

ASS. REC. BY:

REF:

CS/AWA19001280/Aq03

Special Instruction:

Surveyor:

Adrian

ASSIGNMENT (Office)

From (Person):

Tan Kah Leong

of

AWAC

Date/Time:

21/1/19 @ 1.55pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SME 8252G

Insured:

GV 5411 R

at Workshop m/s

MG solution

Tel:

6744 4165

of

23 kaki Bukit Ave 4 # 02-03B

Policy No:

AVCP SB 0092351802

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

17/01/2019

CA / REV / REP. / REV 24 HRS

hup?

H.O.D. Endorsement:

Date/Time:

21Spm @ 21/1/19

Person Contacted:

Ms. Hong

Vehicle IN/OUT

Date/Time

Action/Instruction

(✓)

Estimate

SME 8252G-X

GV 5411R-X

US\$ 7300, 4 days (Red \$ 5317.76, 70%.)

ASS. REC. BY:

REF:

Adrian

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: _____

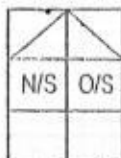
Claims No: _____

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: 4 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Vehicle: IN / OUT

Person Contacted: _____

Veh No: SME82524 Yr Regn: 2018, OctType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda Fit C.C. 1317Colour: Yellow A/C: Insured / Std / Nil / NASp. Reading 8154 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: GK31331520Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 175/70R14R: 175/70R14

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 21/01/19Survey held at M6 SolutionDes. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

TP AWA

RECEIVED 11 APR 2019

mv:

pv:

Nett:

Date/Time, File Pass to?

Date/Time, File Return to?

1) 4/4 11/19

2)

3)

4)

5)

6)

Prel. Report:

Final Report:

Part Prices Check:

IN

OUT

Survey Fee:

Date:

Basic & Add.

S + RS, SI

Photos

Others

TOTAL

200

Nivitha (LKK Auto)

From: Tan, KahLeong <KahLeong.Tan@awac.com> on behalf of Motorsurvey <Motorsurvey@awac.com>
Sent: Monday, 21 January 2019 1:55 PM
To: 'assignments'
Cc: SUR; Yan
Subject: TP Survey assignment for SME 8252G - DOA: 17/01/2019 Our ref: GV 5411R/SG

The above captioned accident refers.

Pursuant to the Practice Directions Amendment No. 1 of 2016 which was effective on 1 April 2016, we like to advise that the third party claimant and us **do** have consensus in the appointment of **Mr Adrian Ling Wai Ping** as the Single Joint Expert to conduct the pre-repair survey of the third party claimant's vehicle.

Please conduct "THIRD PARTY" survey on without prejudice basis. The information as are follows:

3 rd Party Vehicle	:	SME 8252 G
Insured Vehicle	:	GV 5411 R (Accident not Reported)
Policy Number	:	AVCPSB0092351800
Name of Workshop	:	MG Solution Pte Ltd
Contact Number	:	6744 4165
Person to Contact	:	Jamie Yan
Estimated Cost of repairs	:	\$ NA

Regards,
Claims Division

Copy to MG Solution Pte Ltd via Email

Note -

- (x)
1. This is to keep you informed that we have appointed surveyors to conduct inspection to your client's damaged vehicle on a without prejudice basis.
 2. **Please keep our motor surveyor and us informed so as to enable the surveyor to conduct a post repair inspection once your client's vehicle has been repaired and before returning the repaired vehicle to your customer.**
 3. Please quantify your client's claim with all relevant supporting documents once your client's vehicle has been repaired.
 4. Please do not construe this appointment of surveyor and our above request as an admission of liability.

Regards
Motor Claims
Claims Group
Global Market

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

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	18/01/2019 16:43
Date Of Accident	17/01/2019 16:20
Exact Location Of Accident	OPEN CARPARK AT BLK 216 MARSILING LANE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME8252G
Insured/Policyholder	
Name Of Registered Owner	SHABANA AKHTAR D/O FACHRUZZAMAN
NRIC No	S8213417D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91685114
Alternative Phone No	OTHERS-91685114

Vehicle Particulars

Manufacturer	HONDA
Model	FIT 1.3GF CVT
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V13488/VPC/R00 (COMP)
Cover Note Number	

Driver

Name of Driver	AMJAD ALI
NRIC No	S8361064F
Date Of Birth	18/04/1983
Occupation	OUTDOOR
Date Of Driving Pass	31/08/2015
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91685114
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 11 JOO SENG ROAD #08-114
Postcode	360011
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 (including own vehicle) involved in the accident	2
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE

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

REFER TO SKETCH PLAN ATTACHED

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GV5411R
Vehicle Make/Model/Colour	TOYOTA DYNA 150 5MT
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

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.
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7. By the lodging 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:

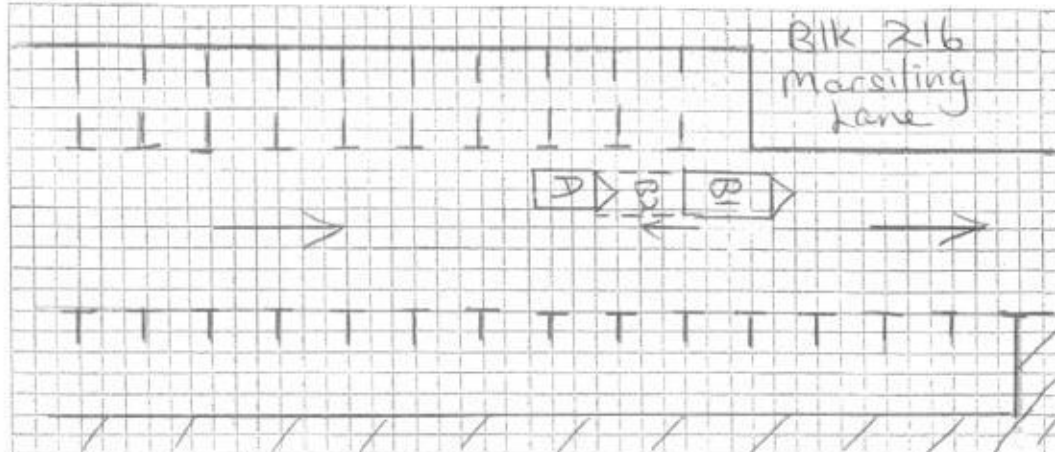
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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 (a) 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: **14 JAN 2019**

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17/01/2019 at about 1622 hrs at Open Car Park of Blk 216 Marsiling Lane. My vehicle was stationary stopped behind Vehicle (B) while waiting to alight my passenger. Suddenly Vehicle (B) made a quick reverse without proper lookout and without cautious hence collided onto my Front Portion of my Vehicle (A) causing damages to my vehicle. I have one passenger inside my vehicle.

(A) SME 8252 G

(B) GV 5411 R

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

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:

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg

Reporting Centre Personnel's Signature
Name:
NRAC/RN No:

18 JAN 2019

MG SOLUTION PTE LTD

23 Kaki Bukit Avenue 4 (South Wing) #02-03 Singapore 415933

Tel: (+65) 6243 1373 | Fax: (+65) 6243 1376

Reg. No: 201427944N

TO	: ALLIED WORLD	DATE	: 21/01/2019
ATTENTION	: MOTOR CLAIMS DEPT	JOB TYPE	: T/ P CLAIM
ESTIMATE REPORT	:		
<u>VEHICLE DETAILS</u>			
VEHICLE NO	: SME8252G		
MODEL	: HONDA FIT 1.3G A		<i>Xiao Chen</i>
CHASSIS NO			
<u>ACCIDENT DETAILS</u>		DATE	: 17-Jan-19
		TIME	: 16:22HRS
THIRD PARTY REQUESTOR / CONTACT : JACK LI			

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	FRONT BUMPER <i>Rehd</i>	1	\$ 820.00	\$ 820.00
2	FRONT BUMPER SIDE RETAINER <i>Re</i>	2	\$ 62.50	\$ 125.00
3	FRONT BUMPER REINFORCEMENT BAR <i>Re</i>	1	\$ 320.00	\$ 320.00
4	CENTRE GRILLE <i>Rehd</i>	1	\$ 398.50	\$ 398.50
5	CENTRE GRILL UPPER CHROME <i>Re</i>	1	\$ 250.60	\$ 250.60
6	CENTRE GRILLE LOWER CHROME <i>Rehd</i>	1	\$ 222.60	\$ 222.60
7	CENTRE GRILLE LOGO <i>Re</i>	1	\$ 50.00	\$ 50.00
8	CENTRE GRILLE LOGO BASE <i>Re</i>	1	\$ 55.00	\$ 55.00
9	HEADLAMP <i>Lt Rehd</i>	2	\$ 1,050.50	\$ 2,101.00
10	HEADLAMP LOWER BRACKET <i>Rehd Lt</i>	2	\$ 60.00	\$ 120.00
11	SUPPORT PANEL <i>Re</i>	1	\$ 680.00	\$ 680.00
12	FRONT FENDER <i>Re</i>	2	\$ 488.50	\$ 977.00

2331

1864.80

TOTAL PRICE	\$ 6,119.70
LESS 20%	\$ 1,223.94
SUB TOTAL PRICE	\$ 4,895.76

SPECIAL NETT ITEMS

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT
1	FRONT NUMBER PLATE <i>Re</i>	1	\$ 50.00	\$ 50.00

2	FRONT BUMPER CLIPS(SET) <i>de</i>	1	\$ 22.00	\$ 22.00
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22

TOTAL \$ 72.00

CLAIM DETAILS: LABOUR AND SPRAY PAINTING (FRONT)

1	PANEL BEATING, REMOVING AND REPLACING PARTS	\$ 1,200.00	400	
2	SPRAY PAINTING TO AFFECTED AREA	\$ 1,200.00	600	
3	TUFF COAT	\$ 150.00	x	
3	WIRING CHECK <i>✓</i>	\$ 100.00	30	

TOTAL

\$2,650.00

1030

ESTIMATE REPORT

TOTAL PARTS COST : \$ 4,967.76

TOTAL LABOUR COST : \$ 2,650.00

TOTAL REPAIR COST : \$ 7,617.76

APPROVED DETAILS

SURVEYOR :

CONTACT NO :

FAX :

PART BY PART / LUMP SUM :

NO OF DAYS :

Adrian Lj
1/s 21/07/19.

total: 2816.80

c/s: 2.31c

04 Days.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer:

Signature:

Date:



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

ALLIED WORLD ASSURANCE COMPANY LTD

Ref : CS/AWA19001280/Aqd3n2

(SINGAPORE BRANCH)
60 ANSON ROAD #08-01 (8th FLOOR)
MAPLE TREE ANSON
SINGAPORE 079914

Date : 12-04-2019



Code : AWA

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GV 5411R	Veh. Inspected	SME 8252G
Policy No.	AVCP SB0092351800	Coverage (\$)	0.00
Claim No.	GV5411R/SG	Excess (\$)	0.00
Assign From	TAN KAH LEONG	Assign Date	21/01/2019

2. Vehicle Particulars & Condition

Make & Model	HONDA FIT	c.c	1317
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	GK31331520	Colour	YELLOW
Odometer	8154	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	175/70 R14	YOKOHAMA	6 mm
L/H Front Tyre	175/70 R14	YOKOHAMA	6 mm
R/H Rear Tyre	175/70 R14	YOKOHAMA	6 mm
L/H Rear Tyre	175/70 R14	YOKOHAMA	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	17/01/2019	Inspection Date	21/01/2019
Survey held at	MG SOLUTION PTE LTD 23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRE, SINGAPORE 415933		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SME 8252G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER	DEFORMED	820.00	530.00
2	FRONT BUMPER SIDE RETAINER @\$62.50	NECESSARY	125.00	64.00
1	FRONT BUMPER REINFORCEMENT BAR	NOT NECESSARY	320.00	-
1	CENTRE GRILLE	CRACKED	398.50	398.50
1	CENTRE GRILLE UPPER CHROME	NOT NECESSARY	250.60	-
1	CENTRE GRILLE LOWER CHROME	CRACKED	222.60	178.00
1	CENTRE GRILLE LOGO	NECESSARY	50.00	50.00
1	CENTRE GRILLE LOGO BASE	NOT NECESSARY	55.00	-
2	HEADLAMP @\$1050.50	N/S CRACKED	2,101.00	1,050.50
2	HEADLAMP LOWER BRACKET @\$60.00	N/S CRACKED	120.00	60.00
1	SUPPORT PANEL	TO REPAIR SEE LABOUR	680.00	-
2	FRONT FENDER @\$488.50	TO REPAIR SEE LABOUR	977.00	-
	LESS 20% DISCOUNT		-1,223.94	-466.20
			4,895.76	1,864.80
<u>SPECIAL NETT ITEMS</u>				
1	FRONT NUMBER PLATE (SN)	NOT NECESSARY	50.00	-
1	SET FRONT BUMPER CLIPS (SN)	NECESSARY	22.00	22.00
			72.00	22.00
<u>LABOUR</u>				
	PANEL BEATING, REMOVING AND REPLACING PARTS. INCLUSIVE OF THE REPAIR OF SUPPORT PANEL AND FRONT FENDER.		1,200.00	400.00
	SPRAY PAINTING TO AFFECTED AREA.		1,200.00	600.00
	TUFF COAT.	NOT NECESSARY	150.00	-
	WIRING CHECK.		100.00	30.00
	-		-	-
	-		-	-
	-		-	-
			2,650.00	1,030.00
GRAND TOTAL			7,617.76	2,916.80

RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,300.00
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Report Ref No. CS/AWA19001280/Aqd3n2



Report Ref No. CS/AWA19001280/Aqd3n2

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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