22/03/2002 ASS. REC, BY	RI	EF: CS/ C111900	73671 U	d3 spe	2 ecial Instruction:	
SUTVEYOT : WE'M'N From (Person	: Elaino cheong	ASSIGNME of (11	(5)		Date/Time: 26.4.19	11.75 a.m
Estimated Cos  OD (TP) W:  To Inspect Ve  at Workshop of Del	Strpres/odres/ chicle No: SJZ 4/0 m/s Tan Lim h		Bill to:	Insured;	SME 3845D (858515)	
Policy No: D	MPCSN 307937181	00	Claim No:	SVM 19.1	0201768(02	
Sum Insured; Make of Veh. (Client's Record			Excess: _		D.O.A. 1914) 20	19
	REP. / REV 24 HRS		william	v	H.O.D. Endorsement; chicle_IN LOUT	
Date/Time	Action/Instruction (	V) Estimate				
	SJ24100m -					
-	SME 3845 D - X					

) )

AS	SIGNMENT
Date: 10-5. 2019	Veh No. SJZ Clom Vr Regn: 1/10
FIORL Date.	Type Mear / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck/Trailer or Cg/
OD I(TP) WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: S3Z 4/00	1 / 1001
To Inspect Vehicle No: S3Z 4100 at Workshop m/s Tan Lim moto6	A JOS - London A J Chall PALL PALL AND
1 0 ( . 1 /	Sp.Reading ) = 2 (2) T/Radio: Insured / Std / NI / NA
	Eng/No:
Insured:	C/No: YA 5011919
Policy No.	Gen. Cond: Good / Fair / Poor / Burnt
Claims No.	Steering: Igorder / Jammed / Leaked / Burnt or
Sum Insured: • Excess:	Brake: Inopter / Jammed / Leaked / Burnt or
(Client's Record)  Make of Veh: 200 p.m	Modi: Nil / Strim / STD A/Rim or
Make of Veri.	Tyre Size: F:
	1) a R: 2.25/50117
(Policy Condition)  Remark: The veh had commenced its  N/S  O/S	
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear R/Bal. 6 mm R/Bal. 6 mm
DAC Accident Rport: Consistent? : Yes or No  Consistent? : Yes or No  Consistent? : Yes or No	in C in /
- 6	D.O.A. 19/4/19 D.O.I. 10/6/19
C sale	17(11)
Lum Sum: 2 % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	DUT Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / O  Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
1/19 Confind a/5 \$900	with w. ((con 'CRed: 3034.62 \$772)
3/(1)	
BECEIVED.	1 3 MAY 2019
KECEIVED	1 3 1 1111 2013
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 2
1) (3) 5 Upt : Final Report Date/Time, File Return to?	Resurvey No. of Trip: - Survey Fee:
A -1-1 F	Transportation:  Fee:   Site Insp (\$ )S+R3Si
2) Add P	Interview (\$ ) Photos
Report Format: P	Tech, Invs (\$ ) Others
Lump Sum / LB.I: (\$ 900)	Weekend (\$ )
Lamp don't got to (	TOTAL
	IOIAL I

.

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	22 Apr 2019		26 Apr 2019 11:25 Assign				New Assignm Cancel Case	nent
	Main	Ref	erence	Clair	n Details	Documer	nts	Show All
	UBFOLDER DE	TAILS		AWTHE SUSPENSION	OUR PROPERTY OF THE PARTY OF TH	[Crea	ated by insure	r]
Insured: Main Clair	mant:	CHAN	TUCK FATT CHAR	LIE. ID: S69	926334H			
Vehicle R		SJZ41	VS-AS-TEN		e of Loss:	19/04	19/04/2019 23:00 - :59	
Claim Typ	-	TP / S	TP / SNM19D201768C02		Policy/Cover Note No.:		DMPCSN3079371800	
4.0	eg. No. (Insured)		ME3845D		Policy No. (Claimant):		8-V0020207-MVA	
				Exc	Excess:		S\$750.00	
Repairer:			im Motor Pte Ltd (Defu) 1 Defu Lane 6, 539365 Defu Lane - Tel: 6858 5151					
Handling	Insurer:	China	Taiping Insuranc	e (Singapore	) Pte. Ltd. (HQ) -	Tel: 6389 6111 [	Handled by Elai	ine Cheong
Claimant'	s Insurer:	QBE In	surance (Singap	ore) Pte Ltd	(HQ) - Tel: 62246	633		
Adjuster:		LKK Au	ito Consultants F	te Ltd (HQ)	Tel: 6256-3561	. [Final Rpt due	08/05/2019]	
ASSOCI	ATED MAIL RE	CEIVED				View All	Compose	Case Mail
There are	no mail for this	case.						
E					1			
ALL ASS	SOCIATED TAS	KS			View All Sear	rch Tasks Crea	ite New Task	Complete

#### 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 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 ladgement 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

ACCI	DENT	STAT	4 - 4 7	1-13	п
ACCI	DEN		- 1		L

20/04/2019 11:57 Date Of Report 19/04/2019 23:40 Date Of Accident

DRIVEWAY OF MALAYSIA CUSTOM Exact Location Of Accident

SINGAPORE Country/State of Loss

#### **DETAILS OF OWN VEHICLE**

SJZ4100M Vehicle Registration Number

Insured/Policyholder

CHAN TUCK FATT CHARLIE Name Of Registered Owner

S6926334H NRIC No

CHARLIEXIGA@GMAIL.COM Email Address (LOCAL) +65-90025152 Mobile Phone No

OTHERS-90041192 Alternative Phone No

Vehicle Particulars

Manufacturer SUBARU

Model EXIGA-2.0 GT TURBO (A)

Exact Purpose for which vehicle was being used at PRIVATE USE

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 PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company QBE INSURANCE (SINGAPORE) PTE LTD

COMPREHENSIVE Type Of Coverage

Fleet Policy NO

8-V0020207-MVA Policy Number

Cover Note Number 23,11,2018 TO 22,11,2019

Driver

Name of Driver DONOVAN CHAN GUAN DA

S9636134C NRIC No 15/10/1996 Date Of Birth INDOOR Occupation 15/07/2015 Date Of Driving Pass

3 YEARS AND 9 MONTHS Driving Experience

MALE Gender

Mobile Number (LOCAL) +65-90041192

Fax Number

Contact Number

EMail Address O3UNIT4DRIVER@HOTMAIL.COM Address

BLOCK 115 PASIR RIS STREET 11

#04-557

Postcode

510115

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PARENT

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO 2

Number of vehicles (including own vehicle) involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

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)

2

Passenger 1

NAME:

: CHAN TUCK FATT CHARLIE

GENDER:

: MALE

**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 to sketch Plan

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

RETRIEVING

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SME3845D

Vehicle Make/Model/Colour Details Of Properties

BMW

Vehicle Category

PRIVATE CAR

Name of Driver

BENJAMIN SIAU

NRIC/Passport Number

Contact Number

9655 6119

Address

Postcode

Insurance Company Name

#### Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 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.
- 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)

Lunderstand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, are, discipse 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 discipse 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 enquirien 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. Jawyers/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 GFA to their third party service providers or agents including their lawyors/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 to collected under (d) above may be shared / disclosed
  - (i) to all insurers and/or any other third parties that assist in establing, investigating, controlling or reanaging 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

Driver's Signature

(if driver is not the policyholder)

Date & Time:

1/04/190000

Reporting Centre Personnel's Signature
Name: Lam Will SWA

NRIC/FIN NO. 66864652A

SKETCH PLAN

apper to attackment

#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On	190419,	at	around	23 39 kg	at	Morlay	Size Co	woten,	9044
140	(without (	malay	Fig). I W	der) (Dec	of Fr	- the	rout	e be	hind
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Goilg	nearer	40	the c	witon, .	2 (01	) tried	+0	(u+	into
ory la	ne · I	didn't	chive	my to	then	~ as	J ~	ils 1,	My
lone.	SME	3845	D Cut	Nto 1	my 1	ane or	d hi	t me	, then
Study	r	rit hi	s car.	Accussing	me	that	I W	A hi	5 Car
vocat ~	as 17	true	. He th	RA Soid	he	had "	Sp.	called	"wither)"
From	our ther	lone	. No idea	it they	are	related	There	15	Video
odvi oku	a wit	Ness (	late is	SLR L	+5 X R.	Tried	to 1	north	·a police
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	ar ve					C (**1)			J
In Cres	1 00	VI VOES							

PECLARATION

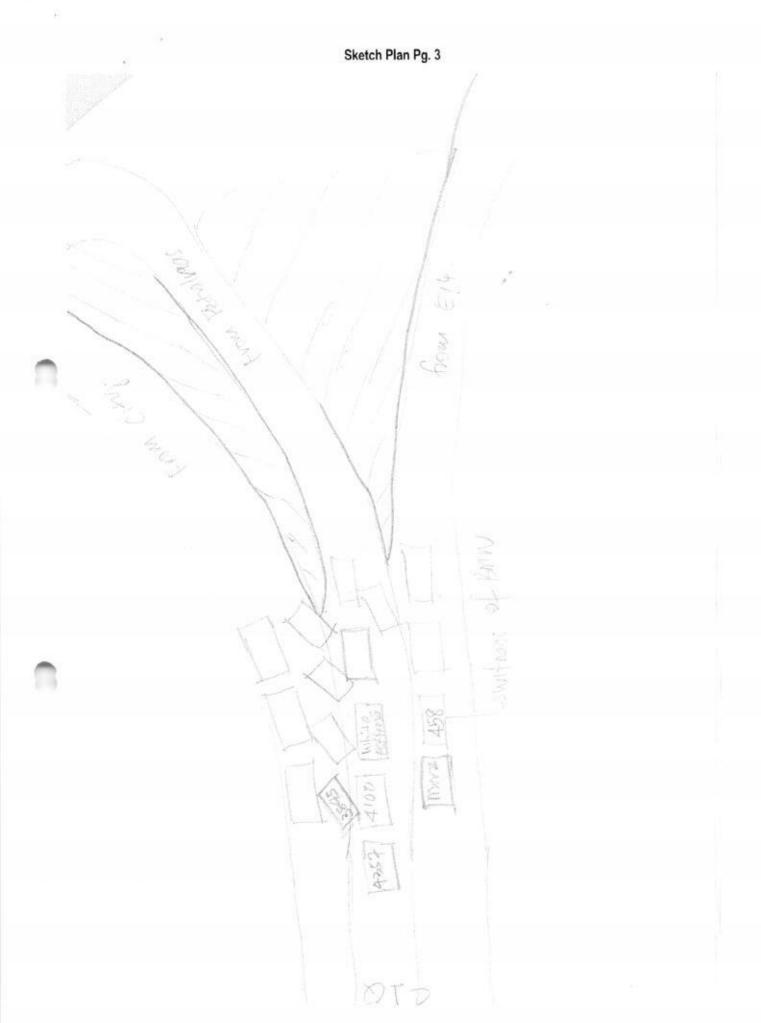
I/We reclare the foresting particulars are true in every respect.

Policyholds's Signature

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

Date & Time: 20/04/14 C1730M

Reporting Centur Personnel's Signature Name: Lun Wei Shans NRIC/FIN No: U1686 405 2 P.



#### > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Owner ID:

Vehicle Details Vehicle No.:

Vehicle to be Exported:

Intended Deregistration Date:

Vehicle Make:

Vehicle Model:

Primary Colour:

Manufacturing Year:

Engine No.:

Chassis No.:

Maximum Power Output:

Open Market Value:

Original Registration Date: First Registration Date:

Transfer Count:

Actual ARF Paid:

intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date:

COE Category:

COE Period(Years):

QP Paid:

COE Rebate Amount:

Total Rebate Amount:

The information contained herein is correct as at 20 Apr 2019

Singapore NRIC

6334H

5JZ4100M

No

20 Apr 2019

SUBARU

EXIGA MPV 2.0GT TURBO MOONROOF AWD 5AT

Red

2009

EJ20D710451

YA5011919

165.0 kW (221 bhp)

\$31,676.00

23 Nov 2010

23 Nov 2010

0

\$31,676.00

22 Nov 2020

\$17,421.00

22 Nov 2020

E - Open Category

10

\$43,290.00

\$6,752.00

\$24,173.00

OK



	ate	of Accider	Veh No : SME3845 nt : 19 April 2019	1 Defu Lan Tel : 68585151 (2	MOTO e 6 Sing 4 Hours . No. : M	R PTE LT apore 539365 ) Fax: 68 2-8922054-2	D 5 580877
			-33	idy 2/5 \$ 80	00	79	A
- 7	-		epair SJZ4100M - 9 A5011919	SUBARU EXIGA MPV 2.0I AWD 4AT ABS AIR	(	on to le	05/19
	S/No	Quantity	Description /	1		Amount	
	01 02 03 04 05 06	1 pc 1 pc 8 ps 1 pc 1 pc	ront bumper side front bumper side front bumper clip right headlamp right headlamp low special bumper side	bwer bracket And	\$\$\$\$\$\$\$\$\$\$	600.00 24.00 32.80 2,160.00 55.00 2,871.80 287.18 2,584.62 200.00 200.00	X 20 200
	03			LEG Auth Legs up to seek a day Use Repairer or the 1 Southers  • To result by before a part of the personner  • To display damaged ped/s) during resources	\$	600.00 1,150.00 3,934.62	. 400
				Parts prints are subject to confirmation Third party survey to on a "William Projudice" basis No litegal modification(s) is allowed Supplementary dem(s) must be reserveyed and is subject to final approval from Insurance Company Althous betyed by Repairer		1.25°.4	4

### 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/CTI19007367/UTD3N2

Date:

SME3845D

DMPCSN3079371800

14/05/2019

REFERENCE

Handling Insurer:

China Taiping Insurance

(Singapore) Pte. Ltd.

Claimant SJZ4100M Vehicle No:

19/04/2019

Policy No:

Insured

Vehicle No:

Nature of Claim:

TP

Claim No:

SNM19D201768C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SJZ4100M

Make & Model: Reg. Date:

Date of Loss:

SUBARU EXIGA, 2.0 GT TURBO (A) 23/11/2010 (Man. Year: 2009)

Engine No: Chassis No: Odometer:

EJ20D710451 YA5011919 252477 km

Colour: Red 1994 cc

**Engine Capacity:** Market Value/New Car

Price:

Sum Insured (S\$):

N/A

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Yes Engine Modification:

Yes Footbrake (Serviceable): Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

225/50R17

Rear Tyre Size:

225/50R17 Bridgestone 6 mm

Front Left Side: Front Right Side: Bridgestone 6 mm Bridgestone 6 mm Rear Left Side: Rear Right Side:

Bridgestone 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,784.62	525.44	2,259.18	81.13
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,150.00	620.00	530.00	46.09
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	3,934.62	1,145.44	2,789.18	70.89
Approved Total (Overridden) (S\$)		900.00		
(S\$)	3,934.62	900.00	3,034.62	77.13
+ GST 7.00/7.00% (S\$)	275.42	63.00	212.42	77.13
Nett Amount (S\$)	4,210.04	963.00	3,247.04	77.13

INSPECTION

Date of Assignment:

26/04/2019

Date Inspected:

10/05/2019

Inspected At:

Tan Lim Motor Pte Ltd (Defu)

1 Defu Lane 6 Singapore 539365

Estimated Period of Repair:

2.0 days

Adjuster: MARCUS CHUA

Manager: DENISE TAY KWEE CHENG

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

Referen	ce			
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 14 May 2019)		
Parts:	M1-MPV	SUBARU EXIGA 2.0 GT TURBO (A) (Catalogue:Merimen Singapore 1.0)		
Labour:	Repairer's	(Price-denominated Standard List)		
Print Code:		, no print-code for SJZ4100M)		
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		*FRONT BUMPER	Cut/Torn	600.00 FL	*600.00 FL
2	1		*FRONT BUMPER SIDE RETAINER RIGHT	Bent	24.00 FL	*24.00 FL
3	8		*FRONT BUMPER CLIPS	Necessary	32.80 FL	*32.80 FL
4	1		*RIGHT HEADLAMP	Not Necessary	2,160.00 FL	*-FL
5	1		*RIGHT HEADLAMP LOWER BRACKET	Not Necessary	55.00 FL	*-FL
6	1		*FRONT BUMPER SIDE HOLDER RIGHT (ACCESSORY)	Not Necessary	200.00 FS	*-F8
F=Fra	anchise	part. S=S	pcNett. L=ListItemDisc.			
				Sub Total (S\$)	3,071.80	656.80
			- List Item Discount on L Ite	ms 10.00/20.00% (S\$)	287.18	131.36
				Total Parts (S\$)	2,784.62	525.44
			Report was unsubmitted during th	is print-out.		

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended	ahour
1 CC CONTINUE INCC	

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	50.00	20.00
2	PANEL BEATING, KNOCKING AND STRAIGHTEN THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME	New	500.00	200.00
3	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	600.00	400.00
	Gross Lab	our Cost (S\$)	1,150.00	620.00
	Report was unsubmitted du	iring this print-out.		

< END OF ESTIMATES >