ASS, REC. BY:	n. RI	cs3 11pc 1801126	58 Tird3 102	al fastruction:	(4)
Surveyor .	Taytikh	ASSIGNMENT (Office)		
From (Person)	ENC WOO	of LPC	D	ate/Time: 90	0/6/18 @ 3.20pm
Estimated Cos	t:	Bill to			
	TTP RES / OD RES /	SLM 7847S	Insured:	SJT 6	68EC
at Workshop n	n/sVe	we Motorclinic	Tel:	9159 8	5951
of	No. 25 Ka	ki Bukit Rd 4			•
Policy No:		Cla	im No: 18 18 11	8 VP05	1020687
Sum Insured			ixcess:		
Make of Veh: (Client's Record)			0.0.A 19 o	8108
CA / REV /	REP. / REV 24 HRS	Person Contacted: M	v-jaron ve	H.O.D. Endorseme	nt:
Date/Time	Action/Instruction (J		
	8 F P 8 F M 18				
7		cc-1 12c186100	R3/ub3	DOA:	63 06 2018
	Submit PRS hel	ort			

.

REF: D	7 100
Sweeter Taylor 1	CANTENI CAE 2018 July.
From Date: 91/06/2018 Estimated Cost:	Voh No. SLM 784 78 Yr Regn: 2008 / July Type: Mcar / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
od (TP) WS/TP RES/OD RES/EVA/INV/MV To Inspect Vehicle No. SLM 7847S at Workshop m/s Verve Motorclinic of No. 25 kaki Bkt Rd 4 #03-39	Make: Mercedes Berry C200 c.c. 1796 Colour 87/wer A/C: Insured / Std / NI / NA Sp. Reading 220053 T/Radio: Insured / Std / NI / NA Eng/No:
Policy No. Claims No.	G/No: WDD 2040412 At 66 559 Gen. Cond: Good / Fair / Poor / Burnt Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh.	Brake: Inforder / Jammed / Leaked / Burnt or Modi: Nil / ByRim / STD A/Rim or Tyre Size: F: 235/47/1)—
(Policy Condition) Remark: The veh had commenced its repair at the time of inspection.	R: BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or
Bal. or Market Value: IDAC Accident Rport: Consistent? : Yes or No GIA / PR Seen: Consistent? : Yes or No	Front R/Bal. 6 mm F/Bal. 6 mm
Est. Repairs: days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS / wp)	D.O.A. D.O.L. 21/6/18 Survey held at Verve Mo Adin L. 457 Des. of Damages: Frt / Rear) 1 O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction +28 /43	
Date/Time File Pass to? : Preli. Report	Days Of Repair:
1) by tot Date/Time File Return to?	Resurvey No. of Trip: 1 Survey Fee: Transportation
Report Format : %	: Site Insp (\$) _S.*RS_St Interview (\$] Photos Tech Invs (\$) Others
Lump Sum / I B I: /S	Weekend 18 , 450 .

TOTAL



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

101	IPAC INSURANCE	Affiliated to Federation Internation	PRINCIPLE CONTRACTOR C		
LON	IPAC INSURANCE	: RHD	Ref : CS3/LPC18011	1268/T1rd3	
	BEACH ROAD -04/07 THE CONC	OURSESINGAPORE 199555	Date: 21-06-2018 Code: LPC2		
1.		Policy Particulars	:- (THIRD PARTY CLA	IM)	
	Insured Veh.	SJT 6688C	Veh. Inspected	SLM 7847S	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	18/18/18/VP05/020687	Excess (\$)	0.00	
	Assign From	ERIC WOO	Assign Date	21/06/2018	
2.		Vehicle Parti	culars & Condition		
	Make & Model		c.c	0	
	Engine No. HIDDEN		Year of Reg.		
	Chassis No.		Colour		
	Odometer -		Steering		
	Brakes		Modification		
	General				
3.		Condit	ions 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.	The second second	Descripti	on of Damages		
5.		Genera	I Information		
200	Accident Date	19/06/2018	Inspection Date	21/06/2018	
	Survey held at	8			
5a.	German	R R	emarks		
	B) THE REPAIR E THE REPAIRER W	ON WAS CONDUCTED ON A "WI STIMATE WAS NOT PRESENTED VAS TOLD TO PREPARE THE ES EASE FIND DAMAGED VEHICLE	O AT THE TIME OF INSPE TIMATE.		

Nivitha (LKK Auto)

From:

ERIC WOO JUN KIAT <ericwoo@lonpac.com>

Sent:

Wednesday, 20 June 2018 3:20 PM

To:

assignments@lkkauto.com

Cc:

MT_Claim_SG; Yvonne

Subject:

RE: Lonpac Insured SJT6688C [EAL.2018.5735.MK.ya - SLM7847S] DOA: 19/6/2018

Our Ref: 18/18/18/VP05/020687

Attachments:

180620-Info of SLM7847S.PDF

Dear Catherine / Nivitha,

Please take note of 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

From: ERIC WOO JUN KIAT

Sent: Wednesday, 20 June, 2018 3:18 PM

To: Yvonne Cc: MT Claim SG

Subject: RE: Lonpac Insured SJT6688C [EAL.2018.5735.MK.ya - SLM7847S] DOA: 19/6/2018 Our Ref:

18/18/18/VP05/020687

Dear Yvonne,

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: SLM 7847S.

Please advise the workshop to conduct survey.

Dear Catherine / Nivitha,

FYA.

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: Yvonne [mailto:yvonne@ealc.com.sg]
Sent: Wednesday, 20 June, 2018 10:47 AM

To: CHEW BENG KEE; ERIC WOO JUN KIAT

Subject: Lonpac Insured SJT6688C [EAL.2018.5735.MK.ya - SLM7847S]

Our ref

: 2018.5735.MK.ya - SLM7847S

Your ref

: SJT6688C

PLEASE REPLY VIA EMAIL (yvonne@ealc.com.sg)

Lonpac Insurance Bhd (Singapore Branch)

300 Beach Road,

#17-04/07 The Concourse

Singapore 199555

Attn: Motor Claims Department

NOTICE OF ACCIDENT

For your information only

Owner of SJT6688C

Cheng Kok Choong

28 Alexandra View

#30-05

Singapore 158744

Dear Sir/Madam,

CLAIMANT: KINETIC REGENCY PTE LTD

ACCIDENT INVOLVING SLM78475 & SJT6688C ON 19 JUNE 2018 ALONG SLIP ROAD OF JLN BUKIT MERAH TOWARDS HENDERSON ROAD AT ABOUT 1315 HOURS

We are instructed by KINETIC REGENCY PTE LTD to notify you (the insurer of SJT6688C) of a road traffic accident on 19 JUNE 2018 ALONG SLIP ROAD OF JLN BUKIT MERAH TOWARDS HENDERSON ROAD AT ABOUT 1315 HOURS involving our client's vehicle registration number SLM7847S and vehicle registration number SJT6688C driven by your insured at the material time.

A copy of the Singapore accident statement /traffic police report filed is enclosed.

As a result of the accident, our client's vehicle SLM78475 has been damaged. Before our client proceed to repair the damaged vehicle:

- Please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle; and
- 2. Please forward a copy of your insured's report.

Our client proposes to use one of the motor surveyors named below to conduct the joint pre-repair survey as a single joint expert:

3. How Andrew (Prominent Appraiser Services)

If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Regards,

Yvonne Ang

East Asia Law Corporation

No. 133 New Bridge Road, #10-02 Chinatown Point, Singapore 059413

Tel: 63232565 Fax: 63232373

Confidentiality Notice: This e-mail is confidential. It may also be legally privileged.

If you are not the addressee or to whom it is intended, you may not copy, forward, disclose or use any part of it.

If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by return e-mail.

DATE OF ACCIDENT	475
TIME OF ACCIDENT	19 / 06 / 7018 1315 HPS AM/PM
LOCATION OF ACCIDENT	SUP ROAD OF JUN BUXIT MERAH TOWARDS HENDERSON ROAD
Exact Purpose use during accid	THE KOAD HE ALM DUELL LIEBAN LOWNERS LEWINGERING KOAD
Charles and Control of the Control o	TRINGE TRIBE
NAME OF OWNER	KNEIK REGENCY PIE IID
NRIC	201 221714
CLAIM TYPE	OD / THIRD PARTY / Reporting Only
INSURANCE CO.	
TYPE OF CAVERAGE	Comprehensive / Third Party / Third Party Fire & Theft
POLICY NO.	
OLICI NO.	9999A565
NAME OF DRIVER	As above / If No. MOHD PUNGOT BIN JAMIN
NRIC	S1348731P Any passengers, NIL
DATE OF BIRTH	30 / 11 / 1959
OCCUPATION	Outdoor / Indoor
DATE OF DRIVING PASS	27 / 12 / 1979
GENDER	Male / Female
CONTAC NO.	8401118 Office. Home.
DDRESS	BUK 447B JALAN KAN #11-348 O(772447)
PRIVER HAVE ANY OWN Vehicle	
ELATIONSHIP	Employee / If No. HILLE
VEATHER CONDITION	Clear / Raining / Other:
OAD SURFACE	Dry / Wet / Other.
NY INJURIES	No / If yes . Who?
ONTAC NO.	
DLICE REPORT	No / If yes . Where?
HICLE B NO.	SUT 6688C NOUSWASEN OKTIA Any Passenger.
UME .	CHENCE YOU NY
INTAC NO.	9110 4883
HICLE C NO.	Any Passenger .
HICLE D NO.	Any Passenger .
HICLE E NO.	Any Passenger .
HICLE F NO.	Any Passenger .
Y WITNESS	在自己的人员的人员,但是是一个人的人,
INESS CONTACT NO.	(B)
e you been approach by unknown	
ring accident claims assistance	e? YES / NO
TICULAR WORKSHOP	
PNO	14804 8417
NTACT PERSON	JARON RANZ Director
NO.	- //ER/E 9159 3951
	W
	25 Kahi Buhit fload 4
	#33-19 Synorgy@N# Singapore 412800
	fel 6703 2000 Fax 6703 2009

Nivitha (LKK Auto)

From:

Yvonne <yvonne@ealc.com.sg>

Sent:

Wednesday, 20 June 2018 3:36 PM

To:

ERIC WOO JUN KIAT; assignments@lkkauto.com

Cc:

MT_Claim_SG

Subject:

PRI Lonpac Insured SJT6688C [EAL.2018.5735.MK.ya - SLM7847S]

Our ref

: 2018.5735.MK.ya - SLM7847S

Your ref

: SJT6688C

PLEASE REPLY VIA EMAIL (yvonne@ealc.com.sg)

Lonpac Insurance Bhd (Singapore 300

Beach Road,

#17-04/07 The Concourse

Singapore 199555

Attn: Motor Claims Department

2 DAYS' PRE-REPAIR NOTICE

Surveyor from M/s Lonpac Insurance Bhd (Singapore Branch)

Vehicle SLM7847S inspected as follows by Name:

Before repair

Parts removed

After repair

Signature

Signature

Signature

Date/ Time:

Date/Time:

Date/Time:

Dear Sir/Madam,

NOTICE TO THIRD PARTY INSURERS FOR PRE-REPAIR NOTICE

CLAIMANT: KINETIC REGENCY PTE LTD

ACCIDENT INVOLVING SLM7847S & SJT6688C ON 19 JUNE 2018 ALONG SLIP ROAD OF JLN BUKIT MERAH TOWARDS HENDERSON ROAD AT **ABOUT 1315 HOURS**

We refer to the above matter wherein we are instructed to act for KINETIC REGENCY PTE LTD, the owner of vehicle no. SLM7847S.

There is no agreement to the surveyors proposed by parties.

Our client's vehicle SLM7847S is available as follows, please call prior appointment for the pre-repair inspection:

M/s Verve Motorclinic Pte Ltd No. 25 Kaki Bukit Road 4, #03-39 Synergy@KB, Singapore 417800 Tel: 91595951 (Mr Jaron)

Please arrange for the pre-repair inspection on the damaged vehicle within 2 working days from the time of notification, excluding Saturdays, Sundays and public holidays.

Regards.

Yvonne Ang

East Asia Law Corporation

No. 133 New Bridge Road, #10-02 Chinatown Point, Singapore 059413

Tel: 63232565 Fax: 63232373

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If you are not the addressee or to whom it is intended, you may not copy, forward, disclose or use any part of it.

If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by return e-mail.

MSME 18079174 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 19/06/2018 17:40 SUBMITTED BY: Chia Pel Ying

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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 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

NOEMAIL

Address

BLK 447B JALAN KAYU #11-348

Postcode

792447

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

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)

000000000

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

WHILST STATIONARY AT THE SLIP ROAD FOR AT LEAST 40 SECONDS, SUDDENLY VEHICLE B COLLIDED ONTO MY REAR PORTION.

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

SJT6688C

Vehicle Make/Model/Colour

Details Of Properties

VEHICLE B

Vehicle Category

PRIVATE CAR

Name of Driver

CHENG YU WY

NRIC/Passport Number

Contact Number

97704883

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 warul misrepresentation or withholding of material facts may allow insurance companies to repudiate policy fiability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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 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.
- 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) w to 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' law yers/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
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

& Time

- (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.
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel

Sketch Plan



Sketch Plan #2 Pg. 1

LDED ONTO MY REAR	AT THE SUP ROAD FOR AT LEAST 40 GEOWDS, SUDDENLY VEH BY
MED MAIN 1.1 FR	**
<u>.</u>	
±	
<u></u>	
Haration	
declare the foregoing particulars are	
e declare the foregoing particulars are	
edaration declare the foregoing particulars are	re true in every respect.
declare the foregoing particulars are	re true in every respect.
e declare the foregoing particulars are	re true in every respect. **The tru
e declare the foregoing particulars are	re true in every respect.
e declare the foregoing particulars are	re true in every respect. **The tru
cyholder's Signature / Date &	re true in every respect. **The tru
e declare the foregoing particulars are	re true in every respect. Witnessed by Reporting Centre Personnel Time
e declare the foregoing particulars are considered by the consider	Ariver's Signature (If driver is not the policyholder) / Date Ariver's Signature (If driver is not the policyholder) / Date Personnel A Time
cyholder's Signature / Date & & & & & & & & & & & & & & & & & & &	re true in every respect. Witnessed by Reporting Centre Personnel Time



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

A THE RESIDENCE	PRE-REPAIR INS	PECTIO	N REPORT	
LONPAC INSURANCE 300 BEACH ROAD #17-04/07 THE CONC	BHD OURSESINGAPORE 199555	Ref: Date:	CS3/LPC18011268/T 16-10-2018 LPC2	1rd3n2
1.	Policy Particulars	11.500,000,000		RINGS CHARLES
Insured Veh.	SJT 6688C	_	spected	SLM 7847S
Policy No.		Covera	ge (\$)	0.00
Claim No.	18/18/18/VP05/020687	Excess	; (\$)	0.00
Assign From	ERIC WOO	Assign	Date	20/06/2018
2.	Vehicle Par	ticulars &	& Condition	
Make & Model	MERCEDES BENZ C200	c.c		1796
Engine No.	HIDDEN	Year of	Reg.	2008
Chassis No.	WDD2040412A166559	Colour	1	SILVER
Odometer	220053 KM	Steerin	g	IN ORDER
Brakes	IN ORDER	Modific	cation	SPORTS RIM
General	GOOD			
3.	Cond	itions of	Tyres	
	Size	Make		Balance
R/H Front Tyre	235/45 R17	MICHEL	IN	6 mm
L/H Front Tyre	235/45 R17	MICHEL	LIN	6 mm
R/H Rear Tyre	235/45 R17	MICHEL	IN	6 mm
L/H Rear Tyre	235/45 R17	MICHEL	IN	6 mm
4.	Descrip	tion of D	amages	
THE VEHICLE SU	THE VEHICLE SUSTAINED DAMAGES AT THE RE		TION.	
5.	Gener	ral Inform	nation	Hall Stoll Smith
Accident Date	19/06/2018	Inspec	t Date / Time	21/06/2018 (04:57 PM)
Survey held at	VERVE AUTOCLINIC			
88	BLK 25 KAKI BUKIT ROAD 4 #03-39 SYNERGY @ KB SINGAPORE 417800			
5a.		Remarks		
B) THE REPAIR E	ION WAS CONDUCTED ON A "W ESTIMATE WAS NOT PRESENTE WAS TOLD TO PREPARE THE E LEASE FIND DAMAGED VEHICL	ED AT THE STIMATE.	TIME OF INSPECTI	ON.

Report Ref No. CS3/LPC18011268/T1rd3n2

Inspected By

bushing

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A Automotive Assessor K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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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.