

ASS. REC. BY:

REF: CS/CTL18018928/RHbnz

Special Instruction:

SUPERVISOR

ASSIGNMENT (Office)

From (Person): Terence Jay of CTL Date/Time: 17/10/2018 4:51pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: a Ym 8321G Insured: SDH 3376Gat Workshop m/s: mk vehicle Tel: _____of 48 Toh Guan Rd East #04-124Policy No: DMPC SN1726411801 Claim No: SNM18D04829 C02

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 06/10/2018
(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp' H.O.D. Endorsement: _____

Date/Time: 17-10-2018 Person Contacted: Tessie Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	Ym 8321 G - NA / CTL16034907 / 73 DUA: 30/12/2016
	SDH 3376G - NSA / INC14009731 / SH DUA: 26/05/2014

09/11/17

REF:

9177M

Car XPR: 2023/APR

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: 4M 83219

at Workshop m/s MK VEHICLE

of Ag, 104 Sun Road #104-124

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.

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

Date: Person Contacted:

Vehicle: IN / OUT

Veh No: 4M 83219 Yr Regn: 2008 / APR

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

Truck / Trailer or

Make: MITSUBISHI FE83DESRDA c.c. 2977

Colour: WHITE A/C: Insured / Std / NI / NA

Sp. Reading: 321396 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: FE83BEA10555

Gen. Cond: Good / ~~Fair~~ / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 7.00 76

R: 185 R14C

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

TOYO / YOKO or

Front

Rear

R/Bal. 7 mm

R/Bal. 7/7 mm

L/Bal. 7 mm

L/Bal. 7/7 mm

D.O.A. 06/10/18

D.O.I. 17/10/18

Survey held at MK VEHICLE

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

O/S FR

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

Date / Time Action / Instruction

17/10/18 @ 1110 Insured with Tessie MK Vehicle at amount of \$571.50 / 3 days p/p. amount agreed (Red: 121.50 : 17.50%)

RECEIVED 22 OCT 2018

22/10/2018

Date/Time, File Pass to?

☐ : Preli. Report

1) 22/10 Typist

☒ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: —

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

220

Report Format: TP

Lump Sum / I.B.I.: (\$) 571.50

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

...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		17 Oct 2018 16:31 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	SOH YEN PENG DAPHNE, ID: S7619862D								
Main Claimant:	MK VEHICLE RENTAL PTE LTD, Co. Reg. No.: 0								
Vehicle Reg. No.:	YM8321G	Date of Loss:	06/10/2018 11:00 - :59						
Claim Type:	TP / SNM18D04829C02	Policy/Cover Note No.:	DMPCSN1726411801 (Comprehensive)						
Vehicle Reg. No. (Insured):	SDH3376G	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	Mk Vehicle Engineering Pte Ltd (HQ) 48 TOH GUAN ROAD EAST, #04-124/125 ENTERPRISE HUB, 608586 Jurong East - Tel:								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Irene Tay Hui Ping - 638986192]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 26/10/2018]								
Adj Asg. Remarks:	NO EST, ASSIGN RASUL 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.									

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	11/10/2018 15:14
Date Of Accident	06/10/2018 11:10
Exact Location Of Accident	GREENWICH DRIVE (KPE JUNCTION -BARTLEY RD EXIT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YM8321G
Insured/Policyholder	
Name Of Registered Owner	MK VEHICLE RENTAL PTE LTD
Co Reg No	0 200819177M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87427051
Alternative Phone No	OFFICE-87427051

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FE83PE6SRDEB-3.9 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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V02102/V CZ/R05
Cover Note Number	

Driver

Name of Driver	ABU HUZAFH BIN IMAN
NRIC No	S9015252A
Date Of Birth	01/05/1990
Occupation	OUTDOOR
Date Of Driving Pass	07/09/2018
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-87427051
Fax Number	
Contact Number	OFFICE-87427051
Email Address	NOEMAIL

Address 55 LENGKOK BAHRU
#07-411
Postcode S151055
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 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) 2
Passenger 1
NAME: : -
GENDER: : MALE

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

PLEASE SEE ATTACHED SKETCH PLAN

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 SDH3376G
Vehicle Make/Model/Colour MERCEDES BENZ
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver CHUA CHOO GAN
NRIC/Passport Number S7502405C
Contact Number 98253304
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

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.

MK VEHICLE
 MK Vehicle Rental Pte Ltd
 UEN no. 200819177M
 48 Toh Guan Road East, #04-124
 Enterprise Hub Singapore 608586
 T: 6763 6363 F: 6763 0919

Policyholder's Signature
 Date & Time: _____



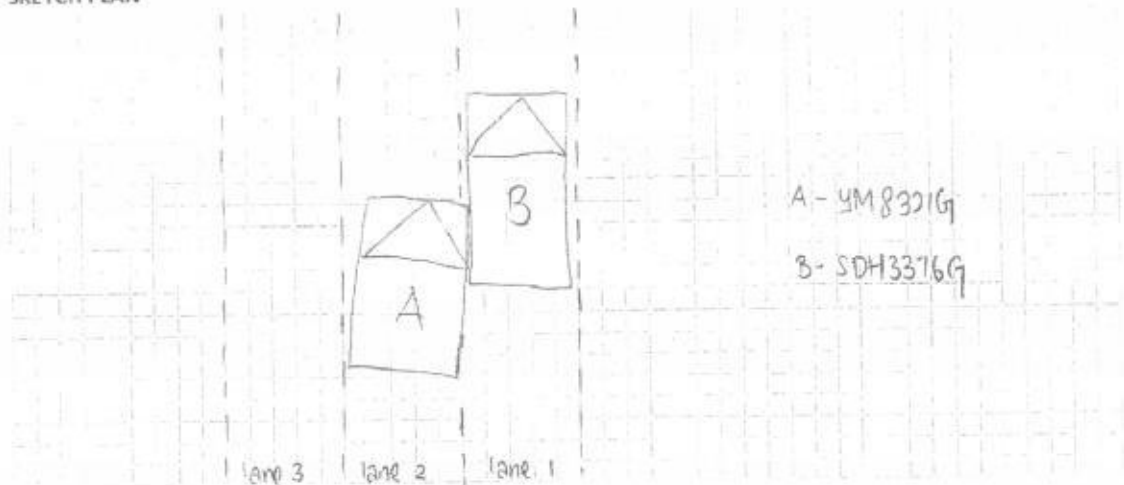
Driver's Signature
 (If driver is not the policyholder)
 Date & Time: _____

11 OCT 2010

IDAC BUKIT BATOK (VAC)
 511 Bukit Batok Street 23
 Singapore 659045
 Tel: 6760 3312 Fax: 6760 0722
 Email: vachbit@idac.com.sg

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A large rectangular area with horizontal lines for describing the circumstances of the accident. A diagonal line is drawn across the area, from the bottom left to the top right, indicating it is empty.

DECLARATION

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

MK
MK VEHICLE RENTAL PTE LTD
 UEN no. 200819177M
 48 Toh Guan Road East, #04-124
 Singapore 608586
 Tel: 6763 6363 Fax: 6763 0717

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

IDAC BUKIT BATOK (VAC)
 511 Bukit Batok Street 23
 Singapore 650545
 Tel: 6560 3312 Fax: 6569 0722
 Email: vacbb@singnet.com.sg

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

On 06/10/2018 around 11:08am, I was driving along KPE towards MCE lane 2.

I was intending to switch to lane 1 and was signaling. The coast is clear, I started to filter. When my vehicle was slightly cross the lane, I notice the vehicle (SDH3376G) at far back of lane 1 suddenly dashing up and recklessly trying to overtake my filter.

I jam break and dodge back to my lane. Unfortunately, front right corner of my vehicle and rear left wheel area of his vehicle collided to each other.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9015252A



ABU HUZAIFAH BIN IMAN

ابو هوزايفه بن ايمان

Race
BOYANESE

Date of birth
01-05-1990

Sex
M

Country of birth
SINGAPORE

S9015252A

REPUBLIC OF SINGAPORE DRIVING LICENCE

S9015252A



ABU HUZAIFAH BIN IMAN

Birth Date: 01 May 1990

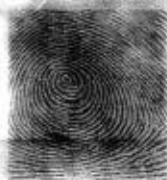
Issue Date: 07 Sep 2018



002843606G



NRIC No. S9015252A



Date of issue
16-07-2012

APT BLK 56 LENGKOK BAHU #07-411
SINGAPORE 151055

S9015252A

27/01/2014

4866318

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 07 Sep 2018

NP 428A



Licence No. S9015252A

**MK Vehicle Engineering Pte Ltd**

48 Toh Guan Road East, #04-124/125 Enterprise Hub, Singapore 608586

Tel: 6763 6363 | Fax: 6763 0919

Email: repair@mkvehicle.com.sg

Co. Reg. No./ GST No.: 201623663G

QUOTATION**To: CHINA TAIPING INSURANCE (SINGAPORE)****PTE.LTD**

3 ANSON ROAD # 16-00 SPRINGLEAF TOWER

SINGAPORE 079909

Singapore

Our Ref : Q18100013**Date : 17 Oct 2018**

Dear Sir / Madam,

RE: Quotation for**Remarks : YM 8321 G**

No	Description	Qty	UOM	U/P (S\$)	Amt (S\$)
1	FRONT RH SIGNAL LAMP	1.00	PC	211.00	211.00 <i>cm - Chan</i>
2	FRONT RH SIDE LAMP	1.00	PC	159.00	159.00 <i>cm - Chan</i>
3	LABOUR TO BEATING REPAIR FRONT BUMPER, AND RENEW SIGNAL LAMP & SIDE LAMP	1.00	TIME	150.00	150.00
4	RESPRAY PAINTING FRONT BUMPER	1.00	TIME	180.00	180.00 <i>150</i>
Subtotal:					700.00
7.00% GST:					49.00
Total Amount:					749.00

*Rasul**Hp 90010068**3 days**7/P**17/10/18 @ 1110**Resum after repair**577.50**3 days*

Thank you

Yours faithfully

**MK Vehicle Engineering Pte Ltd**

UEN no. 201623663G

48 Toh Guan Road East, #04-124/5

Enterprise Hub Singapore 608586

T: 6763 6363 F: 6763 0919

Confirmed acceptance of the above

Company Admin
Repair

Authorised Signatory & Company Stamp

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/CTI18018928/R1TBN2

Date: 23/10/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN1726411801
Claimant Vehicle No :	YM8321G	Insured Vehicle No :	SDH3376G
Date of Loss:	06/10/2018	Nature of Claim:	TP
		Claim No:	SNM18D04829C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	YM8321G	Engine No:	4M42A52298
Make & Model:	MITSUBISHI FE83PE6SRDEB, 3.9 D (M)	Chassis No:	FE83BEA10595
Reg. Date:	21/04/2008 (Man. Year: 2007)	Odometer:	321396 km
Colour:	White		
Engine Capacity:	2977 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:	7.00-16	Rear Tyre Size:	185R14C (D)
Front Left Side:	Bridgestone 7 mm	Rear Left Side:	Bridgestone 7/7 mm
Front Right Side:	Bridgestone 7 mm	Rear Right Side:	Bridgestone 7/7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	370.00	277.50	92.50	25.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	330.00	300.00	30.00	9.09
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	700.00	577.50	122.50	17.50
+ GST 7.00/7.00% (S\$)	49.00	40.43	8.57	17.49
Nett Amount (S\$)	749.00	617.93	131.07	17.50

INSPECTION

Date of Assignment:	17/10/2018	
Date Inspected:	17/10/2018 Inspected At:	Mk Vehicle Engineering Pte Ltd (HQ) 48 TOH GUAN ROAD EAST, #04- 124/125 ENTERPRISE HUB Singapore 608586

Estimated Period of Repair: 3.0 days

Adjuster: MOHD RASUL

Manager: DENISE TAY KWEE CHENG

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: 23 Oct 2018)
Parts: N/A MITSUBISHI FE83PE6SRDEB 3.9 D (M) (Model not available in database)
Labour: Repairer's (Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for YM8321G)
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 SIGNAL LAMP	Cracked	211.00 F	*211.00 FL
2	1		*FRONT RH SIDE LAMP	Cracked	159.00 F	*159.00 FL
				Sub Total (S\$)	370.00	370.00
				- List Item Discount on L Items 0.00/25.00% (S\$)	0.00	92.50
				Total Parts (S\$)	370.00	277.50

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	LABOUR TO BEATING,REPAIR FRONT BUMPER AND RENEW SIGNAL LAMP & SIDE LAMP	New	150.00	150.00
2	RESPRAY PAINTING FRONT BUMPER	New	180.00	150.00
Gross Labour Cost (\$\$)			330.00	300.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >