

ASS. REC. BY:

REF: C93/1PC18012187/Gsd3 n2

Special Instruction:

Surveyor: Guo Qiang

ASSIGNMENT (Office)

From (Person): Ong lili of 1PC Date/Time: 4/7/18 @ 3:28pm

Estimated Cost: _____ Bill to: _____

OD TP WS TP RES OD RES EVA INV MV CS

To Inspect Vehicle No: SKF 1603S Insured: SGR 1343B

at Workshop m/s: N-51 Automotive Tel: 68420051

of 2 kaki Bukit Ave 2 # 01-18

Policy No: _____ Claim No: 18/18/18/VPOS/020734

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 03/07/2018
(Client's Record)

CA / REV / REP. / REV 24 HRS (up) H.O.D. Endorsement: _____

Date/Time: 3:56pm @ 4/7/18 Person Contacted: Melody Vehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	SKF 1603S - X
	SGR 1343B - X

Nivitha (LKK Auto)

From: ONG LI LI <llong@lonpac.com>
Sent: Wednesday, 4 July 2018 3:28 PM
To: Chin Hui Xin
Cc: MT_Claim_SG; assignments@lkkauto.com
Subject: RE: SKF1603S & SGR1343B - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS Our Ref: to be advised
Attachments: 04072018152024-0001.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 <input type="checkbox"/>
1	Kalvin Ang	<input type="checkbox"/>
2	Xing Guo Qiang	<input type="checkbox"/>
3	Mohamad Taufikh	<input type="checkbox"/>
4	Bryan Ang	<input type="checkbox"/>
5	Adrian Ling	<input type="checkbox"/>
6	Mohammed Rasul	<input type="checkbox"/>
7	Marcus Chua	<input type="checkbox"/>
8	Kenneth Kong	<input type="checkbox"/>
9	Muhammad Nazril Bin Abdullah	<input type="checkbox"/>
10	Sathya Sai Kathirrasen	<input type="checkbox"/>

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.

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: Chin Hui Xin [mailto:huixin@n51.com.sg]

Sent: Wednesday, 4 July, 2018 3:22 PM

To: MT_Claim_SG

Subject: SKF1603S & SGR1343B - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

Dear Sir/Madam,

As per above subject,

Please refer attachment and:-

Kindly propose / provide your 10 surveyors.

Thank you...

Regards,

Melody Chin

N-51 Automotive Pte Ltd

Office : 6842 0051

Fax : 6741 0510

www.n51.com.sg





N-51 AUTOMOTIVE PTE LTD

Kaki Bukit Autohub,
2 Kaki Bukit Ave 2, #01-18
Singapore 417921
Tel No. : +65 6842 0051 / 6744 0510 Fax No. : +65 6741 0510
Company Reg. No. : 200616038C
GST Registration No. : 200616038C

Our Ref: **SKF 1603 S**
Your ref: **SGR 1343 B**

04 July 2018

LONPAC INSURANCE BHD
100 BEACH ROAD
#19-00 SHAW TOWER
SINGAPORE 189702
Attn: Motor Claims Department

BY EMAIL mt_claim@lonpac.com ONLY

Dear Sir/Madam,

DATE OF ACCIDENT : 03 July 2018
NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS
PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by **LEE MENG CHUAN** to notify you of a road traffic accident on **03 July 2018** at about **20:00 HOURS** At **PIE TWD CHANGI AFTER EUNOS FLYOVER** involving our client's vehicle **SKF 1603 S & SGR 1343 B** driven by you/your insured at the material time.

As a result of the accident, our client's vehicle 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 or your insurer would like to conduct a pre-repair survey of the vehicle. 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.

Please be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



.....
N-51 AUTOMOTIVE PTE LTD

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	8198H
Vehicle Details	
Vehicle No.:	SKF1603S
Vehicle to be Exported:	No
Intended De-registration Date:	05 Jul 2018
Vehicle Make:	B.M.W.
Vehicle Model:	118I AT ABS D/AIRBAG 2WD HID 5DR
Primary Colour:	Black
Manufacturing Year:	2012
Engine No.:	A885J180N13B16A
Chassis No.:	WBA1A32060J065751
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$30,926.00
Original Registration Date:	02 May 2012
First Registration Date:	02 May 2012
Transfer Count:	1
Actual ARF Paid:	\$30,926.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 May 2022
PARF Rebate Amount:	\$20,101.00
Intended COE Rebate Details	
COE Expiry Date:	01 May 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$56,501.00
COE Rebate Amount:	\$21,595.00
Total Rebate Amount:	\$41,696.00

The information contained herein is correct as at 05 Jul 2018

OK

MSME18086331 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 04/07/2018 16:56
 SUBMITTED BY: Chia Pei Ying

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	04/07/2018 16:56
Date Of Accident	03/07/2018 20:00
Exact Location Of Accident	PIE TWDS CHANGI AFTER EUNOS FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF1603S
Insured/Policyholder	
Name Of Registered Owner	LEE MENG CHUAN
NRIC No	S7808198H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97677627
Alternative Phone No	OFFICE-98426815

Vehicle Particulars

Manufacturer	BMW
Model	118I
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA031484
Cover Note Number	

Driver

Name of Driver	LEE MENG CHUAN
NRIC No	S7808198H
Date Of Birth	15/03/1978
Occupation	INDOOR
Date Of Driving Pass	27/04/2000
Driving Experience	18 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97677627
Fax Number	
Contact Number	OFFICE-98426815
Email Address	NOEMAIL

Address BLK 326 ANG MO KIO AVE 3 #08-1992
 Postcode 560326
 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 COLLISION - HEAD TO REAR
 Weather Conditions RAINING
 Road Surface WET

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: : LIM MEI EE
 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 ALONG PIE TOWARDS CHANGI ON THE EXTREME RIGHT LANE OF A 4 LANES EXPRESSWAY. SOMEWHERE AFTER EUNOS FLYOVER, VEHICLES AHEAD OF ME SLOWED DOWN AND STOPPED DUE TO HEAVY TRAFFIC. AS SUCH, I APPLIED BRAKE AND STOPPED ACCORDINGLY. OUT OF THE SUDDEN, VEHICLE B CAME FROM THE REAR AND COLLIDED DIRECTLY ONTO THE REAR PORTION OF MY VEHICLE.

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 SGR1343B
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 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)

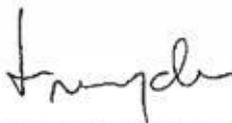
Sketch Plan Pg. 1

SKETCH PLANIMPORTANT NOTICE

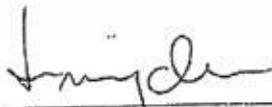
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

I understand, acknowledge, agree and consent that:

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



Policyholder's Signature
Date & Time:

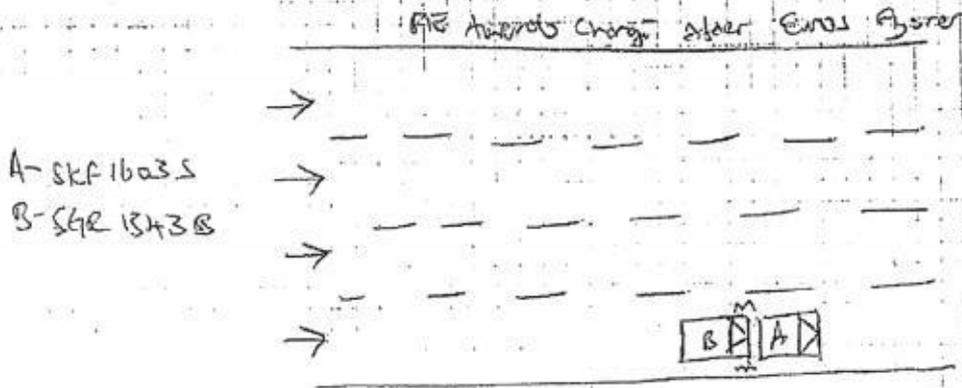


Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Pit towards Chong on the extreme right line of a 4-lanes, one-way. Somewhere after Enos sign, vehicle ahead of me slowed down and stopped due to heavy traffic. As such, I applied brake and stopped accordingly. Out of the sudden, Veh (B) came from the rear and collided directly onto the rear portion of my vehicle.

A - SKF 1603S
B - SGR 1343B

Below the text, there are several horizontal lines for additional notes. A large diagonal line is drawn across these lines, starting from the bottom left and extending towards the top right.

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time:

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

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

Vehicle No.	SKF16035	Model / Make	Bmw 118 I
Date of Accident	3/7/13		
Time of Accident	8:00pm HRS		
Location of Accident	PTE towards Changi after Fines sign		
Exact purpose use during accident	Private use		
Name of Owner	Lee Meng Guan		
Telephone No.	H/P: 91677627	Home:	Office: 98426815
NRIC	S18081984		
Address	Blk 326, Ang Mo Kio Ave 3, #08-1992, (S1560326)		
Claim type	OD (THIRD PARTY) REPORTING ONLY		
Insurance Company	AA		
Type of Coverage	(Comprehensive)	Third Party	Third Party / Fire / Theft
Policy No.	GA0314841		
Name of Driver	As Above If No,		
NRIC		Any Passengers: 01 (Female)	
Date of birth	15/3/1978		
Occupation	Outdoor / Indoor		
Driving License Pass Date	27/4/2012		
Gender	Male / Female		
Contact No.	H/P:	Home:	Office:
Address			
Driver have any own vehicle	No,	If yes, Reg No.	
Relationship	Employee,	If no, state	
Weather condition	Clear	Raining	Other
Road Surface	Dry	Wet	Other
Any Injuries	No,	If Yes, Who?	
Name And Contact No.			
Name And Contact No.			
Police Report	No,	If Yes, Where?	
Vehicle B No.	SAR 1343B	Any Passengers: NT	
Name of Driver	Lee Pau Bun (S90292198)	Contact No.: 9111592	
Vehicle C No.		Any Passengers:	
Vehicle D No.		Any Passengers:	
Vehicle E no.		Any Passengers:	
Vehicle F No.		Any Passengers:	
Vehicle G No.		Any Passengers:	
Witness Name		Witness Contact:	
Accident Portion	Rear Portion		
Camera Recorder	Yes / No		
Email Address	leemengguan@gmail.com		
PARTICULAR WORKSHOP	NSI Automotive P/L		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	AUS P		
FAX NO	6741 0510		
WORKSHOP ADDRESS	Sole @ NSI.com.sg		

SKETCH PLAN

IMPORTANT NOTICE

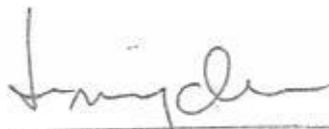
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 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with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



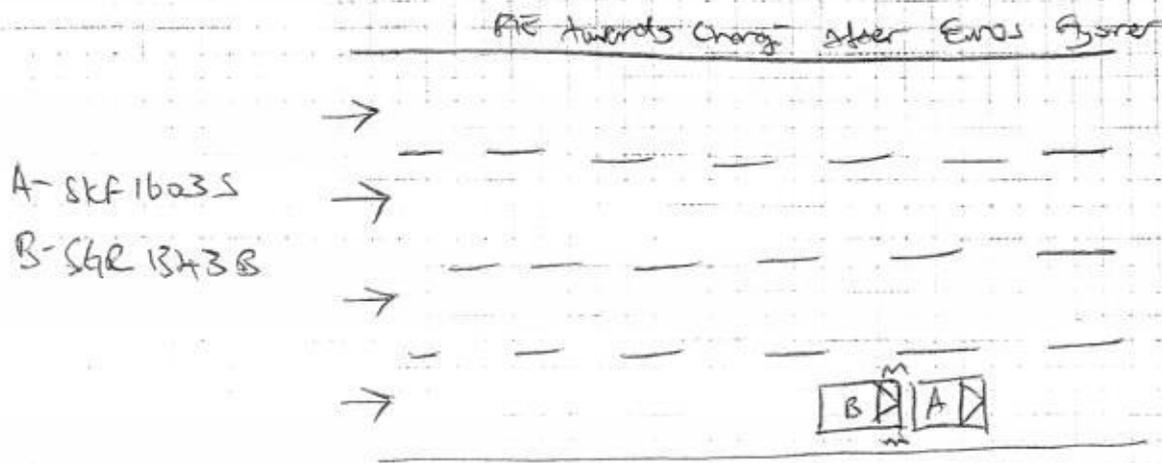
Policyholder's Signature
Date & Time:



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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along PIC towards Chong on the extreme right lane of a 4-lanes, one-way. Somewhere after Eunos flyover, vehicles ahead of me slowed down and stopped due to heavy traffic. As such, I applied brake and stopped accordingly. Out of the sudden, veh (B) came from the rear and collided directly onto the rear portion of my vehicle.

A - SKF 16035

B - SGR 1343B

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

[Signature]

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

Reporting Centre Personnel's Signature

Name:
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 300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Ref: CS3/LPC18012187/Gsd3n2 Date: 09-07-2018 Code: LPC2	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SGR 1343B	Veh. Inspected	SKF 1603S
Policy No.		Coverage (\$)	0.00
Claim No.	18/18/18/VP05/020734	Excess (\$)	0.00
Assign From	ONG LI LI	Assign Date	04/07/2018
2. Vehicle Particulars & Condition			
Make & Model	B.M.W 118i	c.c	1598
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	WBA1A32060J065751	Colour	BLACK
Odometer	94770 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	225/45 R17	YOKOHAMA	6 mm
L/H Front Tyre	225/45 R17	YOKOHAMA	6 mm
R/H Rear Tyre	225/45 R17	YOKOHAMA	6 mm
L/H Rear Tyre	225/45 R17	YOKOHAMA	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
5. General Information			
Accident Date	03/07/2018	Inspect Date / Time	04/07/2018 (04:00 PM)
Survey held at	N-51 AUTOMOTIVE PL 2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921		
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.			

Report Ref No. CS3/LPC18012187/Gsd3n2

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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