22/03/2002 ASS. REC. BY		REF: CS	3/071180	22015/Ud	Special Ins	struction:	
Surveyor:	Martins.	A	SSIGNMI	ENT (Office)			
Norman From (Person): OHNORING This	4 of		CIL	Date/	Time: 07122018 1.09p	M
Estimated Cos	st:						
To Inspect Ve	STTP RES / OD R	SIC SIC	NV/MV/C	S		GBF 9162B	
at Workshop i	m/s	Bluwey A	Intomotive				-
of		1 Kaki Bu	kil Ave	6 #01-28			
Policy No:	DMCNEW 30 28	541800		Claim No:	Symiso	05657(02	
Sum Insured:				Excess:			
Make of Veh: (Client's Record				5	D.O.A	03.12.2016	
CA / REV /	REP. / REV 24 01-12 2018 158	HRS 'Wp'	Contacted: _	Sally.	H.O.	D. Endorsement:	
Date/Time	Action/Instruction						
	OBF 9167B-						
						111	

			1		1	
(08/11/13) wef	REF:	(111/			
ASS. REC. BY: MCreus		ASSIC	SNMENT			
1				10000	1	-118
From:	Date:		Voli IVO.			
Estimated Cost				.Cycle / Bus / Van / Lo	orry / Taxi / Prime Mo	ver i
OD TEL WS TE RESTON RESTE	EVA / INV / MV	_	Truck / T	1 19		. 0 .
To Inspect Vehicle No:	>2c \$101	X	Make:	KIA C	enetoles co	
at Workshop m/s	311		Colour	Chen		Std/NI/NA
of		* 7	Sp.Reading	1884	T/Radio: Insured /	Std / NI / NA
Insured:	2 20		Eng/No:	0 0 /		
Policy No.			C/No:	KNAF	1 41MJ5	765107
Claims No.			Gen. Cond: 600	/ Fair / Poor / Burn	t	
Sum Insured:	Excess:		Steering: Inorde	/ Jammed / Leaked	/ Burnt or	1000
(Client's Record)			Brake: hards	Jammed / Leaked	/ Burnt or	
Make of Veh:			Modi: Nil / 6	IRIM + STD A/Rim o		
			Tyre Size:	F: 195	165n1	(
(Policy Condition)			15	R:	1	
Remark: The veh had commenced	its N	IS OIS	BS / DUN / EXN	IOVA / GY / FS / LIZA	/ MIC / OHTSU / PIR	SUMI/
repair at the time of inspe	ection.	12	TOYO / YOKO	or nex	en	
Bal. or Market Value:	. 4		Front	1	Rear	1
THE STATE OF THE S	onsistent? : Yes or No)	R/Bal.	O mm	R/Bal.	6 mm
O Accident reports	onsistent? : Yes or No		L/Bal.	mm	L/Bal.	5 mm
			D.O.A.3/12	1.	D.O.I. 7/	Mil
Est. Repairs: 6 days	3 Val.: Yes or No		Survey held at	14		1.9
Lum Sum: %	5 val 1es of No	·			1 N/O 1 1/O 1 D - 6	
CA / REV / REP. / 24 HRS			Des. of Damage	es: Frt / Rear / O/S	I N/S / U/C / ROOT	op or
Date: Person Cont	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	de: IN / OUT	The IIIC I	Chassis frame / Boo	ly Structure affected	due to collision
Date / Time Action / Instructio	12A4	4896	The O/C /	Chassis frame 7 Boo	y Structure anecieu	due to comsion.
No Seek	/					
1 6	7					
4 0						
Date/Time, File Pass to? : Pr	eli. Report	1	Days Of Repa	ir: 6		
	nal Report		Resurvey No.		Survey Fee:	150
Date/Time, File Return to?	**************************************				Transportation:	
2)		Add Fee	: Site In	sp (\$	S + RS,SI	
			: Intervie	ew (\$) Photos	
Report Format : PRQ.			: Tech.	Invs (\$) Others	
Lump Sum / I.B.I: (\$)		: Week	end (\$)	
4.4.11					TOTAL	150

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adi Submitted	Ins Auth'ed	Status	
Main	04 Dec 2018		07 Dec 2018 13:09 Assign		vio) Submitted	ns Addred	New Assignment Cancel Case	t
	Main	R	eference	CI	aim Details	Doc	uments	Show All
CLAIM S	UBFOLDER DET	AILS					Created by insure	-1
Insured:		M/S V	VOON PTE LTD,	Co. Reg. No.:	200405731F		created by insure	ir]
Main Clain	nant:	HONG	JIAWEI, ID: S	8810015H				
Vehicle Re	g. No.:	SLC8			ate of Loss:	10	3/12/2018 08:00 -	
Claim Typ	30		SNM18D056570		olicy/Cover Note No.:		MCVSN3028541800 Comprehensive)	
Vehicle Re	g. No. (Insured):	GBF91	62B	P	olicy No. (Claimant):		800054864	
					ccess:		\$0.00	
Repairer:		Bluwe 417883	Automotive Ser Kaki Bukit - Tel:	rvice Pte Ltd (HQ) 1 Kaki Bukit Ave	enue 6, #01-28/3	37/53/55/56 Autoba	y@Kaki Bukit,
Handling I		China	Taiping Insuran	ce (Singapore) Pte. Ltd. (HQ) - T	el: 6380 6111	filandled by 6-st.	
Claimant's	Insurer:	AIG A	sia Pacific Insura	ince Pte. Ltd.	(SG) - Tel: 65-6419	3000	Indidied by Cathe	rine Thia]
Adjuster:		LKK A	uto Consultants	Pte Ltd (HO)	Tel: 6256-3561 [Final Pat due	10/12/20101	
Driver/Cus	todian (Insured):	LOW LE	EONG BENG (53 /	Female), NRI	C: S1650833J, Tel:	+6583301811	10/12/2010]	
Adj Asg. R	emarks:	NO EST	, CASE W/O SJE.		161			
ASSOCIA	TED MAIL REC	EIVED						
	no mail for this ca					Vie	w All Compos	e Case Mail
mere are i	io maii for this ca	ise.						
B								
ALL ASSO	CIATED TASK	S			ve en l			
Due Dat	e Priority	Tuno Tarte				arch Tasks	Create New Task	Complete
	e Priority	Type Task 6	roup Subject	t Handler	Assigned By	Completed		

MCC818156539-01 / Cycle & Carriage Automotive Pte Ltd - Pandan Gardens ENYRY DATE & TIME: 03/12/2018 19:29 SUBMITTED IV: Mebol Tan Erleh Yuen

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 witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies in riul 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 Singebore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the ledgement of this report to the insurers, you hereby persent to the archiving of this report at the centre and to copies of the report being made available

Market St. Market St. Co.	ACCIDENT STATEMENT
Date Of Report	03/12/2018 19:29
Date Of Accident	03/12/2018 08:15
Exact Location Of Accident	BKE EXIT TO KJE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLC810X
Insured/Policyholder	
Name Of Registered Owner	HONG JIAWEI
NRIC No	S8810015H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91511688
Alternative Phone No	OFFICE-91511688
Vehicle Particulars	
Manufacturer	KIA
Model	FORTE K3-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL 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 CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE, LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800054864
Cover Nate Number	

_			_	_	
IJ	п	n	Λ	а	и

HQ WEI JIE
\$8822261Z
26/06/1988
INDOOR
11/01/2008
10 YEARS AND 10 MONTHS
MALE
(LOCAL) +65-91571688
NOEMAIL

Address

BLK 298C COMPASSVALE STREET

#16-88 SINGAPORE

Postcode

543298

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Insurance Company of Driver's Own Vehicle

Vehicle

FRIEND

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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/affering accident claims assistance.

NO

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of Intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBF9162B

Vehicle Make/Model/Colour

SILVER NISSAN VAN

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE LOW LEONG BENG

Name of Driver

NRIC/Passport Number

\$1650833J

Contact Number

63310811

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process
- ? 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 paticy liability on the part of the insurance companies.
- 5 Any false reporting may be released 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.
- 89 the longment of this report to the insurers, you hereby consent to the archiving of this report at the rentre and to consent to the report being made available aforesaid.
- S. Consent under the Personal Data Protection Aut (PDPA)

Lunderstand, acknowledge, agree and consent that:

- [3] My insurer, my workshop and the General Insurance Association of Singapore ("GLA") 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 personal information and disclose and transfer such personal information to all insurer(s) who have insured sehide(s) involved in this accident (all insurer(s) who have insured sehide(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 (lawers/law time, the Monetary Authority of Singapore and any relevant government agency/authority (such as the policet 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 claim;
 - full entrying out and/or dealing with my instructions or responding to any enquiries by me.
 - (iv) administering my Claritis fincluding the mailing of correspondence, statements, invoices, fedorts or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well in on the external Cover of envelopes/mail packages); and/or
 - (v) complying with applicable Liw in administering, processing, handling and/or dealing with my claims trollectively the "Furposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyert/law terms, may/are surmitted to (blied, 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 injuriers and/or GIA to their third party service principles of agents including their lawyers/law firms), which may be sized outside of Sidgapore, for one or more of the across Furtions.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose or fraud detection investigation and management in present and all future claims.
- (e) the information so collected under (d) show may be shared / disclosed
 - till to all insufers and/or any Other third parties that assist in evaluating, investigating, controlling or managing fraud regulators, law enforcement and agreement agencies as reasonable required for the purposes stated, or

his for complying with requirements under any regulations, laws or court orders

Policyholoer's Signature

Oriver's Signature

Date & Time: 3/12/16

1220

Reporting Centre Personnel's Segranger

Name:

NAIC/FIN NO.

Sketch Plan #2

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Dr 3/2/2013 1	at ORIS, I was travelling use fix E existing to KJE
Av mir ford	The state of the s
The the there was	wile stop in the queux worting fort to our to
BKE . May 1 m	1. Keens 1. a 87-p portion him - Out of a socilationly,
a Nisa - Cast	2/62 8 1/2
demogri du	
Shuller Gen	more body wiften the occartions.
1	
Immediately a m	we have appointed the offer his activioned in accordant
claims and ex	Me stup regain I have turned item his request.
	The second
DECLARATION	
	oculars are true in every respect.
1_	//
17	40
Solicyholder's Signature	Orace's Signature Redocting Control Personnel' Sura man
Date & Time	Ofwer's Signature Reporting Control Personner', Signature III dever is not the policyholder) Name
	Date 5 7 mm

Police Report



12018122AG007

Police Station Of Origin: Bottok North N.P.C 30 Bedok North Road 52NGAPORE 450578 Tol No: 1800-2449999

POR NO TOPHOS SON TOPHOS

CONTINUATION OF REPORT

Namo	1 CALL TO					
	LOW LEONG BENE	-		ID No		S1650833J
Rolated Vehicle	GBF91628 (VBI)					
				Conta	a No	83301611
Hospital/Clinic	NR	_		~		
1887 - 1887 - 1887 - 1987			gir govi i	Class Davin Licens	3 20 &	Class: Nil. Date of Expry Nil.
Date Treatment	MIL	-			Date	
No. of Days gran	ind Medical Leavo	INIL	Date Disc	apres	MIL	
	THE PERSON NAMED IN COLUMN TWO	T. COLLEGE	Degree of			
Mame	SIL GW OH				-	
	The same			FD No		S8822261Z
Related Vehicle	SLC810X (Car)					
				Come	ET NO	91511688
lospita/Clinic	COMPAGEMENT					
	COMPASSVALE 29	TA MEDICAL	CUNIC	Drivan Licens Expens	2	Class: 3 Date of Expiry: NIL
ale Treatment	03/12/2018		Date Disc	home	1 0344	20010
2 of Days grante	d Medicar Leave	03	Degree of		1001	CIEVIA

Brief Details.

On 3/12/2019, at 8.15am_I was driving along BKE in my vehicle, bearing car plate number SLC310X, on the 2nd lane to the last. There was heavy traffic at that line. All the cars were questing to go out of Exil 5, towards KJE. The cacin from proving and shopped: I also moved and stopped.

Suddeniya break or the rear of rays vehicle is I went to

sering the car plate furnitier GBF91828, did not secure vehicles and exchanged particulars. The cracked and dented. The rear skin of my speck and my shoulder. I also had an headache. I also had an headache. I also had an headache. I also had an headache.

! am lodgio

GVernment property was damaged.

Any Pedesti

Police Report





Potos Station Of Origin Segot North N P C 30 Beack North Road SINCAPORE 460676 Tol No 1800-7449889

Depos No. 1/20181254/2017

		PIC ACCIDENT	Services - The servic	
04/125	me Repor 1018 13:15		Vide Report No :	Stabon Diary No.
	Sand Park	ייבוייקע		
Name (i informan	t	Activess: APT BLK 298C COMPASSIVA	ALE STREET #16-88
MRIC N	/ 10 No.: 0 / \$8822	251Z	SINGAPORE 643298 Contact No Home/Office	Matura Carranga
National SINGAP	ity: ORE CITI	ZEN	Engl.	Mobile 91511898
Sex: Made	Aga: 30	26/06/1988	Type of Informant	THE STREET STREET
race: hinese			Language: English	Institution / School Name
ogiatics o	usuader. ov:		Driving Licence Information: Class: 3	Dane of Expry:

Type of Accident.	· Injury - Others	Drink Orive No	DisterTense of Account: 03/12/2018 08 15	Strants Poor
HERE near to	EXPRESSIVAY	Road Surface:	1022[1032]	
Hear Mills Flow and				Road Speed Limit
carriaged	<u> </u>			Traffic Volume Heavy
tween Mov		16.		Anyone conveyed by ambulance: No
-44			Tr.	- 10, a. 1 10 marks
Fen 62EE			3	
				ghtly 0 maged
310X				dously D

titian Crossing: NA

Police Report



Police Station Of Chagan-Backast North N. P. C. 30 Beddik North Road SINGAP ORE 489676 Yet No. 1600-2440009

BON WY "SOIESEDAROS!

CONTRIBUATION OF REPORT

Street Plan informant is not able to provide sketch plan

IMPORTANT: Please attach a topy of your values insurance Certificate to this report. If you don't have the certificate with you now, clease fax a copy to 65474885 stating the report number as reference

Signature Of Officer Recording The Report Sgt 2 BOE 74 2 1 51 54 5

Signature Of Informant

Signature S

22018 13:16

TP / AEG ABDUELE Cation Of Case:

Authentical

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6.Raffles Quay-sta-00 Singapore-048380
Tel (6) 6.224 0010 Fax (65) 6224 0030
Descripting Hours: Monday to Friday, 09:03—37:00
ULM: \$648300300 / GTT Rig. No.: Microsly 10.

	ADDENDUM
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:
	Original Report No : MCC E181 56539 Vehicle Registration No. O. C. C.
	Name Constrough in March 110 1781 JIE NRIC/FIN/Parenter 198222217
	(Venicle Driver / Vehicle Owner) (*) Please delete as appropriate
	Address Blk 298. C Compussivale Street #16-88 singapore(5432)
	Contact (Tcl) :Mobile No.: 9/5/ 1688
	Email Address :
	Date of Accident : 03 13 30.8 Time of Accident : 08 15
	Place of Accident : BKE EXT 70 KJF
	Insurance Company:
	ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: Le - Ot Gold & State & Plan
	Attach Third Party Valuele Detail
	Attach Police Report
	Attach Videos.
-	

Policyholder / Driver's Signature Date:

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

Date:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	0015H
Vehicle Details	001314
Vehicle No.:	SLC810X
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Dec 2018
Vehicle Make:	KIA
Vehicle Model:	FORTE K3 1.6A
Primary Colour:	Grey
Manufacturing Year:	2017
Engine No.:	G4FGJH695444
Chassis No.:	KNAFJ411MJ5765102
Maximum Power Output:	95.3 kW (127 bhp)
Open Market Value:	\$11,400.00
Original Registration Date:	16 May 2018
irst Registration Date:	16 May 2018
ransfer Count:	0
actual ARF Paid: Intended PARF Rebate Details	\$11,400.00
ARF Eligibility:	Yes
ARF Eligibility Expiry Date:	15 May 2028
ARF Rebate Amount:	\$8,550.00
ntended COE Rebate Details	\$0,550.00
OE Expiry Date:	15 May 2028
OE Category:	A - Car up to 1600cc & 97kW (130bhp)
OE Period(Years):	10
P Paid:	\$38,510.00
OE Rebate Amount:	\$36,346.00
otal Rebate Amount:	\$44,896.00

The information contained herein is correct as at 07 Dec 2018

OK

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

Case 1	Votified	Est Submitted	Adj Assigned	Adj Rpt		Adj St	ubmitted	Ins Auth'ed	Sta	tus	
Main	04 Dec 2018		07 Dec 2018 13:09 Edit Adj Rpt	\$\$0.00 Edit E	stimates	S\$0.0	Rpt		Rej	Pending for Survey Report Cancel Case	
м	lain	R	eference		Claim Det	ails		Document	s		Show All
CLAIM SUB	FOLDER DE	TAILS				1	Created I	by insurer]			
Insured:	M/S WOO	N PTE LTD, Co	Reg. No.: 2004057	731E							
Main Claimant:	HONG JIAWEI, ID: S8810015H										
Vehicle Reg. No.:	SLC810	SLC810X			Date of l	Loss:		2/2018 08:00 - :59 onths and 17 Days From LTA Reg Date (Man Yr)]			
Claim Type:	TP / SNI	TP / SNM18D05657C02				over [DMCVSN3028541800 (Comprehensive)				
Vehicle Reg. No. (Insured):					Policy No (Claiman		1800054864				
					Excess:	5	5\$0.00				
Repairer:	Bluwel At Tel: 67452		ce Pte Ltd (HQ) 1	Kaki Bukit	Avenue 6,	#01-28	3/37/53/55	/56 Autobay@Ka	ki Bukit,	417883 K	aki Bukit
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 [Handled by Catherine Thia]										
Claimant's Insurer:	AIG Asia Pacific Insurance Pte. Ltd. (SG) - Tel: 65-6419-3000										
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 [Handled by MARCUS CHUA] [Final Rpt due 18/12/2018]										
Driver/Custo dian (Insured):		IG BENG (53 / Fer	male), NRIC: S165	50833),	Tel: +6583	301811					
Adj Asg. Remarks:	NO EST, CASE W/O SJE.										
ASSOCIATI	ED MAIL RE	CEIVED						Vi	ew All	Compose	Case Ma
There are no	mail for this	case.									
ALL ASSO	CIATED TAS	iks⊟				Vie	ew All S	Search Tasks	Create Ne	ew Task	Complet
	Priority	Type Task	Group Subject	ct Hand	dler A	ssigne	d By	Completed On	Cr	eated On	Don

Claim Documents

*SLC810X (SNM18D05657C02)

[GBF9162B]

TP

HONG JIAWEI

Dec 3 2018 8:00AM

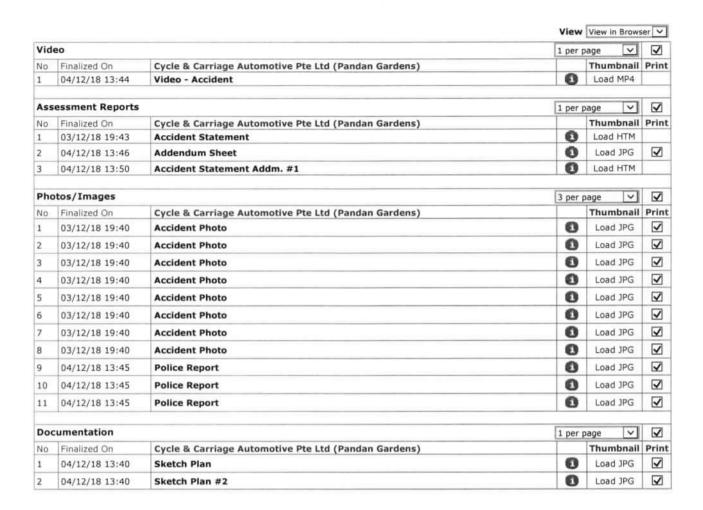
[M/S WOON PTE LTD]

Bluwel Automotive Service Pte Ltd

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No	Finalized On	Cycle & Carriage Automotive Pte Ltd (Pandan Gardens)		Thumbnail	Print
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Ass	essment Reports		1 per p	page 🔻	V
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1	03/12/18 19:43	Accident Statement	Ð	Load HTM	
2	04/12/18 13:46	Addendum Sheet	0	Load JPG	~
3	04/12/18 13:50	Accident Statement Addm. #1	0	Load HTM	
Pho	otos/Images		3 per i	page V	V
No	Finalized On	Cycle & Carriage Automotive Pte Ltd (Pandan Gardens)	handrand	Thumbnail	Print
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3	03/12/18 19:40	Accident Photo [Linked Accident Report Documents]	0	Load JPG	V
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6	03/12/18 19:40	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
7	03/12/18 19:40	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
8	03/12/18 19:40	Accident Photo [Linked Accident Report Documents]	0	Load JPG	✓
9	04/12/18 13:45	Police Report [Linked Accident Report Documents]	0	Load JPG	V
10	04/12/18 13:45	Police Report [Linked Accident Report Documents]	0	Load JPG	✓
11	04/12/18 13:45	Police Report [Linked Accident Report Documents]	0	Load JPG	☑
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Doc	cumentation		1 per	page 🔻	V
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
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No	Finalized On	Cycle & Carriage Automotive Pte Ltd (Pandan Gardens)		Thumbnail	Print
1	04/12/18 13:40	Sketch Plan [Linked Accident Report Documents]	0	Load JPG	V
2	04/12/18 13:40	Sketch Plan #2 [Linked Accident Report Documents]	0	Load JPG	V

Linked Accident Report Documents

Page 2 of 2



Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
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			V
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/CTI18022015/UCBE2

Date:

14/12/2018

No:

REFERENCE

Handling Insurer:

China Taiping Insurance

(Singapore) Pte. Ltd.

Policy No:

DMCVSN3028541800

Claimant Vehicle

SLC810X No:

Insured Vehicle No:

GBF9162B

Date of Loss:

03/12/2018

Nature of Claim: TP

Claim

SNM18D05657C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SLC810X

Make & Model:

KIA FORTE K3, 1.6 (A)

Engine No: Chassis No: G4FGJH695444

Reg. Date: Colour:

16/05/2018 (Man. Year: 2017)

Grey

Odometer:

KNAFJ411MJ5765102 18521 km

Engine Capacity:

1591 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):

Footbrake (Serviceable):

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Yes Engine Modification:

Pre-accident Condition: No

Front Tyre Size: Front Left Side:

195/65 R15

Rear Tyre Size:

195/65 R15

Front Right Side:

Nexen 6 mm Nexen 6 mm Rear Left Side: Rear Right Side: Nexen 6 mm Nexen 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	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:

07/12/2018

Date Inspected:

07/12/2018 Inspected At:

Bluwel Automotive Service Pte Ltd (HQ)

1 Kaki Bukit Avenue 6, #01-28/37/53/55/56

Autobay@Kaki Bukit Singapore 417883

Estimated Period of Repair:

6.0 days

Adjuster: MARCUS CHUA

Manager:

CELINE FONG

Adjuster Report Page 2 of 5 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 \$5,000.00 -\$6,000.00

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REPAIR DETAILS

Reference

Part Source: MRM-SG

Version: 1.0 (Last Synchronised: 14 Dec 2018)

Parts:

143

KIA FORTE K3 1.6 (A) (Catalogue:Merimen Singapore 1.0)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SLC810X)

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.

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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 >