

22/01/2018

ASS. REC. BY:

REF: CS3 / MSCH18000964 / DLvd31

al Instructions:

SUPERVISOR

ASSIGNMENT (Office)

From (Person): Pauline Tham of MSCH Date/Time: 03/01/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No. SKW 979H Insured: SKP 956Cat Workshop m/s: N-51 Automotive Tel: 6842 0051of 2 Kaki Bukit Ave 2 #01-17Policy No. B27760954 SMP Claim No. 546016

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 13012018
(Client's Record)

CA / REV / REP. / REV 24 HRS 'Wp'

H.O.D. Endorsement:

Date/Time: 16/01/2018 11:44 am Person Contacted: ZynnVehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	SKW 979H - NA / EQ216000317 / F3 DOA 13012018
	SKP 956C - NA / MSCH18000964 / F3 DOA 13012018
	Dismantle Part: 17012018
	After repair: 19012018

4/1/19 Submit LS \$ 6900 (Red 8300, 5490) 5 days

7/1/19 check with Mr Lau, Surveyor Bryan & himself.

Some changes pls recheck again
Tks

RECEIVED 08 JAN 2019

REF: MSEL

ASSIGNMENT

Skw 9179 H 20/11/2015

Type M.Cat / M Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

May: Tryster Harbor - 1986

Colour Black 40 [Insured / Std / N] / NA

So Reading 26321 T Fado Insured / Std / NI / NA

Ergo Nc

C/No: 23460-0056472

Gen. Cond. Good / Fair / Poor / Burnt

Steering ~~In order~~ Jammed / Leaked / Burnt orBrake Inorder / Jammed / Leaked / Burnt or

Mod N / S/Rim / STD A/Rim 27

Tyre Size: F: 225/65 R14

R: 225165 R'17

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

TOYO / YOKO of GEOLANDAR (F) (CR)

Front

R Bal. 4 mm R Bal. 4 mm

LGal. 4 mm LGal. 4 mm

DOA 13/1/18 DOI 16/1/2018

Survey held at 175 W. Ave

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

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

Range \$3900 - \$4900

4 Days

RECEIVED JUNE 2015

☐: Prel. Report☐ Final Report

Days Of Repair:

Resurvey No. of Trip:

1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 26

Add Fee: \$

2000-2001

Interests 5

1000

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 ability.
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 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	15/01/2018 10:29
Date Of Accident	13/01/2018 17:30
Exact Location Of Accident	CHINA TOWN EU TONG SEN ST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW9179H
Insured/Policyholder	
Name Of Registered Owner	WEI QINFENG
Passport No/FIN	G1528288L
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98102389
Alternative Phone No	OTHERS-98102389

Vehicle Particulars

Manufacturer	TOYOTA
Model	HARRIER
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 CAR

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPSHQ17-000015
Cover Note Number	

Driver

Name of Driver	LIN XIANG
Passport No/FIN	F2560936X
Date Of Birth	19/07/1966
Occupation	INDOOR
Date Of Driving Pass	26/04/2017
Driving Experience	0 YEAR AND 8 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98102389
Fax Number	(LOCAL) +65-96678693
Contact Number	
EEmail Address	NOEMAIL

Address	29 FERNVALE CLOSE #22-19 RIVERTREES RESIDENCE
Postcode	797464
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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

I WAS DRIVING ALONG EU TONG SEN ST ON THE 3RD LANE TWDS KALLANG DIRECTION. WHILE DRIVING FORWARD, DUE TO VEH INFRT BRAKE TO COMPLETE STOP AND SO I TOO APPLIED BRAKE TO COMPLETE STOP. SUDDENLY AFTER A FEW SECS, I FELT A GREAT IMPACT FROM THE REAR OF MY VEH. ALIGHTED AND REALIZED IT WAS A VEH BEARING REG NO SKP956C HAD COLLIDED TO THE REAR OF MY VEH.

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	SKP956C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

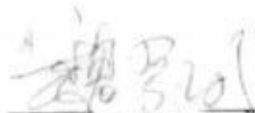
SKETCH PLAN

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)**

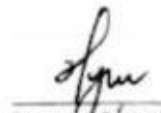
I understand, acknowledge, agree and consent that:

- (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:

 15/01/18
Report Centre Personnel's Signature
Name:
NRIC/FIN No.:

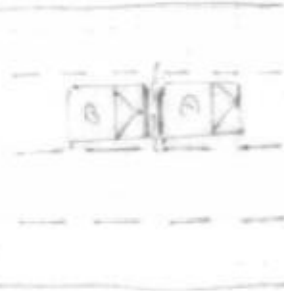
Sketch Plan #2

SKETCH PLAN

Law, Traffic, Law, ST (Involvement of PEOPLE'S PARK, comply

LDH-1002 0 - 500 750 C

3 个



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG E A TOWN SEN ST ON THE THIRD LANE
TOWARDS HOLLAND DIRECTION.

WHILE DRIVING FORWARD, DUE TO VEHICLE INERTIA DANCE TO COMPLETE STOP, AND SO I TOO APPLIED BRAKE TO COMPLETE STOP. SUDDENLY AFTER A FEW SECONDS I HAD A GREAT IMPACT FROM THE REAR OF MY VEHICLE.

HE LEMED AN REQUIRED IT WAS A VEHICLE BEHIND
(STEP 956C) HAD COME TO THE REAR OF MY VEHICLE.

Vehicle A - Skw 7179M

VAH1002 B - SKD 956C

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:

Reporting Centre Personnel's Signature
Name: _____
NRIC/TIN No: _____

Sketch Plan

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:

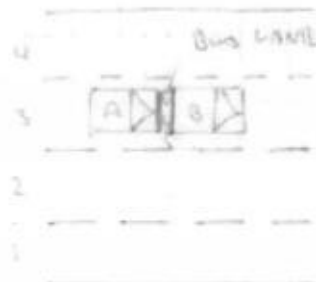
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN

at 10th 8th St. ^{section of} PEOPLE'S PARK COMPLEX

VEHICLE A - SW 956C
VEHICLE B - SW 9177H



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING STRAIGHT AHEAD ALONG SW 10TH ST TOWARDS
KALLANG DIRECTION, WHILE DRIVING FORWARD DUE TO HEAVY
TRAFFIC. THIS VEHICLE WASNT JAMMED BACK, AND I TOO
JAMMED BACK, BUT I COULDN'T STOP IN TIME AND HIT
ONTO THE VEHICLE IN FRONT.

WE BOTH POINTED FROM OUR VEHICLES AND EXCHANGED OUR
PARTICULARS, BUT DUE TO NO INJURIES WERE INVOLVED AND SO
WE BOTH PROCEED TO FILE FOR OUR OWN INSURANCE FILING.

VEHICLE A - SW 956C
VEHICLE B - SW 9177H

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:

Report Centre Personnel's Signature
Name: *flynn* 15/01/18
NRIC/FIN No:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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 ability.
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 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	15/01/2018 12:08
Date Of Accident	13/01/2018 17:30
Exact Location Of Accident	CHINA TOWN EU TONG SEN ST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP956C
Insured/Policyholder	
Name Of Registered Owner	HU YUEQI
NRIC No	S2667843I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98301365
Alternative Phone No	Others-98301365

Vehicle Particulars

Manufacturer	BMW
Model	X3
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 27760954 SMP
Cover Note Number	

Driver

Name of Driver	HU YUEQI
NRIC No	S2667843I
Date Of Birth	13/08/1965
Occupation	INDOOR
Date Of Driving Pass	23/07/2008
Driving Experience	9 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98301365

Fax Number	
Contact Number	OTHERS-98301365
E-Mail Address	NOEMAIL
Address	107 PETIR ROAD #24-17
Postcode	678275
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	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	
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)	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

PLS REFER TO THE ATTACHED 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	SKW9179H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Accident Photo



Accident Photo



Accident Photo



Accident Photo



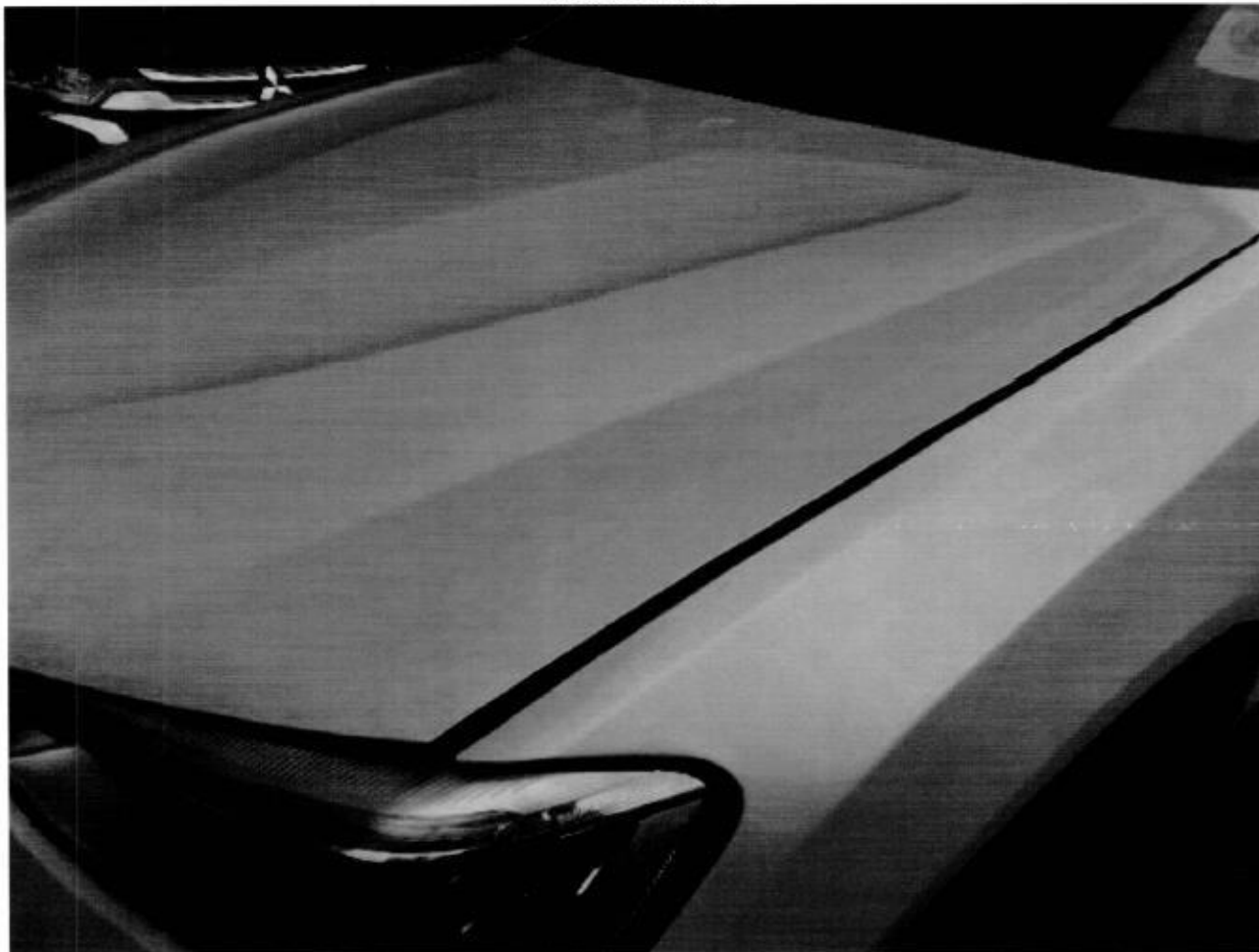
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



PAR Automotive Consultancy

Regn No: 52986974L

Thomson Rd Post Office PO Box 029 Singapore 915701. Tel : 645 31173, Fax : 645 36131

Report No: 0565-18-N51

17 September 2018

ACCIDENT VEHICLE SURVEY REPORT

Wei Qinfeng
29 Fernvale Close #22-19 Rivertrees Residence
Singapore 797464

VEHICLE INFORMATION:

<i>Vehicle Reg No.:</i>	SKW9179H	<i>Odometer:</i>	26322km
<i>Make & Model:</i>	Toyota Harrier 2.0 CVT	<i>Colour:</i>	Black
<i>Chassis number:</i>	ZSU600056472	<i>Date of accident:</i>	13/01/2018
<i>Year of Regn.:</i>	20/11/2015	<i>Date inspected:</i>	16/01/2018
<i>Repairer at:</i>	N-51 Automotive Pte Ltd 2 Kaki Bukit Ave 2 #01-18 Kaki Bukit Auto Hub Singapore 417921	<i>Date inspected (After Repair):</i>	20/01/2018

RE-INSPECTION

We had carried out re-inspection during works in progress and post repair inspection on the above vehicle. Attached in Annex B are the re-inspection photos, showing the work in progress and our re-inspection to the hidden part that were damaged.

REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

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Singapore 797464

INVOICE No. 0565-18-N51

Vehicle No. SKW9179H

<u>S/NO.</u>	<u>SERVICES RENDERED</u>	<u>Amount due</u>
1	Being accident vehicle appraisal services, transport, photographs and re inspection (work in progress and post repair inspection).	\$924.00
Total amount payable		<u>\$924.00</u>

Kindly cross your cheque in favour of "PAR Automotive Consultancy"

We thank you in anticipation for your prompt payment

PAR Automotive Consultancy



FAR Automotive Consultancy

Regn. No. 52986974I

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Repairer at:	N-51 Automotive Pte Ltd 2 Kaki Bukit Ave 2 #01-18 Kaki Bukit Auto Hub Singapore 417921	Date inspected (After Repair):	20/01/2018

STATIC CHECKS, where applicable:

Steering :	serviceable
Footbrake :	serviceable
Handbrake :	serviceable
Paintwork :	Good
General condition :	Good

TIRE CONDITION:

	<u>LH / Make</u>	<u>RH / Make</u>	<u>Size</u>
Front:	6mm/Yokohama	6mm/Yokohama	225/65R17
Rear:	6mm/Yokohama	6mm/Yokohama	225/65R17

POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the rear portion.
Please see details as described in the Annex for parts and labour.

REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

Parts and Labour Assessment

PARTS

Description of part	Qty	Condition	Repairer's estimate	Our adjustment
REAR BUMPER 'LOWER'	1	deformed	455.00	455.00
REAR BUMPER 'TOP'	1	squashed	1,400.00	1,400.00
REAR BUMPER INNER SIDE SHIELD CLIPS L/R *	6	necessary	39.00	39.00 NH
REAR BUMPER INNER SIDE SHIELD L/R	2	reuse	130.20	0.00
REAR BUMPER INNER SPONGE	1	deformed	125.00	125.00
REAR BUMPER REFLECTOR L/R *	2	fractured	115.20	115.20 NH
REAR BUMPER SIDE RETAINER L/R	2	necessary	170.00	170.00
REAR END PANEL	1	buckled	796.00	796.00 XR
REAR END PANEL INNER TOP GARNISH	1	fractured	445.00	445.00
REAR END PANEL INNER TOP GARNISH CLIPS	4	necessary	26.00	26.00
REAR END PANEL LOCK STRIKER	1	bent	55.00	55.00 X S/C
REAR END PANEL TAILGATE ANTENNA SENSOR	1	shorted	161.00	161.00 X NN
REAR EXHAUST GASKET	1	necessary	35.00	35.00 X NN
REAR EXHAUST RUBBER MOUNTING	3	distorted	165.00	165.00 X NN
REAR EXHAUST SILENCER BOX	1	bent	1,173.90	1,173.90 X NN
REAR SPARE TYRE PANEL TOP UPHOLSTERY BOARD	1	deformed	885.50	885.50 X NN
REAR TAILGATE	1	buckled	2,200.00	2,200.00
REAR TAILGATE 'HARRIER' EMBLEM	1	necessary	110.00	110.00
REAR TAILGATE 'LOGO' EMBLEM	1	necessary	60.00	60.00
REAR TAILGATE DAMPER L/R	2	bent	2,240.00	2,240.00 X NN
REAR TAILGATE HINGES L/R	2	bent	270.00	270.00 X NN
REAR TAILGATE INNER HANDLE L/R	2	warped	190.00	190.00 X NN
REAR TAILGATE INNER TRIM BOARD	1	fractured	578.50	578.50
REAR TAILGATE MECHANISM LOCK	1	bent	396.50	396.50
REAR TAILGATE MECHANISM LOCK COVER	1	warped	65.00	65.00
REAR TAILGATE NUMBER PLATE LAMP L/R	2	fractured	330.00	330.00 X NN
REAR TAILGATE OUTER GARNISH	1	fractured	695.00	695.00 X NN
REAR TAILGATE OUTER GARNISH CLIPS	5	necessary	32.50	32.50
REAR TAILGATE OUTER LOCK HANDLE SWITCH	1	shorted	161.00	161.00 X NN
RR TAILGATE REFLECTOR LAMP BACK RUBBER GASKET L/R	2	necessary	70.00	70.00 X S/C
REAR TAILGATE REFLECTOR LAMP CLIPS L/R	8	necessary	52.00	52.00 X NN
REAR TAILGATE REFLECTOR LAMP L/R	2	fractured	996.00	996.00
REAR TAILGATE RUBBER GUIDE STOPPER	2	deformed	40.00	40.00 X NN
REAR TAILGATE WEATHERSTRIP	1	deformed	442.00	442.00
REAR TAILGATE WINDSCREEN MOULDING	1	necessary	55.00	55.00
REAR TAILGATE WIPER ARM	1	reuse	85.00	0.00
REAR TAILGATE WIPER ARM COVER	1	reuse	20.00	0.00
REAR TAILGATE WIPER ARM RUBBER SEAL	1	necessary	50.00	50.00 X NN
REAR TAILGATE WIPER MOTOR	1	shorted	680.50	680.50 X NN
REAR TAILLAMP CLIPS L/R	8	necessary	52.00	52.00 X NN
REAR TAILLAMP L/R	2	fractured	930.00	930.00

PAR Automotive Consultancy

REAR TAILLAMP LOWER BRACKET L/R		2 bent	110.00	110.00	
Subtotal before discount			S\$ 17,087.80	S\$ 16,852.60	
Percentage discount 25% and 25%			S\$ 4,271.95	S\$ 4,213.15	
Sub-total 1			S\$ 12,815.85	S\$ 12,639.45	
REAR BUMPER CLIPS - SET	1	necessary	30.00	30.00	
REAR BUMPER REVERSE SENSOR - SET	1	shorted	350.00	350.00	280
REAR FENDER INNER TRIM BOARD CLIPS L/R - SET	2	necessary	60.00	60.00	40
REAR TAILGATE INNER TRIM BOARD CLIPS - SET	1	necessary	30.00	30.00	20
REAR TAILGATE NUMBER PLATE	1	reuse	25.00	0.00	
REAR TAILGATE NUMBER PLATE HOLDER	1	reuse	50.00	0.00	
REAR TAILGATE REVERSE CAMERA	1	shorted	800.00	800.00	XNH
REAR TAILGATE SPOILER CLIPS - SET	1	necessary	30.00	30.00	20
REAR TAILGATE WINDSCREEN INNER GARNISH CLIPS - SET	1	necessary	30.00	30.00	20
REAR TAILGATE WINDSCREEN SEALANT	1	necessary	100.00	100.00	50
Subtotal before discount			S\$ 1,505.00	S\$ 1,430.00	
Sub-total 2			S\$ 1,505.00	S\$ 1,430.00	
Parts-total			S\$ 14,320.85	S\$ 14,069.45	

LABOUR

To reset system after repair works	* 500.00	NH 400.00	120
To remove, reinstall electrical wiring harness, check lighting, and rewire for parking sensor.	120.00	60.00	
To remove, reinstall tailgate windscreen	150.00	120.00	
To remove, reinstall roof top trim upholstery, cushion seat, trim garnish, trim liner carpet. (to FR)	140.00	60.00	
To re-spray painting on the change bodyparts, repair portion, and where consistent to the accident.	1,750.00	1,500.00	800
To remove and change exhaust silencer box with pipe, re-align where necessary consistent to the accident.	180.00	120.00	X
To provide labour, workmanship to change the above damaged bodyparts, repair, re-construct and re-align body structure, body alignments and damaged consistent to the accident.	2,000.00	1,500.00	700
To apply anti-rust chemical on repaired and replaced panel.	120.00	60.00	40
Labour Total		S\$ 4,960.00	S\$ 3,820.00
Parts & Labour Total		S\$ 19,280.85	S\$ 17,889.45

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

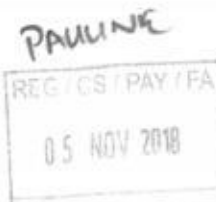
Hence, the recommended cost of repairs based on Lump Sum repairs is : S\$ 15,200.00 and the recommended number of working days for the repairs is within 7 day(s).

ks
B J Loi (I Eng., MIMI, AIRTE)
Automotive Appraiser

5 days

VISION LAW LLC

Advocates & Solicitors - Notaries Public - Commissioners for Oaths
(Incorporated with limited liability)



ERIC NG CHING BOON
WONG KENG LEONG RAVNEY
AUDREY WONG SU-HSIEN
PAUL YAP TAI SAN
ANJALI D'O MUNIANDY
SEGA PARAM
ANG KIM NOI DIANE
RAVENDRA KRISHNASAMY
JANICE HAN JIA LIN
TAN YINGXIAN, SELWYN
CHEONG YUNHUI, CLARISSA
EDISON TAM CHYI EU



Unique Entity Number: 200721148H

Head Office: 133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413

Branch: 490 Lorong 6 Toa Payoh
#03-11 HDB Hub (Biz 3 Lobby 1)
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Main

TEL : (65) 6534 2811 (Hunting)
FAX : (65) 6535 6802
E-MAIL : annatan@visionlawllc.com

Branch

TEL : (65) 63580703

WHEN REPLYING, PLEASE QUOTE OUR REFERENCE - Please to **HEAD OFFICE** for this matter

Our Ref : AKN-atv-Ins-N63-108100-18
Your Ref : SKP 956 C

Date: 31 October 2018

MSIG INSURANCE (SINGAPORE) PTE LTD

4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

Attn: **Motor Claims Department**

**WITHOUT PREJUDICE
BY HAND**

HU YUEQI
107 Petir Road
#24-17
Singapore 678275

**CERTIFICATE OF POSTING
[For your information only]**

Dear Sir,

CLAIMANT : WEI QINFENG
ACCIDENT INVOLVING SKW 9179 H & SKP 956 C ON 13-JAN-2018 ALONG EU TONG SEN STREET AT ABOUT 1730HOURS

We are instructed by the above named to claim damages against you/your insured in connection with a road traffic accident on **13-JAN-2018 ALONG EU TONG SEN STREET AT ABOUT 1730HOURS** involving our client's vehicle registration number **SKW 9179 H** and vehicle registration number **SKP 956 C** driven by you/your insured at the material time.

We are instructed that the accident was caused by you/your insured's negligent driving and /or management of your/your insured vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

01.	Cost of Repair	\$16,264.00
02.	Rental fees	\$ 1,750.00
03.	Survey report fees	\$ 924.00
04.	Towing fees	\$ 100.00
05.	GIA & LTA search / report fees	\$ 43.98
06.	Cost Contribution (at this stage)	\$ 1,605.00
07.	Disbursements (at this stage)	\$ 50.00

TOTAL \$20,736.98

.../2 to be continued next page

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