

ASS. REC. BY:

REF:

C93/MSG18022817/TlCd317

Special Instruction:

Surveyor:  
Menmen

Taufik

ASSIGNMENT (Office)

From (Person):

Juwyn Tay

of

MSIG

Date/Time:

20/12/18 9:37am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLN 5006K

Insured:

SLU 3171S

at Workshop m/s

Kok Wang Car Grooming

Tel:

9183 9633

of

1 Soon Lee Street #06-40

Policy No:

A28795104MCX

Claim No:

579406

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

15/12/2018

CA / REV / REP. / REV 24 HRS

1up

H.O.D. Endorsement:

Date/Time:

10:22am @ 20/12/18

Person Contacted:

Mr. Kok

Vehicle

IN/OUT

Date/Time	Action/Instruction ( x ) Estimate
	SLN 5006K - X
	SLU 3171S - X
	Dismantle: 21/12/2018

Surveyor

Taylor

REF:

MS16

## 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: 6 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No.

SLN5006K

Yr Regn:

2017 May

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

Truck / Trailer or

Make:

Honda Vezel

C.C.

1496

Colour

Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

RU11207625

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

225/50R18

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

TOYO / YOKO or

Front

Rear

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

D.O.I.

Survey held at

Kok Wing

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

Action / Instruction

No Key

.1 Scan Lee ST#06-40.

- Estimated repair range \$4,000 - \$5,000

120  
10  
130

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

6

Resurvey No. of Trip:

1

Survey Fee:

120

Transportation:

) \$ + RS \$

) Photos

) Others

TOTAL

Report Format :

PRS

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

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

130

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	18 Dec 2018		20 Dec 2018 09:37 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

<a href="#">Main</a>	<a href="#">Reference</a>	<a href="#">Claim Details</a>	<a href="#">Documents</a>	<a href="#">Show All</a>
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CLAIM SUBFOLDER DETAILS		[Created by insurer]
Insured:	SKYWAY MOTOR PTE LTD, Co. Reg. No.: 199904194N, Email: PEILIN@SKYWAY.COM.SG	
Main Claimant:	LAY AUTO LEASING PTE LTD, Co. Reg. No.: 201310521C	
Vehicle Reg. No.:	SLN5006K	Date of Loss: 15/12/2018 22:00 - :59 [19 Months and 10 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 579406	Policy/Cover Note No.: A28795104MCX (Comprehensive) Coverage: 08/08/2018 - 07/08/2019
Vehicle Reg. No. (Insured):	SLU3171S	Policy No. (Claimant):
		Excess: S\$1,000.00
Repairer:	Kok Wang Car Grooming (HQ) 1 SOON LEE STREET #06-40 PIONEER CENTRE, 627605 Pioneer - Tel:	
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jowyn Tay Mei Ling - 6643 1307]	
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 21/12/2018]	
Driver/Custodian (Insured):	FOO SEANG XING (31 / Male), NRIC: S8770934E, Tel: +6592207080	
Adj Asg. Remarks:	on WP. SJE : DISAGREED / LIABILITY 100% Please appoint LKK AUTO to conduct the survey . Kindly contact MR KOK @ 9183 9633 to arrange for survey .	

### 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.									

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	0521C
<b>Vehicle Details</b>	
Vehicle No.:	SLN5006K
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Dec 2018
Vehicle Make:	HONDA
Vehicle Model:	VEZEL 1.5RS CVT
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	L15B4407626
Chassis No.:	RU11207625
Maximum Power Output:	96.0 kW (128 bhp)
Open Market Value:	\$24,724.00
Original Registration Date:	05 May 2017
First Registration Date:	05 May 2017
Transfer Count:	0
Actual ARF Paid:	\$21,614.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 May 2027
PARF Rebate Amount:	\$16,210.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	04 May 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$51,600.00
COE Rebate Amount:	\$43,141.00
<b>Total Rebate Amount:</b>	<b>\$59,351.00</b>

The information contained herein is correct as at 24 Dec 2018

OK

## 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	17/12/2018 15:33
Date Of Accident	15/12/2018 10:50
Exact Location Of Accident	CTE HIGHWAY TOWARDS SLE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN5006K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LAY AUTO LEASING PTE LTD
Co Reg No	201310521C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-86115158
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	VEZEL-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5070522212-03
Cover Note Number	
<b>Driver</b>	
Name of Driver	JILEEN NG SIN GEOK
NRIC No	S9019967F
Date Of Birth	07/06/1990
Occupation	OUTDOOR
Date Of Driving Pass	05/04/2010
Driving Experience	8 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-86115158
Fax Number	
Contact Number	
Email Address	LILMEFASHION@GMAIL.COM

Address	BLK 671B EDGEFIELD PLAINS #11-519 SINGAPORE
Postcode	822671
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	2
Passenger 1	NAME: : NG YAO HAN GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER 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	SLU3171S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	FOO SEANG XING
NRIC/Passport Number	S8770934E
Contact Number	92207080
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	NG YAO HAN
Approximate Age	
Injuries Sustain	REFER POLICE REPORT
Injured person in which vehicle?	SLN5006K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

**DETAILS OF INJURED PERSON 2**

Name	JILEEN NG SIN GEOK
Approximate Age	
Injuries Sustain	REFER POLICE REPORT
Injured person in which vehicle?	SLN5006K
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

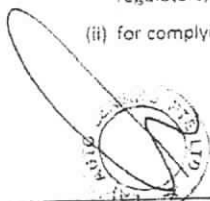
**SKETCH PLAN**

**IMPORTANT NOTICE**

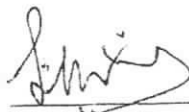
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

I understand, acknowledge, agree and consent that:

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



Policyholder's Signature  
Date & Time:



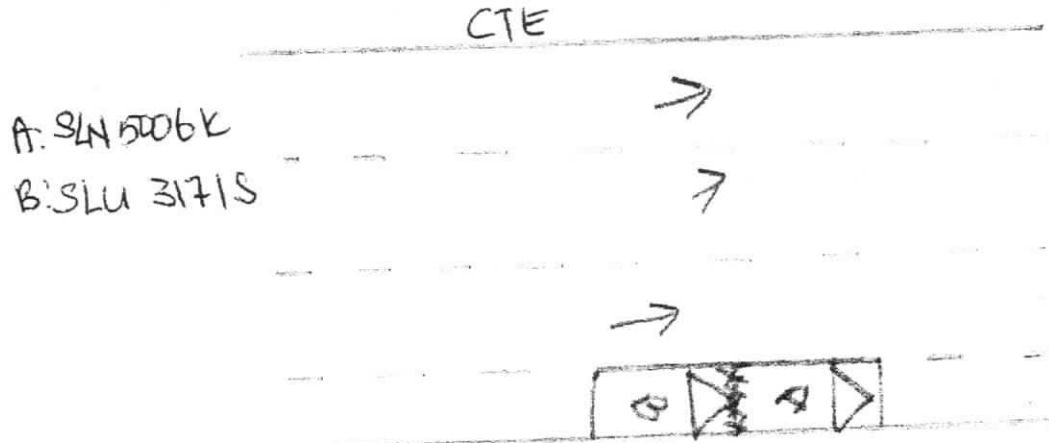
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Attach with the police report.

DECLARATION

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:

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

# Accident Sketch Plan Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20181216/7008

1 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20181216/7008

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/12/2018 19:26	Vide Report No.:	Station Diary No.:
--	------------------	--------------------

### Informant's Particulars

Name of Informant: JILEEN NG SIN GEOK			Address: APT BLK 671B EDGEFIELD PLAINS #11-519 SINGAPORE 822671		
ID Type / ID No.: NRIC NO / S9019967F			Contact No.: Home/Office: Mobile: 86115158		
Nationality: SINGAPORE CITIZEN			Email: lilmefashion@gmail.com		
Sex: Female	Age: 28	Date of Birth: 07/06/1990	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Human resource consultant (excluding executive search consultant)			Driving Licence Information: Class: 3 Date of Expiry:		

### General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/12/2018 22:50	Type of Location: Flyover
Location:  CENTRAL EXPRESSWAY				
Weather: Drizzling	Road Surface: Wet	Road Speed Limit: 25 Km/h		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Heavy		
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLN5006K	Car	HONDA	Vezel	Blue	Slightly Damaged	1
SLU3171S	Car	TOYOTA	CHR	Blue	Slightly Damaged	3

# Accident Sketch Plan Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20181216/7008

2 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20181216/7008

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Passenger</b>			
Name	NG YAO HAN	ID No.	S8635753D
Related Vehicle	SLN5006K (Car)	Contact No.	98277198
Hospital/Clinic	MOUNT ELIZABETH HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	16/12/2018	Date Discharge	16/12/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
<b>Driver</b>			
Name	JILEEN NG SIN GEOK	ID No.	S9019967F
Related Vehicle	SLN5006K (Car)	Contact No.	86115158
Hospital/Clinic	MOUNT ELIZABETH HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	16/12/2018	Date Discharge	16/12/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight

### Brief Details.

Accident took place at: CTE highway towards SLE highway before Jalan Bahagia.

It was drizzling at the point of accident ahead of us there is one motorcycles skidded to our first lane. And we slowed down behind there is a vehicle skidded and banged on us.

Accident Sketch Plan Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20181216/7008

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20181216/7008

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
SHARIFAH NOR FARIZAN BINTE SYED MOHD  
SAID

Contact No.: 65476172

Authentication Stamp

NP168

Signature Of Informant:

The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
16/12/2018 19:26

Classification Of Case:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	18 Dec 2018		20 Dec 2018 09:37 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured:	SKYWAY MOTOR PTE LTD, Co. Reg. No.: 199904194N, Email: PEILIN@SKYWAY.COM.SG								
Main Claimant:	LAY AUTO LEASING PTE LTD, Co. Reg. No.: 201310521C								
Vehicle Reg. No.:	SLN5006K	Date of Loss:	15/12/2018 22:00 - :59 [19 Months and 10 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 579406	Policy/Cover Note No.:	A28795104MCX (Comprehensive) Coverage: 08/08/2018 - 07/08/2019						
Vehicle Reg. No. (Insured):	SLU3171S	Policy No. (Claimant):							
		Excess:	S\$1,000.00						
Repairer:	Kok Wang Car Grooming (HQ) 1 SOON LEE STREET #06-40 PIONEER CENTRE, 627605 Pioneer - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jowyn Tay Mei Ling - 6643 1307]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Imm.Advice due 21/12/2018]								
Driver/Custodian (Insured):	FOO SEANG XING (31 / Male), NRIC: S8770934E, Tel: +6592207080								
Adj Asg. Remarks:	on WP. SJE : DISAGREED / LIABILITY 100% Please appoint LKK AUTO to conduct the survey . Kindly contact MR KOK @ 9183 9633 to arrange for survey .								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									





































## Claim Documents

**\*SLN5006K (579406)**  
**[SLU3171S]**  
**TP**  
**LAY AUTO LEASING PTE LTD**  
**Dec 15 2018 10:00PM**  
**[SKYWAY MOTOR PTE LTD]**  
**Kok Wang Car Grooming**

[Upload Documents](#) | 
 [Upload Photos](#) | 
 [Compose New Letter](#)

**View** [View in Browser](#)

Assessment Reports					1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print	
1	19/12/18 16:04	<b>Accident Statement</b> From:SC - Reg. No: SLU3171S, Claimant: SKYWAY MOTOR PTE LTD		Load HTM		
Photos/Images					3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print	
1	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
2	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
3	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
4	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
5	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
6	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
7	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
8	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
9	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
10	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
11	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
12	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
13	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
14	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
15	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
16	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
17	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
18	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
19	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
20	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
21	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
22	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
23	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
24	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
25	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
26	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
27	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
28	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
29	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
30	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
31	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
32	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	
33	24/12/18 12:26	General View		Load JPG	<input checked="" type="checkbox"/>	

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
34	24/12/18 12:26	General View	 Load JPG	<input checked="" type="checkbox"/>
35	24/12/18 12:26	General View	 Load JPG	<input checked="" type="checkbox"/>
36	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
37	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
38	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
39	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
40	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
41	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
42	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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46	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
47	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
48	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
49	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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64	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
65	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
66	26/12/18 11:44	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	19/12/18 16:04	TPD SLN5006K GIA REPORT From: SC - Reg. No: SLU3171S, Claimant: SKYWAY MOTOR PTE LTD	 Load PDF	
2	19/12/18 16:05	TPD SLN5006K - PRI	 Load PDF	
3	19/12/18 17:25	Reject email to TP Lawyer & appoint LKK AUTO	 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> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			





# 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/MSG18022817/T1CD3E2

Date: 28/12/2018

### REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: A28795104MCX

Claimant Vehicle No : SLN5006K

Insured Vehicle No : SLU3171S

Date of Loss: 15/12/2018

Nature of Claim: TP

Claim No: 579406

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SLN5006K

Make &amp; Model: HONDA VEZEL, 1.5 X CVT (A)

Engine No: L15B4407626

Reg. Date: 05/05/2017 (Man. Year: 2016)

Chassis No: RU11207625

Colour: Blue

Odometer: 0 km

Engine Capacity: 1496 cc

Market Value/New Car Price: N/A

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

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

### CONDITION OF TYRES

Front Tyre Size:	225/50 R18	Rear Tyre Size:	225/50 R18
Front Left Side:	Toyo 6 mm	Rear Left Side:	Toyo 6 mm
Front Right Side:	Toyo 6 mm	Rear Right Side:	Toyo 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

### INSPECTION

Date of Assignment: 20/12/2018

Date Inspected: 20/12/2018 Inspected At:

Kok Wang Car Grooming (HQ)  
1 SOON LEE STREET #06-40 PIONEER  
CENTRE  
Singapore 627605

Estimated Period of Repair: 6.0 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 \$4,000.00 - \$5,000.00

## REPAIR DETAILS

### Reference

**Part Source:** MRM-SG      Version: 1.0 (Last Synchronised: 28 Dec 2018)

**Parts:**      M1-SUV      HONDA VEZEL 1.5 X CVT (A) (Catalogue:Merimen Singapore 1.0)

**Labour:**      Repairer's      (Price-denominated Standard List)

**Print Code:** (Unsubmitted, no print-code for SLN5006K)

**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.
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< END OF ESTIMATES >