27/03/2002 - ASS, REC, BY	REE: col and alacted O	
Surveyor:	Dagit (23) (17) 6018 2431 K	
meninen	ASSIGNMENT (Office)	1. 1. 0. 11. 40. 00
Estimated Cos	Chong Boon Sen of CTI	Date/Time: _121101186 11.48011
	Bill to: S-TP RES / OD RES / EVA / INV / MV 7 CS	
To Inspect Ve	chicle No: (18C A 9/16 X	Insured: 3)Z 6331A
at Workshop r	n/s Ring Tat ANAD	Tel: 6777 08 69
of	Blk K, No. 6 Pendan Loop	01110001
Policy No:		8NM18D64810C02
Sum Insured:	Excess:	
Make of Veh: (Client's Record		D.O.A. 08 10 2018
CA / REV /	REP. / REV 24 HRS Up)	H.O.D. Endorsement:
Date/Time:	2.13 pm@ 12/10/18 Person Contacted: Mrs.	Tan Vehicle IN/OUT
Date/Time	Action/Instruction (X) Estimate	
	GBC 4966 Y-X	
	SIZ 6331A-X	
15/10/18-		
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From:	Date:	Veh No:	GAC	49664	Yr Regn:	2012/0	scT
Estimated Cost:		Type: M.Car	/ M.Cycle / B	us / Van / Kor	Taxi / Prime	Mover/	
OD / TP // WS / TP RES /	OD RES / EVA / INV / MV	Truck	/ Trailer or				
To Inspect Vehicle No:	GBC 49664	Make:	N188M	CASSMAR	3.0	C.C	
at Workshop m/s	BING TAT AND	Colour	GREY		A/C: Insur	ed / Std / N	I / NA
of No.6,	bourse rook	Sp.Reading	1573	19	T/Radio: Insu	red / Std / N	II / NA
Insured:		Eng/No:				,	
Policy No.		C/No:	JNIS	C2F24	208504	55	
Claims No.		Gen. Cond: 0	Good / Yay / I	Poor / Burnt			
Sum Insured:	Excess:	Steering: Ipo	rder / Jamme	ed / Leaked /	Burnt or		
(Client's Record)		Brake: (no	order / Jamm	ed / Leaked /	Burnt or		
Make of Veh:		Modi: 🐠	/ S/Rim / S	TD A/Rim or			
	for 11m	Tyre Size:	F:	195	RIS		
(Policy Condition)	(hypo ((R:	165	R13C		
Remark: The veh had co	ommenced its N/S O/S	ES I DUN I E	EXNOVA / GY	/ FS / LIZA /	MIC / OHTSU /	PIR / SUMI	1
repair at the ti	me of inspection.	TOYO / YO	KO or				
Bal. or Market Value:		Front			Rear	1	
IDAC Accident Rport:	Consistent?: Yes or No	R/Bal.	7	mm	R/Bal.	3/8	mm
GIA / PR Seen:	Consistent?: Yes or No	L/Bal.	٦,	mm	L/Bal.	8/5	mm
Est. Repairs:	days Res.: Yes or No	D.O.A. 8	16/18		D.O.I. (1	10/08	
Lum Sum:	% 3 Val.: Yes or No	Survey held	at	BING 7	DOT .		_
CA / REV / REP.	/ 24 HRS	Des. of Dam	ages: Frt /	Rear / O/S /	N/S / U/C / R	Rooftop or	
	Vehicle: IN / OUT			Regal	V		
	Person Contacted:	The U/C	/ Chassis fr	rame / Body	Structure affect	cted due to d	collision.
Date / Time Action	/ Instruction						
	/les						
	Range \$3,500 -\$	4,300	James	23	A02/08		
				7	GUM		
						IM	
					22/10/	8	
Date/Time, File Pass to?	: Preli. Report	Days Of Re	pair:	5			
1)	: Final Report	Resurvey N	lo. of Trip:	-	Survey Fee:	. 10	50
Date/Time, File Return to?	_				Transportation		
2)	Add Fee)S+RS,S	SI	
			view (\$) Photos		
Report Format :	PRS	: Tech	n. Invs (\$) Others		
Lump Sum / I.B.I: (\$: Wee	ekend (\$)		<u>.</u>
					TOTAL	15	50

No results.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Sub	mitted	Ins Auth'ed	Status	
Main	12 Oct 2018		12 Oct 2018 11:48 Assign					The same of the same	Assignment el Case
M	lain	Re	ference		Claim Details		Documen	nts	Show A
CLAIM SUE	FOLDER DE	TAILS			EAN ILLIES STORY	[Create	ed by insurer1	30-70 m. n.	The Control of the London
Insured:		KWANG, ID: S	1817190B			LCICAL	a by msurer]		
Main Claimant:		IG HAK SUPPLIE		o. Reg. No.:	200812063G				
Vehicle Reg. No.:	GBC496	6Y			Date of Loss:	08/10/2	018 07:00 - :59		
Claim Type:		118D04810C02			Policy/Cover Note No.:	DMPCSN3059971703 (Co		CSN3059971703 (Comprehensive)	
Vehicle Reg. No. (Insured):	SJZ6331A	•			Policy No. (Claimant):	505598391-06			
D = = = 1 = = = =					Excess:	S\$0.00			
Repairer: Handling		luto Service (HQ							
Insurer:	China Taij	oing Insurance (Singapore) Pte	. Ltd. (HQ)	- Tel: 6389 611	1 [Han	dled by Chong Bo	on Sen]	
Claimant's Insurer:	NTUC Inc	ome Insurance C	o-operative Lt	d (HQ) - Tel:					
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561 .	. [Final Rpt	due 23/	10/20181		
Driver/Custo dian (Insured):		KWANG (51 / Male			•	•			
Adj Asg. Remarks:	NO EST, CA	SE W/O SJE.							
ASSOCIATE	D MAIL REG	CEIVED						View All	Company Corre
There are no	mail for this	case,						view All	Compose Case N
	IATED TAS								

K. K. CHENG & CO

Advocates and Solicitors 101 Upper Cross Street #05-21 People's Park Centre Singapore 058357

Tel: 6227 1272 Fax: 6227 5563

Our Ref:

BT/GBC 4966Y

Your Ref:

SJZ 6331A

(Please quote our reference number when replying)

12 October 2018

CHINA TAIPING

By fax only:

6224-7478/6224-7175

Attention:

Motor Claims Department

Dear Sirs

NOTICE OF ACCIDENT

Claimant: CHIA MENG HAK SUPPLIER PTE LTD

Pre-action Protocol for Non-injury Motor Accident Cases involving motor accident occurring on or after 1st April 2016 ["Protocol"]

We refer to your letter dated 12 October 2018.

Firstly, we object to the appointment of any of the motor surveyors proposed by in your List as a single joint expert. We have already stated this at para 4 of our Notice of Accident dated 11 October 2018.

Secondly, we have also given you our proposed list of proposed motor surveyors at para 4 of our Notice of Accident dated 11 October 2018.

Thirdly, if you object to our proposed list of proposed motor surveyors, this matter shall proceed on the basis of para 2.9 of the Protocol. Accordingly, our client shall appoint a surveyor of his choice to conduct the pre-repair survey. And our client shall have his motor vehicle repaired after the pre-repair survey had been done by your appointed surveyor.

Fourthly, for the sake of clarity, we do not agree to your appointed surveyor conducting the Pre-Repair Survey as the single joint expert.

If you wish to conduct a post-repair inspection, please instruct your appointed surveyor to inform our client's repairer of the same during the pre-repair survey.

Finally, the location and contact person of the workshop are as follows:

Name of Workshop

Bing Tat Auto Service

Address

Block K, No. 6 Pandan Loop Singapore 128224

Contact person

Mr Tan/Mrs Tan

Telephone No.

67770859

Yours faithfully

CHENG KIM KUAN

cc Workshop (REF:

GBC 4966Y)

MFA218130166 / Falcon-Air Auto Services Pte Ltd - Pandan ENTRY DATE & TIME: 08/10/2018 12:52 SUBMITTED BY: Francis Ng

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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. 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.

By the lodgement of this report to the insurers, you hereby con aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	08/10/2018 12:52
Date Of Accident	08/10/2018 07:55
Exact Location Of Accident	SELETAR WEST LINK TWD YISHUN AVE 1
Country/State of Loss	SINGAPORE
A STATE OF THE STA	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC4966Y
Insured/Policyholder	
Name Of Registered Owner	CHIA MENG HAK SUPPLIER PTE LTD
Co Reg No	200812063G
Email Address	GENERAL@CHIAMENGHAK.COM
Mobile Phone No	
Alternative Phone No	Office-93983527
Vehicle Particulars	
Manufacturer	NISSAN
Model	CABSTAR-2.5 (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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	505598391-06
Cover Note Number	
Driver	
Name of Driver	PALANIVEL RAJA
NRIC No	G3250166X
Date Of Birth	22/09/1990
Occupation	OUTDOOR

28/06/2018

0 YEAR AND 3 MONTH

Gender MALE Mobile Number (LOCAL) +65-93963527 Fax Number Contact Number

EMail Address NOEMAIL Address NO ADDRESS

Postcode

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 CHAIN COLLISION Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

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

REFER TO SKETCH PLANS

Attachment(s)

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

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJZ6331A

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

GBA1707J

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 3

Vehicle Registration Number

SDP908A

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)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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
- 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
- 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
- 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)
 - (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
- (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
- 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.
- 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.

Date & Tim

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No .:

A: G8C4966 Y.

B: SJZ6331A

C: G8A1707 J.

Seletar West Link:

D: SDP908A.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

D: SDP908A.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Along

Accident happened, Seletar West Link (from direction

of Seletar Rerespece toward Vishan Que I) beside Puis

Lower Seletar.

T was travelling along Seletar West Link. W Traffic

infront

Was very heavy. When the vehicles, Slowed drwn and

Veh. No SDPGOSA had colleded on to the rear of GBALTOTO

stopped. I also stopped. Suddenly I heard

collision and vehicle No 655 Z 6331A collided on to the

of my vehicle. When I alighted, I noticed that

GBA 1707 J collided in to STZ 6331 A rear.

DECLARATION

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

Policyfiolder's Signature Date & Time:

正祖令

Driver's Sature

(If driver is not the policyholder)

Date & Time

PANDAJO SEAVICE

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



S PASS

of Foreign Manpower Act (Chapter 91A) Republic of Singapore

Employer CHIA MENG HAK FOOD SUPPLIER PTE. LTD.

Sector SERVICE

1



PALANIVEL RAJA

ASSISTANT OPERATIONS SUPERVISOR

13-06-2017

11-07-2017 11-07-2019

L8123194

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS[ES]

EFFECTIVE DATE

Motor cars with unladen weight =< 3000kg with =< 7 26 Jun 2018 passengers, exclusive of driver; and other motor whickes with unladen weight =< 2500kg

Immigration Regulations

PALANIVEL RAJA



Nationality

22-09-1990 M FIN Date of issue

VISIT PASS

INDIAN Date of Expiry

G3250166X 11-07-2017

MULTIPLE JOURNEY VISA ISSUED

NP 428A

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

LAIM SUBFO			Adi Assissed	Adi Dat	Ad	Submitted	Ins Auth'ed	Status	
	2 Oct 2018	Est Submitted	Adj Assigned 12 Oct 2018 11:48 Edit Adj Rpt	S\$0.00 Edit Estima	S\$	0.00 View Rpt	Ins Auth ed		for Survey
М	ain	R	eference	Clair	n Details		Documents		Show All
CLAIM SUB	FOLDER DE	TAILS				[Created	by insurer]		
Insured:	сніц кої	KWANG, ID: S	1817190B			1.5			
Main Claimant:	CHIA ME	CHIA MENG HAK SUPPLIER PTE LTD, Co. Reg. No.: 200812063G							
Vehicle Reg. No.:	GBC496	6Y			ite of Loss	[72 Months	8 07:00 - :59 s and 6 Days From	LTA Reg Da	ate (Man Yr)]
Claim Type:	TP / SN	418D04810C02			licy/Cover te No.:	DMPCSN30	59971703 (Compr	rehensive)	
Vehicle Reg. No. (Insured):	SJZ6331A			licy No. laimant):	505598391	3391-06			
				10000	cess:	S\$0.00			
Repairer:	Bing Tat	Auto Service (HC	2) 1 Pandan Loop, #	01-06, 12821	West Coa	st - Tel: 6777	70859	1.55	
Handling Insurer:	China Tai	ping Insurance	(Singapore) Pte. L	td. (HQ) - Tel	6389 61	11 [Handle	d by Chong Boon	Sen]	
Claimant's Insurer:			Co-operative Ltd (
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62	56-3561 [H	andled by	MOHD RASU	L] [Final Rpt	t due 23/1	0/2018]
Driver/Custo dian (Insured):		KWANG (51 / Fer	nale), NRIC: S181	7190B					
Adj Asg. Remarks:	NO EST, C	ASE W/O SJE.							
ASSOCIATE	D MAIL RE	CEIVED					Viev	w All Co	mpose Case Mai
There are no	mail for this	case.							
ALL ASSOC	IATED TAS	sks⊟				View All	Search Tasks C	reate New Ta	Complete
Due Date No results.	Priority	Type Task	Group Subject	t Handler	Assig	ned By	Completed On	Create	d On Done

Merimen e-Claims Page 1 of 2

Claim Documents

*GBC4966Y (SNM18D04810C02)

[SJZ6331A]

TP

CHIA MENG HAK SUPPLIER PTE LTD

Oct 8 2018 7:00AM

[CHIU KOK KWANG]

Bing Tat Auto Service

Up	load Documents Up	oload Photos Compose New Letter	View	View in Brows	er 🗸
Ass	essment Reports		1 per p	age 🔻	V
No	Finalized On	Falcon-Air Auto Services Pte Ltd (Pandan)		Thumbnail	Print
1	08/10/18 13:00	Accident Statement	0	Load HTM	
Pho	otos/Images		3 per p	age 🔻	V
No	Finalized On	Falcon-Air Auto Services Pte Ltd (Pandan)		Thumbnail	Print
1	08/10/18 12:58	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
2	08/10/18 12:58	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
3	08/10/18 12:58	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
4	08/10/18 12:58	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
5	08/10/18 12:58	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
6	08/10/18 12:58	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	22/10/18 11:38	General View	0	Load PDF	
Doc	cumentation		1 per p	age 🔻	V
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	12/10/18 11:47	PRS	0	Load PDF	
2	12/10/18 11:47	TP GIA	0	Load PDF	
3	12/10/18 11:48	OI GIA	0	Load PDF	
No	Finalized On	Falcon-Air Auto Services Pte Ltd (Pandan)		Thumbnail	Print
1	08/10/18 12:58	Sketch Plan [Linked Accident Report Documents]	0	Load TIF	
2	08/10/18 12:58	Sketch Plan #2 [Linked Accident Report Documents]	0	Load TIF	

Linked Accident Report Documents

			View View in Browser 🗸
Ass	essment Reports		1 per page
No	Finalized On	Falcon-Air Auto Services Pte Ltd (Pandan)	Thumbnail Print
1	08/10/18 13:00	Accident Statement	1 Load HTM
Pho	tos/Images		3 per page ✓ ✓
No	Finalized On	Falcon-Air Auto Services Pte Ltd (Pandan)	Thumbnail Print
1	08/10/18 12:58	Accident Photo	■ Load JPG
2	08/10/18 12:58	Accident Photo	■ Load JPG
3	08/10/18 12:58	Accident Photo	1 Load JPG ✓
4	08/10/18 12:58	Accident Photo	■ Load JPG
5	08/10/18 12:58	Accident Photo	1 Load JPG ✓
6	08/10/18 12:58	Accident Photo	■ Load JPG

Assessment Reports		1 per page		☑	
No Finalized On Falcon-Air Auto Services Pte Ltd (Pandan)			Thumbnail	Print	
Doc	cumentation		1 per p	age 🔻	✓
No	Finalized On	Falcon-Air Auto Services Pte Ltd (Pandan)		Thumbnail	Print
1	08/10/18 12:58	Sketch Plan	6	Load TIF	
2	08/10/18 12:58	Sketch Plan #2	0	Load TIF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Pr	int
There are no document checklists configured.		
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)		_
		^
		V
Show Remarks To: Handling Insurer Note: Remarks are private unless you show it to other parties.		

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/CTI18018545/R1CD3E2

Date:

26/10/2018

REFERENCE

Handling Insurer:

China Taiping Insurance

(Singapore) Pte. Ltd.

Policy No:

DMPCSN3059971703

Claimant Vehicle

No:

GBC4966Y

08/10/2018

Insured Vehicle

SJZ6331A

No:

Nature of Claim: TP

Claim No:

SNM18D04810C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

GBC4966Y

Make & Model:

Date of Loss:

NISSAN CABSTAR, 2.5 (M)

Engine No:

ZD30303939K

Reg. Date:

02/10/2012 (Man. Year: 2012)

Chassis No: Odometer:

JN1SC2F24Z0850455 157319 km

Colour: Engine Capacity: Grey

Market Value/New Car Price: N/A

2953 cc

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Yes Engine Modification:

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

195 R15

Rear Tyre Size:

165 R13C

Pre-accident Condition:

Front Left Side:

Bridgestone 7 mm

Rear Left Side:

Bridgestone 5/5 mm

Front Right Side:

Bridgestone 7 mm

Rear Right Side:

Bridgestone 5/5 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:

12/10/2018

Date Inspected:

17/10/2018

Inspected At:

Bing Tat Auto Service (HQ)

NO.6 PANDAN LOOP SINGAPORE 128224

Estimated Period of Repair:

5.0 days

Adjuster:

MOHD RASUL

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

https://singapore.merimen.com/claims/index.cfm?fusebox=MTRadjuster&fuseaction=gen... 26/10/2018

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 \$3,500.00 -\$4,300.00

REPAIR DETAILS

Reference

(Last Synchronised: 26 Oct 2018) Part Source:

Parts: N/A

NISSAN CABSTAR 2.5 (M) (Model not available in database)

(Price-denominated Standard List) Labour: Repairer's

Print Code: (Unsubmitted, no print-code for GBC4966Y)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page Validity:

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 >