

ASS. REC. BY:

REF: CS / CTU8021094 / Kqbnz | Special Instruction:

SURVEYOR:

ASSIGNMENT (Office)

Maxima

From (Person): Catherine Thia of CIL Date/Time: 21-11-2018 4:01pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SDZ 7132Y Insured: GBC 8222J

at Workshop m/s Ready Auto Tel: 6481 0304

of 10 AMK Ind Park 2A #03-06

Policy No: PNCVSN1223661806 Claim No: SNM18D0342402

Sum Insured: Excess:

Make of Veh: D.O.A. 16-11-2018
(Client's Record)

CA / REV / REP. / REV 24 HRS wpi 23-11-2018 H.O.D. Endorsement:

Date/Time: 21-11-2018 4:24pm Person Contacted: Sulynn Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SDZ 7132Y - X
	GBC 8222J - X
	Kenneth finalised CS \$2800, 4 days
	Ated \$1274, 31%.

REF: C11

ASSIGNMENT

From:

Date: 23/11/18

Estimated Cost:

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

To Inspect Vehicle No:

SDZ 7132 Y

at Workshop m/s

Ready Auto

of

10 Amk Ind. park 2A #03-06

Insured:

Policy No.

Claims No.

Sum Insured:

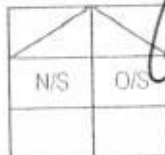
Excess:

(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:

04

days

Res.: Yes or No

Lum Sum:

20

%

3 Val: Yes or No

CA / REV / REP. / 24 HRS ^{1wp}

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SDZ 7132 Y

Yr Regn:

05, 16

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

Truck / Trailer or

Make:

Volkswagen ^{a)} Golf TSi 1395

Colour:

M. P. White

A/C:

Insured / Std / NI / NA

Sp Reading:

40408

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WVWZZZ AU 86W273517

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

225/35ZR19

R:

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

TOYO / YOKO or

Continental

Front

Rear

R/Bal.

7

mm

R/Bal.

6

mm

L/Bal.

7

mm

L/Bal.

6

mm

D.O.A.

16/11/18

D.O.I.

23/11/18

Survey held at

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

O/S M

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

Date / Time

Action / Instruction

26/11 File pass to Catherine

RECEIVED 26 NOV 2018

Date/Time, File Pass to?



Preli. Report

1) 28/11 ^{Final}

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

4

Resurvey No. of Trip:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation

) \$ + P.S. \$

) Photos

) Others

Report Format :

MER-TP

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

2800

TOTAL

220

...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 16:01 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	M/S AMORE FITNESS PTE LTD, Co. Reg. No.: 198700512K		
Main Claimant:	AARON L KALAICHELVAN, ID: S1814784Z		
Vehicle Reg. No.:	SDZ7132Y	Date of Loss:	16/11/2018 13:00 - :59
Claim Type:	TP / SNM18D05426C02	Policy/Cover Note No.:	DMCVSN1223661806 (Comprehensive)
Vehicle Reg. No. (Insured):	GBC8222J	Policy No. (Claimant):	A 28751615 AVW
		Excess:	\$50.00
Repairer:	Ready Auto Care Pte Ltd (HQ) Blk 10 Ang Mo Kio Industrial Park 2A, #03-06, AMK Auto Point, 568047 Ang Mo Kio - Tel: 64810304		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Catherine Thia]		
Claimant's Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 30/11/2018]		
Driver/Custodian (Insured):	PUN CHOON KWONG (69 / Male), NRIC: S2579106A, Tel: +6590226900		
Adj Asg. Remarks:	NO EST, CASE WITH 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.									

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	16/11/2018 16:43
Date Of Accident	16/11/2018 13:30
Exact Location Of Accident	JALAN KAYU
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDZ7132Y
Insured/Policyholder	
Name Of Registered Owner	AARON L KALAICHELVAN
NRIC No	S1814784Z
Email Address	DINASH1997@LIVE.COM
Mobile Phone No	(LOCAL) +65-92977945
Alternative Phone No	OFFICE-92977945

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF-1.4 (A)

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28751615 AVW
Cover Note Number	

Driver

Name of Driver	DINESH KALAICHELVAN
NRIC No	S9721525A
Date Of Birth	25/06/1997
Occupation	INDOOR
Date Of Driving Pass	22/05/2018
Driving Experience	0 YEAR AND 5 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92977945
Fax Number	
Contact Number	
EEmail Address	DINASH1997@LIVE.COM

Address 12 JALAN TARI DULANG
Postcode 799328
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured PARENT
Vehicle Registration Number of Driver's Own Vehicle -
-
Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE
Weather Conditions CLEAR
Road Surface DRY

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? 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: : NAJEEM RIVIA MY, 97951467
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 STATEMENT

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 GBC8222J
Vehicle Make/Model/Colour VOLKSWAGEN TRANSPORTER
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver PUN CHOON KWONG
NRIC/Passport Number S2579106A
Contact Number 90226900
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

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.
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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:

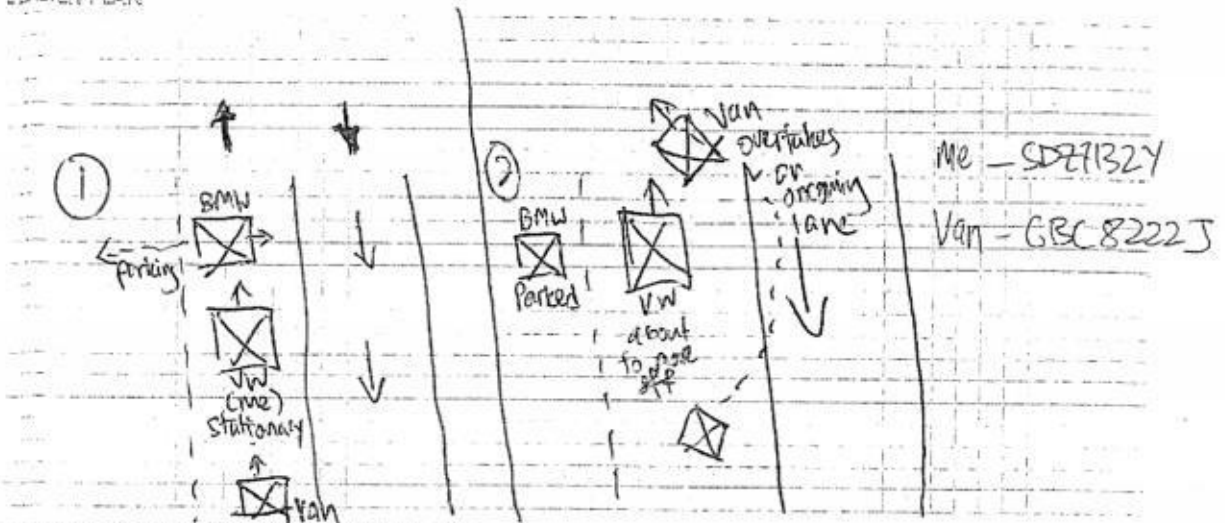
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 16/11/18 1645

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Along Talan Kayu, as I was waiting for the car in front of me to park along the road. As I was stationary, a van behind me decides to overtake on the oncoming lane. (I did not know or see this overtake as I was waiting for the car in front to park and clear the road). As I was ~~about~~ moving off, the van which was overtaking collided with the front right of my vehicle as he attempted to come back into the correct lane. My front right wing was dented, and light ~~scrape~~ scrape on the van. Collision speed: my car was moving under 20 km/h, the van was ~~in faster~~ as he was overtaking.

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time: 16/11/18 1645

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

Ready Auto Care Pte Ltd - We Care For All Your Car Needs

Blk 10 # 03-06 AMK Auto Point, Ang Mo Kio Ind Park 2A, Ang Mo Kio Ave 5. Singapore 568047

Tel : 64810304 Fax : 64815587

Reg No : 200600989K

GST No : 200600989k

China Taiping Insurance (Singapore) Pte Ltd

Estimate Repair

Motorcar Claim Department

Attn Ms Catherine Thia

Date : 22/11/2018

Tel

Fax 6224 7175 / 7478

Accident Involving SDZ7132Y & GBC8222J On 16/11/2018 Along Jalan Kayu

SDZ7132Y

Volkswagen 1.4

Item	Descriptions	Amount
1	Front Right Fender	<i>Rh</i> \$ 580.00 ✓
2	Front Bumper	<i>Rh</i> \$ 1,080.00 ✓
3	Front Right Bumper Retainer	\$ <i>m</i> 74.00 ✓
4	Front Right Door	\$ -
5	Front Right Side Mirror	\$ -
6	Front Right Sport Rim	<i>Rd</i> \$ 1,100.00 ✓

Total For Parts(Less 10%) \$ 2,834.00

Labour & Misc

1	To Remove All Damaged Parts, Knock Out Dents, Jack Out Damaged Panel	
	Panel, Adjust, Replace, Reshape, Cut, Weld, Refix & Realign Body Structure	\$ 450.00 <i>400</i>
2	Spray Painting For New And Repair Parts Including Supply Of Paints Materials	\$ 680.00 <i>450</i>
3	Computerise 4 Wheels Alignment	\$ 60.00 ✓
4	Cavity Preservation On All Affected Areas	\$ 50.00 <i>30</i>
		\$ 1,240.00

Total For Parts & Labour \$ 4,074.00

Ready Auto Care Pte Ltd

Sulynn - 96606551

No Of Days For Repair 5 Days

4 days

Not Noted

11 Nov 8?

Running After Paint



LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer:

Signature:

Date:

Kg

Ready Auto Care Pte Ltd - We Care For All Your Car Needs

Blk 10 # 03-06 AMK Auto Point, Ang Mo Kio Ind Park 2A, Ang Mo Kio Ave 5. Singapore 568047

Tel : 64810304 Fax : 64815587 Reg No : 200600989K GST No : 200600989k

China Taiping Insurance (Singapore) Pte Ltd

Estimate Repair

Motorcar Claim Department

Attn Ms Catherine Thia

Date : 22/11/2018

Tel Fax 6224 7175 / 7478

Accident Involving SDZ7132Y & GBC8222J On 16/11/2018 Along Jalan Kayu

SDZ7132Y

Volkswagen 1.4

Item	Descriptions	Amount
1	Front Right Fender	\$ 580.00
2	Front Bumper	\$ 1,080.00
3	Front Right Bumper Retainer	\$ 74.00
4	Front Right Door	\$ -
5	Front Right Side Mirror	\$ -
6	Front Right Sport Rim	\$ 1,100.00

Total For Parts(Less 10%) \$ 2,834.00

Labour & Misc

1	To Remove All Damaged Parts, Knock Out Dents, Jack Out Damaged Panel	\$ 450.00
	Panel, Adjust, Replace, Reshape, Cut, Weld, Refix & Realign Body Structure	\$ 680.00
2	Spray Painting For New And Repair Parts Including Supply Of Paints Materials	\$ 60.00
3	Computerise 4 Wheels Alignment	\$ 50.00
4	Cavity Preservation On All Affected Areas	\$ -
		\$ 1,240.00

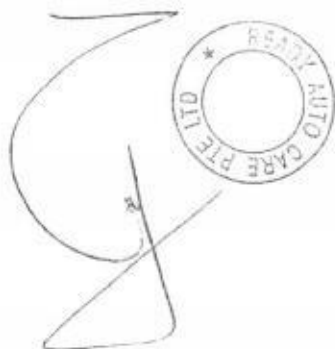
Total For Parts & Labour \$ 4,074.00

Ready Auto Care Pte Ltd

Sulynn - 96606551

No Of Days For Repair 5 Days

4 days



Not Notified
L1 by 8280d
Runny After Paint

4 swap = \$ 2795

4 days.

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: CS/CTI18021094/KQBN2

Date: 29/11/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN1223661806
Claimant Vehicle No :	SDZ7132Y	Insured Vehicle No :	GBC8222J
Date of Loss:	16/11/2018	Nature of Claim:	TP
		Claim No:	SNM18D05426C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SDZ7132Y	Engine No:	CZD512269
Make & Model:	VOLKSWAGEN GOLF, 1.4 (A)	Chassis No:	WVWZZZAUZGW273517
Reg. Date:	20/05/2016 (Man. Year: 2016)	Odometer:	40408 km
Colour:	Metallic Pearl White		
Engine Capacity:	1395 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:	225/35 ZR19	Rear Tyre Size:	225/35 ZR19
Front Left Side:	Continental 7 mm	Rear Left Side:	Continental 6 mm
Front Right Side:	Continental 7 mm	Rear Right Side:	Continental 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,834.00	2,550.60	283.40	10.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,240.00	940.00	300.00	24.19
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	4,074.00	3,490.60	583.40	14.32
Approved Total (Overridden) (S\$)		2,800.00		
(S\$)	4,074.00	2,800.00	1,274.00	31.27
+ GST 7.00/7.00% (S\$)	285.18	196.00	89.18	31.27
Nett Amount (S\$)	4,359.18	2,996.00	1,363.18	31.27

INSPECTION

Date of Assignment:	21/11/2018	
Date Inspected:	23/11/2018	Inspected At: Ready Auto Care Pte Ltd (HQ) Blk 10 Ang Mo Kio Industrial Park 2A, #03-06, AMK Auto Point Singapore 568047

Estimated Period of Repair: 4.0 days

Adjuster: KENNETH KONG

Manager: SHIAU CHAN

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: 29 Nov 2018)
Parts: 144	VOLKSWAGEN GOLF 1.4 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SDZ7132Y)	
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		*FRONT RIGHT FENDER	Bent	580.00 F	*580.00 FL
2	1		*FRONT BUMPER	Buckled	1,080.00 F	*1,080.00 FL
3	1		*FRONT RIGHT BUMPER RETAINER	Necessary	74.00 F	*74.00 FL
4	1		*FRONT RIGHT DOOR (NPA)	Repair	0.00 F	*- FL
5	1		*FRONT RIGHT SPORT RIM	Dented	1,100.00 F	*1,100.00 FL
F=Franchise part. L=ListItemDisc.						
Sub Total (S\$)					2,834.00	2,834.00
- List Item Discount on L Items 0.00/10.00% (S\$)					0.00	283.40
Total Parts (S\$)					2,834.00	2,550.60

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
Labour Items				
1	TO REMOVE ALL DAMAGED PARTS,KNOCK OUT DENTS,JACK OUT DAMAGED PANEL PANEL,ADJUST,REPLACE,RESHAPE,CUT,WELD,REFIX & REALIGN BODY STRUCTURE	New	450.00	400.00
2	SPRAY PAINTING FOR NEW AND REPAIR PARTS INCLUDING SUPPLY OF PAINT MATERIALS	New	680.00	450.00
3	COMPUTERISE 4 WHEELS ALIGNMENT	New	60.00	60.00
4	CAVITY PRESERVATION ON ALL AFFECTED AREAS	New	50.00	30.00
Gross Labour Cost (S\$)			1,240.00	940.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >