

22/03/2003

SS REC. BY:

REF:

CS3/GAU 8008295 / G24602

Special Instruction:

Surveyor

G2

ASSIGNMENT (Office)

From (Person):

Rachel Tun

of

GAL

Date/Time: 07052018 1031am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKA 7077Y

Insured:

SDJ 44Z

at Workshop m/s

Motor Intel

Tel:

8838 3318

of

13 Kaka Bulat Rd 4 #01-20

Policy No:

Claim No:

SDJ 44Z

Sum Insured:

Excess:

Make of Veh:

D.O.A. 04052018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

07052018 1136am

Person Contacted:

Wilson

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	SKA 7077Y - X
	SDJ 44Z - X
8/5/18	Dismantle
14/5/18	After repair

Est Range & Repair days

Survivor

REF:

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s Motor Intel
 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.

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKA 7071Y Yr Regn: 2011 / Mar 25
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: BMW 531 2.5 AT c.c. 2497

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

Sp. Reading: 14211 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBAFP32060C864018

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/55 R17
 R: 17

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

TOYO / YOKO or Continental

Front

R/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 04052018

Survey held at Motor Intel

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

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

Date / Time Action / Instruction

\$3000 - \$4000.

RECEIVED 27 SEP 2018

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Survey Fee: 100

Transportation: _____ \$ + RS. _____ \$

Photos

Others

TOTAL

100

Report Format : PRQ

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

Catherine Chong (LKK Auto)

From: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Sent: Monday, 7 May, 2018 10:31 AM
To: Claims
Cc: LKK Assignments
Subject: RE: PRI - SKA7077Y v SDJ44Z (GA) - DOA 4 May 18
Attachments: MIA - Pre-Repair Inspection Notice (GAI)(SKA7077Y).pdf

Without Prejudice

Dear Sir

We are unable to agree with your surveyors. Will appoint LKK to conduct TP PRI.

Dear LKK

Please accept assignment. Attached document for reference.

Regards

Rachel Tan

Executive, Motor Claims, Great American Insurance Company

Tel: 6804 7846

From: Claims <claims@esthermoey.com>
Sent: Monday, May 7, 2018 10:27 AM
To: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Subject: [External] RE: PRI - SKA7077Y v SDJ44Z (GA) - DOA 4 May 18

Your Attention is Drawn to the Confidentiality Notice Below:

=====

Dear sirs,

We refer to your email of even date.

Our client objects appointing your surveyors as a single joint expert.

We propose on the following surveyors named in the list below to conduct the joint pre-repair survey as a single joint expert:

1. Andrew How
2. Ho Joo Loong, Danny
3. Lee Kok Weng
4. Seah Kwang Boon
5. Winson Goh
6. S. Kumanan
7. Cheong K H

Please let us know within two (2) working days whether you are agreeable to the appointment of any of the above motor surveyors as a single joint expert.

Thank you.

Yours sincerely,

Justin Yap

Secretary to Esther Moey
Amy Lim Law Practice
claims@esthermoey.com

Tel: (+65) 9625 8742 (Justin) / (+65) 9639 3110 (Esther)
Fax: (+65) 6491 5638

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From: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Sent: Monday, 7 May, 2018 10:21 AM
To: Claims <claims@esthermoey.com>
Subject: PRI - SKA7077Y v SDJ44Z (GA) - DOA 4 May 18

Without prejudice

Dear Sir/ Madam

We append the following list of our panel surveyors:-

1. AJAX Adjusters & Surveyors Pte Ltd
2. L.B.S. Automotive Appraisal Pte Ltd
3. Priority Services
4. RT Appraisal Pte Ltd
5. LKK Auto Consultants
6. JP KNIGHTS PTE LTD

Kindly let us know which SJE is selected and furnish the estimates for the survey to be carried out.

Regards
Rachel Tan
Executive, Motor Claims, Great American Insurance Company
Tel: 6804 7846

From: Claims <claims@esthermoey.com>
Sent: Friday, May 4, 2018 3:32 PM
To: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Subject: [External] Our client's vehicle no. SKA7077Y; Your insured's vehicle no. SDJ44Z - PRI Notice
Importance: High

Your Attention is Drawn to the Confidentiality Notice Below:

=====

Dear Rachel,

We refer to our PRI Notice dated 4 May 2018 for your urgent attention.

Thank you.

Yours sincerely,

Justin Yap

Secretary to Esther Moey
Amy Lim Law Practice
claims@esthermoey.com

Tel: (+65) 9625 8742 (Justin) / (+65) 9639 3110 (Esther)
Fax: (+65) 6491 5638

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> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	2510H
Vehicle Details	
Vehicle No.:	SKA7077Y
Vehicle to be Exported:	No
Intended De-registration Date:	20 Jul 2018
Vehicle Make:	B.M.W.
Vehicle Model:	523I 2.5 AT ABS D/AB 2WD 4DR GAS/D
Primary Colour:	Silver
Manufacturing Year:	2011
Engine No.:	07017681N52B25AF
Chassis No.:	WBAFP32060C864048
Maximum Power Output:	150.0 kW (201 bhp)
Open Market Value:	\$42,044.00
Original Registration Date:	25 Mar 2011
First Registration Date:	25 Mar 2011
Transfer Count:	1
Actual ARF Paid:	\$42,044.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Mar 2021
PARF Rebate Amount:	\$25,226.00
Intended COE Rebate Details	
COE Expiry Date:	24 Mar 2021
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$57,002.00
COE Rebate Amount:	\$15,261.00
Total Rebate Amount:	\$40,487.00

The information contained herein is correct as at 20 Jul 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	04/05/2018 14:58
Date Of Accident	04/05/2018 08:50
Exact Location Of Accident	PIE TUAS AFTER BKE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA7077Y
Insured/Policyholder	
Name Of Registered Owner	ATLANTIS TAY YEOW KWANG
NRIC No	S6822510H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90999699
Alternative Phone No	OTHERS-90999699

Vehicle Particulars

Manufacturer	BMW
Model	523I 2.5 AT ABS D/AB 2WD 4DR GAS/D
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	ATLANTIS TAY YEOW KWANG
NRIC No	S6822510H
Date Of Birth	09/06/1968
Occupation	INDOOR
Date Of Driving Pass	14/02/1994
Driving Experience	24 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90999699
Fax Number	
Contact Number	OTHERS-90999699
Email Address	NOEMAIL

Address	BLK 681C WOODLANDS DRIVE 62 #12-39
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 TO REAR
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)	1

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	SDJ44Z
Vehicle Make/Model/Colour	TOYOTA LEXUS ES250 LUXURY AUTO
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)	

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.

X
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: *Subramaniam*
NRIC/FIN No.: *S2003714*

Sketch Plan #2

SKETCH PLAN



VEH A \rightarrow SKA नमनय.
Smw J. J. J. J. J.


VEH B 7 SOJ 442.
Laws 460.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 04/05/2018 at about 08:45AM, I was travelling along
PIE 7 Tuss direction on the Lane 1. Traffic was heavy
My front vehicle slow down as I slow down too. Out of
sudden vehicle B cutt slip on time and hit onto the
rear of my vehicle A.

DECLARATION

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

✓ 
Policyholder Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: *Subram*
NRIC/FIN No: *S8042377A*


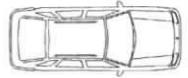
**LKK Auto Consultants Pte Ltd**

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				
GREAT AMERICAN INSURANCE COMPANY 3 TEMASEK AVENUE #16-01 CENTENNIAL TOWERSINGAPORE 039190			Ref: CS3/GAI18008295/Gz4be2 Date: 28-09-2018 Code: GAI	
				
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SDJ 44Z	Veh. Inspected	SKA 7077Y	
Policy No.		Coverage (\$)	0.00	
Claim No.	SDJ 44Z	Excess (\$)	0.00	
Assign From	RACHEL TAN	Assign Date	07/05/2018	
2. Vehicle Particulars & Condition				
Make & Model	B.M.W. 523I 2.5 AT	c.c	2497	
Engine No.	HIDDEN	Year of Reg.	2011	
Chassis No.	WBAFP32060C864048	Colour	SILVER	
Odometer	142911 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	225/55 R17	CONTINENTAL	6 mm	
L/H Front Tyre	225/55 R17	CONTINENTAL	6 mm	
R/H Rear Tyre	225/55 R17	CONTINENTAL	6 mm	
L/H Rear Tyre	225/55 R17	CONTINENTAL	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
5. General Information				
Accident Date	04/05/2018	Inspect Date / Time	07/05/2018 (12:23 PM)	
Survey held at	MOTOR INTEL - 13 KAKI BUKIT RD 4 #01-20			
Repairer	-			
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. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$3,000-\$4,000				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days		

Report Ref No. CS3/GAI18008295/Gz4be2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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