

CLASS. REC. BY:

REF:

CS3 / MS (18007266 / GZ46)

Special Instruction:

SURVEYOR
Merrimen

GZ

ASSIGNMENT (Office)

From (Person):

Katherine Wong

of

MSI

Date/Time:

19/04/2018 9:25am

Estimated Cost:

Bill to:

OD / TP / AWS / TP RES / OD RES / EVA / EV / MV / CS

To Inspect Vehicle No:

GZ 6396Z

Insured:

SJT 5473L

at Workshop m/s

United SG Automobile

Tel:

6747 4454

of

53 Ubi Ave 1 #01-56

Policy No:

A290394110 QMY

Claim No:

555901

Sum Insured:

Excess:

Make of Veh:

D.O.A.

18/04/2018

(Client's Record)

CA / REV / REP / REV 24 HRS Wp

H.O.D. Endorsement:

Date/Time:

19/04/2018 9:59am

Person Contacted:

Vicky

Vehicle:

IN/OUT

Date/Time	Action/Instruction (X) Estimate
	GZ 6396Z - NA / INCI 8007177 / H4
	SJT 5473L - X
20/4/18	Dismantled
24/4/18	After Repair

Dur: 180418

0281 12

PRS XMR

REF: MS167

ASSIGNMENT

(-2021)

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop m/s United SG Auto
 of _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: 626396Z Yr Regn: 18 Jul 2006
 Type: M.Car / M.Cycle / Bus (V) / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Toyota Hiace c.c. 2494
 Colour: Silver A/C: Insured / Std / NI / NA
 Sp. Reading: 307437 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: ITFH 502P6 000 50710
 Gen. Cond: (C) / Fair / Poor / Burnt
 Steering: (C) / Jammed / Leaked / Burnt or _____
 Brake: (C) / Jammed / Leaked / Burnt or _____
 Modi: (N) / S/Rim / STD A/Rim or _____

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.



Tyre Size: F: 195 R 15
 R: 11
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or _____

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
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Front _____ Rear _____
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. _____ D.O.I. 19-04-18
 Survey held at w/s 3:50pm
 Des. of Damages: (C) / Frt / Rear / O/S / N/S / U/C / Rooftop or
and o/s Rear.
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>Estimated repair range \$3,500 - \$4,300</u>
<u>21/6/18</u>	<u>submit PRS report.</u>
	<u>MV 22-30K</u>
	<u>7/6/18</u>

Date/Time, File Pass to? : Preli. Report : Final Report

1) _____
 Date/Time, File Return to? _____

2) _____

Report Format : ARC

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

Days Of Repair: _____
 Resurvey No. of Trip: 2 Survey Fee: _____
 Transportation: _____

Add Fee: : Site Insp (\$ _____) : S + RS (\$ _____)
 : Interview (\$ _____) : Photos
 : Tech. Invs (\$ _____) : Others
 : Weekend (\$ _____)

TOTAL _____

20/6/2018

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	18 Apr 2018		19 Apr 2018 09:25 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS		[Created by insurer]
Insured:	CHAN LUP KWOK, ID: S1707420B	
Main Claimant:	VODA POOL PTE LTD, Co. Reg. No.: 201434883H	
Vehicle Reg. No.:	GZ6396Z	Date of Loss: 18/04/2018 08:00 - :59 [141 Months From LTA Reg Date (Man Yr)]
Claim Type:	TP / 555901	Policy/Cover Note No.: A29039410QMY (Comprehensive) Coverage: 19/10/2017 - 18/10/2018
Vehicle Reg. No. (Insured):	SJT5473L	Policy No. (Claimant): Excess:
Repairer:	United SG Automobile Pte Ltd (HQ) 53 Ubi Avenue 1, #01-56 Paya Ubi Industrial Park, 408934 Ubi - Tel: 9007 7556	
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Katherine Wong Chew Shong - 6594 2544]	
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 20/04/2018]	
Driver/Custodian (Insured):	EMILY CHAN MUN YI (), NRIC: S9330548E, Tel: +6588266304	

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.													

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	18/04/2018 13:55
Date Of Accident	18/04/2018 08:40
Exact Location Of Accident	PIE TWDS CHANGI B4 CTE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ6396Z
Insured/Policyholder	
Name Of Registered Owner	VODA POOL PTE LTD
Co Reg No	201434883H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81837637

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5090871396
Cover Note Number	-

Driver

Name of Driver	VEERAMUTHU VEERABATHIRAN
NRIC No	G3325312K
Date Of Birth	28/07/1993
Occupation	OUTDOOR
Date Of Driving Pass	18/12/2017
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81837637
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 843 WOODLANDS ST 82 #09-95
Postcode	730843
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	CHAIN 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?	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: : RAMESH A/L PALANI GENDER: : MALE
Passenger 2	NAME: : BALAJ A/L GUNALAN 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

PLEASE REFER TO ATTACHED STATEMENT.

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	SJT5473L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBE6470L
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)

DETAILS OF INJURED PERSON 1

Name VEERAMUTHU VEERABATHIRAN
Approximate Age
Injuries Sustain NECK
Injured person in which vehicle? GZ6396Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name RAMESH A/L PALANI
Approximate Age
Injuries Sustain BACK
Injured person in which vehicle? GZ6396Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 3

Name BALAJ A/L GUNALAN
Approximate Age
Injuries Sustain LEG
Injured person in which vehicle? GZ6396Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Accident 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 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:
NRIC/NTN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	4883H
Vehicle Details	
Vehicle No.:	GZ6396Z
Vehicle to be Exported:	No
Intended De-registration Date:	07 Jun 2018
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	2KD1477809
Chassis No.:	JTFHS02P600050710
Maximum Power Output:	-
Open Market Value:	\$23,810.00
Original Registration Date:	18 Jul 2006
First Registration Date:	18 Jul 2006
Transfer Count:	4
Actual ARF Paid:	\$1,191.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	17 Jul 2021
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$22,247.00
COE Rebate Amount:	\$13,838.00
Total Rebate Amount:	\$13,838.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 07 Jun 2018

OK

Dep - 9520/yr
793/mths

MV 29K - 30K

[Handwritten signature]

7/6/18

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	4883H
Vehicle Details	
Vehicle No.:	GZ6396Z
Vehicle to be Exported:	No
Intended De-registration Date:	20 Apr 2018
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	2KD1477809
Chassis No.:	JTFHS02P600050710
Maximum Power Output:	-
Open Market Value:	\$23,810.00
Original Registration Date:	18 Jul 2006
First Registration Date:	18 Jul 2006
Transfer Count:	4
Actual ARF Paid:	\$1,191.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	17 Jul 2021
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$22,247.00
COE Rebate Amount:	\$14,416.00
Total Rebate Amount:	\$14,416.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 20 Apr 2018

OK

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


CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	18 Apr 2018		19 Apr 2018 09:25 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 insurer]							
Insured:	CHAN LUP KWOK , ID: S1707420B								
Main Claimant:	VODA POOL PTE LTD , Co. Reg. No.: 201434883H								
Vehicle Reg. No.:	GZ6396Z	Date of Loss:	18/04/2018 08:00 - :59 [141 Months From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 555901	Policy/Cover Note No.:	A29039410QMY (Comprehensive) Coverage: 19/10/2017 - 18/10/2018						
Vehicle Reg. No. (Insured):	SJT5473L	Policy No. (Claimant):							
		Excess:							
Repairer:	United SG Automobile Pte Ltd (HQ) 53 Ubi Avenue 1, #01-56 Paya Ubi Industrial Park, 408934 Ubi - Tel: 9007 7556								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Katherine Wong Chew Shong - 6594 2544]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Imm.Advice due 20/04/2018]								
Driver/Custodian (Insured):	EMILY CHAN MUN YI (), NRIC: S9330548E, Tel: +6588266304								
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

***GZ6396Z (555901)**
[SJT5473L]
TP
VODA POOL PTE LTD
Apr 18 2018 8:00AM
[CHAN LUP KWOK]
United SG Automobile Pte Ltd

View

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	19/04/18 08:11	Accident Statement From: SC - Reg. No: SJT5473L, Claimant: CHAN LUP KWOK	 Load HTM	<input type="checkbox"/>







Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
2	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
3	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
4	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
5	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
6	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
7	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
8	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
9	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
10	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
11	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
12	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
13	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
14	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
15	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
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18	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
19	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
20	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
21	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
22	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
23	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
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25	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
26	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
27	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
28	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
29	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
30	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
31	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>

Assessment Reports				<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
32	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
33	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
34	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
35	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
36	20/04/18 15:20	General View	 Load JPG	<input checked="" type="checkbox"/>
37	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
38	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
39	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
40	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
41	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
42	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
43	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
44	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
45	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
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52	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
53	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
54	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
55	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
56	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
57	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
58	28/04/18 12:25	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
59	28/04/18 12:26	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
60	28/04/18 12:26	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
61	28/04/18 12:26	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
62	28/04/18 12:26	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
63	28/04/18 12:26	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>

Documentation

1 per page



No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	19/04/18 08:11	GZ6396Z E FILE REPORT. From:SC - Reg. No: SJT5473L, Claimant: CHAN LUP KWOK	 Load PDF	
2	19/04/18 08:12	PRI Notice	 Load PDF	
3	19/04/18 09:25	TP Disagree on SJE & our reply	 Load PDF	
4	20/06/18 12:18	LOD- TP Details - DV- Repair bill- Rental - Survey Bill	 Load PDF	
5	20/06/18 12:18	Survey Report	 Load PDF	
6	20/06/18 12:18	Survey Photo	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST

Reset

Save

Print

There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: Handling Insurer

Note: Remarks are private unless you show it to other parties.

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Singapore 408933

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VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/MSG18007266/GZ4BS2

Date: 22/06/2018

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: A29039410QMY

Claimant Vehicle No : GZ6396Z

Insured Vehicle No : SJT5473L

Date of Loss: 18/04/2018

Nature of Claim: TP

Claim No: 555901

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **GZ6396Z**

Make & Model: TOYOTA HIACE, 3.0 D (M)

Engine No: 2KD1477809

Reg. Date: 18/07/2006 (Man. Year: 2006)

Chassis No: JTFHS02P600050710

Colour: Silver

Odometer: 307437 km

Engine Capacity: 2494 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): **Market Value/New Car Price**

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Good Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 195 R15

Rear Tyre Size: 195 R15

Front Left Side: Yokohama 6 mm

Rear Left Side: Yokohama 6 mm

Front Right Side: Yokohama 6 mm

Rear Right Side: Yokohama 6 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 (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 19/04/2018

Date Inspected: 19/04/2018 Inspected At:

United SG Automobile Pte Ltd (HQ)
53 Ubi Avenue 1, #01-56 Paya Ubi Industrial Park
Singapore 408934

Estimated Period of Repair: 0.0 days

Adjuster: XING GUO QIANG

Manager: Ho Zhao Tian

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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$3,500.00 - \$4,300.00

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 22 Jun 2018)
Parts:	N/A TOYOTA HIACE 3.0 D (M) (Model not available in database)
Labour:	Repairer's (Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for GZ6396Z)
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 >