	Special Instruction: ENT (Office)
From (Person): Genald Poh of Lpc	Date/Time: 21-5-2019 8-439 n
Estimated Cost:	Bill to:
ODE TP / WS / TP RES / OD RES / EVA / INV / MV / Co Inspect Vehicle No: SDN 388 / A	Ingurad
t Workshop m/s Muclern Automotive	Tel: 67484472
1 BIK 3023A Ubi Road 1 # 01-61	190
Policy No: 219 VP050 >1994	Claim No: 19/19/19/19/05/03/805
Sum Insured;	Excess: \$1500.00
Make of Veh:	D.O.A. 14-5-2019
CA REV REP. / REV 24 HRS Date/Time: H-5-19 9-149-m Person Contacted:	Miss Chin Vehicle IN JOUT
Date/Time Action/Instruction () Estimate	2
SDN 988/A -<	****
22/5@13:32 revert via me	nmen, lump sum \$18,5007- (11)
22/5@14/14 mandate approve in	1 Beng Ele
22 5@2 45pm- email inform	chin authorise repair Lump sum
Limit 195007- excess	

Minur

ASS, REC. BY:

ASSI	GNM	ENT
T P(') (') T T	CAT 4 TAY	THE REAL PROPERTY.

From: Date: 31.5.2019	E
From: Date: 31.5. KI	Veh No: SDX8881A- Yr Regn: 2011 , Jan.
Estimated Cost:	Type: M.Cac/ M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: SDIV 3881 A	Make: Menedes Benz Floo Cabroletic 1796.
at Workshop m/s Modern Automotive	Colour While A/C: Insured / Std / NI / NA
of BIK 3023A Ub. Roud 1 # 01-61	Sp.Reading 7690 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: WDD 2074482F087065.
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess: \$1500.00	O Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 245/45R17- Continent.
(Policy Condition)	R: 245/45R17, Mic
Remark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 86 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 26 mm L/Bal. 46 mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 21/05/19.
Lum Sum: % 3 Val.: Yes or No	Survey held at Modern
Luni outil.	Survey field at
CA / REV REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
() :	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV REP. / 24 HRS Vehicle: IN	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or / OUT The U/C / Chassis frame / Body Structure affected due to collision.
CA / REV REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Date / Time Action / Instruction Date / Time Action / Instruction UM!	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or / OUT The U/C / Chassis frame / Body Structure affected due to collision.
Date: Person Contacted: Date / Time Action / Instruction Date / Time Date / Time Date / Time / Time Date / Time Date / Time Date / Time / Time	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955 - 20 139°1°)
Date: Person Contacted: Date / Time Action / Instruction DD Acon Pac	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or / OUT The U/C / Chassis frame / Body Structure affected due to collision.
Date: Person Contacted: Date / Time Action / Instruction Date / Time Date / Time Date / Time / Time Date / Time Date / Time Date / Time / Time	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955 - 20 139°1°)
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Date: Person Contacted: Date / Time Action / Instruction	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955 - 20 139%) RECEIVED 0 3 SEP 2019
Date: Person Contacted: Date / Time Action / Instruction Date / Time Action / Instruction Contacted: Contacted:	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955 - 20 139%)
Date: Person Contacted: Date / Time Action / Instruction Date /	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955 - 20 139%) RECEIVED 0 3 SEP 2019
Date: Person Contacted: Date / Time Action / Instruction Date /	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955 - 20 !39°6) RECEIVED 0 3 SEP 2019 Days Of Repair: 18 Resurvey No. of Trip: Survey Fee: 350
Date: Person Contacted: Date / Time Action / Instruction Date /	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13600 (Red: 11955 - 20 139° (*)) RECEIVED 0 3 SEP 2019 Days Of Repair: 18 Resurvey No. of Trip: Survey Fee: 35°
Date: Person Contacted: Date / Time Action / Instruction Date /	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955 -20 !39%) RECEIVED 0 3 SEP 2019 Days Of Repair: 8 Resurvey No. of Trip: Survey Fee: 350 Transportation:
Date: Person Contacted: Date / Time Action / Instruction Date /	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 \ (\text{VEB 0 3 SEP 2019}) RECEIVED 0 3 SEP 2019 Days Of Repair: 8
Date: Person Contacted: Date / Time Action / Instruction Date /	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. P Sum \$13500 (Red: 11955.20 !39°/°) RECEIVED 0 3 SEP 2019 Days Of Repair: 8 Resurvey No. of Trip: Survey Fee: Transportation: Site Insp (\$

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	17 May 2019 Sendback Est	17 May 2019 17:13 \$\$28,376.20	21 May 2019 08:43 Assign				New Assignme Cancel Case	ent
	Main	Refere	nce	Claim Deta	ails	Documents	She	IIA wo
	JBFOLDER DETAI		SIONG. ID: S018	2244				
Insured: Vehicle Re	g. No.:	SDN888	PG6	************			14/05/2019 20:00 - :59 [99 Months and 18 Days From LTA Reg Date (Man Yr)]	
Claim Type	Claim Type:		OD / 19/19/19/VP05/021805		Policy/Cover Note No.:		Z19VP05021994 (Comprehensive	
					Encess.		.00	
Repairer:		4422 / 674	7 4422		A Ubi Road 1, #01-			
Handling I	nsurer:	Lonpac In	surance Bhd (HQ) - Tel: +65 625	07388 [Handled	by Gerald Poh	- 6250 7388 ext 24	10]
Adjuster:	TOTO MADE	LKK Auto	Consultants Pte L	.td (HQ) - Tel: 6	5256-3561 [Fina	at Kpt due 30	/05/2019]	
Driver/Cus	stodian:	The second secon	The second of th	ale), NRIC: S	2618231Z, Tel: +	6596245881 Em	dii;	
Adj Asg. R	temarks:	SURVEY &	REVERT					
ASSOCIA	TED MAIL RECEI	VED				View All	Compose Case	Mail
	no mail for this cas							
illere are	no man for this cas							
Е				View	All Search Tasi	1 -	New Task Co	mplete

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

To:

Lonpac Insurance Bhd 300 Beach Road #17-04/07 The Concourse

Singapore 199555

From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933

Attn:

Gerald Poh

Date: 22 May 2019

Preliminary Advice

Vehicle No

: SDN8881A

Accident Date

: 14/05/2019

Make

: MERCEDES-BENZ E200

Policy No.

: Z19VP05021994

Assignment Date

: 21/05/2019

Excess

: S\$1,500.00

Date of Inspection

Est. Duration of Repair

: 18.00

Inspection At

: 21/05/2019

: MODERN AUTOMOTIVE PTE LTD (HQ)

BLK 3023A UBI ROAD 1, #01-61 & #01-58

SINGAPORE 408717

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	28,376.20
Revised Amount	:S\$	17,575.90
Check Items (Estimated)	:S\$	6,039.80
Total	:S\$	23,615.70
Lump Sum Repair	:S\$	18,500.00

Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	63,000.00
COE / PARF Rebate	:S\$	44,211.00
Salvage Value	:S\$	
Margin for Repair	:S\$	18,789.00

Remarks

)	The vehicle is repairable at our a	djusted amount.	We have	also o	confirmed	excess a	nd policy	coverage.	Kindly
	let us have your authorisation.								

The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.

Other comments: (x)

Note: This document has not been finalised.

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

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From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park

Singapore 408933

Attn:

Gerald Poh

Date: 22 May 2019

Preliminary Advice

Vehicle No

: SDN8881A

Accident Date

: 14/05/2019

Make

: MERCEDES-BENZ E200

Policy No.

: Z19VP05021994

Assignment Date

: 21/05/2019

Excess

: \$\$1,500.00

Date of Inspection

Est. Duration of Repair

: 21/05/2019

: 18.00

Inspection At

: MODERN AUTOMOTIVE PTE LTD (HQ)

BLK 3023A UBI ROAD 1, #01-61 & #01-58

SINGAPORE 408717

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Revised Amount	:S\$	17,575.90
Check Items (Estimated)	:S\$	6,039.80
Total	:S\$	23,615.70

Lump Sum Repair

:SS

Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	62,000.00
COE / PARF Rebate	:S\$	44,211.00
Salvage Value	:S\$	
Margin for Repair	:S\$	17,789.00

Remarks

()	The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kind	ly
		let us have your authorisation.	

) The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.

Other comments: Pending repair cost from repairer

Denise Tay (LKKAuto)

From:

Denise Tay (LKKAuto)

Sent:

Wednesday, 22 May 2019 2:45 PM

To:

chin@modernautomotive.com.sg

Cc:

SUR

Subject:

SDN 8881A / OD / LONPAC

Dear Sir,

As instructed by our client, please proceed to repair the insured vehicle SDN 8881A (Excess \$1500/-). LIMIT REPAIR AT 18500/- \$LUMP SUM

If there are any check items or supplementary items please inform our office's Assignment Team at Tel: 6741 8434 to arrange our surveyor for inspection.

All supplementary items and unconfirm items are subjected to further approval from insurance company before completion of the repair.

*Our client reserve their right not to pay if there is no valid approval obtained before repair.

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>denisetay@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

View Received Message

This mail is associated with:

SDN8881A (19/19/19/VP05/021805)

OD

May 14 2019 8:00PM

[TOH KIM SIONG]

Modern Automotive Pte Ltd

eply	Reply All	Mark as Unread	Print Message	Delete Message	Forward		
om	Lonpac	Insurance Bhd ((HQ) (LONPAC_	HQ), sent on 22/	05/2019 14:14 PM	I.	
0	LKK_HQ			> CDN000	A. Claim Handles	Corald Dob	
ubject	Alert -	Adj Mandate App	proved (S\$1850	0.00) - SDN8881	A - Claim Handler	Geraid Fon	
Approved	1:18500.00	±5					

DOCUMENTS SUMMARY

There are no documents.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 wiful 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.
- Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GiV. 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 he etry consent to the erchiving of this report at the centre and to copies of the report being made available

ACCIDENT STATEMENT

Date Of Report

16/05/2019 10:07

Date Of Accident

14/05/2019 20:45

Exact Location Of Accident

BLK 185 EDGEFIELD PLAINS

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SEIN8881A

Insured/Policynolder

Name Of Registered Owner

TOH KIM SIONG

NRIC No.

S0180234H

Email Address

NOEMAIL

Mobile Phone No

(LOCAL) +65-96245881

Alternative Phone No

OFFICE-96245881

Vehicle Particulars

Manufacturer

MERCEDES-BENZ

Model

E200-1.8 CGI CABRIOLET (A)

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE USE

Are you claiming under your own insurance policy

for repair to your vehicle?

YES

If No. Please state action to be taken

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

LONPAC INSURANCE IBHD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

Z13VP05021994

Cover Note Number

Oriver

CHIA MOOI TUANG

NRIC No.

\$2318231Z

Date Of Birth

Name of Driver

16/02/1965

Occupation

INDOOR

Date Of Driving Pass

19/06/1996

Driving Experience

22 YEARS AND 10 MONTHS

Gender

FEMALE

Mobile Number

(LOCAL) +65-96245881

Fax Number

Contact Number

WAYKOINT@SINGNET.COM.SG

EMail Address

Address

BLK 185 EDGEFIELD FLAINS #12-296

Postcode

820185

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SFOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT BY FALLEN TREE / OTHER OBJECTS

Weather Conditions

CLEAR

Road Surface

DELY

Other Information

Was any foreign vehicle involved in this acc dent?

NO

Number of vehicles (including own vehicle)

involved in the accident

1

Was any body injured in the Accident?

NO.

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: NA

: MALE GENDER:

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Flease state which Police Station

Was notice of intended Prosecution given?

NC:

If Yes, against whom?

Circumstances of Accident

ON 14/5/19 AROUND 8.45PM, I WAS DRIVING AT BLK 185 EDGEFIELD PLAINS TOWARDS EXIT. HOWEVER, I REALISED IT WAS A ROAD END AND AS SUCH I REVERSED MY VEHICLE. UPON REVERSING, I ACCELERATE MY VEHICLE AND THUS HIT AGAINST THE BICYCLE PARKING STAND CAUSING BADLY DAMAGE TO MY VEHICLE REAR PORTION.

Attachment(s)

Are accident photos available for attachment?

YES.

Was there any video captured by Car Camera?

NC

Was there any audio recorded?

NC