3 wither	REF: COI/DO	C18010985/B8652	Special Instruction:
	ASSI	GNMENT (Office)	45: \$ 8000.00
From (Person): Gen	uld fon of LPC	Date/Time: 24092018	Third Parties:
Estimated Cost:	.Bill to:		Claimant:
			Surveyor: SK AV10
OD/FP Re-inspection	(Evaluation)	E 23 E 2	Workshop: Midur Intel
To Inspect Vehicle No		Insured: YL 5581U	
of Workshop m/s	Kuki Bukif Rd 4 #01-	Tel: 6281 00\$7	
Policy No:		Claim No: 17/18/18/V	CON/02 0473
ium Insured:			C00/ 03 00 B
Make of Veh:		Excess:	9
Client's Record)		D.O.A12002(1(8
			H.O.D. Endorsement/Date:
Date/Time:	Person Contacted: _	Vehicle IN / OI	JT .
Date/Time:	Confirmed with	Final Fig days (Red S / % Original b day
Date/Time: 02/10/	Submit Final Fig #1, 20	o , # days (Red \$ / hone	of Ste %: Original / days)
	/Instruction	, 1 3mJs (xxxx \$\psi_1/3600	or original 6 days)
Of the Section Control		3 71.	N.A.
A Ch	3553 X - MA /CTL 1 801033	1/2	DUA: 13.063.018
150	BU - MA DU MUNUES / O		1XA: 04-10-2018
		Repair d	ays 4 1/10/20
Para(1): Parts	found not replaced (To	highlight R or UB,	LR, Etc)
	ents on consistency of da	mages (Parts Not Consis	stent · NC'
Para(2) : Comm	2	miges (r ares 110t Cousts	stent. Ive j
Para(2) : Comm			
Para(2) : Comm			
Para(2) : Comm	RECEIV	ED 0 2 OST 2018	
Para(2) : Comm	RECEIV	ED 0 2 00T 2018	
		ED 0 2 08T 2018	
Para(2) : Comm		ED 0 2 OCT 2018	
Para(3) : Nett V	alue	ED 0 2 00T 2018	
Para(3) : Nett V		Inspected/	Fee Charged: Date: Basic & Add
Para(3): Nett V	alue et Value :		Fee Charged: Date: Basic & Add Transport
Para(3) : Nett V Mark Salva	alue tet Value : uge Value :	Inspected/	Fee Charged: Date: Basic & Add Transport Photos
Para(3) : Nett V Mark Salva	alue et Value :	Inspected/	Fee Charged: Date: Basic & Add Transport
Para(3) : Nett V Mark Salva	alue tet Value : uge Value :	Inspected/ Evaluated by:	Fee Charged: Date: Basic & Add Transport Photos Others Total
Para(3): Nett V Mark Salva Nett	value Let Value : lige Value : Value :	Inspected/	Fee Charged: Date: Basic & Add Transport Photos Others

	22/03/2002 ASS. P.EC. BY:	REF: C33/LPC18010	985/	b Specia	Instruction:
40	SUMMOTOR .	ASSIGNMENT	(Office)		
	From (Person). Enc Wor	of LPC		Da	te/Time: 14062018 1239pm
	Estimated Cost:		Il to:		
	OD/TEXWS/TP RES/OI	RESTEVATINVIMVICS		125	
	To Inspect Vehicle No:	GBF 3553 X		_ Insured; _	YL 5587U
	at Workshop m/s	Motor Intel	170000000000000000000000000000000000000	Tel:	8838 3318 /6J81 0087
	of	13 Kaki Bukit Rd 4	#01-70		
	Policy No:		Claim No:	FJ	/18/18/YCOO/020673
	Sum Insured:		Excess:		
	Make of Veh: (Client's Record)			D.	O.A
	CA / REV / REP. / REV Date/Time: 19061018	24 HRS 'WP' 1-30pm Person Contacted:	Giny		H.O.D. Endorsement:
	Date/Time Action/Instruc	etion (X) Estimate			
	The state of the s	X - NA /CTUSDIUS39 /Z	li .		DIA: 100618
	YL 55831				DCU: OF-10-12

Catherine Chong (LKK Auto)

From:

ERIC WOO JUN KIAT <ericwoo@lonpac.com>

Sent:

Thursday, 14 June, 2018 12:39 PM

To:

assignments@lkkauto.com

Cc:

MT_Claim_SG

Subject:

RE: Our client's vehicle no. GBF3553X; Your insured's vehicle no. YL5582U - PRI

Notice

Our Ref: 17/18/18/VC00/020673

Attachments:

MIA - Pre-Repair Inspection Notice (Lonpac)(GBF3553X).pdf

Dear Nivitha / Catherine,

Please refer to email below.

Thank you.

Best Regards, Eric Woo

Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6279 9253 | Fax: (65) 6296 3767

18095018 G 1:305W

13.062018

62810087

From: ERIC WOO JUN KIAT

Sent: Thursday, 14 June, 2018 12:36 PM

To: 'Claims'
Cc: MT_Claim_SG

Subject: RE: Our client's vehicle no. GBF3553X; Your insured's vehicle no. YL5582U - PRI Notice Our Ref:

17/18/18/VC00/020673

Dear Justin,

Thank you for your list of surveyors.

We regret we are not agreeable to your panel of surveyor as listed.

We shall be assigning to LKK Auto Consultants Pte Ltd to conduct the survey on your client's vehicle No: GBF 3553X.

Dear Nivitha / Catherine,

FYA.

Thank you.

Best Regards, Eric Woo Claims Executi

Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6279 9253 | Fax: (65) 6296 3767

From: Claims [mailto:claims@esthermoey.com]
Sent: Thursday, 14 June, 2018 12:07 PM

To: ERIC WOO JUN KIAT Cc: MT_Claim_SG Subject: RE: Our client's vehicle no. GBF3553X; Your insured's vehicle no. YL5582U - PRI Notice Our Ref: 17/18/18/VC00/020673

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
- Lee Kok Weng
- Seah Kwang Boon
- Winson Goh
- 6. S. Kumanan
- 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

CONFIDENTIALITY NOTICE

This e-mail from Amy Lim Law Practice (including any attachment(s) to it) is confidential and may also be privileged and exempt from disclosure under applicable law. Accordingly, if you are not the intended recipient please notify us immediately, delete this e-mail (including any attachment to it) from your computer system and do not disclose or distribute it to any other person or continue to read this e-mail. Thank you.

Amy Lim Law Practice DOES NOT ACCEPT SERVICE OF COURT DOCUMENTS OR NOTICE OF ANY PROCEEDINGS BY FACSIMILE OR EMAIL

From: ERIC WOO JUN KIAT <ericwoo@lonpac.com>

Sent: Thursday, 14 June 2018 11:59 AM

To: Claims < claims@esthermoey.com >
Cc: MT Claim SG < mt claim@lonpac.com >

Subject: RE: Our client's vehicle no. GBF3553X; Your insured's vehicle no. YL5582U - PRI Notice Our Ref:

17/18/18/VC00/020673

Dear Justin,

We will proceed to conduct a pre-repair survey of the damage to your client's vehicle jointly with your workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert. (Please see attached).

Please let us know within 2 working days whether you are agreeable to the appointment of any of the motor surveyors provided to you as a single joint expert. You may select one of the listed motor surveyors.

Thank you.

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

From: Claims [mailto:claims@esthermoey.com]
Sent: Thursday, 14 June, 2018 11:09 AM

To: MT_Claim_SG

Subject: Our client's vehicle no. GBF3553X; Your insured's vehicle no. YL5582U - PRI Notice

Your Attention is Drawn to the Confidentiality Notice Below:

Dear Sirs,

We refer to our attached PRI Notice dated 14 June 2018 for your urgent attention.

We would appreciate it if your could kindly arrange for the PRI Surfvey to be conducted this afternoon at the following location:

Venue:

Motor Intel Automo Pte Ltd Address: 13 Kaki Bukit Road 4, #01-20, Bartley Biz Centre Singapore 417807

Contact:

Wilson Ong @ 8838 3318

Thank you.

Yours sincerely,

Justin Wap

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

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

Fax: (+65) 6491 5638

CONFIDENTIALITY NOTICE

This e-mail from Amy Lim Law Practice (including any attachment(s) to it) is confidential and may also be privileged and exempt from disclosure under applicable law. Accordingly, if you are not the intended recipient please notify us immediately, delete this e-mail (including any attachment to it) from your computer system and do not disclose or distribute it to any other person or continue to read this e-mail. Thank you.

,	Amy Lim Law Practice DOES NOT ACCEPT SERVICE OF COURT DOCUMENTS OR NOTICE OF ANY PROCEEDINGS BY FACSIMILE OR EMAIL



Our Ref

: 17/18/18/VC00/020673

Your Ref

: Not Advised

21 September 2018

M/s LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Pk Singapore 408933

Dear Sirs/Madam

PAPER SURVEY OF GBF3553X

We refer to the above matter.

We enclose the following documents :-

- a) Survey report & photos of GBF3553X
- b) GIA report of GBF3553X
- c) GIA report & photos of YL5582U
- d) Tax Invoice No.614179 from ISS Mart Products Pte Ltd

Kindly study the documents and let us have your opinion on the adjusted repair cost within the next 10 days.

Yours faithfully

(hw

GERALD POH SENIOR EXECUTIVE (CLAIMS)

Email: mt claim@lonpac.com

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.
- 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	13/06/2018 18:31	200
Date Of Accident	12/06/2018 14:50	
Exact Location Of Accident	ALONG ANAK BUKIT FLYOVER	
Country/State of Loss	SINGAPORE	

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBE3553X	

Insured/Policyholder

Name Of Registered Owner M/S AIR CONNECTION ENGINEERING

Co Reg No 53198396W Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-89999999

Vehicle Particulars

Manufacturer NISSAN

Model NV350 PANEL VAN 2,5 5AT 5DR EURO V

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 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMCVSN3072841700

Cover Note Number

Driver

Name of Driver GARRY GOH CHEE SENG (WU ZHICHENG)

 NRIC No
 \$7400658B

 Date Of Birth
 17/01/1974

 Occupation
 INDOOR

 Date Of Driving Pass
 10/08/1994

Driving Experience 23 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94795811

Fax Number

Contact Number OFFICE-94795811

EMail Address NOEMAIL

Address

BLK 296B BUKIT BATOK STREET 22

#19-68

Postcode

652296

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

HIT BY FALLEN TREE / OTHER OBJECTS

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

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 STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO FOOTAGE WITH DRIVER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

YL5582U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

COMMERCIAL VEHICLE

NRIC/Passport Number Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- processing contently the default of the appoint to speed up the claims process
- 2. This Fig. P. must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be as truthful and accurate as possible. Any will a margin element or withholding of matters.
 Facts may allow insurance companies to repudiate policy liability.
- The insurance promptions of this comparation companies which we provide a points highlights the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation
- 6 The report will be forwarded by the incurers of the GIA Records Management Centre established by the General incurance Association of Singipore (GIA) for architing and that copies of the report will for a fee by made as a lable upon application as returned parties.
- By the independ of this impost to the assisting you hereby consent to the victoring of this report is the centre of a to copie; of the report being made available after each.
- Consent under the Personal Data Protection Act (PDPA)

Lungaritzed acknowledge, agree and complet that

- (B) My insurer, my workshop and the General Insurance Association of Singapore (1984) may are permitted to called their disclose and/or process my personal beta/personal information set out to this (form) and any other personal information provided by me of possessed by my matter collectively the "Personal Information" and processed and handle such Personal information to all insurers; who have insured vehicles it wolved in the account shall be collectively referred to as the "language" in the insurers conversion the account shall be collectively referred to as the "language". The insurers conversions the purposess of the process of the powers for the purposess.
 - (i) processing, handling analyze desiring with my claims victuding the settlement of the station and pry necessary expectigations relating to the courts.
 - (a) investigating the accident unerticing claims.

(iii) (2) ying out girs/iii depling with my indructions or responding to any enduries by me

- Includent the same of control of control of control of control of control of the control of the control of con
- (v) complying with applicable law in administrang, processing the iting and/or despite with my claims isobestively the Purposes?
- (b) all moures is who have insured vehicle(s) involved in this accident and the insurers lawyers law firms independent to collect, use, displace and or processing Personal Information for one or more of the above Foreignes, and
- in Private information may/can be disclosed by any of the Insurer, and/or GIA to the third party service providers or agents/milliading these lawyons/law firms), which may be sized outside of Surgapore, for one or more of the above Purposes
- (d) my Personal information will also be collected and used to complie plants history for the purpose of freed detection investigation and management in present and all tuture claims.
- (ii) The information so collected under (d) above may be thined / obscised
 - (i) the #I mustern among any other three parties that exist in evaluating investigating controling or managing fraud regulation, law enforcement and government agencies as reasphably required for the purposes stated, or
 - in) for complying with into rementy under any regulations, laws or Louis orders

Holikyholdor i Signature Liute & Time others agradient of page is not the paragraphs

Date & Time

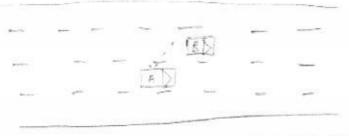
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Accident Sketch Plan

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Pit (Chuyi) Bart Frak Pycor



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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

(Avvidegly eithe foregoing particular) are true Pijevery resteed

September 2004

Order Colemanians
If these is not the social relation
Data All time

Reporting Centre Personney Collins one

Name Name one No



Bill To: 120-C084 CASH SALES

國 誌 產 品私人有限公司 ISS MART PRODUCTS PTE LTD BLOCK 3004, UBJ AVENUE 3, #01-90, SINGAPORE 408860
TEL :(65) 6743 - 1888
SALES FAX :(65) 6745 - 9505
EMAIL :(ssmart@ singnet.com.sg
WEB :www.issmart.net

TAX INVOICE :614179

NO. DATE

:20-09-2016

YOUR P/O NO .: SALESMAN

TERMS

PAGE

: C.O.D. :1 of 1

99 UBI AVE 4

TEL: FAX:

Attn:

#	CODE	DESCRIPTION	SIZE	QTY	MOU	U.PRICE	DIS	AMOUN
	V56460	VENTURESHIELD PPF ROLL	60inX50FT	1	ROLL	1,800,00		1,800.0
	V56460-60Z	VENTURESHIELD PPF YD	60IN W	7	MTR	120.00		840.0
	PA-W	PLASTIC APPL.		1	PC	1.20		1.20
	SQ12G	PLASTIC APP GOLD	5IN	1	PC	1.00		1.00

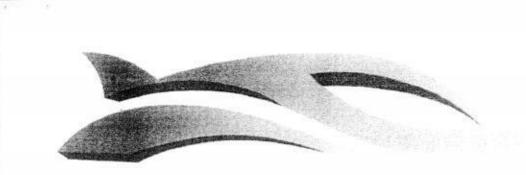
SINGAPORE DOLLAR TWO THOUSAND EIGHT HUNDRED TWENTY SEVEN AND CENTS FIFTEEN ONLY

Goods Sold Are Not Refundable SUB TOTAL: SGD 2,642.20 DISCOUNT SGD **NET AMOUNT** SGD 2,642.20 **GST 7.00%** SGD 184.95 ISS MART PACK QTY CHECK BY: Authorised Signature NET TOTAL: SGD 2,827.15

CO / GST #: 20-0000977-N

CR #: 70977000000D

Interest of 2% per month shall be charged on all overdue accounts. Invoice without credit terms stated shall make full payment within 30 days, or a 2% per month interest shall be charged with effect of invoice date or delivery date whichever is earlier.



Motor Intel Automo Pte Ltd

Reg No: 201732961N 13 Kaki Bukit Road 4, #01-20 Bartley Biz Centre Singapore - 417807

Mobile no: 91501587 Phone no: 62810087

Email: sales@mla.com.sg

Customer:

Proformo Invoice No:

Dated:

AIR CONNECTION ENGINEERING (GBF3553X)

BLK 296B BUKIT BATOK ST 22, #19-68,

Singapore - 652296

Shigapore - 032230 Shone no: 9479 581

PI 62	August 20, 2018		
PO Number:	PO Dated:		

Phone	e no: 9479 5811					
S.No	Item	Description	Quantity	Unit	Rate(SGD)	Amount (SGD)
1	COST OF REPAIR	COST OF REPAIR	1	JOB	8,000.00	8,000.00
		*				
	4.			Si	b Total (SGD)	8.000.00

Sub Total (SGD)

8,000.00

Lotal (SGD)

8,000.00

Amount in words:

Eight Thousand Singapore Dollar (SGD) Only

Declaration:

We declare that this Proformo Invoice shows the actual price of the goods described and that all particulars are true and correct.

For Motor Intel Automo Pte Ltd

Authorized Signatory

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 14/06/2018 12:18

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1, Please report correctly the details of the accident to speed up the claims process.
- 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 witholding 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.

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.

By the lodgement of this report to the insurers, you aforesaid.	u hereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	14/06/2018 11:58
Date Of Accident	12/06/2018 14:50
Exact Location Of Accident	PIE (CHANGI) BEFORE BKE EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YL5582U
Insured/Policyholder	
Name Of Registered Owner	SILVER SMITH TRADING
Co Reg No	36846600X
Email Address	T2ENTERPRISE@SINGNET.COM.SG

Mobile Phone No

OFFICE-62883008 Alternative Phone No

Vehicle Particulars

ISUZU Manufacturer FTR33P Model

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?

If No. Please state action to be taken

REPORTING ONLY COMMERCIAL VEHICLE Vehicle Category

Insurance Company

LONPAC INSURANCE BHD Name of Insurance Company

THIRD PARTY FIRE AND/OR THEFT Type Of Coverage

NO

NO Fleet Policy

Z/17/VC00/100773 Policy Number

Cover Note Number

Driver

LIAW JING HUI MARCUS Name of Driver

S9328722C NRIC No 08/08/1993 Date Of Birth INDOOR Occupation 24/05/2017 Date Of Driving Pass

1 YEAR AND 0 MONTHS **Driving Experience**

MALE Gender

(LOCAL) +65-87217273 Mobile Number

Fax Number Contact Number

NOEMAIL EMail Address

Address

BLK 165 YISHUN RING ROAD #05-717

Postcode

760165

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

NO COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance

NO

soliciting/offering accident claims assistance.

1

Number of Passengers (Including Driver)

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

ON 13/06/2018, DRIVER OF VEHICLE B CAME TO MY OFFICE TO INFORM ME THAT THE THINGS FROM MY VEHICLE HAD FELL OFF AND HIT ONTO HIS VEHICLE. I AM NOT AWARE OF IT. THE OWNER OF VEHICLE B WASN'T ABLE TO PROVIDE ME PHOTO OR PROOF OF HIS DAMAGES ON THE VEHICLE. HE ALSO CAN'T PROOF THAT IT WAS THE GOODS THAT FELL FROM MY LORRY DAMAGE HIS VEHICLE.

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

GBF3553X

Vehicle Make/Model/Colour

Details Of Properties

VEHICLE B

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)

Sketch Plan Pg. 1

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 Oriver
- 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.
- 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.
- 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 few be made available upon application by interested parties.
- By the ladgment 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 insurers) 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
 - 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")
- 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) /ny 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.
 - 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.

SILVER SMITH TR TOG

Policyholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name. NRIC/FIN No.

Sketch Plan #2 Pg. 1

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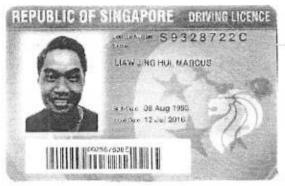
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Policyholder's Signature Date & Time:

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

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

Driving License



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$9328722C





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CERTIFICATE OF INSURANCE

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MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1969 (MALAYRIA).

Certificata No. 1: 27177VC037100773

Type of Cover : THORD PARTY FIRE

AND TH-HT

Index Mark and Vehicle Registration Number

15020 -18337 - YL 33828

Name at Policy Halder,

TELLOW SHOP TRANSMITTER

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PWe hereby certify that this covering Note is its and in an architice with the provisions of Part IV of the Road Transport Ast 1987 (Malaysia) and Mater Vehicles (Third-Party Rake and Components). Act (Cap 189) Republic of Singapore

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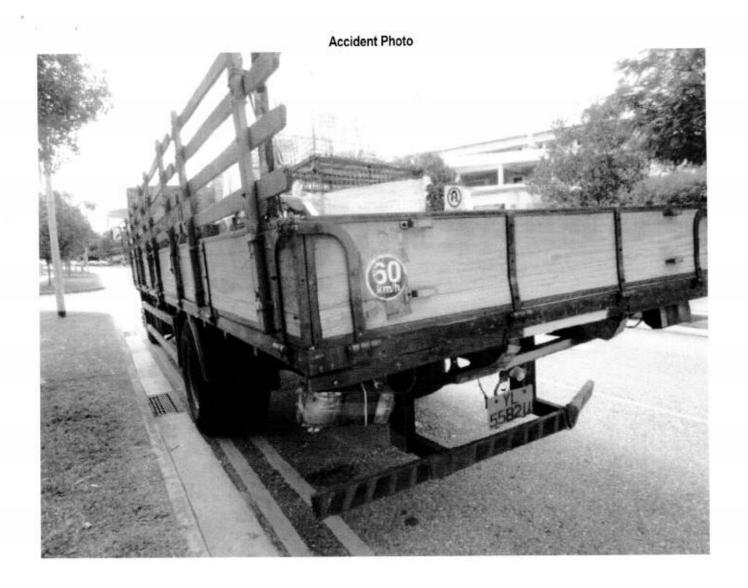
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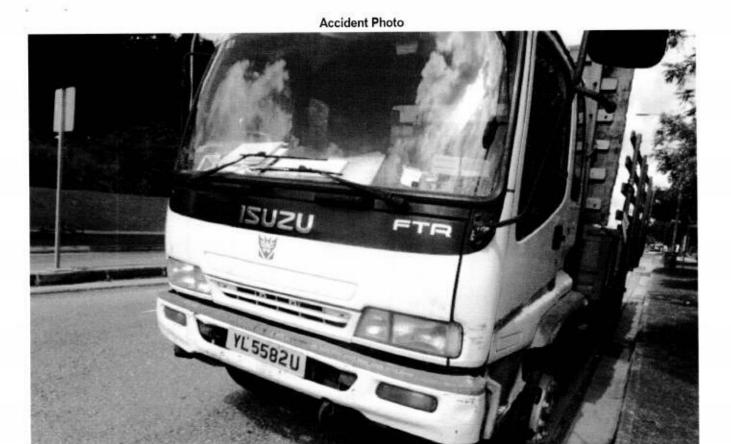






Accident Photo







AUTOMOBILE ASSESSMENT REPORT

Page No. 1

Our Reference:

TP/018/0400SK

Your Reference:

TBA

Date:

7/8/2018

AIR CONNECTION ENGINEERING

c/o Motor Intel Automo Pte Ltd

Bartley Biz Centre

13 Kaki Bukit Road 4 #01-20

Singapore 417807

Assessment of Vehicle No : GBF 3553X

Date of Accident

: 12/06/2018

Date of Inspection

: 25/06/2018

We have carried out a physical assessment of GBF 3553X at Motor Intel Automo Pte Ltd according to your instructions on 25/06/2018 and are pleased to submit our report as follows;

1.VEHICLE PARTICULARS

Registration No.

GBF 3553X

Make & Model

NISSAN NV350

Year of Registration

15/9/2016

Engine Capacity (cc)

2488

Chassis No.

JN1MC2E26Z0007062

Engine No.

YD25404965A

Colour

Grey

Mileage (km)

45048

2. VEHICLE CONDITION

Body Paint:

Good

Steering

Serviceable

Foot Brake

Serviceable

Parking Brake

Serviceable

3.TYRE PARTICULARS & CONDITION

Front

RH Make/Size

Dunlop 195R15C - 80%

LH Make/Size

Dunlop 195R15C - 80%

Rear

RH Make/Size

LH Make/Size

Dunlop 195R15C - 80% Dunlop 195R15C - 80%

Note: % denotes the remaining percentage of the tyre

Page No. 2

Our Reference

TP/018/0400SK

Vehicle No.

GBF 3553X

4.DESCRIPTION OF DAMAGE

At the time of inspection observed that this vehicle had sustained damages to the LEFT BODY portion DAMAGE CAUSED BY FOREIGN OBJECT IMPACT ON MOVING VEHICLE (REFER TO ACCIDENT REPORT)



Please see attached schedule for details.

Estimated Amount

: \$\$12,714.40

Adjusted Amount

: \$\$8,000/-

Estimated Repair Days

: 6 days

Pursuant to your instruction, we have NOT AUTHORIZED repair.

The assessment was conducted on a "Without Prejudice" basis.

If we are not notified of anything to the contrary within 14 Days from the date hereof, this report shall be treated as correct

Disclaimer

This report is intended for the exclusive use of the addressee solely in relation to the loss occurrence in which the assessed vehicle is involved. No liability or responsibility whatsoever shall be held by **SKAUTO CONSULTANTS** for any reliance on this report by any third party.

Page No. 3

Our Reference

TP/018/0400SK

Vehicle No.

GBF 3553X

QTY	DESCRIPTION	CONDITION	REPAIRER'S ESTIMATE(S\$)			OUR MENT(S\$)	
	PARTS (NETT ITEMS)						
1	Sliding Door LH	REPAIR		2010.00		0.00	
2	Sliding Door Hinge @ \$45.00	REFIX	90.00 220.00 118.50 2853.00 1280.00			0.00	
1	Sliding Door Rail	REFIX				0.00	
1	Sliding Door switch	REFIX				0.00	
1	Rear Fender LH (side panel)	DENTED				2853.00	RX
1	Rear Bumper	REPAIR			0.00		
_	Real bumper			6571.50		2853.00	
		less	10%	657.10	10%	285.30	
				5914,40	35	2567.70	
1	SPECIAL NETT ITEMS Sliding Door - 3M Venture shield (Paint protection film) complete with plastic application and include labour	Necessary	4800.00			4800.00	880.0
	(SPECIALIST APPLICATION)	TOTAL PARTS		10714.40	35	7367.70	

Page No. 4

Our Reference

TP/018/0400SK

Vehicle No.

GBF 3553X

s/N	DESCRIPTION	REPAIRER'S ESTIMATE (S\$)	OUR ASSESSMENT (S\$)
1	LABOUR To remove the affected parts & fittings to commence repairs; replace damaged parts and components	800.00	600.00 200
2	(SIDE PANEL) To supply paint materials, expandable items & putty, respray paint on parts replaced (sliding door & side panel)	1200.00	00.000 5002
	Labour Total :	2000.00	1600.00
	TOTAL (PARTS & LABOUR):	12714.40 35	8967.70

Note: (For Lump Sum Repair)

The workshop has agreed to undertake the repair on a Lump Sum Basis, and/or the use of ex stock/reconditioned parts whichever is possible (having taken into consideration to repair instead of replacement.

The final adjusted Lump Sum contract amount is \$\$8,000/-

S.Kumanan

Motor Surveyor

Repair days 4:



51 UBI AVE 1, #01/02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 6256 3561 FAX: (065) 6256 4315

Your Ref: 17/18/18/VC00/020673

Date: 18th October 2018

Our Ref: CS1/LPC18010985/Bsbs2

M/s Lonpac Insurance Bhd

300 Beach Road #17-04/07 The Concourse Singapore 199555 (The Motor Claims Department)

Dear Sir / Madam,

EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: GBF 3553X INSURED VEHICLE: YL 5582U ACCIDENT DATE: 12/06/2018

We thank you for your instruction on 24/09/2018.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of GBF 3553X from M/s S K Auto Consultants.
- b) Final Repair Bill of GBF 3553X from M/s Motor Intel Automo Pte Ltd.
- c) Singapore Accident Statement of Vehicles GBF 3553X and YL 5582U.
- d) Colour damaged vehicle photographs of GBF 3553X.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

Information Recorded: -

Registration Number : GBF 3553X

Make & Model

: Nissan NV350

Year of Registration : 2016

Chassis Number

: JN1MC2E26Z0007062

Engine Capacity

: 2488 cc

- 2. We recommend that the repairs of the entire damage require about 4 (Four) working days to complete.
- 3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBF 3553X

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	SLIDING DOOR LH (N)	TO REPAIR SEE LABOUR	2,010.00	
2	SLIDING DOOR HINGE @ \$45.00 (N)	REFIX	90.00	-
1	SLIDING DOOR RAIL (N)	REFIX	220.00	
1	SLIDING DOOR SWITCH (N)	REFIX	118.50	-
1	REAR FENDER LH (SIDE PANEL) (N)	TO REPAIR SEE LABOUR	2,853.00	
1	REAR BUMPER (N)	TO REPAIR SEE LABOUR	1,280.00	
	LESS 10% DISCOUNT		-657.15	
			5,914.35	
	SPECIAL NETT ITEMS			
1	SLIDING DOOR 3M VENTURE SHIELD (PAINT PROTECTION FILM) COMPLETE WITH PLASTIC APPLICATION AND INCLUDE LABOUR (SPECIALIST APPLICATION) (SN)	NECESSARY	4,800.00	880.00
			4,800.00	880.00
	LABOUR			
	TO REMOVE THE AFFECTED PARTS & FITTINGS TO COMMENCE REPAIRS; REPLACE DAMAGED PARTS AND COMPONENTS (SIDE PANEL). INCLUSIVE OF THE REPAIR OF SLIDING DOOR LH, REAR FENDER LH AND REAR BUMPER.		800.00	200.00
	TO SUPPLY PAINT MATERIALS, EXPANDABLE ITEMS & PUTTY, RESPRAY PAINT ON PARTS REPLACED (SLIDING DOOR & SIDE PANEL).		1,200.00	500.00
	STATULE SHOWING CO. STATULE SET SPECIFICATION.		2,000.00	700.00
	GRAND TOTAL		12,714.35	1,580.00

RECOMMENDED COST OF LUMP SUM REPAIRS	1,250.00
(TO ITS PRE-ACCIDENT CONDITION)	

Report Ref No. CS1/LPC18010985/Bsbs2

LIM TEOW GUAN

Asst. 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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No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.