

ASS. REC. BY:

REF: CS/CT18019234/Gcd354 Special Instruction:

Surveyor: Guo Qiang
From (Person): Irene Tay

ASSIGNMENT (Office)

of CTE Date/Time: 22/10/2018 @ 5-19pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SBE 25D Insured: GU 4637T

at Workshop m/s Team Autopro Tel: 9092 7279

of 8 kaki Bkt Ave 4 # 06-21

Policy No: DMCVSN3023081802 Claim No: SNM18D04994C02

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 20/10/2018

(Client's Record) Insp: 62 kaki Bukit Ave 6 ARK

CA / REV / REP. / REV 24 HRS (up) H.O.D. Endorsement: _____

Date/Time: 10:01am @ 23/10/18 Person Contacted: Alan Vehicle: IN / OUT

Date/Time	Action/Instruction (x) Estimate
	SBE 25D - CS/AXA10001777/Cqh DOA: 12/05/2009
	GU 4637T - CCG/AG/2023392/Asa3y DOA: 21/2/2012
	Demande: 24/10/2018

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	22 Oct 2018		22 Oct 2018 17:19 Assign				New Assignment Cancel Case

[Main](#)[Reference](#)[Claim Details](#)[Documents](#)[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:			
Main Claimant:	KOH ING KIANG JAMES		
Vehicle Reg. No.:	SBE25D	Date of Loss:	20/10/2018 00:00 - :59
Claim Type:	TP / SNM18D04994C02	Policy/Cover Note No.:	DMCVSN3023081802
Vehicle Reg. No. (Insured):	GU4637T	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	Team Autopro Pte Ltd (KAKI BUKIT) No.8 Kaki Bukit Avenue 4, #06-21 Premier@ Kaki Bukit (Gate 2), 415875 Kaki Bukit - Tel: 90927279		
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 31/10/2018]		
Adj Asg. Remarks:	NO EST, CASE W/O SJE.		

ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

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

ROY & PARTNERS

(Business Registration No. 53131170L)
Advocates & Solicitors

Commissioner For Oaths
Notary Public

MONOJ KUMAR ROY LLB (Hons.) S'pore
HARPAL SINGH BAJAJ LLB (Hons.) London

101 Cecil Street #11-09 Tong Eng Building, Singapore 069533

Tel : 6536 8466

Fax : 6536 1963 (Not For Service Of Documents)

Enquiries: roynpartners@roynpartners.com.sg

Your Ref : Your insured vehicle: GU 4637T;
Our Ref : MKR/404/8334/2018/as.wl;

22nd October 2018

IMMEDIATE ATTENTION

M/S CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD BY FAX: 6224 7175 ONLY

3 Anson Road,
#16-00 Springleaf Tower,
Singapore 079909

(Attn: Motor Claims Department)

Dear Sirs,

CLAIMANT: KOH ING KIANG JAMES (OWNER OF SBE 25D)
ROAD TRAFFIC ACCIDENT INVOLVING VEHICLE NO. SBE 25D AND GU 4637T ALONG
CLEMENTI AVE 2 TOWARDS CLEMENTI ROAD SLIP ROAD ON 20.10.2018 AT ABOUT 1830
HOURS.

We refer to the above matter.

We act for Koh Ing Kiang James, the owner of motor vehicle No. **SBE 25D**.

We are instructed by our client to notify you of a road traffic accident on 20.10.2018 at about 6.30 pm along Clementi Avenue 2 towards Clementi Road slip road involving our client's motor vehicle registration number **SBE 25D** and motor vehicle registration number **GU 4637T** driven by your insured at the material time. A copy of the Singapore Accident Statement is attached.

As a result of the accident, our client's motor vehicle **GU 4637T** has been damaged. Before our client proceed to repair the damaged motor vehicle, please let us know within **two (2) working days** of your receipt of this notice whether you would like to conduct a pre-repair survey of our client's motor vehicle **GU 4637T** at our client's repairer workshop, M/s Team AutoPro Pte Ltd at No. 62 & 64 Kaki Bukit Ave 6 Ark @Kaki Bukit Singapore 417893. Your said surveyor may contact Mr. Alan Koh at 9092 7279. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the motor vehicle without further reference to you.

Yours faithfully

of Roy & Partners

MONOJ KUMAR ROY
Encl.

Cc: Clients (Team AutoPro Pte Ltd)
(SBE 25D)

By Email

Email: sm@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 20/10/2018 (dd/mm/yy) Time of Accident: 18:30 (24-HR-FORMAT)
 Vehicle No.: SBE 25 D Vehicle Make & Model: BMW 52d
 Exact location of Accident: Clementi Ave 2 towards Clementi road slip road.
 Policyholder's Name / IC No.: Koh Ing Kiang James S7735074H
 Driver's Name / IC No.: Koh Ing Kiang James S7735074H (As Above)
 Driver's Contact No.: 9101 6669 Company Contact No.: _____
 Driver's Address: 985 bukit Timah Road #03-02 S(589627)
 Insurance Company: FWD Email address (if any): _____

Relationship between Owner & Driver: Owner
 or Others specify: _____

What do you wish to claim? (Please TICK one only)

Own Insurance / Other Vehicle (The one you want to claim against) / Reporting (For Record Purpose)

Exact purpose for which the vehicle
 Was being used at time of accident?

Occupation (nature of job) Indoor/ Outdoor

Private use / Work purpose

No. of Passengers (Including Driver): 04

Passenger Name : _____

Gender : _____

Passenger Name : _____

Gender : _____

Weather condition & Road conditions? (On the day of accident)

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? Yes / No

Any Injuries: Yes / No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: Yes / No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No: _____ Vehicle No: GU 4637 T

Driver's Contact No: _____ Insurance Company (If any): _____

2. Driver's Name / IC No: _____ Vehicle No: _____

Driver's Contact No: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

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.



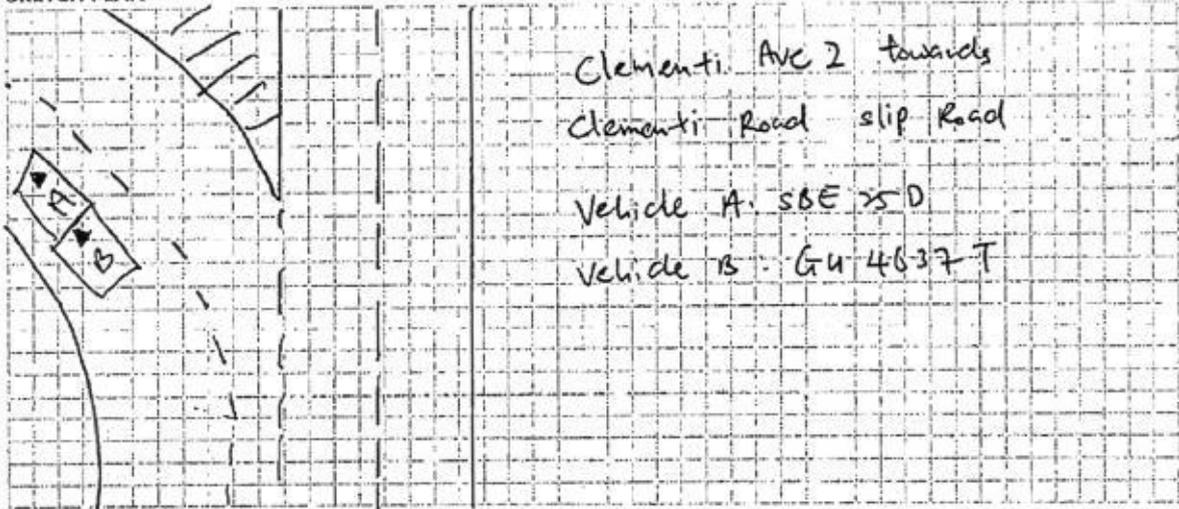
 Policyholder's Signature
 Date & Time:



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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle A stopped to allow
 vehicle from the main road to pass. Few seconds later, vehicle B
 hit onto my stationary vehicle near portion

passenger: Lim See Hwee, Gwen
 Koh Shao Wei, Ethan
 Koh Kai Shan, Sophie

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5074H
Vehicle Details	
Vehicle No.:	SBE25D
Vehicle to be Exported:	No
Planned Deregistration Date:	24 Oct 2018
Vehicle Make:	B.M.W.
Vehicle Model:	520I 2.0L AT D/AB 2WD 4DR GAS/D NAV
Primary Colour:	White
Manufacturing Year:	2013
Engine No.:	A5430456N20B20B
Chassis No.:	WBAXG12020DX53676
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$41,274.00
Original Registration Date:	19 Jun 2013
First Registration Date:	19 Jun 2013
Transfer Count:	1
Actual ARF Paid:	\$44,784.00
Eligible PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Jun 2023
PARF Rebate Amount:	\$31,348.00
Eligible COE Rebate Details	
COE Expiry Date:	18 Jun 2023
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
COE Paid:	\$75,000.00
COE Rebate Amount:	\$34,891.00
Total Rebate Amount:	\$66,239.00

The information contained herein is correct as at 24 Oct 2018

OK

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	22 Oct 2018		22 Oct 2018 17:19 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS		[Created by insurer]							
Insured:	-, Co. Reg. No.: -								
Main Claimant:	KOH ING KIANG JAMES								
Vehicle Reg. No.:	SBE25D	Date of Loss: 20/10/2018 00:00 - :59 [64 Months and 1 Days From LTA Reg Date (Man Yr)]							
Claim Type:	TP / SNM18D04994C02	Policy/Cover Note No.: DMCVSN3023081802							
Vehicle Reg. No. (Insured):	GU4637T	Policy No. (Claimant):							
		Excess: S\$0.00							
Repairer:	Team Autopro Pte Ltd (KAKI BUKIT) No.8 Kaki Bukit Avenue 4, #06-21 Premier@ Kaki Bukit (Gate 2), 415875 Kaki Bukit - Tel: 90927279								
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 ... [Handled by XING GUO QIANG] ... [Final Rpt due 31/10/2018]								
Adj Asg. Remarks:	NO EST, CASE W/O SJE.								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

***SBE25D (SNM18D04994C02)**
[GU4637T]

TP

KOH ING KIANG JAMES

Oct 20 2018 12:00AM

[-]

Team Autopro Pte Ltd

Upload Documents Upload Photos Compose New Letter

View View in Browser ▾

Photos/Images			3 per page ▾	☑
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	27/10/18 14:45	General View	Load PDF	
2	27/10/18 14:45	Photographs of Damaged Parts	Load PDF	
Documentation			1 per page ▾	☑
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	22/10/18 17:19	PRS	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST

Reset Save Print

There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: Handling Insurer

Note: Remarks are private unless you show it to other parties.

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/CT118019234/GCD3S2

Date: 29/10/2018

REFERENCE

Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. Policy No: DMCVSN3023081802

Claimant Vehicle No: SBE25D Insured Vehicle No: GU4637T

Date of Loss: 20/10/2018 Nature of Claim: TP Claim No: SNM18D04994C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SBE25D**

Make & Model: BMW 520I, 2.0 (A) Engine No: A5430456N20B20B

Reg. Date: 19/06/2013 (Man. Year: 2013) Chassis No: WBAXG12020DX53676

Colour: White Odometer: 74257 km

Engine Capacity: 1997 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: Good Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 275/30ZR20 Rear Tyre Size: 275/30ZR20

Front Left Side: Michelin 6 mm Rear Left Side: Michelin 6 mm

Front Right Side: Michelin 6 mm Rear Right Side: Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment: 22/10/2018

Date Inspected: 23/10/2018 Inspected At: Team Autopro Pte Ltd (KAKI BUKIT)
No.8 Kaki Bukit Avenue 4, #06-21 Premier@ Kaki Bukit
(Gate 2)
Singapore 415875

Estimated Period of Repair: 4.0 days

Adjuster: XING GUO QIANG

Manager: CELINE FONG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
- C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$4,000.00 - \$5,000.00

REPAIR DETAILS

Reference

Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 29 Oct 2018)
Parts: 143	BMW 520I 2.0 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SBE25D)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >