

CASE REFERENCE

PHE CS3/LPC18014349/BS03-1⁰²

Survivor

Tun Hich

ASSIGNMENT (Office)

From (Person)

Gerald Ann

LPC

Date/Time

13/09/2018

Estimated Cost

Bill to

OD/TP/WS/TP RES/OD RES/EVA/INV/MYTC

To inspect Vehicle No

XD59232

Insured

GBC 6243L

at Workshop ref

Hock Sun Mo for

Tel

63974285

of

7 Soon Lee St #05-08

Policy No

Claim No

18/18/18/VL00/020817

Sum Insured

Excess

Make of Vch

DOA

6/8/2018

(Client's Record)

8/8/2018

H.O.D. Endorsement

CA / REV / REP / REV 24 HRS

LPC

Date/Time

3:02pm @ 7/11/18

Person Contacted

Mr. Hiew

Vehicle

IN LOU

Date/Time

Action/Instruction (X) Estimate

XD59232 - X

Hock Sun Mo for 7/11/18 11:55 AM 18/09/2018

Submit 2/5 @ 6,300/- @ 5 days, checked by Simon.
(\$5,200.00 Red - 45%)

RECEIVED 19 SEP 2018



19/9/2018

Repair days 5

TERMIN



18/9/18

08/11/10 with
ASS. REP BY

Tanaka

REF: LPC

ASSIGNMENT

COE 2020 check

From: Date: 8/8/10

Estimate Cost

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

To inspect Vehicle No: XD 59232

at Workshop m/s Hock Sen Motor

of 7 soon lee st # 05-08

Insured

Policy

Claims No

Sum Insured

Excess:

(Client's Record)

Make of Veh

Mr. Hew @ 63474285

(Policy Condition)

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

N/S	O/S

Bal. or Market Value

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PIR Seen: Consistent? : Yes or No

Est. Period: days Res.: Yes or No

Lum Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS up

Date: Person Contacted:

Vehicle: IN / OUT

Date: Time Action / Instruction

* Submit PRS report.

RECEIVED 31 AUG 2010

Veh No: XD 59232 Yr Regn: 2005, April

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

Truck / Trailer or Tipper truck

Make: 15434 XZ 50K cc 12068

Colour: white A/C: Insured / Std / NI / NA

Sp. Reading: 800650 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JALCX Z 50K 47000005

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: M / S/Rim / STD A/Rim or

Tyre Size: F: 225/80R22.5

R: ~ (P)

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

TOYO / YOKO or Westlake

Front

Rear

R/Bal: 8 mm R/Bal: 8/8 mm

L/Bal: 8 mm L/Bal: 8/8 mm

D.O.A. D.O.I: 8/8/182 1115

Survey held at Hock Sen Motor

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

Frt O/S

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

Date/Time for Pass to?

1) 2.10.2010

Date/Time for Return to?

2)

☐ : Prel. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Survey Fee:

Transportation:

\$ + RS \$

Photos

Others

TOTAL

150

150

Report Format: PRS

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



LONPAC INSURANCE BHD

(S98FC5635C)

Our Ref : 18/18/18/VC00/020817

Your Ref : CS3/LPC18014349/T1sd3e2

11 September 2018

M/s LKK Auto Consultants Pte Ltd
51 Ubi Ave 1
#01-25 Paya Ubi Industrial Pk
Singapore 408933

Dear Sirs/Madam

PAPER SURVEY OF XD5923Z

We refer to the above matter.

We enclose the following documents :-

- a) Survey report & photos of XD5923Z
- b) GIA report of XD5923Z
- c) GIA report & photos of GBC6423L

Kindly study the documents and let us have your opinion on the adjusted repair cost within the next 10 days.

Yours faithfully

GERALD POH
SENIOR EXECUTIVE
(CLAIMS)
Email : mt_claim@lonpac.com



SINGAPORE POLICE FORCE



T/20180806/2139

1 of 3

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Report No. T/20180806/2139

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/08/2018 16:46		Vide Report No.:		Station Diary No.: 103	
Informant's Particulars					
Name of Informant: NG LIN SENG			Address: APT BLK 158 JALAN TECK WHYE #09-109 SINGAPORE 680158		
ID Type / ID No.: NRIC NO / S1217573F			Contact No.: Home/Office: Mobile: 96740093		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 62	Date of Birth: 14/07/1956	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: 3,4,5		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 06/08/2018 12:20	Type of Location: T-Junction
Location: Along Road 1 SUNGEI KADUT AVENUE Towards Woodlands Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC6243L	Lorry					0
GW2334U	Van					0
XD5923Z	Lorry	ISUZU	CXZ50K	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20180806/2139

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

2 of 3

Report No. T/20180806/2139

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
XD5923Z	EQ INSURANCE COMPANY LTD.	DMCPHQ18-001931	18/04/2018	17/04/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NG LIN SENG	ID No.	S1217573F
Related Vehicle	XD5923Z (Lorry)	Contact No.	96740093
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 06/08/2018 at about 1220hrs, I was driving my vehicle XD5923Z and waiting for traffic light to turn green. I was at the first position before turning right to Woodlands Road. Suddenly, two opposite vehicle GBC6243L collided to GW2334U and the vehicle GBC6243L collided onto my lorry front portion. Two of the drivers were conveyed by ambulance. My lorry front portion is damaged and I will be going to see a doctor later.



**SINGAPORE
POLICE FORCE**



T/20180806/2139

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Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

3 of 3

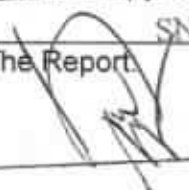

Report No. T/20180806/2139

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

<p>Signature Of Officer Recording The Report J / Sgt 2 CHIN WEI DE</p> <p>Signature : </p>	<p>Signature Of Informant:</p> <p></p>
<p>Signature Of Interpreter: Not applicable</p>	<p>Date/Time: 06/08/2018, 16:46</p>
<p>Officer In Charge Of Case: TP / GIT / Staff Sgt MOHAMMAD ZULKARNIAN BIN SAMSUDIN Contact No.: 65476429</p>	<p>Classification Of Case:</p>

Authentication Stamp
NP168

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 07/08/2018 11:16
 Date Of Accident 06/08/2018 12:20
 Exact Location Of Accident SUNGEI KADUT AVE & WOODLANDS RD T-JUNCTION
 Country/State Of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number XD5923Z
 Insured/Policyholder
 Name Of Registered Owner NG LINSENG
 NRIC No S1217573F
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-96740093
 Alternative Phone No Office-NOPHONE

Vehicle Particulars

Manufacturer ISUZU
 Model CXZ50K-12.1 D (M)

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 THIRD PARTY FIRE AND/OR THEFT
 Fleet Policy NO
 Policy Number DMCPhQ18-001931
 Cover Note Number

Driver

Name of Driver NG LINSENG
 NRIC No S1217573F
 Date Of Birth 14/07/1956
 Occupation OUTDOOR
 Date Of Driving Pass 04/03/1978
 Driving Experience 40 YEARS AND 5 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-96740093
 Fax Number
 Contact Number OFFICE-NOPHONE
 Email Address NOEMAIL
 Address 158 JALAN TECK WHYE #09-109
 Postcode 680158

Was driver an employee of the Insured's Company
If No, Relationship of the Driver with the Insured
Vehicle Registration Number of Driver's Own Vehicle

NO
OWNER

-
-
-
-
-

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

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?

YES

Was any injured conveyed to hospital by ambulance?

YES

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?

YES

If Yes, Please state which Police Station

Police Station Name

BUKIT PANJANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 42 FAJAR ROAD , POSTCODE: 679005 , COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-8929999 - FAX NO: 67673650

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

AS PER POLICE REPORT NO: T/20180806/2139

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

GBC8243L

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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GW2334U

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)

DETAILS OF INJURED PERSON 1

Name UNKNOWN DRIVER
Approximate Age
Injuries Sustain
Injured person in which vehicle? GBC6243L
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

DETAILS OF INJURED PERSON 2

Name UNKNOWN DRIVER
Approximate Age
Injuries Sustain
Injured person in which vehicle? GW2334U
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

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:

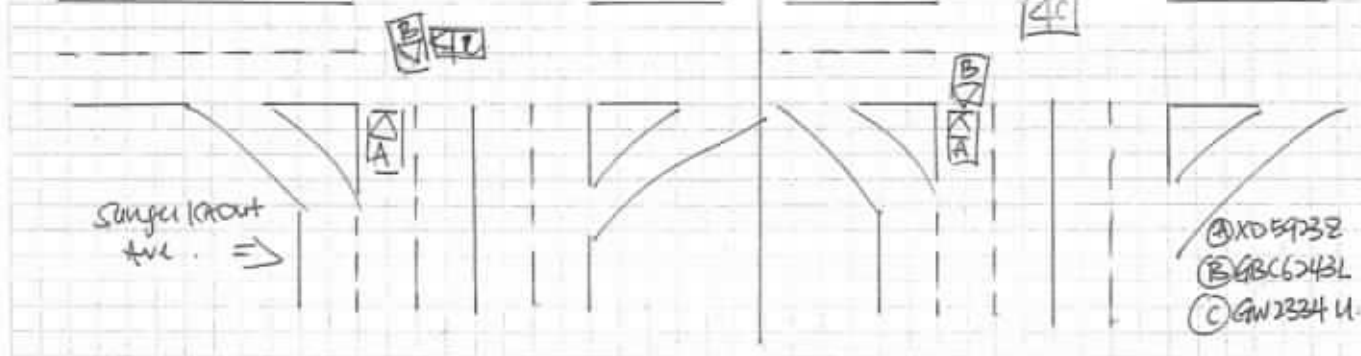
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

woodlands RD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police report no: 7/20180806/2139.

- ☐ Claim own policy
- ☐ Claim third party
- ☒ Claim OD /TP at other works hop Hock Stn.
- ☐ For record purpose

DECLARATION

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

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.:

7 Soon Lee Street #05-08 iSpace Singapore 627608

UEN 201433956C

E & O. E

AUTOMOTIVE APPRAISER AND SURVEYING SERVICES

Qualified Automobile Accident Damage Appraisers/Loss Adjusters

601, Choa Chu Kand Street 62, # 04-07, Singapore 680601

Mobile Number: 96623655, Office Tel: 67655661

E-mail address: aasschee@singnet.com.sg

RCB No. 43037800M

VEHICLE INSPECTION REPORT

To: Ng Linseng
c/o Hock San Motor Works
7, Soon Lee Street
05-08, Ispace
Singapore 627608

Report No : TP/0073/08/18

Date : 16 August 2018

REFERENCE

Requested by : Ng Linseng
Date of Request : 07 August 2018
Date of Accident : 06 August 2018
Date Inspected : 07 August 2018
Inspected at : Hock San Motor Works pte. Ltd.

3rd Party Vehicle No. : GBC 6243L and GW 2334U
Owner's Vehicle No. : XD 5923Z
Sum Insured : Not Available
Policy No. : Not Available
Claim No. : Not Available

PARTICULARS OF VEHICLE

Reg. No. : XD 5923Z
Vehicle Make : Isuzu
Original Regn Date : 19 April 2005
Lifespan Expiry Date : 18 April 2025
COE Expiry Date : 31 March 2020

Vehicle Model : CXZ50K
Engine No. : 6WA1123840
Chassis No. : JALCXZ50K47000005
Propellant : Diesel
Engine Capacity : 12,068 cc

Air Conditioner : Yes
Radio/Cassette : Yes
Seat Belt : Yes
Colour : White
Speedometer : 800,650 km

CONDITION OF TYRES

	MAKE	SIZE	RIM	% REMAINING
Right Front	Westlake	295/80 R22.5	Standard	50%
Left Front	Westlake	295/80 R22.5	Standard	50%
Right Rear	Westlake	295/80 R22.5	Standard	50%
Left Rear	Westlake	295/80 R22.5	Standard	50%

DESCRIPTION OF DAMAGES

NOTE: The above vehicle was SURVEYED WITHOUT PREJUDICE

The owner's vehicle sustained damages on the frontal (RH) portions.

Estimated period of repairs: 05 (Five) working days

Repairer completed the repair in: 07 (Seven) working days of Sunday and Holiday Days

Number of photographs taken at time of inspection and attached: 20 (Twenty) + 00 (Not Necessary) Follow-up Survey (After Dismantling & Damaged Parts) and 06 (Six) Follow-up Survey (After Repair/Painting) only.

SUMMARY OF REPAIR COSTS

Repairer's Estimate	\$	15,609.80
Revised Parts	\$	13,129.65
Revised Labour	\$	1,280.00
Total Revised Amount	\$	14,409.65
Adjusted Amount	Lump Sum \$	11,500.00
Less: Owner's Excess	\$	N.A.
Total	\$	11,500.00
Nett Total without GST	\$	11,500.00

AUTOMOTIVE APPRAISER AND SURVEYING SERVICES

CHEE AIK THUAN (HP 96623655)
ENG TECH, CAE MIMI / AM SAE-A
MSAAA-Accident Damage Appraiser

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Qualified Automobile Accident Damage Appraisers/Loss Adjusters

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Mobile Number: 96623655, Office Tel.: 67655661.

E-mail Address: aasschee@singnet.com.sg

RCB No. 43037800M

ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS

Registration No: **XD 5923Z**

Attachment to report no. **TP/0073/08/18**

REPAIRER'S ESTIMATE		OUR RECOMMENDATIONS	
Replacement Of Damaged Panels/Parts and Labour Charges	S\$ Price	Conditions	S\$ Price
REPLACEMENT OF DAMAGED PANELS/PARTS	LESS 15%	LUMP SUM REPAIR	LESS 15%
01. 1 pc front bonnet cover	3,830.70	Dented/Cracked - Allowable 1120.00	3,830.70 ✓
02. 6 pcs front bonnet grille @ 124.53	747.18	Cracked - Allowable (4 pcs only)	498.12 ✓
03. 1 pc front RH headlamp	1,440.81	Cracked - Allowable 682.50	1,440.81 ✓
04. 1 pc front RH headlamp bracket	967.32	Bent - Allowable 500.00	967.32 ✓
05. 1 pc front RH corner panel	1,296.40	Grazed/Bent/Cracked - Allowable 720.00	1,296.40
06. 1 pc front bumper	3,530.70	Dented/Bent - Allowable 1500.00	3,530.70 BT ✓
07. 1 pc front bumper top centre garnish	396.98	Bent (Deformed) - Allowable	396.98 ✓
08. 2 pcs front bumper top side garnish @ 198.49	396.98	Bent (Deformed) - Allowable (RH only)	198.49 ✓
09. 1 pc front bumper cross member	2,429.60	Dented/Bent - Allowable 2000.00	2,429.60 ✓
10. 2 pcs front bumper bracket @ 493.80	987.60	Bent - Allowable (RH only)	493.80 ✓
11. 1 pc front bumper RH signal lamp	328.43	Cracked - Allowable 106.00	328.43
	-----		-----
	16,352.70		15,411.35
	2,452.91		2,311.70
	-----		-----
	13,899.80		13,099.65
	-----		-----
12. 1 pc front number plate S.Nett	30.00	Bent - Allowable	30.00 BT ✓
	-----		-----
	13,929.80		13,129.65
	-----		-----

AUTOMOTIVE APPRAISER AND SURVEYING SERVICES

CHEE AIK THUAN (HP. 96623655)
ENG TECH, CAE MIMI / AM SAE-A
MSAAA/Accident Damage Appraiser

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E-mail Address: aasschee@singnet.com.sg

RCB No. 43037800M


ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS

Registration No: **XD 5923Z**

Attachment to report no. **TP/0073/08/18**

REPAIRER'S ESTIMATE		OUR RECOMMENDATIONS	
Replacement Of Damaged Panels/Parts and Labour Charges	S\$ Price	Conditions	S\$ Price
LABOUR CHARGES			
01. Labour charges - Panel beating	750.00	Necessary Reason being: 01. To remove damaged parts and attachments, repair and reshape dented panels, renew damaged panels and parts (refer to our recommendations), align and refit attachments.	300.00 500.00
02. Labour Charges - Spray Painting	800.00	Necessary Reason being: 01. To respray paint on front bonnet cover, front RH corner panel, front bumper and other affected areas.	500.00 700.00
03. Labour Charges - Anti rust proofing	100.00	Necessary Reason being: 01. To apply/respray anti rust proofing.	30.00
05. Labour Charges - Lighting system.	30.00	Necessary Reason being: 01. To check wiring and lighting system.	30.00
	<u>1,680.00</u>		<u>1,280.00</u>

AUTOMOTIVE APPRAISER AND SURVEYING SERVICES


CHEE AIK THUAN (HP. 96623655)
ENG TECH, CAE MIMI / AM SAE-A
MSAAA/Accident Damage Appraiser

AUTOMOTIVE APPRAISER AND SURVEYING SERVICES

Qualified Automobile Accident Damage Appraisers/Loss Adjusters

601, Choa Chu Kang Street 62, # 04-07, Singapore 680601

Mobile Number: 96623655, Office Tel.: 67655661,

E-mail Address: aasschee@singnet.com.sg

RCB No. 43037800M

ADJUSTMENT ON REPAIR COST & REPLACEMENT OF PARTS

Registration No: **XD 5923Z**

Attachment to report no. **TP/0073/08/18**

REPAIRER'S ESTIMATE		OUR RECOMMENDATIONS	
Replacement Of Damaged Panels/Parts and Labour Charges	S\$ Price	Conditions	S\$ Price
CARRIED FORWARD FROM PAGE 1/3			
Replacement of damaged panels/part	13,929.80		13,129.65
CARRIED FORWARD FROM PAGE 2/3			
Labour Charges	1,680.00		1,280.00
	-----		-----
	15,609.80		14,409.65
	-----		-----
			LUMP SUM
			11,500.00

NOTE:

Please refer to our recommendations of **S\$ 14,409.65**.

In our opinion, the vehicle can be repaired at a Lump Sum of S'pore Dollars: **Four Thousand And Six Hundred Only**.

($S\$ 14,409.65 \times 20\%$ ($S\$ 2,881.93$) = $S\$ 11,527.72$)

LUMP SUM CONTRACT

In view of the fact that the repairer has been offered a reduced budget to complete the repair, **(TOTAL REVISED LESS ANOTHER 20%)**, the repairer should be entitled to exercise some discretion to complete the repair.

- a. To replace with New Parts (Genuine or Non Genuine Parts)
- b. To replace with Second Hand Parts (Imported or local Used Parts)
- c. To repair

The repairer would repair the vehicle to the entire satisfaction of the owner and in 'road worthy' condition.

The above terms and condition for the **LUMP SUM REPAIR CONTRACT** (Accident-Damaged Vehicle) is in line with the circular through a referendum from the Singapore Automobile Appraisers Association dated 25 May 2004.

Please find enclosed

- a. Letter from the Singapore Automobile Appraisers Association dated 25 May 2004
- b. Letter from The General Insurance Association Of Singapore dated 28 June 2004.
- c. Letter from the General Insurance Association Of Singapore dated 08 September 2005
- d. The New Paper reply from NTUC Income dated 19 September 2003.

AUTOMOTIVE APPRAISER AND SURVEYING SERVICES

CHEE AIK THUAN (HP. 96623655)
ENG TECH, CAE MMI / AM SAE-A
MSAAA/Accident Damage Appraiser

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Repair days 4

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	15/08/2018 18:19
Date Of Accident	06/08/2018 12:30
Exact Location Of Accident	WOODLANDS RD (TWDS CITY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC6243L
Insured/Policyholder	
Name Of Registered Owner	ONE OCEAN FOOD PTE LTD
Co Reg No	201407134H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90118033

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150-3.0 D (M)

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? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
------------------	--------------------

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z/18/VC00/101452
Cover Note Number	

Driver

Name of Driver	CHAI AH MING
NRIC No	S2115933F
Date Of Birth	22/11/1947
Occupation	INDOOR
Date Of Driving Pass	23/09/1983
Driving Experience	34 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97623601
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 436 FAJAR RD #04-382
Postcode	670436
Was driver an employee of the Insured's Company	YES
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

Type Of Accident	COLLISION - CROSS JUNCTION
Weather Conditions	CLEAR
Road Surface	DRY

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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
-----------------------------	---------

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

CHAI AH MING

Approximate Age

Injuries Sustain

ARM & LEG

Injured person in which vehicle?

GBC6243L

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

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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**.
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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:

[Handwritten Signature]

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

[Handwritten Signature]

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



SKETCH PLAN

PLEASE REFER TO SKETCH.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DRIVING ALONG WOODLAND ROAD WHEN I SEE GREEN LIGHT AND I PROCEEDED TO MAKE LEFT TURN AFTER CHECKING TRAFFIC IS CLEAR. THE NEXT THING I KNOW HE HIT MY VEHICLE AND MY VEHICLE SWERVE TO HIT VEHICLE C.

BOTH VEHICLE NUMBER I DON'T HAVE AS I WAS
CONVEYED TO THE HOSPITAL.



Policyholder's Signature _____

Date & Times:

Company Chop (if applicable)

We declare the foregoing particulars are true in every respect.

Driver's Signature _____

(If driver is not the policyholder)

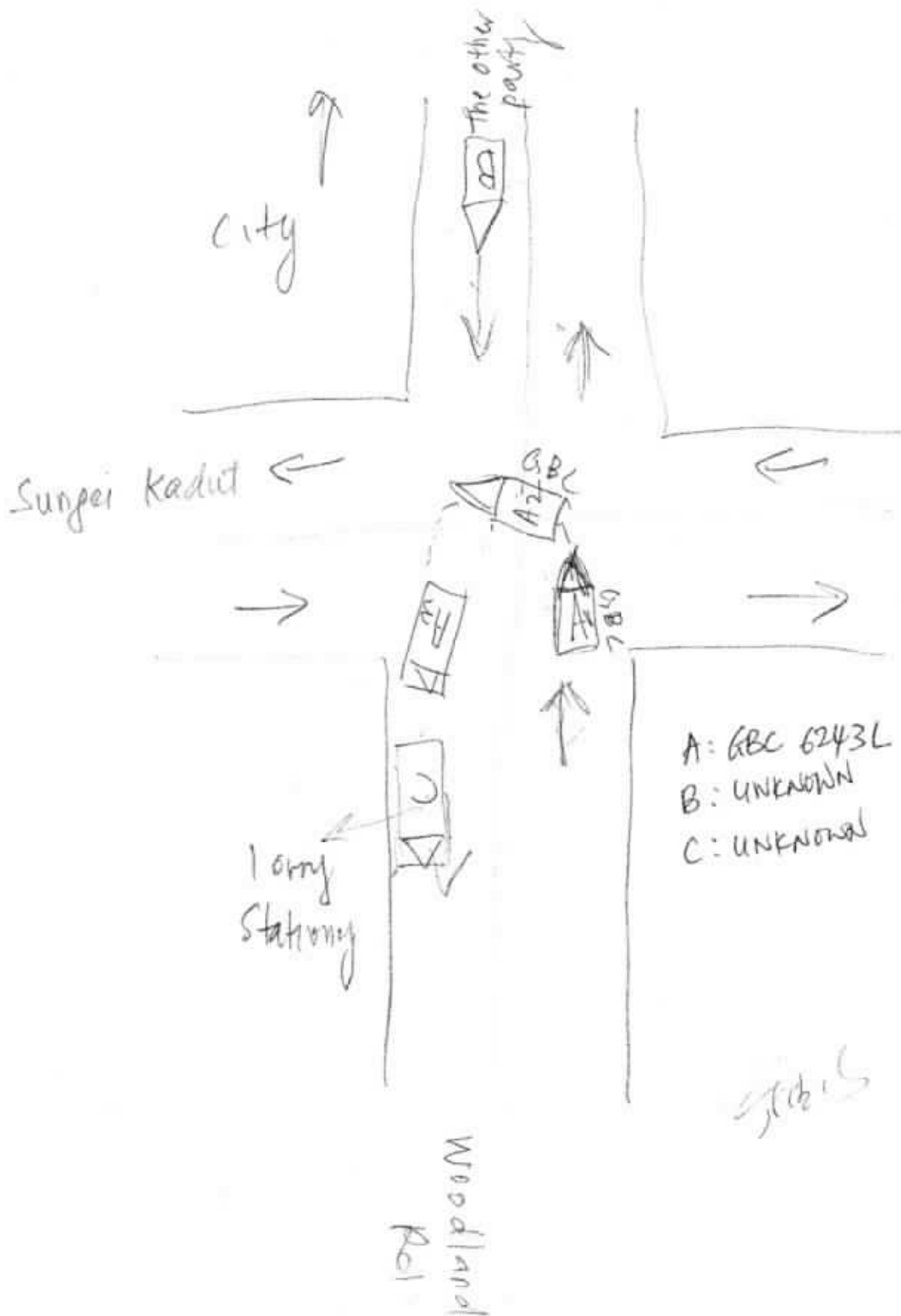
Date & Time:

Reporting Centre Personnel's Signature

Palmer, R.

NRIC/FIN No. _____





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

SINO: JFEAT35YX10-K202241


G.L.WT : 1740 KG

N.L.WT : 3500 KG


PAX CAP : 1 DRIVER 2 OTHER

TYRE SIZE: (F) 195-75R-15

(R) 155R-12-8 D

 **MONZONE AIR-CONDITIONING PTE LTD**

41, Senoko Drive Singapore 756249 Tel: 6365 1315 Fax: 6368 2083
Website: www.refrigerated-truck.com






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				
LONPAC INSURANCE BHD		Ref : CS3/LPC18014349/Bsd3e2-1		
300 BEACH ROAD		Date : 21-09-2018		
#17-04/07 THE CONCOURSESINGAPORE 199555		Code : LPC2		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBC 6243L	Veh. Inspected	XD 5923Z	
Policy No.		Coverage (\$)	0.00	
Claim No.	18/18/18/VC00/020817	Excess (\$)	0.00	
Assign From	GERALD POH	Assign Date	13/09/2018	
2. Vehicle Particulars & Condition				
Make & Model	ISUZU CXZ50K	c.c	12068	
Engine No.	HIDDEN	Year of Reg.	2005	
Chassis No.	JALCXZ50K47000005	Colour	WHITE	
Odometer	800650	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	295/80 R22.5	WEST LAKE	8 mm	
L/H Front Tyre	295/80 R22.5	WEST LAKE	8 mm	
R/H Rear Tyre	295/80 R22.5 (D)	WEST LAKE	8/8 mm	
L/H Rear Tyre	295/80 R22.5 (D)	WEST LAKE	8/8 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	06/08/2018	Inspection Date	08/08/2018	
Survey held at	HOCK SAN MOTOR WORKS PTE LTD 7 SOON LEE STREET #05-08 ISPACE SINGAPORE 627608			
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:		5 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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. XD 5923Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BONNET COVER	DENTED / CRACKED	3,830.70	1,120.00
6	FRONT BONNET GRILLE @\$124.53	CRACKED-4PCS ONLY	747.18	498.12
1	FRONT RH HEADLAMP	CRACKED	1,440.81	682.50
1	FRONT RH HEADLAMP BRACKET	BENT	967.32	500.00
1	FRONT RH CORNER PANEL	GRAZED / BENT / CRACKED	1,296.40	700.00
1	FRONT BUMPER	BENT	3,530.70	1,500.00
1	FRONT BUMPER TOP CENTRE GARNISH	BENT / DEFORMED	396.98	396.98
2	FRONT BUMPER TOP SIDE GARNISH @\$198.49	O/S BENT / DEFORMED	396.98	198.49
1	FRONT BUMPER CROSS MEMBER	DENTED / BENT	2,429.60	2,000.00
2	FRONT BUMPER BRACKET @\$493.80	O/S BENT	987.60	493.80
1	FRONT BUMPER RH SIGNAL LAMP	CRACKED	328.43	106.00
	LESS 15% DISCOUNT		-2,452.91	-1,229.38
			13,899.79	6,966.51
SPECIAL NETT ITEMS				
1	FRONT NUMBER PLATE (SN)	BENT	30.00	30.00
			30.00	30.00
LABOUR				
	LABOUR CHARGES-PANEL BEATING. TO REMOVE DAMAGED PARTS AND ATTACHMENTS, REPAIR AND RESHAPE DENTED PANELS, RENEW DAMAGED PANELS AND PARTS (REFER TO OUT RECOMMENDATIONS), ALIGN AND REFIT ATTACHMENTS.		750.00	300.00
	LABOUR CHARGES-SPRAY PAINTING. TO RESPRAY PAINT ON FRONT BONNET COVER, FRONT RH CORNER PANEL, FRONT BUMPER AND OTHER AFFECTED AREAS.		800.00	500.00
	LABOUR CHARGES-ANTI RUST PROOFING. TO APPLY / RESPRAY ANTI RUST PROOFING.		100.00	50.00
	LABOUR CHARGES-LIGHTING SYSTEM. TO CHECK WIRING AND LIGHTING SYSTEM.		30.00	30.00
			1,680.00	880.00

Report Ref No. CS3/LPC18014349/Bsd3e2-1



GRAND TOTAL		15,609.79	7,876.51
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			6,300.00

Report Ref No. CS3/LPC18014349/Bsd3e2-1

LIM TEOW GUAN

Asst. Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

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