•		Chhia Nyuk Pui	ASSIGNMENT (Office)  of WS16	Date/Time: 28 8 18 6 4.28 pm
	To Inspect Ve at Workshop of	hicle No:  2 Kaki B	FBF 49.89R Automotive LL Ave 2 # 02-2	Insured: SKK 1115H Tel: 6747 2755 5
	Policy No:_{	3274876328	MP Claim No:	568202
	Sum Insured:		Excess:	-11-01-0110
	Make of Veh			D.O.A. 21/08/2018
			erson Contacted, Connie	H.O.D. Endorsement:  Vehicl ID OUT
	CA / REV	REP. / REV 24 HRS	Person Contacted: Connie	Vehicl OUT
	CA / REV Date/Time: C	REP. / REV 24 HRS 1-36am 298 8 1 Action/Instruction	Person Contacted: Connie	DOA: 21 08 18
	CA / REV Date/Time: C	REP. / REV 24 HRS 1:36am 3 29/8/18 1 Action/Instruction ( ) GBF 4984R	Connie  Connie  Connie  Connie  NA   FCI 1805373/24	DOA: 21 08 18
	CA / REV Date/Time: C	REP. / REV 24 HRS 1:36am 3 29/8/18 1 Action/Instruction ( ) GBF 4984R	Person Contacted: Connie  ( ) Estimate  NA   FCT   8015373/24  NA   FCT   8015373/24	Vehicl OUT

Cik (+ - ):	
arrigue NA2 REF:	MSIG
	ASSIGNMENT
· ·	
Estimated Cost:	Veh No: GBF 4989 R Yr Regn: 28 NOV/ 7
OD/TP/WS/TP RES/OD RES/EVA/INV/MV	Type M. Car I M.Cycle / Bus / (an ) Lorry / Taxi / Prime Mover / Truck / Trailer or
To Inspect Vehicle No:	TO THE RESIDENCE OF THE PARTY O
at Workshop m/s	Make: NIJAA NV 200 c.c ), 46
The second secon	Colour SILVER A/C: Chsural Std/NI
of	Sp.Reading 33, 975 T/Radion Cost of Std / NI
Insured:	Eng/No:
Policy No.	C/No: VSKYBAM20Z0131466
Claims No.	Gen. Cond: Good / Poor / Burnt
Sum Insured: Excess:	Steering (n ) Abr I Jammed / Leaked / Burnt or
(Client's Record)	Brake: ( Jdv. / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 175/70 R14C
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	
repair at the time of inspection.	TOYO/YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. C mm P/Bal C
GIA / PR Seen: Consistent? : Yes or No	UBal, F The Light F
Est. Repairs: 6 days Res.: Yes or No	DOA 21/9/19
Lum Sum: % 3 Val.: Yes or No	Survey held at 1+ S AUTOMOTIVE SERVICES
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / (Qui) O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	Jois / N/S / U/C / Rooftop or
Date / Time   Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision
- Range 5000/2 - 600	8/2 MS/G
	The state of the s
	mento
	TOUR SHOPENS
The second secon	
Poloffing St. D	7/0/18
	ays Of Repair:
1) : Final Report Re	esurvey No. of Trip:   Survey Fee:   120
A	Transportation:
Add Fee:	: Site Insp (\$ )S+RSSI
Report Format : PRI -	: Interview (\$ ) Photos
Lump Sum / I.B.I: (\$	:Tech. Invs (\$ ), Others 10
	:Weekend (\$
S Y	TOTAL 136



# 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

MCI	C INCLIDANCE (C	Affiliated to Federation Internation	SERVICE CONTROL TO SERVICE SERVICE CONTROL OF SERVICE SERVICE CONTROL OF SERVICE SERVI	SCHOOL STATE OF THE STATE OF TH			
MSI	G INSURANCE (S	INGAPORE) PTE LTD	Ref: CS3/MSG1801	5777/Nz4d3			
	RAFFLES QUAY -01 HONG LEONG	BLDG SINGAPORE 048581	Date: 29-08-2018 Code: MSG				
1.	THE PARTY OF	Policy Particulars	:- (THIRD PARTY CLAI	M)			
	Insured Veh.	SKK 1115H	Veh. Inspected	GBF 4989R			
	Policy No.	B27487632SMP	Coverage (\$)	0.00			
	Claim No.	568202	Excess (\$)	0.00			
	Assign From	MERIMEN (CHHIA NYUK PUI)	Assign Date	29/08/2018			
2.		Vehicle Parti	culars & Condition				
	Make & Model		c.c	0			
	Engine No.	HIDDEN	Year of Reg.				
	Chassis No.		Colour Steering				
	Odometer						
	Brakes		Modification				
	General						
3.		Condit	ions of Tyres	SECTION SECTION			
		Size	Make	Balance			
	R/H Front Tyre			mm			
	L/H Front Tyre			mm			
	R/H Rear Tyre			mm			
	L/H Rear Tyre			mm			
4.		Descripti	on of Damages				
			2002				
5.	Assident Det		I Information	00/00/00/0			
	Accident Date	21/08/2018	Inspection Date	29/08/2018			
	Survey held at	H S AUTOMOTIVE SERVICES					
		2 KAKI BUKIT AVE 2 #01-15 KAKI BUKIT AUTOHUB SINGAPORE 417921					
5a.	SERVICE CALL	R	emarks	Maria Company Company			
	B) THE REPAIR E: THE REPAIRER W	ON WAS CONDUCTED ON A "WI STIMATE WAS NOT PRESENTED (AS TOLD TO PREPARE THE ES EASE FIND DAMAGED VEHICLE	O AT THE TIME OF INSPE TIMATE.	SIS. CTION.			

# ...CLAIM SUBFOLDER...(New Assignment)

Case	Notified	Est Submitted	Adl Assigned	Adi Rot	Adj Sub	entered.	Your Divinishment	Degraves		
	23 Aug 2018	Mar experience	28 Aug 2018 16:28 Assign	AU, KPC	Adj Sub	mitted	Ins Auth'ed	New Ass Cancel C	and a proof	nt
P-	fain	Re	ference		Claim Details		Document	ts )	18	Show All
CLAIM SU	BFOLDER DE	TAILS				[Created	by insurer]	Control of the second	OLOWER I	Daniel Action
Insured:	MOHANA	DASS S/O BALA	KRISHNAN NA	R. ID: S16	518463B. Tel:		07, Email: MNA	DDVEWCW	UI CON	
Main Claimant:		N CAR RENTAL P				+03300032	or, Email. Phys.	INDAS@GMA	ALL.COP	1
Vehicle Reg. No.:	GBF498	9R			Date of Loss:		18 19:00 - :59 ns and <b>24</b> Days Fr	rom LTA Red	Date (	Man Yr)1
Claim Type:	,	202			Policy/Cover Note No.:	B2748763	2SMP (Comprehe 30/03/2018 - 29	nsive)	oute (	
Vehicle Reg. No. (Insured):	SKK1115H Policy No.									
					\$\$1,000.00 # 01-15, KAKI BUKIT AUTOHUB, 417921 Kaki Bukit - Tel:					
Repairer:	67472755	notive Services (	Kaki Bukit) BLI	K 2 KAKI BU	KIT, AVENUE 2,	# 01-15, KA	KI BUKIT AUTOH	UB, 417921	Kaki B	ukit - Tel:
Handling Insurer:	MSIG Inst	ırance (Singapo	re) Pte. Ltd. (H	<b>Q)</b> - Tel: +6	55 6827 7888	[Handled b	y Chhia Nyuk Pu	ıi - 6594 25	21]	
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Imm.Adv	ice due 29	9/08/2018]		5-10-	
Driver/Custo dian (Insured):	)	ASS S/O BALAKRI					*			
Adj Asg. Remarks:	SURVEY DI	SAGREE ON SJE -	ASSIGN LKK LIA	BILITY: 100	% CONTACT: MF	R ALEX 6538	3 1368 UNIT NO:	#02-25		
ASSOCIATI	ED MAIL REG	CEIVED					T.	/iew All   C	omnose	Case Mai
There are no	mail for this	case.							- Inpose	- Cusc 1101
ALL ASSO	CIATED TAS	ks⊟				View All	Search Tasks	Create New	Task	Complete
Due Date No results.	Priority	Type Task	Group Subj	ect Han	dler Assign	ed By	Completed On	Creat	ed On	Done

## > Back to OneMotoring

### **Enquire Transfer Fee**

Vehicle Details	
Vehicle No. :	GBF4989R
Vehicle Type :	A50 - Goods (Closed) Van/Van Panel (Delivery)
Vehicle Attachment 1:	No Attachment
Vehicle Scheme :	Normal
Vehicle Make :	NISSAN
Vehicle Model :	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC
Chassis No.:	VSKYBAM20Z0131466
Propellant :	Diesel
Engine No. :	K9KC400D055941
Engine Capacity :	1461 cc
Maximum Power Output	-
Maximum Laden Weight :	2000 kg
Unladen Weight :	1260 kg
Year Of Manufacture :	2016
Original Registration Date :	28 Nov 2016
Lifespan Expiry Date:	27 Nov 2036
COE Category :	C - Goods Vehicle & Bus
PQP Paid :	\$45,470.00
COE Expiry Date :	27 Nov 2026
Road Tax Expiry Date :	27 Nov 2018
Inspection Due Date :	27 Nov 2019
Intended Transfer Date :	28 Sep 2018
CO2 Emission :	138.00 (g/km)
CEV/VES Rebate Utilised Amount :	¥
CO Emission :	
HC Emission :	
NOx Emission :	
PM Emission :	

Payable to check on the late fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable (From 28 Nov 2018 to 27 May 2019)

	Amount Before GST	GST Amount	Amount After GST
	(S\$)	(S\$)	(S\$)
Transfer Fee :	25.00		25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over	0.00	4	0.00
Payment):			
Total Amount Payable : Amount Payable (From 28	3 Nov 2018 to 27 Nov 2019)		25.00

Amount Before GST **GST Amount** Amount After GST (S\$)**(S\$)** 

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

wner ID Type:	Company
wner ID: ehicle Details	4041W
ehicle No.:	GBF4989R
ehicle to be Exported:	No
tended Deregistration Date:	28 Sep 2018
ehicle Make:	NISSAN
ehicle Model:	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RG
rimary Colour:	Silver
lanufacturing Year:	2016
ngine No.:	K9KC400D055941
hassis No.:	VSKYBAM20Z0131466
1aximum Power Output:	
pen Market Value:	\$20,226.00
Original Registration Date:	28 Nov 2016
irst Registration Date:	28 Nov 2016
ransfer Count:	0
ctual ARF Paid: ntended PARF Rebate Details	\$1,012.00
ARF Eligibility:	No
ARF Eligibility Expiry Date:	3.
ARF Rebate Amount: ntended COE Rebate Details	\$0.00
OE Expiry Date:	27 Nov 2026
OE Category:	C - Goods Vehicle & Bus
OE Period(Years):	10
QP Paid:	\$45,470.00
OE Rebate Amount:	\$37,132.00
otal Rebate Amount:	\$37,132.00

The information contained herein is correct as at 28 Sep 2018

ОК

## 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 witholding of material facts may allow insurance companies to
- 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. 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.

TO THE OWNER OF THE PARTY OF TH	
	ACCIDENT STATEMENT
Date Of Report	23/08/2018 19:13
Date Of Accident	21/08/2018 19:45
Exact Location Of Accident	ALONG WEST COAST HWY
Country/State of Loss	SINGAPORE
<b>一种基础的</b>	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBF4989R
Insured/Policyholder	
Name Of Registered Owner	ROBINSON CAR RENTAL PTE LTD
Co Reg No	200414041W
Email Address	NOEMAIL
Mobile Phone No	NOEWAIL
Alternative Phone No	OFFICE PROPERTY
Vehicle Particulars	OFFICE-89999999
Manufacturer	NISSAN
Model	
Exact Purpose for which vehicle was being used at time of accident	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
/ehicle Category	COMMERCIAL VEHICLE
nsurance Company	COMMERCIAL VEHICLE
lame of Insurance Company	MC FIRST CARRY AND A CONTROL OF THE
ype Of Coverage	MS FIRST CAPITAL INSURANCE LTD
leet Policy	COMPREHENSIVE
olicy Number	YES B 400000000000000000000000000000000000
over Note Number	D-18090225MFCV/12

#### Driver

Name of Driver PEH HAN YONG (BAI HANRONG) NRIC No

S9041203E Date Of Birth 28/10/1990 Occupation OUTDOOR Date Of Driving Pass 16/05/2014

Driving Experience 4 YEARS AND 3 MONTHS Gender

MALE

Mobile Number (LOCAL) +65-96708751

Fax Number

Contact Number OFFICE-96708751

EMail Address NOEMAIL

BLK 518 WEST COAST ROAD Address

#04-577

120518 Postcode

Was driver an employee of the Insured's Company NO

OTHER - HIRER 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

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO 2 Number of vehicles involved in the accident NO Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

NO

1

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT.

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

SKK1115H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

MOHANA DASS NAIR

NRIC/Passport Number

S1618463B

Contact Number

96609207

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Accident Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the assident to speed up the claims you ex-
- 1. This I are must be completed by the Policyholder and/or the Authorised Driver
- Information provided must be an truthful and accurate as possible. Any world in overvient at on or withholding of in one of facts may also a managed companies to repudiate policy liability.
- The new and acceptance of this form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any talse reporting may be referred to the Police for investigation.
- 5 The report will be forwarded by the insures of the GIA Proposition Management Centre installation in the Givernal management of Singapore (GIA) for archiving and that copies of this report will for a fee by made available continuous approximation or cerested parties.
- is the lodgment of this report to the invurery, you hereby consent to the archiving of this report at the centre and to copy or in the report timing made available aforecast.
- 5 Consent under the Personal Data Protection Act (PDPA)

I consistent acknowledge, agree and consent that

- If you make, my workshop and the General insurance Association of Singapore. GIA I way fare periorial to the displace and/or process, my personal data/personal information set out in this form, and any other personal information growthed by the or possessed by my insurer (collectively the Personal Information is and displace and transfer out Personal Information to all insurers) who have insured vehicles, involved in this accident shall be collectively referred to as the "insurers,", the insurers (awyorklow from the Monetary Authority of Singapore and any relevant government agency/authority (such as the power), for the or powers.
  - (ii) processing, handling and/or dealing with my closes including the sittlement of the plants and one must recognize the plants.
  - Inclinating about the accident and or my claims
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries to the
  - (iv) parametering my staims (including the making of correspondence, statements, invocce, rezont or notices to me which could involve disclosure of certain personal data about me to firing about policing of the same as with a continue external cover of envelopes, mail packages), and/or
  - (v) compring with approache law in administering, processing, handling shorter dealing with my claims it which is the "Purposes";
- (2) of insurers) and have mained vehicless involved in this accident and the insurers (buyers) see from they are periodically involved in the second of the above 7 in priors, and
- (f) my Perumat information may/can be (fixelosed by any of the incurery analysis (IIA to thirli third party school procession regents) modeling their lewyers/law firms), which may be shed outside of Singapure, for one or more of the introvincement.
- (2) by Personal information will also be sollected and used to complex claims history for the purpose of trails descended investigation and management in present and all future claims.
- (a) the information to collected under (d) above may be shared indiscussed
  - ii) to all inscrime and/or any other third parties that assist in evaluating in antiquiting confronting to inlanging his of regulators have inforcement and government agencies as reasonably required for the purposes stated on
  - in) for complying with requirements under any regulations, laws or court orders.

GENERAL CE

Onwer's Signature (if drawer's) not the policyhoider-Date & Time Name And Anna

## Accident Sketch Plan

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  PER A STORY MANY  DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  PER A STORY MANY  DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  PER A STORY MANY  DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	SKETCH PLAN	yı 21	
politic hostingament.	KMH HAS) HOT	SA SE	
		NT .	

Driver's Signature of anser's not the spice oute & Time

Name

#### Accident Sketch Plan

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG LANE 1 WEST COAST HWY. VEHICLE INFRONT OF ME BRAKE HIS VEHICLE. I BRAKE MY VEHICLE ACCORDINGLY. SUDDENLY I FELT AN IMPACT OF MY VEHICLE, I ALIGHT FROM MY VEHICLE AND REALIZE THAT VEHICLE B HIT ONTO MY VEHICLE REAR PORTION.

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

AIM SUBF	OLDER TRA	CKING	4		Town		la contra	Leavener		
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj	Submitted	Ins Auth'ed	Status Pending fo	r Survey	
Main	23 Aug 2018		28 Aug 2018 16:28 Edit Adj Rpt	S\$0.00 Edit Estima		0.00 lew Rpt		Report Cancel Cas	=(W)	
	Main	R	eference	Clai	m Details		Document	ts	Show All	
	BFOLDER DE	TATIC	THE RESERVE OF THE PARTY OF THE	AND DESCRIPTION OF THE PERSON NAMED IN		Created	by insurer]			
insured:			KRISHNAN NAIR,	ID: S161846	3B, Tel:	+659660920	7, Email: MNAI	RDAS@GMAIL.CO	M	
Main Claimant:			PTE LTD, Co. Reg							
Vehicle Reg	GBF498	9R			ate of Loss	[20 Month:		rom LTA Reg Date	e (Man Yr)]	
Claim Type:	TP / 568	3202			olicy/Cover ote No.:	B27487632 Coverage:	SMP (Comprehe 30/03/2018 - 29	nsive) 9/03/2019		
Vehicle Reg No. (Insured):	skk1115H				olicy No. Claimant):					
(Insured):					xcess:	S\$1,000.00				
Repairer:	H S Auto 67472755	motive Services	(Kaki Bukit) BLK 2	KAKI BUKIT,	AVENUE 2,	# 01-15, KA	KI BUKIT AUTOH	IUB, 417921 Kaki	Bukit - Tel:	
Handling Insurer:			ore) Pte. Ltd. (HQ						Adulas di	
Adjuster:	29/08/2	Consultants Pt 018]	e Ltd (HQ) - Tel: 6.	256-3561 [1	landled by	Muhammad	Nazril Bin Abd	uliah] [1MM	.Advice of	
Driver/Cust dian (Insured):	MOHANA	DASS S/O BALAKI	RISHNAN NAIR (54	/ Male), NRIG	C: S161846	i3B, Tel: +6	5596609207			
Adj Asg. Remarks:	SURVEY [	DISAGREE ON SJE	- ASSIGN LKK LIAB	ILITY: 100% C	ONTACT: N	MR ALEX 6538	3 1368 UNIT NO:	#02-25		
ASSOCIA	TED MAIL R	ECEIVED					V	/iew All Comp	ose Case Mail	
There are r	o mail for thi	s case.								
ALL ASSO	CIATED TA	SKS <sup>II</sup>				View All	Search Tasks	Create New Task	Complete	
Due Dat	e Priorit	y Type Tas	k Group Subje	ct Handle	r Assi	gned By	Completed O	n Created	On Done	

#### Claim Documents

# \*GBF4989R (568202) [SKK1115H] TP ROBINSON CAR RENTAL PTE LTD Aug 21 2018 7:00PM [MOHANA DASS S/O BALAKRISHNAN NAIR] **H S Automotive Services**

_	load Documents Up		1 per p	age VI	V
300	essment Reports	MANAGE AND	z per t	Thumbnail	
Vo.	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ) Accident Statement		100000000000000000000000000000000000000	7
1	28/08/18 13:44	From:OD - Reg. No: SKK1115H, Claimant: MOHANA DASS S/O BALAKRISHNAN NAIR	0	Load HTM	
pho	itos/Images		3 per p	age 🔻	V
Vo.	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
ı	29/08/18 18:26	General View	0	Load JPG	~
	29/08/18 18:26	General View	0	Load JPG	Y
3	29/08/18 18:26	General View	0	Load JPG	~
4	29/08/18 18:26	General View	0	Load JPG	<b>✓</b>
5	29/08/18 18:26	General View	0	Load JPG	V
6	29/08/18 18:26	General View	0	Load JPG	V
7	29/08/18 18:26	General View	0	Load JPG	V
8	29/08/18 18:26	General View	6	Load JPG	V
9	29/08/18 18:26	General View	0	Load JPG	✓
10	29/08/18 18:26	General View	0	Load JPG	V
11	29/08/18 18:26	General View	6	Load JPG	~
12	29/08/18 18:26	General View	0	Load JPG	~
13	29/08/18 18:26	General View	0	Load JPG	~
14	29/08/18 18:26	General View	0	Load JPG	4
15	29/08/18 18:26	General View	0	Load JPG	~
16	29/08/18 18:26	General View	0	Load JPG	V
17	29/08/18 18:26	General View	0	Load JPG	✓
18	29/08/18 18:26	General View	0	Load JPG	<b>√</b>
19	29/08/18 18:26	General View	0	Load JPG	✓
20	29/08/18 18:26	General View	0	Load JPG	V
21	08/10/18 10:02	Photo After Spray	0	Load JPG	V
22	08/10/18 10:02	Photo After Spray	0	Load JPG	V
23	08/10/18 10:02	Photo After Spray	0	Load JPG	V
24	08/10/18 10:02	Photo After Spray	0	Load JPG	V
25	08/10/18 10:02	Photo After Spray	0	Load JPG	<b>✓</b>
26	08/10/18 10:02	Photo After Spray	0	Load JPG	V
			1 per	page V	V
555	cumentation	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	1.70	Thumbnail	
No	Finalized On	TP GBF4989R GIA Report	0	Load PDF	
1	28/08/18 13:44	From: OD - Reg. No: SKK1115H, Claimant: MOHANA DASS S/O BALAKRISHNAN NAIR	0	Load PDF	+
2	28/08/18 13:47 28/08/18 15:17	PRI - JUSEQUITY LAW CORPORATION SURVEY DISAGREE ON SJE - ASSIGN LKK	0	Load PDF	1

# **Documents Checklist**

Reset	Save	Print
		_
		- 8

### 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

CS3/MSG18015777/NZ4D3E2 Our File No:

10/10/2018 Date:

REFERENCE

Date of Loss:

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

B27487632SMP Policy No:

Claimant Vehicle GBF4989R

Insured Vehicle No: SKK1115H

No:

Nature of Claim:

TP

Claim No: 568202

DESCRIPTION & IDENTIFICATION OF VEHICLE

21/08/2018

Reg No:

**GBF4989R** 

Make & Model:

NISSAN NV200, 1.5 D MT ABS AIRBAG 2WD 6DR

Engine No:

K9KC400D055941

Reg. Date:

28/11/2016 (Man. Year: 2016)

Chassis No: Odometer:

VSKYBAM20Z0131466

33975 km

Colour:

Silver

1461 cc Engine Capacity:

Market Value/New Car Price: N/A

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): CONDITION OF TYRES

Engine Modification: Yes

Pre-accident Condition:

175/70 R14C

Front Tyre Size: Front Left Side:

175/70 R14C Goodyear 5 mm Rear Tyre Size: Rear Left Side:

Goodyear 5 mm

Front Right Side:

Goodyear 5 mm

Rear Right Side:

Goodyear 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:

28/08/2018

Date Inspected:

29/08/2018 Inspected At:

H S Automotive Services (Kaki Bukit) BLK 2 KAKI BUKIT, AVENUE 2, # 01-15,

KAKI BUKIT AUTOHUB Singapore 417921

Estimated Period of Repair:

6.0 days

Adjuster: Muhammad Nazril Bin Abdullah Manager: Ho Zhao Tian

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.

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen... 10/10/2018

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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$5,000.00 -\$6,000.00

### REPAIR DETAILS

Reference

Part Source:

(Last Synchronised: 10 Oct 2018)

Parts:

N/A

NISSAN NV200 1.5 D MT ABS AIRBAG 2WD 6DR (A) (Model not available in database)

Labour:

Repairer's

(Price-denominated Standard List)

Print Cou

Print Code: (Unsubmitted, no print-code for GBF4989R)

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

There are no new parts selected.

Report was unsubmitted during this print-out.

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

# Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >