

27/03/2002

ASS. REC. BY:

REF:

GAI18015218/Kgd302

Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

From (Person):

Rachel Tan

of

GAI

Date/Time:

2018/18 @ 5.50pm

Estimated Cost:

Bill to:

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

To inspect Vehicle No:

SKZ 6616P

Insured:

GBA 570S

at Workshop m/s

Poon Siang Seow

Tel:

96169634

of

160 Sin Ming Drive # 05-13

Policy No:

Claim No:

C1MOMVC000003432

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

19/08/2018

CA / REV / REP. / REV 24 HRS

lwp

23/08/2018

H.O.D. Endorsement:

Date/Time:

9:24am @ 2018/18

Person Contacted:

Albert

Vehicle IN (OUT)

Date/Time

Action/Instruction

(✓) Estimate

SKZ 6616P - X

GBA 570S - X

24/8/18 @

4.34pm revised to Rachel Tan by email.

1/12

86634.4P email & call (Red: 7615.25, 53%)

(08/11/13) wef

ASS. REC. BY:

REF: GAI

ASSIGNMENT

From: Date: 23/8/18

Estimated Cost:

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

To Inspect Vehicle No: SKZ 6616P

at Workshop m/s Poon Siang Siew

of 160 Sin Ming Drive # 05-13

Insured:

Policy No.

Claims No.

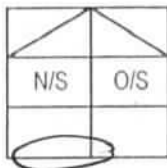
Sum Insured: Excess:

(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: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 1.31 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (up)

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: SKZ 6616P Yr Regn: 01 / 16

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

Truck / Trailer or

Make: Peugeot 508 c.c. 1560

Colour: M. Black A/C: Insured / Std / NI / NA

Sp. Reading: 4865P T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: VI-380B147TFL 037396

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/55R17

R:

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

TOYO / YOKO or

Front

R/Bal. 7 mm

L/Bal. 7 mm

D.O.A. 19/8/18

Survey held at

Rear

R/Bal. 7 mm

L/Bal. 7 mm

D.O.I. 23/8/18

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

Rear N/S

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

Date / Time Action / Instruction
18 file pass to Catherine

Date/Time, File Pass to?

1) 10/12 Typist

Date/Time, File Return to?

2)

Report Format: TP

Lump Sum / I.B.I. (\$) 6634.49.

Days Of Repair: 4

Resurvey No. of Trip:

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

Survey Fee:

Transportation:

S + RS SI

Photos

Others

TOTAL

350

350

**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

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI18015218/Kqd3

3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
SINGAPORE 039190

Date : 21-08-2018



Code : GAI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBA 570S	Veh. Inspected	SKZ 6616P
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	RACHEL TAN	Assign Date	21/08/2018

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	19/08/2018	Inspection Date	23/08/2018
Survey held at	POON SIANG SEOW No.160 SIN MING DRIVE #05-13 SIN MING AUTOCITY SINGAPORE 575722		

5a. Remarks

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

Nivitha (LKK Auto)

From: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Sent: Monday, 20 August 2018 5:58 PM
To: LKK Assignments
Cc: Albert Poon
Subject: FW: RE: SKZ6616S v GBA570S (GA) on 19/8/18
Attachments: PRI REQUEST.pdf

Without Prejudice

Dear Mr Poon

As requested, we will arrange for LKK

Dear LKK

Please accept assignment for TP survey on without prejudice basis, thank you.

Regards

Rachel Tan

Executive, Motor Claims, Great American Insurance Company

Tel: 6804 7846

From: Albert Poon <sitti1@singnet.com.sg>
Sent: Monday, August 20, 2018 5:54 PM
To: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Subject: [External] RE: SKZ6616S v GBA570S (GA) on 19/8/18

Hi sir

Please arrange lkk auto consultants

Thanks

Albert

M: 96169634, 8458 1169



POON SIANG SEOW
Sin Ming Autocity
No.160 Sin Ming Drive, #05-13, S(575722)
Tel: 6453 7511 Fax:6453 8046
Email: sitti1@singnet.com.sg



From: Tan, Rachel [<mailto:Rachel.Tan@sg.gaig.com>]
Sent: Monday, 20 August, 2018 4:41 PM
To: Albert Poon <sitti1@singnet.com.sg>
Subject: RE: SKZ6616S v GBA570S (GA) on 19/8/18

Without prejudice

Dear Mr Poon

Our client has not reported the accident.

On a without prejudice basis, we append the following list of our panel surveyors:-

1. AJAX Adjusters & Surveyors Pte Ltd

2. A-PAC Investigation Solutions Pte Ltd
3. Priority Services
4. RT Appraisal Pte Ltd
5. LKK Auto Consultants
6. JP KNIGHTS PTE LTD

Kindly let us know which SJE is selected and furnish the estimates for the survey to be carried out.

Rachel Tan, Executive | P. +65 6804 7846 | F. +65 6235 3354 | rachel.tan@sg.gaig.com



Motor Claims | 3 Temasek Avenue #16-01 Centennial Tower Singapore 039190



Moody's
A1 (Good)
Published December 2017

Standard & Poor's
A+ (Strong)
Affirmed February 23, 2018

For more information on our financial ratings, visit GAIG.com/FinancialStrength.

From: Albert Poon <sitti1@singnet.com.sg>
Sent: Monday, August 20, 2018 4:27 PM
To: Tan, Rachel <Rachel.Tan@sg.gaig.com>
Subject: SKZ6616S v GBA570S (GA) on 19/8/18

Hi sir
Please arrange for inspection

Thanks

Albert
M: 96169634, 8458 1169



POON SIANG SEOW
Sin Ming Autocity
No.160 Sin Ming Drive, #05-13, S(575722)
Tel: 6453 7511 Fax:6453 8046
Email: sitti1@singnet.com.sg



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The content of this e-mail message and any attachments are confidential and may be legally privileged, intended solely for the addressee. If you are not the intended recipient, be advised that any use, dissemination, distribution, or copying of this e-mail is strictly prohibited. If you receive this message in error, please notify the sender immediately by reply email and destroy the message and its attachments.

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Friday, 24 August 2018 4:34 PM
To: 'Tan, Rachel'; assignments
Cc: SUR
Subject: RE: RE: SKZ6616S v GBA570S (GA) on 19/8/18
Attachments: CSGAI18015218Kqd3.pdf

Dear Rachel,

Enclosed herewith preliminary advice of SKZ 6616P.

Kindly provide us the claim number of above mentioned.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAuto)
Sent: Tuesday, 21 August 2018 9:28 AM
To: 'Tan, Rachel' <Rachel.Tan@sg.gaig.com>; assignments <assignments@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: RE: SKZ6616S v GBA570S (GA) on 19/8/18

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed vehicle not in workshop, repairer arrange on 23/08/2018.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Tan, Rachel [<mailto:Rachel.Tan@sg.gaig.com>]
Sent: Monday, 20 August 2018 5:58 PM
To: LKK Assignments <assignments@lkkauto.com>
Cc: Albert Poon <sitti1@singnet.com.sg>
Subject: FW: RE: SKZ6616S v GBA570S (GA) on 19/8/18

Without Prejudice

Dear Mr Poon

As requested, we will arrange for LKK

Dear LKK

Please accept assignment for TP survey on without prejudice basis, thank you.



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: GBA 570S

Date: 24th August 2018

Our Ref: CS/GAI18015218/Kqd3

The Motor Claims Department
Great American Insurance Company

Attn: Rachel

Dear Sirs/Mdm

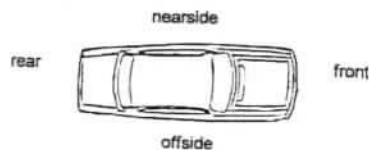
PRELIMINARY ADVICE OF VEHICLE NO. SKZ 6616P

We thank you for the instruction on 20/08/2018.

Please be informed that we had conducted the inspection of the abovementioned vehicle on 23/08/2018 at the premises of M/s POON SIANG SEOW and have the following to report:-

Workshop Estimate Amount	: S\$	<u>14,249.74</u>	.
Revised Estimate Amount	: S\$	<u>7,632.92</u>	.
"Check" Items Amount	: S\$	<u>2,286.49</u>	.
Market Value	: S\$	<u>-</u>	.
Salvage Value	: S\$	<u>-</u>	.
Nett Value	: S\$	<u>-</u>	.

Description of Damage:
The vehicle sustained damages at the rear n/s portion.



Comments/ Present Status:
Damages consistent.
Recommend repair days: 4 days
We have NOT authorise repair.

Yours faithfully

KONG SENG CHEONG
Licensed Appraiser



方商昭噴漆
POON SIANG SEOW

Sin Ming Autocity, No 160 Sin Ming Drive, #05-13, Singapore 575722
Tel: 6453 7511 Fax: 6453 8046 Email: sitti1@singnet.com.sg Regn. No: 05396600K

Our ref.: SKZ6616S

Date: 20/08/2018

Time: 5PM
Great American Insurance Company
3 Temasek Avenue
#16-01 Centennial Tower
Singapore 039190

FAX: 62352616

Dear Sirs

ACCIDENT ON 19/08/2018 INVOLVING SKZ 6616S AND GBA 570S
ALONG EAST COAST PARK FILTER

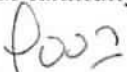
We are instructed by LOO TIAN GUAN, the owner
Of SKZ 6616S

You are the insurers of motor car no. GBA570S

We are instructed to give you 48 hours Notice for the per- repair inspection under NIMA
Protocol of the damage to our clients' car before any repairs are carried out

Our client's car may be inspected at POON SIANG SEOW SIN MING AUTOCITY
NO. 160, SIN MING DRIVE, #05-13, SINGAPORE 575722
Tel; 64537511, Fax 64538046

Your faithfully


ALBERT POON

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along East Coast Park towards the ECP exit service road. I stopped at the junction to give way to cars on the expressway. After I stopped, suddenly I got hit from behind.

DECLARATION

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

Lina
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.:

Email: smi@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 19 / 8 / 2018 (dd/mm/yy) Time of Accident: 20 : 45 (24-HR-FORMAT)
Vehicle No.: SK2 66165 Vehicle Make & Model: to ELP
Exact Location of Accident: East Coast Park Service Rd, Alter road, opposite ELP exit 6.
Policyholder's Name / IC No.: Loo Tian Guan / 14209726
Driver's Name / IC No.: Loo Yi Wei / 89343179J (As Above) ☐
Driver's Contact No.: 92982432 Company Contact No.: _____
Driver's Address: 730 Bedok Reservoir Road, 11-03 49 47261
Insurance Company: MSI Email address (if any): yimeiyw998@outlook.com

Relationship between Owner & Driver: (Please CIRCLE one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employer / Other: Others specify: son

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☐ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle
Was being used at time of accident?

Occupation (nature of job) ☐ Indent / ☐ Outdent

☒ Private use / ☐ Work purpose

No. of Passengers (Including Driver): 2

Passenger Name: Onq Xian Hui

Gender: Male / Female

Passenger Name: _____

Gender: Male / Female

Weather condition & Road conditions: (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☐ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No.: Lim Wei Jun Ervin Vehicle No.: GBA5705

Driver's Contact No.: 8288 8890 Insurance Company (If any): _____

2. Driver's Name / IC No.: _____ Vehicle No.: _____

Driver's Contact No.: _____ Insurance Company (If any): _____

Independent Witness (If Any): _____ Contact No.: _____

Preferred Workshop Name: _____ Contact No.: _____

If no proper documents are produced, IDAC should not fill the report. Information will be discarded after one week.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 0972G

Vehicle Details

Vehicle No.: SKZ6616S
Vehicle to be Exported: Yes
Intended De-registration Date: 21 Aug 2018
Vehicle Make: PEUGEOT
Vehicle Model: 508 ALLURE 1.6 BLUEHDI EAT6

Primary Colour: Brown
Manufacturing Year: 2015
Engine No.: 10JBHC3015155
Chassis No.: VF38DBHZTFL037396
Maximum Power Output: 88.0 kW (118 bhp)
Open Market Value: \$27,220.00
Original Registration Date: 29 Jan 2016
First Registration Date: 29 Jan 2016
Transfer Count: 0
Actual ARF Paid: \$15,108.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 28 Jan 2026
PARF Rebate Amount: \$11,331.00

Intended COE Rebate Details

COE Expiry Date: 28 Jan 2026
COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years): 10
QP Paid: \$51,301.00
COE Rebate Amount: \$38,144.00
Total Rebate Amount: \$49,475.00

The information contained herein is correct as at 20 Aug 2018

OK

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1
Individual Ownership

MOTOR MAX PLUS
Comprehensive

Certificate No. A 28883046 QMY

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
SKZ6616S

2. Name of Policyholder
Loo Tian Guan

3. Effective Date of the Commencement of Insurance for the purposes of the Act
29/01/2018

4. Date of Expiry of Insurance
28/01/2019

5. Persons or Classes of Persons entitled to drive*

Loo Tian Guan

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer

COPY
CAR

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	20/08/2018 17:39
Date Of Accident	19/08/2018 20:45
Exact Location Of Accident	EAST COAST PARK SERVICE RD TO ECP(SLIP RD)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKZ6616S
Insured/Policyholder	
Name Of Registered Owner	LOO TIAN GUAN
NRIC No	S1420972G
Email Address	YIWEIYW998@OUTLOOK.COM
Mobile Phone No	(LOCAL) +65-92982432
Alternative Phone No	OTHERS-92982432
Vehicle Particulars	
Manufacturer	PEUGEOT
Model	508 ALLURE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28883046 QMY
Cover Note Number	
Driver	
Name of Driver	LOO YI WEI
NRIC No	S9343179J
Date Of Birth	22/10/1993
Occupation	INDOOR
Date Of Driving Pass	08/04/2014
Driving Experience	4 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92982432
Fax Number	
Contact Number	OTHERS-92982432
Email Address	YIWEIYW998@OUTLOOK.COM

Address	BLK 289 TAMPINES STREET 22 #12-452
Postcode	520289
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	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)	2
Passenger 1	NAME: : ONG XIAN HUI 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

REFER ATTACHED

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	GBA570S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM WEI JUN ERVIN
NRIC/Passport Number	
Contact Number	82888890
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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:



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



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



方商昭噴漆 POON SIANG SEOW

Sin Ming Autocity, No. 160 Sin Ming Drive, #05-13, Singapore 575722.
Tel: 6453 7511 Fax: 6453 8046 Email: sitti1@singnet.com.sg Regn. No. 05396600K

Loo Tian Guan
Apt Blk 289 Tampines
#12-452
Singapore 520289

Not Authorized
1.B.1
Resurvey B&Paint

Dear sir
Estimate cost of repair to vehicle no. SKZ 66165
To supply

4 days
86634.49

1. Rear boot cover	<i>1480</i>	R	1,680.00	✓
2. Rear Tail boot hinge x2		R	374.60	X
3. Rear boot rubber		Sm	220.00	X
4. Rear boot lock		R	350.00	X
5. Rear boot logo		Sm	168.00	✓
6. Rear boot badge Peugeot		Sm	168.00	✓
7. Rear bumper badge 508		Sm	120.00	✓
8. Rear boot lower garish		Red / cm	504.00	✓
9. Tail lamp left	<i>525.00</i>	cm	980.00	✓
10. Rear panel		R	1,092.68	X
11. Rear panel top garish		Sm	268.68	X
12. Rear bumper spoiler		Red / DIT	448.87	✓
13. Rear bumper	<i>1280.00</i>	Bu	2,280.60	✓
14. Rear bumper upper chrome		NST	112.68	X
15. Rear bumper lower chrome		cm	168.77	✓
16. Rear bumper reflector		cm	220.00	✓
17. Rear bumper sensors x4		Shon	785.28	<i>744 392.64</i>
18. Rear bumper number plate lamp x2		mgdij	153.60	✓
19. Rear bumper retainer x2		NSTDIT	240.00	✓
20. Rear bumper reinforcement		R	508.98	X
21. Reverse cameras		Sm	500.00	X
22. Chips x10	<i>108</i>	Sm	25.00	✓

Labour charges
Number plate and holder
Rust proofing
Panel beating
Spray painting

Sm 80.00 X
100.00 *300*
1,500.00 *500*
1,200.00 *800*

14749.74

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:




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				
GREAT AMERICAN INSURANCE COMPANY			Ref : CS/GAI18015218/Kqd3e2	
3 TEMASEK AVENUE #16-01 CENTENNIAL TOWER SINGAPORE 039190			Date : 10-12-2018	
			Code : GAI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBA 570S	Veh. Inspected	SKZ 6616P	
Policy No.		Coverage (\$)	0.00	
Claim No.	CLMOMVC000003432	Excess (\$)	0.00	
Assign From	RACHEL TAN	Assign Date	20/08/2018	
2. Vehicle Particulars & Condition				
Make & Model	PEUGEOT 508 (A)	c.c	1560	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	VF38DBHZTFL037396	Colour	METALLIC BLACK	
Odometer	48659	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	215/55 R17	MICHELIN	7 mm	
L/H Front Tyre	215/55 R17	MICHELIN	7 mm	
R/H Rear Tyre	215/55 R17	MICHELIN	7 mm	
L/H Rear Tyre	215/55 R17	MICHELIN	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	19/08/2018	Inspection Date	23/08/2018	
Survey held at	POON SIANG SEOW No.160 SIN MING DRIVE #05-13 SIN MING AUTOCITY SINGAPORE 575722			
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		



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKZ 6616P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BOOT COVER	BENT	1,680.00	1,480.00
2	REAR TAIL BOOT HINGE	TO REPAIR SEE LABOUR	374.60	-
1	REAR BOOT RUBBER	SERVICEABLE	220.00	-
1	REAR BOOT LOCK	TO REPAIR SEE LABOUR	350.00	-
1	REAR BOOT LOGO	NECESSARY	168.00	168.00
1	REAR BOOT BADGE PEUGEOT	NECESSARY	168.00	168.00
1	REAR BUMPER BADGE 508	NECESSARY	120.00	120.00
1	REAR BOOT LOWER GARISH	DENTED / CRACKED	504.00	504.00
1	TAIL LAMP LEFT	CRACKED	980.00	525.00
1	REAR PANEL	TO REPAIR SEE LABOUR	1,092.68	-
1	REAR PANEL TOP GARNISH	SERVICEABLE	268.68	-
1	REAR BUMPER SPOILER	DENTED / DISTORTED	448.87	448.87
1	REAR BUMPER	BUCKLED	2,280.60	1,280.00
1	REAR BUMPER UPPER CHROME	NO SUCH PARTS	112.68	-
1	REAR BUMPER LOWER CHROME	CRACKED	168.77	168.77
1	REAR BUMPER REFLECTOR	CRACKED	220.00	220.00
4	REAR BUMPER SENSORS	SHORTED	785.28	392.64
2	REAR BUMPER NUMBER PLATE LAMP	MTG DISTORTED	153.60	153.60
2	REAR BUMPER RETAINER	N/S DISTORTED	240.00	240.00
1	REAR BUMPER REINFORCEMENT	TO REPAIR SEE LABOUR	508.98	-
1	REVERSE CAMERAS	SERVICEABLE	500.00	-
10	CHIPS	NECESSARY	25.00	25.00
	LESS 10% DISCOUNT		-	-589.39
			11,369.74	5,304.49
<u>SPECIAL NETT ITEMS</u>				
1	NUMBER PLATE AND HOLDER (SN)	SERVICEABLE	80.00	-

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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
			80.00	-
	<u>LABOUR</u>			
	RUST PROOFING.		100.00	30.00
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR TAIL BOOT HINGE, REAR BOOT LOCK, REAR PANEL AND REAR BUMPER REINFORCEMENT.		1,500.00	500.00
	SPRAY PAINTING.		1,200.00	800.00
			2,800.00	1,330.00
	GRAND TOTAL		14,249.74	6,634.49
RECOMMENDED COST OF REPAIRS				6,634.49

Report Ref No. CS/GAI18015218/Kqd3e2

KONG SENG CHEONG

Licensed Appraiser

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