre-repair survey.

This claim is handled by **Lalitha**.

Please let us have your client's accident report and repair estimate for our appointed surveyor to conclude his report.

****We would like to conduct a re-survey after spray painting. Please contact our surveyor to arrange.**
****Surveyor kindly upload this assignment to Merimen.**

Thank You.

Best Regards,

Gabriel Wee

Motor Claims Dept.

India International Insurance Pte Ltd

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

From: Alywin [mailto:alywin@chiaarul.com]

Sent: 13 March, 2018 3:13 PM

To: Motor Claim - III <motorclaim@iii.com.sg>; claimscontrol@comfordelgo.com

Subject: RE: PRI FOR SJM 5714D

Dear All,

We refer to the above matter and to your email below.

Kindly be inform that our client is not agreeable to the list of your surveyor.

We enclosed herewith the list of our client's workshop surveyor for your consideration.

Sincere Appraisal - Mr Dave
SK Auto Consultants - S. Kumanan

Kindly let us have your reply soon.

Please do not hesitate to contact me should you have any queries thereof.

Best regards,

Mr Alywin Yeo

M/s Chia S Arul LLC

151 Chin Swee Road

#03-09 Manhattan House

Singapore 169876

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

This e-mail is from M/s Chia S Arul LLC, a firm of Advocates and Solicitors in Singapore, and is intended solely for the named addressee. It contains confidential and /or legally privileged information. If the e-mail has reached you in error, please delete the e-mail immediately and inform us of the error. You may contact us at info@chiaarul.com. Internet communications cannot be guaranteed to be secured or error-free as information could be intercepted, corrupted, lost, arrive late or contain viruses. The sender therefore does not accept liability for any errors or omissions in the context of this message which arise as a result of Internet transmission.

From: Motor Claim - III [<mailto:motorclaim@iii.com.sg>]

Sent: 13 March, 2018 3:10 PM

To: Alywin; claimscontrol@comfortdelgo.com

Subject: RE: PRI FOR SJM 5714D

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

- Automobile Inspection Services Pte Ltd
- Autoprobe Consultants
- VP Appraisal
- Quantum Risk Management
- Ajax Inspection Services Pte Ltd
- Form Team Adjusters Pte Ltd
- Infiniti Appraisal Service
- JP Knights Adjusters
- LBS Auto Consultants Pte Ltd
- Premier Appraisers Services
- Priority Services
- RT Appraisal
- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

Best Regards,

Gabriel Wee

Motor Claims Dept.

India International Insurance Pte Ltd

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

From: Alywin [<mailto:alywin@chiaarul.com>]

Sent: 13 March, 2018 10:54 AM

To: Motor Claim - III <motorclaim@iii.com.sg>; claimscontrol@comfortdelgo.com

Subject: PRI FOR SJM 5714D

Dear All,

We enclosed herewith a copy of PRI for your necessary action.

Please do not hesitate to contact me should you have any queries thereof.

Best regards,

Mr Alywin Yeo

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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Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

DISCLAIMER:

This email is intended solely for the person to whom it has been addressed.

It may contain confidential and/or legally privileged information.

If you are not the person for whom this e-mail was intended, or if this e-mail has reached you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful.

Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses.

Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

CHIA S ARUL LLC
ADVOCATES & SOLICITORS
UEN 201330709H

ARULCHELVAN S

Our Ref : SJM 5714D (AY)

Your Ref :

13 March 2018

India International Insurance
64 Cecil Street
#04 - #05 IOB Building
Singapore 049711

BY EMAIL ONLY
(motorclaim@iii.com.sg)

Comfortdelgro Bus Pte Ltd
205 Braddell Road
Singapore 579701

BY EMAIL ONLY
(claimscontrol@comfortdelgro.com)

Dear Sir,

RE: PROPERTY DAMAGE CLAIM
CLAIMANT : ALT
ACCIDENT INVOLVING SJM 5714D & PC 3880B ALONG CLEMENTI ROAD
ON 28 FEBRUARY 2018

1. We act for ALT, the owner of motor vehicle no. SJM 5714D which was involved in the aforesaid accident.
2. We hereby give you **NOTICE** that we are claiming against your insured motor vehicle no. PC 3880B 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 AMA Autocare Pte Ltd at 36 Toh Guan Road East #01 – 36 Singapore 608580 and kindly arrange with Mr. Melvin at 8778 3636.
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 alywin@chiaarul.com.

Yours faithfully,

MR ARULCHELVAN S
cc: Client (By Email)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business

Owner ID: 3523W

Vehicle Details

Vehicle No.: SJM5714D

Vehicle to be Exported: No

Intended De-registration Date: 15 Mar 2018

Vehicle Make: HONDA

Vehicle Model: FIT 1.5RS A

Primary Colour: Black

Manufacturing Year: 2008

Engine No.: L15A1572379

Chassis No.: GE81020571

Maximum Power Output: 88.0 kW (118 bhp)

Open Market Value: \$15,017.00

Original Registration Date: 09 Jan 2009

First Registration Date: 09 Jan 2009

Transfer Count: 1

Actual ARF Paid: \$15,017.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 08 Jan 2019

PARF Rebate Amount: \$7,508.00

Intended COE Rebate Details

COE Expiry Date: 08 Jan 2019

COE Category: A - Car (1600cc & below)

COE Period(Years): 10

QP Paid: \$7,721.00

COE Rebate Amount: \$628.00

Total Rebate Amount: \$8,136.00

The information contained herein is correct as at 15 Mar 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	05/03/2018 17:46
Date Of Accident	28/02/2018 17:25
Exact Location Of Accident	CLEMENTI RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM5714D
Insured/Policyholder	
Name Of Registered Owner	ALT
Co Reg No	53333523W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92708543
Alternative Phone No	OFFICE-94572434

Vehicle Particulars

Manufacturer	HONDA
Model	FIT 1.5RS A
Exact Purpose for which vehicle was being used at time of accident	PVT 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 HIRE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSN1747351700
Cover Note Number	9/7/17-8/7/18

Driver

Name of Driver	MOHAMED HUSAIN BIN MOHAMED ABDUL ALEEM
NRIC No	S8526336F
Date Of Birth	15/08/1985
Occupation	INDOOR
Date Of Driving Pass	11/02/2008
Driving Experience	10 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92708543
Fax Number	
Contact Number	OTHERS-82985180
EEmail Address	NOEMAIL

Address	BLK 342C YISHUN RING RD #15-1944
Postcode	763342
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 ON 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?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8522999 - FAX NO: 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT **CCTV FOOTAGE ATTACHED

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	PC3880B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	GAO YONG JIU
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	MOHAMED HUSAIN BIN MOHAMED ABDUL ALEEM
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SJM5714D
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

VEHICLE NO.: SIM 53147
INSURER : Chind
DATE & TIME: 28 2-18
@ 5:26pm

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 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

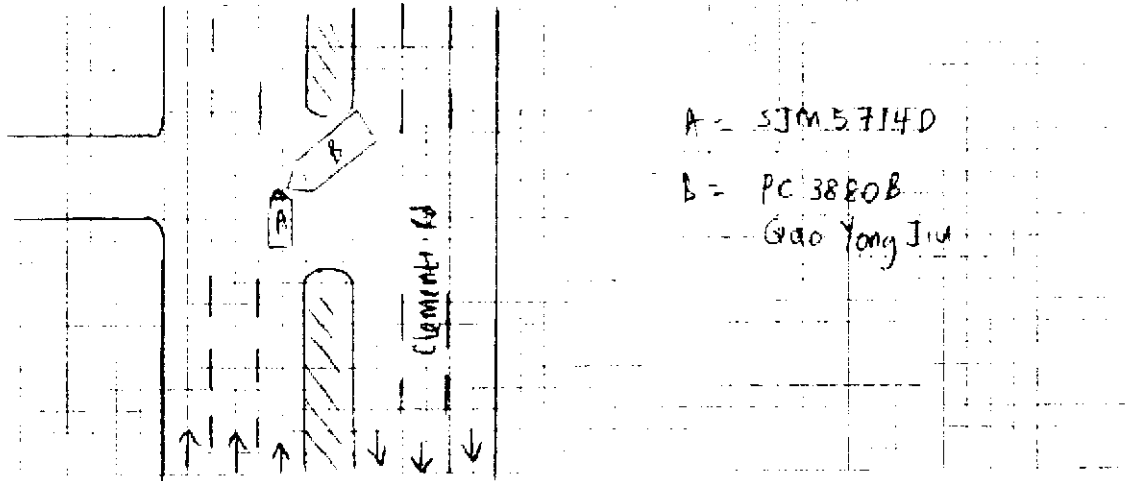
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

- * CCTV footage attached.

* I am filing this report on behalf of my brother whom was the driver at point of accident. He is currently not conscious, injured (DMA @ NHH (ICU))

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy 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 _____

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

() Claim Own Policy () Claim Third Party () Reporting Only
() Claim OD/TP at other workshop (_____)

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

































PRI

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	20 Apr 2018 Edit Reg		13 Mar 2018 00:00 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 adjuster]									
Insured:	COMFORTDELGRO BUS PTE LTD , Co. Reg. No.: 199607256W								
Main Claimant:	ALT , Co. Reg. No.: 53333523W								
Vehicle Reg. No.:	SJM5714D	Date of Loss:	28/02/2018 17:00 - :59 [109 Months and 19 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / MC20182193	Policy/Cover Note No.:	M485742 (Comprehensive)						
Vehicle Reg. No. (Insured):	PC3880B	Policy No. (Claimant):							
		Excess:	S\$1,500.00						
Repairer:	Ama Autocare Pte Ltd (HQ) 36 Toh Guan Road East, #01-36, 608580 Jurong East - Tel:								
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Lalitha Krishnan - 6347 6139]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 02/05/2018]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

***SJM5714D (MC20182193)**
[PC3880B]
TP
ALT
Feb 28 2018 5:00PM
[COMFORTDELGRO BUS PTE LTD]
Ama Autocare Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			View <div>View in Browser</div>		
Photos/Images									3 per page		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print						
1	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
2	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
3	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
4	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
5	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
6	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
7	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
8	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
9	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
10	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
11	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
12	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
13	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
14	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
15	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
16	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
17	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
18	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
19	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
20	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
21	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
22	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
23	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
24	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
25	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
26	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
27	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
28	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
29	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
30	07/05/18 09:55	General View		 Load JPG	<input checked="" type="checkbox"/>						
Documentation									1 per page		<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)		Thumbnail	Print						
1	20/04/18 09:05	Singapore Accident Statement		 Load PDF							
2	20/04/18 09:49	Letter of Demand from Third Party CHIA S ARUL LLC		 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; width: 100%;"></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/III18004796/T1D3E2

Date: 10/05/2018

REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No:

M485742

Claimant Vehicle No : SJM5714D

Insured Vehicle No :

PC3880B

Date of Loss: 28/02/2018

Nature of Claim:

TP

Claim No: MC20182193

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SJM5714D**

Make & Model: HONDA FIT, 1.3 G (A)

Engine No: L15A1572379

Reg. Date: 09/01/2009 (Man. Year: 2008)

Chassis No: GE81020571

Colour: Black

Odometer: 0 km

Engine Capacity: 1496 cc

Market Value/New Car Price: N/A

Sum Insured (\$\$): **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: 195/50 R15

Rear Tyre Size:

195/50 R15

Front Left Side: Toyo 5 mm

Rear Left Side:

Toyo 5 mm

Front Right Side: Toyo 5 mm

Rear Right Side:

Toyo 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 (\$\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 13/03/2018

Date Inspected: 14/03/2018

Inspected At:

Ama Autocare Pte Ltd (HQ)

36 Toh Guan Road East, #01-36

Singapore 608580

Estimated Period of Repair: 0.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

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.

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 10 May 2018)
Parts: 144 HONDA FIT 1.3 G (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SJM5714D)
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 >