

REF:

III

CS/TU 18011480/Ksd3

ASSIGNMENT

From:

Date: 26/06/2018

Veh No:

GBC 49834

Yr Regn:

09 12

Estimated Cost:

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

Truck / Trailer or

Make:

Ssangyong

Model:

Acton c.c 1998

Colour:

white

A/C: Insured / Std / NI / NA

Sp. Reading:

95910

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

KP ADA1E TSC P139735

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F: Yoko

R: Maxxis

225/70R16

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

TOYO / YOKO or

Front

R/Bal.

8

mm

Rear

R/Bal.

7

mm

L/Bal.

8

mm

L/Bal.

7

mm

D.O.A.

30/5/18

D.O.I.

26/8/18

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S body

The U/C / Chassis frame / Body Structure affected due to collision.

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

To Inspect Vehicle No:

GBC 49834

at Workshop m/s

Sin Ming Autocare BFG

of

176 Sin Ming Drive #02-05

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

TBA

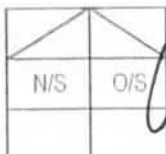
(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.



Bal. or Market Value:

840k

IDAC Accident Report:

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

Vehicle: IN / OUT

Date:

Person Contacted:

Date / Time

Action / Instruction

16 File pass to Catherine

1178.00

(\$134.00 Red - 10%)

11/9 extend Yp

RECEIVED 15 AUG 2018

Date/Time: File Pass to?

15/03/18

1)

Typ 34

Date/Time: File Return to?

2)



Preli. Report



Final Report

Days Of Repair:

4

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Insp (\$



Weekend (\$

Survey Fee:

250

Transportation:

) S + RS. SI

) Photos

) Others

10

TOTAL

260

Report Format:

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

1,178.00 P/P

Niyitha (LKK Auto)

From: Motor Claim - III <motorclaim@iii.com.sg>
Sent: Monday, 25 June 2018 10:34 AM
To: 'sur@lkkauto.com'; Catherine Chong (LKK Auto)
Cc: C Meenachi - III; Angela Tan (SMAC)
Subject: RE: OWN DAMAGED CLAIM GBC4983Y (SSANGYONG ACTYON SPORTS)
Attachments: GIA V1.pdf; ESTIMATE OF GBC4983Y.TIF

Dear Sir/Mdm,

Please conduct an OD survey on our vehicle GBC4983Y and let us have your report urgently.

This claim will be handled by Meena.

*Kindly create OD claim & upload this survey request email to merimen.

Thank You.

Best Regards,

Gabriel Wee

Motor Claims Dept.

India International Insurance Pte Ltd

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

From: C Meenachi - III
Sent: 25 June, 2018 10:21 AM
To: Gabriel Wee <Gabriel@iii.com.sg>; Motor Claim - III <motorclaim@iii.com.sg>
Subject: OWN DAMAGED CLAIM GBC4983Y (SSANGYONG ACTYON SPORTS)

Dear Gabriel,

Kindly arrange LKK to survey OD claim

Meena

Motor Claim Department

India International Insurance Pte Ltd

64 Cecil Street #04-02 IOB Building

Singapore 049711

Tel: 6347 6073 Fax: 6224 4174



From: Angela Tan (SMAC) [mailto:angela@autocare.com.sg]
Sent: Friday, 22 June, 2018 1:00 PM
To: C Meenachi - III <Meenachi@iii.com.sg>
Subject: FW: OWN DAMAGED CLAIM GBC4983Y (SSANGYONG ACTYON SPORTS)

Dear Meenachi,

We are the preferred Workshop of GBC4983Y
Please arrange survey vehicle before repair located at:

Sin Ming Autocare BFG Pte Ltd
176 Sin Ming Drive
#02-05

Thank you

With Regards,
Angela Tan
Customer Service Executive



Sin Ming Autocare BFG Pte Ltd
176 SIN MING DRIVE, #02-05 SINGAPORE 575721
Email: angela@autocare.com.sg
Tel : 6455 0600 | Fax : 6455 6192

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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India International Insurance Pte Ltd.

Registration No. 198703792-K



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

INDIA INTERNATIONAL INSURANCE PL

Ref : CS/III18011480/Ksd3

64 CECIL STREET
#05-02 IOB BUILDING SINGAPORE 049711

Date : 25-06-2018



Code : III2

1. Policy Particulars :- OWN DAMAGE

Insured Veh.	Veh. Inspected	GBC 4983Y
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From GABRIEL WEE	Assign Date	25/06/2018

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 30/05/2018	Inspection Date
Survey held at SIN MING AUTOCARE BFG PTE LTD 176, SIN MING DRIVE #02-05 SIN MING AUTOCARE COMPLEX SINGAPORE 575721	

5a. Remarks

A)THE MARKET VALUE IS S\$------(EST. AVERAGE)
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.

[Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Statutory Board
Owner ID:	0064C
Vehicle Details	
Vehicle No.:	GBC4983Y
Vehicle to be Exported:	No
Intended De-registration Date:	26 Jun 2018
Vehicle Make:	SSANGYONG
Vehicle Model:	ACTYON SPORTS D/CAB 2.0 6AT 2WD 4DR D/AB
Primary Colour:	White
Manufacturing Year:	2012
Engine No.:	67196022516120
Chassis No.:	KPADA1ETSCP139735
Maximum Power Output:	-
Open Market Value:	\$19,192.00
Original Registration Date:	20 Sep 2012
First Registration Date:	20 Sep 2012
Transfer Count:	0
Actual ARF Paid:	\$19,192.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	19 Sep 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$57,809.00
COE Rebate Amount:	\$24,469.00
Total Rebate Amount:	\$24,469.00

The information contained herein is correct as at 26 Jun 2018

OK

Shirley Hiew (LKK Auto)

From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Sent: Wednesday, 15 August 2018 10:06 AM
To: 'Angela Tan (SMAC)'
Subject: RE: GBC 4983Y OD (III)

Dear Angela,

Confirm final fig of \$1,178.00 before excess \$600/- & GST.

Final invoice and all supporting documents sent over to India International Insurance Pte Ltd.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Angela Tan (SMAC) [mailto:angela@autocare.com.sg]
Sent: Tuesday, 14 August 2018 1:00 PM
To: 'Shirley Hiew (LKK Auto)' <ShirleyHiew@lkkauto.com>
Subject: RE: GBC 4983Y OD (III)

Dear Shirley,

Surveyor Kenneth had finalized COR \$1,178.00.
Please refer attached of final bill & Discharge Voucher.

Thank you

With Regards,
Angela Tan
Customer Service Executive



Sin Ming Autocare BFG Pte Ltd
176 SIN MING DRIVE, #02-05 SINGAPORE 575721
Email: angela@autocare.com.sg
Tel : 6455 0600 | Fax : 6455 6192

From: Shirley Hiew (LKK Auto) [mailto:ShirleyHiew@lkkauto.com]
Sent: Wednesday, 27 June, 2018 1:47 PM
To: 'Angela Tan (SMAC)' <angela@autocare.com.sg>
Cc: sur@lkkauto.com
Subject: GBC 4983Y OD (III)

Shirley Hiew (LKK Auto)

From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Sent: Wednesday, 27 June 2018 1:47 PM
To: 'Angela Tan (SMAC)'
Cc: sur@lkkauto.com
Subject: GBC 4983Y OD (III)

Dear Eileen/Angela,

As instructed by our client, please proceed to repair the insured vehicle **GBC 4983Y (Excess \$ 600/-)**.

If there are any check items or supplementary items please inform our office's Assignment Team at Tel: 6741 8434 to arrange our surveyor for inspection.

All supplementary items and unconfirm items are subjected to further approval from insurance company before completion of the repair.

*Our client reserve their right not to pay if there is no valid approval obtained before repair.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

View Received Message

This mail is associated with :

***GBC4983Y (MC20182504)**

OD

May 30 2018 12:00PM

[URBAN REDEVELOPMENT AUTHORITY]

Sin Ming Autocare BFG Pte Ltd

[Reply](#) [Reply All](#) [Mark as Unread](#) [Print Message](#) [Delete Message](#) [Forward](#)

From India International Insurance Pte Ltd (HQ) (III_SG), sent on 27/06/2018 10:39 AM.

To LKK_HQ

Subject Alert - Adj Mandate Approved (S\$1262.00) - GBC4983Y - Claim Handler: C. Meenachi

Approved:1262.00.

DOCUMENTS SUMMARY

There are no documents.

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

To: India International Insurance Pte Ltd
64 Cecil Street
#04-00 IOB Building
Singapore 049711

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn:

Date: 26 Jun 2018

Preliminary Advice

Vehicle No	: GBC4983Y	Accident Date	: 30/05/2018
Make	: SSANGYONG ACTYON SPORTS	Policy No.	: M492427
Assignment Date	: 26/06/2018	Excess	: S\$0.00
Date of Inspection	: 26/06/2018	Est. Duration of Repair	: 4 days
Inspection At	: Sin Ming Autocare BFG Pte Ltd (HQ) 176, Sin Ming Drive #02-05, Sin Ming Autocare Complex Singapore 575721		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages o/s body and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	1,312.00
Revised Amount	:S\$	1,262.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,262.00

Lump Sum Repair :S\$

Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	40,000.00
COE / PARF Rebate	:S\$	24,469.00
Salvage Value	:S\$	
Margin for Repair	:S\$	15,531.00

Remarks

- (X) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- () The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- (X) Other comments : Pending parts prices (supplementary) .

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	11/06/2018 14:19
Date Of Accident	30/05/2018 12:20
Exact Location Of Accident	HINDOO ROAD OPEN SPACE CARPARK (CARPARK NO. H0015)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC4983Y
Insured/Policyholder	
Name Of Registered Owner	URBAN REDEVELOPMENT AUTHORITY
Co Reg No	T08GB0064C
Email Address	JACELYN_LOW@URA.GOV.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63218201

Vehicle Particulars

Manufacturer	SSANGYONG
Model	ACTYON SPORTS-2.0 D/CAB 2.0 AT AIRBAG 2WD (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	

Vehicle Category	COMMERCIAL VEHICLE
------------------	--------------------

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M492427
Cover Note Number	

Driver

Name of Driver	SAMSUDIN BIN ABDULLAH
NRIC No	S1420479B
Date Of Birth	29/10/1960
Occupation	OUTDOOR
Date Of Driving Pass	06/02/1982
Driving Experience	36 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91351109
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address -
 Postcode
 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 COLLIDED INTO PROPERTY
 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
 Number of Passengers (Including Driver) 2
 Passenger 1
 NAME: : MAHARI ARIP
 GENDER: : FEMALE

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

I WAS DRIVING MY COMPANY VEHICLE AND WANTED TO EXIT FROM THE OPEN SPACE CARPARK ALONG HINDOO ROAD. AFTER EXITING FROM THE GANTRY BARRIER, I WANTED TO MAKE A RIGHT TURN. HOWEVER, I TURN TOO EARLY RESULTED MY VEHICLE HIT AGAINST A STONE KERB ON MY RIGHT SIDE. NO INJURIES WERE INVOLVED. THAT'S ALL.

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
 Vehicle Make/Model/Colour
 Details Of Properties STONE KERB
 Vehicle Category NA/UNKNOWN
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan





SKETCH PLAN

IMPORTANT NOTICE

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

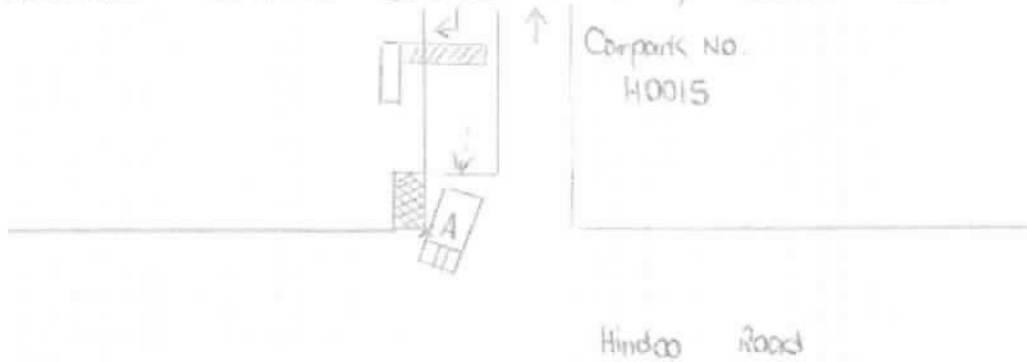
I understand, acknowledge, agree and consent that:

- (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: 11 JUN 2013
Driver's Signature: 
(If driver is not the policyholder)
Date & Time: 11 JUN 2013
Reporting Centre Personnel's Signature: 
Name: ANG WEI GUANG
NRIC/FIN No.: S8410708E

Sketch Plan #2

SKETCH PLAN D. O. A 30.05.2018, 12:20 Hrs



A - GBC 4983 y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING MY COMPANY VEHICLE AND WANTED TO EXIT FROM THE OPEN SPACE CARPARK ALONG HINDOO ROAD. AFTER EXITING FROM THE GANTRY BARRIER, I WANTED TO MAKE A RIGHT TURN. HOWEVER, I TURN TOO EARLY RESULTED MY VEHICLE HIT AGAINST A STONE KERB ON MY RIGHT SIDE. NO INJURIES WERE INVOLVED. THAT'S ALL.

DECLARATION

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

Policyholder's Signature
Date & Time:

11 JUN 2018

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

11 JUN 2018

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

ANG WEI GUANG
S8410708E

MLTM16075510-01 / Lim Tan Motor Pte Ltd - HQ
 ENTRY DATE & TIME: 11/06/2018 14:19
 SUBMITTED BY: Ang Wei Guang, Richard

Your NCD will be affected due to late reporting
 Actual e-Filing Submission Date & Time: 21/06/2018 10:32

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	11/06/2018 14:19
Date Of Accident	30/05/2018 12:20
Exact Location Of Accident	HINDOO ROAD OPEN SPACE CARPARK (CARPARK NO. H0015)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC4983Y
Insured/Policyholder	
Name Of Registered Owner	URBAN REDEVELOPMENT AUTHORITY
Co Reg No	T08GB0064C
Email Address	JACELYN_LOW@URA.GOV.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63218201
Vehicle Particulars	
Manufacturer	SSANGYONG
Model	ACTYON SPORTS-2.0 D/CAB 2.0 AT AIRBAG 2WD (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M492427
Cover Note Number	
Driver	
Name of Driver	SAMSUDIN BIN ABDULLAH
NRIC No	S1420479B
Date Of Birth	29/10/1960
Occupation	OUTDOOR
Date Of Driving Pass	06/02/1982
Driving Experience	36 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91351109
Fax Number	
Contact Number	
Email Address	NOEMAIL



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
Sin Ming Autocare Complex
Singapore 575721
Tel : (65) 6455 0600
Fax : (65) 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

INDIA INTERNATIONAL INSURANCE PTE LTD
64 CECIL STREET #05-00 IOB BUILDING
SINGAPORE 049711

Estimate : E18/2448

Attention : Motor Claim Department
Contact : 6223 8122 Fax No. : 6225 7743

Date : 21/06/2018
Vehicle Num. : GBC4983Y
Make/Model : SSANGYONG ACTYON SPORTS D/C
Chassis/Eng# :
Accident Date : 30/05/2018
Claim No. :
Reference : OD CLAIM
Policy No. : M492427

S/N Quantity Particular Unit Price Amount S\$

1. PARTS PURCHASED :
2. SIDE SKIRTING-RH
STICKER

Total Parts Purchased S\$:
10.00% Of The Above Parts S\$:

Based On Cost Plus S\$:

LABOUR :
SPRAY PAINT & PANEL BEATING (2 DOOR AND 1 FENDER)

Labour Total S\$:

270.00

150.00

420.00

42.00

462.00

850.00

850.00

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

E. & O.E.

Total S\$: 1,312.00

for Sin Ming Autocare BFG Pte Ltd



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
Sin Ming Autocare Complex
Singapore 575721
Tel : (65) 6455 0600
Fax : (65) 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

INDIA INTERNATIONAL INSURANCE PTE LTD
64 CECIL STREET #05-00 IOB BUILDING
SINGAPORE 049711

Supplementary Estimate : E18/2450

Attention : Motor Claim Department
Contact : 6223 8122 Fax No. : 6225 7743

Date : 25/06/2018
Vehicle Num. : GBC4983Y
Make/Model : SSANGYONG ACTYON SPORTS D/C
Chassis/Eng# :
Accident Date : 30/05/2018
Claim No. :
Reference : OD CLAIM
Policy No. : M492427

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

1.		PARTS PURCHASED :		
2.		FRONT DOOR (RH) <i>B1 ✓</i>		
		FRONT FENDER RH <i>R1 ✓</i>		
		Total Parts Purchased S\$:		_____
		10.00% Of The Above Parts S\$:		_____
		Based On Cost Plus S\$:		_____

E. & O.E.

Total S\$: 0.00

for Sin Ming Autocare BFG Pte Ltd



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
Sin Ming Autocare Complex
Singapore 575721
Tel : (65) 6455 0600
Fax : (65) 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

INDIA INTERNATIONAL INSURANCE PTE LTD
64 CECIL STREET #05-00 IOB BUILDING
SINGAPORE 049711

Attention : Motor Claim Department
Contact : 6223 8122 Fax No. : 6225 7743

Tax Invoice : S08/2801

Date : 14/08/2018
Vehicle Num. : GBC4983Y
Make/Model : SSANGYONG ACTYON SPORTS D/C
Chassis/Eng# :
Accident Date : 30/05/2018
Claim No. : OD CLAIM
Reference : BFG
Policy No. : M492427

S/N	Quantity	Particular	Unit Price	Amount S\$
1.		LIST ITEMS : LUMP SUM REPAIR (Parts & Labour inclusive)		1,178.00
		List TotalS\$:		1,178.00

7

for Sin Ming Autocare BFG Pte Ltd

E. & O.E.

Total S\$:	1,178.00
Excess Amount S\$:	600.00
Net Amount S\$:	578.00
GST @ 7% S\$:	40.46
Amount Due S\$:	618.46
=====	

**OWN DAMAGE (OD) CLAIM
SATISFACTION & DISCHARGE VOUCHER**

Policy No. : M492427 Claim No. :
Vehicle No. : GBC 4983Y Date of Loss :
Insured : URBAN REDEVELOPMENT AUTHORITY
Repairers : SIN MING AUTOCARE BFG PTE LTD
Gross cost of repairs : S\$ 1,178.00
Policy excess : S\$ 600.00
Cost of repairs net of policy excess : S\$ 578.00
GST, if applicable : S\$ 40.46
Total amount payable : S\$ 618.46

I/We hereby declare and confirm that I/we have received from the aforesaid Repairers my/our aforesaid vehicle which is repaired to my/our entire satisfaction and is now in good running order and in consideration of INDIA INTERNATIONAL INSURANCE PTE LTD (hereinafter referred to as Insurers) settling the repair costs stated above with the said Repairers, I/we hereby release and discharge the Insurers from all further obligations in respect of damage to my/our aforesaid motor vehicle on the abovementioned date. Insurers will continue to be liable in respect of the third party injury and property damage claims, if any.


I/We confirm that there is no other insurance covering this loss or damage and no other person has any interest in the subject matter of this claim. In consideration of the above payment, I/we have no further claims whatsoever on the Insurers and I/we hereby undertake to indemnify and hold harmless the Insurers against any claim which may be made against them in respect of damage to my/our aforesaid motor vehicle on the abovementioned date.

I/We hereby agree that by virtue of the aforesaid payment the Insurers are subrogated to all my/our rights and remedies in accordance with the laws governing the contract of insurance. I/We hereby authorize the Insurers to use my/our name to the extent necessary to exercise all or any of such rights and remedies. I/We further agree to co-operate with and render all assistance to the Insurers which they may reasonably require when exercising such rights and remedies.

I/We agree that if at any time subsequent to the settlement of the claim, the Insurers become aware of any material fact which if known earlier would have prejudiced my / our claim wholly or in part, I/we will refund the entire claim amount incurred by the Insurers within 7 (seven) days from the date on which Insurers make a demand in writing for such a refund.

Date:

Signature of
Insured


Name : Samudhin Abdullah

Name

NRIC

Address

Nationality

Occupation

Designation

& Company Stamp:

1420479 B
BLK 536 W1 Land
Drive 14 #04-G17

S. pone

U.S. P. DIVISION



Signature of
Witness


Name

NRIC

Address

Nationality

Occupation


SIN MING AUTOCARE BFG PTE LTD
178, Sin Ming Road
Singapore 570617
Tel: 63476100
Fax: 62244174

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	27 Jun 2018 Edit Reg		25 Jun 2018 00:00 Edit Adj Rpt	S\$1,178.00 Edit Estimates	S\$1,178.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured: URBAN REDEVELOPMENT AUTHORITY, Co. Reg. No.: T08GB0064C									
Vehicle Reg. No.: GBC4983Y		Date of Loss: 30/05/2018 12:00 - :59 [68 Months and 10 Days From LTA Reg Date (Man Yr)]							
Claim Type: OD / MC20182504		Policy/Cover Note No.: M492427 (Comprehensive)							
		Excess: S\$600.00							
Repairer: Sin Ming Autocare BFG Pte Ltd (HQ) 176, Sin Ming Drive #02-05, Sin Ming Autocare Complex, 575721 Sin Ming - Tel: 64550600									
Handling Insurer: India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by C. Meenachi - 6347 6073]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 05/07/2018]									
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
• III_SG (27/06/2018): Alert - Adj Mandate Approved (S\$1262.00) - GBC4983Y - Claim Handler: C. Meenachi									
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

*GBC4983Y (MC20182504)
 OD
 May 30 2018 12:00PM
 [URBAN REDEVELOPMENT AUTHORITY]
 Sin Ming Autocare BFG Pte Ltd

Upload Documents		Upload Photos	Compose New Letter	View View in Browser	
Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print	
1	26/06/18 13:51	Adjuster Immediate Advice	Load HTM		
Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print	
1	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
2	15/08/18 09:55	Odometer Reading	Load JPG	<input checked="" type="checkbox"/>	
3	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
4	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
5	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
6	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
7	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
8	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
9	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
10	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
11	15/08/18 09:55	General View	Load JPG	<input checked="" type="checkbox"/>	
12	15/08/18 09:57	General View	Load JPG	<input checked="" type="checkbox"/>	
13	15/08/18 09:57	Chassis Number	Load JPG	<input checked="" type="checkbox"/>	
14	15/08/18 09:59	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>	
15	15/08/18 09:59	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>	
16	15/08/18 09:59	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>	
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print	
1	26/06/18 13:58	ESTIMATE	Load PDF		
2	12/09/18 15:44	Workshop Invoice	Load PDF		
3	12/09/18 15:44	Discharge Voucher	Load PDF		
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print	
1	27/06/18 09:12	Singapore Accident Statement	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: 100px; width: 100%;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

India International Insurance Pte Ltd
64 Cecil Street, #04-00 IOB Building
Singapore 049711

Our File No: CS/III18011480/KSD3E2

Date: 12/09/2018

REFERENCE

Insured/Claimant: URBAN REDEVELOPMENT AUTHORITY

Policy No: M492427

Date of Loss: 30/05/2018

Nature of Claim: OD

Claim No: MC20182504

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **GBC4983Y**Make & Model: SSANGYONG ACTYON SPORTS, 2.0 D/CAB 2.0
AT AIRBAG 2WD (A)

Engine No: 67196022516120

Reg. Date: 20/09/2012 (Man. Year: 2012)

Chassis No: KPADA1ETSCP139735

Colour: White

Odometer: 95910 km

Engine Capacity: 1998 cc

Market Value/New Car Price: S\$40,000.00

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: 225/70 R16

Rear Tyre Size: 225/70 R16

Front Left Side: Yokohama 8 mm

Rear Left Side: Maxxis 7 mm

Front Right Side: Yokohama 8 mm

Rear Right Side: Maxxis 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	462.00	378.00	84.00	18.18
Miscellaneous Items	0.00	0.00	0.00	
Labour	850.00	800.00	50.00	5.88
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	1,312.00	1,178.00	134.00	10.21
- Excess (S\$)	600.00	600.00	0.00	0.00
(S\$)	712.00	578.00	134.00	18.82
+ GST 7.00/7.00% (S\$)	49.84	40.46	9.38	18.82
Nett Amount (S\$)	761.84	618.46	143.38	18.82

INSPECTION

Date of Assignment: 25/06/2018

Date Inspected: 26/06/2018 Inspected At:

Sin Ming Autocare BFG Pte Ltd (HQ)
176, Sin Ming Drive #02-05, Sin Ming
Autocare Complex
Singapore 575721

Estimated Period of Repair: 4.0 days

Adjuster: KENNETH KONG**Manager:** Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 12 Sep 2018)
Parts:	M1-SUV	SSANGYONG ACTYON SPORTS 2.0 D/CAB 2.0 AT AIRBAG 2WD (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for GBC4983Y)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*SIDE SKIRTING - RH (WCP)	Bent	270.00 F	*270.00 FL
2	1		*STICKER (WCP)	Cracked	150.00 F	*150.00 FL
					Sub Total (\$\$)	420.00
					- List Item Discount on L Items 0.00/10.00% (\$\$)	0.00
					+ Margin on L,N Items 10.00/0.00% (\$\$)	42.00
					Total Parts (\$\$)	462.00
						378.00

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	SPRAY PAINT & PANEL BEATING (2 DOOR AND 1 FENDER)	New	850.00	800.00
Gross Labour Cost (S\$)			850.00	800.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >