

ASS. REC. BY:

REF: CS/ASM19004645/K9d3

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person): Kitty Teo of ASM(AXA) Date/Time: 14/3/19

Estimated Cost: _____ Bill to: _____

☒ OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKH 1792T Insured: _____at Workshop m/s Ah Lim Motor Tel: 64831244of No. 10 Amk Ind. park 2A #01-09Policy No: _____ Claim No: 89M01G76Sum Insured: _____ Excess: \$400.00Make of Veh: _____ D.O.A. 11/3/19
(Client's Record) 15/3/19 @ 1pmCA / ☒ REV / REP. / REV 24 HRS H.O.D. Endorsement: _____Date/Time: 14/3/19 @ 104pm Person Contacted: Wei Jie Vehicle IN ☒ OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate	
	SKH 1792T - CC4/ASM190045351863	ful lennith first.
<u>18/3/19</u>	Revert WA smart claim. MV: 70K LTA: 62755 NV: 7245	D.O.A - 11/03/2019
<u>12/4/19</u>	Submit Unconventional Total Loss Report.	

REF: ASM(AxA)

ASSIGNMENT

From:

Date:

15/3/2019

Veh No:

SK141792T

Yr Regn:

11 12

Estimated Cost:

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

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

Truck / Trailer or

Wagon

To Inspect Vehicle No:

SKH 1792T

Make:

Voho

XC60

C.C

2953

at Workshop m/s

Ah Him Motor

Colour

M. L. Grey

A/C:

Insured / Std / NI / NA

of

No. 10, Amk Ind. Park 2A #01-09

Sp. Reading

133622

T/Radio:

Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

YVID 2901460 2391151

Claims No.

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Sum Insured:

Excess:

\$400.00

Steering: ☒ In order / Jammed / Leaked / Burnt or

(Client's Record)

Brake: ☒ In order / Jammed / Leaked / Burnt or

Make of Veh:

Ipm

Modi:

Nil / S/Rim / STD ☒ A/Rim or

(Policy Condition)

Tyre Size:

F:

R:

255/45.P.26

Remark: The veh had commenced its

repair at the time of inspection.



Bal. or Market Value:

\$70k

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

TOYO / YOKO or

IDAC Accident Report:

Consistent? : Yes or No

Front

Rear

R/Bal.

R/Bal.

L/Bal.

L/Bal.

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

D.O.A.

11/3/19

D.O.I.

15/3/19

Lum Sum:

%

3 Val.: Yes or No

Survey held at

CA / ☒ REV / REP. / 24 HRSDes. of Damages: ☒ Frt

Rear

O/S

N/S

U/C

Rooftop or

Date:

Person Contacted:

Vehicle: IN / OUT

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

Date / Time

Action / Instruction

RECEIVED 12 APR 2019

Date/Time, File Pass to?



Preli. Report

Days Of Repair:

1) 17/4/2019



Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

Survey Fee:

200

Transportation:

S + RS, SI

Photos

Others

TOTAL

2)

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Report Format:

Smart Claim / TL / M

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



RE: MV RANGE - \$65K TO \$70K

Type

🔔 Question

Message

Dear Kitty, refer to the above valuation, according to our surveyor that the vehicle is constructive total loss.

- Shiau Chan

Reply



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

Date: 18/3/2019

To : AXA Insurance Pte Ltd

Survey details

Date of loss	11-Mar-19
Date of appointment	14-Mar-19
Date of survey	15-Mar-19
Location of survey	AH LIM MOTOR

Vehicle Details:

Claim Type:	Own Damage
Vehicle number	SKH 1792T
Make and Model	VOLVO
Date of registration	12/11/2012
Excess	400.00
Market Value	\$70,000
Parf Rebate	\$62,755
Nett Loss	\$7,245

Repair details

Initial Estimate	TOTAL LOSS
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Proposed/Revised repair cost:

Parts	
Check item	
Labour	
Total	
Lump Sum(if applicable)	

Number of days of repair	0
--------------------------	---

Remarks:

Damage Consistent
Repair cost uneconomical
We did not authorise repair




Service Request Details

Claim

S9M01GT6

Reference

None 

Loss Date

March 11, 2019

Report Date

Mar 13, 2019 10:17:38 AM

Request Date

March 14, 2019

Due Date

March 21, 2019

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (OD)

Type of Loss

Own Damage

Services

Accelerated workshop survey

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SKH1792T

Model

XC60 T6 3.0

Service Address

10 Ang Mo Kio Ind. Park 2A, , 568047

Primary Contact/Insured

CHUA CHEW GUAT

223D COMPASSVALE WALK, #08-671, 544223, Singapore

INSURANCE@DICKSON-AUTO.COM

Claim Handler

TEO Kitty

6568804602

kitty.teo@axa.com.sg

Additional Instructions

XS - \$400

[Messages](#)[Invoices](#)[History](#)[Documents](#)[Assessment](#)[Metrics](#)[Notes](#)[New Message](#)

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	12/03/2019 17:28
Date Of Accident	11/03/2019 08:30
Exact Location Of Accident	UPPER SERANGOON RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH1792T
Insured/Policyholder	
Name Of Registered Owner	CHUA CHEW GUAT
NRIC No	S6832545E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98113577
Alternative Phone No	OTHERS-98113577

Vehicle Particulars

Manufacturer	VOLVO
Model	XC60-2.0 T6 R-DESIGN (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA340074/1
Cover Note Number	02/04/2018 - 01/04/2019

Driver

Name of Driver	SEBASTIAN TAN BOON GUAN
NRIC No	S1294974Z
Date Of Birth	28/05/1958
Occupation	INDOOR
Date Of Driving Pass	13/03/1979
Driving Experience	39 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98113577
Fax Number	
Contact Number	OTHERS-98113577
Email Address	NOEMAIL

Sketch Plan Pg. 1

SKETCH PLAN


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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:


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


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 2545E

Vehicle Details

Vehicle No.: SKH1792T
Vehicle to be Exported: No
Intended Deregistration Date: 13 Mar 2019
Vehicle Make: VOLVO
Vehicle Model: XC60 T6 R-DESIGN AT ABS D/AB HID SR 4WD
Primary Colour: Silver
Manufacturing Year: 2012
Engine No.: B6304T13071203121
Chassis No.: YV1DZ90H6D2391151
Maximum Power Output: 224.0 kW (300 bhp)
Open Market Value: \$46,965.00
Original Registration Date: 12 Nov 2012
First Registration Date: 12 Nov 2012
Transfer Count: 3
Actual ARF Paid: \$46,965.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 11 Nov 2022
PARF Rebate Amount: \$30,527.00

Intended COE Rebate Details

COE Expiry Date: 11 Nov 2022
COE Category: B - Car (1601cc & above)
COE Period(Years): 10
QP Paid: \$88,002.00
COE Rebate Amount: \$32,228.00
Total Rebate Amount: \$62,755.00

The information contained herein is correct as at 13 Mar 2019

OK



redefining / insurance

AXA Insurance Pte Ltd
 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

account number
 08028

Certificate of Insurance

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 169)-Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960-Road Transport Act, 1987 (Malaysia)
 -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	CHUA CHEW GUAT	Certificate number	GA340074 / 1
Cover	Comprehensive	Chassis number	YV1D290H6D2391151
Plan name	Essential	Engine number	B6304T13071203121
NCD applicable	0%		
Vehicle registration number	SKH1792T		
Period of Insurance	from 02/04/2018 to 01/04/2019 (both dates inclusive)		
Finance loan company	MAYBANK		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) Any Named Driver as stated in the Policy:
 1. SEBASTIAN TAN BOON GUAN
 (c) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 169) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 800.00
	Windscreen Excess	SGD 100.00

An Additional Excess is applicable as follows:

1. S\$500 for unnamed Authorised Driver
2. S\$500 for declared Young and Inexperienced Driver
3. S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

✓We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 169) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 169). The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #B1-01

1 of 3

AH LIM MOTOR COMPANY

NO 10, ANG MO KIO INDUSTRIAL PARK 2A
#01-09 AMK AUTOPOINT SINGAPORE 568047
TEL: 6483 1244 FAX: 64836170
GST REG NO: M9-000773-A

SURVEYOR COPY

Your Ref:

Date: 13/03/2019

Our Ref: VEHICLE NO. SKH1792T
MODEL: VOLVO XC60 T6 R-DESIGN

*Not Authored
Ex B4001*

M/S AXA INSURANCE (S) PTE LTD
143 CECIL STREET
#01-01 GB BUILDING
SINGAPORE 069542

**ATTENTION: MOTOR CLAIMS DEPARTMENT
OWN DAMAGE**

Dear Sirs

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: _____

Accident involving Your Insured Vehicle No SKH1792T accident on 11/03/2019

We refer to the above matter.

Vehicle sustained extensive damage & car was registered in 12 Nov 2012.

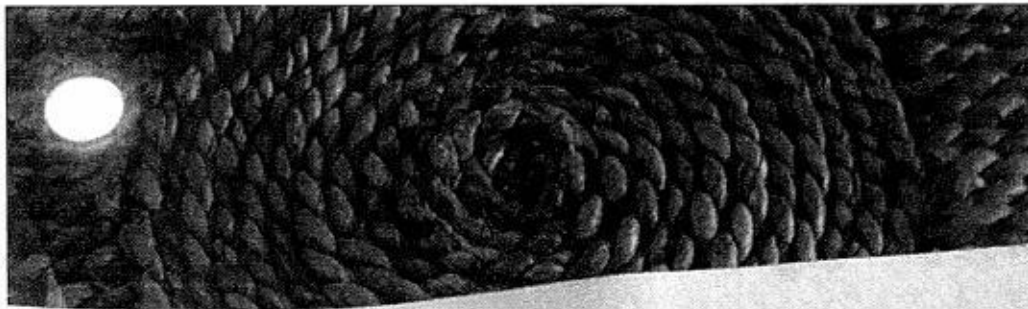
We are not putting up the estimate for the time being & kindly arrange for survey soonest possible. After the survey if there is a need, we will furnish the estimate accordingly.

Thank You.
Yours faithfully,



Zila
Ah Lim Motor Company

AH LIM MOTOR COMPANY



To Whom It May Concern,

Accident involving my vehicle no. PEH199T on 11/3/19 (date) with
8635278K (other vehicle no) along Upper Surongon Rd

I, CHUA CHEW BUNT Nric No. S693257C

Owner of vehicle no. SKH199T am aware of the accident of my vehicle on
11/3/19 (Date) while car was driven by Sekian Han Tan Boon Guan

Nric No. S121494K. I hereby, authorise him / her to make the report.

X [Signature]
 Name
 Date:

To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the
 above accident.

[Signature]
 Name
 Date: