

ANS. REC. BY:

REF: CS3/MSH18016750 / Gvd3-1 Special Instruction

CIVA/01

ASSIGNMENT (Office)

From (Person): Katherine Wong of MS161 Date/Time: 14/11/18 13042018 4:00pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SJ6 8818A Insured: SDH 2393M

at Workshop n/o: Atk Solution Tel: 6744465

of 23 Kaki Bukit Ave 4 #02-03 B

Policy No: A804133630MX Claim No: 570052

Sum Insured: _____ Excess: _____

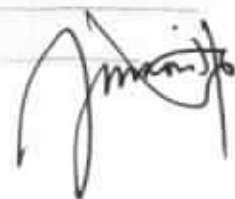
Make of Veh: _____ D.O.A. 11-09-2018
(Client's Record)

CA / REV / REP. / REV 24 HRS (Wp) 14-09-2018 H.O.D. Endorsement: _____

Date/Time: 13092018 127pm Person Contacted: Hong Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	<u>SJ6 8818A - X</u>
	<u>SDH 2393M - X</u>
	<u>LS \$5050, 5 Days.</u>

20/11/18 Submit LS \$5100 (Red 3750, 42%)



19/11/2018

RECEIVED 20 NOV 2018

DATE

PRS
Xnd

REF:

MS16

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

MG Solution

of

Insured:

Policy No.

Claims No.

Sum Insured

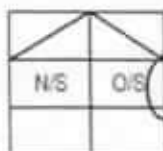
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt.:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

5

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.

Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SIG8818A

Yr Regn:

04 Sep 2017

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

Truck / Trailer or

Make:

Audi A3

1.0

c.c

999

Colour:

Brown

A/C:

Insured / Std / NI / NA

Sp. Reading

25897

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WAUZZZ8V3J1009303

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:

205/55 R16

R:

11

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

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

14-09-18

Survey held at

W/S

10:50AM

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

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

Date / Time

Action / Instruction

\$5500 - \$6500

RECEIVED 11 SEP 2018

Date/Time, File Pass to:



: Prel. Report

1)



: Final Report

Date/Time, File Return to:

2)

Days Of Repair:

5

Resurvey No. of Trip:

-

Survey Fee:

120

Transportation:

) S + RS: \$

) Petrol

) Other:

)

TOTAL

10

130

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Report Format :

PRS

Lump Sum / I.B.I. (\$

PREMIER APPRAISER SERVICES

Insurance Loss Adjusters and Qualified Appraisers
16 Sin Ming Walk, #03-02 Singapore 575568
Tel: 6554-2269 Fax: 6685-1399
Regn. No: 52864369W

To Ms. Teo Gek Hong
c/o 23 Kaki Bukit Avenue 4
#02-03 (South Wing)
Singapore 415933

INVOICE NO : PT1809005
Our Ref : PT1809005-L
Your Ref : -
Date : 24th Sep 2018

	AMOUNT
VEHICLE REGISTRATION NO : SJG 8818 A	
VEHICLE MAKE/MODEL : Audi A3 1.0 TFSI	
TO SERVICE RENDERED:-	
<input checked="" type="checkbox"/> CONSULTANT/APPRaiser FEES	\$ 505.00
<input checked="" type="checkbox"/> PHOTOGRAPHS	\$ 32.00
<input checked="" type="checkbox"/> TRANSPORT CHARGES	\$ 60.00
<input checked="" type="checkbox"/> RE-INSPECTION FEES	\$ 80.00
	<u>\$ 677.00</u>
DOLLARS :- SIX HUNDRED & SEVENTY SEVEN ONLY	

E. & O. E.


for PREMIER APPRAISER SERVICES

PREMIER APPRAISER SERVICES

Insurance Loss Adjusters and Qualified Appraisers
16 Sin Ming Walk, #03-02 Singapore 575568
Tel: 6554-2269 Fax: 6685-1399
Regn. No: 52864369W

Our Ref : PT1809005-L
Date : 24th Sep 2018

Ms. Teo Gek Hong
c/o 23 Kaki Bukit Avenue 4
#02-03 (South Wing)
Singapore 415933

WITHOUT PREJUDICE

Dear Sir,

Re: Third Party Claim / Workshop :- MG Solution Pte Ltd
Vehicle Regn. No. : SJG 8818 A

We refer to your instruction to appraise the above-mentioned vehicle on 14th Sep 2018 .

A static inspection was carried out and our report is enclosed for your perusal. The estimated repair costs submitted by the repairer for **S\$ 14,805.14** as per our attached schedule have been scrutinized and revised by us against the actual damages found on the vehicle and we recommend the replacements and rectification accordingly.

The repairer has agreed to undertake the repairs at our adjusted amount of **S\$ 8,850.00 lump sum** corresponding to supply of parts, labour charges and spraypainting. However, we have not given instruction to authorize.

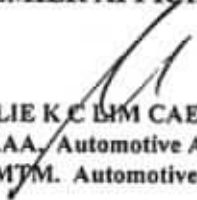
Under normal circumstances the estimated period of repairs is **SEVEN (7) days**. Photographs of the damaged vehicle taken by us during our inspection are enclosed.

We are leaving the matter to you for a decision.

Please do not hesitate to contact us if you need any clarification.

Assuring you of our best services always.

Very truly yours
PREMIER APPRAISER SERVICES


LESLIE K.C. LIM CAE (UK), MIMI (UK)
MSAAA Automotive Appraiser
Dip.MTM. Automotive Engineer

PREMIER APPRAISER SERVICES

VEHICLE INSPECTION REPORT

To: Ms. Teo Gek Hong
c/o 23 Kaki Bukit Avenue 4
#02-03 (South Wing)
Singapore 415933

Our Ref. : PT1809005-L
Policy No. :
Claim No. :
Sum Insured :
Excess : T/P Claim
Date : 24th Sep 2018

Assigned By : Ms. Teo Gek Hong
Date of Assignment : 14th Sep 2018
Date of Accident : 11th Sep 2018
Date of Inspection : 14th Sep 2018 Follow up inspections were also conducted.
Name of Workshop : MG Solution Pte Ltd
Place of Inspection : 23 Kaki Bukit Avenue 4 #02-03 (South Wing)
Singapore 415933

PARTICULARS OF VEHICLE

Registration No. : SJG 8818 A
Make/Model : Audi A3 1.0 TFSI
Type Of Body : 4 Door Saloon
Year of Manuf./Regn. : 2017
Colour : Met. Brownish Gray

Odometer/km : 25897
Chassis No. : WAUZZZ8V3J1009303
Engine No. : CHZ521094
Engine Cap. : 999 cc
Carrying Cap. : 4 Passengers

PRE-ACCIDENT CONDITION (Static tests only)

Handbrake	: Serviceable	Body Work	: Good	Market Value	: N/A
Footbrake	: Serviceable	Paint Work	: Good	Scrap Value	: -
Steering	: Serviceable	Modifications	: None	Others	: -

CONDITION OF TYRES

	Size	N/s - Tread Depth/Make	O/s - Tread Depth/Make
Front Tread	: 205/55 - R16	8mm - Bridgestone	8mm - Bridgestone
Rear Tread (inner)	:		
Rear Tread (outer)	: 205/55 - R16	8mm - Bridgestone	8mm - Bridgestone

The above represent an estimated remaining life of the tyre treads in mm.

POINT OF IMPACT/GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained an impact on the o/s portion.

The o/s front door, o/s rear door, o/s rocker panel, rocker panel inner structure, o/s rear fender were dented/ buckled. The o/s centre pillar was shifted.

For details of damages please refer to our schedule attached.

REMARKS :

This survey was conducted strictly without prejudice.

This report is confidential and is given for the use of clients and their agents and any disclosure or publication of it or parts thereof shall be the responsibility of such person and no liability shall be attached to us therefore.

PREMIER APPRAISER SERVICES

Our Ref: PT1809005-L

Vehicle No: SJG 8818 A

Qty	Parts Descriptions	Conditions	Repairer's Est.	Our Revised
LISTT ITEMS:				
1	o/s front door	badly dented	S\$ 2,288.30	S\$ 1991.00 DDV
1	o/s front door weatherstrip	stretched when removed	184.90	184.90 NNH
1	o/s front door sound absorber	necessary	116.80	116.80 NECV
1	o/s rear door	badly dented	2,288.30	1991.00 DDV
1	o/s rear door lower hinge	bent/stiffened	168.20	168.20 BT
1	o/s rear door check	bent/stiffened	82.10	82.10 NNH
1	o/s rear door weatherstrip	stretched when removed	184.90	184.90 NNH
1	o/s rear door sound absorber	necessary	116.80	116.80 NECV
1	o/s rear door regulator	damaged/stiffened	755.30	659.09 BT
1	o/s rear door regulator motor	damaged/malfunctioned	930.00	930.00 NNH
1	o/s rocker panel	dented/buckled	2,066.30	2,066.30 XR
1	o/s rear fender	dented - repair	2,155.30	-
			S\$ 11,337.20	S\$ 9,181.90 5042.8
		LESS 5%	566.86	459.10
			10,770.34	8,722.81 4790.75
S/NETT ITEMS:				
1	rear windscreen sealant	not required	60.00	-
1	rear windscreen inner seal	not required	50.00	-
1	o/s rear quarter glass sealant	not required	50.00	-
1	o/s rear quarter glass inner seal	not required	40.00	-
1	o/s rear fender s/shield clips - set	necessary	24.80	24.80 XNN
	TOTAL S/PARTS		S\$ 10,995.14	S\$ 8,747.61
	To remove/refit roof linings, upholstery, trims & garnish to facilitate repairs. (Interior trims & garnish only)		180.00	80.00
	To remove/refit o/s rear quarter glass to facilitate repairs.		100.00	-
	To remove/refit rear windscreen to facilitate repairs.		150.00	-
	Labour charges to repair, panel beat and straighten damaged parts and replace the above-mentioned parts.		1,400.00	1,000.00 600
	To transfer door components.		280.00	100.00 100.00
	To check wiring functions.		50.00	30.00 XNN
	To putty, apply primer & spray-paint the affected areas.		1,400.00	1,000.00 800
	To apply rust-proofing on repaired/replaced panels.		250.00	80.00 60.00
	TOTAL		S\$ 14,805.14	S\$ 11,097.61 1560

Note: The repairer has agreed to undertake the repairs at our adjusted amount of S\$ 8,850.00 lump sum corresponding to supply of parts, labour and spray painting charges.
The estimated period of repairs is SEVEN (7) days.
Pursuant to your instruction we have not authorised repairs on your behalf.

PREMIER APPRAISER SERVICES

LESLIE K C LIM CAE (UK), MIMI (UK)
MSAA, Automotive Appraiser
Dip. MTM. Automotive Engineer

Repair days 6

Terim lim

19/11/18

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 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	12/09/2018 15:01
Date Of Accident	11/09/2018 14:15
Exact Location Of Accident	MARINA BOULEVARD BESIDE MBFC (STRAITS VIEW)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJG8818A
Insured/Policyholder	
Name Of Registered Owner	TEO GEK HONG
NRIC No	S1179769E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97827592
Alternative Phone No	OTHERS-97827592

Vehicle Particulars

Manufacturer	AUDI
Model	A3 SEDAN 1.0 TFSI S TRONIC (LED)
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 80460818 QMY (COMP)
Cover Note Number	

Driver

Name of Driver	WEE HUI CHING
NRIC No	S8826605F
Date Of Birth	22/07/1988
Occupation	INDOOR
Date Of Driving Pass	23/04/2007
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97827592
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	218 UPPER PAYA LEBAR ROAD
Postcode	534884
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	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)	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

REFER TO SKETCH PLAN ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDH2393M
Vehicle Make/Model/Colour	TOYOTA CAMRY 2.0 AUTO ABS AIRBAG
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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 willful misrepresentation or withholding of material facts may allow insurance companies to reassess 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/are 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 (b) 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:

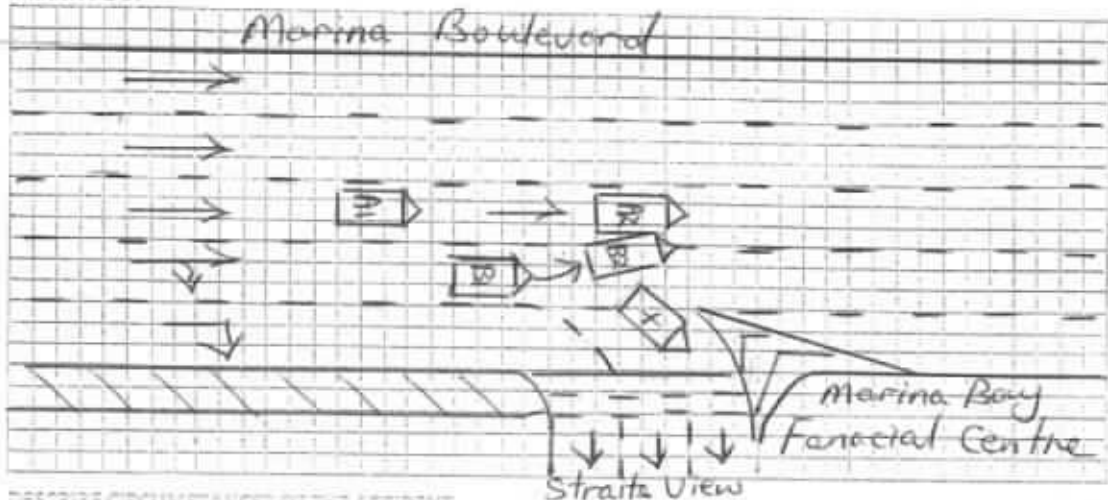
Driver's Signature
(If driver is not the policyholder)
Date & Time:

12 SEP 2016

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11/09/2018 at about 1415 hrs at along Marina Boulevard beside Marina Bay Financial Centre (Straits View). I was travelling on the 3rd lane from the left and suddenly a Vehicle (B) on my Right veered into my lane without checking his blindspot and without cautious hence collided onto my whole Right Portion of my Vehicle (A) causing damages to my vehicle.

(A) SJG 8818 A
(B) SDH 2393 M

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

DECLARATION

(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:

12 SEP 2018

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@singnet.com.sg

NRIC/PIN No.:

Accident Photo



Accident Photo



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.
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 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 12/09/2018 11:22
Date Of Accident 11/09/2018 13:55
Exact Location Of Accident MARINA BLVD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDH2393M
Insured/Policyholder
Name Of Registered Owner NG SING CHYE SIMON
NRIC No S1501869J
Email Address SIMONNG008@GMAIL.COM
Mobile Phone No (LOCAL) +65-97862707
Alternative Phone No Office-97862707

Vehicle Particulars

Manufacturer TOYOTA
Model CAMRY
Exact Purpose for which vehicle was being used at time of accident PRIVATE USE
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 MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number A 80413363 QMX
Cover Note Number

Driver

Name of Driver NG SING CHYE SIMON
NRIC No S1501869J
Date Of Birth 12/07/1961
Occupation OUTDOOR
Date Of Driving Pass 09/11/1981
Driving Experience 36 YEARS AND 10 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-97862707

Fax Number	
Contact Number	OFFICE-97862707
Email Address	SIMONNG008@GMAIL.COM
Address	APT BLK 657 YISHUN AVENUE 4 #04-359 SINGAPORE
Postcode	760657
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	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: : PUA SIEW PENG 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 ATTACHED

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJG8818A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	WEE HUI CHING
NRIC/Passport Number	S8826605F
Contact Number	97777592
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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: 11/9/18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

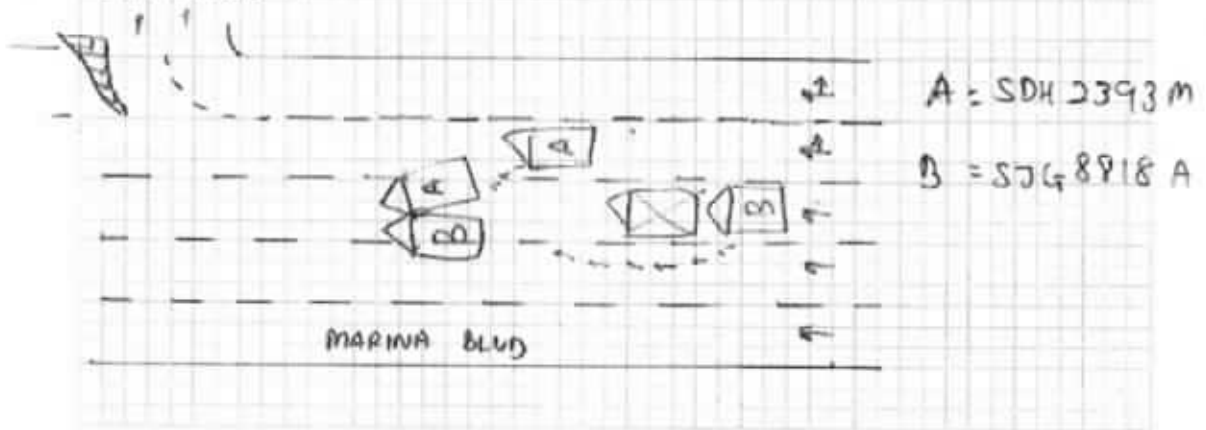
Reporting Centre Personnel's Signature

Name:

NRIC/TIN No.:

SKETCH PLAN

Sketch view



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Marina Blvd Rd and when I'm about to filter to my left, a car came from my left and hit the front left side of ~~my~~ my car. My car I do not see damage to my car but the other vehicle have some scratches and dent of her driver door.

When I retrieved the video, I found that vehicle B was changing lane also.

DECLARATION

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

Policyholder's Signature
Date & Time: 11/9/18

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

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

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



2018/09/11 18:10

Accident Photo



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

Paper Survey




CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	12 Sep 2018		13 Sep 2018 16:02 Edit Adj Rpt	S\$5,100.00 Edit Estimates	S\$5,100.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	NG SING CHYE SIMON , ID: S1501869								
Main Claimant:	TEO GEK HONG , ID: S1179769E								
Vehicle Reg. No.:	SJG8818A	Date of Loss:	11/09/2018 13:00 - 159 [12 Months and 7 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 570052	Policy/Cover Note No.:	A80413363QMX (Comprehensive) Coverage: 14/11/2017 - 13/11/2018						
Vehicle Reg. No. (Insured):	SDH2393M	Policy No. (Claimant):							
		Excess:							
Reparer:	MG Solution Pte Ltd (HQ) 23 Kaki Bukit Avenue 4 #02-03B, VICOM Inspection Centre, 415933 Kaki Bukit - Tel: 91886931								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Katherine Wong Chew Shong - 6594 2544]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 16/11/2018]								
Driver/Custodian (Insured):	NG SING CHYE SIMON (), NRIC: S1501869								
Adj Agg. Remarks:	SJE AGREE LKK. LIAB 50%. PLS CONTACT JAMIE YAN @ 6744 4165								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> MSIG_SG (14/11/2018): Report Send Back Alerts - SJG8818A (TP) 									
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

*SJG8818A (570052)
[SDH2393M]
TP
TEO GEK HONG
Sep 11 2018 1:00PM
[NG SING CHYE SIMON]
MG Solution Pte Ltd

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Video			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	13/09/18 10:38	Video - Accident(Front)	 Load MP4	
2	13/09/18 10:40	Video - Accident(Rear)	 Load MP4	
Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	13/09/18 11:14	Accident Statement <small>From: SC - Reg. No: SDH2393M, Claimant: NG SING CHYE SIMON</small>	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
2	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
3	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
4	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
5	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
6	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
7	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
8	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
9	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
10	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
11	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
12	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
13	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
14	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
15	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
16	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
17	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
18	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
19	16/09/18 21:27	General View	 Load JPG	<input checked="" type="checkbox"/>
20	16/09/18 21:27	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
21	16/09/18 21:27	Odometer Reading	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	13/09/18 09:58	PRI	 Load PDF	
2	13/09/18 10:46	SJG8818A E-FILE	 Load PDF	
3	13/09/18 11:13	SJE AGREE LKK	 Load PDF	
4	13/09/18 11:15	Third Party Accident Report <small>From: SC - Reg. No: SDH2393M, Claimant: NG SING CHYE SIMON</small>	 Load PDF	
5	07/11/18 09:15	Survey report & Photos	 Load PDF	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print

Video			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	21/11/18 12:54	PRS Invoice	 Load PDF	
2	21/11/18 12:54	Colour Photo	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/MSG18016750/GVD3E2-1

Date: 21/11/2018

REFERENCE

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

Policy No: A80413363QMX

Claimant Vehicle No: SJG8818A

Insured Vehicle No: SDH2393M

Date of Loss: 11/09/2018

Nature of Claim: TP

Claim No: 570052

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SJG8818A

Make & Model: AUDI A3, 1.4 SEDAN TFSI (AMBIENTE) (A)

Engine No: CHZ521094

Reg. Date: 04/09/2017 (Man. Year: 2017)

Chassis No: WAUZZZ8V3J1009303

Colour: Brown

Odometer: 25897 km

Engine Capacity: 999 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: 205/55 R16

Rear Tyre Size: 205/55 R16

Front Left Side: Bridgestone 6 mm

Rear Left Side: Bridgestone 6 mm

Front Right Side: Bridgestone 6 mm

Rear Right Side: Bridgestone 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	10,995.14	4,790.75	6,204.39	56.43
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,810.00	1,640.00	2,170.00	56.96
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	14,805.14	6,430.75	8,374.39	56.56
Approved Total (Overridden) (S\$)		5,100.00		
(S\$)	14,805.14	5,100.00	9,705.14	65.55
+ GST 7.00/7.00% (S\$)	1,036.36	357.00	679.36	65.55
Nett Amount (S\$)	15,841.50	5,457.00	10,384.50	65.55

INSPECTION

Date of Assignment: 13/09/2018

Date Inspected: 14/09/2018 Inspected At:

MG Solution Pte Ltd (HQ)
23 Kaki Bukit Avenue 4 #02-03B, VICOM
Inspection Centre
Singapore 415933

Estimated Period of Repair: 5.0 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.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 21 Nov 2018)
Parts:	144	AUDI A3 1.4 SEDAN TFSI (AMBIENTE) (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SJG8818A)	
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		*O/S FRONT DOOR	Dented	2,288.30 FL	*1,991.00 FL
2	1		*O/S FRONT DOOR WEATHERSTRIP	Not Necessary	184.90 FL	*- FL
3	1		*O/S FRONT DOOR SOUND ABSORBER	Necessary	116.80 FL	*116.80 FL
4	1		*O/S REAR DOOR	Dented	2,288.30 FL	*1,991.00 FL
5	1		*O/S REAR DOOR LOWER HINGE	Bent	168.20 FL	*168.20 FL
6	1		*O/S REAR DOOR CHECK	Not Necessary	82.10 FL	*- FL
7	1		*O/S REAR DOOR WEATHERSTRIP	Not Necessary	184.90 FL	*- FL
8	1		*O/S REAR DOOR SOUND ABSORBER	Necessary	116.80 FL	*116.80 FL
9	1		*O/S REAR DOOR REGULATOR	Bent	755.30 FL	*659.09 FL
10	1		*O/S REAR DOOR REGULATOR MOTOR	Not Necessary	930.00 FL	*- FL
11	1		*O/S ROCKER PANEL	Repair	2,066.30 FL	*- FL
12	1		*O/S REAR FENDER	Repair	2,155.30 FL	*- FL
13	1		*REAR WINDSCREEN SEALANT	Not Required	60.00 FS	*- FS
14	1		*REAR WINDSCREEN INNER SEAL	Not Required	50.00 FS	*- FS
15	1		*O/S REAR QUARTER GLASS SEALANT	Not Required	50.00 FS	*- FS
16	1		*O/S REAR QUARTER GLASS INNER SEAL	Not Required	40.00 FS	*- FS
17	1		*SET O/S REAR FENDER S/SHIELD CLIPS	Not Necessary	24.80 FS	*- FS

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

Sub Total (\$\$)	11,562.00	5,042.89
- List Item Discount on L Items 5.00/5.00% (\$\$)	566.86	252.14

Total Parts (\$\$)	10,995.14	4,790.75
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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	TO REMOVE / REFIT ROOF LININGS, UPHOLSTERY, TRIMS & GARNISH TO FACILITATE REPAIRS (INTERIOR TRIMS & GARNISH ONLY)	New	180.00	80.00
2	TO REMOVE / REFIT O/S REAR QUARTER GLASS TO FACILITATE REPAIRS	New	100.00	0.00
3	TO REMOVE / REFIT REAR WINDSCREEN TO FACILITATE REPAIRS	New	150.00	0.00
4	LABOUR CHARGES TO REPAIR, PANEL BEAT AND STRAIGHTEN DAMAGED PARTS AND REPLACE THE ABOVE-MENTIONED PARTS	New	1,400.00	600.00
5	TO TRANSFER DOOR COMPONENTS	New	280.00	100.00
6	TO CHECK WIRING FUNCTIONS	New	50.00	0.00
7	TO PUTTY, APPLY PRIMER & SPRAY-PAINT THE AFFECTED AREAS	New	1,400.00	800.00
8	TO APPLY RUST-PROOFING ON REPAIRED / REPLACED PANELS	New	250.00	60.00
Gross Labour Cost (\$\$)			3,810.00	1,640.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >