

22/03/2003

ASS. REC. BY:

REF: CS3/SMO18022052/Gcd3<sup>52</sup> Special Instructions:

Surveyor:

Menmen

From (Person):

Hgo sau wei shawn

ASSIGNMENT (Office)

of SMO

Date/Time: 7/12/18 2.43pm

Estimated Cost:

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

To Inspect Vehicle No:

GBB 1642G

Insured:

GBE 5102G

at Workshop m/s

Yeow Koon Auto

Tel:

93202773

of

Blk 3012, Bedok Ind. Park E #01-2016

Policy No:

D17M7H CVE000151

Claim No:

CM101805380

Sum Insured:

Excess:

D.O.A. 4/12/2018

Make of Veh:

(Client's Record)

CA / REV / REP. / REV 24 HRS (up)

H.O.D. Endorsement:

Date/Time:

3:15pm 7/12/18

Person Contacted:

Sundy

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	GBB 1642G - NA/INC 1802/929/h4
	GBE 5102G - X
	Dismantle: 10/12/2018

Don. 4/12/18

Surveyor

PRS  
Xed.

REF:

SNO

C action -

# ASSIGNMENT

From:

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.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

7

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

\$7,000 - \$8,000

RECEIVED 11 DEC 2010

Veh No:

6BB1642G

Yr Regn:

15 Aug 2008

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

Truck / Trailer or

Make:

Toyota Hiace

C.C.

2982

Colour:

Silverwhite

A/C:

Insured / Std / NI / NA

Sp. Reading

546346

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTFHT02P200030046

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195 R15

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

07-12-18

Survey held at

W/S

4:30pm

Des. 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, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

7

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

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	06 Dec 2018		07 Dec 2018 14:43 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
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#### CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	ETHOZ GROUP LTD, Co. Reg. No.: 198104531H		
Main Claimant:	GOLDEN WORLD MACHINERY (S) PTE LTD, Co. Reg. No.: 199000030N		
Vehicle Reg. No.:	GBB1642G	Date of Loss:	04/12/2018 16:00 - :59
Claim Type:	TP / CMTD1805380	Policy/Cover Note No.:	D17MTHCVE000151 (Third Party Only)
Vehicle Reg. No. (Insured):	GBE5102G	Policy No. (Claimant):	
		Excess:	
Repairer:	Yeow Koon Auto Care Pte Ltd (HQ) BLK 3012 BEDOK INDUSTRIAL PARK E #01-2016, 489978 Bedok - Tel: 64483039 /93202773		
Handling Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by NGO SAU WEI SHAWN - 6329 5202]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 18/12/2018]		
Driver/Custodian (Insured):	SHAHRIK AZHAR BIN ZULKIFLI (), NRIC: S9100570J, Tel: +6586116241		
Adj Asg. Remarks:	VEH IN PLEASE ASSIST TO SURVEY TODAY		

#### 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.									

## Nivitha (LKK Auto)

---

**From:** Teo, Grace <grace.teo@sompo.com.sg>  
**Sent:** Friday, 7 December 2018 2:41 PM  
**To:** Accident@kscgp.com; admin-d@lkkauto.com; assignments@lkkauto.com  
**Cc:** jiapei@kscgp.com; Ngo, Sau Wei Shawn; Ye, Yong Kang Melvin; Henry, Irene James  
**Subject:** CMTD1805380/NSW \ Yr ref: GBB 1642G/YW/jp/cl - SUV(LKK)/ GBE5102G & GBB1462G ON 04.12.2018

Our Reference : CMTD1805380/NSW  
Your Reference: GBB 1642G/YW/jp/cl

Date: 07/12/2018

**Without Prejudice**  
**EMAIL ONLY**

**Attention:**  
**M/S KSCGP Juris LLP**

Dear Calshie

### **ACCIDENT INVOLVING GBE5102G & GBB1462G ON 04.12.2018**

We refer to your email reply of today.

We do not agree to your list of surveyors.

As such, we will be appointing our motor surveyor, **LKK AUTO** to conduct the pre-repair survey of your client's vehicle.

The pre-repair survey will include a survey of the vehicle when its damaged parts are being dismantled prior to the commencement of repairs.

We would like our motor surveyor to conduct a post repair inspection once your client's vehicle has been repaired.

The survey is conducted on a without Prejudice basis and without any admission of liability.

Aside to **LKK AUTO**,

As spoken, please make arrangement to conduct the survey today for GBB1462G on a without Prejudice and any admission of liability basis.

Please submit with your report via merimen upon completion of survey.

Yours faithfully,

Best Regards  
**Grace Teo**  
Claims Division



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**From:** Accident@kscgp.com [mailto:Accident@kscgp.com]

**Sent:** Friday, December 07, 2018 2:17 PM

**To:** Teo, Grace

**Cc:** jiapei@kscgp.com; Ngo, Sau Wei Shawn; Ye, Yong Kang Melvin; Henry, Irene James

**Subject:** 2ND PRS - Your ref: CMTD1805380/NSW and our ref: GBB 1642G/YW/jp/cl

Dear Grace,

Please find enclosed our 2nd PRS for your attention.

Thank you.

Regards,

Calshie LIM

for and on behalf of Mr Gurdeep Singh Sekhon

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0989 / Fax: 6538 3708

Email: [accident@kscgp.com](mailto:accident@kscgp.com)

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----- Original Message -----

**From:** Teo, Grace [mailto:[grace.teo@sompo.com.sg](mailto:grace.teo@sompo.com.sg)]

**To:** Accident@kscgp.com

**Cc:** jiapei@kscgp.com, Shawn.Ngo@sompo.com.sg, melvin.ye@sompo.com.sg,

irene.henry@sompo.com.sg  
Sent: Fri, 7 Dec 2018 05:54:17 +0000  
Subject:

Our Reference : CMTD1805380/NSW  
Your Reference: GBB 1642G/YW/jp/cl

Date: 07/12/2018

**Without Prejudice**  
EMAIL ONLY

Attention:  
M/S KSCGP Juris LLP

Dear Calshie

**ACCIDENT INVOLVING GBE5102G & GBB1462G ON 04.12.2018**

We refer to your Notice of Accident dated 07/12/2018.

Please be informed that Mr. Shawn Ngo is the handler of this case.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert.

**Pre-Repair Survey**

	Motor Surveyor	Surveyor	Selection (Indicate as tick)
1	Raleigh Services	Andrew Ow Yong	
		Vincent Ng	
2	LKK Auto Consultants	Kenneth Kong (North area)	
		Marcus Chua (East area)	
		Mohd Rasul (West area)	
		Mohd Taufikh (West area)	
3	Priority Services	Jimmy Lee	
		Lawrence Ng	
		Jeffrey Ong	
4	JP Knights Adjusters & Surveyors	Jason Lek	

Please let us know within **two (2) working days** whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Best Regards

**Grace Teo**

Claims Division

D: 6329 5170 | T: 6461 6555 | F: 6221 3147



**Sompo Insurance Singapore Pte. Ltd.**

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

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**From:** Accident@kscgp.com [mailto:Accident@kscgp.com]

**Sent:** Friday, December 07, 2018 11:20 AM

**To:** Claims - Motor Survey

**Cc:** jiapei@kscgp.com

**Subject:** TOP URGENT - 1ST PRS Notice to conduct Pre-Prepair Survey - Your insured's vehicle: GBE 5102G and our ref: GBB 1642G/YW/jp/cl

Dear Sirs,

Please find enclosed our 1st PRS Notice to conduct Pre-Prepair Survey, for your attention and necessary action.

Please try to get third party surveyor to attend the workshop today.

Thank you.

Regards,

Calshie LIM

for and on behalf of Mr Gurdeep Singh Sekhon

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0989 / Fax: 6538 3708

Email: [accident@kscgp.com](mailto:accident@kscgp.com)

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## 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	05/12/2018 14:02
Date Of Accident	04/12/2018 17:25
Exact Location Of Accident	CTE TOWARDS PIE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB1642G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDEN WORLD MACHINERY (S) PTE LTD
Co Reg No	199900030N
Email Address	NJNAZRI@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-64499388
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	HIACE-3.0 D (M)
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	COMMERCIAL VEHICLE
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5067110940-04
Cover Note Number	COMPREHENSIVE
<b>Driver</b>	
Name of Driver	MOHAMED NAZRI BIN MOHAMED YUSOFF
NRIC No	S7907627I
Date Of Birth	13/03/1979
Occupation	INDOOR
Date Of Driving Pass	19/05/2010
Driving Experience	8 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82861277
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLK 412 BEDOK NORTH AVENUE 2 #09-126  
 Postcode 460412  
 Was driver an employee of the Insured's Company YES  
 If No, Relationship of the Driver with the Insured  
 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 3  
 Was any body injured in the Accident? YES  
 Was any injured conveyed to hospital by ambulance? NO  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (Including Driver) 1

#### Details of Police Action

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

VEHICLE IN FRONT STOPPED DUE TO HEAVY TRAFFIC AND I FOLLOWED SUIT. SUDDENLY VEHICLE C HIT INTO THE REAR PORTION OF MY VEHICLE AND PROPELLED MY VEHICLE TO HIT INTO THE REAR PORTION OF VEHICLE B. IT WAS A 3 CARS CHAIN COLLISION.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: FILE SIZE TOO BIG  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBH6717K  
 Vehicle Make/Model/Colour  
 Details Of Properties REAR PORTION  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver SUBBIAH SELVAKUMAR  
 NRIC/Passport Number G2147927L  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver) 1

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBE5102G
Vehicle Make/Model/Colour	
Details Of Properties	FRONT PORTION
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SHAHIRIL AZHAR BIN ZULKIFLI
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

#### DETAILS OF INJURED PERSON 1

Name	MOHAMED NAZRI BIN MOHAMED YUSOFF
Approximate Age	49
Injuries Sustain	NECK AND BACK
Injured person in which vehicle?	GBB1642G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 412 BEDOK NORTH AVENUE 2 #09-126
Postcode	460412

# Sketch Plan Pg. 1

NTUC Income Motor Service Centre

Report No: M.T.

D.T.A.

4.12.18

Vehicle No:

78816426

Make Model

Toyota Hince

Report Date: 12-5-2018 Start Time: 3:02 PM

Reporting Type: TP

End Time:

## IMPORTANT NOTICE

## SKETCH PLAN

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 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.

## 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 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 reasonable required for the purposes stated; or
  - (ii) for complying with requirements under any regulations, law or court orders.



12/5/2018 14:01

Policyholder's Signature  
Date & Time:

*[Signature]*

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

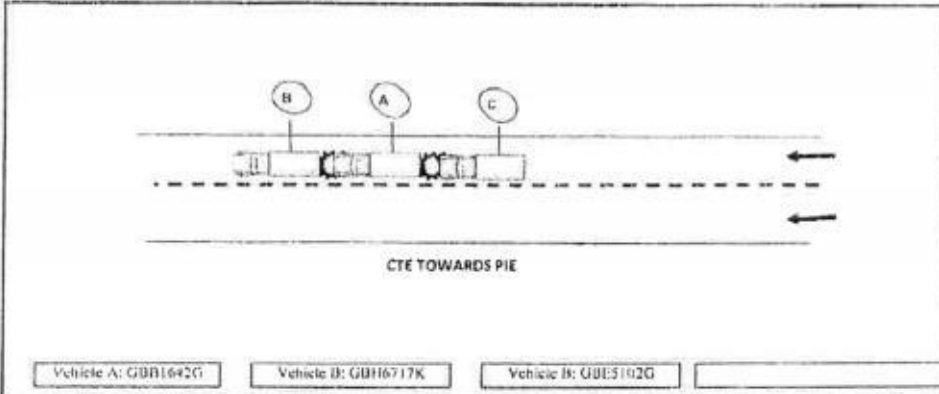
12/5/2018 14:01

*[Signature]*

Reporting Centre Personnel's Signature  
Name: Eric Woo Jun Kiat  
NRIC/ Fin No: 5992753

# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

VEHICLE IN FRONT STOPPED DUE TO HEAVY TRAFFIC AND I FOLLOWED SUIT. SUDDENLY VEHICLE C HIT INTO THE REAR PORTION OF MY VEHICLE AND PROPELLED MY VEHICLE TO HIT INTO THE REAR PORTION OF VEHICLE B. IT WAS A 3 CARS CHAIN COLLISION.

## DECLARATION

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



12/5/2018 14:01

Policyholder's Signature  
Date & Time:

*[Signature]*

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

12/5/2018 14:01

*[Signature]*

Reporting Centre Personnel's Signature  
Name: Eric Woo Jun Kiat  
NRIC/Fin No. S992753

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	0030N
Vehicle Details	
Vehicle No.:	GBB1642G
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Dec 2018
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	White
Manufacturing Year:	2008
Engine No.:	1KD1853706
Chassis No.:	JTFHT02P200030046
Maximum Power Output:	-
Open Market Value:	\$24,647.00
Original Registration Date:	15 Aug 2008
First Registration Date:	15 Aug 2008
Transfer Count:	0
Actual ARF Paid:	\$1,233.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	14 Aug 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$15,582.00
COE Rebate Amount:	\$14,576.00
Total Rebate Amount:	\$14,576.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 10 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	06 Dec 2018		07 Dec 2018 14:43 <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](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	<b>ETHOZ GROUP LTD</b> , Co. Reg. No.: 198104531H		
Main Claimant:	<b>GOLDEN WORLD MACHINERY (S) PTE LTD</b> , Co. Reg. No.: 199000030N		
Vehicle Reg. No.:	<b>GBB1642G</b>	Date of Loss:	04/12/2018 16:00 - :59 [123 Months and 19 Days From LTA Reg Date (Man Yr)]
Claim Type:	<b>TP / CMTD1805380</b>	Policy/Cover Note No.:	D17MTHCVE000151 (Third Party Only)
Vehicle Reg. No. (Insured):	<b>GBE5102G</b>	Policy No. (Claimant):	
		Excess:	
Repairer:	<b>Yeow Koon Auto Care Pte Ltd (HQ)</b> BLK 3012 BEDOK INDUSTRIAL PARK E #01-2016, 489978 Bedok - Tel: 64483039 /93202773		
Handling Insurer:	<b>Sompo Insurance Singapore Pte. Ltd. (HQ)</b> - Tel: 6461 6555 ... [Handled by <b>NGO SAU WEI SHAWN</b> - 6329 5202]		
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>XING GUO QIANG</b> ] ... [Final Rpt due 18/12/2018]		
Driver/Custodian (Insured):	SHAHRIK AZHAR BIN ZULKIFLI (), NRIC: S9100570J, Tel: +6586116241		
Adj Asg. Remarks:	VEH IN PLEASE ASSIST TO SURVEY TODAY		

### 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

\*GBB1642G (CMTD1805380)

[GBE5102G]

TP

GOLDEN WORLD MACHINERY (S) PTE LTD

Dec 4 2018 4:00PM

[ETHOZ GROUP LTD]

Yeow Koon Auto Care Pte Ltd

Upload Documents Upload Photos Compose New Letter

View View in Browser ▼

### Assessment Reports
















































1 per page ▼






No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)	Thumbnail	Print
1	07/12/18 14:42	<b>Accident Statement Addm. #1</b> From:SC - Reg. No: GBE5102G, Claimant: ETHOZ GROUP LTD	Load HTM	

### Photos/Images

3 per page ▼

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Assessment Reports			1 per page ▾	<input checked="" type="checkbox"/>
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1	07/12/18 13:57	Pre-Repair Survey - SAS	Load PDF	
2	07/12/18 14:42	Pre-Repair Survey - ASSIGN LKK	Load PDF	

## Documents Checklist

DOCUMENTS CHECKLIST		Reset	Save	Print
There are no document checklists configured.				
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>				
<b>Show Remarks To:</b> <input type="checkbox"/> 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/SMO18022052/GCD3S2  
**Date:** 17/12/2018

REFERENCE

Handling Insurer: Sompoo Insurance Singapore Pte. Ltd. Policy No: D17MTHCVE000151  
**Claimant Vehicle No :** GBB1642G **Insured Vehicle No :** GBE5102G  
 Date of Loss: 04/12/2018 Nature of Claim: TP Claim No: CMTD1805380

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **GBB1642G**  
 Make & Model: TOYOTA HIACE, 3.0 D (M) Engine No: 1KD1853706  
 Reg. Date: 15/08/2008 (Man. Year: 2008) Chassis No: JTFHT02P200030046  
 Colour: White Odometer: 546346 km  
 Engine Capacity: 2982 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: 195 R15 Rear Tyre Size: 195 R15  
 Front Left Side: Yokohama 6 mm Rear Left Side: Yokohama 6 mm  
 Front Right Side: Yokohama 6 mm Rear Right Side: Yokohama 6 mm

The above values represent the remaining tyre treads depth

<b>COST OF CLAIMS</b>	<b>Repairer's</b>	<b>Adjuster's</b>	<b>Difference</b>	<b>Diff %</b>
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: 07/12/2018  
 Date Inspected: 07/12/2018 Inspected At: Yeow Koon Auto Care Pte Ltd (HQ)  
 Estimated Period of Repair: 7.0 days BLK 3012 BEDOK INDUSTRIAL PARK E #01-2016  
 Singapore 489978

**Adjuster:** XING GUO QIANG**Manager:** CELINE FONG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

- 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 \$7,000.00 - \$8,000.00

## REPAIR DETAILS

### Reference

<b>Part Source:</b>	(Last Synchronised: 17 Dec 2018)	
<b>Parts:</b>	N/A	TOYOTA HIACE 3.0 D (M) (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for GBB1642G)	
<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.

< END OF ESTIMATES >