

ASS. REC. BY:

REF: CS3/FCI19008430/9cd352

Special Instruction:

Surveior: Guo Qiang

**ASSIGNMENT (Office)**

From (Person): Karant

of

FCI

Date/Time: 13.5.2019 2:26pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SGN 3721B

Insured:

SHD 776J

at Workshop m/s

Team Auto pro

Tel:

90927279

of

160 Sh Ming Drive #01-14

Policy No:

Claim No:

DI9003050MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A.

8.5.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement:

Date/Time:

13.5.19 4.08p.m

Person Contacted:

Alan

Vehicle IN/OUT

Date/Time	Action/Instruction ( X ) Estimate:
	SGN 3721B - NBA / AIG 190081661Y D.O.A - 08/05/2019
	SHD 776J - NBA / AIG 190081661Y D.O.A - 08/05/2018
	Dismantle: 14/5/2019
	After repair: 24/5/2019

08/11/13

Surveyor:

PRS  
al

REF:

RCI

0075D

# ASSIGNMENT

From:

Date:

Estimated Cost:

OD TP7WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

Team Antopro

of

Insured:

Policy No.

Claims No.

Sum Insured:

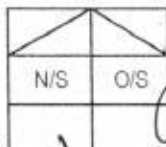
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

\$97k

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:

SGN3721B

Yr Regn:

31 Jul 2018

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

Truck / Trailer or

Make:

KIA Carens 1.7 CC 1685

Colour

Brown

A/C:

Insured / Std / NI / NA

Sp. Reading

23035

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KNAHU 815VJ7211064

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:

225 / 45 R17

R:

"

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

TOYO / YOKO or

Hankook

Front

Rear

R/Bal.:

5

mm

R/Bal.:

5

mm

L/Bal.:

5

mm

L/Bal.:

5

mm

D.O.A.

D.O.I.

B-05-19

Survey held at

w/s

5:45pm

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

O/S Rear

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

2

Survey Fee:

Transportation:

\$ + RS. SI

Photos

Others

TOTAL

Report Format:

PRE

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

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

**MOTOR SURVEY ASSIGNMENT****Date** 08-05-2019 **Our Ref No.** D19003050MFSH**Accident Date** 08-05-2019 **Claim Type.** Third Party**Insured Vehicle** SHD7276J **Third Party Vehicle.** SGN3721B**Survey Location** 160 SIN MING DRIVE #01-14**Contact Person.** ALAN**Contact No.** 01 90927279**Fax No.** 65361963**Survey Type** WITHOUT PREJUDICE:**Appointed Surveyor** LKK AUTO CONSULTANTS PTE LTD**Contact Person** NA**Fax No.** 68416315**Contact Number.** NA(M)  
X Est  
XGB**FOR DIRECT SETTLEMENT**

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

**THIRD PARTY SURVEY REQUEST****Cc : Workshop** TEAM AUTOPRO PTE LTD **Attention.** NIL**Cc : TP Solicitor** ROY & PARTNERS **TP Solicitor Fax No.** NA**Officer Incharge** KARENT**IMPORTANT NOTE**

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

Job Sheet (/ClaimWS/Surveyor/JobSheet/251852)



PRI Documents



Close



## PRI Header Details

Claim No	D19003050MFSH	Policy No	D-19092580MFSH	Claimant S.No & Name	1 & ROY & PA
Workshop Name	TEAM AUTOPRO PTE LTD (Contact Person : ALAN)	Survey Location & Contact Details	160 SIN MING DRIVE #01-14 Mobile: 90927279 , Phone: 0 , Fax: 65361963 EmailId: WILLIAM@ROYPARTNERS.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHD7276J	TP Vehicle No	SGN3721B
PRI Recieved Date	08-05-2019 10:26:48 PM	Surveyor Appointed Date	13-05-2019 02:26:13 PM	Surveyor Accept Date	06-06-2019 1

## Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	06-06-2019	Upload Survey Report *:	<input type="button" value="Choose File"/>
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## Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select Year"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

## Multiple Documents Upload

File Name

Action

## Surveyor Job Remarks

Remarks

Email: [sm@idac.com.sg](mailto:sm@idac.com.sg)

Tel no: 6555 6888 Fax no: 6454 3279

**Personal Particulars of Owner & Driver (Vehicle A)**

Date of Accident: 08/05/2019 (dd/mm/yy) Time of Accident: 07:44 (24-HR-FORMAT)  
Vehicle No.: SGN 3721 B Vehicle Make & Model: KIA CARENS 1.7 DCT DIESEL 5DR FWD  
Exact location of Accident: SLE TOWARDS CITY BEFORE MANDAI EXIT LP382  
Policyholder's Name / IC No.: Yoon Kheow Ching S7400075D  
Driver's Name / IC No.: Yoon Kheow Ching S7400075D (As Above) ☒  
Driver's Contact No.: 8818 2551 Company Contact No.: \_\_\_\_\_  
Driver's Address: BLK 571B WOODLANDS AVE 1 #11-906 (S)732571  
Insurance Company: AIG Email address (if any): finalquest@gmail.com

Relationship between Owner & Driver: Owner

or Others specify: \_\_\_\_\_

**What do you wish to claim? (Please TICK one only)**

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle  
Was being used at time of accident?

Occupation (nature of job) ☒ Indoor/ ☐ Outdoor

☒ Private use / ☐ Work purpose

No. of Passengers (Including Driver): 02

Passenger Name : \_\_\_\_\_  
Passenger Name : \_\_\_\_\_

Gender : \_\_\_\_\_  
Gender : \_\_\_\_\_

Weather condition & Road conditions? (On the day of accident)

☐ Clear & Dry / ☐ Raining & Wet / ☒ After-Rain & Wet / ☐ Drizzling & Wet / Others: \_\_\_\_\_

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: \_\_\_\_\_

Injuries Sustain: \_\_\_\_\_ Injured Person in Which Vehicle: \_\_\_\_\_

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: \_\_\_\_\_

**The Other Party(s) Details:**

1. Driver's Name / IC No: \_\_\_\_\_ Vehicle No: SHD 7276 J

Driver's Contact No: \_\_\_\_\_ Insurance Company (If any): \_\_\_\_\_

2. Driver's Name / IC No: \_\_\_\_\_ Vehicle No: \_\_\_\_\_

Driver's Contact No: \_\_\_\_\_ Insurance Company (If any): \_\_\_\_\_

\*Independent Witness (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_

Preferred Workshop Name: \_\_\_\_\_ Contact No: \_\_\_\_\_

\*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

Email: [sm@idac.com.sg](mailto:sm@idac.com.sg)

Tel no: 6555 6888 Fax no: 6454 3279

**Personal Particulars of Owner & Driver (Vehicle A)**

Date of Accident: 07/05/2019 (dd/mm/yy) Time of Accident: 07:44 (24-HR-FORMAT)  
Vehicle No: SGN 3721 B Vehicle Make & Model: KIA CARENS 1.7 DCT DIESEL 5DR FWD  
Exact location of Accident: SLE TOWARDS CITY BEFORE MANDAI EXIT LP382  
Policyholder's Name / IC No.: Yoon Kheow Ching S7400075D  
Driver's Name / IC No.: Yoon Kheow Ching S7400075D (As Above) ☒  
Driver's Contact No.: 8818 2551 Company Contact No.: \_\_\_\_\_  
Driver's Address: BLK 571B WOODLANDS AVE 1 #11-906 (S)732571  
Insurance Company: AIG Email address (if any): finalquest@gmail.com

**Relationship between Owner & Driver:** Owner or Others specify: \_\_\_\_\_

**What do you wish to claim? (Please TICK one only)**

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

**Exact purpose for which the vehicle  
Was being used at time of accident?**

**Occupation (nature of job)** ☒ Indoor / ☐ Outdoor

☒ Private use / ☐ Work purpose

**No. of Passengers (Including Driver):** 02

**Passenger Name :** \_\_\_\_\_  
**Passenger Name :** \_\_\_\_\_

**Gender :** \_\_\_\_\_  
**Gender :** \_\_\_\_\_

**Weather condition & Road conditions? (On the day of accident)**

☐ Clear & Dry / ☐ Raining & Wet / ☒ After-Rain & Wet / ☐ Drizzling & Wet / Others: \_\_\_\_\_

**Was there any video captured by your Car Camera?** ☐ Yes / ☒ No

**Any Injuries:** ☐ Yes / ☒ No (If YES) Injured Person's Name: \_\_\_\_\_

Injuries Sustain: \_\_\_\_\_ Injured Person in Which Vehicle: \_\_\_\_\_

**Police Report filed:** ☐ Yes / ☒ No (If YES) Which Police Station: \_\_\_\_\_

**The Other Party(s) Details:**

1. Driver's Name / IC No: \_\_\_\_\_ Vehicle No: SHD 7276 J

Driver's Contact No: \_\_\_\_\_ Insurance Company (If any): \_\_\_\_\_

2. Driver's Name / IC No: \_\_\_\_\_ Vehicle No: \_\_\_\_\_

Driver's Contact No: \_\_\_\_\_ Insurance Company (If any): \_\_\_\_\_

\*Independent Witness (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_

Preferred Workshop Name: \_\_\_\_\_ Contact No: \_\_\_\_\_

\*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

## 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.

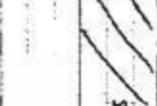
Policyholder's Signature  
Date & Time:

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

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

SLE TOWARDS CITY BEFORE MANDAL EXIT  
LP 382

VEHICLE 'A' SGN 3721 B  
VEHICLE 'B' SHD 7276 J



ON THE STATED DATE AND TIME, I VEHICLE 'A' WAS TRAVELLING ON  
VEHICLE IN FRONT OF ME STOPPED, I FOLLOWED SUIT.  
MY RIGHTFUL LANE. A SUDDENLY I FELT AN IMPACT ON MY REAR  
PORTION. I REALIZED VEHICLE 'B' COLLIDED INTO MY STATIONARY  
VEHICLE REAR PORTION.

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

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:	0075D
Vehicle Details	
Vehicle No.:	SGN3721B
Vehicle to be Exported:	No
Intended Deregistration Date:	14 May 2019
Vehicle Make:	KIA
Vehicle Model:	CARENS 1.7 DCT DIESEL 5DR FWD
Primary Colour:	Brown
Manufacturing Year:	2018
Engine No.:	D4FDJH553936
Chassis No.:	KNAHU815VJ7211064
Maximum Power Output:	104.0 kW (139 bhp)
Open Market Value:	\$22,393.00
Original Registration Date:	31 Jul 2018
First Registration Date:	31 Jul 2018
Transfer Count:	0
Actual ARF Paid:	\$23,351.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Jul 2028
PARF Rebate Amount:	\$17,513.00
Intended COE Rebate Details	
COE Expiry Date:	30 Jul 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$31,000.00
COE Rebate Amount:	\$28,550.00
<b>Total Rebate Amount:</b>	<b>\$46,063.00</b>

The information contained herein is correct as at 14 May 2019

OK

## ▶ carens Used Vehicle List (5 vehicles)

Car Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Company	Availability
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<b>Kia Carens Diesel 1.7A SX</b> (Diesel - Euro 5 Engine and Above)	<b>\$83,000</b>	\$9,870 /yr	23-Sep-2016	1,685 cc	53,000 km		Available
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Serviced At C&C With Proof And Valid 10 Years Warranty, Buy With Peace Of Mind! Amazing Low Mileage Done 53000km. Totally Like New. 1 Owner. New Paintwork. New Car Number. 100% Accident-Free. Call Now...

Office No. - -

JT - 97314802

<b>Kia Carens Diesel 1.7A</b> (Diesel - Euro 5 Engine and Above)	<b>\$78,000</b>	\$9,380 /yr	16-Sep-2016	1,685 cc	-		Available
--	-----------------	-------------	-------------	----------	---	--	-----------

Very Reliable And Fuel Efficient For A Powerful MPV! Great Exterior/Interior. Well Maintained!

Office No. - -

Fabian - 81130873

<b>Kia Carens 2.0A GDI</b>	<b>\$75,000</b>	\$9,360 /yr	22-Mar-2016	1,999 cc	77,200 km		Available
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7 Seater! Maintained By C&C With Servicing Receipts, Vehicle Still Under Warranty By C&C 5 Years And Unlimited Mileage From Date Of Purchase, Engine 10 Years Warranty Well Kept, Viewing By Appointment...

Office No. - -

Kishin - 93861174

<b>Kia Carens 2.0A (COE till 04/2024)</b>	<b>\$34,800</b>	\$7,000 /yr	19-Aug-2009	1,998 cc	103,188 km	Car House Pte Ltd	Available
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Ideal Family Mpv With Spacious Seatings & Large Boot Storage. Easy Handling, Ride Comfort & Stability For Long Distance Travel. Ex Owner A Businessman Had Taken Good Care Of This Baby In Top Condition...

Office No. - 64666220

Frankie Chen - 97281121 | Shah - 97308666 | Darren Yeo - 86088466 | Nanda - 84374929

<b>Kia Carens 2.0A (COE till 09/2023)</b>	<b>\$28,800</b>	\$6,620 /yr	17-Sep-2008	1,998 cc	180,000 km	Car Search	Available
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Economical 7-Seater MPV. Easy To Maintain. Well Maintained By Previous Owner. Trade In Welcome. Flexible Loan Packages With Low Interest Rate. View To Believe. Consignment Unit. Call Us Now!

Office No. - 62620728

Justin - 91827511 | Rachel - 91126538 | Jack - 91416611 | Ken - 93388994

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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

**PRE-REPAIR INSPECTION REPORT**

MS FIRST CAPITAL INSURANCE LTD  
36 ROBINSON ROAD  
#16-01 CITY HOUSES SINGAPORE 068877

Ref: CS3/FCI19008430/Gcd3s2

Date: 11-06-2019



Code: FCI2

**1. Policy Particulars :- (THIRD PARTY CLAIM)**

Insured Veh.	SHD 7276J	Veh. Inspected	SGN 3721B
Policy No.	D-19092580MFSH	Coverage (\$)	0.00
Claim No.	D19003050MFSH	Excess (\$)	0.00
Assign From	KAREN TAN	Assign Date	13/05/2019


**2. Vehicle Particulars & Condition**

Make & Model	KIA CARENS 1.7	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	KNAHU815VJ7211064	Colour	BROWN
Odometer	23035 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	225/45R17	HANKOOK	5 mm
L/H Front Tyre	225/45R17	HANKOOK	5 mm
R/H Rear Tyre	225/45R17	HANKOOK	5 mm
L/H Rear Tyre	225/45R17	HANKOOK	5 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. THE UNDERCARRIAGE AFFECTED DUE TO COLLISION.	
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**5. General Information**

Accident Date	08/05/2019	Inspect Date / Time	13/05/2019 ( 05:45 PM )
Survey held at	160 SIN MING DRIVE #01-14		
Repairer	TEAM AUTOPRO PTE LTD		

**5a. Remarks**

<p>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) MARKET VALUE: \$97,000.00</p>
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Report Ref No. CS3/FCI19008430/Gcd3s2

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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