

22/03/2002

ASS. REC. BY:

REF: CS3/ III 18020765/Acd302

Special Instruction:

Surveyor: Adrian

ASSIGNMENT (Office)

From (Person): Gabriel Wee

of

III

Date/Time: 16/11/18 @ 12:13pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLT 8341R

Insured:

SHC 8593S

at Workshop m/s

Reliable Carz

Tel:

8166 9797

of

8 Kaki Bukit Ave 1 # 05-50

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 15/11/2018

CA / REV / REP. / REV 24 HRS

(Cap)

H.O.D. Endorsement:

Date/Time:

12:44pm @ 16/11/18

Person Contacted:

Jason

Vehicle

☒ IN ☐ OUT

Date/Time	Action/Instruction (✓) Estimate Insp: 1 Kaki Bkt Ave # 01-60 Autobay
	SLT 8341R - NA / INC 18020734 / 24 DUA: 15/11/18
	SHC 8593S - NA / INC 18020734 / 24 DUA: 15/11/18
	Dismantle: 19/11/2018 @ 10am

Adrian

## ASSIGNMENT

Front: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

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.

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: SLT8341R Yr Regn: 2017 / NovType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda Freed Hybrid c.c. 1496Colour: White A/C: Insured / Std / NI / NASp. Reading 85891 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: 6B71047795Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 185/65R15R: 185/65R15

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

TOYO / YOKO or Newton

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. \_\_\_\_\_ D.O.I. 15/11/18 @ 2.25pmSurvey held at ReliableDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

TP III PRS.

Date/Time, File Pass to?

Date/Time, File Return to?

1)

2)

3)

4)

5)

6)

Prel. Report:

Final Report:

Part Prices Check:

IN

OUT

Survey Fee:

Date:

Basic &amp; Add.

S + RS, SI

Photos

Others

TOTAL

12010130

## Nivitha (LKK Auto)

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**From:** Motor Claim - III <motorclaim@iii.com.sg>  
**Sent:** Friday, 16 November 2018 12:13 PM  
**To:** Hui Ting; 'sur@lkkauto.com'; Catherine Chong (LKK Auto)  
**Cc:** Sundari Nagarajan - III  
**Subject:** FW: Our client's vehicle no. SLT8341R (RC); Your insured's vehicle no. SHC8593S - PRI  
**Attachments:** Reliable Carz - Pre-Repair Notice (India)(SLT8341R).pdf

Dear Sir / Mdm

**This Pre-Repair Survey is on Without Prejudice Basis.**

THIRD PARTY VEHICLE NO. : SLT8341R  
III INSURED VEHICLE NO. : SHC8593S  
DATE OF LOSS : 15.11.18

We acknowledge receipt of your email.

**In compliance to Pre-Action Protocol for NIMA cases, we note that**

We disagree to the list of motor surveyors that you have proposed.

Therefore, we have appointed our surveyor LKK AUTO CONSULTANTS to conduct the pre-repair survey.

This claim is handled by **Sundari**.

Please let us have your client's **accident report and repair estimate** for our appointed surveyor to conclude his report.

**\*\*We would like to conduct a re-survey after spray painting. Please contact our surveyor to arrange.**

**\*\*Surveyor kindly upload this assignment to Merimen.**

Thank You.

*Best Regards,*

**Gabriel Wee**

Motor Claims Dept.

India International Insurance Pte Ltd

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

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**From:** Hui Ting [mailto:huiting@crossbordersllc.com]  
**Sent:** 16 November, 2018 11:20 AM  
**To:** Motor Claim - III <motorclaim@iii.com.sg>  
**Cc:** Corene <corene@crossbordersllc.com>  
**Subject:** RE: Our client's vehicle no. SLT8341R (RC); Your insured's vehicle no. SHC8593S - PRI

Your attention is drawn to the CONFIDENTIALITY NOTICE below.

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**WITHOUT PREJUDICE**

Dear Sirs

1. We refer to your email dated 16 November 2018.
2. Our client objects appointing your surveyors as a single joint expert.
3. We propose one of the motor surveyors named in the list below to conduct the joint pre-repair survey as a single joint expert:-
  - a) Dennis Yap PAL'S Appraiser Pte Ltd
  - b) Kelvin Teo Kelvin Automotive Appraising Services
  - c) Yap Teck Lee LCW Appraiser Pte Ltd
  - d) Yap Teck Chye MC-Coy Appraiser Pte Ltd
  - e) Dixon Yeo Treasure Appraiser Pte Ltd
  - f) Andrew How Prominent Appraiser Services
  - g) Alan Cheong K.H. C L Appraiser Pte Ltd
  - h) T.T. Rajan ST Appraisal Services
  - i) Sebastian Lim Constanct Appraiser Services
  - j) Aeon Auto Consultants LLP
4. Please let us know within two (2) working days whether you are agreeable to the appointment of any of the above motor surveyors as a single joint expert.

Thank You.

Regards  
Huiting  
TEL: 6438 1323 ext 2006

CrossBorders LLC  
133 New Bridge Road  
#23-03/04/05 Chinatown Point  
Singapore 059413  
Tel: (65) 6438 1323  
Fax: (65) 6438 2313

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**From:** Motor Claim - III <[motorclaim@iii.com.sg](mailto:motorclaim@iii.com.sg)>

**Sent:** Friday, 16 November 2018 11:10 AM

**To:** Hui Ting <[huiting@crossbordersllc.com](mailto:huiting@crossbordersllc.com)>

**Cc:** Corene <[corene@crossbordersllc.com](mailto:corene@crossbordersllc.com)>

**Subject:** RE: Our client's vehicle no. SLT8341R (RC); Your insured's vehicle no. SHC8593S - PRI

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

*Best Regards,*

**Gabriel Wee**

Motor Claims Dept.

**India International Insurance Pte Ltd**

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

---

**From:** Hui Ting [<mailto:huiting@crossbordersllc.com>]

**Sent:** 15 November, 2018 5:42 PM

**To:** Motor Claim - III <[motorclaim@iii.com.sg](mailto:motorclaim@iii.com.sg)>

**Cc:** Corene <[corene@crossbordersllc.com](mailto:corene@crossbordersllc.com)>

**Subject:** Our client's vehicle no. SLT8341R (RC); Your insured's vehicle no. SHC8593S - PRI

Your attention is drawn to the CONFIDENTIALITY NOTICE below.

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**WITHOUT PREJUDICE**

Dear Sirs

1. Please find attached our PRI notice dated 15 November 2018 for your kind attention.
2. Please reply email to [corene@crossbordersllc.com](mailto:corene@crossbordersllc.com) & [huiting@crossbordersllc.com](mailto:huiting@crossbordersllc.com)

Thank You.

Regards

Huiting

TEL: 6438 1323 ext 2006

CrossBorders LLC

133 New Bridge Road

#23-03/04/05 Chinatown Point

Singapore 059413

Tel: (65) 6438 1323

Fax: (65) 6438 2313

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Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

# CrossBORDERS LLC

Advocates & Solicitors | Commissioner for Oaths | Notary Public

Our Ref: AJ.tk.RC (SLT8341R)  
Your Ref: SHC8593S

15 November 2018

India International Insurance Pte Ltd  
64 Cecil Street #05-02  
IOB Building  
Singapore 049711  
Attn: Motor Claims Department

BY FAX: 6224 4174 & EMAIL

URGENT

MAIN OFFICE  
133 NEW BRIDGE ROAD  
#23-03/04/05  
CHINATOWN POINT  
SINGAPORE 059413  
TEL: 6438 1323  
FAX: 6438 2313

BRANCH OFFICE  
1 JALAN BERSEH  
#03-12 NEW WORLD CENTRE  
SINGAPORE 209037

PLEASE SEND ALL  
CORRESPONDENCES TO  
THE MAIN OFFICE

WE DO NOT ACCEPT  
SERVICE BY FAX

Dear Sirs

NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY  
CLAIMANT: RELIABLE RIDES PTE LTD  
TRAFFIC ACCIDENT ON 15 NOVEMBER 2018 AT 14:45 HRS ALONG AYE (MCE) BEFORE  
ALEXANDRA ROAD EXIT INVOLVING VEHICLES NO. SLT8341R & SHC8593S & SLC4932B  
& SLP2140P & SLX3253Z

We are instructed by Reliable Rides Pte Ltd to notify you of a road accident on 15 November 2018 at about 14:45 hrs along AYE (MCE) before Alexandra Road Exit involving our clients' vehicle registration number SLT8341R and vehicle registration number SHC8593S driven by your insured at the material time. A copy of the Singapore accident statement/traffic police report filed is enclosed.

As a result of the accident, our clients' vehicle has been damaged. Before our clients proceeds to repair the damaged vehicle, please let us know within 2 working days (excluding any intervening Saturday, Sunday and Public Holiday) of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our clients shall proceed to repair the vehicle without further reference to you.

Please be informed that the said vehicle can be inspected at:

Venue: Reliable Carz Pte Ltd  
Address: 8 Kaki Bukit Avenue 4  
#05-50  
Singapore 415875  
Contact: Jason Lee (8166 9797)

Please liaise with the above workshop directly.

Yours faithfully

*Crossborders LLC*  
Crossborders LLC

Email: [corene@crossbordersllc.com](mailto:corene@crossbordersllc.com) /  
[huiting@crossbordersllc.com](mailto:huiting@crossbordersllc.com)

encs

PLEASE LET US KNOW THE DATE  
OF THE PRE-REPAIR INSPECTION

CONFIDENTIALITY CAUTION  
THIS DOCUMENT IS FOR THE ADDRESSEE(S) ONLY AND MAY CONTAIN CONFIDENTIAL INFORMATION AND/OR MAY BE  
SUBJECT TO LEGAL PRIVILEGE. IF YOU HAVE RECEIVED THIS IN ERROR, PLEASE CONTACT US IMMEDIATELY.

CrossBORDERS LLC

A LIMITED LIABILITY CORPORATION, REGISTRATION NUMBER 201305284K  
GST REGISTRATION NUMBER 201305284K



## 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	15/11/2018 16:35
Date Of Accident	15/11/2018 14:45
Exact Location Of Accident	AYE (MCE) BEFORE ALEXANDRA RD EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT8341R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RELIABLE RIDES PTE LTD
Co Reg No	201611527N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

### Vehicle Particulars

Manufacturer	HONDA
Model	FREED 1.5G HYBRID A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095785788-01
Cover Note Number	

### Driver

Name of Driver	MOHAMAD SALEH BIN ABDUL RAZAK
NRIC No	S7922669F
Date Of Birth	02/08/1979
Occupation	OUTDOOR
Date Of Driving Pass	01/03/2000
Driving Experience	18 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90709524
Fax Number	
Contact Number	OFFICE-90709524
Email Address	NOEMAIL



Address	BLK 211B PUNGGOL WALK #06-631
Postcode	822211
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	5
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)	7
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : MALE
Passenger 3	NAME: : - GENDER: : FEMALE
Passenger 4	NAME: : - GENDER: : FEMALE
Passenger 5	NAME: : - GENDER: : FEMALE
Passenger 6	NAME: : - 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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG STATED VENUE. VEHICLE IN FRONT JAMMED BRAKE SO I JAMMED BRAKE OF MY VEHICLE ACCORDINGLY. SUDDENLY I FELT AN IMPACT OF MY VEHICLE, I ALIGHT FROM MY VEHICLE AND REALIZE THAT VEHICLE B HIT ONTO MY VEHICLE REAR PORTION. AFTER AN IMPACT, I COME TO REALIZE THAT THERE WERE TOTAL OF 5 VEHICLES INVOLVED IN THIS ACCIDENT.

#### Attachment(s)

Are accident photos available for attachment?	YES
---	-----

Was there any video captured by Car Camera? YES  
Remarks/ Reasons: VIDEO FOOTAGE WITH DRIVER  
Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC8593S  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category TAXI  
Name of Driver NG LYE BENG  
NRIC/Passport Number S0890159G  
Contact Number 97575611  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 2  
Passenger 1  
NAME: :  
GENDER: :

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLC4932B  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver HEW FOO YOONG  
NRIC/Passport Number S6974173H  
Contact Number 93857618  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 2  
Passenger 1  
NAME: :  
GENDER: :

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLP2140P  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver LIONEL SIM  
NRIC/Passport Number S8424623I  
Contact Number 91452742  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 1

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SLX3253Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

DENNIS WONG

NRIC/Passport Number

S8218536D

Contact Number

81020282

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**


I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
  - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature  
Date & Time:

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

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

# Accident Sketch Plan

## SKETCH PLAN

AYE (M/E)

E
D
C
A
B

A: SL78341R  
 B: SHC85935  
 C: SL64932B  
 D: SLP2140P  
 E: J6X32532

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to statement.

## DECLARATION

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



Policyholder's Signature  
 Date & Time:

*[Signature]*

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

*[Signature]*

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

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

PRI

#### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	27 Nov 2018 09:44 <a href="#">Edit Reg</a>		16 Nov 2018 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>		<b>[Created by adjuster]</b>							
Insured:	-, Co. Reg. No.: -								
Main Claimant:	<b>RELIABLE RIDES PTE LTD,</b> Co. Reg. No.: 201611527N								
Vehicle Reg. No.:	<b>SLT8341R</b>	Date of Loss:	15/11/2018 14:00 - :59 [12 Months and 1 Days From LTA Reg Date (Man Yr)]						
Claim Type:	<b>TP</b>	Policy/Cover Note No.:							
Vehicle Reg. No. (Insured):	<b>SHC8593S</b>	Policy No. (Claimant):							
		Excess:							
Repairer:	<b>Reliable Carz Pte Ltd (HQ)</b> 8 Kaki Bukit Ave 4, #05-50, 415875 Kaki Bukit - Tel:								
Handling Insurer:	<b>India International Insurance Pte Ltd (HQ)</b> - Tel: 63476100 ... [Handled by <b>Sundari Nagarajan</b> - 6347 6071]								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>ADRIAN LING</b> ] ... <b>[Final Rpt due 27/11/2018]</b>								
<b>ASSOCIATED MAIL RECEIVED</b>		<a href="#">View All</a> <a href="#">Compose Case Mail</a>							
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b>		<a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a>							
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

**\*SLT8341R**  
**[SHC8593S]**  
**TP**  
**RELIABLE RIDES PTE LTD**  
**Nov 15 2018 2:00PM**  
**[-]**  
**Reliable Carz Pte Ltd**

<a href="#">Upload Documents</a>   <a href="#">Upload Photos</a>   <a href="#">Compose New Letter</a>			<b>View</b> <a href="#">View in Browser</a> <input type="button" value="v"/>	
<b>Photos/Images</b>			3 per page <input type="button" value="v"/>	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	<b>Thumbnail</b>	<b>Print</b>
1	19/11/18 19:41	<b>General View</b>	 Load PDF	
2	19/11/18 19:41	<b>Photographs of Damaged Parts</b>	 Load PDF	
<b>Documentation</b>			1 per page <input type="button" value="v"/>	<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)	<b>Thumbnail</b>	<b>Print</b>
1	19/11/18 09:13	<b>Singapore Accident Statement</b>	 Load PDF	

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>	<a href="#">Reset</a>	<a href="#">Save</a>	<a href="#">Print</a>
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/III18020765/ACD3E2

Date: 27/11/2018

### REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No:

Claimant Vehicle No : SLT8341R

Insured Vehicle No : SHC8593S

Date of Loss: 15/11/2018

Nature of Claim:

TP

Claim No: N/A

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SLT8341R**

Make &amp; Model: HONDA FREED HYBRID, 1.5 G (A)

Engine No: LEB5577267

Reg. Date: 14/11/2017 (Man. Year: 2017)

Chassis No: GB71047795

Colour: White

Odometer: 85891 km

Engine Capacity: 1496 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): **Market Value/New Car Price**

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

No

Pre-accident Condition:

### CONDITION OF TYRES

Front Tyre Size: 185/65 R15

Rear Tyre Size:

185/65 R15

Front Left Side: Neuton 6 mm

Rear Left Side:

Neuton 6 mm

Front Right Side: Neuton 6 mm

Rear Right Side:

Neuton 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	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

### INSPECTION

Date of Assignment: 16/11/2018

Date Inspected: 16/11/2018

Inspected At:

Reliable Carz Pte Ltd (HQ)  
8 Kaki Bukit Ave 4, #05-50  
Singapore 415875

Estimated Period of Repair: 0.0 days

Adjuster: ADRIAN LING

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.

## REPAIR DETAILS

### Reference

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 27 Nov 2018)
<b>Parts:</b>	M1-MPV	HONDA FREED HYBRID 1.5 G (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SLT8341R)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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.
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< END OF ESTIMATES >