

22/03/2002

ASS. REC. BY:

REF: CS/MSG/18018644/Ncd31 Special Instruction:Surveyor: N92  
meherASSIGNMENT (Office)From (Person): Muhd Ashik

of

MSGDate/Time: 12/10/18 @ 4:04pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

PC2284D

Insured:

XB 9069Z

at Workshop m/s

Connect 3

Tel:

9850 9666

of

566 woodlands Road

Policy No:

29013131MCC

Claim No:

572738

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 08/10/2018CA / REV / REP. / REV 24 HRS 1up

H.O.D. Endorsement:

Date/Time: 9:10am 15/10/18

Person Contacted:

WinnieVehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>PC2284D - CC6/AXA/4006417 / Any3u2</u> <u>Don: 1/4/14</u>
	<u>XB 9069Z - CS/MSG/17021470 / Rfb52</u> <u>Don: 4/11/2017</u>
	<u>Report from meher</u>

Surveyor:

N92

REF:

MSIG

# ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: 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 / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

PC 2284 D

Yr Regn: 3 JAN 2014

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

Truck / Trailer or

Make:

GOLDEN DRAGON XRL6103198 c.c 6,693

Colour

WHITE

A/C: Insured / Std / NI / NA

Sp. Reading

276,410

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

LL3BGCD A 003603

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

11 R 22.5

R:

11

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

TOYO / YOKO or

BRIDE (W/F), FREMANTLE (CR)

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

8/10/18

D.O.A.

15/10/18

Survey held at

CONNECT 3

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

O/S MIRROR

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

Date / Time

Action / Instruction

- called Winnie on 13/2/19. Said next week over coming in to repair bus. Booked appointment.

26/2/19pm Continued LS \$1200f with Winnie. (Red. 550f, 32%)  
\* Vehicle has not send in for repair.

Date/Time, File Pass to?

☐ : Preli. Report

☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: 1

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

) S + RS SI

☐

Interview (\$

) Photos

☐

Tech. Invs (\$

) Others

☐

Weekend (\$

)

Report Format: TP

Lump Sum / I.B.I: (\$1200f)

TOTAL

150

10

160

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	10 Oct 2018		12 Oct 2018 16:04 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	DA ENGINEERING PTE LTD, Co. Reg. No.: 201111354M		
Main Claimant:	SINGAPORE COACH SERVICES PTE LTD, Co. Reg. No.: 2012227110H		
Vehicle Reg. No.:	PC2284D	Date of Loss:	08/10/2018 19:00 - :59 [57 Months and 5 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 572738	Policy/Cover Note No.:	29013131MKC (TP, Fire & Theft) Coverage: 08/09/2018 - 07/09/2019
Vehicle Reg. No. (Insured):	XB9069Z	Policy No. (Claimant):	
		Excess:	
Repairer:	Connect3 (woodlands) (HQ) 566 Woodlands Road, 728697 Woodlands - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by <b>Muhd Ashik B Madi</b> - 6594 2548]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 13/10/2018]		
Adj Asg. Remarks:	Survey appt to 15/10/18(Mon), 9am. Owner waiting. (Owner request earliest slot). on WP. Please contact us ASAP if you cannot attend this assignment. Oi not reported, Contact : Winnie Chai at HP 9850 9666		

### 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.									

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1968 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.Z.308  
Goods Carrying Vehicle - Sch I

COMMERCIAL VEHICLE  
Third Party Fire & Theft

Certificate No. A 29013131 MKC

1. Index Mark and Registration Number of Vehicle  
XB9069Z

2. Name of Policyholder  
Da Engineering Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act  
08/09/2018

4. Date of Expiry of Insurance  
07/09/2019

5. Persons or Classes of Persons entitled to drive\*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use\*

Use in connection with the Policyholder's business.  
Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

Use for social domestic and pleasure purposes.

The Policy does not cover

(1) Use for hire or reward or for racing pace-making reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer

HUA LIAN AGENCIES PTE LTD

2 JURONG EAST ST 21

#03-150 IMM BUILDING

SINGAPORE 609601

TEL: +65 6561 2722 FAX: +65 6562 6766

PSW201806271648

INSURANCE NOTICE

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200412212G)  
4 Shenton Way, #21-01 SGX Centre 2, Singapore 068807  
Tel +65 6827 7888, Fax +65 6827 7800  
www.msig.com.sg

Your Ref : XB9069Z  
Our Ref : 572738 (Please quote our reference when replying)

11 Oct 2018

URGENT

DA ENGINEERING PTE LTD  
1 KRANJI CRESCENT  
SINGAPORE 728663

Dear Sir/Madam

Accident involving XB9069Z and PC2284D along 20 KRANJI CRESCENT

Policy No : 29013131MKC  
Date of Accident : 08 Oct 2018

We have received a property damage claim from CONNECT3 acting on behalf of the owner of PC2284D. However, we have yet to receive your report on the accident.

Under the Motor Claims Framework, motorists are required to report any traffic accident involving their insured vehicles to their insurers within 24 hours of the accident or by the next working day. Any non-reporting may affect the motorist's No Claim Discount and their rights to seek indemnity under their policy.

We urge you to make a report immediately at any of our authorized workshops or IDAC centres. The list is enclosed for your reference. Please bring your vehicle and the following documents with you:

1. Driving license
2. Identity card
3. Police report, if any

If you have already filed an accident report, please accept our thanks and ignore this reminder.

Thank you.

Yours sincerely

Muhd Ashik B Madi  
Executive  
Claims Services

Tel : 6594 2548  
Fax : +65 6827 7800  
Email : ashik\_madi@sg.msig-asia.com

Cc : Hua Lian Agencies Pte Ltd

A Member of MS & AD INSURANCE GROUP

## 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 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.
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	17/10/2018 11:32
Date Of Accident	08/10/2018 19:30
Exact Location Of Accident	20 KRANJI CRESCENT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	XB9069Z
Insured/Policyholder	
Name Of Registered Owner	DA ENGINEERING PTE LTD
Co Reg No	201111354M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-63689118
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	A 29013131 MKC
Cover Note Number	
Driver	
Name of Driver	QU YANWEI
Passport No/FIN	G8409504X
Date Of Birth	02/01/1971
Occupation	OUTDOOR
Date Of Driving Pass	07/11/2008
Driving Experience	9 YEARS AND 11 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-97261176
Fax Number	
Contact Number	OFFICE-63689118
EMail Address	NOEMAIL
Address	1 KRANJI CRESCENT
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	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	1
Was any body injured in the Accident?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

AS SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC2284D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address  
Postcode

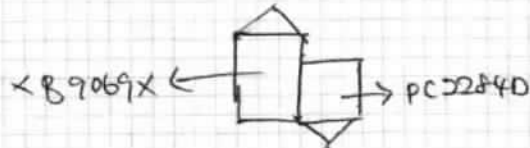
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

plate

10月8日晚19:00pm 20kranj, cves与车2号 PC2284D会车  
 在对司机指挥下行驶过车, 后对云成说不可以。(我就)  
 停车后退), 对云司机要求把车移开让我付, 云出以反  
 对云云云我刚才撞到他的云云云云云云云云, 我云云云  
 以云不相信他所云云云云云, 云云云云云云云云。

I move my vehicle backward

## DECLARATION

I/We declare that the 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.:

## Common Statement

## 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.:

## DRIVING LICENSES & WORK PERMIT

## 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 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.
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	09/10/2018 10:43
Date Of Accident	08/10/2018 19:10
Exact Location Of Accident	20 KRANJI CRESENT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	PC2284D
Insured/Policyholder	
Name Of Registered Owner	SINGAPORE COACH SERVICES PTE LTD
Co Reg No	2012227110H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96204026
Vehicle Particulars	
Manufacturer	GOLDEN DRAGON
Model	XML6103J98-6.7 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	BUS
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	M495163
Cover Note Number	
Driver	
Name of Driver	TEO SOON LIANG
NRIC No	S1596593B
Date Of Birth	22/06/1963
Occupation	OUTDOOR
Date Of Driving Pass	11/05/1995
Driving Experience	23 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83752338
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	NA
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	WET

#### 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?	NO
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)	0

#### 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

ON 08/10/2018 @ 19:10HRS, MY BUS PC2284D WAS STATIONARY AT 20 KRANJI CRESENT TO PUMP PETROL FOR MY BUS WHEN A VEH XB9069Z WANTED TO EXIT & I SIGNALLED TO THE SAID DRIVER THAT HE CANNOT PASS THROUGH DUE TO SPACE CONSTRAIN BUT THE SAID DRIVER IGNORED ME & TRIED TO DRIVE PAST THE SPACE BTW MY BUS & THE WALL & HIT ONTO MY BUS FRONT RH REAR VIEW MIRROR ASSY AS A RESULT.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XB9069Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

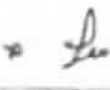
#### IMPORTANT NOTICE

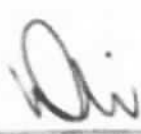
1. Please report accurately the details of the accident to speed up the claims process.
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
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6. 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 lodging 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 making 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 agent(s) (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 (a) 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.

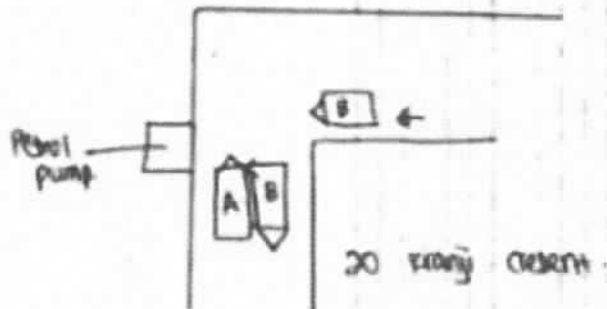
  
Policyholder's Signature  
Date & Time

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

  
Reporting Centre Personnel's Signature  
Name: Winnie Ong  
ID/Ref No: 687060218

# Sketch Plan #2

## SKETCH PLAN




A= PC2084 D  
B= XB9069Z

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On 08/10/2018 @ 19:10hrs, my bus PC2084D was returning @ an empty cistern to pump petrol for my bus when a van XB9069Z wanted to exit & I signalled to the said driver that he cannot pass through due to space restriction but the said driver ignored me & tried to drive past the space b/w my bus & the wall & hit onto my bus from its rear view mirror area as a result.

## DECLARATION

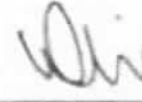
I/We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature

Date & Time:

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

Date & Time:

  
Reporting Centre Personnel's Signature

Name: Nohel Cui  
Vehicle No: CS30621/B



### CONNECT 3

566 Woodlands Road ( Mandai Estate ) Singapore 728697

Tel: (65) 9850-9666 Email: Connect3winnie@gmail.com

R o c : 5 3 3 6 0 0 6 1 L

QT18/PC2284D/TPC-322

MSIG Insurance (Singapore) Pte Ltd

4 Shenton Way

#21-01

SGX Centre 2

Singapore 068807

### QUOTATION

Dear Sir,

Cost of Repair to Vehicle PC2284D

With reference to the above-mentioned, we are pleased to quote as follows:-

No.	DESCRIPTION	QTY	U/PRICE (S\$)	AMOUNT (S\$)
1.	Front RH rear view mirror assy 1845	1	1,350.00	1,350.00
2.	Check wiring	1	20.00	20.00
3.	Labour charges	1	200.00	200.00
4.	Spray painting	1	200.00	200.00
SUB-TOTAL				S\$1,770.00

Thank you.

Yours faithfully,



Winnie Chai

HP: 9850-9666



N42 LKK  
15/10/18 0930  
L/S  
1 DAY

  
17/10/18

**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:

PHOTOS

PARTS: \$1,350  
LESS 10%: \$1,215

LABOUR \$320  
\$1535  
LESS LIS 20% \$1228  
110 TOTAL \$1200 / 1 DAY.

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Oct 2018		12 Oct 2018 16:04 <a href="#">Edit Adj Rpt</a>	<b>S\$1,200.00</b> <a href="#">Edit Estimates</a>	<b>S\$1,200.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured:	DA ENGINEERING PTE LTD, Co. Reg. No.: 201111354M								
Main Claimant:	SINGAPORE COACH SERVICES PTE LTD, Co. Reg. No.: 2012227110H								
Vehicle Reg. No.:	PC2284D	Date of Loss:	08/10/2018 19:00 - :59 [57 Months and 5 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 572738	Policy/Cover Note No.:	29013131MKC (TP, Fire & Theft) Coverage: 08/09/2018 - 07/09/2019						
Vehicle Reg. No. (Insured):	XB9069Z	Policy No. (Claimant):							
		Excess:							
Repairer:	Connect3 (woodlands) (HQ) 566 Woodlands Road, 728697 Woodlands - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by <b>Muhd Ashik B Madi</b> - 6594 2548]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by <b>Muhammad Nazril Bin Abdullah</b> ] ... [Final Rpt due 11/11/2018]								
Adj Asg. Remarks:	Survey appt to 15/10/18(Mon), 9am. Owner waiting. (Owner request earliest slot). on WP. Please contact us ASAP if you cannot attend this assignment. Oi not reported, Contact : Winnie Chai at HP 9850 9666								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

**\*PC2284D (572738)**  
**[XB9069Z]**  
**TP**  
**SINGAPORE COACH SERVICES PTE LTD**  
**Oct 8 2018 7:00PM**  
**[DA ENGINEERING PTE LTD]**  
**Connect3 (woodlands)**

Upload Documents		Upload Photos	Compose New Letter	View <span style="border: 1px solid black; padding: 0 5px;">View in Browser</span>	
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Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On			Thumbnail	Print
1	17/10/18 13:15	<b>MSIG Insurance (Singapore) Pte. Ltd. (HQ)</b> <b>Accident Statement</b> <small>From: SC - Reg. No: XB9069Z, Claimant: DA ENGINEERING PTE LTD</small>		Load HTM	
No	Finalized On			Thumbnail	Print
1	17/10/18 16:15	<b>LKK Auto Consultants Pte Ltd (HQ)</b> <b>Adjuster Immediate Advice</b>		Load HTM	

Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder			Thumbnail	Print
1	16/10/18 14:43	<b>LKK Auto Consultants Pte Ltd (HQ)</b> <b>General View</b>		Load JPG	<input checked="" type="checkbox"/>
2	16/10/18 14:43	<b>General View</b>		Load JPG	<input checked="" type="checkbox"/>
3	16/10/18 14:43	<b>General View</b>		Load JPG	<input checked="" type="checkbox"/>
4	16/10/18 14:43	<b>General View</b>		Load JPG	<input checked="" type="checkbox"/>
5	16/10/18 14:43	<b>General View</b>		Load JPG	<input checked="" type="checkbox"/>
6	16/10/18 14:43	<b>General View</b>		Load JPG	<input checked="" type="checkbox"/>

Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On			Thumbnail	Print
1	10/10/18 14:19	<b>MSIG Insurance (Singapore) Pte. Ltd. (HQ)</b> <b>PC2284D E-FILE REPORT</b>		Load PDF	
2	10/10/18 14:19	<b>ESTIMATE</b>		Load JPG	<input checked="" type="checkbox"/>

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>
<b>Show Remarks To:</b> <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: CS/MSG18018644/NCD3E2

Date: 12/03/2019

## REFERENCE

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

Policy No: 29013131MKC

Claimant Vehicle No : PC2284D

Insured Vehicle No : XB9069Z

Date of Loss: 08/10/2018

Nature of Claim: TP

Claim No: 572738

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: PC2284D

Make &amp; Model: GOLDEN DRAGON XML6103J98, 6.7 D (M)

Engine No: ISB67E530022051177

Reg. Date: 03/01/2014 (Man. Year: 2013)

Chassis No: LL3BGCDH1DA003603

Colour: White

Odometer: 276410 km

Engine Capacity: 6693 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: 11 R22.5

Rear Tyre Size: 11 R22.5

Front Left Side: Double Coin 7 mm

Rear Left Side: Firemax 7 mm

Front Right Side: Double Coin 7 mm

Rear Right Side: Firemax 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,350.00	1,215.00	135.00	10.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	420.00	320.00	100.00	23.81
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>1,770.00</b>	<b>1,535.00</b>	<b>235.00</b>	<b>13.28</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>1,200.00</b>		
<b>(S\$)</b>	1,770.00	1,200.00	570.00	32.20
<b>+ GST 7.00/7.00% (S\$)</b>	123.90	84.00	39.90	32.20
<b>Nett Amount (S\$)</b>	<b>1,893.90</b>	<b>1,284.00</b>	<b>609.90</b>	<b>32.20</b>

## INSPECTION

Date of Assignment: 12/10/2018

Date Inspected: 15/10/2018 Inspected At:

Connect3 (woodlands) (HQ)  
566 Woodlands Road  
Singapore 728697

Estimated Period of Repair: 1.0 days

**Adjuster:** Muhammad Nazril Bin Abdullah

**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.*

THE VEHICLE HAS NOT SEND IN FOR REPAIRS.

(REPAIR COST NOT CONCLUDE)

## REPAIR DETAILS

Reference		
Part Source:		(Last Synchronised: 12 Mar 2019)
Parts:	N/A	GOLDEN DRAGON XML6103J98 6.7 D (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for PC2284D)		
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

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT RH REAR VIEW MIRROR ASSY	Cracked	1,350.00 F	*1,350.00 FL
				<b>Sub Total (S\$)</b>	<b>1,350.00</b>	<b>1,350.00</b>
				<b>- List Item Discount on L Items 0.00/10.00% (S\$)</b>	<b>0.00</b>	<b>135.00</b>
				<b>Total Parts (S\$)</b>	<b>1,350.00</b>	<b>1,215.00</b>

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	CHECK WIRING	New	20.00	20.00
2	LABOUR CHARGES	New	200.00	150.00
3	SPRAY PAINTING	New	200.00	150.00
Gross Labour Cost (\$\$)			<b>420.00</b>	<b>320.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >