melmien	Rasul	ASSIGNME	VI (Office)			
Milmich Frenchesser		of	MS[[1	Lor	te/Tune	28/01/2019
Estimated Co			Dill to			-
o Impect V	Chick No SKF	2852 H		Insured	YH	TISKH
at Workshop	Pricise F	<b>Uto</b>		Tel:		
4	BIK 1 Kaki	Bukit Ave 6	#0 J-34			
Jolicy Ne	B 1866 HOOMKC		Claim No.	55	8528	
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RECEIVED 5 FEL 2019

Swille Com	REF	2/	8 09824
1		ASSIGNMENT	Lot 14 124; 2022/
From	Date	Ven No SKF 2852	H William 2007 74W
Estimated Cost		Type M.Car   M.Cycle / Bus / V	an / Lorry / Taxi / Prime Mover /
OD / TP //WS / TP RES / C	DD RES / EVA / INV / MV	Truck   Trailer or	
To Inspect Vehicle No. 5	SKI 2852H	MARO MITSUAISHI L	HWLCA 1-6A 1584
of Workshop res PR	echo ano	Calaur Bunk	AC Insured / Std / NI / NA
myo-bory	402-34	Sp Reading 229683	FRado Insured / Std / NI / NA
Requests	Msih   PRS	Enghin	
Folloy No	7	GNO JMYSTZS	3A7 4005663
Diams No.		Gen. Cond. Good / 540 / Poor /	
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(Chiert's Riscord)		Eliake Gorder / Jammed / Le	aked / Burnt or
Make of Veni		Mod NII LARIER / STD A/R	Sins or
		Tyre Size F:	45/60R16
(Policy Condition)		R	4.
Semark. The veh had con	nmenced its NS	OS BS/DUN/EXNOVA/GY/FS/	LIZA (MIC) OHTSU / PIR / SUMI /
copair at the time	g of inspection	TOYO / YOKO or	
Ball or Market Value		Eistel	Row
DAY Accident Pount	Consistent? Yes or No	RBa 5 mm	RBst 5 nm
GIA / PR Seen	Consistent? Yes or No	LBM 5 mm	LBa 5 nm
Est Repairs	days Res Yes or No.	DOA 15/05/18	18/05/18
um Sam	% 3 Val. Yes or No	Survey head at. PREC	ISE AUDU
CA / REV / REP /	24 HRS	Des. of Damages. Frt / Rear /	D/S / N/S / U/C / Rooftop or
	Vehicle IN	rout RA	420/3
	son Contacted	The U/C / Chassis frame /	Body Structure inflected due to collesion.
Date Time Action /	Instruction & D. a.s.	60	4570 - 5500
	* Vet	our Estimate : S\$	7500-5500
		* A days	
		* 4 days	
2/6/18 Submin	PRS Report.		
	1, 1		*
	RECEIVED	2018	
Service 2 - Park to	: Preli. Report	Days Of Repair	
	Final Report	Resurvey No. of Trip:	Survey Fee: 120
one line for fature			Tumporasan 50
	Add	Fee: Site Imp. (\$	1 1000 30
		interview (\$	1. 170-001
Report Format		Tech live (\$	1000
ump Sum LB L Ib		West-103 \$	
			120

Insurance Loss Adjusters and Qualified Appraisers 16 Sin Ming Walk, #03-02 Singapore 575568 Tel: 6554-2269 Fax: 6459-0269 Regn. No: 52864369W

To Mr. Abdul Hamed Bin Hassan c/o 1 Kaki Bukit Ave 6 #02-34/36 AutoBay Singapore 417883

INVOICE NO : PT1805008 Our Ref : PT1805008-L

Your Ref

Date : 31st May 2018

	AMOUN
VEHICLE REGISTRATION NO : SKF 2852 H  VEHICLE MAKE/MODEL : Mitsubishi Lancer 1.6A	
TO SERVICE RENDERED:-  X CONSULTANT/APPRAISER FEES	. 200
X PHOTOGRAPHS	\$ 360.0 \$ 60.0
X TRANSPORT CHARGES  RE-INSPECTION FEES	\$ 60.0
	\$ 480.0
DOLLARS :- FOUR HUNDRED & EIGHTY ONLY	

E. & O. E.

for PREMIER APPRAISER SERVICES

Insurance Loss Adjusters and Qualified Appraisers 16 Sin Ming Walk, #03-02 Singapore 575568 Tel: 6554-2269 Fax: 6459-0269 Regn. No: 52864369W

Our Ref : PT1805008-L Date : 31st May 2018

Mr. Abdul Hamed Bin Hassan c/o I Kaki Bukit Ave 6 #02-34/36 AutoBay Singapore 417883

WITHOUT PREJUDICE

Dear Sir.

Re: Third Party Claim / Workshop:-Precise Auto Service Vehicle Regn. No.: SKF 2852 H

We refer to your instruction to appraise the above-mentioned vehicle on 18th May 2018 .

A static inspection was carried out and our report is enclosed for your perusal. The estimated repair costs submitted by the repairer for S\$ 8,317.70 as per our attached schedule have been scrutinized and revised by us against the actual damages found on the vehicle and we recommend the replacements and rectification accordingly.

The repairer has agreed to undertake the repairs at our adjusted amount of S\$ 4,900.00 lump sum corresponding to supply of parts, labour charges and spraypainting. However, we have not given instruction to authorize.

Under normal circumstances the estimated period of repairs is SEVEN (7) days. The estimated period of repairs given above is based on Working Day(s) only.

Photographs of the damaged vehicle taken by us during our inspection are enclosed.

We are leaving the matter to you for a decision.

Please do not hesitate to contact us if you need any clarification.

Assuring you of our best services always.

Very truly yours

PREMIER APPRAISER SERVICES

LESLIE & C LIM CAE (UK), MIMI (UK)

MSAAA, Automotive Appraiser Dip. ATM. Automotive Engineer

#### VEHICLE INSPECTION REPORT

To:

Mr. Abdul Hamed Bin Hassan

c/o 1 Kaki Bukit Ave 6 #02-34/36 AutoBay Singapore 417883

Our Ref.

: PT1805008-L

Policy No. Claim No. Sum Insured .

Type of Claims : T/P Claim

Date

: 31st May 2018

Assigned By

: Mr. Abdul Hamed Bin Hassan

Date of Assignment Date of Accident

: 18th May 2018 : 15th May 2018

Date of Inspection

: 18th May 2018 Follow up inspections were also conducted.

Name of Workshop

Precise Auto Service

Place of Inspection

1 Kaki Bukit Ave 6 #02-34/36 AutoBay

Singapore 417883

#### PARTICULARS OF VEHICLE

Registration No.

: SKF 2852 H

Odometer/km : 229033

Make/Model

: Mitsubishi Lancer 1.6A

Chassis No. : JMYSTCS3A7U005663

Type Of Body

: 4 Dr. Saloon

Engine No.

: 4G18HS1573

Year of Manuf./Regn. : 2007

Engine Cap.

: 1584 cc

Colour

: Black

Carrying Cap. : 4 Passengers

#### PRE-ACCIDENT CONDITION (Static tests only)

Handbrake Footbrake

: Serviceable

Body Work

: Good

Market Value

: N/A

Steering

: Serviceable : Serviceable Paint Work Modifications : None

Good

Scrap Value Others

#### CONDITION OF TYRES

Size

N/s - Trend Depth/Make

O/s - Tread Depth/Make

Front Tread

195/60 - R56

5mm - Michelin

5mm - Michelin

Rear Tread (inner)

Rear Tread (outer)

195/60 - R56

6mm - Michelin

6mm - Michelin

The above represent an estimated remaining life of the tyre treads in mm.

#### POINT OF IMPACT/GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained an impact on the rear portion.

 $\pm 1$ 

1

The boot lid, boot floor cum spare wheel panel, rear end panel, rear bumper, bumper beam, exhaust silencer were dented/ buckled/ distorted.

For details of damages please refer to our schedule attached.

#### REMARKS :

This survey was conducted strictly without prejudice.

This report is confidential and is given for the use of clients and their agents and any disclosure or publication of it or parts thereof shall be the responsibility of such person and no liability shall be attached to us therefore.

Our Ref: PT1805008-L

Vehicle No: SKF 2852 H

				venicie (vo :	SICF 2852 H	į.
Qty	Parts Descriptions	Conditions		Repairer's Est.		Our Revised
	NETT ITEMS:					
1	bootlid	dented/distorted	SS	538.00	S\$	538.00 /
2	bootlid hinges	serviceable	-	138.00	- 04	- XAM
2	bootlid stopper	serviceable		12.00		- xn-1
1	bootlid lock	stiffened		62.00		62.00 /
1	bootlid lock striker	serviceable		24.00		- XA1
1	bootlid lock cable	serviceable		38.00		- XAC
1	bootlid weatherstrip	damaged		144.00		144.00
1	bootlid badge - logo	necessary		38.00		38.00
1	bootlid " LANCER " emblem	necessary		34.00		34.00
1	bootlid " GLX " emblem	necessary		24.00		24.00
1	bootlid outer garnish	dented/distorted		197.00		197.00 /
5	bootlid outer garnish clips	necessary		20.00		20.00
2	tail lamps	chafed/cracked		712.00		712.00 /
2	tail lamp base panels	dented - repair		100.00		- VM1
2	tail lamp sealant	necessary		38.00		38.00 / 0
4	tail lamp clips	necessary		16.00		16.00 /
1	rear bumper	dented/distorted		636.00		636.00 /
10	rear bumper clips	necessary		30.00		30.00 /
1	rear bumper beam	dented/bent		155.00		155.00 📉 ^ ^
2	rear bumper side retainers	damaged		66.00		66.00 /
20	rear bumper side retainer rivets	damaged		56.00		56.00
6	rear bumper dust cover clips	necessary		18.00		18.00 XM
1	rear end panel	dented/buckled		368.00		368.00
1	rear end panel top trim	warped		128.00		128.00 /
4	rear end panel top trim clips	necessary		12.00		12.00
2	rear fender inner trim - fabric	o/s distorted		370.00		185.00 × 5VC
1	rear fender inner trim clips - fabric	o/s necessary		48.00		24.00 X NN
1	floor panel board	distorted		128.00		128.00 × K
1	spare tyre windnut exhaust silencer assy	serviceable		20.00		= 3C n 1
3	exhaust silencer mountings	bent/buckled		329.00		329.00 × NN
	exhaust shericer mountings	damaged	00	54.00		54.00 X J///
		30%1 LESS	S\$	4,553.00		4,012.00
		10% LESS	10%	455.30	10%_	401.20
		2772.90		4,097.70		3,610.80
	S/NETT ITEMS:	-				
1	exhaust chromed pipe	damaged		120.00		95.00 X NN
1	reverse sensor	serviceable		380.00	shed 2	220.00/
			-	000.00	, <u>v</u>	260.007
		TOTAL S/PARTS	S\$	4,597.70	S\$	3,925.80 779
	Towing charges			80.00		- × 111
	To remove/refit luggage trims & ga	rnish to assist repairs.		180.00		60 80.00
	To mount vehicle on Car-O-Liner in chassis alignment.	norder to conduct	12	380.00		- × m
		Balance c/d	S\$	5,237.70	S\$	4,005.80

Our Ref: PT1805008-L

Vehicle No: SKF 2852 H

	Repairer's Est.		C	Our Revised
Balance b/f	S\$	5,237.70	S\$	4,005.80
Labour charges to repair, panel beat and straighten damaged parts and replace the above-mentioned parts.		1,200.00		880.00 700
To remove/replace exhaust silencer & repair exhaust center pipe.		280.00		120.00 📈 🛧
To remove/replace reverse sensor.		100.00		40.00 /
To check wiring functions.		80.00		30.00/
To putty, apply primer & spray-paint the affected areas.		1,200.00		980.0080
To apply rust-proofing on repaired/replaced panels.	s\$_	220.00 8,317.70	s\$_	80.00 6,135.80

Note: The repairer has agreed to undertake the repairs at our adjusted amount of \$\$ 4,900.00 lump sum corresponding to supply of parts, labour and spray painting charges.

The estimated period of repairs is SEVEN (7) days. Pursuant to your instruction we have **not** authorised repairs on your behalf. 2772.50 200.00 1710.00 4682.90 20% 3746.32 2/3-3,700 2/46.32

PREMIER APPRAISER SERVICES

LESLIE K C LIM CAE (UK), MIMI (UK) MSAAA, Automotive Appraiser

Dip.MTM. Automotive Engineer

Menu



## Service Request Details

Claim

59M01CD7

Reference

None A

Loss Date

January 26, 2019

Request Date

January 30, 2019

Due Date

February 8, 2019

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

#### Actions

Next Step

Agree to perform service



Acresi Wark

Insured

CHONG JIA HAO

BLK 527D PASIR RIS STREET, 51 #08-677, 514527, Singapore

LEX AUTO CONSULTANTS RTE LTD (TP) ... Men

SMF4458B

Make

TPVD VOLVO

Model

560-2.0

Service Address

1 + 1

Primary Contact

WONG KIAN GHONG SG, Singapore

### Claim Handler

DHAKAL Raghav Contact only through email raghav.dhakal@axa.com.sg

Additional Instructions

Messages Invoices History Documents Assessment Metrics Notes

New Meeting

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Date Of Birth

Occupation

Gender

Date Of Driving Pass

Driving Experience

Mobile Number

- Please report <u>correctly</u> 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,
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.
- 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

micresaid.	
THE PROPERTY OF THE PARTY OF TH	ACCIDENT STATEMENT
Date Of Report	15/05/2018 16:31
Date Of Accident	15/05/2018 07:30
Exact Location Of Accident	ALONG WEST COAST RD (NEAR TANGLIN SECONDARY SCH)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKF2852H
Insured/Policyholder	
Name Of Registered Owner	ABDUL HAMEED BIN HASSAN
NRIC No	S7140982A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91087498
Alternative Phone No	Office-91087498
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER
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	SI18V00381/VPE/R02
Cover Note Number	
Driver	
Name of Driver	ABDUL HAMEED BIN HASSAN
NRIC No	S7140982A

21/11/1971

INDOOR

MALE

30/11/1998

19 YEARS AND 5 MONTHS

(LOCAL) +65-91087498

Fax Number

Contact Number

OFFICE-91087498

EMail Address

NOEMAIL

Address

BLK 439 CHOA CHU KANG AVE 4 #03-451

Postcode

680439

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

CLEAR

Road Surface

DRY

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.

Number of Passengers (Including Driver)

NO 2

Passenger 1

Name:

ROSMINA

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

ON THE SAID DATE AND TIME OF THE ACCIDENT, I WAS STATIONARY ALONG WEST COAST ROAD ON THE LEFT LANE WAITING FOR THE TRAFFIC LIGHT TO TURN GREEN IN MY FAVOUR. SUDDENLY, I FELT AN IMPACT COMING FROM BEHIND AND WHEN I CAME OUT TO INSPECT MY CAR, I REALISED THAT VEHICLE B (YN1156H) DID NOT BRAKE IN TIME AND COLLIDED ONTO REAR PORTION OF MY CAR. HENCE, I HERE TO LODGE THIS REPORT TO CLAIM AGAINST VEHICLE B (YN1156H)'S INSURANCE FOR MY ACCIDENT DAMAGES. ME AND MY WIFE (PASSENGER) WILL GO TO SEE A DOCTOR IF FEEL ANY UNCOMFORTABLE AFTER THIS. I WISH TO STATE THAT I STATIONARY MY CAR IS BECAUSE TRAFFIC LIGHT IS TILL ON RED IN MY FAVOUR.

#### 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

YN1156H

Vehicle Make/Model/Colour

Details Of Properties

VEHICLE B

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)

ZHANG LEI

G2886514M

90571285

#### 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.
- 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
- 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.

Driver's Signature

(If driver is not the policyholder)

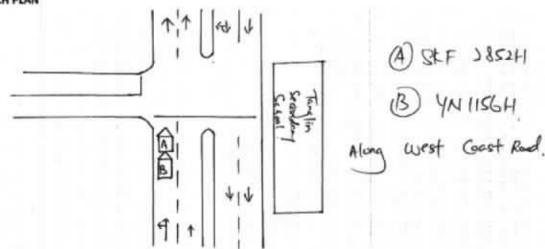
Date & Time

Reporting Centre Personnel's Signature

Name

NRIC/FIN No.

PRECISE



#### **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

On said close se time of the accident, I was s	
torn green in my favour. Suddonly I felt	on impact come
from behind and when I come out to inspect that which B (YN 11564) did not brake in	
outo pear portion of my cor. Hence I have to	
my accident damages. The & my wife (passence	
olocter, if fre I any uncomfortable often	
to state that i stationary my con is because	traffic light
is still on red in my fewbur.	

DECLARATION

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

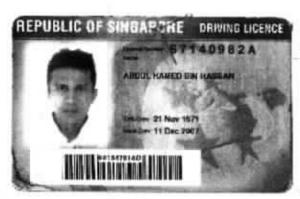
Policy older's signature Date & Time:

Driver's signature
(If driver is nowthe policyholder)
Date & Time:
15 | 5 | 18 | 15 | 48 hrs

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7140982A





ABDUL HAMED BIN HASBAN

MALAT 21-11-1971 SINGAPORE



YOU ARE LICENSED TO LORIVE VEHICLES IN THE FOLLOWING CLASSIES.

HHEH- 57140982A



26 11-2007

APT BLX 439 CHOA CHU KANG AVENUE 4 803-461 SINGAPORE 860439

NITIC No.: 37140982A

Date: 15/04/2017

127 4244

#### INSURANCE



www.libertyinsurance.com.sg

### Policy Schedule

Private Car

Name of Producer:

SC ALLIANCE PTE LTD (A1260-2)

Date of Issue:

Previous Policy No.:

04 Jan 2018

SH17V00659

Details of Insured

Name of Insured:

ABOUL HAVED BIN HASSAN

Mailing Address:

439 CHOA CHU KANG AVENUE 4, #03-451, SINGAPORE

Period of insurance (both dates inclusive):

From: 05 Jan 2018 00:00

To: 04 Jan 2019 23:59

NRIC/FIN No.:

S7140982A

Policy No.:

Postal Code (680439)

SI18V00381/VPE/H02/E00

Occupation:

Manager (Office)

Type of Body:

2006 / 2007

Details of Vehicle

Registration No.:

Capacity/Tonnage:

SKF2852H

Make and Model:

MITSUBISHI Lancor 1.6

SALCON Sealing Capacity Including Driver: Year of Manufacture/Registration:

1600 C.C

Chassis No.:

JMYSTCS3A7U005663

4G18HS1573

Engine No.: Sum Insured:

MARKET VALUE AT THE TIME OF LOSS

Hire Purchase Owner/Leasing Company:

LIAN HONG PRIVATE LIMITED

Operative Endorsements:

V0001, V0004, V0009, V0012, V0095, V0097, V0152, V0224, V0233, V0281, Z011

Details of Coverage

Type of Plan:

Pie Car-Preferred Plan (Third Party Fire & Thoft)

Excess:

Additional Coverage(s):

Name of Driver(s):

ABOUL HAMED BIN HASSAN

Basic Premium:

\$\$ 1,312,92

Discounts:

No Claim Discount (50%), Offence Free Discount (5%), Other discounts (S\$ 31.16)

Prevailing GST (7%):

S\$ 41.47

Total Premium Payable Inclusive of Provailing GST (7%):

Date: 84 Jan 2018 13:01

\$\$ 633.93

This Schedule replaces any other Schedule. This Schedule and Policy are to be read together as one contract. Persons or classes of persons entitled to drive and limitations are to use, are as specified in the Certificate of Insurance issued in relation to this policy.

For and on behalf of

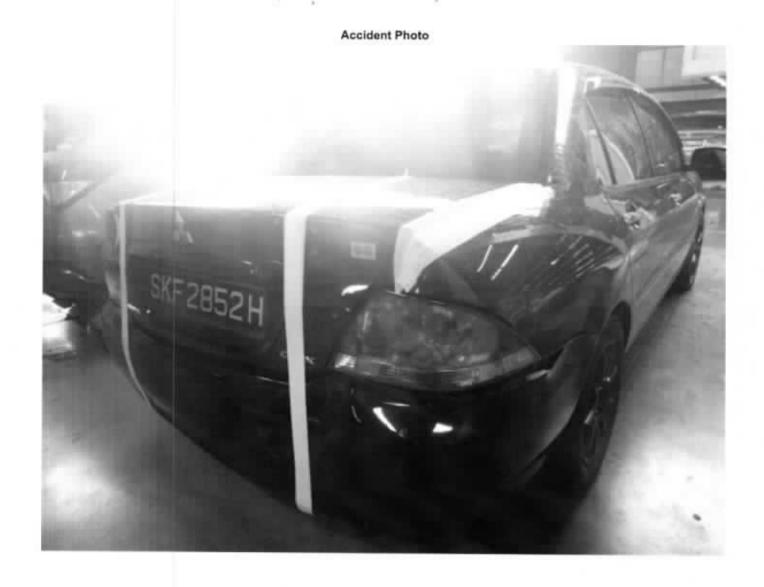
LIBERTY INSURANCE PTE LTD

SUPPOSTERVING HUMAN STREMGIOPURAN SHOW













#### SINGAPORE ACCIDENT STATEMENT

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#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
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- 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,
- 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

ACCIDENT STATEMENT

Date Of Report 16/05/2018 15:11

Date Of Accident 15/05/2018 07:30

Exact Location Of Accident ALONG WEST COAST ROAD TRAFFIC LIGHT.

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN1156H

Insured/Policyholder

Name Of Registered Owner FRESHMART SINGAPORE PTE LTD

Co Reg No NA

Email Address SALLY@FRESHMART.COM.SG

Mobile Phone No

Alternative Phone No Office-67797111

Vehicle Particulars

Manufacturer MITSUBISHI

Model CANTER

Exact Purpose for which vehicle was being used at

time of accident

The state of the s

Are you claiming under your own insurance policy for repair to your vehicle?

If No. Please state action to be taken

REPORTING ONLY

NO

WORK PURPOSE

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company MSIG INSURANCE (SINGAPORE) PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number B 28664200 MKC

Cover Note Number

Driver

Name of Driver ZHANG LEI

Passport No/FIN G2886514M

Date Of Birth 07/03/1985

Occupation OUTDOOR
Date Of Driving Pass 26/07/2017

Driving Experience 0 YEAR AND 9 MONTH

Gender MALE

Mobile Number (LOCAL) +65-90571285

Fax Number Contact Number OFFICE-67797111 EMail Address NOEMAIL Address 204 PANDAN LOOP Postcode 128394 Was driver an employee of the Insured's Company YES If No, Relationship of the Driver with the Insured Vehicle Registration Number of Driver's Own Vehicle Insurance Company of Driver's Own Vehicle General Information of the Accident Type Of Accident COLLISION - HEAD TO REAR Weather Conditions CLEAR Road Surface DRY 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? NO Was any injured conveyed to hospital by NO ambulance? Was any other material or property damaged? YES I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. 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 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 SKF2852H Vehicle Make/Model/Colour MITSUBISHI / BLACK Details Of Properties REAR Vehicle Category PRIVATE CAR Name of Driver NA

NRIC/Passport Number

Contact Number NA

Postcode

Address

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.
- 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
- 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 indigment 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.
- 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.

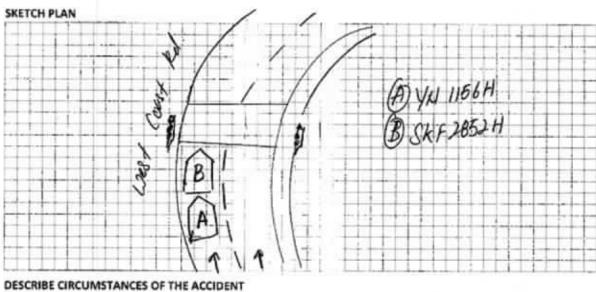
Policyholder's Signature Date & Time:

CONTRACTOR STATE

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:



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er. Ho								
	_							

DECLARATION

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

Policyholder's Signature Date & Time:

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

NRIC/FIN No.:

Reporting Centre Personnel's Signature Name:

STANKIC SARSEMFORE URB. V.S.





















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

LAIM SUBF	OLDER TRA	CKING								
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj	Submitted	Ins Auth'ed	Sta		
Main	16 May 2018		18 May 2018 11:36 Edit Adj Rpt	5\$3,700.00 Edit Estima		3,700.00 lew Rpt		Pending for Sur Report Cancel Case		io-entrope en la company
	Main	) R	eference	Clain	Details		Documen	nts	1	Show All
CLAIM SU	BFOLDER DE	TAILS				[Created I	by insurer]			
Insured:	FRESHMA	RT SINGAPORE	PTE LTD, Co. Reg	No.: 2001015	51E					
Main Claimant:	ABDUL H	AMEED BIN HAS	SAN, ID: 571409	B2A						
Vehicle Reg No.:	SKF285	2H		Da	te of Loss:		3 07:00 - :59 ns and <b>10</b> Days	From LTA	Reg Date	(Man Yr)]
Claim Type:	TP / 558	1528		0.070	icy/Cover te No.:		MKC (Campreh 19/01/2018 - 1		6	
Vehicle Reg No. (Insured):	YN1156H FORCY NO.									
				Exe	cess:					
Repairer:	Precise A	uto Services (H	NO.1 KAKI BUKIT	AVE 6 #02-34	/36, 41788	33 Kaki Bukit	- Tel:			
Handling Insurer:	UNITED STATES		ore) Pte. Ltd. (HQ)				dreen we trible			
Adjuster:		Consultants Pte	Ltd (HQ) - Tel: 62	56-3561 [Ha	indied by N	HOHD RASU	L] [Final R	pt due 3	0/01/20	019]
Driver/Cust dian (Insured):		I () , NRIC: G28	886514M, Tel: +6	590571285 Ema	ii):					
Adj Asg. Remarks	Liability: 1	00% TP Reject S)	E- assign LKK Auto	Consultants Pte	Ltd					
ASSOCIAT	ED MAIL RE	CEIVED						/iew All	Compos	e Case Mail
<ul> <li>MSIG_St</li> </ul>	3 (28/01/2019	): Report Send	Back Alerts - SKF2	852H (TP)						
ALL ASSO	CIATED TAS	iks∃				View All S	earch Tasks	Create Ne	w Task	Complete
Due Date	Priority	Type Task	Group Subjec	t Handler	Assign	ned By	Completed Or	n Cre	eated Or	Done

#### Claim Documents

\*SKF2852H (558528)

[YN1156H]

TP

ABDUL HAMEED BIN HASSAN

May 15 2018 7:00AM

[FRESHMART SINGAPORE PTE LTD]

Precise Auto Services

Ass	sessment Reports		1 per p	age 🔻	~
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1	17/05/18 10:03	Accident Statement From:SC - Reg. No: VN1156H, Claimant: FRESHMART SINGAPORE PTE LTD	0	Load HTM	
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Nα	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
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2	17/05/18 10:43	From:SC - Reg. No: YN1156H, Claimant: FRESHMART SINGAPORE FTE LTD  tp reject SJE - assign LKK	0	Load PDF	
3	17/05/18 10:45	TP PRI Request	Ō	Load PDF	
4	17/05/18 10:46	TP PRI REQUEST	0	Load DOCK	
5	17/05/18 10:51	TP REJECT SJE	0	Load PDF	
6	17/05/18 11:26	Confirmed date of accident with lawyer	0	Load PDF	

Merimen e-Claims Page 3 of 3

Ass	ssessment Reports		1 per page		8
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8	17/01/19 12:08	SURVEY PHOTOS	0	Load PDF	
No.	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	25/02/19 15:08	PRS Invoice	0	Load PDF	
2	25/02/19 15:08	Colour Photo	0	Load PDF	

### **Documents Checklist**

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
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Show Remarks To: Handling Insurer Note: Remarks are private unless you show it to other starties.	

#### 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/MSG18009050/R1QD3E2-1

Date:

25/02/2019

REFERENCE

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

Policy No:

B28664200MKC

Claimant Vehicle SKF2852H

Insured Vehicle No:

YN1156H

No: Date of Loss:

15/05/2018

Nature of Claim:

TP

Claim No: 558528

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SKF2852H

Make & Model:

MITSUBISHI LANCER, 1.6 (A)

Engine No:

4G18HS1573

229033 km

Reg. Date:

05/01/2007 (Man. Year: 2006)

Chassis No: Odometer:

JMYSTCS3A7U005663

Colour:

Black

Engine Capacity: 1584 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 Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable):

CONDITION OF TYRES Front Tyre Size:

195/60 R16

Rear Tyre Size:

195/60 R16

Front Left Side:

Michelin 5 mm

Rear Left Side:

Michelin 5 mm

Front Right Side:

Michelin 5 mm

Rear Right Side:

Michelin 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS		Repairer's	Adjuster's	Difference	Diff %
Parts		4,597.70	2,972.90	1,624.80	35.34
Miscellaneous Items		0.00	0.00	0.00	
Labour		3,720.00	1,710.00	2,010.00	54.03
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Calculated Gross Total (S\$)	8,317.70	4,682.90	3,634.80	43.70
	Approved Total (Overridden) (S\$)		3,700.00		
	(S\$)	8,317.70	3,700.00	4,617.70	55.52
	+ GST 7.00/7.00% (S\$)	582.24	259.00	323.24	55.52
	Nett Amount (S\$)	8,899.94	3,959.00	4,940.94	55.52

INSPECTION

Date of Assignment:

18/05/2018

Date Inspected:

18/05/2018 Inspected At:

Precise Auto Services (HQ)

NO.1 KAKI BUKIT AVE 6 #02-34/36

Singapore 417883

Estimated Period of Repair:

7.0 days

Adjuster: MOHD RASUL

Manager: Ho Zhao Tian

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.

Page 3 of 4 Adjuster Report

#### REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 25 Feb 2019)

MITSUBISHI LANCER 1.6 (A) (Catalogue: Merimen Singapore 1.0) Parts: 143

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

Print Code: (Unsubmitted, no print-code for SKF2852H)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page Validity:

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

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BOOTLID	Dented / Distorted	538.00 FL	*538.00 FL
2	2		*BOOTLID HINGES	Not Necessary	138.00 FL	*-FL
3	2		*BOOTLID STOPPER	Not Necessary	12.00 FL	*-FL
4	1		*BOOTLID LOCK	Stiffened	62.00 FL	*62.00 FL
5	1		*BOOTLID LOCK STRIKER	Not Necessary	24.00 FL	*-FL
6	1		*BOOTLID LOCK CABLE	Not Necessary	38.00 FL	*-FL
7	1		*BOOTLID WEATHERSTRIP	Damaged	144.00 FL	*144.00 FL
8	1		*BOOTLID BADGE - LOGO	Necessary	38.00 FL	*38.00 FL
9	1		*BOOTLID LANCER EMBLEM	Necessary	34.00 FL	*34.00 FL
10	1		*BOOTLID GLX EMBLEM	Necessary	24.00 FL	*24.00 FL
11	1		*BOOTLID OUTER GARNISH	Dented / Distorted	197.00 FL	*197.00 FL
12	5		*BOOTLID OUTER GARNISH CLIPS	Necessary	20.00 FL	*20.00 FL
13	2		*TAIL LAMPS	Chafed / Cracked	712.00 FL	*712.00 FL
14	2		*TAIL LAMP BASE PANELS	Not Necessary	100.00 FL	*-FL
15	2		*TAIL LAMP SEALANT	Not Necessary	38.00 FL	*-FL
16	4		*TAIL LAMP CLIPS	Necessary	16.00 FL	*16.00 FL
17	1		*REAR BUMPER	Dented / Distorted	636.00 FL	*636.00 FL
18	10		*REAR BUMPER CLIPS	Necessary	30.00 FL	*30.00 FL
19	1		*REAR BUMPER BEAM	Not Necessary	155.00 FL	*-FL
20	2		*REAR BUMPER SIDE RETAINERS	Damaged	66.00 FL	*66.00 FL
21	20		*REAR BUMPER SIDE RETAINER RIVETS	Damaged	56.00 FL	*56.00 FL
22	6		*REAR BUMPER DUST COVER CLIPS	Not Necessary 18.00 FL		*-FL
23	1		*REAR END PANEL	Dented / Buckled	368.00 FL	*368.00 FL
24	1		*REAR END PANEL TOP TRIM	Warped	128.00 FL	*128.00 FL
25	4		*REAR END PANEL TOP TRIM CLIPS	Necessary	12.00 FL	*12.00 FL
26	2		*REAR FENDER INNER TRIM - FABRIC	Serviceable	370.00 FL	*-FL
27	2		*REAR FENDER INNER TRIM CLIPS - FABRIC	Not Necessary 48.00 FL		*-FL
28	1		*FLOOR PANEL BOARD	Repair 128.00 FI		*-FL
29	1		*SPARE TYRE WINDNUT	Not Necessary	20.00 FL	*-FL
30	1		*EXHAUST SILENCER ASSY	Not Necessary		
31	3		*EXHAUST SILENCER MOUNTINGS	Not Necessary	54.00 FL	*-FL
32	1		*EXHAUST CHROMED PIPE	Not Necessary	120.00 FS	*-FS
33	1		*REVERSE SENSOR	Shorted	380.00 FS	*200.00 FS
F=Fn	anchise	part. S=Spc	Nett. L=ListItemDisc.			
				Sub Total (S\$)	5,053.00	3,281.00
	<ul> <li>List Item Discount on L Items 10.00/10.00% (S\$)</li> </ul>			455.30	308.10	
				Total Parts (S\$)	4,597.70	2,972.90

Report was unsubmitted during this print-out.

### Recommended Miscellaneous Items

There are no new miscellaneous items selected.

### Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TOWING CHARGES	New	80.00	0.00
2	TO REMOVE / REFIT LUGGAGE TRIMS & GARNISH TO ASSIST REPAIRS	New	180.00	60.00
3	TO MOUNT VEHICLE ON CAR-O-LINER INORDER TO CONDUCT CHASSIS ALIGNMENT	New	380.00	0.00
4	LABOUR CHARGES TO REPAIR, PANEL BEAT AND STRAIGHTEN DAMAGED PARTS AND REPLACE THE ABOVE MENTIONED PARTS	New	1,200.00	700.00
5	TO REMOVE / REPLACE EXHAUST SILENCER & REPAIR EXHAUST CENTER PIPE	New	280.00	0.00
6	TO REMOVE / REPLACE REVERSE SENSOR	New	100.00	40.00
7	TO CHECK WIRING FUNCTIONS	New	80.00	30.00
8	TO PUTTY, APPLY PRIMER & SPRAY-PAINT THE AFFECTED AREAS	New	1,200.00	800.00
9	TO APPLY RUST-PROOFING ON REPAIRED / REPLACED PANELS	New	220.00	80.00
	Gross Labou	r Cost (S\$)	3,720.00	1,710.00
	Report was unsubmitted during	this print-out.		

< END OF ESTIMATES >