

ASS. REC. BY:

REF:

CS3/LPC18006671/RHd3e2

Special Instruction:

Surveyor

Rasul

ASSIGNMENT (Office)

From (Person):

ENC WOO

of

LPC

Date/Time:

10/4/18 @ 5.31pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SFB 6911A

Insured:

GZ 58344

at Workshop m/s:

Eng Soon Spray Painting

Tel:

6760 6271

of

Blk 4, Yew Tee Ind. Est 393-J woodlands

Policy No:

Claim No:

1711818 / VC00/020525

Sum Insured:

Excess:

Make of Veh:

D.O.A.

09/04/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS

/wp/

H.O.D. Endorsement:

Date/Time:

9:20am @ 11/4/18

Person Contacted:

Mr. Teo

Vehicle:

☒ IN ☐ OUT

Date/Time	Action/Instruction (X) Estimate
	SFB 6911A - X
	GZ 58344 - X
11/4-	Survey
12/4-	diamondite.

10/1/18
S. J. J. J.

Form

REF:

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SFB 6911A

at Workshop m/s ENG SOON

of Pak 4, Year reg ind est 393.5

Insured: Lompac / PR

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: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

SFB 6911A

Yr Regn:

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

Truck / Trailer or

Make:

Audi A6 2.0

C.C.

Colour:

Grey

A/C: Insured / Std / NI / NA

Sp. Reading:

162/95

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WAUZZZ4F39N030395

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / STD A/Rim or

Tyre Size:

F:

245/45ZR17

R:

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

TOYO / YOKO or

WESTLAK

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

09/04/18

D.O.I.

11/4/18 @12:10PM

Survey held at

ENG SOON

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

FRT o/s

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

Date / Time

Action / Instruction

Submit PRS Report.

RECEIVED 15 MAY 2018

Date/Time, File Pass to?

☐

Preli. Report

1) 15/5 Typist

☒

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation

) S+RS, SI

) Photos

) Others

TOTAL

450

450

Report Format:

TP-PRS

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

Nivitha (LKK Auto)

From: ERIC WOO JUN KIAT <ericwoo@lonpac.com>
Sent: Tuesday, 10 April 2018 5:31 PM
To: assignments@lkkauto.com
Cc: MT_Claim_SG
Subject: Our Ref: 17/18/18/VC00/020525 Accident involving GZ5834H & SFB6911A along Blk 514 Hougnaq Ave 10 carpark entrance on 9 April 2018
Attachments: 10042018172547.pdf

Dear Catherine,

Kindly refer to our attachment.

Please proceed to conduct a survey of the vehicle SFB 6911A on without Prejudice Basis.

We look forward to receiving your report soon.

Thank you.

Best Regards,
Eric Woo
Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6279 9253 | Fax: (65) 6296 3767

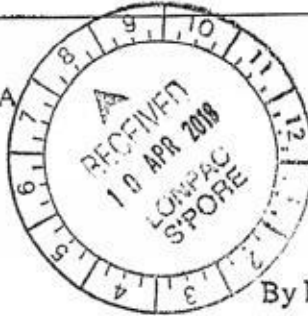
BONNIE KWOK LLC
Advocates & Solicitors

101A Upper Cross Street
#08-12 People's Park Centre
Singapore 058358

Tel : (65) 6536 6026
Fax : (65) 6536 2279
[Not for service of court documents]
GST Reg No. 2012035472

Your Vehicle: GZ 5834 H
Our Vehicle: EngSoon-SFB 6911 A

Date: 10 April 2018



M/s LonPac Insurance Bhd
No. 300 Beach Road
#17-04/07 The Concourse
Singapore 199555

By Fax 6296 3767 only

Dear Sirs,

ACCIDENT INVOLVING SFB 6911 A & GZ 5834 H ON 9 APRIL 2018

We refer to the above matter.

We hereby give you 2 days' notice to conduct a pre-repair inspection of vehicle SFB 6911 A at M/s Eng Soon Painting Services, Block 4 Yew Tee Industrial Estate 393-J Woodlands Road Singapore 677978.

Your faithfully

BONNIE KWOK
c.c. Client

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 refuse 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 09/04/2018 12:40
 Date Of Accident 09/04/2018 06:50
 Exact Location Of Accident BLK 514 HOUGANG AVE 10, CARPARK ENTRANCE AREA
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFB6911A
 Insured/Policyholder
 Name Of Registered Owner TAN BENG CHONG
 NRIC No S1782312D
 Email Address EEPL@EXCLUSIVE-ENGRG.COM
 Mobile Phone No (LOCAL) +65-90406911
 Alternative Phone No OFFICE-90406911
 Vehicle Particulars
 Manufacturer AUDI
 Model A6 2.0T FSI MU CVT ABS D/AB HID 2WD 4DR
 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 PRIVATE CAR
 Insurance Company
 Name of Insurance Company AXA INSURANCE PTE LTD
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number GA126157/1
 Cover Note Number
 Driver
 Name of Driver TAN BENG CHONG
 NRIC No S1782312D
 Date Of Birth 19/10/1966
 Occupation INDOOR
 Date Of Driving Pass 18/07/1991
 Driving Experience 26 YEARS AND 8 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-90406911
 Fax Number
 Contact Number OFFICE-90406911
 Mail Address EEPL@EXCLUSIVE-ENGRG.COM

Address

Postcode

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? NO

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) 3

Passenger 1 NAME: : BROTHER

GENDER: : MALE

Passenger 2 NAME: : SISTER

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 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 GZ5834H

Vehicle Make/Model/Colour OPEL COMBO

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

SKETCH PLANIMPORTANT 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 willful 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 to 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 purposes 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:

09/04/18

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

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

SKETCH PLAN

Refer to sketch Plan A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 09/04/18 at about 6.00 a.m., I was driving my vehicle SFB 6911A to leave when a car park a vehicle of Q26834-H came in from the car park did not stop at the stop line and bang into my vehicle SFB 6911-A right side cause my head light, bumper & front portion of my vehicle damage.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

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

DECLARATION

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

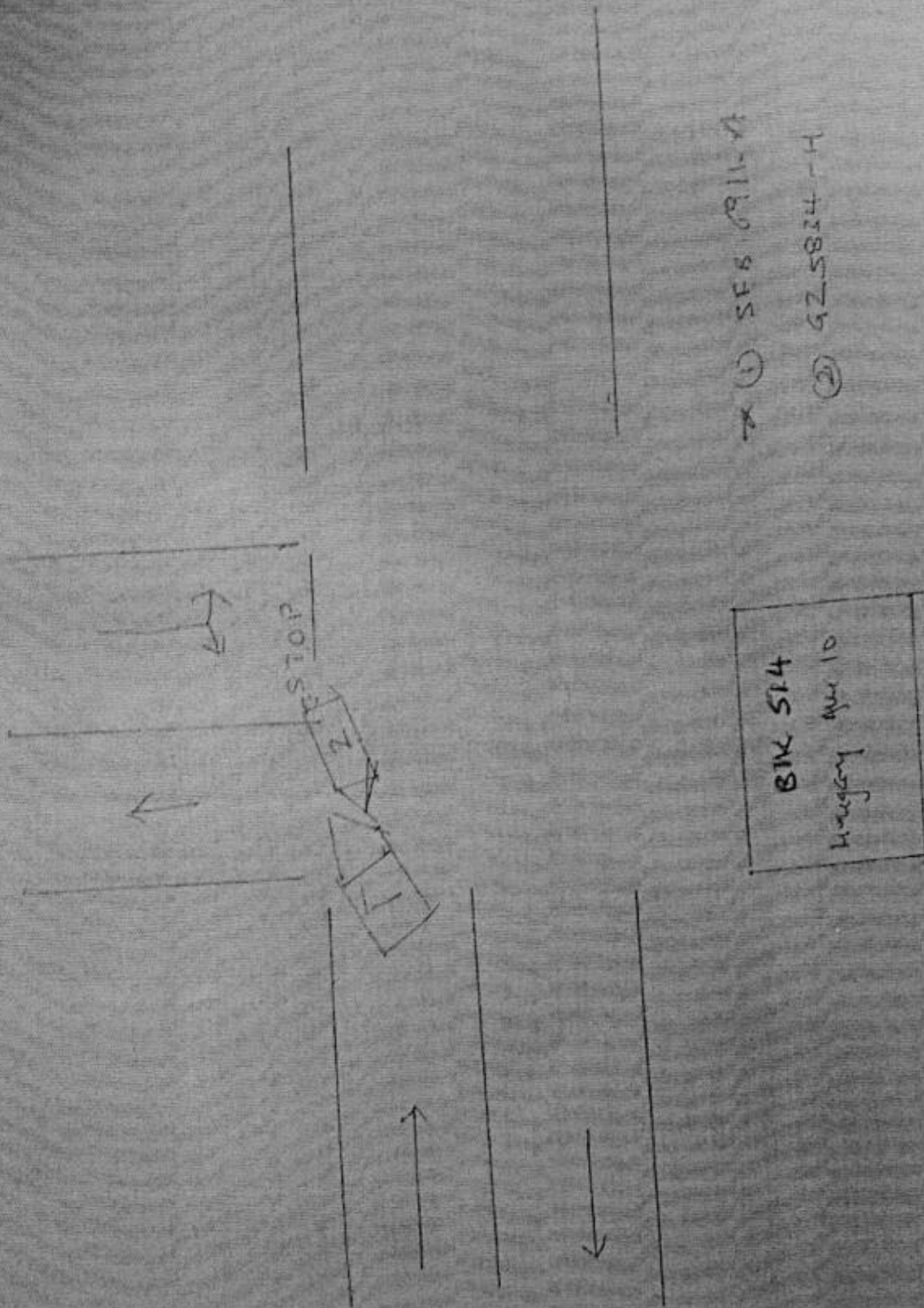
Policyholder's signature
Date & Time

09/04/18

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

Reporting Centre Personnel's Signature
Name:
Nric/Fin No. Joh Khar Khan

Sketch Plan A



① SES 0911-11
② GZ-5824-H

B1K 514
Hanging Apr 10

Outline

**LKK Auto Consultants Pte Ltd**

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT

LONPAC INSURANCE BHD

Ref: CS3/LPC18006671/R1td3e2

300 BEACH ROAD #17-04/07 THE CONCOURSE
SINGAPORE 199555

Date: 18-05-2018



Code: LPC2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	GZ 5834H	Veh. Inspected	SFB 6911A
Policy No.		Coverage (\$)	0.00
Claim No.	17/18/18/VC00/020525	Excess (\$)	0.00
Assign From	ERIC WOO	Assign Date	10/04/2018

2. Vehicle Particulars & Condition

Make & Model	AUDI A6 2.0	c.c	1984
Engine No.	HIDDEN	Year of Reg.	2009
Chassis No.	WAUZZZ4F39N030395	Colour	GREY
Odometer	162195 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	245/45Z R17	WEST LAKE	6 mm
L/H Front Tyre	245/45Z R17	WEST LAKE	6 mm
R/H Rear Tyre	245/45Z R17	WEST LAKE	6 mm
L/H Rear Tyre	245/45Z R17	WEST LAKE	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION.	
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5. General Information

Accident Date	09/04/2018	Inspect Date / Time	11/04/2018 (12:10 PM)
Survey held at	ENG SOON PAINTING SVC BLK 4 YEW TEE IND EST 393 - J WOODLANDS ROAD SINGAPORE 677969		

5a. Remarks

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.
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Report Ref No. CS3/LPC18006671/R1td3e2

Inspected By

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT (RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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