

ASSIGNMENT

LWP

DOI

2/9/18

Date / Time:

2/9/18

Pre-assign / CCU / FTE

Registered in Maritime:

SDL 83274

18/181 W/UPUS/020933



Insured Vehicle No. : \_\_\_\_\_

Claim No. : \_\_\_\_\_

Name of Insured : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_

Make / Model : \_\_\_\_\_

Excess Sec II : \$\$ \_\_\_\_\_ D.O.A : 16/9/2018

Place of Accident : \_\_\_\_\_

Is driver the owner? ( YES / NO )

Nature of Accident : \_\_\_\_\_

If NO, Driver Name / Age : \_\_\_\_\_

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : \_\_\_\_\_

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SDN 7372 J



INSRS: WSP: Hua Meng  
Tel: \_\_\_\_\_  
Liability: \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: WSP: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Liability: \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: WSP: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Liability: \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: WSP: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Liability: \_\_\_\_\_  
RMKS: \_\_\_\_\_

Date / Time

STAGE

DATE / PIC

18/08/19  
CPL

SDN 7372 J - 6/08/19  
SDL 83274 - X

dispute damage in OI GIA report  
Pending further LOR  
LOR in

21/08/19

- REPORT DONE  
- BOOK WORKSHOP APPROVAL TO LPC

22/08/19

- LPC APPROVED WORKSHOP  
- SEND SST OFFER TO TP.

27/08/19

- TP ACCEPTED OFFER  
- ALL DOCS IN ORDER.  
- TO CLOSE.

STAGE	DATE / PIC
Non-Reporting ltr (1st)	
Non-Reporting ltr (2nd)	
Non-Reporting ltr (Final)	
Notification ltr (if non-pickup)	
Call OE:	
After call ltr to OE:	
Documentation Check List: Handler	
Documentation Check List: Typist	
Notification ltr (if non-pickup)	
After call ltr to OE:	
Authorisation To Act	
Release Voucher	
Final Repair Bill	
Car Rental Invoice	
Towing Invoice	
LTA / GIA	
Medical Bill	
PIR	
Mandate/Reject Instruction	
LOD	
Payment Breakdown Form	
Post-Repair Photos	
Others	

**PRELIMINARY ADVICE** Date/Time: \_\_\_\_\_ Sent By: \_\_\_\_\_

**FINALIZATION** Date/Time: \_\_\_\_\_ Confirm with: \_\_\_\_\_ Confirm by: \_\_\_\_\_

Repair Cost: **46** \$S 1,700.00 ( 3 days) Reduction: **67** % Email  Call

**FINAL SETTLEMENT** Date/Time: 27/08/19 Confirm with: JING Email  Call

Final Liability: % 100 (Assessed) BOLA S/N No.: 21 If NO or B 28, Ass. Lia: \_\_\_\_\_

Repair Cost: \$S 1,700.00

Loss of Rental (LOR): \$S 200.00 ( 2 days) x \$100

Loss of Use (LOU): \$S - ( 3 x days)

Loss of Income (LOI): \$S - ( 3 x days)

LOR only  LOU only  LOR + LOU  LOR + LOI  [Tick only one]

GIA/LTA Search \$S 7.45

Medical: \$S -

Disbursement: \$S - (e.g. Tow/ Independent)

Legal Cost \$S -

**Total:** \$S 1,907.45 Global Sum \$S: \_\_\_\_\_

**FINAL PAYMENT** Date/Time: \_\_\_\_\_ Confirm with: \_\_\_\_\_ Email  Call

Payee 1: \$S 1,907.45 Name 1: HUA MENG SPRAY PAINTING WORKSHOP

Payee 2 (Strike if N.A.): \$S - Name 2: \_\_\_\_\_

Payee 3 (Strike if N.A.): \$S - Name 3: \_\_\_\_\_

COPY SENT 27/8/19

Front

- 1) Claim status: No / Reject / Private Settle
- 2) Report Format:
- 3) Survey fee: \$ 450.50





**INTERVIEW FORM**

Name (Driver) : Phoon kok meng  
Policy No : \_\_\_\_\_  
Vehicle No : SDN 7372J  
Place of Accident : Dairy Farm Road

Insured Driver's relationship with Insured : \_\_\_\_\_

Drink Driving of Insured and/or Insured Driver : \_\_\_\_\_

No of passenger(s) in Insured vehicle : 1 pax

Injury to Insured and/or Insured driver, please indicate which hospital:  
\_\_\_\_\_

Third Party Vehicle No (if any) : SDL 8322H

No of passenger(s) in Third Party Vehicle : -

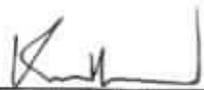
Injury to Third Party driver and/or passenger(s), please indicate which hospital:  
\_\_\_\_\_

Type of collision and the extensiveness of the damages to all vehicles involved:  
\_\_\_\_\_  
\_\_\_\_\_

Any witness to the accident (if yes, please indicate Name, Contact No and a copy of the statement):  
\_\_\_\_\_

Traffic Police report (enclosed) : Yes  No

**Please obtain a copy of the driving licence of Insured driver and/or work permit (where foreign worker is involved)**

  
Driver (Name & Signature)

**I, affirmed the above information is given to my best knowledge**

\_\_\_\_\_  
Attended by (Name & Signature)

Workshop Name: \_\_\_\_\_

# HUA MENG SPRAY PAINTING WORKSHOP

1, Kaki Bukit Avenue 6, Blk C #01-61 / 01-34, Singapore 417883

Autobay @ Kaki Bukit

Tel: 6747 8064, 6746 5519 / 9666 9680 Fax: 6743 4896

## ESTIMATE

2VW508030872

PHOON KOK MENG  
2D HONG SAN ALK  
#15-12  
S 689050

TP LON PAC  
Roh Kim

Date : 01.10.2018  
Vehicle no : SDN 7372 J  
Make/Model : TOYOTA PRIUS  
Accident date : 16.09.2018

No	DESCRIPTION	Qty	Amount (\$)
<b>List Items</b>			
1	Rear bumper <i>tok</i>	1	\$ 466.3 ✓
2	Rear bumper side holder @ \$124.00 <i>HTM</i>	2	\$ 248 X
3	Rear bumper lower garnish <i>ut</i>	1	\$ 607.5 ✓
4	Rear bumper clips (1set) <i>NEC</i>	1	\$ 60-30
5	Rear bumper towing hook cover <i>ut</i>	1	\$ 27.5 X
6	Rear bumper reinforcement <i>rent</i>	1	\$ 350.7 ✓
7	Rear bumper lower LH cover <i>tok</i>	1	\$ 165 ✓
8	Rear bumper lower centre cover	1	\$ 75 ✓
9	Rear end panel <i>repis</i>	1	\$ 692.8 X
10	Rear bumper lower cover clips (1set) <i>new</i>	1	\$ 60-20
			\$ 2752.8
		Less 25% Disc	\$ 688.2
		Total	\$ 2064.6
<b>Special Nett Items</b>			
1	Rear bumper reverse sensor(1set) <i>Dangit 290</i>	1	\$ 380 <i>200</i>
		Total	\$ 380
<b>Labour Cost</b>			
1	To supply rear end panel inner sealant	<i>650</i>	\$ 200 X
2	Remove & reinstall reverse sensor		\$ 150-50
3	Remove & reinstall boot lid inner garnish		\$ 150 X
4	Remove ,replace & repair consistent to the accident		\$ 1200 300
5	Respray painting		\$ 1000 300
		Total	\$ 2700
		<b>Grand Total</b>	<b>\$ 5144.6</b>

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:

total: 2035.87

c/c: 17K

030 days

17K

## Mei Kwan (LKKAuto)

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**From:** GERALD POH WEE BIN <geraldpoh@lonpac.com>  
**Sent:** Monday, 12 November, 2018 5:35 PM  
**To:** Mei Kwan (LKKAuto)  
**Cc:** MT\_Claim\_SG  
**Subject:** RE: Direct Settlement - Accident Involving SDL8322H (OI : LPC - TBA) AND SDN7372J (TP : LKK REF - CC6/LPC18017249/Afa3) on 16/09/2018  
**Attachments:** 12112018173143.pdf  
**Categories:** HMK

Our Ref : 18/18/18/VP05/020933

Dear Mei Kwan,

Attached copy of insured's GIA report for your attention.

Best Regards  
Gerald Poh  
Senior Claims Executive | Lonpac Insurance Bhd  
300 Beach Road, #17-04/07 The Concourse, Singapore 199555  
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

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**From:** Mei Kwan (LKKAuto) [mailto:Meikwan@lkkauto.com]  
**Sent:** Tuesday, 16 October, 2018 8:59 AM  
**To:** GERALD POH WEE BIN  
**Cc:** MT\_Claim\_SG; Poh Kin (LKKAuto); Hsiao Tong (LKKAuto); Admin A  
**Subject:** RE: Direct Settlement - Accident Involving SDL8322H (OI : LPC - TBA) AND SDN7372J (TP : LKK REF - CC6/LPC18017249/Afa3) on 16/09/2018

Dear Sir / Madam,

We refer to the above matter.

Kindly advise whether insured has reported. If so, kindly let us have a copy of insured's accident report for our necessary action.

Thank you.

Best Regards,

**Mei Kwan** | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366 0055 | email: [MeiKwan@lkkauto.com](mailto:MeiKwan@lkkauto.com) | fax: 67414108

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

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**From:** Mei Kwan (LKKAuto)  
**Sent:** Wednesday, 10 October, 2018 9:10 AM  
**To:** GERALD POH WEE BIN <geraldpoh@lonpac.com>  
**Cc:** 'MT\_Claim\_SG' <mt\_claim@lonpac.com>; Poh Kin (LKKAuto) <pohkin@lkkauto.com>; Hsiao Tong

**LKK Auto Consultants Pte Ltd**

Phone: 6366 0055 | email: [MeiKwan@lkkauto.com](mailto:MeiKwan@lkkauto.com) | fax: 67414108

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

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**From:** GERALD POH WEE BIN <[geraldpoh@lonpac.com](mailto:geraldpoh@lonpac.com)>

**Sent:** Monday, 24 September, 2018 12:16 PM

**To:** Mei Kwan (LKKAuto) <[Meikwan@lkkauto.com](mailto:Meikwan@lkkauto.com)>

**Cc:** MT\_Claim\_SG <[mt\\_claim@lonpac.com](mailto:mt_claim@lonpac.com)>

**Subject:** RE: Direct Settlement - Accident Involving SDL8322H (OI : LPC - TBA) AND SDN7372J (TP : LKK REF - CC6/LPC18017249/Afa3) on 16/09/2018

Our Ref : 18/18/18/VP05/020933

Dear Mei Kwan,

Our insured has not notified us of the accident and we are making enquiries.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

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**From:** Mei Kwan (LKKAuto) [<mailto:Meikwan@lkkauto.com>]

**Sent:** Friday, 21 September, 2018 5:02 PM

**To:** MT\_Claim\_SG

**Cc:** GERALD POH WEE BIN; ONG LI LI; ericwoo; Poh Kin (LKKAuto); Hsiao Tong (LKKAuto); Admin A

**Subject:** Direct Settlement - Accident Involving SDL8322H (OI : LPC - TBA) AND SDN7372J (TP : LKK REF - CC6/LPC18017249/Afa3) on 16/09/2018

**WITHOUT PREJUDICE**

Dear Sir / Madam,

We refer to the above matter.

This is a TP direct settlement case.

We had inspected TP vehicle SDN 7372J at M/s Hua Meng Spray Painting Workshop - Kaki Bukit.

Enclosed for your perusal is:

- TP GIA report

Please be informed that the estimated cost of repair is not ready yet.

We will revert to you on preliminary advice in due course.

Meanwhile, kindly assist to verify validity of our insured's policy and let us have a copy of insured's accident report for our necessary action.

Please take note that the case handler in-charge is Poh Kin and he can be contacted at DID: 6841 2132.

## AUTHORISATION TO ACT

I/We, Phoon Kok Meng ("the third party claimant") of  
20 Hany San Walk #15-12 Singapore 689050 (address),  
owner of SDN 7372J (vehicle no.) hereby authorise **HUA MENG SPRAY PAINTING**  
**WORKSHOP** ("the workshop") to act for me with respect to my claim for repair costs and/or  
rental and/or loss of use ("claim") for my vehicle no. SDN 7372J that was damaged pursuant  
to the accident which occurred on 16.09.2018 (date) along Dairy Farm Road  
(location) involving vehicle no/s SDL 8322H ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 20 (day) of 09 (month) 2018 (year)



Signed by "the third party claimant"  
(with company stamp if applicable)

華明噴漆廠  
HUA MENG SPRAY PAINTING WORKSHOP  
AMTQBAY@KAKI BUKIT  
1 KAKI BUKIT AVENUE #01-34 SINGAPORE 417883  
TEL: 6743 8064, 6746 5519 FAX: 6743 4896

Signed by "the workshop"  
(with company stamp)



## 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 : CC6/LPC18017249/Aha3n2	
300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Date : 04-09-2019	
		Code : LPC2	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SDL 8322H	Veh. Inspected	SDN 7372J
Policy No.		Coverage (\$)	0.00
Claim No.	18/18/18/VP05/020933	Excess (\$)	0.00
Assign From		Assign Date	20/09/2018
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA PRIUS	c.c	1797
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	ZVW508030872	Colour	BRONZE
Odometer	30749	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195/65 R15	TOYO	6 mm
L/H Front Tyre	195/65 R15	TOYO	6 mm
R/H Rear Tyre	195/65 R15	TOYO	6 mm
L/H Rear Tyre	195/65 R15	TOYO	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	16/09/2018	Inspection Date	20/09/2018
Survey held at	HUA MENG SPRAY PAINTING WKSP 1 KAKI BUKIT AVE 6 #01-61 AUTOBAY SINGAPORE 417883		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>3 Working Days</b>	



## 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. SDN 7372J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	TORN	466.30	466.30
2	REAR BUMPER SIDE HOLDER @\$124.00	NOT NECESSARY	248.00	-
1	REAR BUMPER LOWER GARNISH	CUT	607.50	607.50
1	SET REAR BUMPER CLIPS	NECESSARY	60.00	30.00
1	REAR BUMPER TOWING HOOK COVER	NOT NECESSARY	27.50	-
1	REAR BUMPER REINFORCEMENT	BENT	350.70	350.70
1	REAR BUMPER LOWER LH COVER	TORN	165.00	165.00
1	REAR BUMPER LOWER CENTRE COVER	TORN	75.00	75.00
1	REAR END PANEL	TO REPAIR SEE LABOUR	692.80	-
1	SET REAR BUMPER LOWER COVER CLIPS LESS 25% DISCOUNT	NECESSARY	60.00 -688.20	20.00 -428.63
			2,064.60	1,285.87
<b>SPECIAL NETT ITEMS</b>				
1	SET REAR BUMPER REVERSE SENSOR (SN)	DAMAGED	380.00	200.00
1	REAR END PANEL INNER SEALANT (SN)	NOT NECESSARY	200.00	-
			580.00	200.00
<b>LABOUR</b>				
REMOVE & REINSTALL REVERSE SENSOR.			150.00	50.00
REMOVE & REINSTALL BOOT LID INNER GARNISH.		NOT NECESSARY	150.00	-
REMOVE, REPLACE & REPAIR CONSISTENT TO THE ACCIDENT. INCLUSIVE OF THE REPAIR OF REAR END PANEL.			1,200.00	300.00
RESPRAY PAINTING.			1,000.00	300.00
-			-	-
-			-	-
-			-	-
			2,500.00	650.00
<b>GRAND TOTAL</b>			<b>5,144.60</b>	<b>2,135.87</b>



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			1,700.00
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Report Ref No. CC6/LPC18017249/Aha3n2

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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