

Nivitha (LKK Auto)

From: Joel Goh <joel.goh@eqinsurance.com.sg>
Sent: Wednesday, 3 April 2019 9:26 AM
To: Mail office
Cc: assignments
Subject: RE: OUR REF: DM19HO00871-JG ; YOUR REF: GTW.ACC.3044.19.WK (PRS FOR FBP3423K)
Attachments: 02042019165648-0001.pdf

Without Prejudice

Dear Wee Ka

Thank you for your response.
We do not agree with your list of surveyors and will appoint LKK to conduct PRS.

Dear LKK

Please assist on the following PRS.

Best Regards,

Joel Goh
Executive | Claims



EQ Insurance Company Limited
5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
did 65 6500 6772 | tel 65 6223 9433 ext 772 | fax 65 6223 4190
www.eqinsurance.com.sg

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From: Mail office [mailto:mail@gohjpwong.com]
Sent: Tuesday, April 2, 2019 5:06 PM
To: Joel Goh
Subject: Re: OUR REF: DM19HO00871-JG ; YOUR REF: GTW.ACC.3044.19.WK (PRS FOR FBP3423K)

Dear Sir/Mdm

We are not agreeable to your proposed motor surveyors.

Our list of proposed Single Joint Expert ("SJE") as follows:-

1. Dylan Lee of Lee Appraisal Services
2. Jayson Liaw Leong San of Pro-Option Services
3. Seah Kwang Boon of Absolute Appraisal Services

4. Oh Han Cheong of Oh Appraisal
5. Bok Jee Tan of Prudent Adjustors Services
6. Fong Kok Heng Stanley of Automax Survey
7. Sebastian Lim Yong Tian of Constant Appraiser Services
8. Lek Boon Hwee of Auto Performance Appraisal
9. Louis S C Ng Cae Amimi of Prestige Appraiser Services
10. Richard Wong Ah Kow of R W Automotive Appraiser Services

Kindly let us hear from you soonest.

Lee Wee Ka
for and on behalf of Goh Teck Wee
Messrs Goh JP & Wong LLC
Advocates & Solicitors
Commissioner for Oath
133 New Bridge Road #16-09
Chinatown Point Singapore 059413
Tel: 6538 5868
Fax: 6538 4898

We do not accept service of documents by facsimile or email. Our business hours are from Mondays to Fridays from 9 am to 5 pm and we are closed on Saturday, Sundays and Public Holidays. UEN/GST Regn No: 201406078M

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On Tue, Apr 2, 2019 at 4:59 PM Joel Goh <joel.goh@eqinsurance.com.sg> wrote:

OUR REF: DM19HO00871-JG

YOUR REF: GTW.ACC.3044.19.WK

Without Prejudice

Save As To Costs

Dear Sirs

We refer to your fax dated 29/03/2019.

Kindly email all PRS request to qiprs@eqinsurance.com.sg

We shall be appointing our surveyor to attend to the pre-repair survey of your client's vehicle.

Below is a list of motor surveyors in our panel. Please revert within 2 working days if you agree or have any objections to the appointment of any of the motor surveyors. If we do not hear from you, you are deemed to have agreed to the appointment of any of the motor surveyors listed by us. Alternatively, please specify one or more of our proposed motor surveyors to the said assignment.

1) AJAX Inspection Services Pte Ltd Tel: 6255 0808 Fax: 6849 9155	2) Automobile Inspection Services Pte Ltd Tel: 6286 0155 Fax: 6284 1539 Contact Person: Sophia
3) LBS Automotive Appraisal Pte Ltd L.B.S. Auto Consultants Pte Ltd Tel: 6281 6690 / 62832866 Fax: 6281 8748 Contact Person: Amy/ Grace	4) Priority Services Tel: 62934822 Fax: 62963283 Contact Person: Sharon
5) Infiniti Appraisal Service Tel: 96684818 / 90099001 Fax: 64587432	6) LKK Auto Consultants Pte Ltd Tel: 6256-3561 Fax: 6741-4108
7) Kelvin Automotive Appraising Services Tel: 81825263 Fax: 67461148 Contact Person: Kelvin	8) Automotive Appraiser & Surveying Services Tel: 96623655 Fax: 67655662 Contact Person: Mr Chee
9) JP Knights Pte Ltd Tel: 63450068 Fax: 63445328	10) Appraisals Associates Pte Ltd Tel : 67472822 Fax: 67470070

If you object to all the motor surveyors as proposed by us, please provide a list of at least 10 motor surveyors whom you consider as suitable to appoint for our consideration. We shall revert to you within 2 working days.

Meanwhile, we reserve our rights on Post-Repair Inspection, kindly contact us or our appointed surveyor before you return your client's vehicle to him/her.

Best Regards,

Joel Goh

Executive | Claims



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Enquire Transfer Fee

Vehicle Details			
Vehicle No.:	FBP3423K		
Vehicle Type:	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1:	No Attachment		
Vehicle Scheme:	Normal		
Vehicle Make:	HONDA		
Vehicle Model:	NC750XA		
Chassis No.:	JH2RC90A0KK302091		
Propellant:	Petrol		
Engine No.:	RC88E5202484		
Engine Capacity:	745 cc		
Maximum Power Output:	-		
Maximum Laden Weight:	429 kg		
Unladen Weight:	220 kg		
Year Of Manufacture:	2019		
Original Registration Date:	13 Mar 2019		
Lifespan Expiry Date:	-		
COE Category:	D - Motorcycle		
Quota Premium:	\$2,889.00		
COE Expiry Date:	12 Mar 2029		
Road Tax Expiry Date:	12 Sep 2019		
Inspection Due Date:	12 Mar 2022		
Intended Transfer Date:	05 Apr 2019		
CO2 Emission:	-		
CO Emission:	-		
HC Emission:	-		
NOx Emission:	-		
PM Emission:	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Total Amount Payable:			25.00

You may print this page for reference.

OK

Print

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	2564A
Vehicle Details	
Vehicle No.:	FBP3423K
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Apr 2019
Vehicle Make:	HONDA
Vehicle Model:	NC750XA
Primary Colour:	Blue
Manufacturing Year:	2019
Engine No.:	RC88E5202484
Chassis No.:	JH2RC90A0KK302091
Maximum Power Output:	-
Open Market Value:	\$7,202.00
Original Registration Date:	13 Mar 2019
First Registration Date:	13 Mar 2019
Transfer Count:	1
Actual ARF Paid:	\$1,851.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	12 Mar 2029
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$2,889.00
COE Rebate Amount:	\$2,870.00
Total Rebate Amount:	\$2,870.00

The information contained herein is correct as at 05 Apr 2019

OK

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	26/03/2019 17:56
Date Of Accident	26/03/2019 09:45
Exact Location Of Accident	AMK AVE 10 CARPARK A38
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP3423K
Insured/Policyholder	
Name Of Registered Owner	CHEE TYAN TYAN
NRIC No	S8542564A
Email Address	HAYAKAWAL88@GMAIL.COM
Mobile Phone No	(LOCAL) +65-88768178
Alternative Phone No	OFFICE-88768178

Vehicle Particulars

Manufacturer	HONDA
Model	NC750XA
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5108193849
Cover Note Number	

Driver

Name of Driver	CHUA BOON LAIT DANIEL
NRIC No	S8023541J
Date Of Birth	13/08/1980
Occupation	OUTDOOR
Date Of Driving Pass	16/07/2004
Driving Experience	14 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91828270
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	35 PUNGGOL FIELD #10-25
Postcode	828818
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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	3
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)	0

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

WHEN I COLLECT MY BIKE, I SAW A NAME CARD ON MY BIKE WHICH WAS STATIONARY. NAME CARD STATED "MOTOR WAS PICKED UP BY VEHICLE B. IF ANY FAULT, CONTACT B. HE ADMITED HE KNOCKED THE BIKE AND ALSO HIT ANOTHER BIKE. B AGREED TO PROCEED WITH INSURANCE CLAIM.

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	SKQ1131D
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE C
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

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:

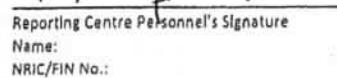
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.


 CREE

 Policyholder's Signature
 Date & Time:

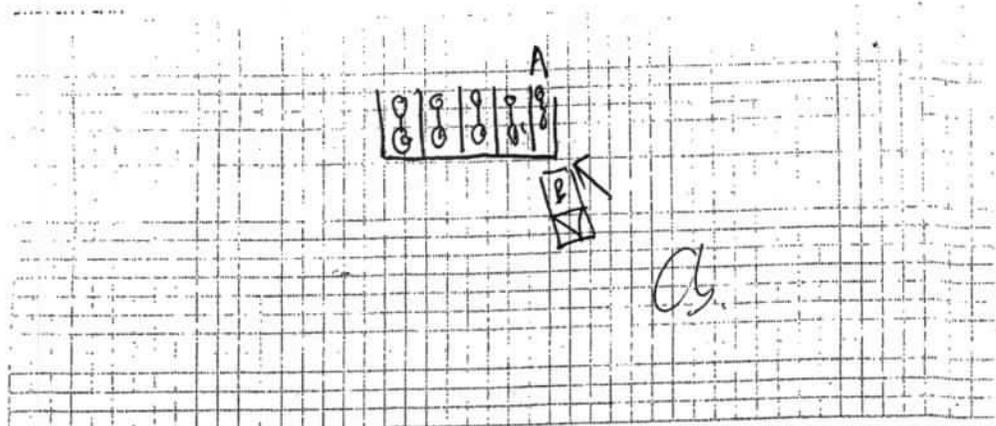


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

26/3/19 2.45pm


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

Sketch Plan #2 Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- collect bike, saw namecard on bike. Bike was stationary.
 - namecard stated "motor was picked up by ^{veh}B. If any fault contact B"
 - B admit he knock the bike and also hit another bike.
 - B ~~ask me~~ and agreed to proceed with insurance claim.

A.

DECLARATION

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

↓
 CHEE

 Policyholder's Signature
 Date & Time:

↓ A.

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

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

SA 1124, 11/01/2014, 11/01/2014, 11/01/2014



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			
EQ INSURANCE COMPANY LTD		Ref: CS3/EQI19005918/Gcd3e2	
5 MAXWELL ROAD #17-00 TOWER BLOCK MND COMPLEXSINGAPORE 069110		Date: 22-04-2019	
		Code: EQI	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	SKQ 1131D	Veh. Inspected	FBP 3423K
Policy No.		Coverage (\$)	0.00
Claim No.	DM19HO00871-JG	Excess (\$)	0.00
Assign From	JOEL GOH	Assign Date	03/04/2019
2. Vehicle Particulars & Condition			
Make & Model	HONDA NC750XA	c.c	745
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	JH2RC90A0KK302091	Colour	BLUE
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	120/70Z R17	BRIDGESTONE	5 mm
L/H Front Tyre			mm
R/H Rear Tyre	160/60Z R17	BRIDGESTONE	5 mm
L/H Rear Tyre			mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S AND N/S BODY.			
5. General Information			
Accident Date	26/03/2019	Inspect Date / Time	03/04/2019 (05:30 PM)
Survey held at	SANFU MOTOR PL 1 KAKI BUKIT AVENUE 6 #02-43 AUTOBAY @ KAKI BUKIT SINGAPORE 417883		
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. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,000-\$3,000			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days	

Report Ref No. CS3/EQI19005918/Gcd3e2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

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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