ASS. REC. B)	(:	REF: 03/14	1900 291/E	td3015pocia	I Instruction:	
Surveyor:		ASSIGN	MENT (Office)			
From (Person	Gerald poh	of	LAC	Dn	teffine: IS	2/1903.16pm
Estimated Co			Bill to:	a.		,
OD (TP) W	S/TP RES / OD RI	ES/EVA/INV/MY	77-CS			
To Inspect V	chiele No:	3/P 35		Insured:	68	3A 4274X
	m/s		Auto	Tel:	9695	1381
of	160 Sin	Ming Onive	#02-16			
Policy No:_			Claim No:	18/19/1	9/1/05	1021425
Sum Insured			Excess:		-1/	
Make of Veh (Client's Recor	444			D.0	D.A. 141 C	2/2019
	/ REP. / REV 241	reclup			181211	
Date/Time:	420pm@15/2	Person Contacte	d. Ahh		LO.D. Endorsement	ıt.:
Date/Time	Action/Instruction	(x) Estima	de			
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	GBA 427.					
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Officer

Interview (\$

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Westerd 15

Report Format

Lump Sum / LB 1: (5)

490

Nivitha (LKK Auto)

From:

Shu Pei (LKKAuto) <shupei@lkkauto.com>

Sent:

Friday, 15 February 2019 3:16 PM

To:

assignments

Subject:

FW: PRE-REPAIR SURVEY - SJP3590R [External Confidential]

Attachments:

15022019150359.pdf

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupei@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: GERALD POH WEE BIN <geraldpoh@lonpac.com>

Sent: Friday, 15 February 2019 3:11 PM To: Admin A <admin-a@lkkauto.com> Cc: MT_Claim_SG <mt_claim@lonpac.com>

Subject: PRE-REPAIR SURVEY - SJP3590R [External Confidential]

Lonpac External - Confidential

Our Ref

:18/19/19/VC05/021425

Dear Catherine,

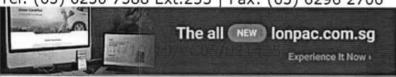
Please proceed with the pre-repair survey as per attached.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd 300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706



Lonpac External - Confidential data is for use by authorised external parties only.



Our Ref

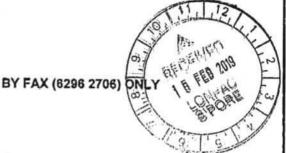
CY.SJP3590R.19.MH(HW).wp

Your Ref

Your insured vehicle GBA 4274X

15 February 2019

One West Engineering Pte Ltd c/o LonPac Insurance Bhd (Motor Claims Department) 300 Beach Road, #17-04/07 The Concourse Singapore 199555 883 North Bridge Road #11-03 Southbank Singapore 198765 T: 6292 5838 F: 6292 5938 (UEN No. 201333127N) (GST Reg No. 201333127N)



Dear Sirs

NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKING DAYS PURSUANT TO PRE-ACTION PROTOCOL FOR NON INJURY MOTOR ACCIDENT CASES ROAD TRAFFIC ACCIDENT INVOLVING MOTOR VEHICLES SJP 3590R & GBA 4274X ON 14.02.2019 @ 09:30HRS ALONG BKE

We are instructed by Yong Slew Chin to notify you of a road traffic accident on 14.02.2019 at about 09:30Hrs along BKE involving our client's vehicle no. SJP 3590R and vehicle no. GBA 4274X driven by you at the material time. A copy of the Singapore accident statement report is enclosed.

As the result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully

C. Yogarajah LLC

Enc

CC:

M/s. Ming Hua Auto Service 160 Sin Ming Auto City

#02-16 Singapore

Mr. Ah Hua (9695 1381) Fax no: 6310 7269

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars Owner ID Type:	Singapore NRIC
Owner ID:	1795D
Vehicle Details	17730
Vehicle No.:	SJP3590R
Vehicle to be Exported:	No
Intended Deregistration Date:	18 Feb 2019
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8XE A
Primary Colour:	Grey
Manufacturing Year:	2008
Engine No.:	1ZZ3153019
Chassis No.:	ZNE100419838
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$16,822.00
Original Registration Date:	20 Mar 2009
First Registration Date:	20 Mar 2009
Transfer Count:	0
Actual ARF Paid:	\$16,822.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Mar 2019
PARF Rebate Amount: Intended COE Rebate Details	\$8,411.00
COE Expiry Date:	31 Jan 2029
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$31,335.00
COE Rebate Amount:	\$31,183.00
Total Rebate Amount:	\$39,594.00

The information contained herein is correct as at 18 Feb 2019

ОК

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Toyota Wish 1.8A (New 10-yr COE)

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\$53,800 Price Depreciation \$5,380 /yr 0 26-Feb-2009 Reg Date (10yrs COE left) Manufactured 2009 0 100,000 km (10k /yr) Mileage Transmission Auto **Engine Cap** 1,794 cc Road Tax \$972 /yr 0 97.0 kW (130 bhp) Power **Curb Weight** 1,310 kg O 1.8L 16 Valves WT-I DOHC Engine, 130 BHP, 4 Speed Features Automatic With Steptronic, ABS, SRS Airbags, Digital Climate Aircon Controls, Knockdown Rear Seats. Accessories Leather Seats, Sports Rims, Toyota Audio CD Player, Reverse Sensors, Reverse Camera, Auto Retractable

Side Mirrors/Indicators, Solar Films.

Description Loan Available, Genuine Low Mileage Done! Very Healthy Engine And Gearbox! Accident Free! Well Kept And Maintained By Previous Owner! Hard To Come By! Warranty Will Be Provided, You Miss It You Loose It! Call Us Now For Viewing Appointment. COE OMV \$18,803

\$18,803

Type of Veh Category

ARF

COE Car, Low Mileage Car

Availability Available

Add to Shortlist

Add to Compare

Add a Note

Posted on: 18-Feb-2019 | Last Updated on: 18-Feb-2019 Tags: Toyota Wish, toyota wish, 2009 Toyota Wish, 2009 toyota wish, Toyota, Wish,

Upfront Payment 0 Transfer Fee Maximum 70% Loan 2 **Down Payment** \$15,140 (change) 0 1st Instalment \$566 **Total Upfront Payment** \$16,731 (excluding insurance) Estimates based on 70% loan at 3.75% interest rate. Check with seller for exact figure.

Items for Toyota Wish

\$1,050



Armrest Console \$125

Share















Seller Information

Company

Creative Auto · dealer's pricelist

≥ 150 vehs sold | 132 vehs

Address

0

0

O

61 Ubi Avenue 2 #04-03/18/19

Search cars nearby this location

Location

Automobile Megamart

Contact Person(s) Alvin Chua Alex Tan

84488354

Terence Leow

97556887 90290899

Used Car List | Company Profile



Afraid of lemons? Request to have this car evaluated professionally.

Compare

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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 witholding 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.

aforesaid.	
A CONTRACT OF STREET	ACCIDENT STATEMENT
Date Of Report	14/02/2019 14:45
Date Of Accident	14/02/2019 09:30
Exact Location Of Accident	FROM BKE AT SLIP ROAD TO KJE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJP3590R
Insured/Policyholder	
Name Of Registered Owner	YONG SIEW CHIN
NRIC No	S2161795D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91171189
Alternative Phone No	OTHERS-91171189
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	WISH 1.8
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100333797-05
Cover Note Number	
Driver	
Name of Driver	LEE PECK YANG
NRIC No	S1564824D
Date Of Birth	31/03/1962
Occupation	INDOOR
Date Of Driving Pass	16/06/1981
Driving Experience	37 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98179639
Fax Number	

NOEMAIL

Address BLK 146 SERANGOON NORTH AVENUE 1

#12-405 550146

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

enicie

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

Postcode

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?

YES

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

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

PLEASE REFER TO SKETCH PLAN.

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

GBA4274X

Vehicle Make/Model/Colour

Details Of Properties

C/O ONE WEST ENGINEERING PTE

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

RAMA SAMY GANESH

NRIC/Passport Number

F8373536T

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

9526

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)

DETAILS OF INJURED PERSON 1

Name LEE PECK YANG

Approximate Age 57

Injuries Sustain

Injured person in which vehicle? SJP3590R

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance?

NO

BLK 146 SERANGOON NORTH AVE 1 Address

#12-405

Postcode 550146

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.
- 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.
- 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)

l 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:
 - 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 & Time4 FC3 2019

14:45 ho

Reporting Centre Personnel's Signature
Name: Poh Kwea Choo
NRIC/FIN No.: S6840583A

Cardot Statisfication 93

S KETCH PLAN (A) SJP 3590 K (B) GBA 4274 X (1) 9526 19/19/12

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The incide	ent happened on 14/2/2019 at 9.30 am.
I was KJE. I slow dow rear of I am go	driving my vehicle from BKE at the slip road to slowed down my vehicle because the front vehicle. IN. Vehicle B GBA 4274x hit into the my car. I suffered pain on the right shoulder. Oing to see a doctor.
-	12 (19)

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: 1 4 FE3 2019

Reporting entre Personnel's Signature

Name:

Name: Poh Kwee Choo NRIC/FIN No.: S8840583A

C.ARTACSHIRDFMINES VS



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 1

PRE-REPAIR INSPECTION REPORT CS3/LPC19002911/Etd3e2 LONPAC INSURANCE BHD 300 BEACH ROAD #17-04/07 THE Date: 01-03-2019 CONCOURSESINGAPORE 199555 Code: LPC2 Policy Particulars :- (THIRD PARTY CLAIM) SJP 3590R Insured Veh. **GBA 4274X** Veh. Inspected 0.00 Policy No. Coverage (\$) 18/19/19/VC05/021425 0.00 Excess (\$) Claim No. 15/02/2019 Assign From GERALD POH **Assign Date** Vehicle Particulars & Condition TOYOTA WISH 1794 Make & Model Year of Reg. 2009 HIDDEN Engine No. ZNE100419838 **GREY** Chassis No. Colour 163835 KM IN ORDER Odometer Steering SPORTS RIM Brakes IN ORDER Modification FAIR General **Conditions of Tyres** Balance Size Make R/H Front Tyre 215/45Z R17 MICHELIN 7 mm MICHELIN L/H Front Tyre 215/45Z R17 7 mm 215/45Z R17 MICHELIN 7 mm R/H Rear Tyre 215/45Z R17 MICHELIN 7 mm L/H Rear Tyre **Description of Damages** THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. General Information 5. Inspect Date / Time **Accident Date** 14/02/2019 18/02/2019 (12:48 PM) MING HUA AUTO SERVICES Survey held at 160 SIN MING DRIVE #02-16 SIN MING AUTO CITY SINGAPORE 575722 5a. Remarks 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.

Report Ref No. CS3/LPC19002911/Etd3e2

Inspected By

4

CHEN TSUE YEE

Automotive Assessor

L

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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