

22/03/2001

ASS. REC. BY:

REF

CS3/SMO19000416/ Jed316

Special Instruction:

Surveyor:

Maimen

Hwee Jie

ASSIGNMENT (Office)

From (Person):

Ngu Sam Wei Shawn

of

SMO

Date/Time:

8/11/90 12:17pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLN 5301 H

Insured:

GBB 6830Y

at Workshop m/s

Eng Soon painting

Tel:

6760 6271

of

Blk 4 Yew Tee Ind. Est 393-J Woodlands Rd

Policy No:

D19MTHCVE000167

Claim No:

CMTD1900190

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

05/01/2019

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

12:45pm 8/11/9

Person Contacted:

Mr. Teo

Vehicle:

IN / OUT

Date/Time

Action/Instruction (x) Estimate

SLN 5301H-X

GBB 6830Y-X

REF: 8MO

PRs (Marimen)

ASSIGNMENT

From: Date: 08/01/2018

Estimated Cost:

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

To inspect Vehicle No:

SLN 5301 H

at Workshop n/s

Eng Soon Painting

of

BLK 4 Yew Tee Ind Est 393-J Woodlands

Insured:

Road

Policy No.

Claims No.

Sum Insured:

Excess:

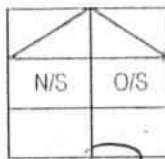
(Client's Record)

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:

12

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

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

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No: SLN 5301 H

Yr Regd: 8 May 2017

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

Truck / Trailer or

Make:

Nissan Qashqai

C.C 1197

Colour:

Brown

A/C: Insured / Std / NI / NA

Sp. Reading

34109

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

SJNFEAJ11U1957045

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F: 215/60 R17

R:

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.

5/1/19

D.O.I.

8/1/19

Survey held at

Eng Soon

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

Range: \$1,000 - \$12,000
12 days

22/1/2019

Date/Time, File Pass to?

☐

Preli. Report

Days Of Repair:

12

1)

☐

Final Report

Resurvey No. of Trip:

-

Survey Fee:

100

Date/Time, File Return to?

Transportation:

2)

Add Fee:

☐

Site Insp (\$)

) \$ + RS St

☐

Interview (\$)

) Photos

☐

Tech. Invs (\$)

) Others

☐

Weekend (\$)

) "

Report Format:

PRE

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

TOTAL

110

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	07 Jan 2019		08 Jan 2019 12:17 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	--------------------------

CLAIM SUBFOLDER DETAILS

[\[Created by insurer\]](#)

Insured:	ETHOZ GROUP LTD, Co. Reg. No.: 198104531H		
Main Claimant:	KHOO KIAT HOCK, ID: S1230881G		
Vehicle Reg. No.:	SLN5301H	Date of Loss:	05/01/2019 21:00 - :59
Claim Type:	TP / CMTD1900190	Policy/Cover Note No.:	D19MTHCVE000167 (Third Party Only)
Vehicle Reg. No. (Insured):	GBB6830Y	Policy No. (Claimant):	
		Excess:	
Repairer:	Eng Soon Painting Services (HQ) 393J WOODLANDS ROAD, 677978 Woodlands - Tel: 67606271		
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 17/01/2019]		
Driver/Custodian (Insured):	MUHAMMAD NUR SHAFIQ BIN HASBALD (), NRIC: S9402740C, Tel: +6591494240		

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

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 0881G

Vehicle Details

Vehicle No.: SLN5301H

Vehicle to be Exported: No

Intended Deregistration Date: 09 Jan 2019

Vehicle Make: NISSAN

Vehicle Model: QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR

Primary Colour: Brown

Manufacturing Year: 2017

Engine No.: HRA2425532A

Chassis No.: SJNFEAJ11U1957045

Maximum Power Output: 85.0 kW (113 bhp)

Open Market Value: \$18,583.00

Original Registration Date: 08 May 2017

First Registration Date: 08 May 2017

Transfer Count: 0

Actual ARF Paid: \$13,583.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 07 May 2027

PARF Rebate Amount: \$10,187.00

Intended COE Rebate Details

COE Expiry Date: 07 May 2027

COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years): 10

QP Paid: \$51,600.00

COE Rebate Amount: \$42,968.00

Total Rebate Amount: \$53,155.00

The information contained herein is correct as at 09 Jan 2019

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	07/01/2019 14:19
Date Of Accident	05/01/2019 22:00
Exact Location Of Accident	ALONG TAMPINES AVE 6
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN5301H
Insured/Policyholder	
Name Of Registered Owner	KHOO KAI HOCK
NRIC No	S1230881G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91094290
Alternative Phone No	OFFICE-91094290

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VA1/GA338609
Cover Note Number	

Driver

Name of Driver	KHOO KIAT SIONG (QIU JIEXIONG)
NRIC No	S8441662B
Date Of Birth	29/12/1984
Occupation	INDOOR
Date Of Driving Pass	14/01/2004
Driving Experience	14 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97923031
Fax Number	
Contact Number	
Email Address	KIATSIONG@GMAIL.COM

Address	APT BLK 196 PASIR RIS STREET 12 #05-92
Postcode	510196
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	3
Passenger 1	NAME: : TAN KAI XI GENDER: : FEMALE
Passenger 2	NAME: : KAE LY CHOO YI XUAN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD WITH TP
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB6830Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE

Name of Driver	MUHAMAD NUR SHAFIQ BIN SASBALD
NRIC/Passport Number	S9402740C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHD1081T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LEE SENG CHONG
NRIC/Passport Number	S0332304H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	KHOO KIAT SIONG (QIU JIEXIONG)
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SLN5301H
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	KAELY KHOO YI XUAN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SLN5301H
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
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: *Deleen*
NRIC/FIN No.:

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190106/2030

1 of 5

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20190106/2030

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/01/2019 10:52		Vide Report No.: G/20190105/0236		Station Diary No.: 50	
Informant's Particulars					
Name of Informant: KHOO KIAT SIONG			Address: APT BLK 196 PASIR RIS STREET 12 #05-92 SINGAPORE 510196		
ID Type / ID No.: NRIC NO / S8441662B			Contact No.: Home/Office: Mobile: 97923031		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 34	Date of Birth: 29/12/1984	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: UNEMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 05/01/2019 22:00	Type of Location: Straight Road
Location: Along Road 1 TAMPINES AVENUE 6 TAMPINES AVE 6 TOWARDS TAMPINES AVE 2, AFTER TAMPINES AVE 6 BUS STOP B10				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB6830Y	Van					0
SHD1081T	Car					0
SLN5301H	Car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	Brown	Seriously Damaged	2

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190106/2030

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 5

Report No. T/20190106/2030

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMAD NUR SHAFIQ BIN SASBALD	ID No.	S9402740C
Related Vehicle	GBB6830Y (Van)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	LEE SENG CHONG	ID No.	S0332304H
Related Vehicle	SHD1081T (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	TAN KAI XI	ID No.	S8313871H
Related Vehicle	SLN5301H (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190106/2030

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 5

Report No. T/20190106/2030

CONTINUATION OF REPORT

Driver:			
Name	KHOO KIAT SIONG		ID No. S8441662B
Related Vehicle	SLN5301H (Car)		Contact No. 97923031
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	05/01/2019	Date Discharge	06/01/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger:			
Name	KADY KHOO YI XUAN KADY		ID No. T1320055B
Related Vehicle	SLN5301H (Car)		Contact No. NIL
Hospital/Clinic	KK WOMEN'S AND CHILDREN'S HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	05/01/2019	Date Discharge	06/01/2019
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 05/01/2019 at about 10pm, I was driving my vehicle bearing the registration number: SLN5301H along Tampines Ave 6 towards Tampines Ave 2. I had my wife and my daughter seated at the rear passenger seats. I was driving on the left most lane of the road. It was a 2 lane road.

I was driving at a slow speed as it was a bend. Suddenly, along the said road, just slightly after the bend at a bus stop, a vehicle in front of me, a "Premier" silvered colored taxi bearing the registration number: SHD1081T, applied its brakes as a passenger flagged down for the taxi at the said of the road. The driver did not switch on the hazard lights. Upon seeing this, I applied my emergency brakes to avoid a collision. Fortunately, I did not collided with the said taxi.

Suddenly, I felt an impact coming from the rear of my vehicle. The impact caused my vehicle to surge forward. I was not sure if I collide with the said taxi in front of me. I came out of my vehicle and noticed a van, bearing the registration number, GBB6830Y, had collided onto the rear of my vehicle, on the right side.

The ambulances and traffic police came down to scene. My daughter was conveyed to KKH by ambulance to make a further check on her as she complaint of pain, however she was discharged and we were advised to keep her under observations. At the point of accident, I refused the conveyance as I wished to seek my own medical treatment which I did at Mount Alvernia Hospital and I was given 3 days medical leave.

I had in-vehicle cameras installed at both front and rear facing and the traffic police took the memory card for investigation purposes. The damages to my vehicle are that it was badly dented on the right rear side.



**SINGAPORE
POLICE FORCE**



T/20190106/2030

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

4 of 5

Report No. T/20190106/2030

CONTINUATION OF REPORT

When I made a checked on the taxi infort of me, I do not see any visible damages on it at the rear portion and i had took a photo of the said taxi. I also had exchanged particulars with the other two drives.

**SINGAPORE
POLICE FORCE**

T/20190106/2030

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

5 of 5

Report No. T/20190106/2030

CONTINUATION OF REPORT**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

G /

Sgt 2 MUHAMMAD ALIF BIN AZALI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

06/01/2019 10:52

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD SHAHRIL BIN ABDULLAH

Contact No.: 65476083

Classification Of Case:

Authentication Stamp

NP168



































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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	07 Jan 2019		08 Jan 2019 12:17 Edit Adj Rpt	S\$0.00 Edit Estimates	S\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured: ETHOZ GROUP LTD , Co. Reg. No.: 198104531H									
Main Claimant: KHOO KIAT HOCK , ID: S1230881G									
Vehicle Reg. No.: SLN5301H		Date of Loss: 05/01/2019 21:00 - :59 [19 Months and 28 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / CMTD1900190		Policy/Cover Note No.: D19MTHCVE000167 (Third Party Only)							
Vehicle Reg. No. (Insured): GBB6830Y		Policy No. (Claimant):							
		Excess:							
Repairer: Eng Soon Painting Services (HQ) 393J WOODLANDS ROAD, 677978 Woodlands - Tel: 67606271									
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 ... [Handled by ONG HWEE JIE] ... [Final Rpt due 17/01/2019]									
Driver/Custodian (Insured): MUHAMMAD NUR SHAFIQ BIN HASBALD (), NRIC: S9402740C, Tel: +6591494240									
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

***SLN5301H (CMTD1900190)**
[GBB6830Y]
TP
KHOO KIAT HOCK
Jan 5 2019 9:00PM
[ETHOZ GROUP LTD]
Eng Soon Painting Services

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)	Thumbnail	Print
1	08/01/19 12:16	Accident Statement From: SC - Reg. No: GBB6830Y, Claimant: ETHOZ GROUP LTD	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
2	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
3	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
4	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
5	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
6	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
7	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
8	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
9	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
10	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
11	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
12	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
13	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
14	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
15	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
16	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
17	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
18	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
19	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
20	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
21	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
22	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
23	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
24	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
25	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
26	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
27	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
28	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
29	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
30	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
31	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
32	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>
33	09/01/19 10:05	General View	 Load JPG	<input checked="" type="checkbox"/>

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)		Thumbnail	Print
34	09/01/19 10:05	General View		Load JPG	<input checked="" type="checkbox"/>

Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)		Thumbnail	Print
1	08/01/19 09:50	PRI FAX FR BONNIE KWOK LLC - SLN5301H		Load PDF	
2	08/01/19 10:48	Third Party E-filed GIA report(M)		Load PDF	
3	08/01/19 12:17	Pre-Repair Survey - ASSIGN LKK		Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

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/SMO19000416/JCD3E2

Date: 23/01/2019

REFERENCE

Handling Insurer:	Sompo Insurance Singapore Pte. Ltd.	Policy No:	D19MTHCVE000167
Claimant Vehicle No :	SLN5301H	Insured Vehicle No :	GBB6830Y
Date of Loss:	05/01/2019	Nature of Claim:	TP
		Claim No:	CMTD1900190

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLN5301H		
Make & Model:	NISSAN QASHQAI, 1.2 DIG-T CVT ABS 2WD 5DR (A)	Engine No:	HRA2425532A
Reg. Date:	08/05/2017 (Man. Year: 2017)	Chassis No:	SJNFEAJ11U1957045
Colour:	Brown	Odometer:	34109 km
Engine Capacity:	1197 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:	215/60 R17	Rear Tyre Size:	215/60 R17
Front Left Side:	Goodyear 6 mm	Rear Left Side:	Goodyear 6 mm
Front Right Side:	Goodyear 6 mm	Rear Right Side:	Goodyear 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:	08/01/2019	
Date Inspected:	08/01/2019	Inspected At: Eng Soon Painting Services (HQ) 393J WOODLANDS ROAD Singapore 677978
Estimated Period of Repair:	12.0 days	

Adjuster: ONG HWEE JIE

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 \$11,000.00 - \$12,000.00

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 23 Jan 2019)
Parts:	M1-SUV	NISSAN QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLN5301H)	
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.

< END OF ESTIMATES >