Sarveyor		ASSIGN	MENT (Office)		
From (Person): Eldin	Chuona	of C1	1	1	Date/Time: 14.5.	19 10-02an
Estimpted Cost:			Bitt to:			
OD TP WS / TP RI To Inspect Vehicle No:	SGJ 8344	VA/ENV/MV	7 CS	Insured:	GBJ 80F G0217013	Τ
at Workshop m/z Ou	Bro's WO	nc hop		Tel:	90217013	
or 10 kaki Butt						
Policy No: DM CVSA	1341301800	U	Claim No:	SNM 195	1202299 (02	•
Sum Insured:			Excess			
Make of Veh: (Client's Record)				1	0.0.A. 213.201 46-19	9
CA / REV / REP. /	REV 24 HRS	unb.			H.O.D. Endographic	After 13.00 p.m
Date/Time 24.5.19		erson Contacte	d Mani	V	chicle_IN 1 OUT	
Date/Time Action/	Instruction (V	/) Estim	nte			
6187	\$157 - X					
IHGUS Adv	ian confi	imed LS	\$ 3200	(Red	1986-72	38%

(00/11/13)	1
ASS. REC. BY: Adran REF (71	
ASS. REC. BY: Adran	Veh No: SGISSYSI Yr Regn: 2006 July . Type: M.Carl M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or Make: Nissan Sylphy c.c 1498 Colour Grey Aic: Insured / Std / NI / NA Sp.Reading S4032 T/Radio: Insured / Std / NI / NA Eng/No: C/No: JA 1844 G 11 20 1005 09 Gen. Cond: Good / Fair / Poor / Burnt Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record) Make of Veh: ACHE r 12.00 P. P. (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: 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	Brake: Inorder / Jammed / Leaked / Burnt or Modi: Nil / S/Rim / STD A/Rim or Tyre Size: F: /95/65/25 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or FIRE 24. Front Rear R/Bal. Do mm L/Bal. Do mm L/Bal. Do mm D.O.A. D.O.L D / 66/79 Survey held at Our Box's Liza / Box / Substice Logs.
CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: Date / Time Action / Instruction TP China MV: 14K. RECEIVE PV: 9.6 IC N&H: 4.41K.	Des. of Damages: Frt / Rear / O/3 / N/S / U/C / Rooftop or Reas of S The U/C / Chassis frame / Body Structure affected due to collision. WE Frairy: 30/06/2/
	Days Of Repair: 7 Resurvey No. of Trip: Survey Fee:

1) Da 146- typist Report Format: merimen 3200 = Lump Sum / I.B.I: (\$

Add Fee:

: Site Insp (\$

Weekend (\$

S+RS SI Interview (\$ Photos Tech. Invs (\$ Others

220

TOTAL

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

Case	Notified	Est Submitted	Adj Assigned	7777						
Main	24 May 2019		24 May 2019	Adj Rpt	Adj Subn	itteit	Ins Authors	Status		
Main			10:02 Assign					New Assi	w Assignment Cancel Case	
	Main	Ref	erence	Class	n Details	70				
CLAIM SI	BFOLDER DET	421.0		II Clari	n Details		Documen	ts	Show All	
Insured:	OLDER DEL					-				
Main Claim	ant	FATTYB	OSS TRADING,	Co. Reg. No.:	533910010		[Crea	ted by insu	rer]	
		MAGHA	LINGAM S/O KA	TAN PITCHA	, ID: S0954	3736				
Vehicle Res	. No.:	SG383					21 (02)	Ordan an are		
			70303483		of Loss:		21/03/2019 19:00 - :59 [152 Months From LTA Reg D		:59	
Claim Type: TP / Sh			P / SNM19D202299C02 Falls				Count A	(Man Yr))		
Vehicle Reg	No. (Insured):				Palicy/Cover Note No.:		DMCVSN18413018000			
GBJ:		GB38051	GB3805T		Policy No. (Claimant):		(Comprehensive) GA360820/1			
Repairer: Our Bro's						180	GA3608	320/1		
Bukit - Tel			Workshop (s) 1: 66361338	Pte Ltd (HQ)	10 Kaki Bukit F	Road 2.4	03-37/39 Floor 5	and the		
tandling In:	lurer:	China Ta	pino Insuesas	(e)	_		00 2.730 First E	ast Centre,	17868 Kaki	
China Taiping Insurance Claimant's Insurer: AXA Insurance Pte Ltd (rance Pte Ltd ((Singapore)	Pte. Ltd. (HQ) - Tel: 6	389 6111 [H	andled by Fir	ine Channel	
djuster:		LKK Auto	Consultante pr	attackers -				HORIZON THE SAME	me cheang)	
	dian (Insured):	THAM JIE	Consultants Pti WEN, EUGENE (25	Male) No	et: 6256-3561	Fin	al Rpt due 04	/06/20191		
ldj Asg. Ren	narks:	kindly assi	gn Mr Adrian Ling 4029@yahoo.com	The second second	00334330	o cinali:		emuil		
SSOCIATI	D MAIL RECEI		7-140.001		for survey, the	ank you				
here are no	mail for this case	1					View All	Compose	Case Mail	
						_				
LL ASSOC	TATED TASKS									
Due Date	Priority Ty	pe Task Grou		100000	ew All Sea	rch Task	Create A	Pw Tesk	Access 1	
results.		THE STORY	F Subject	Handlet	Assigned By	Ene	npleted Dri	Created Or	Complete	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Switer Particulors		1 Type
Owner ID Type:	Singapore NRIC	
Owner ID:	4373B	
VehicleDetails		
Vehicle No.:	SGJ8348J	
Vehicle to be Exported:	Yes	
Intended Deregistration Date:	06 Jun 2019	
Vehicle Make:	NISSAN	
Vehicle Model:	5YLPHY 1.5 4AT	
Primary Colour:	Purple	
Manufacturing Year:	2006	
Engine No.:	HR15359749	
Chassis No.:	JN1BAAG11Z0100509	
Maximum Power Output:	80.0 kW (107 bhp)	
Open Market Value:	\$18,361.00	
Original Registration Date:	21 Jul 2006	
First Registration Date:	21 Jul 2006	
Transfer Count:	3	
Actual ARF Paid:	\$20,198.00	
Intention PARERobate Datable		
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:	*	
PARF Rebate Amount:	\$0.00	
Intenties (CO): Reporte Détails		
COE Expiry Date:	30 Jun 2021	
COE Category:	E - Open Category	
COE Period(Years):	5	
PQP Paid:	\$23,227.00	
COE Rebate Amount:	\$9,600.00	
Total Rebate Amount:	\$9,600.00	

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 06 Jun 2019

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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 withit 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.
- 5. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurence 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

	ACCIDENT STATEMENT
Date Of Report	30/03/2019 13:06
Date Of Accident	21/03/2019 19:50
Exact Location Of Accident	ALONG UPPER SERANGOON ROAD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGJ8348J
Insured/Policyholder	是四名(1915年) 2015年 - 第111年 1215年 12
Name Of Registered Owner	MAGHALINGAM S/O KATAN PITCHAY
NRIC No	S0954373B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93881044
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	NISSAN
Model	SYLPHY-1.5 (A)
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA360820/1
Cover Note Number	
Driver	
Name of Driver	HEMA DEVI NAIR D/O SRIKANTHAN
NRIC No	S9147423I
Date Of Birth	23/12/1991
Occupation	INDOOR
Date Of Driving Pass	16/10/2018
Driving Experience	0 YEAR AND 5 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-93881044
Fax Number	

HEMADEVI0104@GMAIL.COM

Address

BLK 210 BOON LAY PLACE #17-107

Postcode

640210

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - DAUGHTER-IN-LAW

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

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? I have been approached by unknown person(s) YES

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

5

Passenger 1

NAME:

: NITHIYA

GENDER:

: FEMALE

Passenger 2

NAME:

: KISHEN

GENDER:

: MALE

Passenger 3

NAME:

: DHARSHAM

GENDER:

: MALE

Passenger 4

NAME:

: TISHEN

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station Police Station Name

KEBUN BARU NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 111 ANG MO KIO AVENUE 4 , POSTCODE: 580111 .

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-4589999 - FAX NO: 64574454

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT (REPORT NO.: T/20190325/2221)

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

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

Mattie of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

GBJ805T

COMMERCIAL VEHICLE

THAM JIE WEN EUGENE

S8934398D

8518 4348

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

VEHICLE NO. SGT 8848-T ACCIDENT DATE: 1108 1819 8 19:500 m

- 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/faw firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- 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.

NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY, PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.

Policyholder's Signature Date & Timer

-3 - 7-1-

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

CHARN 1

Reporting Cen

CUSTO

GRAFT

Name: MRIC/FIN No.1

Sketch Plan #2 Pg. 1

SKETCH PLAN					
[V3]	>\(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	10000	2 G J 8 V S B 8 C B D	3	
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT				
Speed 11	nut was a	ormin s	goon r	y received	В
ECLARATION	3RD PARTY CLAIM (/)	REPORTING ON	CHARN'	OWN WORKSHOP	
olicyholder's Signeture ete & Time:	Driver's Signature (If driver is not the aplicy Date & Tirris:	holder)	Reporting Cent Name: NRIC/FIN No.:		

TP China Vosan i DBA-GII JNIBAAG 1120100509 bumper Distilla \$ 407 Reverse sensor and \$ 160 RR RH tail lamp (outer) could \$ 216 ~ RR RH tail lamp (inner) and Rented RR end panel RR 12-enforcement pane 1 Pris \$320 + RR RM Fender Build \$1172.72 RR RH air vert. could \$ 65 RR RH bumper bracket in \$ 48 spray 800 panel beat RR bumper crome New \$128 Reer Windscrein Moulding New 35 hist: 2818-72 Adm L To senore new windscreen 186 Labour: 1520 120 + sent: 405684 07 P 5186-72

Adjuster Report Page 1 of 3

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/CTI19009148/AVD3N2

Date: 21/06/2019

REFERENCE

Handling Insurer: China Taiping Insurance

(Singapore) Pte. Ltd.

Policy No:

DMCVSN18413018000

Claimant Vehicle No :

SGJ8348J

Insured Vehicle No :

GBJ805T

Date of Loss:

21/03/2019

Nature of Claim:

TP

Claim No:

SNM19D202299C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SGJ8348J

Make & Model:

NISSAN SYLPHY, 1.5 (A)

21/07/2006 (Man. Year: 2006)

Engine No: Chassis No: Odometer: HR15359749 JN1BAAG11Z0100509

154032 km

Reg. Date: Colour:

Grey

Engine Capacity: Market Value/New Car 1498 cc

Price:

N/A

Sum Insured (S\$):

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:

195/65R15 Firenza 6 r Rear Tyre Size:

195/65R15

Front Left Side: Front Right Side: Firenza 6 mm

Rear Left Side: Rear Right Side: Firenza 6 mm Firenza 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts	Repairer's 3,186.72	Adjuster's 2,536.85	Difference 649.87	Diff % 20.39
Miscellaneous Items	0.00	0.00	0.00	24.00
Labour Paintwork Labour	2,000.00	1,520.00	480.00	24.00
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	5,186.72	4,056.85	1,129.87	21.78
Approved Total (Overridden) (S\$)		3,200.00		
Nett Amount (S\$)	5,186.72	3,200.00	1,986.72	38.30

INSPECTION

Date of Assignment:

24/05/2019

Date Inspected:

04/06/2019 Inspected At:

Our Bro's Workshop (s) Pte Ltd (HQ) 10 Kaki Bukit Road 2,#03-37/38 First

East Centre Singapore 417868

Estimated Period of Repair:

7.0 days

Adjuster: ADRIAN LING

Manager: VERON CHEN

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: 21 Jun 2019)
Parts:	143	NISSAN SYLPHY 1.5 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted,	no print-code for SGJ8348J)
Validity:		es are valid only if they contain the print code (above) on all estimate pages, running page the END OF ESTIMATES marker on the last estimate page
Further Info:	Items/values no	ot in reference catalogue are prefixed with an asterisk *.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*RR BUMPER	Distorted	407.00 F	*407.00 FL
2	1		*REVERSE SENSOR	Damaged	160.00 F	*160.00 FL
3	1		*RR RH TAIL LAMP (OUTER)	Cracked	216.00 F	*216.00 FL
4	1		*RR RH TAIL LAMP (INNER)	Cracked	115.00 F	*115.00 FL
5	1		*RR END PANEL	Dented	470.00 F	*470.00 FL
Б	1		*RR RE-ENFORCEMENT PANEL	Repair	320.00 F	*- FL
7	1		*RR RH FENDER	Buckled	1,172.72 F	*1,172.72 FL
В	1		*RR RH AIR VENT	Cracked	65.00 F	*65.00 FL
9	1		*RR RH BUMPER BRACKET	Not Necessary	48.00 F	*-FL
10	1		*RR BUMPER CROME	Necessary	128.00 F	*128.00 FL
11	1		*REAR WINDSCREEN MOULDING	Necessary	85.00 F	*85.00 FL
F=Fn	inchise	part. L=ListIte	mDisc.	-		
				Sub Total (S\$)	3,186.72	2,818.72
			- List Item Discount on L		0.00	281.87
				Total Parts (S\$)	3,186.72	2,536.85

Adjuster Report Page 3 of 3

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	SPRAY	New	750.00	600.00
2	PANEL BEAT	New	1,100.00	800.00
3	TO RMEOVE REAR WINDSCREEN	New	150.00	120.00
		Gross Labour Cost (S\$)	2,000.00	1,520.00
	Report wa	es unsubmitted during this print-out.		

< END OF ESTIMATES >