

22/03/2013

ASS. REC. BY:

REF: CS/C7119004737/Uq03n2 Special Instruction:

Survivor:

Marius

ASSIGNMENT (Office)

From (Person):

ong chin kiat

of

C1I

Date/Time:

19/3/19 @ 11:24am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

XD 6664 P

Insured:

YP55132

at Workshop m/s

Mah Lion Motor

Tel:

6282 3336

of

No. 38 Defu June 9

Policy No:

DMCVSN 30005019011

Claim No:

9NM19D201167C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

13/03/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

12:28pm 19/3/19

Person Contacted:

Sihui

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

XD 6664 P - X

YP 55132 - X

(08/11/13) waf

ASS. REC. BY: Marcus

REF:

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: 13.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

LTA 22318

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

XD 6664P

Yr Regn:

12 12

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

Truck / Trailer or

Make:

mit FV51

c.c

12882

Colour

white

A/C:

Insured / Std / NI / NA

Sp. Reading

594977

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

FV51JA 00937

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

295/80R225

R:

10.00R220 84

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5/5-5/5

mm

L/Bal.

5

mm

L/Bal.

5/5-5/5

mm

D.O.A.

13/3/19

D.O.I.

20/3/19

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear n/s

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

Date / Time

Action / Instruction

5/4/19 confirmed final by \$ 700 with S.hui (labour only).
 (Red \$ 3680, 84%)
 no lump sum

Labour only

RECEIVED 10 APR 2019

9/4/2019

Date/Time, File Pass to?

☐

: Preli. Report

1) 10/4 19/19

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

2

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

) S + RS SI

) Photos

) Others

TOTAL

Report Format :

MER-9P

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

700

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

220

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	19 Mar 2019		19 Mar 2019 11:21 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	YI CHENG ELECTRICAL & BUILDING CONSTRUCTION PTE LTD, Co. Reg. No.: 200505135N		
Main Claimant:	CHS E & C PTE. LTD., Co. Reg. No.: 200706939H		
Vehicle Reg. No.:	XD6664P	Date of Loss:	13/03/2019 07:00 - :59 [75 Months and 8 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / SNM19D201167C02	Policy/Cover Note No.:	DMCVSN30005019011 (Comprehensive) Coverage: 13/01/2019 - 12/01/2020
Vehicle Reg. No. (Insured):	YP5513Z	Policy No. (Claimant):	CN888583
		Excess:	S\$0.00
Repairer:	Mah Lian Motor Vehicle Repairer (HQ) NO. 38 DEFU LANE 9, 539278 Defu Lane - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Ong Chin Kiat]		
Claimant's Insurer:	AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 28/03/2019]		
Driver/Custodian (Insured):	LIM LEONG TEOW (/ Male) Email:		
Adj Asg. Remarks:	kindly assign Marcus to conduct PRS. thank you		

ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

There are no mail for this case.

ALL ASSOCIATED TASKS [View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Ong Chin Kiat

From: Jerome Soh <jeromesoh@visionlawllc.com>
Sent: Tuesday, 19 March, 2019 10:51 AM
To: Ong Chin Kiat
Cc: 'Jacqueline Tan'
Subject: Pre Repair Surveyor for XD 6664 P Our Ref: M46-109892-19 Your Ref: YP 5513 Z
[accident involving XD 6664 P & YP 5513 Z on 13 March 2019]
Attachments: image003.emz

Dear Mr Ong,

Refer to the above matter and our tele-conversation earlier

Our client confirmed appointment of Marcus from LKK as the Single Joint Expert for this matter.

Please be informed that the said vehicle can be inspected at:

Venue: Mah Lian Motor Vehicle Repairer
No.38 Defu Lane 9
Singapore 539278
Contact Person: Mr Goh / Ms Si Hui (6282 3336)

If you fail to conduct the pre-repair inspection within the next 2 working days excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you.

FOR SURVEYOR
Please initial here after completion of pre-repair inspection.
Thank you.

Appointed surveyor
(Name & Signature) :

Date & Time of Inspection :

Jerome Soh
Assistant Secretary
Vision Law LLC
133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413
Tel: 6534-2811 Fax: 6535-6802

VISION LAW LLC
Advocates & Solicitors
(Incorporated with limited liability)
Unique Entity No. 200721148H
Head Office: 133 New Bridge Road #18-01/02 Chinatown Point, Singapore 059413
Branch: 490 Lorong 6 Toa Payoh #03-11 HDB Hub (Biz 3 Lobby 1), Singapore 310490

DISCLAIMER:

The contents of this email (including any attachments) are confidential and privileged and only intended for the recipient(s) addressed above. If you received this email by error, please notify the sender immediately and destroy it (and all attachments) without reading, storing and/or disseminating any of its contents (in any form) to any

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	13/03/2019 13:40
Date Of Accident	13/03/2019 07:55
Exact Location Of Accident	ALONG TPE TOWARDS PIE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	XD6664P
Insured/Policyholder	
Name Of Registered Owner	CHS E & C PTE. LTD.
Co Reg No	200706939H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63923788
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FV51JJD4RDEA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	CN888583
Cover Note Number	
Driver	
Name of Driver	VELAYUTHAM SIVAKUMAR
Passport No/FIN	G7865432K
Date Of Birth	05/04/1986
Occupation	OUTDOOR
Date Of Driving Pass	28/03/2013
Driving Experience	5 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86224546
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	NA
Postcode	
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?	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

AS PER 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	YP5513Z
Vehicle Make/Model/Colour	HINO / 300
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM LEONG TEOW
NRIC/Passport Number	G8381229Q
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

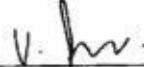
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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.
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)**


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.

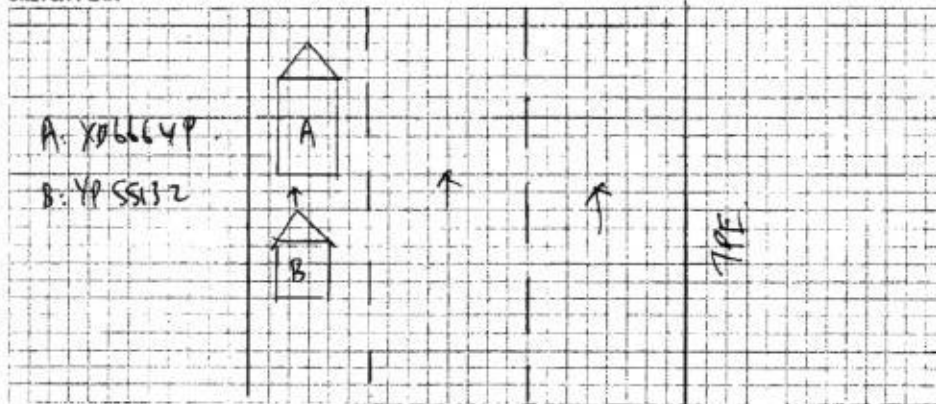



Policyholder's Signature
 Date & Time:


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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident Date & Time: 13 Mar 2019, 0755 am

Accident Location: Along TPE mds PIE

I WAS driving on the most left lane. I stopped as the traffic in front also stopped. The vehicle B cannot stop on time & he swerved to the left but he still banged my vehicle's rear-portion & caused damages to my vehicle.

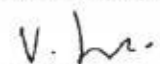
☐ Reporting Only ☐ Own Damage ☒ Third Party ☐ Claim at other workshop (OD/TP)


DECLARATION

We declare the foregoing particulars are true in every respect.

* IMPORTANT NOTE:
You must claim within 14 days of the accident. If you fail to claim within 14 days, you will lose the right to claim against your own policy (Own Damage Claim). There is a FORTY-FOUR (44) days time limit for the claim to be made within the stipulated timeframes from the day of occurrence.

Policyholder's Signature: 
Date & Time: 

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

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

Accident Photo



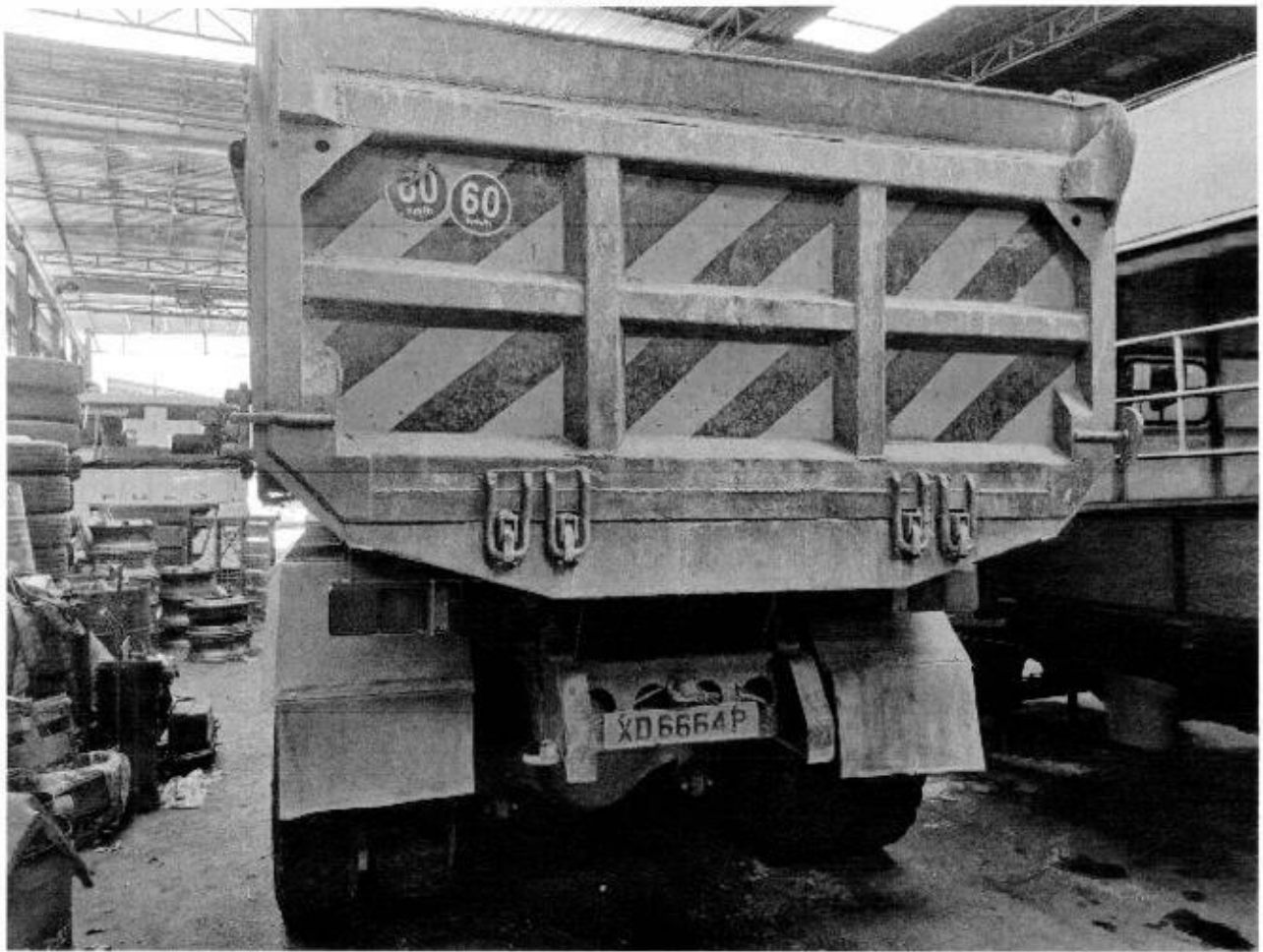
Police Report



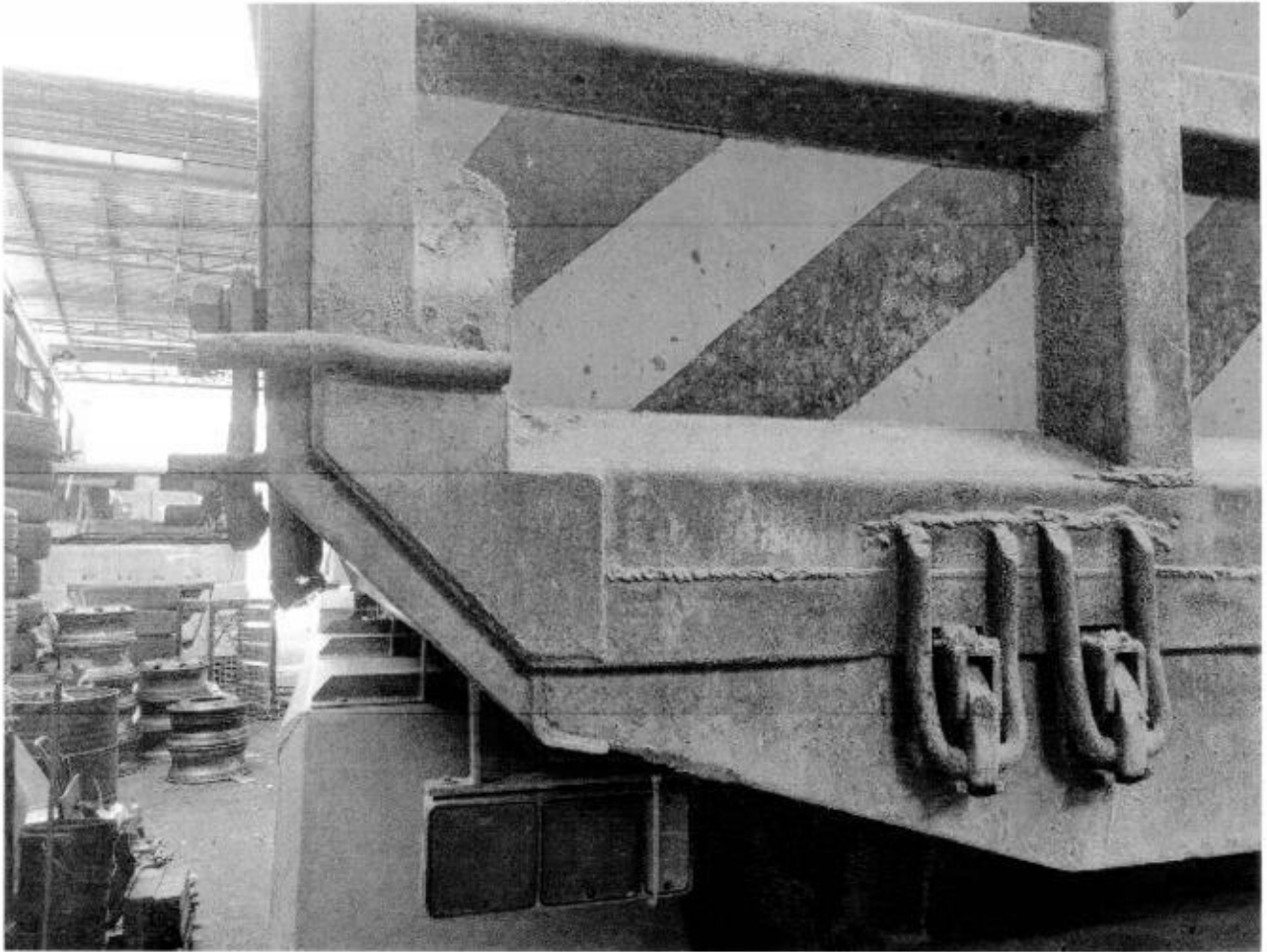
Accident Photo



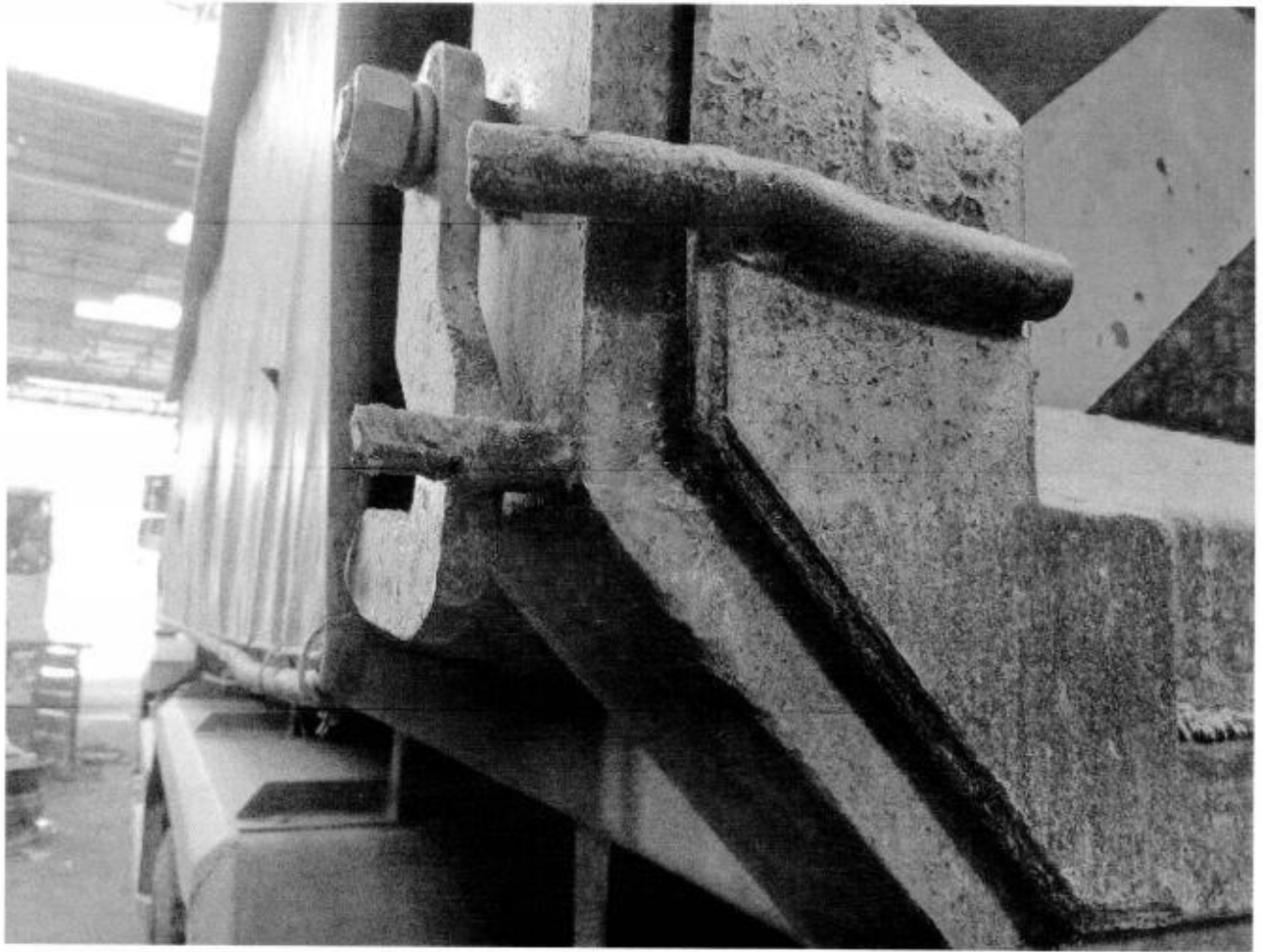
Accident Photo



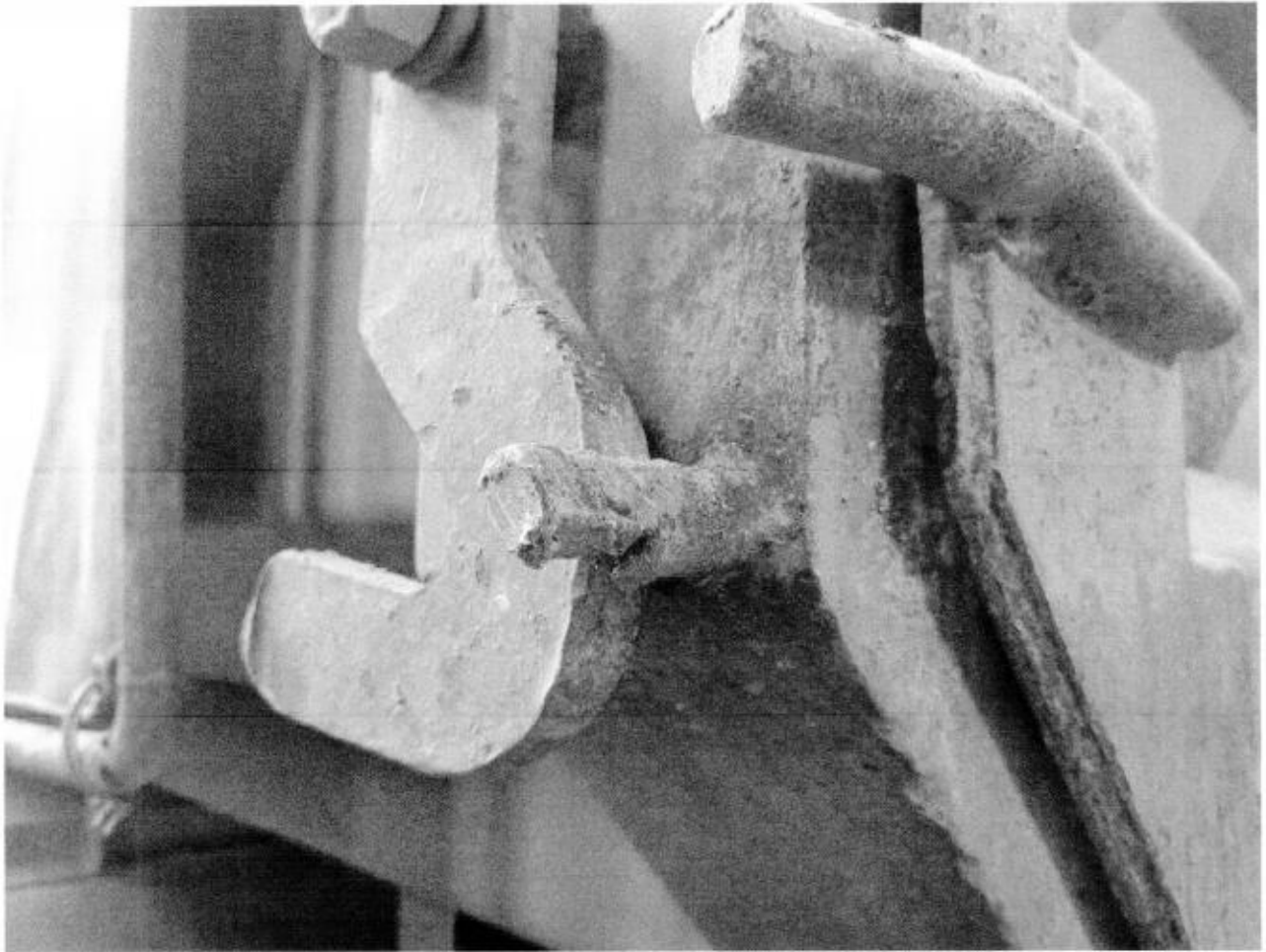
Accident Photo



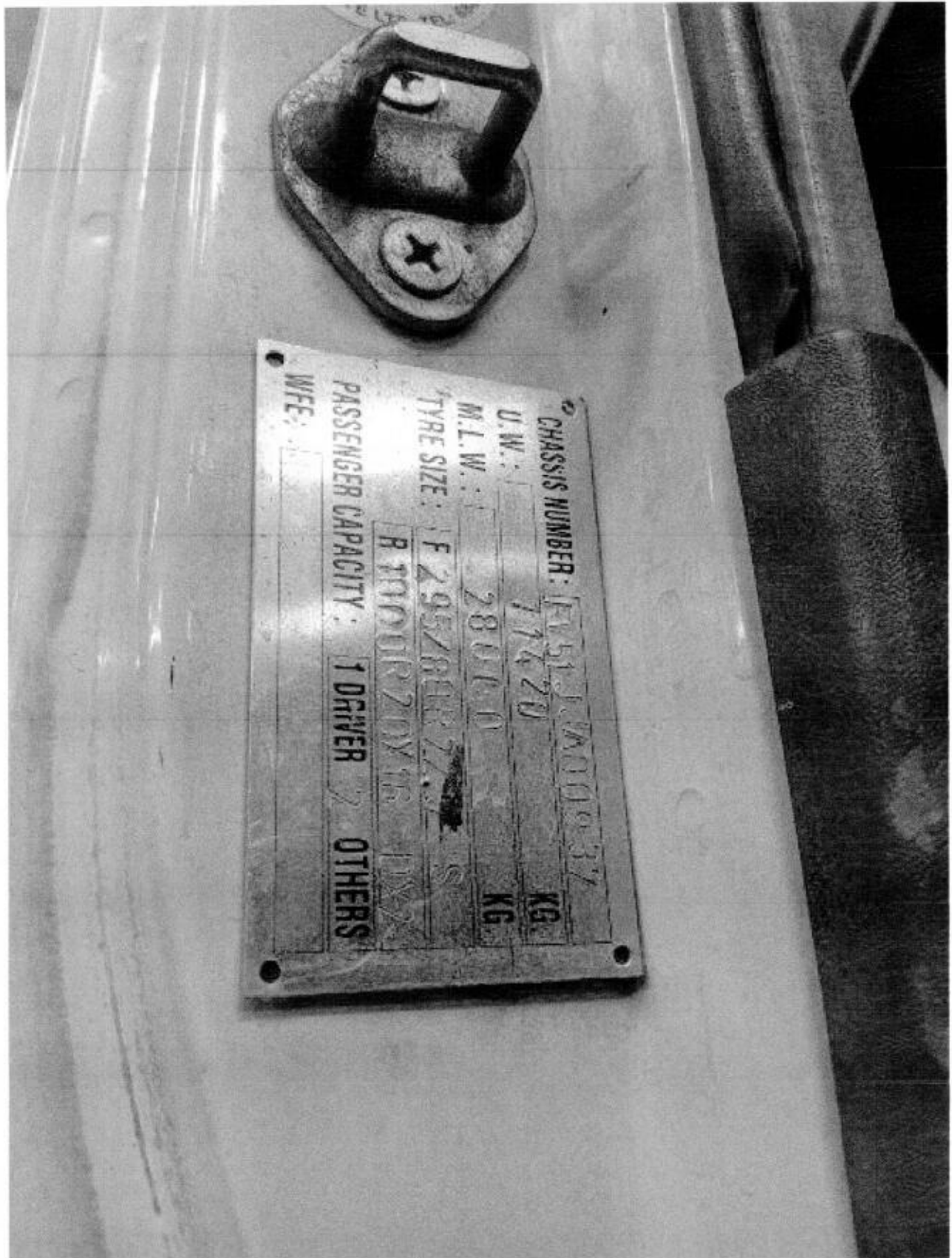
Accident Photo



Accident Photo



Accident Photo



[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Company

Owner ID: 6939H

Vehicle Details

Vehicle No.: XD6664P

Vehicle to be Exported: No

Intended Deregistration Date: 20 Mar 2019

Vehicle Make: MITSUBISHI

Vehicle Model: FV51JJD4RDEA

Primary Colour: White

Manufacturing Year: 2012

Engine No.: 6M70453805

Chassis No.: FV51JJA00937

Maximum Power Output: -

Open Market Value: \$109,658.00

Original Registration Date: 05 Dec 2012

First Registration Date: 05 Dec 2012

Transfer Count: 1

Actual ARF Paid: \$5,483.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 04 Dec 2022

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 10

QP Paid: \$60,235.00

COE Rebate Amount: \$22,318.00

Total Rebate Amount: \$22,318.00

The information contained herein is correct as at 20 Mar 2019

OK

MAH LIAN MOTOR VEHICLE REPAIRER

No.38 Defu Lane 9 Singapore 539278
 TEL: 62823336 FAX: 62893336 Email: mahlian@singnet.com.sg
 GST:M90362564P RCB NO:201327339E

M/S: CHINA INSURANCE

TEL:

ATTN: Motor Claim Department

Your Ref No: CHS E & C PTE LTD

Claim Type: Third Party

Accident Date: 13/03/2019

Estimate No: ES1700461

Date: 13 Mar 2019

Policy No: CN888583

Veh Reg No: XD6664P

Make/Model: MITSUBISHI FV51J

Chassis No: FV51JJA00937

Engine No: 6M70453805

Reg. Date:

Estimate Repair Cost to Vehicle No :XD6664P

Description	U/Price	Quantity	List Price	Amount
			SS	SS
Net Price				
1 Rear Tipper Door	1,950.00	1 PC	1,950.00	
2 Rear Tipper Lock	60.00	1 PC	60.00	
3 Rear Tipper Hook	80.00	1 PC	80.00	
4 Rear Tipper Gate Hinge & Pin	480.00	2 SET	960.00	
			3,050.00	3,050.00
Labour				
5 Labour to knock & weld & cut & renew all parts .	680.00	1 JOB	680.00	
6 To spray & painting rear tipper door & all parts .	650.00	1 JOB	650.00	
			1,330.00	1,330.00
			Total	SS 4,380.00
			Add GST @ 7%	306.60
			Total Amount Payable	SS 4,686.60

TOTAL: SINGAPORE DOLLAR FOUR THOUSAND SIX HUNDRED EIGHTY SIX AND CENTS SIXTY ONLY

For MAH LIAN MOTOR VEHICLE
REPAIRER

AUTHORISED SIGNATURE

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:

Not Allocated
 700/2
 20/3/19

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: CS/CTI19004937/UQD3N2

Date: 12/04/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN30005019011
Claimant Vehicle No :	XD6664P	Insured Vehicle No :	YP5513Z
Date of Loss:	13/03/2019	Nature of Claim:	TP
		Claim No:	SNM19D201167C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	XD6664P	Engine No:	6M70453805
Make & Model:	MITSUBISHI FV51JJD4RDEA, 12.9 D (M)	Chassis No:	FV51JJA00937
Reg. Date:	05/12/2012 (Man. Year: 2012)	Odometer:	594977 km
Colour:	White		
Engine Capacity:	12882 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	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	295/80R22.5	Rear Tyre Size:	10.00R20 (D/D)
Front Left Side:	Goodyear 5 mm	Rear Left Side:	Goodyear 5/55/5 mm
Front Right Side:	Goodyear 5 mm	Rear Right Side:	Goodyear 5/55/5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,050.00	0.00	3,050.00	100.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,330.00	700.00	630.00	47.37
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	4,380.00	700.00	3,680.00	84.02
+ GST 7.00/7.00% (S\$)	306.60	49.00	257.60	84.02
Nett Amount (S\$)	4,686.60	749.00	3,937.60	84.02

INSPECTION

Date of Assignment:	19/03/2019	
Date Inspected:	20/03/2019	Inspected At: Mah Lian Motor Vehicle Repairer (HQ) NO. 38 DEFU LANE 9 Singapore 539278
Estimated Period of Repair:	2.0 days	

Adjuster: MARCUS CHUA

Manager: SHIAU CHAN

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.

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 12 Apr 2019)	
Parts:	N/A	mitsubishi FV51JJD4RDEA 12.9 D (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for XD6664P)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page 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		*REAR TIPPER DOOR	Repair	1,950.00 FS	*-FS
2	1		*REAR TIPPER LOCK	Repair	60.00 FS	*-FS
3	1		*REAR TIPPER HOOK	Repair	80.00 FS	*-FS
4	2		*REAR TIPPER GATE HINGE & PIN (Set)	Repair	960.00 FS	*-FS

F=Franchise part. S=SpcNett.

Total Parts (S\$)	3,050.00	0.00
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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
Labour Items				
1	LABOUR TO KNOCK & WELD & CUT & RENEW ALL PARTS	New	680.00	450.00
2	TO SPRAY & PAINTING REAR TIPPER DOOR & ALL PARTS	New	650.00	250.00
Gross Labour Cost (S\$)			1,330.00	700.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >