

REF

CS3/MSG18008904/Tk4d307

3 Instruction

Surveyor
Menmen

Taufhieh

From (Person)

Chhia Nyuk Pui

ASSIGNMENT (Office)

of _____ MSIG

Date/Time: 16/5/18 @ 1:46 pm

Estimated Cost

Bill to:

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

To Inspect Vehicle No. _____

SLN 47177

Insured

FBD 845

at Workshop m/s

Car laboratories

Tel:

8777 7227

of

1 bukit butok Crescent # 04-56

Policy No.

MSD/VMT/17-370883

Claim No.

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

DOA

13/05/2018

* CA / REV / REP. / REV 24 HRS (wp)

1710518

H.O.D. Endorsement:

Date/Time

2:41pm @ 16/5/18

Person Contacted

Mr. Zen

Vehicle IN/OUT

Date/Time

Action/Instruction

(4)

Estimate

SLN 47172-x

FBD 8451-X

~~000000~~

Surinder Tufan

REF: MSIG

ASSIGNMENT

From: Date: 17/05/2018

Estimated Cost:

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

To Inspect Vehicle No: SLN 4717Z

at Workshop m/s Car Laboratories

of 1 bukit batok Crescent # 04-56

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: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SLN 4717Z Yr Regn: 2017 / May

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

Truck / Trailer or

Make: Honda Vezel c.c 1496

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 62900 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: RU 11 2111 30

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60R16

R:

BS ☒ DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. D.O.I. 17/5/2018 @ 1610

Survey held at Car Laboratories

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

*Repair Estimate : S-\$ 10,500 - 11,500

* 5 days

28/5/18 Submit PRS report.

RECEIVED 30 MAY 2018

Date/Time. File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time. File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

) \$ + RS \$

) Photos

) Others

TOTAL

Report Format :

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

120

10

130

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	15 May 2018		16 May 2018 13:46 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	MEYYAPPAN NAGARAJAN, ID: G6065647P		
Main Claimant:	CL LEASING PTE LTD, Co. Reg. No.: 201321410W		
Vehicle Reg. No.:	SLN4717Z	Date of Loss:	13/05/2018 00:00 - :59 [12 Months and 9 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP	Policy/Cover Note No.:	MSD/VMT/17-370883 Coverage: 31/08/2017 - 30/08/2018
Vehicle Reg. No. (Insured):	FBD845J	Policy No. (Claimant):	
		Excess:	
Repairer:	Car Laboratories Pte Ltd (HQ) 1 BUKIT BATOK CRESCENT, #04-56 WCEGA PLAZA, 658064 Bukit Batok - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 17/05/2018]		
Adj Asg. Remarks:	Liability 100% - Head to rear. TP disagree with SJE List. Proceed to appoint LKK as SJE. W/s contact person is Mr Zen, 8777 7227 / 6570 0330		

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.									



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

MSIG INSURANCE (SINGAPORE) PTE LTD

Ref : CS3/MSG18008904/T1z4d3

16 RAFFLES QUAY

#24-01 HONG LEONG BLDG SINGAPORE 048581

Date : 16-05-2018



Code : MSG

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	FBD 845J	Veh. Inspected	SLN 4717Z
Policy No.	MSD/VMT/17-370883	Coverage (\$)	0.00
Claim No.	MSC/V/18-000671	Excess (\$)	0.00
Assign From	MERIMEN (CHHIA NYUK PUI)	Assign Date	16/05/2018

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

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5. General Information

Accident Date	13/05/2018	Inspection Date
Survey held at	CAR LABORATORIES PTE LTD NO. 1 BUKIT BATOK CRESCENT #04-56 WCEGA PLAZA SINGAPORE 658064	

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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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	15/05/2018 15:24
Date Of Accident	13/05/2018 13:00
Exact Location Of Accident	BT TIMAH RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN4717Z
Insured/Policyholder	
Name Of Registered Owner	CL LEASING PTE LTD
Co Reg No	201321410W
Email Address	ARZKYEO1996@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90787272
Alternative Phone No	OFFICE-90787272

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5061846996-04
Cover Note Number	

Driver

Name of Driver	ARIK YEO WEN QI
NRIC No	S9616168I
Date Of Birth	19/04/1996
Occupation	INDOOR
Date Of Driving Pass	12/07/2016
Driving Experience	1 YEAR AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90787272
Fax Number	
Contact Number	
Email Address	ARZKYEO1996@GMAIL.COM

Address	BLK 57 TEBAN GARDENS ROAD #26-477
Postcode	600057
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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 STATEMENT (ATTENDED BY: JAMES NG)

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	FBD845J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MEYYAPPAN MAGARAJAN
NRIC/Passport Number	G6065647P
Contact Number	82729511
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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 enquires 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:

15 MAY 2018

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

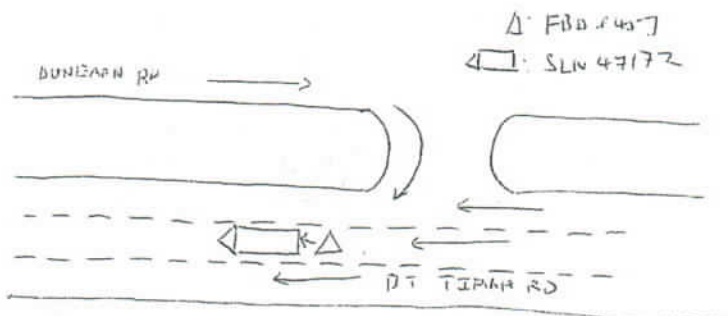
15 MAY 2018

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

NG WING KIN JAMES
S7927881E

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along 4th main road on centre lane at 50km/h, when another vehicle suddenly cut into my lane from a turn and slowed down. I then had no choice but to reduce speed quickly to avoid a collision. The motorcycle FBD 4457 then hit me from behind.

DECLARATION

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

Policyholder's Signature

Date & Time:

15 MAY 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

15 MAY 2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

NG WING KIN JAMES
S7927881E

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	15 May 2018		16 May 2018 13:46 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:	MEYYAPPAN NAGARAJAN , ID: G6065647P								
Main Claimant:	CL LEASING PTE LTD , Co. Reg. No.: 201321410W								
Vehicle Reg. No.:	SLN4717Z	Date of Loss:	13/05/2018 13:00 - :59 [12 Months and 9 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / MSC/V/18-000671	Policy/Cover Note No.:	MSD/VMT/17-370883 (Third Party Only) Coverage: 31/08/2017 - 30/08/2018						
Vehicle Reg. No. (Insured):	FBD845J	Policy No. (Claimant):							
		Excess:							
Repairer:	Car Laboratories Pte Ltd (HQ) 1 BUKIT BATOK CRESCENT, #04-56 WCEGA PLAZA, 658064 Bukit Batok - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD RASUL] ... [Imm.Advice due 17/05/2018]								
Adj Asg. Remarks:	Liability 100% - Head to rear. TP disagree with SJE List. Proceed to appoint LKK as SJE. W/s contact person is Mr Zen, 8777 7227 / 6570 0330								
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

*SLN4717Z (MSC/V/18-000671)

[FBD845J]




































TP

































CL LEASING PTE LTD

May 13 2018 1:00PM

[MEYYAPPAN NAGARAJAN]

Car Laboratories Pte Ltd

Upload Documents			Upload Photos		Compose New Letter		View		View in Browser	
Photos/Images								3 per page		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)							Thumbnail	Print
1	18/05/18 17:48	General View							Load JPG	<input checked="" type="checkbox"/>
2	18/05/18 17:48	General View							Load JPG	<input checked="" type="checkbox"/>
3	18/05/18 17:48	General View							Load JPG	<input checked="" type="checkbox"/>
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36	18/05/18 17:48	General View							Load JPG	<input checked="" type="checkbox"/>
37	18/05/18 17:48	General View							Load JPG	<input checked="" type="checkbox"/>

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
38	18/05/18 17:48	General View	 Load JPG	<input checked="" type="checkbox"/>
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65	18/05/18 17:48	General View	 Load JPG	<input checked="" type="checkbox"/>
66	18/05/18 17:48	General View	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	16/05/18 11:39	Email frm TP - PRI	 Load PDF	
2	16/05/18 11:39	Notice of Accident	 Load PDF	
3	16/05/18 11:40	Email with TP - SJE list, TP disagree and proceed to appoint LKK as SJE.pdf	 Load PDF	

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; margin-top: 5px;"></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: CS3/MSG18008904/T1Z4D3E2

Date: 31/05/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VMT/17-370883
Claimant Vehicle No :	SLN4717Z	Insured Vehicle No :	FBD845J
Date of Loss:	13/05/2018	Nature of Claim:	TP
		Claim No:	MSC/V/18-000671

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLN4717Z	Engine No:	L15B4411131
Make & Model:	HONDA VEZEL, 1.5 1.5X CVT (A)	Chassis No:	RU11211130
Reg. Date:	04/05/2017 (Man. Year: 2016)	Odometer:	62900 km
Colour:	White		
Engine Capacity:	1496 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:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	215/60 R16	Rear Tyre Size:	215/60 R16
Front Left Side:	Dunlop 6 mm	Rear Left Side:	Dunlop 6 mm
Front Right Side:	Dunlop 6 mm	Rear Right Side:	Dunlop 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:	16/05/2018	
Date Inspected:	17/05/2018 Inspected At:	Car Laboratories Pte Ltd (HQ) 1 BUKIT BATOK CRESCENT, #04-56 WCEGA PLAZA Singapore 658064
Estimated Period of Repair:	0.0 days	

Adjuster: MOHD RASUL

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 \$10,500.00 -\$11,500.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 30 May 2018)
Parts:	M1-SUV	HONDA VEZEL 1.5 1.5X CVT (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLN4717Z)	
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 >

