

ASS. REC. BY:

REF:

CS3/CTL18021090/71 dbSM

Special Instruction:

Surveyor

Muhaimin

ASSIGNMENT (Office)

From (Person):

Elaine Cheong

of

CTL

Date/Time:

21.11.2018 4:34pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBM 2201G

Insured:

GBG 1010D

at Workshop m/s

Albert motor

Tel:

of

Bik 1008 Bukit Merah Lane 3 #01-10

Policy No:

DMCVSN1739311301

Claim No:

SNM18D05145C02

Sum Insured:

Excess:

Make of Veh:

D.O.A.

28.10.2018

(Client's Record)

CA / REV / REP. / REV 24 HRS wpi

22.11.2018 @ 4pm - 5pm

H.O.D. Endorsement:

Date/Time:

2-11-2018 4:48pm

Person Contacted:

Vehicle IN/OUT

| Date/Time | Action/Instruction (X) Estimate |
|-----------|--------------------------------------|
| | FBM 2201G - X |
| | GBG 1010D - CS3/CTL18019916 / Giberl |
| | DA: 28.10.2018 |
| | Tyre brand |
| | |
| | |
| | |

SUMMIT

Tang

REF:

CTI

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No. _____

at Workshop n/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____

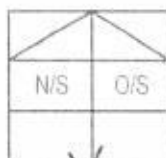
Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 3 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

4-5pm

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No. FBM22016 Yr Regn Aug 17
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover

Truck / Trailer or _____

Make: Hande Fight HatchC.C. 184Colour: white

A/C: Insured / Std / NI / NA

Sp. Reading: _____

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LALPIL709H3110061Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: NI / S/Rim / STD A/Rim orTyre Size: F: 160/70R17R: 140/70R17BS / DUN / EXNOVA / GY / FS / LIZA (MIO) / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 5 mmR/Bal. 5 mm

L/Bal. _____ mm

L/Bal. _____ mm

D.O.A. _____

D.O.I. 22/11/18Survey held at Albert MotorDes. 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

1008 Bm Loe 3 #21-10

NO GIA

Estimated repair range \$2,000 - \$3,000

RECEIVED 07 DEC 2018

30/11/2018

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3Resurvey No. of Trip: -

Survey Fee:

Transportation:

) \$ + RS. \$

) Photos

) Other

TOTAL

Report Format: PRS

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

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

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

CLAIM SUBFOLDER TRACKING

| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'd | Status |
|------|-------------|---------------|--------------------------------|---------|---------------|------------|--------------------------------------|
| Main | 19 Nov 2018 | | 21 Nov 2018 16:34 Assign | | | | New Assignment Cancel Case |

Main

Reference

Claim Details

Documents

Show All

CLAIM SUBFOLDER DETAILS

| | | | | |
|-----------------------------|---|------------------------|----------------------|-------------------------------------|
| Insured: | TE YOU SEAFOOD SUPPLIES, Co. Reg. No.: 53051477W | | [Created by insurer] | |
| Main Claimant: | HUSSIN BIN RAHIM, ID: S7305217C | | | |
| Vehicle Reg. No.: | FBM2201G | Date of Loss: | | 28/10/2018 14:00 - :59 |
| Claim Type: | TP / SNM18D05145C02 | Policy/Cover Note No.: | | DMCVSN1739311801 (Comprehensive) |
| Vehicle Reg. No. (Insured): | GBG1010D | Policy No. (Claimant): | | D18MTMC01004533 |
| | | Excess: | | S\$0.00 |
| Repairer: | Albert Motor Supply Pte Ltd (Bukit Merah) BLK 1008 BUKIT MERAH LANE 3, #01-10, 159722 Bukit Merah - Tel: 98452975 | | | |
| Handling Insurer: | China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Elaine Cheong] | | | |
| Claimant's Insurer: | Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 | | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 30/11/2018] | | | |
| Driver/Custodian (Insured): | SIM KOK HENG (57 / Male), NRIC: S1446782C, Tel: +6586613131 | | | |
| Adj Asg. Remarks: | NO EST, CASE W/O SJE. | | | |

ASSOCIATED MAIL RECEIVED

There are no mail for this case.

View All

Compose Case Mail

ALL ASSOCIATED TASKS

| Due Date | Priority | Type | Task Group | Subject | Handler | View All | Search Tasks | Create New Task | Complete |
|-------------|----------|------|------------|---------|---------|-------------|--------------|-----------------|----------|
| No results. | | | | | | Assigned By | Completed On | Created On | Done? |

MCHM18139884 / Cheng Hoe Motor Pte Ltd - Yishun
 ENTRY DATE & TIME: 29/10/2018 11:10
 SUBMITTED BY: Efeeda Binte Mohamed Othman

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 | 29/10/2018 11:10 |
| Date Of Accident | 28/10/2018 14:25 |
| Exact Location Of Accident | ALONG WOODLANDS IND PK E4 |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|------------------------|
| Vehicle Registration Number | FBM2201G |
| Insured/Policyholder | |
| Name Of Registered Owner | HUSSIN BIN RAHIM |
| NRIC No | S7305217C |
| Email Address | HUSSINRHM@YAHOO.COM.SG |
| Mobile Phone No | (LOCAL) +65-97974625 |
| Alternative Phone No | Others-97974625 |

Vehicle Particulars

| | |
|--------------|----------------|
| Manufacturer | HONDA |
| Model | CBF190X MANUAL |

| | |
|--|---------|
| Exact Purpose for which vehicle was being used at time of accident | PVT 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 | MOTORCYCLE |
|------------------|------------|

Insurance Company

| | |
|---------------------------|-------------------------------------|
| Name of Insurance Company | SOMPO INSURANCE SINGAPORE PTE. LTD. |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | D18MTMC01004533 |
| Cover Note Number | 30/7/18-29/7/19 |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | HUSSIN BIN RAHIM |
| NRIC No | S7305217C |
| Date Of Birth | 25/01/1973 |
| Occupation | INDOOR |
| Date Of Driving Pass | 17/05/2000 |
| Driving Experience | 18 YEARS AND 5 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-97974625 |

| | |
|---|----------------------------------|
| Fax Number | |
| Contact Number | OTHERS-97974625 |
| EEmail Address | HUSSINRHM@YAHOO.COM.SG |
| Address | BLK 748 WOODLANDS CIRCLE #04-502 |
| Postcode | 730748 |
| 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 | CHAIN COLLISION |
| Weather Conditions | AFTER RAIN |
| Road Surface | WET |

Other Information

| | |
|---|-----|
| Was any foreign vehicle involved in this accident? | NO |
| Number of vehicles involved in the accident | |
| Was any body injured in the Accident? | NO |
| Was any injured conveyed to hospital by ambulance? | |
| Was any other material or property damaged? | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver) | 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 SKETCH ATTACHED

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|--------------------|
| Vehicle Registration Number | GBG1010D |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | MR SIM |
| NRIC/Passport Number | |
| Contact Number | 86613131 |
| Address | |
| Postcode | |
| Insurance Company Name | |

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GBD2293M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

LAI CHEE WAH

NRIC/Passport Number

S2672075C

Contact Number

81209551

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

VEHICLE NO.: FBM 2201 G
 INSURER : SOMPO
 DATE & TIME: 28/10/18 2.25 PM

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.

28/10/18

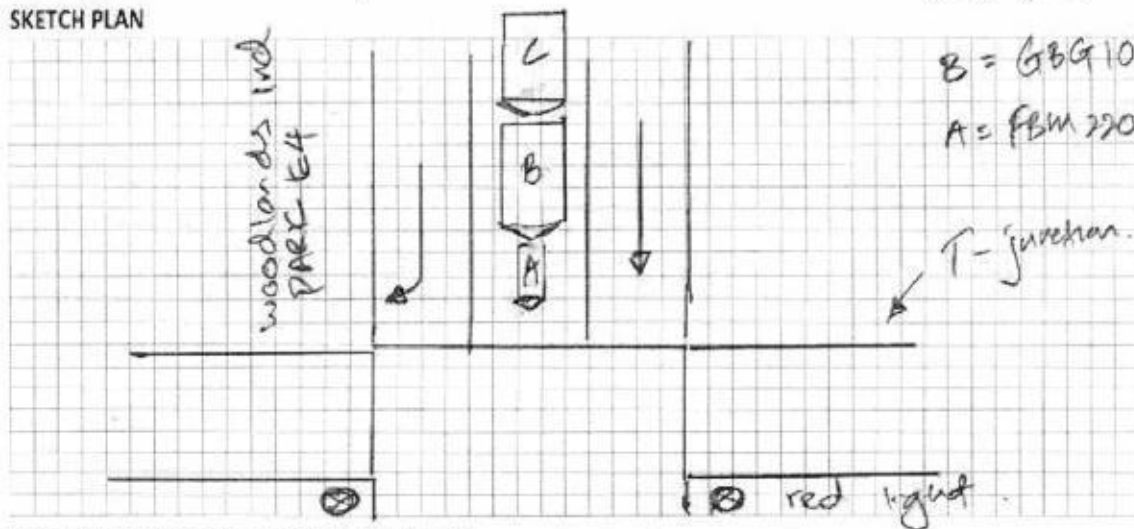
Policyholder's Signature
 Date & Time:

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

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

29-10-18

SKETCH PLAN



C = GBD 2293W

B = GBG 1010D

A = FBW 2201G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28/10/18 @ 1425hrs at junction of traffic light, i stop on red light waiting the light to turn green when vehicle B GBG 1010D hit me from behind. Totally there is three vehicle involved. No injury sustain on all party.

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

DECLARATION

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

[Signature] 29/10/18

Policyholder's Signature
Date & Time:

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

[Signature] 29.10.18
Reporting Centre Personnel's Signature
Name: *[Signature]*
NRIC/FIN No.:

CLAIMS Sketch Plan #3

☐ Claim Own Policy ☐ Claim Third Party ☐ Reporting Only
☐ Claim OD/TP at other workshop

Sketch Plan #3

[> Back to OneMotoring](#)

Enquire Transfer Fee

Enquire Road Tax Payable

| Vehicle Details | | | |
|--|--|---------------------|---------------------------|
| Vehicle No. : | FBM2201G | | |
| Vehicle Type : | P00 - Passenger Motorcycle/Autocycle/Moped | | |
| Vehicle Attachment 1 : | No Attachment | | |
| Vehicle Scheme : | Normal | | |
| Vehicle Make : | HONDA | | |
| Vehicle Model : | CBF190X MANUAL | | |
| Chassis No. : | LALPJL709H3110061 | | |
| Propellant : | Petrol | | |
| Engine No. : | SDH161FMKH3300554 | | |
| Engine Capacity : | 184 cc | | |
| Maximum Power Output : | - | | |
| Maximum Laden Weight : | 298 kg | | |
| Unladen Weight : | 148 kg | | |
| Year Of Manufacture : | 2017 | | |
| Original Registration Date : | 26 Aug 2017 | | |
| Lifespan Expiry Date : | - | | |
| COE Category : | D - Motorcycle | | |
| Quota Premium : | \$3,512.00 | | |
| COE Expiry Date : | 25 Aug 2027 | | |
| Road Tax Expiry Date : | 25 Feb 2019 | | |
| Inspection Due Date : | 25 Aug 2020 | | |
| Intended Transfer Date : | 06 Dec 2018 | | |
| CO2 Emission : | - | | |
| CO Emission : | - | | |
| HC Emission : | - | | |
| NOx Emission : | - | | |
| PM Emission : | - | | |
| The current road tax expiry is 25 Feb 2019. You may renew the road tax from 26 Nov 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 25 Feb 2019, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable. | | | |
| Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred. | | | |
| Amount Payable (From 26 Feb 2019 to 25 Aug 2019) | | | |
| | Amount Before GST (S\$) | GST Amount (S\$) | Amount After GST (S\$) |
| Transfer Fee : | 25.00 | - | 25.00 |
| Sub Total : | | | 25.00 |
| Nett Road Tax Amount (After Offsetting Over Payment) : | 32.00 | - | 32.00 |
| Total Amount Payable : | | | 57.00 |
| Amount Payable (From 26 Feb 2019 to 25 Feb 2020) | | | |
| | Amount Before GST (S\$) | GST Amount (S\$) | Amount After GST (S\$) |
| Transfer Fee : | 25.00 | - | 25.00 |
| Sub Total : | | | 25.00 |
| Nett Road Tax Amount (After Offsetting Over Payment) : | 64.00 | - | 64.00 |
| Total Amount Payable : | | | 89.00 |

You may print this page for reference.

OK

Print

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|-------------------------------------|-------------------|
| Vehicle Owner Particulars | |
| Owner ID Type: | Singapore NRIC |
| Owner ID: | 5217C |
| Vehicle Details | |
| Vehicle No.: | FBM2201G |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 06 Dec 2018 |
| Vehicle Make: | HONDA |
| Vehicle Model: | CBF190X MANUAL |
| Primary Colour: | White |
| Manufacturing Year: | 2017 |
| Engine No.: | SDH161FMKH3300554 |
| Chassis No.: | LALPJL709H3110061 |
| Maximum Power Output: | - |
| Open Market Value: | \$3,424.00 |
| Original Registration Date: | 26 Aug 2017 |
| First Registration Date: | 26 Aug 2017 |
| Transfer Count: | 3 |
| Actual ARF Paid: | \$514.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 25 Aug 2027 |
| COE Category: | D - Motorcycle |
| COE Period(Years): | 10 |
| QP Paid: | \$3,512.00 |
| COE Rebate Amount: | \$3,061.00 |
| Total Rebate Amount: | \$3,061.00 |

The information contained herein is correct as at 06 Dec 2018

OK

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

CLAIM SUBFOLDER TRACKING

| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'd | Status |
|------|-------------|---------------|--|--|--|------------|---|
| Main | 19 Nov 2018 | | 21 Nov 2018 16:34 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](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

| | | | |
|-----------------------------|--|------------------------|---|
| Insured: | TE YOU SEAFOOD SUPPLIES , Co. Reg. No.: 53051477W | | |
| Main Claimant: | HUSSIN BIN RAHIM , ID: S7305217C | | |
| Vehicle Reg. No.: | FBM2201G | Date of Loss: | 28/10/2018 14:00 - :59 [14 Months and 2 Days From LTA Reg Date (Man Yr)] |
| Claim Type: | TP / SNM18D05145C02 | Policy/Cover Note No.: | DMCVSN1739311801 (Comprehensive) |
| Vehicle Reg. No. (Insured): | GBG1010D | Policy No. (Claimant): | D18MTMC01004533 |
| | | Excess: | S\$0.00 |
| Repairer: | Albert Motor Supply Pte Ltd (Bukit Merah) BLK 1008 BUKIT MERAH LANE 3, #01-10, 159722 Bukit Merah - Tel: 98452975 | | |
| Handling Insurer: | China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Elaine Cheong] | | |
| Claimant's Insurer: | Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 30/11/2018] | | |
| Driver/Custodian (Insured): | SIM KOK HENG (57 / Male), NRIC: S1446782C, Tel: +6586613131 | | |
| 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

*FBM2201G (SNM18D05145C02)
[GBG1010D]
TP
HUSSIN BIN RAHIM
Oct 28 2018 2:00PM
[TE YOU SEAFOOD SUPPLIES]
Albert Motor Supply Pte Ltd

| Upload Documents Upload Photos Compose New Letter | | | View View in Browser | |
|---|-----------------|---|---|-------------------------------------|
| Assessment Reports | | | 1 per page | <input checked="" type="checkbox"/> |
| No | Finalized On | Cheng Hoe Motor Pte Ltd (Yishun) | Thumbnail | Print |
| 1 | 29/10/18 14:58 | Accident Statement | Load HTM | |
| Photos/Images | | | 3 per page | <input checked="" type="checkbox"/> |
| No | Finalized On | Cheng Hoe Motor Pte Ltd (Yishun) | Thumbnail | Print |
| 1 | 29/10/18 14:56 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 2 | 29/10/18 14:56 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 3 | 29/10/18 14:56 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 4 | 29/10/18 14:56 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 5 | 29/10/18 14:56 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 6 | 29/10/18 14:56 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 7 | 29/10/18 14:56 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 8 | 29/10/18 14:56 | SCENE [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 9 | 29/10/18 14:56 | SCENE [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | Thumbnail | Print |
| 1 | 06/12/18 19:46 | General View | Load PDF | |
| Documentation | | | 1 per page | <input checked="" type="checkbox"/> |
| No | Finalized On | China Taiping Insurance (Singapore) Pte. Ltd. (HQ) | Thumbnail | Print |
| 1 | 21/11/18 16:33 | PRS | Load PDF | |
| 2 | 21/11/18 16:34 | OI GIA | Load PDF | |
| No | Finalized On | Cheng Hoe Motor Pte Ltd (Yishun) | Thumbnail | Print |
| 1 | 29/10/18 14:55 | Sketch Plan [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 2 | 29/10/18 14:55 | Sketch Plan #2 [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 3 | 29/10/18 14:55 | Sketch Plan #3 [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 4 | 29/10/18 14:55 | Sketch Plan #4 [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 5 | 29/10/18 14:55 | Sketch Plan #5 [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |

Linked Accident Report Documents

| | | | View View in Browser | |
|---------------------------|----------------|----------------------------------|---|-------------------------------------|
| Assessment Reports | | | 1 per page | <input checked="" type="checkbox"/> |
| No | Finalized On | Cheng Hoe Motor Pte Ltd (Yishun) | Thumbnail | Print |
| 1 | 29/10/18 14:58 | Accident Statement | Load HTM | |

| Assessment Reports | | | | 1 per page ▼ | ✓ |
|--------------------|----------------|----------------------------------|--|--------------|-------|
| No | Finalized On | Cheng Hoe Motor Pte Ltd (Yishun) | | Thumbnail | Print |
| Photos/Images | | | | 3 per page ▼ | ✓ |
| No | Finalized On | Cheng Hoe Motor Pte Ltd (Yishun) | | Thumbnail | Print |
| 1 | 29/10/18 14:56 | Accident Photo | | Load JPG | ✓ |
| 2 | 29/10/18 14:56 | Accident Photo | | Load JPG | ✓ |
| 3 | 29/10/18 14:56 | Accident Photo | | Load JPG | ✓ |
| 4 | 29/10/18 14:56 | Accident Photo | | Load JPG | ✓ |
| 5 | 29/10/18 14:56 | Accident Photo | | Load JPG | ✓ |
| 6 | 29/10/18 14:56 | Accident Photo | | Load JPG | ✓ |
| 7 | 29/10/18 14:56 | Accident Photo | | Load JPG | ✓ |
| 8 | 29/10/18 14:56 | SCENE | | Load JPG | ✓ |
| 9 | 29/10/18 14:56 | SCENE | | Load JPG | ✓ |
| Documentation | | | | 1 per page ▼ | ✓ |
| No | Finalized On | Cheng Hoe Motor Pte Ltd (Yishun) | | Thumbnail | Print |
| 1 | 29/10/18 14:55 | Sketch Plan | | Load JPG | ✓ |
| 2 | 29/10/18 14:55 | Sketch Plan #2 | | Load JPG | ✓ |
| 3 | 29/10/18 14:55 | Sketch Plan #3 | | Load JPG | ✓ |
| 4 | 29/10/18 14:55 | Sketch Plan #4 | | Load JPG | ✓ |
| 5 | 29/10/18 14:55 | Sketch Plan #5 | | Load JPG | ✓ |

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/CTI18021090/T1CBS2

Date: 14/12/2018

REFERENCE

| | | | |
|-----------------------|---|----------------------|------------------|
| Handling Insurer: | China Taiping Insurance (Singapore) Pte. Ltd. | Policy No: | DMCVSN1739311801 |
| Claimant Vehicle No : | FBM2201G | Insured Vehicle No : | GBG1010D |
| Date of Loss: | 28/10/2018 | Nature of Claim: | TP |
| | | Claim No: | SNM18D05145C02 |

DESCRIPTION & IDENTIFICATION OF VEHICLE

| | | | |
|-----------------------------|-----------------------------------|-------------|-------------------|
| Reg No: | FBM2201G | Engine No: | SDH161FMKH3300554 |
| Make & Model: | HONDA CBF 190, 184cc | Chassis No: | LALPJL709H3110061 |
| Reg. Date: | 26/08/2017 (Man. Year: 2017) | Odometer: | 0 km |
| Colour: | White | | |
| Engine Capacity: | 184 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: | 110/70R17 | Rear Tyre Size: | 140/70R17 |
| Front Left Side: | Michelin 5 mm | Rear Left Side: | Michelin 5 mm |
| Front Right Side: | 0 mm | Rear Right Side: | 0 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: | 21/11/2018 | |
| Date Inspected: | 22/11/2018 | Inspected At: Albert Motor Supply Pte Ltd (Bukit Merah) BLK 1008 BUKIT MERAH LANE 3, #01-10 Singapore 159722 |
| Estimated Period of Repair: | 3.0 days | |

Adjuster: MOHD TAUFIKH BIN HAMID

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 \$2,000.00 - \$3,000.00

REPAIR DETAILS

Reference

| | | |
|----------------------|--|---|
| Part Source: | (Last Synchronised: 14 Dec 2018) | |
| Parts: | N/A | HONDA CBF 190 184cc (Model not available in database) |
| Labour: | Repairer's | (Price-denominated Standard List) |
| Print Code: | (Unsubmitted, no print-code for FBM2201G) | |
| 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 >