

ASS. REC. BY:

REF: CS3/CTI18017549/Gcd34 Special Instruction:

Surveyor: CHO ChiangASSIGNMENT (Office)From (Person): Chong Boon Senof CTIDate/Time: 26/9/80 1:52pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SGR 8316JInsured: GBD 8334Pat Workshop m/s Lee Leuw Sing MotorTel: 9668 6354of 10 AMK Ind. Park 2A # 03-10Policy No: DMCVSN3060441702Claim No: SNM18D04551C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 19/09/201801/10/2018 @ 1pmCA / REV / REP. / REV 24 HRS 1up

H.O.D. Endorsement:

Date/Time: 3pm @ 26/1/18

Person Contacted:

Kim

Vehicle-IN/OUT

Date/Time	Action/Instruction (x) Estimate
	<u>SGR 8316J - X</u>
	<u>GBD 8334P - CS/INC16023546/M/qh 3m2</u>
	<u>DA: 7/12/16</u>

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	26 Sep 2018		26 Sep 2018 13:52 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	JS GIFTS & TRADING , Co. Reg. No.: 53206749E		
Main Claimant:	WU JUNJIE KELLY , ID: S9115394G		
Vehicle Reg. No.:	SGR8316J	Date of Loss:	19/09/2018 07:00 - :59
Claim Type:	TP / SNM18D04551C02	Policy/Cover Note No.:	DMCVSN3060441702 (Comprehensive)
Vehicle Reg. No. (Insured):	GBD8334P	Policy No. (Claimant):	5089228049-01
		Excess:	S\$0.00
Repairer:	Lee Leuw Sing Motor (HQ) 10 ANG MO KIO INDUSTRIAL PARK 2A, #03-10 AMK AUTOPOINT, 568047 Ang Mo Kio - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]		
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 05/10/2018]		
Driver/Custodian (Insured):	ONG JUN SHENG (29 / Male), NRIC: S8916101J, Tel: +6591912091		
Adj Asg. Remarks:	NO EST, CASE W/O SJE.		

ASSOCIATED MAIL RECEIVED

[View All](#)

[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#)

[Search Tasks](#)

[Create New Task](#)

[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Lucas Lee

From: Sow-ye Wong <wongsylaw@gmail.com>
Sent: Wednesday, 26 September, 2018 11:41 AM
To: Claims Dept of CTI; Irene Tay; KIM - SENG SON
Subject: Re: NOTICE OF ACCIDENT - SGR 8316J & GBD 8334P ON 19.09.18 ALONG KPE ABOUT 0745 AM

Dear Irene

Kindly

We refer to our Notice of Accident of **20.09.18** *below*

We understand from our Client through his Workshop that there is still **no PRS being arranged / conducted**

Grateful if you can do so urgently within the PD

Lovely day to you

Yours Sincerely

Sow yee

On Thu, Sep 20, 2018 at 12:44 PM Sow-ye Wong <wongsylaw@gmail.com> wrote:

Our Ref : FCY / 487 / 18
Your Ref : **GBD 8334P - JS GIFTS & TRADING**
Date : 21 September 2018

M/s China Taiping Insurance Email: claimsdept@sg.cntaiping.com
Attn: Ms Irene Tay, The Executive - Motor Claims

Dear Sirs

NOTICE OF ACCIDENT

CLAIMANT: WU JUNJIE KELLY

ACCIDENT INVOLVING SGR 8316J & GBD 8334P ON 19.09.18 ALONG KPE ABOUT 0745 AM

We act for WU JUNJIE KELLY Owner & Driver

Our Client's Car : **SGR 8316J**
Your / Your Insured's Van : **GBD 8334P**
Date & Time of Accident : **19 SEPTEMBRT 2018 / 0745 AM**
Place of Accident : **KPE**

Before our Client proceeds to repair the damaged car, we are requesting a Pre-Repair Survey

Kindly let us know within **2 working days** of this Notice whether you or your Insurers would like to conduct a PRS of the car

If we do not receive any reply from you/your Insurers within the stipulated timeline, our Client shall proceed to repair the car without further reference to you & our Client will be compensated for the loss of use of the car for this period of time

Our Client's Appointed Workshop

M/s Lee Leuw Sing Motor (*Please contact: Kim - 9668 6354*) 10 Ang Mo Kio Industrial Park 2A

03 - 10 AMK Autopoint

S (568047)

Tel : 6483 7412 / 6483 0827

Fax : 6483 7416

Our Clients' Appointed Surveyor

MR CHOW CHER POW

Chow Automobile Assessor & Surveyor

Mobile : 9739 6074

Copies of our Client's GIA / Police Reports, LTA Search of GBD 8334P, NRIC & DRIVING License, Warrant-To-Act & Letter of Authority for your kind attention

Deeply appreciate your prompt action

Yours Faithfully

Sow-jee

M/s Fong & Fong LLC

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5394G
Vehicle Details	
Vehicle No.:	SGR8316J
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Oct 2018
Vehicle Make:	HYUNDAI
Vehicle Model:	GETZ1.1 5M
Primary Colour:	Red
Manufacturing Year:	2007
Engine No.:	G4HG7231549
Chassis No.:	KMHBT51GR7U661825
Maximum Power Output:	48.5 kW (65 bhp)
Open Market Value:	\$8,460.00
Original Registration Date:	16 Feb 2007
First Registration Date:	16 Feb 2007
Transfer Count:	1
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	15 Feb 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$25,197.00
COE Rebate Amount:	\$16,992.00
Total Rebate Amount:	\$16,992.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 02 Oct 2018

OK

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	19/09/2018 14:45
Date Of Accident	19/09/2018 07:45
Exact Location Of Accident	ALONG KPE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGR8316J
Insured/Policyholder	
Name Of Registered Owner	WU JUNJIE, KELLY
NRIC No	S9115394G
Email Address	GKELLY.GOH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90217437
Alternative Phone No	OTHERS-90217437

Vehicle Particulars

Manufacturer	HYUNDAI
Model	GETZ1.1 5M
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5089228049-01
Cover Note Number	

Driver

Name of Driver	WU JUNJIE, KELLY
NRIC No	S9115394G
Date Of Birth	21/04/1991
Occupation	OUTDOOR
Date Of Driving Pass	30/09/2011
Driving Experience	6 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90217437
Fax Number	
Contact Number	OTHERS-90217437
EEmail Address	GKELLY.GOH@GMAIL.COM

Address	BLK 146 RIVERVALE DRIVE #09-511
Postcode	540146
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	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?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4890999 - FAX NO: 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED POLICE REPORT NO: T/20180919/2086. WILL REPAIR AND CLAIM AT LEE LUEW SING MOTORS.

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	GBD8334P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ONG JUN SHENG
NRIC/Passport Number	S8916101J
Contact Number	91912091
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name WU JUNJIE, KELLY

Approximate Age

Injuries Sustain

Injured person in which vehicle? SGR8316J

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan

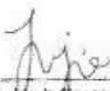
SKETCH PLAN

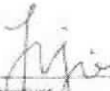
IMPORTANT NOTICE


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 regudiate 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 judgment 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.

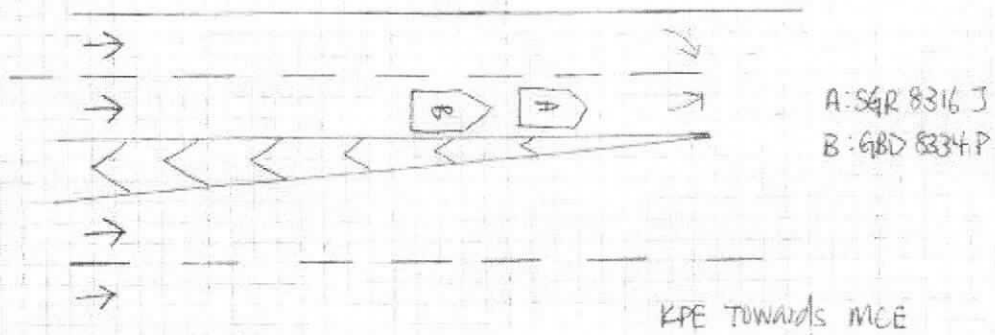

Policyholder's Signature
Date & Time:


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


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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police report. T/20180919/2086

Will repair and claim at Lee Luan Sing Motors

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.:

Stamp of Reporting Centre

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180919/2086

1 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20180919/2086

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/09/2018 13:41		Vide Report No.:		Station Diary No.: 51	
Informant's Particulars					
Name of Informant: WU JUNJIE, KELLY			Address: APT BLK 146 RIVERVALE DRIVE #09-511 SINGAPORE 540146		
ID Type / ID No.: NRIC NO / S9115394G			Contact No.: Home/Office: Mobile: 90217437		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 27	Date of Birth: 21/04/1991	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SALES			Driving Licence Information: Class: 3 Date of Expiry:		

General information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 19/09/2018 07:45	Type of Location: Straight Road
Location: Along Road 1 KALLANG PAYA LEBAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBD8334P	Car	MITSUBISHI		White		1
SGR8316J	Car	HYUNDAI	GETZ1.1 5M	Red		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGR8316J	NTUC Income Insurance Co-Operative Limited	5089228049-01	27/03/2018	26/03/2019

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180919/2086

2 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20180919/2086

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ONG JUN SHENG	ID No.	S8916101J
Related Vehicle	SBD8334P (Car)	Contact No.	91912091
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	WU JUNJIE, KELLY	ID No.	S9115394G
Related Vehicle	SGR8316J (Car)	Contact No.	90217437
Hospital/Clinic	HEALTHBRIDGE FAMILY CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	19/09/2018	Date Discharge	19/09/2018
No. of Days granted Medical Leave	02	Degree of Injury	Slight

Brief Details.

On 19 Sept 2018 at about 0745 hrs, I was driving my vehicle SGR8316J along KPE. The traffic was heavy and slow moving. Suddenly, I felt an impact from the rear. Another vehicle SBD8334P collided onto the rear portion of my vehicle. Ambulance was called but I refused conveyance. After the accident, I sought medical attention and was given 2 days MC.

I was advised by my insurance company to lodge a police report.

Sketch Plan #5



SINGAPORE
POLICE FORCE



T/20180919/2086

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No. T/20180919/2086

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.

Signature Of Officer Recording The Report:
F /
Sgt 2 YAP WEI YANG

Signature Of Informant:

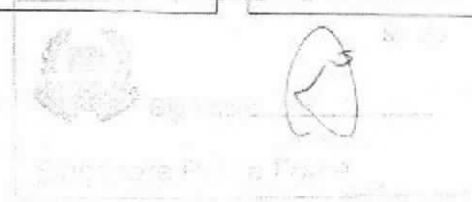
Signature Of Interpreter:
Not applicable

Date/Time:
19/09/2018 13:41

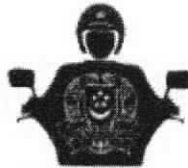
Officer In Charge Of Case:
TP / AEIT /
Sr Staff Sgt ONG YONG HOCK
Contact No.: 65476436

Classification Of Case:

Authentication Stamp
NP166



Police Amendment



Traffic Police Department
Charge Office
10 Ubi Avenue 3
Singapore 408865

TRAFFIC POLICE
AMENDMENT

NP 168 No. : T/20180919/2086 Name : Wu Jia Jie Kelly
Accident Date/Time : 19/09/2018 @ 0745hrs Address : 8/746 Riverside Drive #04-511
Vehicle(s) Involved : 6BD 8334P NRIC No : S91153946
SGR 8316J Tel No : 90217437
Date : 19/09/2018

Dear Sir / Madam

Accident involving 6BD 8334P & SGR 8316J
along KPE on 19/09/2018 at 0745 hours

With reference to the above, I have on 19/09/2018 (date) 1341 hours (time) make a
police report at Hagen APC (Police Station/NPP/NPC)
In NP 168 - T/20180919/2086

On 19/09/2018 (date), 1630 hours (time) at SGR 8316J APC
(Police Station/NPP/NPC), I make the following amendments to the above report;
SBD 8334P should be 6BD 8334P

Yours Faithfully,

(Signature)

FOR OFFICIAL USE

If a police officer recorded these amendments, please complete the following.

Name / Rank No : SI 7740
Date and Time : 19/09/2018 @ 1630h
Station Dairy No : 111
Signature :

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	26 Sep 2018		26 Sep 2018 13:52 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	JS GIFTS & TRADING , Co. Reg. No.: 53206749E								
Main Claimant:	WU JUNJIE KELLY , ID: S9115394G								
Vehicle Reg. No.:	SGR8316J	Date of Loss:	19/09/2018 07:00 - :59 [139 Months and 3 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM18D04551C02	Policy/Cover Note No.:	DMCVSN3060441702 (Comprehensive)						
Vehicle Reg. No. (Insured):	GBD8334P	Policy No. (Claimant):	5089228049-01						
		Excess:	S\$0.00						
Repairer:	Lee Leuw Sing Motor (HQ) 10 ANG MO KIO INDUSTRIAL PARK 2A, #03-10 AMK AUTOPOINT, 568047 Ang Mo Kio - Tel:								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]								
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 05/10/2018]								
Driver/Custodian (Insured):	ONG JUN SHENG (29 / Male), NRIC: S89161011, Tel: +6591912091								
Adj Asg. Remarks:	NO EST, CASE W/O SJE.								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									



















Claim Documents

*SGR8316J (SNM18D04551C02)
[GBD8334P]
TP
WU JUNJIE KELLY
Sep 19 2018 7:00AM
[JS GIFTS & TRADING]
Lee Leuw Sing Motor

Upload Documents		Upload Photos	Compose New Letter	View View in Browser	
Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Chew Goon Motor (AMK)		Thumbnail	Print
1	19/09/18 15:05	Accident Statement		Load HTM	
2	19/09/18 15:23	Addendum Sheet		Load JPG	<input checked="" type="checkbox"/>
3	19/09/18 15:32	Accident Statement Addm. #1		Load HTM	
4	19/09/18 17:34	Addendum Sheet		Load JPG	<input checked="" type="checkbox"/>
5	19/09/18 17:36	Accident Statement Addm. #2		Load HTM	
Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Finalized On	Chew Goon Motor (AMK)		Thumbnail	Print
1	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
2	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
3	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
4	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
5	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
6	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
7	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
8	19/09/18 15:00	Accident Photo [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	03/10/18 13:57	General View		Load PDF	
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	26/09/18 13:51	PRS		Load PDF	
2	26/09/18 13:51	OI GIA		Load PDF	
No	Finalized On	Chew Goon Motor (AMK)		Thumbnail	Print
1	19/09/18 14:57	Sketch Plan [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
2	19/09/18 14:57	Sketch Plan #2 [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
3	19/09/18 14:57	Sketch Plan #3 [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
4	19/09/18 14:57	Sketch Plan #4 [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
5	19/09/18 14:57	Sketch Plan #5 [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
6	19/09/18 17:34	Police Amendment [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>

Linked Accident Report Documents

View View in Browser

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Chew Goon Motor (AMK)	Thumbnail	Print
1	19/09/18 15:05	Accident Statement	 Load HTM	
2	19/09/18 15:23	Addendum Sheet	 Load JPG	<input checked="" type="checkbox"/>
3	19/09/18 15:32	Accident Statement Addm. #1	 Load HTM	
4	19/09/18 17:34	Addendum Sheet	 Load JPG	<input checked="" type="checkbox"/>
5	19/09/18 17:36	Accident Statement Addm. #2	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	Chew Goon Motor (AMK)	Thumbnail	Print
1	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
2	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
3	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
4	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
5	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
6	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
7	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
8	19/09/18 15:00	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Chew Goon Motor (AMK)	Thumbnail	Print
1	19/09/18 14:57	Sketch Plan	 Load JPG	<input checked="" type="checkbox"/>
2	19/09/18 14:57	Sketch Plan #2	 Load JPG	<input checked="" type="checkbox"/>
3	19/09/18 14:57	Sketch Plan #3	 Load JPG	<input checked="" type="checkbox"/>
4	19/09/18 14:57	Sketch Plan #4	 Load JPG	<input checked="" type="checkbox"/>
5	19/09/18 14:57	Sketch Plan #5	 Load JPG	<input checked="" type="checkbox"/>
6	19/09/18 17:34	Police Amendment	 Load JPG	<input checked="" type="checkbox"/>

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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

Our File No: CS3/CTI18017549/GCD3E2

Date: 04/10/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN3060441702
Claimant Vehicle No :	SGR8316J	Insured Vehicle No :	GBD8334P
Date of Loss:	19/09/2018	Nature of Claim:	TP
		Claim No:	SNM18D04551C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SGR8316J		
Make & Model:	HYUNDAI GETZ, 1.1 5 (M)	Engine No:	G4HG7231549
Reg. Date:	16/02/2007 (Man. Year: 2007)	Chassis No:	KMHBT51GR7U661825
Colour:	Red	Odometer:	98160 km
Engine Capacity:	1086 cc		
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):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	195/50 R15	Rear Tyre Size:	195/50 R15
Front Left Side:	SMACHER 6 mm	Rear Left Side:	SMACHER 6 mm
Front Right Side:	SMACHER 6 mm	Rear Right Side:	SMACHER 6 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:	26/09/2018	
Date Inspected:	01/10/2018 Inspected At:	Lee Leuw Sing Motor (HQ) 10 ANG MO KIO INDUSTRIAL PARK 2A, #03-10 AMK AUTOPOINT Singapore 568047
Estimated Period of Repair:	4.0 days	

Adjuster: XING GUO QIANG

Manager: CELINE FONG

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.

- 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 \$1,500.00 -\$2,500.00

REPAIR DETAILS

Reference		
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 04 Oct 2018)
Parts:	144	HYUNDAI GETZ 1.1 5 (M) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SGR8316J)	
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 >