

22/03/2002

ASS. REC. BY:

REF:

CS/CTE18018778/ R15d34

Special Instruction:

Surveyor:

Rasul

ASSIGNMENT (Office)

From (Person):

Menden chong soon sen

of

CTE

Date/Time:

16/10/18 @ 2.53pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

YP 6843P

Insured:

YK 9231L

at Workshop m/s

Sin Sheng Engineering

Tel:

68 63 9595

of

Steeh Park Crescent

Policy No:

DMCVSN 3025181800

Claim No:

SNM18D04912C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

15/10/2018

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

3:18pm @ 16/10/18

Person Contacted:

Susan

Vehicle IN

OUT

Date/Time	Action/Instruction (✓) Estimate
	YP 6843P - X
	YK 9231L - X
17/10/18-	VNI yet
	Pending Rile from Rasul (already survey)

(08/11/13)

Surveyor: Ram

REF:

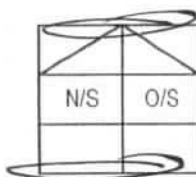
1196N

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD ☒ TP ☐ WS ☐ TP RES ☐ OD RES ☐ EVA ☐ INV ☐ MV ☐
 To Inspect Vehicle No: 4P 6843P
 at Workshop m/s SIN SENG
 of _____
 Insured: CTI
 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.



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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: 4P 6843P Yr Regn: 2017 / July
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: MITSUBISHI CANTEA FEB21 c.c. 2998
 Colour: BLACK A/C: Insured / Std / NI / NA
 Sp. Reading: 69227 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: FEB21EA 20832
 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: 185R15C
 R: -

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or ANDTONE

Front _____ Rear _____
 R/Bal. 7 mm R/Bal. 7/7 mm
 L/Bal. 7 mm L/Bal. 7/7 mm
 D.O.A. 15/10/18 D.O.I. 23/10/18
 Survey held at SIN SENG
 Des. of Damages: Front / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time	Action / Instruction
<u>24/12/18</u>	<u>Confirmed L/S \$ 7,900/- @ 9 days with Regn 1</u> <u>(\$ 11,017.19 Red - 58%.)</u>

RECEIVED 20 DEC 2018

Date/Time, File Pass to?

1)

28/12/18
Typist

Date/Time, File Return to?

2)

☐ : Preli. Report
☒ : Final Report

Days Of Repair: 9Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Invs (\$)
☐ : Weekend (\$)

Survey Fee:

Transportation:

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I.: (\$ 7,900/- L/S)220220

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	16 Oct 2018		16 Oct 2018 14:53 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	FATT CHAN IRON CANVAS TENT CONSTRUCTION , Co. Reg. No.: 52818412A		
Main Claimant:	GOLDBELL LEASING PTE LTD , Co. Reg. No.: 199001196N		
Vehicle Reg. No.:	YP6843P	Date of Loss:	15/10/2018 10:00 - :59
Claim Type:	TP / SNM18D04912C02	Policy/Cover Note No.:	DMCVSN3025181800 (TP, Fire & Theft)
Vehicle Reg. No. (Insured):	YK9231L	Policy No. (Claimant):	29004183
		Excess:	S\$0.00
Repairer:	Sin Sheng Engineering Services (HQ) 3 Tech Park Crescent, Tuas Tech Park, 638129 Tuas - Tel: 68639595		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]		
Claimant's Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 25/10/2018]		
Driver/Custodian (Insured):	TAY YONG KWAN(ZHENG RONGGUANG) (34 / Male), NRIC: S8417739C, Tel: +6592976875		
Adj Asg. Remarks:	NO EST, ASSIGN CHUA WEI JIE AS 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.									

Shirley Hiew (LKK Auto)

From: Rasul (LKKAuto) <Rasul@lkkauto.com>
Sent: Monday, 24 December 2018 6:08 PM
To: Shirley Hiew (LKK Auto)
Subject: FW: PRI of YP6843P (CTI REF: SNM18D04912C02)

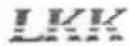
Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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



Auto
Consultants
Pte Ltd

Save the Earth. Print only when necessary.

From: sinsheng engineering services [mailto:sinsheng1981@gmail.com]
Sent: Monday, 24 December, 2018 3:48 PM
To: Rasul (LKKAuto)
Subject: Re: PRI of YP6843P (CTI REF: SNM18D04912C02)

Hi Mr Rasul,

We are agreed.

*Thank You
Regards*

*Susan
Sin Sheng Engineering Services
3 Tech Park Crescent
Tuas Tech Park
Singapore 638129
Tel: 6863 9595
Fax: 6863 6477*

On Mon, 24 Dec 2018 at 15:29, Rasul (LKKAuto) <Rasul@lkkauto.com> wrote:

Hi Susan,

Finalise amount is \$ 7,900.00 / 9 days lump sum

Kindly confirm

Best Regards,

Rasul | Assessor

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Rasul@lkkauto.com | fax: 6841-4315

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



AUTO
CONSULTANTS
PTE LTD

Save the Earth. Print only when necessary.

From: sinsheng engineerservices [mailto:sinsheng1981@gmail.com]

Sent: Friday, 21 December, 2018 2:09 PM

To: Rasul (LKKAuto); SUR

Subject: Re: PRI of YP6843P (CTI REF: SNM18D04912C02)

Hi Mr Rasul,

Please have your finalized in URGENTLY.

Thank You

Regards

Susan

Sin Sheng Engineering Services

3 Tech Park Crescent

Tuas Tech Park

Singapore 638129

Tel: 6863 9595

Fax: 6863 6477

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 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	30/01/2012 13:25
Date Of Accident	27/01/2012 19:30
Exact Location Of Accident	PASIR RIS DRIVE 8

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM2277T
Insured/Policyholder	
Name Of Registered Owner	NG CHOO PHENG
NRIC No	S1623760D

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALLION 1.5 A
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	Private Car

Insurance Company

Name of Insurance Company	Chartis Singapore Insurance Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100204422-01000
Cover Note Number	

Driver

Name of Driver	TAN SING BENG
NRIC No	S1654444B
Date Of Birth	10/11/1964
Occupation	Indoor
Date Of Driving Pass	20/07/1985
Driving Experience	26 Years And 6 Months
Gender	Male
Mobile Number	(Local) +65-83284444
Fax Number	
Contact Number	Others-82823445
Email Address	
Address	BLK 333 HOUGANG AVE 5 #01-240
Postcode	580333
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Spouse

Vehicle Registration Number of Driver's Own Vehicle (if applicable)

Insurance Company of Driver's Own Vehicle (if applicable)

General Information of the Accident

Type Of Accident	Collision- Head to Rear (Insured Hit TP)
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes

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

I WAS DRIVING ALONG PASIR RIS DRIVE 8. SEEING THAT THE ROAD WAS CLEAR, I TURNED INTO PASIR RIS DRIVE 1. SUDDENLY THE CAR IN FRONT STOPPED AND I HIT THE BACK OF THE LEFT BUMPER. WE AGREED THAT I WILL REPAIR HIS DAMAGES AT MY COST.

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDV3881R
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Name of Driver	MR CHEONG
NRIC/Passport Number	
Contact Number	93858016
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

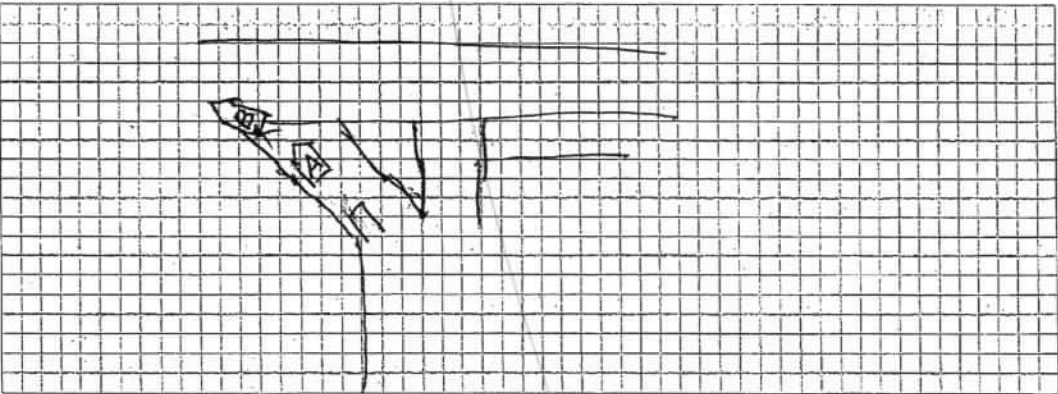
Name	
Phone Number	
Email Address	

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 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.

Sketch Plan



Describe Circumstances of the Accident:

I was driving along Pasir Ris Dr 8. Seeing that the road was clear, I turned into Pasir Ris Dr 1. Suddenly the car in front stopped and I hit the back of the left bumper. We agreed that I will repair his damages at my cost.

Declaration

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

Policyholder's Signature / Date & Time: phay

Driver's Signature (if driver is not the policyholder) / Date & Time: [Signature]

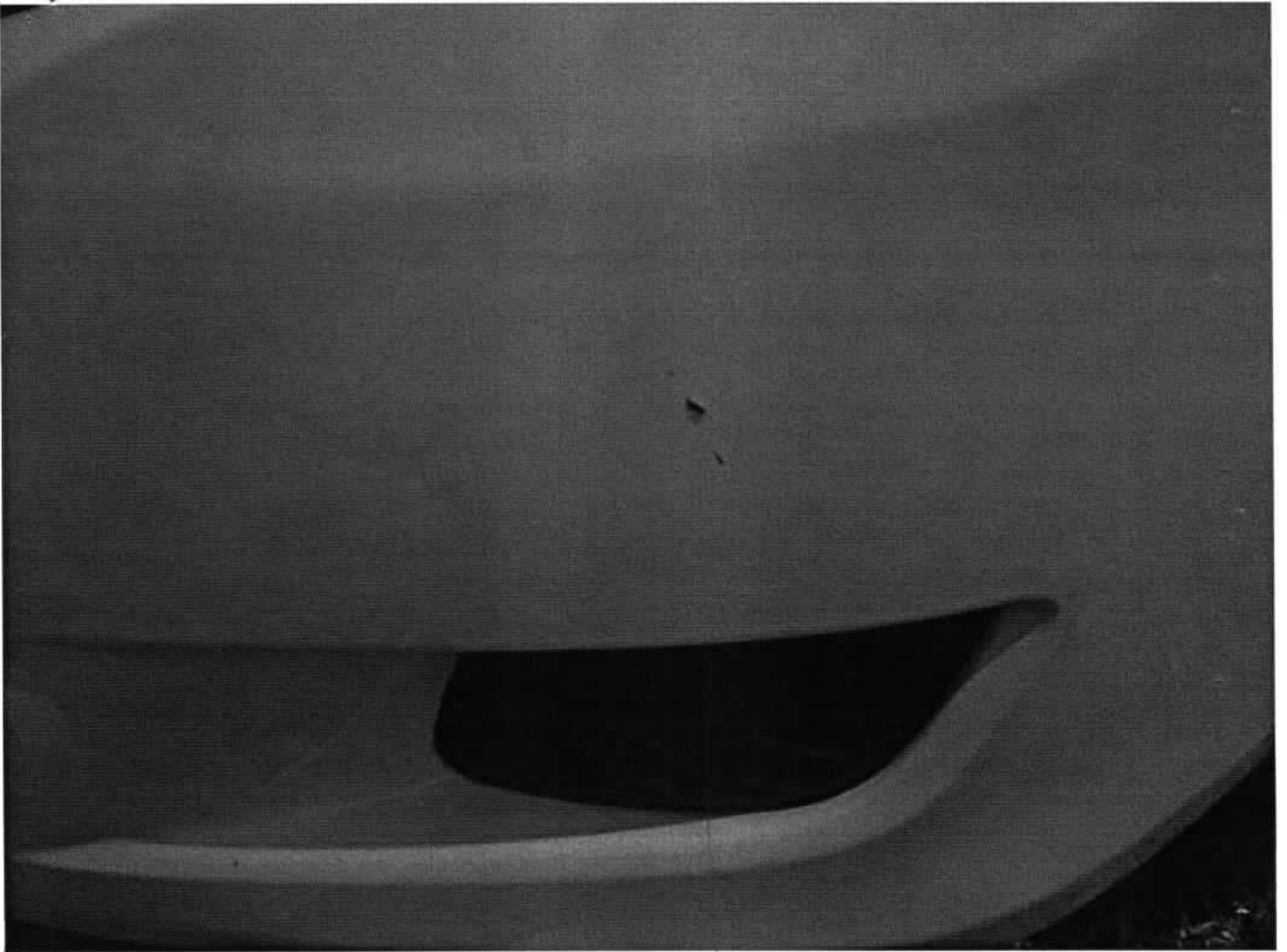
Witnessed by Reporting Centre Personnel: [Signature]



Accident Photo



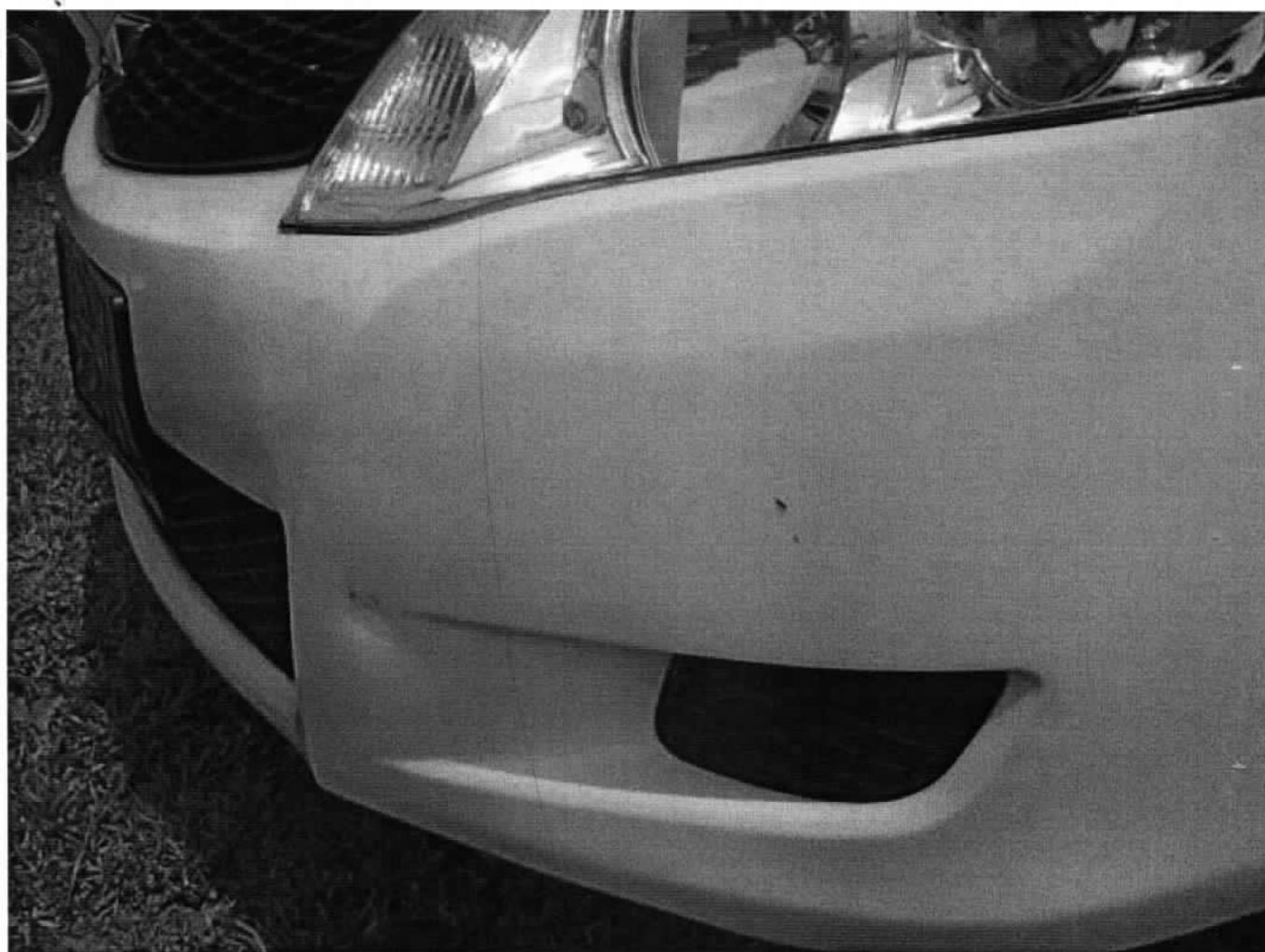
Accident Photo



Accident Photo



Accident Photo



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	15/10/2018 16:56
Date Of Accident	15/10/2018 10:50
Exact Location Of Accident	ALONG CTE TOWARDS PIE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP6843P
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL LEASING PTE LTD
Co Reg No	199001196N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64942833

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER-3.0 D FEB21ER3SDEB (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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	29004183
Cover Note Number	

Driver

Name of Driver	ZHENG CHENGWEI
Passport No/FIN	G3332954M
Date Of Birth	16/09/1993
Occupation	OUTDOOR
Date Of Driving Pass	02/10/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91411155
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	18 TUAS AVE 10 LEVEL 6
Postcode	639142
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LESSEE
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?	NO
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) 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

ON 15/10/18 AT ABOUT 1051HRS, I WAS TRAVELLING ON THE LEFT LANE ALONG CTE TOWARDS PIE. TRAFFIC WAS HEAVY AND SLOW MOVING. I STOPPED MY VEHICLE AFTER I SAW THAT THE VEHICLES INFRONT HAD STOPPED. SUDDENLY I FELT AN IMPACT FROM THE REAR, CAUSING MY VEHICLE TO SURGE FORWARD AND KNOCKED INTO THE VEHICLE INFRONT. I ALIGHTED FROM MY VEHICLE TO CHECK. I REALIZED THAT IT WAS A CHAIN COLLISION INCLUDING A TOTAL OF 4 VEHICLES. MY VEHICLE SUSTAINED DAMAGES AT THE FRONT AND BACK PORTION.

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	YK9231L
Vehicle Make/Model/Colour	ISUZU / BLUE
Details Of Properties	VEH B
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TAY YONG KWAN
NRIC/Passport Number	S8417739C
Contact Number	92976875
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT PORTION
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBF7466M
Vehicle Make/Model/Colour	TOYOTA / HIACE / RED & WHITE
Details Of Properties	VEH C
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MOHAMMED ALI BIN KAMAREZAMAN
NRIC/Passport Number	S8419510C
Contact Number	63478138
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2
Passenger 1	NAME: : GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	VEH D
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)	1

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 **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:

郑成华

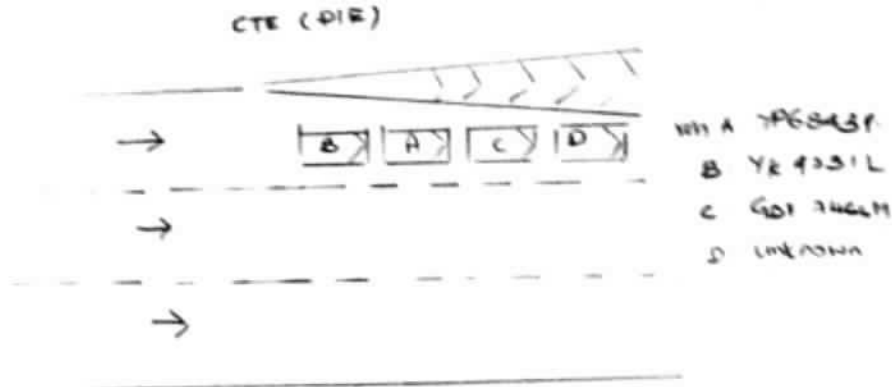
Driver's Signature
(If driver is not the policyholder)
Date & Time:

79 68438



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

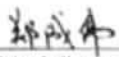
On 15/10/18 at about 10:51 hrs, I was travelling on the left lane along CTE towards PIE. Traffic was heavy and slow moving. I stopped my vehicle when I saw that the vehicles in front had stopped suddenly. I felt an impact from the rear, causing my vehicle to surge forward and knocked into the vehicle in front. I alighted from my vehicle to check. I realized that it was a rear-end collision involving a total of 4 vehicles. My vehicle sustained damages at the front & back position.

A, C 和 D 车已经停住。B 车撞了 A; 倒至 A 车内的 C 车。C 车倒至 B 车前撞到了 D 车。

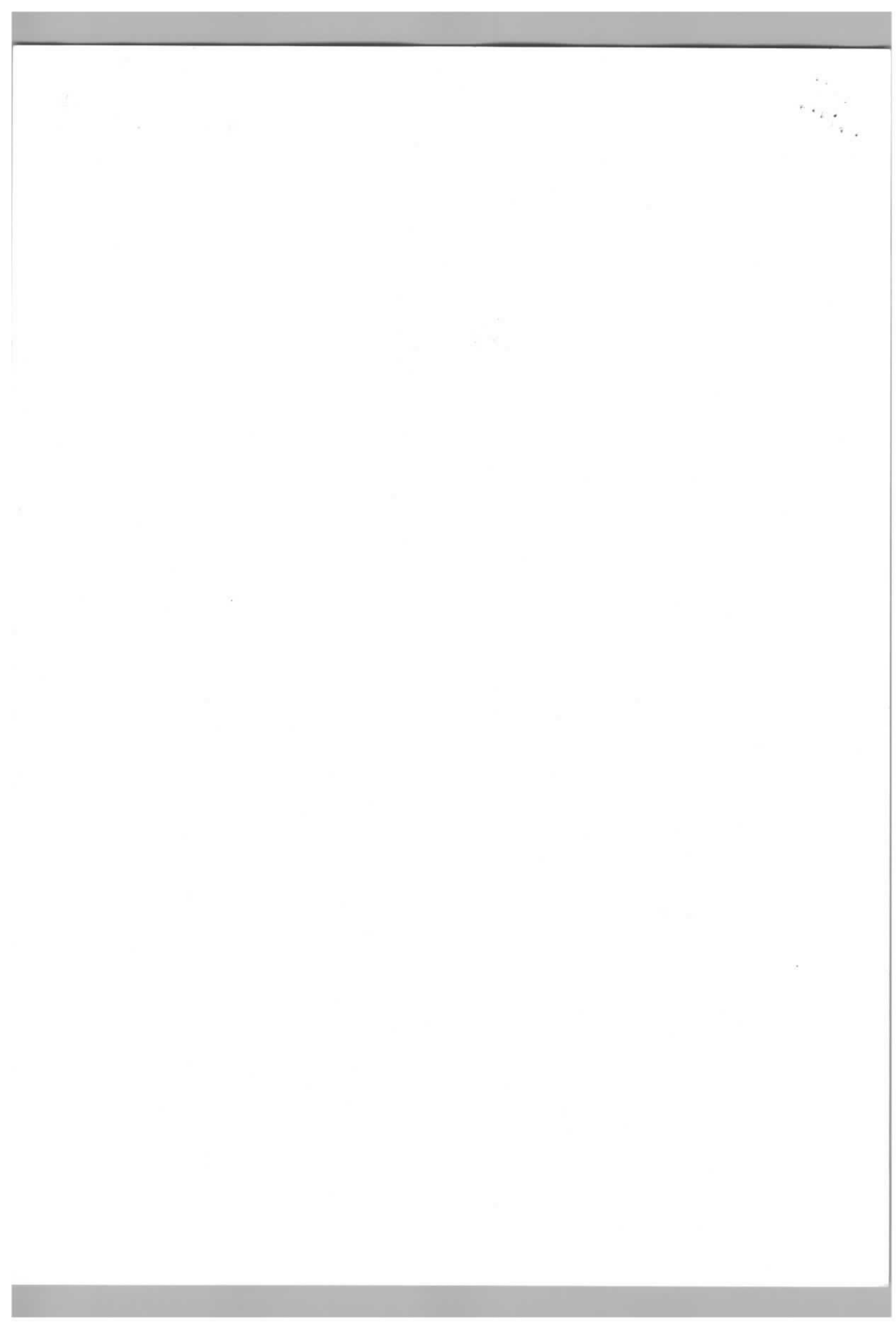
DECLARATION

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/PIN No.:



SIN SHENG ENGINEERING SERVICES

3 TECH PARK CRESCENT

SINGAPORE 638129

Tel No. : 6863-9595 Fax No. : 6863-6477

E-Mail : sinsheng1981@gmail.com

Buss. Reg. No. : 312029/00D

GOLDBELL LEASING PTE LTD

59 SENOKO ROAD

SINGAPORE 758123

Attention : Motor Claim Department

Contact : 6861 0007 Fax No. : 6753 7780

Estimate : ES002638

Date : 20/10/2018

Vehicle Num. : YP6843P

Make/Model : MITSUBISHI FEB 21

Chassis/Eng# : FEB21EA20832

Accident Date : 15/10/2018

Claim No. :

Reference : YK9231L

Policy No. : 29004183

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

LIST ITEMS :				
1.	1	FRONT BUMPER <i>PA</i>		353.71 ✓
2.	2	BUMPER BRACKET <i>PA</i>	213.13	426.26 ✓
3.	2	BUMPER CORNER <i>DE</i>	353.71	707.42 ✓
4.	1	FRONT GRILLE <i>CR</i>		1,144.37 ✓
5.	1	FRONT PANEL <i>BT</i>		1,161.73 ✓
6.	2	HEADLAMP <i>CR</i>	508.95 X	1,017.90 ✓
7.	2	SIGNAL LAMP <i>CR</i> <i>RH/LH-?CR</i>	270.39 X	540.78 ✓
8.	1	FUSO EMBLEM <i>new</i>		154.96 ✓
9.	1	'MITSUBISHI' EMBLEM <i>new</i>		85.60 ✓
10.	1	WEATHERSTRIP, WINDSHIELD <i>X</i> <i>nn</i>		468.69 X
11.	1	HEATER A/C <i>X</i> <i>nn</i>		2,578.34 X
12.	1	BLOWER ASSY <i>X</i> <i>CR</i>		914.42 ✓
13.	1	CORNER PANEL, RHS <i>X</i>		532.44 X
14.	1	CABIN BRACKET, LHS <i>X</i> <i>nn</i>		815.20 X
15.	1	CABIN BRACKET, RHS <i>X</i> <i>nn</i> <i>photo</i>		795.50 ✓
16.	1	CABIN BRACKET, CUSHION <i>X</i> <i>new</i> <i>photo</i>		245.60 ✓

List TotalS\$:

25.00% Discount S\$:

7548.25

25%

5661.18

11,942.92

2,985.73

8,957.19

NETT ITEMS :				
1.	2	REAR DOOR ASSY <i>nd</i> <i>dent / Local repair</i>	1,800.00	3,600.00 <i>L/R</i>

CONTINUE / ...

SIN SHENG ENGINEERING SERVICES

3 TECH PARK CRESCENT

SINGAPORE 638129

Tel No. : 6863-9595 Fax No. : 6863-6477

E-Mail : sinsheng1981@gmail.com

Buss. Reg. No. : 312029/00D

GOLDBELL LEASING PTE LTD

59 SENOKO ROAD

SINGAPORE 758123

Attention : Motor Claim Department

Contact : 6861 0007 Fax No. : 6753 7780

Estimate : ES002638

Date : 20/10/2018

Vehicle Num. : YP6843P

Make/Model : MITSUBISHI FEB 21

Chassis/Eng# : FEB21EA20832

Accident Date : 15/10/2018

Claim No. :

Reference : YK9231L

Policy No. : 29004183

S/N	Quantity	Particular	Unit Price	Amount S\$
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2.	2	RUBBER STOPPER <i>cut</i>	180.00	360.00 ✓
3.	1	REAR LOCK <i>X</i> <i>nn</i>		350.00 X
4.	1	REAR BUMPER <i>BA</i>		580.00 ✓
5.	1	60km/h Sticker <i>ner</i>		20.00 ✓
6.	2	NUMBER PLATE <i>TA</i>	20.00	40.00 ✓
7.	1	REAR LOGO <i>ner</i>		800.00 <i>s/n</i>
8.	1	REAR STAINLESS FRAME <i>repair</i>		950.00 X
Nett Total S\$:				6,700.00
10.00% Discount S\$:				670.00
				6,030.00

1600
102
1440
s/n - 500

180.00
360.00
350.00 X
580.00
20.00
40.00
800.00 s/n
950.00 X
6,700.00
670.00
6,030.00

LABOUR :

TO REMOVE/REFIT FRONT W/SCREEN TO FACILITATE REPAIRS

X 150.00 X

TO REMOVE/REFIT DASHBOARD TO FACILITATE REPAIRS *nophoto*

X (photo) 150 280.00 X

TO DISMANTLE/REPLACE AIR-CON HEATER AND BLOWER
TO TOP-UP GAS

? 120 150.00

TO PANEL BEAT/REPAIR FR/RR BODY

800 (100)

TO DISMANTLE/REPLACE ABOVEMENTIONED PARTS

800 1,800.00

SPRAY PAINTING

900 1,200.00

CONTINUE / ...

SIN SHENG ENGINEERING SERVICES

3 TECH PARK CRESCENT

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Reference : YK9231L

Policy No. : 29004183

S/N	Quantity	Particular	Unit Price	Amount S\$
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TO APLY NEW LOGO
TO CHECK WIRING

LOSS OF USE : 12 DAYS @ \$ 120/DAY

Labour Total S\$:

Resue 16/11/18
Hp 900/10068
120 200.00
60 150.00
2300
3,930.00

9 days

4s

23/10/18 @ 1140

Reay after repair

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:

SIN SHENG ENGINEERING SERVICES

5661.18

1440.00

500.00

2300.00

9901.18

20%

7920.94

Total S\$: 18,917.19

4s - 7,900

9 days

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	16 Oct 2018		16 Oct 2018 14:53 Edit Adj Rpt	S\$7,900.00 Edit Estimates	S\$7,900.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	FATT CHAN IRON CANVAS TENT CONSTRUCTION , Co. Reg. No.: 52818412A								
Main Claimant:	GOLDBELL LEASING PTE LTD , Co. Reg. No.: 199001196N								
Vehicle Reg. No.:	YP6843P	Date of Loss:	15/10/2018 10:00 - :59 [14 Months and 17 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM18D04912C02	Policy/Cover Note No.:	DMCVSN3025181800 (TP, Fire & Theft)						
Vehicle Reg. No. (Insured):	YK9231L	Policy No. (Claimant):	29004183						
		Excess:	S\$0.00						
Repairer:	Sin Sheng Engineering Services (HQ) 3 Tech Park Crescent, Tuas Tech Park, 638129 Tuas - Tel: 68639595								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]								
Claimant's Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD RASUL] ... [Final Rpt due 25/10/2018]								
Driver/Custodian (Insured):	TAY YONG KWAN(ZHENG RONGGUANG) (34 / Male), NRIC: S8417739C, Tel: +6592976875								
Adj Asg. Remarks:	NO EST, ASSIGN CHUA WEI JIE AS 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

***YP6843P (SNM18D04912C02)**
[YK9231L]



























TP


















































GOLDBELL LEASING PTE LTD

















































Oct 15 2018 10:00AM

[FATT CHAN IRON CANVAS TENT CONSTRUCTION]

Sin Sheng Engineering Services

Upload Documents			Upload Photos		Compose New Letter		View		View in Browser	
Assessment Reports							1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Sin Sheng Engineering Services (HQ)		Thumbnail	Print					
1	15/10/18 22:50	Accident Statement			Load HTM					
Photos/Images							3 per page		<input checked="" type="checkbox"/>	
No	Finalized On	Sin Sheng Engineering Services (HQ)		Thumbnail	Print					
1	15/10/18 22:36	Accident Photo [Linked Accident Report Documents]			Load JPG		<input checked="" type="checkbox"/>			
2	15/10/18 22:37	Accident Photo [Linked Accident Report Documents]			Load JPG		<input checked="" type="checkbox"/>			
3	15/10/18 22:37	Accident Photo [Linked Accident Report Documents]			Load JPG		<input checked="" type="checkbox"/>			
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19	15/10/18 22:50	Accident Photo [Linked Accident Report Documents]			Load JPG		<input checked="" type="checkbox"/>			
20	15/10/18 22:50	Accident Photo [Linked Accident Report Documents]			Load JPG		<input checked="" type="checkbox"/>			
21	15/10/18 22:50	Driving License [Linked Accident Report Documents]			Load JPG		<input checked="" type="checkbox"/>			
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print					
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2	28/12/18 13:13	Chassis Number			Load JPG		<input checked="" type="checkbox"/>			
3	28/12/18 13:13	General View			Load JPG		<input checked="" type="checkbox"/>			
4	28/12/18 13:13	General View			Load JPG		<input checked="" type="checkbox"/>			
5	28/12/18 13:13	General View			Load JPG					

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
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6	28/12/18 13:13	General View	 Load JPG	<input checked="" type="checkbox"/>
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Assessment Reports			1 per page	<input checked="" type="checkbox"/>
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Documentation			1 per page	<input checked="" type="checkbox"/>

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Sheng Engineering Services (HQ)		Thumbnail	Print
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	16/10/18 14:52	PRS		Load PDF	
2	16/10/18 14:52	TP GIA		Load PDF	
3	16/10/18 14:53	OI GIA		Load PDF	
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1	15/10/18 22:32	Sketch Plan [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>
2	15/10/18 22:32	Sketch Plan #2 [Linked Accident Report Documents]		Load JPG	<input checked="" type="checkbox"/>

Linked Accident Report Documents

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Sheng Engineering Services (HQ)		Thumbnail	Print
1	15/10/18 22:50	Accident Statement		Load HTM	
Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Sheng Engineering Services (HQ)		Thumbnail	Print
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20	15/10/18 22:50	Accident Photo		Load JPG	<input checked="" type="checkbox"/>
21	15/10/18 22:50	Driving License		Load JPG	<input checked="" type="checkbox"/>
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sin Sheng Engineering Services (HQ)		Thumbnail	Print
1	15/10/18 22:32	Sketch Plan		Load JPG	<input checked="" type="checkbox"/>
2	15/10/18 22:32	Sketch Plan #2		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)

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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: CS/CT118018778/R1SD3E2

Date: 07/01/2019

REFERENCE

Handling Insurer: China Taiping Insurance
(Singapore) Pte. Ltd.

Policy No: DMCVSN3025181800

Claimant Vehicle
No: YP6843PInsured Vehicle
No: YK9231L

Date of Loss: 15/10/2018

Nature of Claim: TP

Claim
No: SNM18D04912C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: YP6843P

Make & Model: MITSUBISHI CANTER, 3.0 D FEB21ER3SDEB (M)

Engine No: 4P10C24342

Reg. Date: 28/07/2017 (Man. Year: 2016)

Chassis No: FEB21EA20832

Colour: Black

Odometer: 69227 km

Engine Capacity: 2998 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: 185 R15C

Rear Tyre Size: 185 R15C (D)

Front Left Side: Austone 7 mm

Rear Left Side: Austone 7/7 mm

Front Right Side: Austone 7 mm

Rear Right Side: Austone 7/7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	14,987.19	7,661.19	7,326.00	48.88
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,930.00	2,300.00	1,630.00	41.48
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	18,917.19	9,961.19	8,956.00	47.34
Approved Total (Overridden) (S\$)		7,900.00		
(S\$)	18,917.19	7,900.00	11,017.19	58.24
+ GST 7.00/7.00% (S\$)	1,324.20	553.00	771.20	58.24
Nett Amount (S\$)	20,241.39	8,453.00	11,788.39	58.24

INSPECTION

Date of Assignment: 16/10/2018

Date Inspected: 23/10/2018 Inspected At:

Sin Sheng Engineering Services (HQ)
3 Tech Park Crescent, Tuas Tech Park
Singapore 638129

Estimated Period of Repair: 9.0 days

Adjuster: MOHD RASUL**Manager:** Hiew May Fung

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.

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 07 Jan 2019)	
Parts:	N/A	MITSUBISHI CANTER 3.0 D FEB21ER3SDEB (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for YP6843P)	
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 BUMPER	Bent	353.71 FL	*353.71 FL
2	2		*BUMPER BRACKET	Bent	426.26 FL	*426.26 FL
3	2		*BUMPER CORNER	Deformed	707.42 FL	*707.42 FL
4	1		*FRONT GRILLE	Cracked	1,144.37 FL	*1,144.37 FL
5	1		*FRONT PANEL	Bent	1,161.73 FL	*1,161.73 FL
6	2		*HEADLAMP	Cracked	1,017.90 FL	*1,017.90 FL
7	2		*SIGNAL LAMP	Cracked	540.78 FL	*540.78 FL
8	1		*FUSO EMBLEM	Necessary	154.96 FL	*154.96 FL
9	1		*MITSUBISHI EMBLEM	Necessary	85.60 FL	*85.60 FL
10	1		*WEATHERSTRIP WINDSHIELD	Not Necessary	468.69 FL	*- FL
11	1		*HEATER A/C	Not Necessary	2,578.34 FL	*- FL
12	1		*BLOWER ASSY	Cracked	914.42 FL	*914.42 FL
13	1		*CORNER PANEL, RHS	Not Necessary	532.44 FL	*- FL
14	1		*CABIN BRACKET, LHS	Not Necessary	815.20 FL	*- FL
15	1		*CABIN BRACKET, RHS	Cut	795.50 FL	*795.50 FL
16	1		*CABIN BRACKET, CUSHION	Necessary	245.60 FL	*245.60 FL
17	2		*REAR DOOR ASSY (LOCAL REPAIR)	Dented	3,240.00 FS	*600.00 FS
18	2		*RUBBER STOPPER	Cut	360.00 FN	*360.00 FN
19	1		*REAR LOCK	Not Necessary	350.00 FN	*- FN
20	1		*REAR BUMPER	Bent	580.00 FN	*580.00 FN
21	1		*60KM/H STICKER	Necessary	20.00 FN	*20.00 FN
22	2		*NUMBER PLATE	Bent	40.00 FN	*40.00 FN
23	1		*REAR LOGO	Necessary	720.00 FS	*500.00 FS
24	1		*REAR STAINLESS FRAME	Repair	950.00 FN	*- FN

F=Franchise part. S=SpcNett. L=ListItemDisc. N=NettItemDisc.

Sub Total (S\$)	18,202.92	9,648.25
- List Item Discount on L Items 25.00/25.00% (S\$)	2,985.73	1,887.06
- Nett Item Discount on N Items 10.00/10.00% (S\$)	230.00	100.00
Total Parts (S\$)	14,987.19	7,661.19

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Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO REMOVE / REFIT FRONT W/SCREEN TO FACILITATE REPAIRS	New	150.00	0.00
2	TO REMOVE / REFIT DASHBOARD TO FACILITATE REPAIRS	New	280.00	0.00
3	TO DISMANTLE / REPLACE AIR-CON HEATER AND BLOWER TO TOP-UP GAS	New	150.00	120.00
4	TO PANEL BEAT / REPAIR FR/RR BODY. TO DISMANTLE / REPLACE ABOVEMENTIONED PARTS	New	1,800.00	1,100.00
5	SPRAY PAINTING	New	1,200.00	900.00
6	TO APPLY NEW LOGO	New	200.00	120.00
7	TO CHECK WIRING	New	150.00	60.00
Gross Labour Cost (\$\$)			3,930.00	2,300.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >