

REF:

REF: CS/C7118008586/G903024

Special Instruction:

Survival

• Maximum

6Q

ASSIGNMENT (Office)

From (Person):

Jowyn Tay

of

CTL

Date/Time:

10052018 914am

Estimated Cost:

Bill to:

OD / (FI) / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SKW 1576Y

Insured:

SDE 2300Y

at Workshop m/s

All swell meter

Tel:

6679 1146

of

25 Defu Lane 9

Policy No:

DMPC SN 3021 631807

Claim No:

94m18D02344(02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

07052018

CA / REV / REP. / REV 24 HRS 10/11

H.O.D. Endorsement

Date/Time:

10052018

9.46cm

Person Contacted:

Ben

Vehicle ~~IN~~OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SKW 1576Y - x
	SDIE 2300Y -x

Bil. Qi

ASSIGNMENT

From

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

Allswell motor

of

Insured:

Policy No.

Claims No.

Sum Insured:

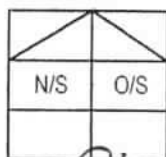
Excess:

(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 Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

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

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SKW1576Y

Yr Regn:

20 Oct 2015

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

Truck / Trailer or

Make:

Toyota Altis

c.c

1598

Colour

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

287560

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MRO53 REH1045 22501

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:

205/55R16

R:

11

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

TOYO / YOKO or

Kapsen

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

10-05-18

Survey held at

w/s

11:30

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

09/1

Insured \$ 2768.2 with Ben. (Red 02392.80, 46%)

RECEIVED 13 JAN 2020

10/1/2020

Date/Time, File Pass to?



Preli. Report

1) 12/1 12/1/2020



Final Report

Date/Time, File Return to?

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Insp (\$



Meal end (\$

Survey Fee:

270

Transportation:

S + RS. SI

Photos

Others

TOTAL

270

Report Format:

MER-TP

Lump Sum / F.P.S. (\$

2768.20

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	09 May 2018		10 May 2018 09:14 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	----------

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	TEH HWEE HUAT, ID: S68040453		
Main Claimant:	ALLSWELL LEASING & LIMOUSINE PTE. LTD., Co. Reg. No.: 201432541Z		
Vehicle Reg. No.:	SKW1576Y	Date of Loss:	07/05/2018 20:00 - :59
Claim Type:	TP / SNM18D02344C02	Policy/Cover Note No.:	DMPCSN3021631802 (Comprehensive)
Vehicle Reg. No. (Insured):	SDE2300Y	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	Allswell Motor Traders (HQ) 25 Defu Lane 9, 539266 Defu Lane - Tel: 66791146		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 21/05/2018]		
Adj Asg. Remarks:	NO EST, ASSIGN XING GUO QIANG AS SJE.		

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	08/05/2018 10:43
Date Of Accident	07/05/2018 20:00
Exact Location Of Accident	WOODLANDS AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW1576Y
-----------------------------	----------

Insured/Policyholder

Name Of Registered Owner	ALLSWELL LEASING & LIMOUSINE PTE.LTD.
Co Reg No	201432541Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64625405

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 L CVT (A)
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5085700497-01
Cover Note Number	

Driver

Name of Driver	CECILIA LOW
NRIC No	S6971834E
Date Of Birth	22/02/1969
Occupation	OUTDOOR
Date Of Driving Pass	06/02/1995
Driving Experience	23 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	+65-97774629
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 11 WOODLANDS DRIVE 72 #05-32
Postcode	738094
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER & LEASEE
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?	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: : CHINESE PASSENGER GENDER: : FEMALE
Passenger 2	NAME: : FATHIN (MALAY PASSENGER) GENDER: : FEMALE

Details of Police Action

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

Circumstances of Accident

Please refer to Police Report No. T/20180508/2001

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	FATHIN
Phone Number	91692660
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDE2300Y
Vehicle Make/Model/Colour	MITSUBISHI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TEH WEI HAN

NRIC/Passport Number	S9738037F
Contact Number	97571870
Address	BLK 873 WOODLANDS ST 81 #09-264
Postcode	730873
Insurance Company Name	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	FATHAN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKW1576Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	CECILIA LOW
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKW1576Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 11 WOODLANDS DRIVE 72 #05-32
Postcode	738094

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 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 by interested parties.
7. By the lodging 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:

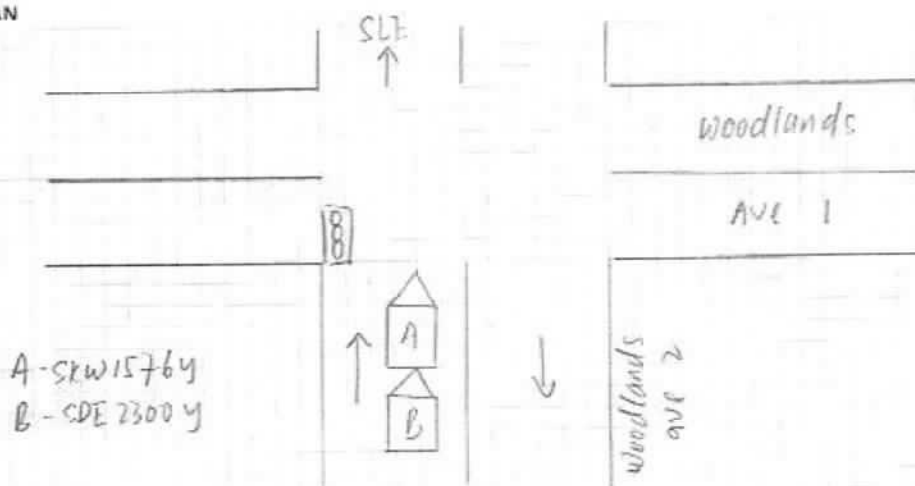


Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Sketch Plan #2

SKETCH PLAN



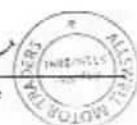
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report NO: 7/20180508/2001

DECLARATION

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

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.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20180508/2001

1 of 4

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No: T/20180508/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/05/2018 00:10		Vide Report No.:		Station Diary No.: 1	
Informant's Particulars					
Name of Informant: CECILIA LOW			Address: APT BLK 11 WOODLANDS DRIVE 72 #05-32 SINGAPORE 738094		
ID Type / ID No.: NRIC NO / 66971834E			Contact No.: Home/Office: Mobile: 97774629		
Nationality: MALAYSIAN			Email:		
Sex: Female	Age: 49	Date of Birth: 22/02/1969	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Grab Driver			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/05/2018 20:00	Type of Location: Straight Road
Location: Junction of Road 1 and Road 2 WOODLANDS AVENUE 2 WOODLANDS AVENUE 1 Lane 3 towards SLE near to bus-stop of Blk 511				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SDE2300Y	Car				Slightly Damaged	1
SKW1578Y	Car				Slightly Damaged	2

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report


**SINGAPORE
POLICE FORCE**


T/20180508/2001

2 of 4

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No: T/20180508/2001

CONTINUATION OF REPORT

Driver			
Name	TEH WEI HAN		ID No. S9738037F
Related Vehicle	SDE2300Y (Car)		Contact No. 97571870
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	CECILIA LOW		ID No. S6971834E
Related Vehicle	SKW1576Y (Car)		Contact No. 97774629
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	FATHIN		ID No. NIL
Related Vehicle	SKW1575Y (Car)		Contact No. 91692660
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

Brief Details.

On the 07/05/2018 at about 2000hrs, I was travelling on lane 3 along Woodlands Avenue 2 towards SLE. I was sending my passenger. Subsequently, I stopped my vehicle at the junction of Woodlands Avenue 1 as the traffic light was red. Out of a sudden, one vehicle collided onto the rear portion of my vehicle. The driver of the vehicle then came out and we exchanged particulars and left.

At about 2100hrs, I called my passenger to check if she was okay. However I was told that she had a stiff neck due to the accident. I also feel pain on my lower back and neck area but I have not seen a doctor yet. Therefore I decided to make a police report first.

Police Report



**SINGAPORE
POLICE FORCE**



T/20180508/2001

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737690
Tel No: 1800-7579999

3 of 4

Report No. T/20180508/2001

CONTINUATION OF REPORT

Police Report



SINGAPORE
POLICE FORCE



T/20180508/2001

4 of 4

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20180508/2001

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Staff Sgt TOH ZI GUI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 SITIMARSITA BINTE BOHARI

Contact No.: 65476219

Signature Of Informant:

Date/Time:

08/05/2018 00:10

Classification Of Case:

Authentication Stamp

NP168

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0030 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
ULN: S665802036 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MAMT18059737 Vehicle Registration No: SW1576Y
Name (as shown in NRIC) : TANG CHAI YEE NRIC/FIN/Passport No : G 2554703P
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 25 DEFU LANE 9 Singapore (539266)
Contact (Tel) : 66791146 Mobile No. : _____
Email Address : account5@allswellmotor.com.sg
Date of Accident : 07/05/2018 Time of Accident : 20:00
Place of Accident : WOODLANDS AVE 2
Insurance Company : NTUC INCOME

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Police report is attached

Chen
Policyholder / Driver's Signature

Date: 08/05/18



Chen
Reporting Centre Personnel's Signature

Name: Tang Chai Yee

NRIC/FIN No.: _____

Date: 08/05/18

Allswell Motor Traders

5 Defu Lane 9, Singapore 539266

tel: +65 6679 1146

email: ben@allswellmotor.com.sg

part by part.

before paint photos.

Guo Qiang - 82880282

10/5/18

(3rd party claim against China Insurance SDE2300Y)

Estimate repair

Vehicle No.

Make & Model

Chassis No.

Date of survey

SKW 1576Y

Toyota Altis

- 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 () is allowed
 - Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Engine No.

Acknowledged by Repairer

Signature:

Date:

BEN

19-10-2025

S/No	Part Description	Qty	Unit Price	Price	Disposition by
01.	Tailgate / VT	01	\$997.6	/	* repair
02	Rear bumper / RL	01	\$1,098.0	/	
03	End panel X Repair	01	\$531.0	X	
04	Tailgate hinges @ \$79.2ea X	02	\$158.4	X	Repair.
05	Rear reinforcement bar	01	\$479.0	X	* repair
	Special Net				2095.6
01	Clips for bumper @ \$11.0ea	02	\$22.0	/	25% 1571.7
					2117.6
					25% 1588.2
	<u>Labour Prescription</u>				
01	Dismantle / Assembly of tailgate & rear bumper	01	\$260.0	100	
02	Welding / Panel beating of rear end panel	01	\$600.0	200	
03.	Anti-rust spray paint	01	\$40.0	/	
04	Spray painting on affected area (tailgate & rear bumper)	01	\$660.0	600	
03.	Panel beating of rear tailgate	01	\$260.0	200	
	\$ weld drop				
04	To make / drill holes for sensor mounting X make	01	\$60.0	40	
	winner good				

ote: If any of the quoted parts are recommended to be repaired, then an additional labour cost will be charged accordingly under supplementary.

2768.2

Panel beating of rear bumper at \$60.0 X

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	09 May 2018		10 May 2018 09:14 Edit Adj Rpt	\$2,768.20 Edit Estimates	\$2,768.20 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured: TEH HWEE HUAT , ID: S68040453									
Main Claimant: ALLSWELL LEASING & LIMOUSINE PTE. LTD. , Co. Reg. No.: 201432541Z									
Vehicle Reg. No.: SKW1576Y		Date of Loss: 07/05/2018 20:00 - :59 [30 Months and 17 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / SNM18D02344C02		Policy/Cover Note No.: DMPCSN3021631802 (Comprehensive)							
Vehicle Reg. No. (Insured): SDE2300Y		Policy No. (Claimant):							
		Excess: \$0.00							
Repairer: Allswell Motor Traders (HQ) 25 Defu Lane 9, 539266 Defu Lane - Tel: 66791146									
Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 21/05/2018]									
Adj Asg. Remarks: NO EST, ASSIGN XING GUO QIANG AS SJE.									
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

*SKW1576Y (SNM18D02344C02)
[SDE2300Y]

TP

ALLSWELL LEASING & LIMOUSINE PTE. LTD.



































May 7 2018 8:00PM











[TEH HWEE HUAT]

Allswell Motor Traders














Upload Documents | Upload Photos | Compose New Letter

View View in Browser v

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)	Thumbnail	Print
1	08/05/18 18:06	Accident Statement	 Load HTM	<input type="checkbox"/>
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)	Thumbnail	Print
1	08/05/18 17:51	Accident Photo [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
2	08/05/18 17:51	Accident Photo [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
3	08/05/18 17:51	Accident Photo [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
4	08/05/18 17:51	Accident Photo [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
5	08/05/18 17:51	Accident Photo [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
6	08/05/18 17:51	Accident Photo [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
7	08/05/18 17:51	Accident Photo [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
2	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
3	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
4	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
5	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
6	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
7	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
8	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
9	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
10	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
11	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
12	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
13	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
14	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
15	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
16	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
17	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
18	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
19	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
20	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
21	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
22	09/01/20 16:32	General View	 Load JPG	<input checked="" type="checkbox"/>
23	09/01/20 16:32	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
24	09/01/20 16:32	Odometer Reading	 Load JPG	<input checked="" type="checkbox"/>
25	09/01/20 16:32	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
26	09/01/20 16:32	Dismantled Parts	 Load JPG	<input checked="" type="checkbox"/>
27	09/01/20 16:32	Dismantled Parts	Load JPG	<input checked="" type="checkbox"/>
28	09/01/20 16:32	Dismantled Parts	Load JPG	<input checked="" type="checkbox"/>
29	09/01/20 16:33	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)	Thumbnail	Print
30	09/01/20 16:33	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
31	09/01/20 16:33	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
32	09/01/20 16:33	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)	Thumbnail	Print
1	08/05/18 17:46	Sketch Plan [Linked Accident Report Documents]	 Load TIF	
2	08/05/18 17:46	Sketch Plan #2 [Linked Accident Report Documents]	 Load TIF	
3	08/05/18 17:50	CERTIFICATE OF INSURANCE [Linked Accident Report Documents]	 Load TIF	
4	08/05/18 17:50	OWNER'S NRIC AND DRIVING LICENCE [Linked Accident Report Documents]	 Load TIF	
5	08/05/18 17:50	DRIVER'S NIRC AND DRIVING LICENCE [Linked Accident Report Documents]	 Load TIF	
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	10/05/18 09:13	PRS	 Load PDF	
2	10/05/18 09:13	OI GIA REPORT	 Load PDF	

Linked Accident Report Documents

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)	Thumbnail	Print
1	03/09/19 19:45	Accident Statement	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)	Thumbnail	Print
1	08/05/18 17:51	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
2	08/05/18 17:51	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
3	08/05/18 17:51	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
4	08/05/18 17:51	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
5	08/05/18 17:51	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
6	08/05/18 17:51	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
7	08/05/18 17:51	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)	Thumbnail	Print
1	08/05/18 17:46	Sketch Plan	 Load TIF	
2	08/05/18 17:46	Sketch Plan #2	 Load TIF	
3	08/05/18 17:50	CERTIFICATE OF INSURANCE	 Load TIF	
4	08/05/18 17:50	OWNER'S NRIC AND DRIVING LICENCE	 Load TIF	
5	08/05/18 17:50	DRIVER'S NIRC AND DRIVING LICENCE	 Load TIF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/CT118008586/GQD3E2

Date: 13/01/2020

REFERENCE

Handling Insurer: China Taiping Insurance
(Singapore) Pte. Ltd.

Policy No: DMPCSN3021631802

Claimant
Vehicle No : SKW1576YInsured Vehicle
No : SDE2300Y

Date of Loss: 07/05/2018

Nature of Claim: TP

Claim
No: SNM18D02344C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SKW1576Y

Make & Model: TOYOTA COROLLA ALTIS, 1.6 L CVT (A)

Engine No: HIDDEN

Reg. Date: 20/10/2015 (Man. Year: 2015)

Chassis No: MR053REH104522501

Colour: Black

Odometer: 287560 km

Engine Capacity: 1598 cc

Market Value/New Car

N/A

Price:

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

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

No

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 205/55 R16

Rear Tyre Size:

205/55 R16

Front Left Side: KAPSEN 6 mm

Rear Left Side:

KAPSEN 6 mm

Front Right Side: KAPSEN 6 mm

Rear Right Side:

KAPSEN 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,286.00	1,588.20	1,697.80	51.67
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,880.00	1,180.00	700.00	37.23
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	5,166.00	2,768.20	2,397.80	46.42
+ GST 7.00/7.00% (S\$)	361.62	193.77	167.85	46.42
Nett Amount (S\$)	5,527.62	2,961.97	2,565.65	46.42

INSPECTION

Date of Assignment: 10/05/2018

Date Inspected: 10/05/2018

Inspected At:

Allswell Motor Traders (HQ)

25 Defu Lane 9

Singapore 539266

Estimated Period of Repair: 4.0 days

Adjuster: XING GUO QIANG

Manager: SHIAU CHAN

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.

REPAIR DETAILS

Reference		
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 13 Jan 2020)
Parts:	143	TOYOTA COROLLA ALTIS 1.6 L CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SKW1576Y)	
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

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*TAILGATE	Dented	997.60 F	*997.60 FL
2	1		*REAR BUMPER	Deformed	1,098.00 F	*1,098.00 FL
3	1		*END PANEL	Repair	531.00 F	*- FL
4	2		*TAILGATE HINGES	Repair	158.40 F	*- FL
5	1		*REAR REINFORCEMENT BAR	Repair	479.00 F	*- FL
6	2		*CLIPS FOR BUMPER	Necessary	22.00 F	*22.00 FL
					Sub Total (S\$)	3,286.00
					- List Item Discount on L Items 0.00/25.00% (S\$)	0.00
					Total Parts (S\$)	3,286.00
						1,588.20

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	DISMANTLE/ASSEMBLY OF TAILGATE & REAR BUMPER	New	260.00	100.00
2	WELDING/PANEL BEATING OF REAR END PANEL	New	600.00	200.00
3	ANTI-RUST SPRAY PAINT	New	40.00	40.00
4	SPRAY PAINTING ON AFFECTED AREA (TAILGATE & REAR BUMPER)	New	660.00	600.00
5	PANEL BEATING OF REAR TAILGATE & WELDING	New	260.00	200.00
6	TO MAKE/DRILL HOLES FOR SENSOR MOUNTING & MAKE WIRING GOOD	New	60.00	40.00
Gross Labour Cost (\$\$)			1,880.00	1,180.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >