22/03/2002 ASS. REC, BY:		REF: CSINC	19003028 Jtd	Special Instruction:
Survajor			ENMENT (Office)	
From (Person):	Daniel Koh	of	INC	Date/Time: 18 2 2019
Estimated Cost:			Bill to:	
OD THE WSTTP	RES / OD RES	S/EVA/INV/	MV / CS	
To Inspect Vehicle	No: PC 6	HO1G.		Insured: SHC 6307 R
at Workshop m/s	SC Aux	0 .		Tel: 65#19958.
of SI Senoko				
Policy No:				MT-1031536-002
Sum Insured:				
				D.O.A.
CA / REV / REI	P. / REV 24 H	RS		H.O.D. Endorsement:
				······ Vehicle NLOUT
Date/Time Act	ion/Instruction	() [5	finate.	
Po	6401G-X			
	1C6307R-	×		

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I NILL HE	INC	A VIII I	
	4.5	SIGNALNI	
From	Date	Veh Ho PC 6401G Yr Regn.	t oct 2017
Estimated Cost		Type: M.Car / M.Cycle / Bur / Van / Lorry / Taxi / Prime	a Mover /
OD TP WS/TP RES/O	DRESTEVATINALMA	- Truck / Tsailer or	
to to pect Vehicle No.	PC GHOIG.	Make Golden Dragen	3800
at Workshop m/s SC	Auto	Colour Slive A/C Insur	ed/Std/NI/NA
. B1 Senolco Rd			red / Std / NL / NA
Insured es		Eng/No:	
Policy No.		CINO: LL3BDADE2HA70357	4
Claims No		Gen. Cond: 600 / Fair / Poor / Burnt	
Sum Insured:	Excess:	Steering: Inorder / Jammed / Leaked / Burnt or	
(Client's Record)		Brake: Inorder / Jammed / Leaked / Burnt or	100
Make of Veh:		Modi: Nil / S/Rim / STD A/Rim or	
10-12pm		Tyre Size. F: 215/75 £17.5	
'		R: —	
(Policy Condition) Remark The veh had com	unenced its N/S O/S		PIR / SUMI /
repair at the time		TOYO/YOKO or	The second secon
Bal. or Market Value:	O I IO . V No	R/Bal. ' 7 mm R/Bal.	7 mm
IDAC Accident Rport:	Consistent? : Yes or No		
GIA / PR Seen.	Consistent?: Yes or No		7 mm
Est. Repairs:	days Res.: Yes or No		/2/19
Lum Sum:	% 3 Val.: Yes or No	Survey held at Sc Auto	1213pm
CA / REV / REP. /		Des. of Damages : Frt / Rear / O/S / N/S / U/C / R	coltop or
Date: Per	Vehicle: IN / OU sen Contacted;	The U/C / Chassis frame / Body Structure affect	ted due to collision
	Instruction	The U/C / Chassis frame / Body Structure and	* **
		a d same	
(Dog:	3644.32:4200/ with 3d	all Arban.	
CREAT	30 (1.) (1.)		
PEOF			
NECE	IVED 2 7 MAR 2019		
	2019		
Date/Time, File Pass to?	: Preli. Report	Days Of Repair: 3	
21/3 TUNIST	: Final Report	Resurvey No. of Trip: \ Survey Fee:	250
Dale/Time, File Return to?		Transportation	
")	Add F	ee: Site Insp (\$.) _ sees_ :	si .
		. Internew (\$) Hebs	
Report Format :	TP	tech toys (\$) offer	
Lump fum / LB I: (\$	4900	Weekend (\$	
	1	TOTAL	250
			Secure paper random months and make you be to

REF:

Catherine Chong (LKK Auto)

From: Sent:

To: Cc: Subject:

'assignments@lkkauto.com' Teng Ken Leong; Thio Tse Kiat FW: TP CASES FARMED OUT TO LKK ON 18/2/2019

Daniel Koh <daniel.koh@income.com.sg> Monday, 18 February, 2019 10:00 AM

Dear Veron / Nivitha

Please assist to survey the vehicle as per Mr Teng's instruction :-

	THIRD	OUR			
S/NO		INSURED	WORKSHOP / CONTACT	DOA / REF / OFFICER	TIMING
Н	PC1746U	FBB1868Y	LEXBUILD INTERNATIONAL / Shirley Lim 96158280	14-2-2019 / MT-1032347-001 / Azhari	14:00-16:00
2	PC6401G	SHC6307R	SC AUTO INDUSTRIES / Hamimah 65719958	6-2-2019 / MT-1031536-002 / Serene Lim	10:00-12:00
æ	SHD6752H	SMF6915K	SOON HOCK MOTOR / 65425119	15-2-2019 / MT-1032145-002 / Wo Jessie	

Please contact workshops.

Please ack.

Thank You

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 <u>truthful and accurate</u> 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

aioresaid.	
	ACCIDENT STATEMENT
Date Of Report	08/02/2019 15:15
Date Of Accident	06/02/2019 16:00
Exact Location Of Accident	X-JUNCTION OF PUNGGOL RD & SENGKANG EAST WAY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	PC6401G
Insured/Policyholder	
Name Of Registered Owner	3S TRANSPORT SERVICES
Co Reg No	52915288J
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81887955
Vehicle Particulars	
Manufacturer	GOLDEN DRAGON
Model	XML6772J18-3.8 D (M)
Exact Purpose for which vehicle was being used a time of accident	at
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	BUS
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	P1225206
Cover Note Number	
Driver	
Name of Driver	NEO GIM HOON
NRIC No	S0180168F
Date Of Birth	29/11/1953
Occupation	OUTDOOR
Date Of Driving Pass	28/08/1973
Driving Experience	45 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97249975
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address

BLK 647 YISHUN STREET 61 #05-382

Postcode

760647

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 (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

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

REFER 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

SHC6307R

Vehicle Make/Model/Colour

Details Of Properties

TAXI

Vehicle Category Name of Driver

GOH MING SOON

NRIC/Passport Number

S1771903C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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 leave 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.
- 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.
- By the longment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of
 the report pelos made available aforesaid.
- 8. Consert 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, discusse 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 the purpose(s).
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary
 investigations relating to the claims;
 - (iii) 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 signification of the Insurers and/or GIA to their third party service providers or signification of the Insurers and/or GIA to their third party service providers or signification.
- (d) the 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) the 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
 - the complying with requirements under any regulations, laws or court orders.

菜幹雪

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

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Policyholder's Signature Date & Time:

Sketch Plan #2

SKETCH PLAN			- 1	
5		1	sevalcoury	A : PC 6401G
→ >			ng rg	6 SHC 6307R
→>		. / .		
→	E > A	>		
Puna	9901 Rd			
SCRIBE CIRCUMSTANC	ES OF THE ACCIDENT			
vehicle as it	the traffic lia has real	THE SUNC	tion, 1 240	p my
LARATION				
	ticulars are true in every respect.	8/>/17	An	i
cyho der's Sgnature a & Time:	Driver's Signature (If driver is not the policyho Date & Time;	older)	Reporting Centre Name: NRIC/FIN No.:	Personnel's Signature



SC AUTO INDUSTRIES (S) PTE LTD

Co. Reg. No. 199800107D

M/S

3S TRANSPORT SERVICES

Blk 647 Yishun St 61 #05-382

SINGAPORE 760647

Insured

3S TRANSPORT SERVICES

Policy

VFX/P1225206/00093

ESTIMATE Bill

GST Reg. No:

19-9800107D

Date:

15/2/2019

Our Case Ref.

SC19/02/028/43T-TP

Accident Date

6/2/2019

Damaged Vehicle No:

PC6401G

S/no	Description	QTY	Price	Disc	Amount
	Replaced Parts				
1	REAR BUMPER BUC	1 PC	\$1,560.00	10.00%	\$1,404.00
2	REVERSE SENSOR Shorted	1 ST	\$288.00	-	200 \$288.00
3	REAR KEY LOCK ASSEMBLY ~~	1 PC	\$300.00	10.00%	\$270.00
4	REAR NUMBER PLATE NA	1 PC	\$50.00		\$50.00
5	ARTWORK NEC	1 ST	\$300.00	-	\$300.00
6	SITCKER (60 KM/H) NEC	1 PC	\$15.00	or =0	\$15.00
7	REAR ENGINE COVER DD	1 PC	\$1,574.80	10.00%	\$1,417.32
8	REAR BUMPER BRACKET Repair	2 ST	\$200.00	10.00%	\$360.00
	Labour Charges				500
1	LABOUR FOR REAR PORTION	1	\$2,560.00		920 \$2,560.00
2	LABOUR FOR SPRAY PAINTING	1	\$1,800.00	_ (200 \$1,800.00
3	LABOUR FOR WIRING	1	\$80.00	-	50 \$80.00
			Jir	2/3	19
	Repairer of the following.	Hwe	i Lie-l	FK '	1
	esurvey before/after spray mainting a splay damaged part(s) during resilively	18	/2/19		
	end party survey is on a "Without Prejudice" to a	L/S	3 day		
	No illegal modification(s) is allowed	-1-	er.		
	is subject to final approval from insure				\$ 8,544.32

Acknowledged by Repairer Signature:

Authorised Signature

Date:

Sub Total

Total-\$4900



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

	DAMAGE ASSES	SMENT REPORT	
NTUC INCOME INSUR	ANCE CO-OPERATIVE LTD	Ref: CS/INC19003028/	Jtd3e2
73 BRAS BASAH ROA #05-01 NTUC TRADE 189556	D UNION HOUSESINGAPORE	Date: 10-04-2019	
ATTN : SERENE LIM		Code: INC	
1.	Policy Particulars	:- THIRD PARTY CLAIM	
Insured Veh.	SHC 6307R	Veh. Inspected	PC 6401G
Policy No.		Coverage (\$)	0.00
Claim No.	MT-1031536-002	Excess (\$)	0.00
Assign From	DANIEL KOH	Assign Date	18/02/2019
2.	Vehicle Partic	culars & Condition	
Make & Model	GOLDEN DRAGON	c.c	3759
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	LL3BDADE2HA703574	Colour	SILVER
Odometer	71549 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3.	Conditi	ons of Tyres	
	Size	Make	Balance
R/H Front Tyre	215/75 R17.5	BRIDGESTONE	7 mm
L/H Front Tyre	215/75 R17.5	BRIDGESTONE	7 mm
R/H Rear Tyre	215/75 R17.5	BRIDGESTONE	7 mm
L/H Rear Tyre	215/75 R17.5	BRIDGESTONE	7 mm
4.	Description	on of Damages	
THE VEHICLE SU	STAINED DAMAGES AT THE REA	AR PORTION.	
5.	Genera	Information	

Inspect Date / Time

3 Working Days

Remarks

Estimate Days of Repair

18/02/2019 (12:13 PM)

06/02/2019

ESTIMATED NORMAL PERIOD FOR REPAIR:

51, SENOKO ROAD SINGAPORE 758133

SC AUTO INDUSTRIES (S) PTE LTD

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.

B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

Accident Date
Survey held at

5a.

5b.



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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. PC 6401G

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	BUCKLED	1,560.00	1,560.00
1	REAR KEY LOCK ASSEMBLY	NOT NECESSARY	300.00	-
1	REAR ENGINE COVER	DENTED	1,574.80	1,574.80
2	SET REAR BUMPER BRACKET @\$200.00	TO REPAIR SEE LABOUR	400.00	-
	LESS 10% DISCOUNT		-383.48	-313.48
			3,451.32	2,821.32
	SPECIAL NETT ITEMS			
1	SET REVERSE SENSOR (SN)	SHORTED	288.00	200.00
1	REAR NUMBER PLATE (SN)	NOT NECESSARY	50.00	-
1	SET ARTWORK (SN)	NECESSARY	300.00	300.00
1	STICKER (60 KM/H) (SN)	NECESSARY	15.00	15.00
			653.00	515.00
	LABOUR			
	LABOUR FOR REAR PORTION. INCLUSIVE OF THE REPAIR OF REAR BUMPER BRACKET.		2,560.00	1,500.00
	LABOUR FOR SPRAY PAINTING.		1,800.00	1,200.00
	LABOUR FOR WIRING.		80.00	50.00
			4,440.00	2,750.00
	GRAND TOTAL		8,544.32	6,086.32

RECOMMENDED COST OF LUMP SUM REPAIRS	4,900.0
(TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)	

Report Ref No. CS/INC19003028/Jtd3e2

ONG HWEE JIE

Automotive Assessor

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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No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.