INS. CASE OWNER: CL | CC 4, ASMIRAN 4949, A 2039 | LKK: | IDAC: 3496

ASSIGNMENT

Surveyor: ADNAN   DOI: 16/3/18   Date / Time: 14/3/2018

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No.	: FZ6348A		Claim No.	: 58MU0ARXY
Name of Insured	: MD. AERZAM BIN MDOWLAH		Policy No.	:
Insured Tel No.	:	HP: 9151 0444	Make / Model	: Honda CB400
Excess Sec II :S$		D.O.A: 13/3/18	Place of Accident :	Woodlands Ave 1 X Ave 2
Is driver the owner?	(YES / NO)	Nature of Accident :		

If **NO**, Driver Name / Age :

Driver Tel No. :   (V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : %   **Final ? Yes / No**

SKZ1581R → ______ → ______ → ______

INSRS: WSP: My Solution Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
20/3 ADNAN	SKZ1581R - [illegible]
	FZ6348A. X
	[illegible]
	CASE REVIEW : OI [illegible] TP TURN RH WITHOUT GREEN ARROW.
21/3/18	SEEK APPROVAL TO REJECT TP CLAIM.
	MANAGEMENT APPROVED TO REJECT TP CLAIM.
	EMAIL VEP TO REJECT TP CLAIM.
RECEIVED 24 AUG 2018	Reject Case By (staff) : Adnan Approved by : [illegible] Date : 24/8/18

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	
After call ltr to OI:	

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:		
Authorisation To Act:		
Release Voucher:		
Final Repair Bill:		
Car Rental Invoice:		
Towing Invoice		
LTA / GIA :		
Medical Bill:		
PIR:		
Mandate/Reject Instruction:		
LOD		
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: S$ (days) Reduction: % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: Confirm with Email ☐ Call ☐

Final Liability:	% 0 (Agreed / Assessed) BOLA S/N No. : 5	If NO or B 28, Ass. Lia :
Repair Cost:	S$	TP TURN RH WITHOUT GREEN ARROW.
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	COPY SENT 24/8/18
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$	
Medical:	S$	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$	3) Survey fee: 350
Total:	**S$** **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$	Name 1:
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3:

Surveyor

REF: ASM(AXA) 9949/Aug 3.

ASSIGNMENT

From: Date: 15032018

Estimated Cost:

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

To Inspect Vehicle No: SKZ 1581R

at Workshop m/s MG Solution

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SKZ1581R Yr Regn: 1999 / April

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

Make: Nissan Sunny. c.c 1498

Colour Silver. A/C: Insured / Std / NI / NA

Sp.Reading 258125. T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: FB15018024

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/65R14

R: 185/65R14

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A		D.O.I.	15/03/18

Survey held at MG Solution

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

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

Date / Time	Action / Instruction
	TP AXA. COE Expiry: 28/02/19.
	MV: 5000 4s: +3,300 (Rep: +2,901.78 48%)
	PV: 500
	Nett: 4.5K.

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($) ☐ Interview ($) ☐ Tech. Invs ($) ☐ Weekend ($)

Report Format :

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

Survey Fee

Transportation $ + RS SI

Photos

Others

TOTAL

LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

AXA INSURANCE PTE LTD

8 SHENTON WAY #24-01
AXA TOWERSINGAPORE 068811

Ref : CC4/ASM18004949/Aea3

Date : 15-03-2018

Code : ASM

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	FZ 6348A	**Veh. Inspected**	SKZ 1581R
	Policy No.		**Coverage ($)**	0.00
	Claim No.	S8M00ARY	**Excess ($)**	0.00
	Assign From		**Assign Date**	15/03/2018

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	12/03/2018	**Inspection Date**	15/03/2018
	Survey held at	MG SOLUTION PTE LTD 23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRE, SINGAPORE 415933		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

MAP18034722 / Alpine Motors Pte Ltd - HQ
ENTRY DATE & TIME: 13/03/2018 16:06
SUBMITTED BY: RONNIE TAN GUAN HIN

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 witholding 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	13/03/2018 16:06
Date Of Accident	12/03/2018 22:45
Exact Location Of Accident	JUNCTION OF WOODLANDS AVE 2 & 1
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKZ1581R
Insured/Policyholder	
Name Of Registered Owner	CHUNG CHIN HAN
NRIC No	S8339461G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93374159
Alternative Phone No	OFFICE-60000000
Vehicle Particulars	
Manufacturer	NISSAN
Model	SUNNY-1.6 (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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	GA283970/1
Cover Note Number	
Driver	
Name of Driver	TAN LI LING, SHAREEN
NRIC No	S8322804J
Date Of Birth	27/07/1983
Occupation	INDOOR
Date Of Driving Pass	20/01/2012
Driving Experience	6 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-93362719
Fax Number	
Contact Number	
EMail Address	CHUNGCH83@GMAIL.COM

Address	BLK 854 WOODLANDS STREET 83 #12-84
Postcode	730854
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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: : CHUNG CHIN HAN GENDER: : MALE

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

Report please refer to sketch plan

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	FZ6348A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
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	CHUNG CHIN HAN
Approximate Age	35
Injuries Sustain	BACK & NECK
Injured person in which vehicle?	SKZ1581R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	TAN LI LING, SHAREEN
Approximate Age	35
Injuries Sustain	BACK & NECK
Injured person in which vehicle?	SKZ1581R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

IMPORTANT NOTICE

1. [illegible]
2. This Form must be completed by the Policyholder [illegible]
3. Information provided must be truthful and accurate [illegible] may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form [illegible]
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded to the Insurance [illegible] Management Centre [illegible] Association of Singapore [illegible] interested parties.
7. By the lodgment of this [illegible]
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 [illegible]

(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) [illegible] "Purposes")

(b) [illegible]

(c) [illegible]

(d) [illegible]

(e) [illegible]

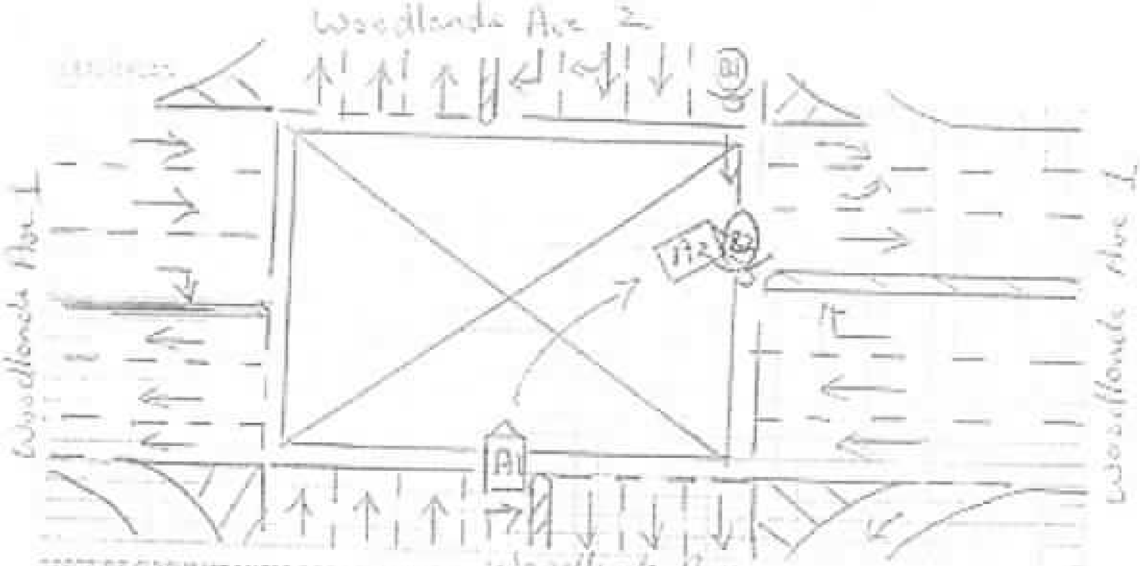
[illegible]

Policyholder's Signature
Date & Time

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

Reporting Centre Personnel's Signature
Name
NRIC No.

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 12/03/2018 at about 2245 hrs at Junction of Woodlands Ave 2 and Woodlands Ave 1. I was turning Right from Woodlands Ave 2 into Woodlands Ave 1 at the GREEN ARROW Light, suddenly a Vehicle (B) from the opposite direction going straight beating the Red traffic light hence collided onto my front Right Portion of my Vehicle (A) causing damages to my vehicle. I have one passenger inside my vehicle.

(A) SKZ 1581 R
(B) FZ 6348 A

DECLARATION

[illegible]

[illegible]

[illegible]

[illegible]

Menu

Service Request Details

Claim
S8M00ARY

15/3/2018 @ 9360m
Shaun veh in
Adrian

Reference
None

LKK AUTO CONSULTANTS PTE LTD (TP)

Loss Date
March 12, 2018

Request Date
March 14, 2018

Due Date
March 21, 2018

Vendor Name
LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss
Third Party Vehicle Damage

Services
Pending verification - Direct Settlement

Actions

Next Step
Agree to perform service

Decline Work | Accept Work

Vehicle Information

Incident Vehicle Registration #
SKZ1581R

Make
TPVD NISSAN

Menu

Service Address

...

Primary Contact/Insured

ABDULLAH MUHAMMAD AERZAM BIN
450 PASIR RIS DRIVE 6, #03-174, 510450, Singapore

Claim Handler

LOH Cynthia
6568804843
cynthia.loh@axa.com.sg

Additional Instructions

Messages Invoices History Documents Assessment Metrics Notes

New Message

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	9461G
Vehicle Details	
Vehicle No.:	SKZ1581R
Vehicle to be Exported:	Yes
Intended De-registration Date:	15 Mar 2018
Vehicle Make:	NISSAN
Vehicle Model:	SUNNY AUTO
Primary Colour:	Silver
Manufacturing Year:	1998
Engine No.:	QG15217771
Chassis No.:	FB15018024
Maximum Power Output:	-
Open Market Value:	$15,770.00
Original Registration Date:	01 Apr 1999
First Registration Date:	01 Apr 1999
Transfer Count:	4
Actual ARF Paid:	$22,078.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	$0.00
Intended COE Rebate Details	
COE Expiry Date:	28 Feb 2019
COE Category:	E - Open Category
COE Period(Years):	10
PQP Paid:	$5,346.00
COE Rebate Amount:	$510.00
Total Rebate Amount:	**$510.00**

The information contained herein is correct as at 15 Mar 2018

OK

MOR118035142 / ETHOZ Protect Pte Ltd - Bukit Batok
ENTRY DATE & TIME: 14/03/2018 14:14
SUBMITTED BY: Suhelmi Bin Suharman

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 14/03/2018 14:30

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 witholding 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	14/03/2018 14:14
Date Of Accident	12/03/2018 22:25
Exact Location Of Accident	WOODLANDS AVE 1 X AVE 2 TRAFFIC LIGHT JUNCTION
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	FZ6348A
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD AERZAM BIN ABDULLAH
NRIC No	S9217668A
Email Address	MDAERZAM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91510444
Alternative Phone No	OFFICE-91510444
Vehicle Particulars	
Manufacturer	HONDA
Model	CB400
Exact Purpose for which vehicle was being used at time of accident	
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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	AN3159235
Cover Note Number	16/09/2017-15/09/2018
Driver	
Name of Driver	MUHAMMAD AERZAM BIN ABDULLAH
NRIC No	S9217668A
Date Of Birth	25/05/1992
Occupation	INDOOR
Date Of Driving Pass	04/09/2017
Driving Experience	0 YEAR AND 6 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91510444
Fax Number	
Contact Number	OFFICE-91510444
EMail Address	MDAERZAM@GMAIL.COM

Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	MUHAMMAD AERZAM BIN ABDULLAH
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FZ6348A
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

SKETCH PLAN Refer to attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

You had been advised by workshop that in the event that you wish **to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made** within the stipulated timeframe from the day of occurance.

	Reporting Only
	Claim OD
✓	Claim TP
✓	Claim OD / TP at other workshop

DECLARATION

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

Policyholder's Signature
Date & Time: 14/3/18 2.10pm

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

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

SINGAPORE POLICE FORCE

T/20180313/7015

Report No. T/20180313/7015

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
13/03/2018 19:29		

Informant's Particulars

Name of Informant: MUHAMMAD AERZAM BIN ABDULLAH			Address: APT BLK 450 PASIR RIS DRIVE 6 #03-174 SINGAPORE 510450	
ID Type / ID No.: NRIC NO / S9217668A			Contact No.: Home/Office: Mobile: 91510444	
Nationality: SINGAPORE CITIZEN			Email: mdaerzam@gmail.com	
Sex: Male	Age: 25	Date of Birth: 25/05/1992	Type of Informant: Rider	
Race: Malay			Language: English	Institution / School Name:
Occupation: Fire-fighting and rescue officer			Driving Licence Information: Class: 2B,2A,3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/03/2018 22:24	Type of Location: X-Junction
Location: WOODLANDS AVENUE 1 At the cross junction between Woodlands Ave 1 and Woodlands Ave 2, near Innova JC				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 70 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Colour	Condition	No. of Passenger
FZ6348A	Motorcycle	HONDA	CB400 VTEC 3	Red		0
SKZ1581R	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Policy No.	Effective	Expiry Date
FZ6348A	AXA INSURANCE SINGAPORE PTE LTD	AN3159235	16/09/2017	15/09/2018

SINGAPORE POLICE FORCE

T/20180313/7015

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20180313/7015

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 13/03/2018 19:29
Officer In Charge Of Case:	Classification Of Case:

Authentication Stamp

NP168

Status of Driving Licence

QUALIFIED DRIVING LICENCE

Qualified Driving Licence No. :	S9217668A
Status of Qualified Driving Licence :	Valid
Class of Qualified Driving Licence :	2A,2B,3,4
Expiry Date :	Valid for life unless revoked, suspended or disqualified.

PROVISIONAL DRIVING LICENCE

Provisional Driving Licence No. :	S9217668A
Status of Provisional Driving Licence :	Expired (Click here for explanation)
Class of Provisional Driving Licence :	3,4
Expiry Date :	28/12/2016

The above information is accurate as at 20/03/2018 12:01 AM.

Mandate approval to reject TP claim

SCREENSHOT

Type
Question

Message
Hi Cynthia, We refer to the above matter. TP reported that he make a right turn with an green arrow, insured beats the red light to go straight and collided into his vehicle. OI reported that he was traveling straight with a green light in his favour, TP make a right turn and collided into his motorcycle. Video clearly show that insured was traveling straight with a green light in his favour, third party make a right turn without green arrow hit insured. We are of the opinion that liability is not in third party's favour. In view of the above, we are intending to reject TP claim. For your approval/ comments/ instruction. Thank You. Best Regards, Asher Sng

Reply

MG SOLUTION PTE LTD

23 Kaki Bukit Avenue 4 (South Wing) #02-03 Singapore 415933
Tel: (+65) 6243 1373 | Fax: (+65) 6243 1376
Reg. No: 201427944N

TO	: AXA	**DATE**	: 14/03/2018
ATTENTION	: MOTOR CLAIMS DEPT	**JOB TYPE**	: T/P CLAIM
ESTIMATE REPORT	:		

VEHICLE DETAILS

VEHICLE NO : SKZ1581R

MODEL : NISSAN SUNNY

CHASSIS NO

ACCIDENT DETAILS **DATE** : 12-Mar-18
TIME : 22:45HRS

THIRD PARTY REQUESTOR / CONTACT : JACK

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	BONNET	1	$ 855.30	$ 855.30
2	FRONT BUMPER SIDE RETAINER RH	2	$ 55.00	$ ~~110.00~~
3	FRONT BUMPER REINFORCEMENT	1	$ 355.90	$ 355.90
4	SUPPORT PANEL	1	$ 630.00	$ 630.00

TOTAL PRICE	$	1,951.20
LESS 30%	$	585.36
SUB TOTAL PRICE	**$**	**1,365.84**

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	FRONT GRILLE	1	$ 266.00	$ 266.00
2	FRONT GRILLE LOGO	1	$ 62.80	$ 62.80
3	HEADLAMP	1	$ 430.00	$ 430.00
4	SIDE LAMP	1	$ 190.00	$ 190.00
5	FRONT BUMPER	1	$ 450.00	$ 450.00
6	FRONT BUMPER MOULDING(SIDE)	1	$ 169.90	$ 169.90
7	FRONT BUMPER MOULDING(CENTRE)	1	$ 169.90	$ 169.90
8	FRONT BUMPER FOG LIGHT COVER	1	$ 89.00	$ 89.00

9	FRONT FENDER RH Distorted		1	$	479.00	$ 479.00

1977.8
1780.02

TOTAL PRICE	$	2,306.60
LESS 10%	$	230.66
SUB TOTAL PRICE	**$**	**2,075.94**

SPECIAL NETT ITEMS

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT
1	FRONT NUMBER PLATE Cracked	1	$ 50.00	$ ~~50.00~~ 30
2	FRONT BUMPER CLIPS(SET) nil	1	$ 20.00	$ 20.00
3	CENTRE GRILLE CLIPS(SET) Not in	1	$ 20.00	$ 20.00

50

TOTAL **$ 90.00**

CLAIM DETAILS: LABOUR AND SPRAY PAINTING

1	PANEL BEATING, REMOVAL AND REPLACING PARTS	$1,200.00	500	
2	TO SPRAY PAINT AFFECTED AREA	$1,000.00	800	
3	TUFF COAT	$250.00	x	
4	WIRING CHECK	$120.00	30	

1330

TOTAL **$2,570.00**

ESTIMATE REPORT

Adrian Ng told: 4048636
4/s 15/03/18. n/s: 3.21k.
04 Days

TOTAL PARTS COST	: $	3,531.78
TOTAL LABOUR COST	: $	2,570.00
TOTAL REPAIR COST	: $	6,101.78

APPROVED DETAILS

SURVEYOR :

CONTACT NO : **FAX** :

PART BY PART / LUMP SUM :

NO OF DAYS :

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:

Asher Sng (LKKAuto)

From: Asher Sng (LKKAuto)
Sent: Friday, 24 August 2018 9:11 AM
To: 'MG Solution'
Cc: Admin A
Subject: RE: ACCIDENT INVOLVING SKZ 1581R AND FZ 6348A ON 12.03.2018 *** LKK REF: CC4/ASM18004949/Aea3
Attachments: OI SKETCH PLAN.pdf; FZ 6348A - SKZ 1581R.mp4

Without Prejudice

Hi Su Wong,

We refer to the above matter.

We attached here with a copy of our insured's accident statement and video for your easy reference.

Our principal has reiterated that the accident was caused due to the entire negligence of your client make a right turn without green arrow and collided into our insured vehicle.

We are of the opinion that liability is not in your client's favor.

Under such a circumstances, we regret to inform you that we have our principal instruction to deny liability and unable to look into your client's claim.

Thank You.

Best Regards,
Asher Sng | Case Handler
LKK Auto Consultants Pte Ltd
phone: 6841-6051 | email: ashersng@lkkauto.com | fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: MG Solution <mg3solution@gmail.com>
Sent: Monday, 18 June 2018 9:50 AM
To: Mei Kwan (LKKAuto) <Meikwan@lkkauto.com>
Cc: Asher Sng (LKKAuto) <AsherSng@lkkauto.com>; Vic (LKKAuto) <vicalpeh@lkkauto.com>; Admin A <admin-a@lkkauto.com>
Subject: Re: ACCIDENT INVOLVING SKZ 1581R AND FZ 6348A ON 12.03.2018 *** LKK REF: CC4/ASM18004949/Aea3

Your Ref: **CC4/ASM18004949/Aea3 (FZ6348A)**
Our Ref: **SKZ1581R**

Dear Asher,

Please find attached our LOD for your onward action. Original Copy will send to you by **POST**.
Please feel free to contact the under mentioned should you require any further information.
Your prompt action will be greatly appreciated.

Best Regards,

Su Wong
MG SOLUTION PTE LTD
No 23 Kaki Bukit Avenue 4
AAS Kaki Bukit Centre
#02-03B Singapore 415933
Tel: 6243 1373 | Fax: 6243 1376

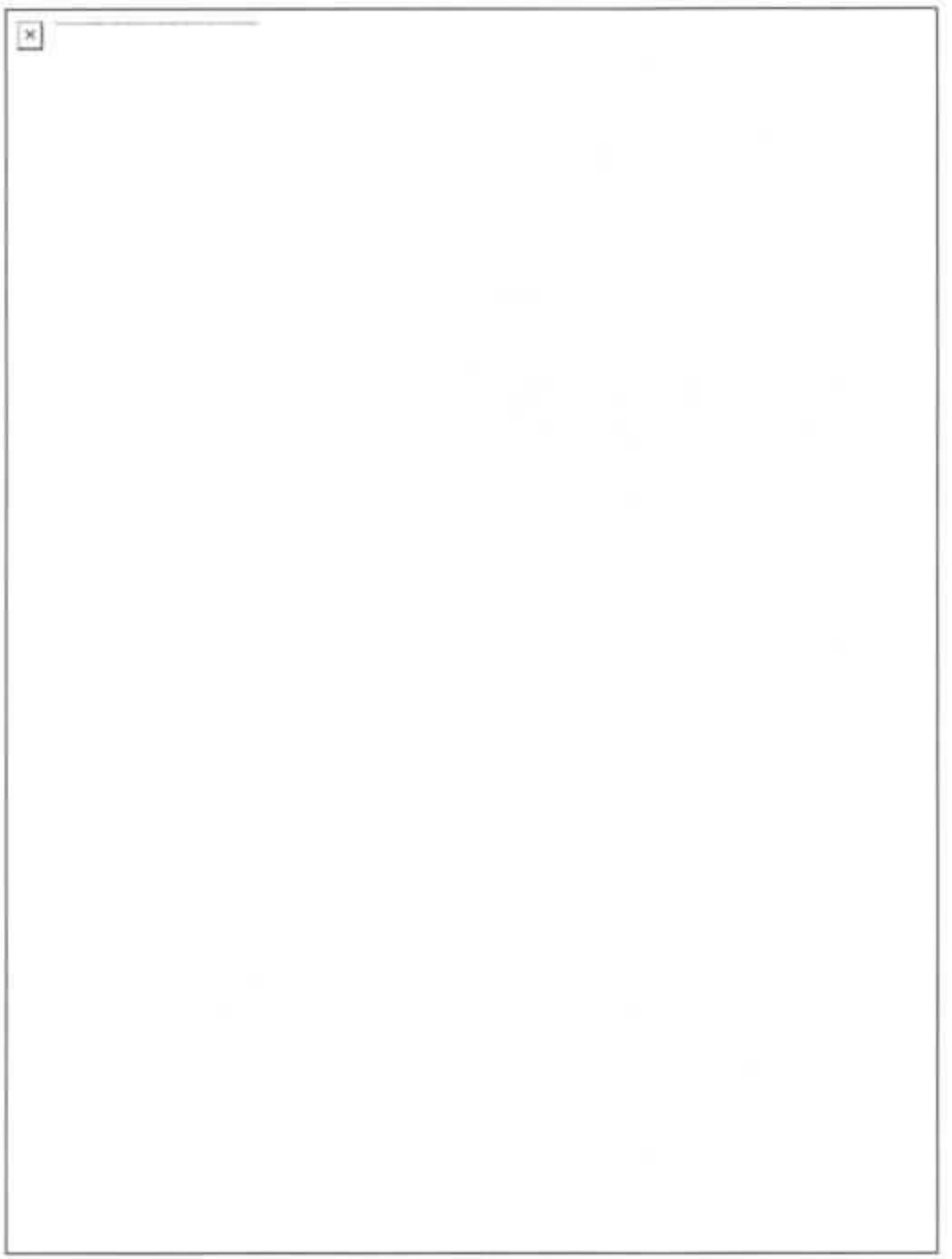
On Thu, Mar 15, 2018 at 4:08 PM Mei Kwan (LKKAuto) <Meikwan@lkkauto.com> wrote:

Dear Sir / Madam,

We refer to the above matter.

Please be informed that we are currently **pending** verification for direct settlement.

Fyi, OI has reported. Please refer to the below OI's sketch plan and statement.



Kindly provide us : -

- evidence to support your claim if any.

Please note that for liability, claim negotiation and settlement, please contact Asher at 6841 6051.

Our respective case handler will look into the matter and revert to you in due course.

To check availability of the case handler, you may contact the undersigned.

Thank you.

Best Regards,

Mei Kwan | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: MeiKwan@lkkauto.com | fax: 67414108

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

From: Sharon [mailto:mg3solution@gmail.com]
Sent: Wednesday, 14 March, 2018 3:59 PM
To: SG AXA Insurance SM AXA SGP - Motor Survey <motor.survey@axa.com.sg>; SG AXA Insurance SM Claims Service Team <cst@axa.com.sg>
Subject:

Dear person in charge,

Please refer to attach file and arrange for pre-inspection.

we prefer our single joint expert as below:

ADRIAN LING WAI PING	LKK AUTO CONSULTANTS PTE LTD

Best Regards,

Sharon Chia

MG Solution Pte Ltd

No 23 Kaki Bukit Avenue 4

Singapore 415933

Tel: (+65) 6243 1373 | Fax: (+65) 6243 1376

Service Request Details

Claim	SBM00ARY
Reference	CC4/ASM18004949/Aea3q2
Loss Date	12 March 2018
Request Date	19 March 2018
Due Date	15 March 2019
Vendor Name	LKK AUTO CONSULTANTS PTE LTD (TP)
Type of Loss	Third Party Vehicle Damage
Services	Pending verification - Direct Settlement

Actions

Next Step: Finish the work

Complete Work | More ▾

Vehicle Information

Incident Vehicle Registration #	SKZ1581R
Make	TPVD NISSAN
Model	SUNNY-1.6 (A)

Service Address

...

Primary Contact/Insured

ABDULLAH MUHAMMAD AERZAM BIN
450 PASIR RIS DRIVE 6, #03-174, 510450,
Singapore

Claim Handler

LOH Cynthia
6568804843
cynthia.loh@axa.com.sg

Additional Instructions

Messages | Invoices | History | Documents | Assessment | Metrics | Notes

Document Type | Document SubType

+ Upload Documents

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
Insd Video - Accident - 1.MOV	Evidence	Videos	TAN Wancong	19 March 2018
Insd video - Accident - 2.MOV	Evidence	Videos	TAN Wancong	19 March 2018

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
Pol Schedule.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of Insurance	TAN Wancong	19 March 2018
CI.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of Insurance	TAN Wancong	19 March 2018
GIA SKZ1581R TP.PDF	Reports & Statement	GIA Report	VISHNU BATHAM Shekhar	14 March 2018
EMAIL FROM WORKSHOP TP PRI.msg	Letters and Correspondence	Workshop	VISHNU BATHAM Shekhar	14 March 2018
GIA FZ6348A INSD.PDF	Reports & Statement	GIA Report	VISHNU BATHAM Shekhar	14 March 2018

Assessment Details

General & Workshop Details | Vehicle & Driver Details | Vehicle Condition | Taxes & Ratio | Parts & Labour | Miscellaneous | Summary

Parts

	EDIT	SR NO	QUANTITY	MATERIAL	SIDE	PART NAME	PART NUMBER	REPAIR/REPLACE (PARTS)	CONDITION	LIST PRICE	DEPR./ BTTR%	DISCOUNT%	SALVAGE%	PART PRICE(NET)	ACTION (PARTS)	REMOVE
☐	✎	1	1			BONNET			Buckled	855.3		30		598.71	Approve	🗑
☐	✎	2	1			FRONT BUMPER SIDE RETAINER RH			Necessary	55		30		38.5	Approve	🗑
☐	✎	3	1			FRONT BUMPER REINFORCEMENT			Bent	355.9		30		249.13	Approve	🗑
☐	✎	4	1			SUPPORT PANEL			Repair	0	0	0	0	0	Deny	🗑

Labour

	EDIT	SR NO	REPAIR/REPLACE (LABOUR)	PART NAME	LABOUR R&R	LABOUR REPAIR	PAINT	ACTION (LABOUR)	COMMENT	REMOVE
☐	✎	1		PANEL BEATING ,REMOVAL AND REPLACING PARTS	500	0	0	Approve		🗑
☐	✎	2		TO SPRAY PAINT AFFECTED AREA	800	0	0	Approve		🗑
☐	✎	3		TUFF COAT	0	0	0	Deny		🗑
☐	✎	4		WIRING CHECK	30	0	0	Approve		🗑

Assessment Details

General & Workshop Details | Vehicle & Driver Details | Vehicle Condition | Taxes & Rate | Parts & Labour | Miscellaneous | Summary

	EDIT	SR NO	NAME	ACTION	AMOUNT	COMMENT	REMOVE
☐	✎	1	DAYS OF REPAIR:4 DAYS	Approve			🗑
☐	✎	2	FRONT GRILLE (DISC 10%)	Deny	0	NOT NECESSARY	🗑
☐	✎	3	FRONT GRILLE LOGO (DISC 10%)	Deny	0	NOT NECESSARY	🗑
☐	✎	4	HEADLAMP (DISC 10%)	Approve	387	CRACKED	🗑
☐	✎	5	SIDE LAMP (DISC 10%)	Approve	171	CRACKED	🗑
☐	✎	6	FRONT BUMPER (DISC 10%)	Approve	405	DISTORTED	🗑
☐	✎	7	FRONT BUMPER MOULDING (SIDE) (DISC 10%)	Approve	152.91	DAMAGED	🗑
☐	✎	8	FRONT BUMPER MOULDING (DISC 10%)	Approve	152.91	DAMAGED	🗑
☐	✎	9	FRONT BUMPER FOG LIGHT COVER (DISC 10%)	Approve	80.1	DEFORMED	🗑
☐	✎	10	FRONT FENDER RH (DISC 10%)	Approve	431.1	DISTORTED	🗑
☐	✎	11	FRONT NUMBER PLATE	Approve	30	CRACKED	🗑

	EDIT	SR NO	NAME	ACTION	AMOUNT	COMMENT	REMOVE
		12	SET FRONT BUMPER CLIPS	Approve	20	NECESSARY	
		13	SET CENTRE GRILLE CLIPS	Deny	0	NOT NECESS	

Assessment Details

General & Workshop Details - Vehicle & Driver Details - Vehicle Condition - Taxes & Ratio - Parts & Labour - Miscellaneous - Summary

Claim Amount $4,046.36

Claim Amount $4,046.36

CATEGORY	ESTIMATE	REVISED AMOUNT
Spare Parts	$886.34	$886.34
Labour	$1,330.00	$1,330.00
Miscellaneous	$1,830.02	$1,830.02

Assessment Details

General & Workshop Details - Vehicle & Driver Details - Vehicle Condition - Taxes & Ratio - Parts & Labour - Miscellaneous - Summary

Claim Amount $3,200.00

Claim Amount $3,200.00

CATEGORY	ESTIMATE	REVISED AMOUNT
Miscellaneous	$3,200.00	$3,200.00