

ASS. REC. BY:

REF:

CS/AWA18012150/ Usd3 72

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person):

Hew Lee Fong

of

AWAC

Date/Time:

4/7/18 @ 10:47am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GBE 4285T

Insured:

GBB 7883M

at Workshop in/:

Soc Leon Motor

Tel:

6747 7858

of

J kaki Bukit Ave 6 Blk D #01-91

Policy No:

Claim No:

GBB 7883M / KW

Sum Insured:

Excess:

Make of Veh

(Client's Record)

D.O.A.

22/06/2018

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

11:03am @ 4/7/18

Person Contacted:

Irene Leong

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

GBE 4285T - X

GBB 7883M - X

(08/11/13) wef

REF:

AWA /

ASS. REC. BY: MARCUS**ASSIGNMENT**

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: GSE 4285at Workshop m/s SOC 100of 2.3

Insured: _____

Policy No. _____

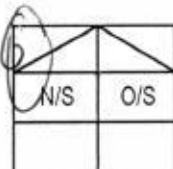
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: _____

IDAC Accident Rpt: C Consistent?: Yes or NoGA / PR Seen: C Consistent?: Yes or NoEst. Repairs: 4 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: GSE 4285 Yr Regn: 1715

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

Truck / Trailer or 171Make: NISSAN NV350 c.c. 2400Colour: Grey A/C: Insured / Std / NI / NASp. Reading: 81329 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JNM C2E 262000538

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt orModi: NI / S/Rim / STD A/Rim orTyre Size: F: 195-15

R: _____

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

TOYO / YOKO or

Front 6 mm Rear 6 mmR/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 22/6/18 D.O.I. 4/7/18

Survey held at _____

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

N/S L, N/S R

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

RECEIVED 29 OCT 2018

Date / Time	Action / Instruction
29/10/18	4/5 @ 2800 confirmed with owner
29/10/18	Confirmed Hs \$2,800/- @ 4 days with Marcus. (\$3,818.58 Red - 58%)

Date/Time, File Pass to?

1) 29/10/18

Date/Time, File Return to?

2) _____

☐ : Preli. Report☒ : Final ReportDays Of Repair: 4Resurvey No. of Trip: 1

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Report Format :

Lump Sum / I.B.I: (\$ 2,800/- Hs)

200

Nivitha (LKK Auto)

From: Hew, LeeFong <LeeFong.Hew@awac.com> on behalf of Motorsurvey
<Motorsurvey@awac.com>
Sent: Wednesday, 4 July 2018 10:47 AM
To: 'assignments'
Cc: 'SUR'; 'slmoi'
Subject: TP Survey assignment for GBE 4285T - DOA: 22/06/2018 Our ref: GBB 7883M/KW

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us **do** have consensus in the appointment of **Mr Marcus Chua** as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	GBE 4285 T
Insured Vehicle	:	GBB 7883 M (Accident not Reported)
Policy Number	:	AVCPSB0091641800
Name of Workshop	:	SOC Leon Motor Works
Contact Number	:	6747 7858
Person to Contact	:	Irene Leong
Estimated Cost of repairs	:	\$ 6,618.58

Regards,
Claims Division

Copy to SOC Leon Motor Works via Email

Note -

- (x)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail

in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	6120C
Vehicle Details	
Vehicle No.:	GBE4285T
Vehicle to be Exported:	No
Intended De-registration Date:	05 Jul 2018
Vehicle Make:	NISSAN
Vehicle Model:	NV350 PANEL VAN 2.5 5MT 5DR EURO V
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	YD25384081A
Chassis No.:	JN1MC2E26Z0005385
Maximum Power Output:	-
Open Market Value:	\$22,481.00
Original Registration Date:	08 Dec 2015
First Registration Date:	08 Dec 2015
Transfer Count:	0
Actual ARF Paid:	\$1,125.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	07 Dec 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$43,809.00
COE Rebate Amount:	\$32,515.00
Total Rebate Amount:	\$32,515.00

The information contained herein is correct as at 05 Jul 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	22/06/2018 15:31
Date Of Accident	22/06/2018 10:45
Exact Location Of Accident	NEW INDUSTRIAL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE4285T
Insured/Policyholder	
Name Of Registered Owner	VODAFONZ COMMUNICATION
Co Reg No	53216120C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96888119
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350-2.5 5MT 5DR EURO V (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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ18-000208
Cover Note Number	

Driver

Name of Driver	CHO THIAM SOON
NRIC No	S7926041Z
Date Of Birth	26/08/1979
Occupation	OUTDOOR
Date Of Driving Pass	27/02/2002
Driving Experience	16 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96888119
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 53A EDGEDALE PLAINS #09-07
Postcode	828693
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	SIDE SWIPE
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?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACHED REPORT.

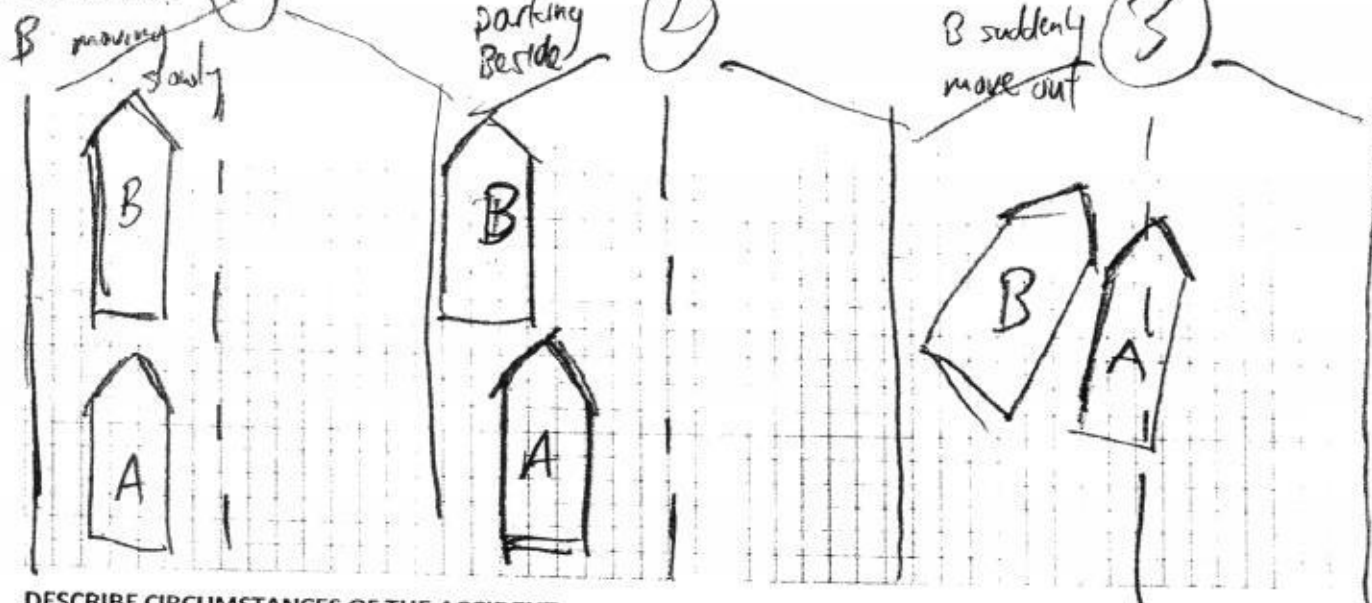
Attachment(s)

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	GBB7883M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was Driving behind vehicle B, vehicle B was moving slowly in (1), then he stop at the side in Part (2) (double yellow line), I hi-beam him but he has no response, then I horn him he have no response, still in (2) stationary signal right,

After that I over-take him in (3), he suddenly move out from his parking, I got down and saw his damage is at his door only (Right side) but my damage is greater. (the whole left side).

DECLARATION

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

Policyholder's Signature

Date & Time:

22/06/2018
11:45/30

Driver's Signature

(If driver is not the policyholder)

Date & Time:

22/06/2018
14:30

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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 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:

22/06/2018
14:30

GIA/RAC SketchPlanForm_V3

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

22/06/2018
14:30

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



REPAIRING OF
MOTOR VEHICLES,
PANEL BEATING,
WELDING, SPRAYING,
INSURANCE AGENT,
CLAIMS
DEALING IN 2ND
HAND VEHICLE.

速良摩哆 SOC LEON MOTOR WORKS

AUTOBAY @ KAKI BUKIT
1 Kaki Bukit Ave 6, Blk D, #01-91, Singapore 417883
Tel: 6747 7858, 6747 2343 Fax: 6742 0012
E-mail: slmoi@singnet.com.sg
Reg No. 206639/00K

修理汽車貨車兼
打嗎甲燒奸噴漆
代理保險：車禍
賠償及買賣汽車

VODAFONZ COMMUNICATION

DATE: 03/07/2018

DOA : 22/06/2018

ESTIMATE REPAIR FOR VEHICLE NO. GBE 4285 T (NISSAN NV350)

	Description	Nett Price
1 pc	Front lh door <i>2</i>	\$ 1,280.00 <i>X</i>
1 pc	Lh door glass outer moulding <i>11</i>	\$ 155.00 <i>X</i>
1 pc	Step garnish <i>grand</i>	\$ 85.50 <i>X</i>
1 pc	Front bumper <i>deep cut</i>	\$ 554.70 <i>X</i>
1 pc	Bumper side retainer (lh) <i>one</i>	\$ 153.00 <i>X</i>
1 pc	Corner panel <i>2</i>	\$ 589.00 <i>X</i>
1 pc	Headlamp (lh) <i>320</i>	\$ 423.00 <i>X</i>
1 pc	Side mirror (lh) <i>320</i>	\$ 550.30 <i>X</i>
1 pc	Sliding door (lh) <i>1</i>	\$ 1,285.70 <i>X</i>
		\$ 5,076.20
	Less : 10%	\$ (507.62)
		\$ 4,568.58

	Special Nett Items	
1 pc	Door address sticker (lh)	\$ 30.00 <i>221</i>
	To spray anti-rust	\$ 120.00 <i>50</i>
	Labour charges for knocking & replacing parts.	\$ 900.00 <i>520</i>
	Spraypainting	\$ 1,000.00 <i>800</i>
	TOTAL :	\$ 6,618.58

7519.95

not Authorized

4/7/18

take photo before painting

4dy.

4/5 42800

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To inspect damaged part(s) during resurvey
- The prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- Any illegal modification(s) is allowed
- Supply of any item(s) must be resurveyed and
- Subject to final approval from Insurance Company

Acknowledged by Repairer

Signature: _____

Date: _____



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

ALLIED WORLD ASSURANCE COMPANY LTD

Ref : CS/AWA18012150/Usd3n2

(SINGAPORE BRANCH)

60 ANSON ROAD #08-01 (8th FLOOR)

MAPLE TREE ANSON

SINGAPORE 079914

Date : 01-11-2018



Code : AWA

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBB 7883M	Veh. Inspected	GBE 4285T
Policy No.	AVCP SB0091641800	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	HEW LEE FONG	Assign Date	04/07/2018

2. Vehicle Particulars & Condition

Make & Model	NISSAN NV350 (M)	c.c	2488
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	JN1MC2E26Z0005385	Colour	GREY
Odometer	81329	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195 R15	BRIDGESTONE	6 mm
L/H Front Tyre	195 R15	BRIDGESTONE	6 mm
R/H Rear Tyre	195 R15	BRIDGESTONE	6 mm
L/H Rear Tyre	195 R15	BRIDGESTONE	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION AND N/S BODY.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	22/06/2018	Inspection Date	04/07/2018
Survey held at	SOC LEON MOTOR WORKS 1 KAKI BUKIT AVE 6 BLK D #01-91 AUTOBAY @ KAKI BUKIT SINGAPORE 417883		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
-------------------------------------	----------------



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBE 4285T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT LH DOOR	TO REPAIR SEE LABOUR	1,280.00	-
1	LH DOOR GLASS OUTER MOULDING	NOT NECESSARY	155.00	-
1	STEP GARNISH	GRAZED	85.50	85.50
1	FRONT BUMPER	DEEP CUT	554.70	554.70
1	BUMPER SIDE RETAINER (LH)	CRACKED	153.00	153.00
1	CORNER PANEL	DENTED	589.00	589.00
1	HEADLAMP (LH)	BROKEN	423.00	423.00
1	SIDE MIRROR (LH)	BROKEN	550.30	550.30
1	SLIDING DOOR (LH)	TO REPAIR SEE LABOUR	1,285.70	-
	LESS 10% DISCOUNT		-507.62	-235.55
			4,568.58	2,119.95
<u>SPECIAL NETT ITEMS</u>				
1	DOOR ADDRESS STICKER (LH)(SN)	NECESSARY	30.00	30.00
			30.00	30.00
<u>LABOUR</u>				
	TO SPRAY ANTI-RUST.		120.00	50.00
	LABOUR CHARGES FOR KNOCKING & REPLACING PARTS.INCLUSIVE OF THE REPAIR OF FRONT LH DOOR AND SLIDING DOOR (LH).		900.00	520.00
	SPRAYPAINTING.		1,000.00	800.00
			2,020.00	1,370.00
GRAND TOTAL			6,618.58	3,519.95
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,800.00

Report Ref No. CS/AWA18012150/Usd3n2

CHUA KANG SENG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

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