

22/03/2002

ASS. REC. BY:

REF: CS3/CT118011258/R124d3

Special Instruction:

Range & Days ✓

Survivor:
Mehmet

RASU

ASSIGNMENT (Office)

From (Person):

Irene Tay

of

CT1

Date/Time:

21/6/18 @ 10:10am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

PC 5986S

Insured:

PC 55064

at Workshop m/s

One Zone Autocare

Tel:

62520118

of

7800n lee street #

Policy No:

DMB1SN11708921801

Claim No:

SNM18D02521C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

18/05/2018

CA / REV / REP. / REV 24 HRS

'wp'

H.O.D. Endorsement:

Date/Time:

11:45am @ 21/6/18

Person Contacted:

Mr. Siang

Vehicle IN/OUT

Date/Time

Action/Instruction

(X) Estimate

PC 5986S-X

PC 55064-X

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	21 Jun 2018		21 Jun 2018 10:10 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:			
Main Claimant:	MASS LIMOS, Co. Reg. No.: 53117164K		
Vehicle Reg. No.:	PC5986S	Date of Loss:	18/05/2018 21:00 - :59
Claim Type:	TP / SNM18D02621C02	Policy/Cover Note No.:	DMB1SN1708921801
Vehicle Reg. No. (Insured):	PC5506U	Policy No. (Claimant):	5092120249
		Excess:	S\$0.00
Repairer:	One Zone Autocare (HQ) 7 SOON LEE STREET, #01-05 I SPACE BUILDING, 627608 Jurong Island - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]		
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 02/07/2018]		
Adj Asg. Remarks:	PLEASE SURVEY AND REVERT		

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				
CHINA TAIPING INSURANCE (S) PTE LTD		Ref : CS3/CTI18011258/R1z4d3		
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 21-06-2018		
		Code : CTI		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	PC 5506U	Veh. Inspected	PC 5986S	
Policy No.	DMB1SN1708921801	Coverage (\$)	0.00	
Claim No.	SNM18D02621C02	Excess (\$)	0.00	
Assign From	MERIMEN (IRENE TAY)	Assign Date	21/06/2018	
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				
5. General Information				
Accident Date	18/05/2018	Inspection Date	21/06/2018	
Survey held at	-			
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.				

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	7164K
Vehicle Details	
Vehicle No.:	PC5986S
Vehicle to be Exported:	No
Intended De-registration Date:	25 Jun 2018
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE COMMUTER GL 3.0 AUTO
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No.:	1KD2688277
Chassis No.:	KDH2230030927
Maximum Power Output:	-
Open Market Value:	\$37,792.00
Original Registration Date:	20 Jun 2017
First Registration Date:	20 Jun 2017
Transfer Count:	1
Actual ARF Paid:	\$1,890.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	19 Jun 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$30,600.00
COE Rebate Amount:	\$27,495.00
Total Rebate Amount:	\$27,495.00

The information contained herein is correct as at 25 Jun 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	23/05/2018 12:33
Date Of Accident	18/05/2018 21:10
Exact Location Of Accident	SENTOSA COACH PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5986S
Insured/Policyholder	
Name Of Registered Owner	MASS LIMOS
Co Reg No	53117164K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-96255087

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE HI-ROOF
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5092120249
Cover Note Number	

Driver

Name of Driver	MUHAMMAD NUR BIN MOHAMED YASIM
NRIC No	S8707979A
Date Of Birth	26/03/1987
Occupation	OUTDOOR
Date Of Driving Pass	24/07/2008

Driving Experience	9 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87426029
Fax Number	
Contact Number	OFFICE-96255087
EMail Address	HITMAN8787@HOTMAIL.COM
Address	BLK 404 FAJAR ROAD #03-269
Postcode	670404
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	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	2
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)	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 ATTACHED

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	PC5506U
Vehicle Make/Model/Colour	
Details Of Properties	FRONT

6/25/2018

E-FILE

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

DURAI

NRIC/Passport Number

Contact Number

97763601

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

MUHAMMAD NUR BIN MOHAMED

Approximate Age

Injuries Sustain

NECK PAIN

Injured person in which vehicle?

PC5986S

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: 23/5/2018
NRIC/FIN No.:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	21 Jun 2018		21 Jun 2018 10:10 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:	-, Co. Reg. No.: -								
Main Claimant:	MASS LIMOS , Co. Reg. No.: 53117164K								
Vehicle Reg. No.:	PC5986S	Date of Loss:	18/05/2018 21:00 - :59 [10 Months and 28 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM18D02621C02	Policy/Cover Note No.:	DMB1SN1708921801						
Vehicle Reg. No. (Insured):	PC5506U	Policy No. (Claimant):	5092120249						
		Excess:	S\$0.00						
Repairer:	One Zone Autocare (HQ) 7 SOON LEE STREET, #01-05 1 SPACE BUILDING, 627608 Jurong Island - Tel:								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]								
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD RASUL] ... [Final Rpt due 02/07/2018]								
Adj Asg. Remarks:	PLEASE SURVEY AND REVERT								
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

*PC5986S (SNM18D02621C02)
[PC5506U]
TP
MASS LIMOS
May 18 2018 9:00PM
[-]
One Zone Autocare

Upload Documents			Upload Photos			Compose New Letter			View View in Browser		
Assessment Reports									1 per page	<input checked="" type="checkbox"/>	
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)						Thumbnail	Print		
1	23/05/18 13:09	Accident Statement						Load HTM			
Photos/Images									3 per page	<input checked="" type="checkbox"/>	
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)						Thumbnail	Print		
1	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
2	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
3	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
4	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
5	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
6	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
7	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
8	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
9	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
10	23/05/18 13:01	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
Documentation									1 per page	<input checked="" type="checkbox"/>	
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)						Thumbnail	Print		
1	23/05/18 13:08	Sketch Plan [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
2	23/05/18 13:08	Sketch Plan #2 [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>		
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print		
1	23/06/18 11:02	LKKPhotosIn6-1.pdf						Load PDF			

Linked Accident Report Documents

										View	View in Browser	
Assessment Reports										1 per page		
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)								Thumbnail	Print	
1	23/05/18 13:09	Accident Statement								Load HTM		
Photos/Images										3 per page		
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)								Thumbnail	Print	
1	23/05/18 13:01	Accident Photo								Load JPG		
2	23/05/18 13:01	Accident Photo								Load JPG		
3	23/05/18 13:01	Accident Photo								Load JPG		
4	23/05/18 13:01	Accident Photo								Load JPG		

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
5	23/05/18 13:01	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
6	23/05/18 13:01	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
7	23/05/18 13:01	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
8	23/05/18 13:01	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
9	23/05/18 13:01	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
10	23/05/18 13:01	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
1	23/05/18 13:08	Sketch Plan	 Load JPG	<input checked="" type="checkbox"/>
2	23/05/18 13:08	Sketch Plan #2	 Load JPG	<input checked="" type="checkbox"/>

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/CTI18011258/R1Z4D3E2

Date: 09/07/2018

REFERENCE

Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. Policy No: DMB1SN1708921801

Claimant Vehicle No: PC5986S Insured Vehicle No: PC5506U

Date of Loss: 18/05/2018 Nature of Claim: TP Claim No: SNM18D02621C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **PC5986S**

Make & Model: TOYOTA HIACE, 3.0 D GL High-roof Commuter (A) Engine No: 1KD2688277

Reg. Date: 20/06/2017 (Man. Year: 2017) Chassis No: KDH2230030927

Colour: Grey Odometer: 112140 km

Engine Capacity: 2982 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: 195 R15C Rear Tyre Size: 195 R15C

Front Left Side: Michelin 7 mm Rear Left Side: Michelin 7 mm

Front Right Side: Michelin 7 mm Rear Right Side: Michelin 7 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: 21/06/2018

Date Inspected: 21/06/2018 Inspected At: One Zone Autocare (HQ)
7 SOON LEE STREET, #01-05 I SPACE
BUILDING
Singapore 627608

Estimated Period of Repair: 5.0 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 \$3,000.00 - \$3,500.00

REPAIR DETAILS

Reference

Part Source: (Last Synchronised: 09 Jul 2018)

Parts: N/A TOYOTA HIACE 3.0 D GL High-roof Commuter (A) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for PC5986S)

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 >