

12/03/2003

ASS. REC. BY:

REF: CS3/LPC18011511 / G7d3 n2

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person):

Ong li li

of

LPC

Date/Time:

25/6/18 @ 3:37pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKR 6292J

Insured:

SKE 4047H

at Workshop m/s:

Motor Intel

Tel:

8838 3318

of

13 Kaki Bukit Road 4 # 01-20

Policy No:

Claim No:

18/18/18/VPOS/020692

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

20/06/2018

26/06/2018

CA / REV / REP. / REV 24 HRS

lup

H.O.D. Endorsement:

Date/Time:

4:08pm 25/6/18

Person Contacted:

Wilson

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

SKR 6292J - X

SKE 4047H - X

07/8/18 @ 2:44pm checked with Wilson, the AJAX already surveyed on 27/6/18 & 26/6/18

09/8/18 @ Submit Pgs. 07/27/18.

8712D

Veh No: SKR6292J Yr Regn: 26 Feb 2015

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

\$ 8000 - \$ 10k.

RECEIVED 02 AUG 2018

450

Nivitha (LKK Auto)

From: ONG LI LI <llong@lonpac.com>
Sent: Monday, 25 June 2018 3:37 PM
To: sales@mia.com.sg; assignments@lkkauto.com; 'SUR' (sur@lkkauto.com)
Cc: MT_Claim_SG
Subject: RE: OUR REF : VS SKR6292J (MIA) PRE-REPAIR INSPECTION - YOUR REF: SKE 4047
H; Clm Ref: 18/18/18/VP05/020692
Attachments: PRI FORM.PDF

Without Prejudice
Save as to Costs

Dear Sir/Mdm

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the following list to conduct the joint pre-repair survey as a single joint expert.

No.	Name	Please tick ✓
1	Kalvin Ang	
2	Xing Guo Qiang	
3	Mohamad Taufikh	
4	Bryan Ang	
5	Adrian Ling	
6	Mohammed Rasul	
7	Marcus Chua	
8	Kenneth Kong	
9	Muhammad Nazril Bin Abdullah	
10	Sathya Sai Kathirrasen	

Please let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

Dear Catherine,

Please refer to the attached and follow up to arrange PRI.

Regards,

Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

From: CHEW BENG KEE
Sent: Monday, 25 June, 2018 3:32 PM
To: MT_Claim_SG
Subject: FW: OUR REF : VS SKR6292J (MIA) PRE-REPAIR INSPECTION - YOUR REF: SKE 4047 H; Clm Ref: 18/18/18/VP05/020692

Hi Li Li, pls assist to arrange the PRI. TQ.

Best Regards
Chew Beng Kee
Head of Claims | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6250 7388 Ext. 246 | Fax: (65) 6296 2706

From: Sales MIA [<mailto:sales@mia.com.sg>]
Sent: Monday, June 25, 2018 3:06 PM
To: CHEW BENG KEE
Subject: OUR REF : VS SKR6292J (MIA) PRE-REPAIR INSPECTION - YOUR REF: SKE 4047 H

Without Prejudice

Dear Sir / Mdm ,

We refer to the above matter.

Please find enclosed documents for your necessary action.

Kindly assist to arrange the Pre-Repair Survey as per attachment details.

Thks & Regards
Tinie
Motor Intel Automo Pte Ltd



Motor Intel Automo Pte. Ltd.

13 Kaki Bukit Road 4 @ Bartley Biz Centre

#01-20 Singapore 147807

Tel: 6281-0087 Fax: 6281-0187

Our Ref : VS SKR6292J (MIA)

Your Ref : VEHICLE SKE4047H

Date: 25 JUNE 2018

LONPAC INSURANCE BHD

Email : bkchew@lonpac.com

Attn: Motor Claims Department

Dear Sirs,

ACCIDENT INVOLVING SKR6292J & SKE 4047 H AT PIE (CHANGI) BEFORE
EXIT 26B ON 20 JUNE 2018 @ 1920 HOURS

(NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS
PURSUANT TO PARAGRAPH 6.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES)

We act for AARON LEE XUAN ANG who has appointed the undermentioned workshop to repair
his/her motor vehicle no. SKR6292J.

Please be informed that the said vehicle can be inspected at:

Name : Motor Intel Automo Pte Ltd
Address : Bartley Biz Centre
13 Kaki Bukit Road 4 #01-20
Singapore 417807
Person to contact : Mr Wilson Ong
Tel : 6281 0087 / 8838 3318

If you failed to conduct the pre-repair inspection within the next 2 working days excluding any
intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter
without further reference to you.

Yours faithfully

Motor Intel Automo Pte. Ltd.
Email : sales@mia.com.sg

For Surveyor
Please initial here after completion
of pre-repair inspection. Thank you.

Appointed surveyor :
(Name & Signature)

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	8712D
Vehicle Details	
Vehicle No.:	SKR6292J
Vehicle to be Exported:	No
Intended De-registration Date:	28 Jun 2018
Vehicle Make:	VOLVO
Vehicle Model:	S80 T5 2.0 A/T ABS D/AIRBAG 2WD
Primary Colour:	Grey
Manufacturing Year:	2014
Engine No.:	B4204T111128090
Chassis No.:	YV1AS40CDF1189242
Maximum Power Output:	180.0 kW (241 bhp)
Open Market Value:	\$32,147.00
Original Registration Date:	26 Feb 2015
First Registration Date:	26 Feb 2015
Transfer Count:	1
Actual ARF Paid:	\$32,006.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Feb 2025
PARF Rebate Amount:	\$24,004.00
Intended COE Rebate Details	
COE Expiry Date:	25 Feb 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$66,751.00
COE Rebate Amount:	\$44,494.00
Total Rebate Amount:	\$68,498.00

The information contained herein is correct as at 28 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	21/06/2018 12:19
Date Of Accident	20/06/2018 19:20
Exact Location Of Accident	PIE(CHANGI) BEFORE EXIT 26B
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR6292J
Insured/Policyholder	
Name Of Registered Owner	AARON LEE XUAN ANG
NRIC No	S8938712D
Email Address	AARONLXA@LIVE.COM
Mobile Phone No	(LOCAL) +65-88770007
Alternative Phone No	OTHERS-88770007

Vehicle Particulars

Manufacturer	VOLVO
Model	S80-1.6 D 2 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V07075/VPE
Cover Note Number	

Driver

Name of Driver	AARON LEE XUAN ANG
NRIC No	S8938712D
Date Of Birth	25/10/1989
Occupation	INDOOR
Date Of Driving Pass	22/06/2009
Driving Experience	8 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88770007
Fax Number	
Contact Number	OTHERS-88770007
EMail Address	AARONLXA@LIVE.COM

Address	BLK 16A SIMEI LANE #07-12
Postcode	520116
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	AFTER RAIN
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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 TO BELOW STATEMENT/SKETCH PLAN

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	SLK1788D
Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKE4047H
Vehicle Make/Model/Colour	CHEVROLET

Details Of Properties

Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	AARON LEE XUAN ANG
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKR6292J
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	167A SIMEI LANE #07-12
Postcode	52116


SKETCH PLAN


IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any 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.

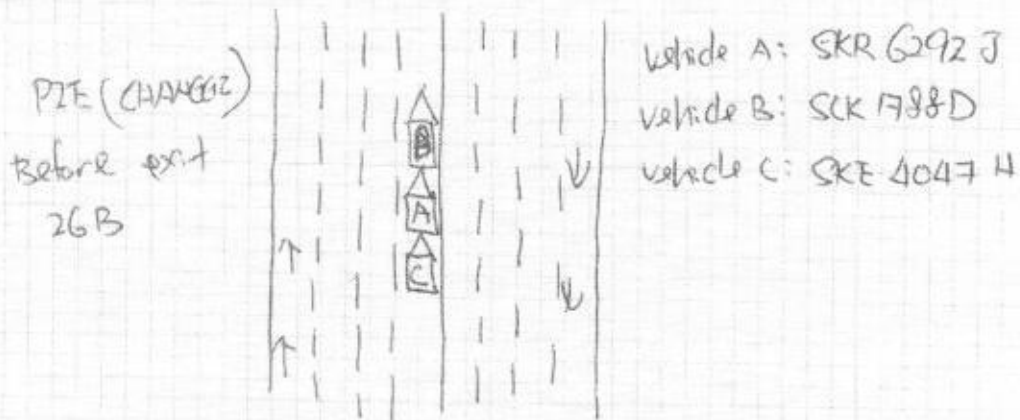
X 
Policyholder's Signature
Date & Time:

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

IDAC KAKI BUKIT(VAC)
23 KAKI BUKIT AVE 4
Reporting Centre Personnel's Signature
Name: 
Tel: 67416697
Fax: 67492305
NRIC/FIN No.
Email: vackh@ringnet.com.sg

21 JUN 2018

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 2nd Jun 2018 around 7:20pm, I was travelling along PIE towards Changi before exit 26B. Car B slowed down and stop and I followed to stop behind car B. Suddenly, car C hit my the rear portion of my vehicle. Car C caused me to hit car B.

DECLARATION

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

x *Heo*
Policyholder's Signature
Date & Time:

x *Heo*
Driver's Signature
(If driver is not the policyholder)
Date & Time: 21 JUN 2018

IDAC KAKI BUKIT(VAC)
23 KAKI BUKIT AVE 4
Singapore 415933
Tel: 67416697
Fax: 67492305
Reporting Centre Personnel's Signature
Name: *Yock*
Email: *yock@idac.gov.sg*
NRIC/FIN No.:

**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

PRE-REPAIR INSPECTION REPORT

LONPAC INSURANCE BHD

Ref: CS3/LPC18011511/Gqd3n2

300 BEACH ROAD

Date: 03-08-2018

#17-04/07 THE CONCOURSESINGAPORE 199555



Code: LPC2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SKE 4047H	Veh. Inspected	SKR 6292J
Policy No.		Coverage (\$)	0.00
Claim No.	18/18/18/VP05/020692	Excess (\$)	0.00
Assign From	ONG LI LI	Assign Date	25/06/2018

2. Vehicle Particulars & Condition

Make & Model	VOLVO S80 T5 2.0	c.c	1969
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	YV1AS40CDF1189242	Colour	GREY
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	235/40 ZR18	MICHELIN	6 mm
L/H Front Tyre	235/40 ZR18	MICHELIN	6 mm
R/H Rear Tyre	235/40 ZR18	MICHELIN	6 mm
L/H Rear Tyre	235/40 ZR18	MICHELIN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION.	
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5. General Information

Accident Date	20/06/2018	Inspect Date / Time	26/06/2018 (03:20 PM)
Survey held at	MOTOR INTEL AUTOMO PTE LTD 13 KAKI BUKIT ROAD 4 @ BARTLEY BIZ CENTRE #01-20 SINGAPORE 147807		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.
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Report Ref No. CS3/LPC18011511/Gqd3n2

Inspected By

XING GUO QIANG

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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