

22/03/2002

REC. BY:

REF:

CS/INC19008397/Jtd30

Special Instruction:

Surveyor: Hwu JieASSIGNMENT (Office)From (Person): Cynthia Angof INCDate/Time: 13/5/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SDK HHHOGInsured: FBM 8170Yat Workshop m/s Hua HongTel: 66619688of 250 Sungei Kadut St. 1

Policy No:

Claim No: MT/1041967-002

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 26/4/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 13/5Person Contacted: XionneVehicle IN/OUT

Date/Time	Action/Instruction
	Estimate (✓)
	SDK HHHOG-X
	FBM 8170Y-X

REF: NTUC

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/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
	<input checked="" type="checkbox"/>

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

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

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No. SDK 44406 Yr Regn: 14 Sep/2017

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

Truck / Trailer or

Make: Hyundai Elantra c.c. 1591Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 34902 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHD841CMJVS37880Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or

nexen

Front

Rear

R/Bal. 5 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mmD.O.A. 26/4/19D.O.I. 13/5/19 1258pm

Survey held at

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

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

Date / Time Action / Instruction

Confirmed P/P #2083.761 2 days of repair (Red: 629.941 23%)

RECEIVED 01 JUL 2019

Date/Time, File Pass to?

☐ : Preli. Report☒ : Final Report

1) 1/7 Typist

Date/Time, File Return to?

2)

Report Format :

Lump Sum / IBL: (\$) 2083.76Days Of Repair: 2Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

) ___ S + PS. ___ SI

) Photos

) Others

)

TOTAL

290

290

Nivitha (LKK Auto)

From: Cynthia Ang <Cynthia.Ang@income.com.sg>
Sent: Monday, 13 May 2019 9:46 AM
To: assignments@lkkauto.com
Cc: Teng Ken Leong; Thio Tse Kiat; Cynthia Ang
Subject: TP CASES FARMED OUT TO LKK QN 13/05/2019

Dear Veron / Nivitha,

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

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Type	Survey Time	OI VEH	DOA	Addit Rem:
1	Helena Tan	MT/1043475-001	SGM883S	BORNEO MOTORS (S) PTE LTD	2 PANDAN CRESCENT SINGAPORE 128462	Carine Yeo / 9699 6192	Physical Survey	10:00-12:00	FBG2281G	05/05/2019	
2	Jeff Lin	MT/1041407-002	SMJ9512Z	BORNEO MOTORS (S) PTE LTD	2 PANDAN CRESCENT SINGAPORE 128462	THOMAS / 66311860	Physical Survey	10:00-12:00	SKP3233K	20/04/2019	
3	Marcus Xiao	MT/1041967-002	SDK4440G	HUA HONG PTE LTD	25D SUNGEI KADUT STREET 1 SINGAPORE 729332	YVONNE TOH/ MRS TAN / 66619688	Physical Survey	14:00-16:00	FBM8170Y	26/04/2019	

Please contact workshops.

Please ack.

Thank You

With Regards

Cynthia Ang
Admin Assistant
Motor Insurance
T +65 6430 7900
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers

in with you

PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

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	29/04/2019 11:41
Date Of Accident	26/04/2019 18:30
Exact Location Of Accident	ALONG CTE TOWARDS ANG MO KIO AVE 3
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SDK4440G
Insured/Policyholder	
Name Of Registered Owner	TAN CHEIK HING
NRIC No	S1450926G
Email Address	TANCHEIKHING@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-98593765
Alternative Phone No	OTHERS-98593765
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	ELANTRA AD 1.6 GLS AT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10860933
Cover Note Number	
Driver	
Name of Driver	TAN CHEIK HING
NRIC No	S1450926G
Date Of Birth	23/07/1960
Occupation	INDOOR
Date Of Driving Pass	09/07/1986
Driving Experience	32 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98593765
Fax Number	
Contact Number	OTHERS-98593765
Email Address	TANCHEIKHING@YAHOO.COM.SG

Address	55 CHOA CHU KANG LOOP #10-33
Postcode	689684
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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)	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	FBM8170Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MUHAMMAD NORIMAN BIN MAZLAN
NRIC/Passport Number	S9443107G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLJ8269U
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

HOW AH FOO

NRIC/Passport Number

S0073497G

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

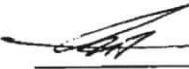
SKETCH PLAN

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.:

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

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	0926G
Vehicle Details	
Vehicle No.:	SDK4440G
Vehicle to be Exported:	No
Intended Deregistration Date:	14 May 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT
Primary Colour:	Blue
Manufacturing Year:	2017
Engine No.:	G4FGHU621344
Chassis No.:	KMHD841CMJU537880
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	\$12,674.00
Original Registration Date:	14 Sep 2017
First Registration Date:	14 Sep 2017
Transfer Count:	0
Actual ARF Paid:	\$12,674.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Sep 2027
PARF Rebate Amount:	\$9,505.00
Intended COE Rebate Details	
COE Expiry Date:	13 Sep 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$46,778.00
COE Rebate Amount:	\$38,974.00
Total Rebate Amount:	\$48,479.00

The information contained herein is correct as at 14 May 2019

OK



HUA HONG PRIVATE LIMITED

25D SUNGEI KADUT STREET 1, SINGAPORE 729332
Tel: (65) 6661 9688 Fax: (65) 6661 9699 Email: info@huahong.com.sg

Estimate Repair List

02 May 2019

QUOT201905-000001
HHTPCLAIMS19-63

NTUC INCOME INSURANCE CO-OPERATIVE LTD
75 BRAS BASAH RD
NTUC INCOME CENTRE
SINGAPORE 189557

Attn: Motor Claims Department

ACCIDENT INVOLVING SDK4440G, FBM8170Y & SLJ8269U ON 26/04/2019 ALONG CTE TOWARDS ANG MO KIO AVE 3 AT ABOUT 1830 HOURS

Insured : TAN CHEIK HING
Vehicle Registration No. : SDK4440G
Vehicle Make : HYUNDAI
Vehicle Model : ELANTRA AD 1.6 GLS AT
Vehicle Chassis No. : KMHD841CMJU537880
Policy No. : 10860933
Date of Accident : 26/04/2019

Type of Claim: Third Party

S/N	Quantity	Description	Unit Price S\$	Amount S\$
1	1	Rear Bumper (Upper) CUT ✓		\$ 489.40
2	10	Rear Bumper Clip nec ✓	\$ 2.00	\$ 20.00
3	1	Rear Bumper Reflector (RH) SCR ✓		\$ 60.80
4	1	Rear Bumper Retainer (RH) nec ✓		\$ 44.40
5	1	Rear Bumper (Lower) SCR ✓		\$ 280.10
6	1	Rear Tail Lamp (RH) CRA ✓		\$ 362.60
7	1	Rear Boot Lamp (RH) CRA ✓		\$ 284.90
				\$ 1,542.20
				Less 20% \$ 308.44
				\$ 1,233.76
8	1	Reverse Sensor n x	NETT	\$ 200.00
To dismantle & change rear bumper, rear RH tail lamp, rear RH boot lamp, knocking & pull straight rear RH panel and reinforcement.				\$ 600.00 400
To perform wire checking.				\$ 20.00 ✓
To dismantle & refit rear reverse sensor.				\$ 60.00 30
To spray rear bumper, rear reinforcement and rear panel.				\$ 600.00 400
				\$ 2,713.76
				7% GST \$ 189.96
				Total \$ 2,903.72



Authorised by Claims Dept

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

Signature: _____
Date: _____

Co. Reg. No. 200900309M

huahong.com.sg

GST Reg. No. 200900309M

Page 1 of 1

\$2,903.76/-



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 ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19008397/Jtd3e2

73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 03-07-2019



ATTN: MARCUS XIAO

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBM 8170Y	Veh. Inspected	SDK 4440G
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1041967-002	Excess (\$)	0.00
Assign From	CYNTHIA ANG	Assign Date	13/05/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI ELANTRA	c.c	1591
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	KMHD841CMJU537880	Colour	BLUE
Odometer	34902 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	NEXEN	6 mm
L/H Front Tyre	195/65 R15	NEXEN	6 mm
R/H Rear Tyre	195/65 R15	NEXEN	6 mm
L/H Rear Tyre	195/65 R15	NEXEN	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	26/04/2019	Inspect Date / Time	13/05/2019 (12:58 PM)
Survey held at	HUA HONG PTE LTD 25D SUNGEI KADUT STREET 1 SINGAPORE 729332		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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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. SDK 4440G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER (UPPER)	CUT	489.40	489.40
10	REAR BUMPER CLIP @\$2.00	NECESSARY	20.00	20.00
1	REAR BUMPER REFLECTOR (RH)	SCRATCHED	60.80	60.80
1	REAR BUMPER RETAINER (RH)	NECESSARY	44.40	44.40
1	REAR BUMPER (LOWER)	SCRATCHED	280.10	280.10
1	REAR TAIL LAMP (RH)	CRACKED	362.60	362.60
1	REAR BOOT LAMP (RH)	CRACKED	284.90	284.90
	LESS 20% DISCOUNT		-308.44	-308.44
			1,233.76	1,233.76
SPECIAL NETT ITEMS				
1	REVERSE SENSOR (SN)	NOT NECESSARY	200.00	-
			200.00	-
LABOUR				
	TO DISMANTLE & CHANGE REAR BUMPER, REAR RH TAIL LAMP, REAR RH BOOT LAMP, KNOCKING & PULL STRAIGHT REAR RH PANEL AND REINFORCEMENT.		600.00	400.00
	TO PERFORM WIRE CHECKING.		20.00	20.00
	TO DISMANTLE & REFIT REAR REVERSE SENSOR.		60.00	30.00
	TO SPRAY REAR BUMPER, REAR REINFORCEMENT AND REAR PANEL.		600.00	400.00
			1,280.00	850.00
GRAND TOTAL			2,713.76	2,083.76
RECOMMENDED COST OF REPAIRS (CONFIRMED)				2,083.76

Report Ref No. CS/INC19008397/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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