

Nivitha (LKK Auto)

From: Tang, Ben <Ben.Tang@awac.com> on behalf of Motorsurvey <Motorsurvey@awac.com>
Sent: Thursday, 22 March 2018 4:26 PM
To: 'assignments@lkkauto.com'
Cc: 'Donald Jesus Molina Go'; 'sur@lkkauto.com'
Subject: TP Survey assignment for XE 2970 B DOA: 17.03.2018 Our ref: XD 8621A

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us do have consensus in the appointment of Mr Mohammad Taufikh as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	XE 2970 B
Insured Vehicle	:	XD 8621 A
Policy Number	:	AVF2SB0002611701
Name of Workshop	:	Megastone Holdings Pte Ltd
Contact Number	:	6365 2639
Person to Contact	:	Mr Donald
Estimated Cost of repairs	:	NA

Regards,
Claims Division

Copy to Megastone Holdings Pte Ltd (Your Ref: XE 2970 A) via Email.

Note -

- (x)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

Regards
Motor Claims
Claims Group

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	19/03/2018 14:29
Date Of Accident	17/03/2018 13:00
Exact Location Of Accident	WEST COAST HIGHWAY (LP : 160)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE2970B
Insured/Policyholder	
Name Of Registered Owner	SAMWOH RESOURCES P L
Co Reg No	199105225W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98979341

Vehicle Particulars

Manufacturer	VOLVO
Model	FMX370-10.8 D 64R SC WB3900 (M)
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 28962353 MKC
Cover Note Number	

Driver

Name of Driver	LI XIANGCHUN
Work Permit No	G8228891R
Date Of Birth	02/11/1985
Occupation	OUTDOOR
Date Of Driving Pass	08/06/2015
Driving Experience	2 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98979341
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 25E SUNGEI KADUT
 Postcode S729333
 Was driver an employee of the Insured's Company YES
 If No, Relationship of the Driver with the Insured
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident 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? NO
 Was any injured conveyed to hospital by ambulance?
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. YES
 Number of Passengers (Including Driver) 0

Details of Police Action

Was the accident reported to the police? NO
 If Yes, Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

PLEASE SEE ATTACHED SKETCH PLAN. ATTENDED BY : SUSAN

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 Witness 1

Name TOH CHAI
 Phone Number 98196860
 Email Address (10748111

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XD8621A
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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 reputate 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:
NRIC/FIN No.:

19 MAR 2018

IDAC BUKIT BATOK (VAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

Accident Photo





SAMWOH

Samwoh Resources Pte Ltd

(A Member of Samwoh Group)
Company Registration No.: 109105225W GST Registration No.: M2-0102738-1



MA CF

27 March 2018

VV2X1E1D6HB805520

28th March 2018

Allied World Assurance Company Ltd.
Singapore Branch
Mapletree Anson
60 Anson Road #08-01
Singapore 079914
Fax No.: 64230798

Attention: Motor Claims Department.

Dear Sir/ Madam,

Quotation to supply labour, parts, necessary equipment and tools for the repair of XE2970B.

Description	Qty	U/Price	Total Price
Cover ?	2 pcs	\$93.60	\$187.20
Glass	1 pc	\$141.70	\$141.70
Glass	1 pc	\$118.30	\$118.30
Housing	1 pc	\$81.90	\$81.90
Housing	1 pc	\$40.30	\$40.30
Unit ?	1 pc	\$71.50	\$71.50
Actuator ?	1 pc	\$188.50	\$188.50
		Total Parts	\$829.40
Labour Charge			
To remove & replace damage parts	1 job	\$400.00	\$400.00
		Total Labour:	\$400.00
		Sub-Total:	\$1'229.40
		7% GST	\$86.06
		Grand Total	\$ 1'315.46

BR ✓
BR ✓
BR ✓
NEC
NEC ✓
Y ✓
X ✓

200.00

MA CF

27/3/2018

1 days

Thanks,

Jou Chung Fat
Workshop In-charge

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

ALLIED WORLD ASSURANCE COMPANY LTD Ref : CS/AWA18005471/Dtd3s2

(SINGAPORE BRANCH)
60 ANSON ROAD #08-01 (8th FLOOR)
MAPLETREE ANSON
SINGAPORE 079914

Date : 15-11-2019



Code : AWA

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	XD 8621A	Veh. Inspected	XE 2970B
Policy No.	AVF2SB0002611701	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	BEN TANG	Assign Date	22/03/2018

2. Vehicle Particulars & Condition

Make & Model	VOLVO FMX370	c.c	10837
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	YV2X1E1D6HB805520	Colour	BLUE
Odometer	57420	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	315/80 R22.5	FIRENZA	4 mm
L/H Front Tyre	315/80 R22.5	FIRENZA	4 mm
R/H Rear Tyre	315/80 R22.5 (D/D)	CONTINENTAL	4/4 4/4 mm
L/H Rear Tyre	315/80 R22.5 (D/D)	CONTINENTAL	4/4 4/4 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	17/03/2018	Inspection Date	27/03/2018
Survey held at	MEGASTONE HOLDINGS PTE LTD. 42A SUNGEI KADUT STREET 1 SIGNAPORE 729347		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: **1 Working Days**



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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. XE 2970B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
2	COVER @ \$93.60	BROKEN	187.20	187.20
1	GLASS	BROKEN	141.70	141.70
1	GLASS	BROKEN	118.30	118.30
1	HOUSING	NECESSARY	81.90	81.90
1	HOUSING	NECESSARY	40.30	40.30
1	UNIT	NOT NECESSARY	71.50	-
1	ACTUATOR	NOT NECESSARY	188.50	-
	LESS 10% DISCOUNT		-	-56.94
			829.40	512.46
LABOUR				
	TO REMOVE & REPLACE DAMAGE PARTS.		400.00	200.00
			400.00	200.00
GRAND TOTAL			1,229.40	712.46
RECOMMENDED COST OF REPAIRS (UNCONFIRMED)				712.46

Report Ref No. CS/AWA18005471/Dtd3s2

NOTE: WE HAVE OFFER OUR ADJUSTED COST OF REPAIR TO THE REPAIRER BUT THEY HAVE NOT RESPONDED ON ACCEPTANCE.

ANG BRYAN TANI

Automotive Assessor / Investigator

ADRIAN LING WAI PING

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

Licensed Appraiser

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