- Surveyor		ASSIGNME		d3ny special locarections	5
 Estimated C 			12011	Date/Time:/	11180111
To Inspect \	/S/TP RES / OD RES / /chicle No	370 8032)	1	Insured GX800	636
of_	Blk 3007	Ubi Road I #		T-1 /- 10 0	
Policy No. Sum Insured	BVECSB 001			G×8063G/KU	J
Make of Vel (Client's Reco				D.O.A. 30/	10/2018
CA / REV	/ REP. / REV 24 HRS	s (wps	7 2	7/III € €	after 2pm
	1 accum(s) 1/11/18	Person Contacted:	Ms-Than	A Vehicle IN (OUT)	
Date/Time	Action/Instruction (SLQ 8905 Y GX 8063 6 -				

Lump Sury LB

3,068.00 P/P

DOWN! ASSIGNATION L SLQ 89257 , THE 2017 July. M11.2018 Type (M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Emmaded Cost Truck / Trailer or OD (TP) WS / TP RES / OD RES / EVA / INV / MV Horde Vezel. SLW 8975Y To Impect Vehicle No: Make Bleece. Insured / Std / NI / NA Jack Cars at Workshop mis-3007 Ubi Rd 1 # 01-450 22619 T Fadio Insured / Std / NI / NA Eng/No: insured R411107356. C/No. Policy No Gen. Cond Good Fair / Poor / Burnt. Chams No Steering Inerger / Jammed / Leaked / Burnt @ Sum Insured: Excess Brake: Inector / Jammed / Leaked / Burnt or (Client's Record) Modi: Nii (SIRim) STD A/Rim or Make of Vish 215/55RJ7-Tyre Size Offer 2pm 215/55RIT. (Policy Condition) N/S BS / PON / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / Remark: The yeh had commenced its repair at the time of inspection. TOYO / YOKO or Rear Front Ball, or Market Value. R/Bal. R/Bal Consistent? Yes or No PROTE (1177) IDAC Accident Rport: L/Bal L/Bal. Consistent? Yes or No min GIA! PR Seen: 0.01 D.O.A. Res: Yes or No Est Repairs: days Jack Cars. 3 Val.: Yes or No. Survey held at Lum Sum Des of Damages Frt / Rear / O/S / N/S / U/C / Rooftop or CA / REV / REP. / 24 HRS Vehicle IN / OUT Person Contacted Date The UIC / Chassis frame / Body Structure affected due to collision Action / Instruction Date / Timo TP AWA. P/P \$ 3,068.00 @ 4 days, Godand With Thank (\$1,040.00 _ Red - 25%) Days Of Repair: Preli. Report Sarvey Fee: 150 Resurvey No. of Trip: Final Report Transportation Site Into 15 Add Fee: Interview: 18 Tech line (\$ Report Formal

Joseph Sandy 15

150

Nivitha (LKK Auto)

From: Tang, Ben <Ben.Tang@awac.com> on behalf of Motorsurvey

<Motorsurvey@awac.com>

Sent: Thursday, 1 November 2018 11:17 AM

To: assignments

Cc: SUR; 'thana@jackcars.com.sg'

Subject: TP Survey assignment for SLQ 8925Y - DOA: 30/10/2018 Our ref: GX 8063G/KW

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us do have consensus in the appointment of <u>Mr Marcus Chua / Mr Henry Ng</u> as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3rd Party Vehicle		SLQ 8925 Y
Insured Vehicle	9	GX 8063 G
Policy Number		BVFCSB0012681802
Name of Workshop		Jack Cars Enterprise Pte Ltd
Contact Number		6748 8824 / 9220 6746
Person to Contact	:	S. Thanaletchumi (Ms)
Estimated Cost of repairs	:	\$ NA

Regards, Claims Division

Copy to Jack Cars Enterprise Pte Ltd via Email

Note -

 This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.

Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.

Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.

 Please do not construe this appointment of surveyor and our above request as an admission of liability.

Regards Motor Claims Claims Group

Global Market

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

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.
- Information provided must be as <u>truthful</u> and <u>accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available
 aforesaid.

ACCI			

Date Of Report

31/10/2018 11:06

Date Of Accident

30/10/2018 18:45

Exact Location Of Accident

T JUNCTION BESIDE JURONG FIRE STATION

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLQ8925Y

Insured/Policyholder

Name Of Registered Owner

MOHD NORKIZAN

NRIC No

S8071073I

Email Address

NOEMAIL

Mobile Phone No.

(LOCAL) +65-97970887

Alternative Phone No.

OFFICE-97970887

Vehicle Particulars

Manufacturer

HONDA

Model

VEZEL-1.5 X CVT (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

THIRD PARTY

Vehicle Category

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5092841396-01

Cover Note Number

Driver

Name of Driver

FAUZIAH BINTE OTHMAN

NRIC No

S8235498J

Date Of Birth

17/11/1982

Occupation

INDOOR

Date Of Driving Pass

09/01/2014

Driving Experience

4 YEARS AND 9 MONTHS

Gender

FEMALE

Mobile Number

(LOCAL) +65-96891347

Fax Number

Contact Number

EMail Address

FAU2IAHOTHMAN1982@GMAIL.COM

Address

BLK 671C JURONG WEST STREET 65 #07-118

Postcode

43671

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

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

2

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)

2

Passenger 1

NAME:

: PASSENGER

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

TRYING TO RETRIEVE

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GX8063G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 25

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.
- 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.
- 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-
- 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.
- 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)

l 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:
 - 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:
 - 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: Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

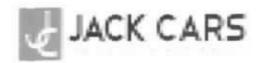
Name:

NRIC/FIN No.:

Sketch Plan #2

	traffer lagins
SKETCH PLAN	8
	1
	7
- 1	-\/
	- /mko
	King land
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
DESCRIBE CIRCUMSTANCE	
Accident lapp	rened on 30 oct 2018 at 644 pm at Tjunusen
Lasta Valle	. Free Clation I was not not doughter.
Cue cat at	bout wassigned with seathert on she is 8
hears ald as	t time of accident She is in state of
shock.	strice of the
3010010	
D and the	a when the accident happened I was limiting
A	Branch Fo Lucia to many visiblet The lord
131 my 17-zer	arrow to turn to my right. The lorry
trying to	party of the second by the second
rear Mo an	dash green straight road light on a straight e-brake and lett my left humper
It is badly o	dented and headling ht 1s affected
ECLARATION	Contract of the state of
We declare the foregoing part	iculars are true in everytespect
	Driver's Signature Reporting Centre Personnel's Signature
Scyholder's Signature ite & Time:	Driver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature (Name:
	NRIC/FIN NO

with premienter or





ESTIMATE

DATE OF ACCIDENT: 30/10/2018

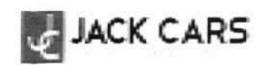
VEHICLE: SLQ8925Y

MAKE & MODEL : HONDA VEZEL

INSURANCE: ALLIED WORLD INSURANCE

SURVEYOR: LKK AUTO

	PARTS	CONDITION	COST
1.	FRONT BUMPER Defarred		\$ 680
2.	FRONT BUMPER BRACKET - LEFT New		\$ 45
3.	FRONT BUMPER BRACKET - RIGHT ME ML		\$ 45
4.	FRONT BUMPER LOWER LIPS		\$ 230
5.	HEADLAMP-LEFT at 2885		\$ 1850
6.	WHEEL ARCH - LEFT Deld 2308		\$ 130
7.	FOG LAMP COVER - LEFT 3eL_1		\$ 180
	SPECIAL NETT		
1.	CLIPS Mee 30		\$-80
	LABOUR		
1.	LABOUR TO PUTTY & SPRAY PAINT OF AFFECTED AREA		\$.700
1.			\$ 700
2550	TO PUTTY & SPRAY PAINT OF AFFECTED AREA TO PANEL BEAT & RENEWAL OF ALL NECESSARY)	100000
2.	TO PUTTY & SPRAY PAINT OF AFFECTED AREA TO PANEL BEAT & RENEWAL OF ALL NECESSARY DAMAGED BODY PARTS)	\$ 600
2.	TO PUTTY & SPRAY PAINT OF AFFECTED AREA TO PANEL BEAT & RENEWAL OF ALL NECESSARY DAMAGED BODY PARTS TO CHECK WIRING & REWIRE TO CHECK LIGHTING SYSTEM & WATER TEST	\$ 2,528	\$ 600

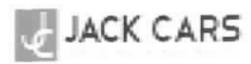




ESTIMATE

DATE OF ACCIDENT: 2/11/2018	
VEHICLE: SGGJ961R	
MAKE & MODEL : TOYOTA VIOS	
INSURANCE : AXA INSURANCE	
SURVEYOR: RT APPRAISAL	

	PARTS	CONDITION	COST
1.	:		\$ 580
	SPECIAL NETT		
1.			- (4)
2.	32 111033353		2.225
3.			1
	LABOUR		
1.			
2.			
_	PARTS - 25% :		
_	SPECIAL NETT:		
	LABOUR :		
	TOTAL:		
	LUMP SUM - 20%:		
	7% GST :		
	GRAND TOTAL :	3	





	LABOUR :	\$ 1,500
\Box	TOTAL :	\$ 4,108
\vdash	7% GST :	\$ 287.56
\Box	GRAND TOTAL:	\$ 4,395.56

P/P 67/11/18
0+0m/2.
total: 3068(P/P).

LKK Auto Consultants hence notify the Repairer of the following:

- . To resurvey before latter spray painting
- . To display damaged parties during returney
- . Parts prices are subject to confirmation
- . Third party survey in on a 'Without Projudice' basis.
- . No illegal modification(s) is allowed
- . Supplementary certis) must be resurred and is subject to final approval from insurance Company

Acknowledged by Reparer

Signature:

Dated



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

ALLIED WORLD ASSURANCE COMPANY LTD Ref : CS/AWA18019872/Asd3n2

(SINGAPORE BRANCH)

60 ANSON ROAD #08-01 (8th FLOOR)

MAPLETREE ANSON SINGAPORE 079914 Date: 20-02-2020



1.		Policy Particu	lars :- THIRD PARTY CLA	MIM
	Insured Veh.	GX 8063G	Veh. Inspected	SLQ 8925Y
	Policy No.	BVFCSB0012681802	Coverage (\$)	0.00
	Claim No.	GX8063G/KW	Excess (\$)	0.00
	Assign From	BEN TANG	Assign Date	01/11/2018
2.	13 10 10 10	Vehicle F	Particulars & Condition	The second
	Make & Model	HONDA VEZEL	c.c	1496
	Engine No.	HIDDEN	Year of Reg.	2017
	Chassis No.	RU11107356	Colour	BLACK
	Odometer	22619	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Co	nditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	215/55 R17	DUNLOP	6 mm
	L/H Front Tyre	215/55 R17	DUNLOP	6 mm
	R/H Rear Tyre	215/55 R17	DUNLOP	6 mm
	L/H Rear Tyre	215/55 R17	DUNLOP	6 mm
١.	10000	Desc	ription of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT TH	E FRONT N/S PORTION.	
	DAMAGES SEE D	ETAILS.		
5.		Ge	neral Information	100
	Accident Date	30/10/2018	Inspection Date	07/11/2018
	Survey held at	JACK CARS ENTERPRISE	PTELTD	
		BLK 3007 UBI ROAD 1 #0* SINGPORE 408700	1-450	
5a.		TO HER THE	Remarks	ST 1/4
			A"WITHOUT PREJUDICE" BA NS, WE HAVE NOT AUTHOR	
5b.		Estir	mate Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	4 Working Da	iys



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No. 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLQ 8925Y

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	DEFORMED	680.00	680.00
1	FRONT BUMPER BRACKET - LEFT	NECESSARY	45.00	45.00
1	FRONT BUMPER BRACKET - RIGHT	NOT NECESSARY	45.00	
1	FRONT BUMPER LOWER LIPS	TO REPAIR SEE LABOUR	230.00	-
1	HEADLAMP - LEFT	CUT	1,850.00	1,850.00
1	WHEEL ARCH - LEFT	DEFORMED	130.00	130.00
- 1	FOG LAMP COVER - LEFT	DEFORMED	180.00	180.00
	LESS 20% DISCOUNT		-632.00	-577.00
			2,528.00	2,308.00
	SPECIAL NETT ITEMS			
1	CLIPS (SN)	NECESSARY	80.00	30.00
			80.00	30.00
	LABOUR			
	TO PUTTY & SPRAY PAINT OF AFFECTED AREA.		700.00	400.00
	TO PANEL BEAT & RENEWAL OF ALL NECESSARY DAMAGED BODY PARTS. INCLUSIVE OF THE REPAIR OF FRONT BUMPER LOWER LIPS.		600.00	300.00
	TO CHECK WIRING & REWIRE.		80.00	30.00
	TO CHECK LIGHTING SYSTEM & WATER TEST FOR ANY LEAKAGE.	NOT NECESSARY	120.00	
			1,500.00	730.00
	GRAND TOTAL		4,108.00	3,068.00

RECOMMENDED COST OF REPAIRS	3,068.00

Report Ref No. CS/AWA18019872/Asd3n2



ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M. MATAI

Licensed Appraiser

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