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To Inspect V	STIP RES / OD RES / EVA / INV / MV / C chicle No: G& \$1866		nsured: WD	20682
at Workshop	Bukit Ave 6, 70, 28		Tet 6745	
	3 290775357MV			
		Claim No: 59	2101	10.00
Sum Insured:		Excess:		
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72				3.5.7019
CATREY	KEP. / REV 21 HRS Pup"		H.O.D. B	sdorieriicat:
Date/Time-	.5.19 2.43p.m Person Contacted:	sally	Vehicle (IN	
Date/Time	Action/instruction 1 showed (X)			
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RECEIVED 3 0 MAY 2019

Parentus .	11.00			-
PRS		ASSIGNMENT		
Final . *	Date 3.5 2019	GBC8186	E WHOM 1	173
Esting and Cour		Type MC-118 G, Sollin Conti	ory (Taxi) Prime Mov	er I
OD TP) WS / TP RES / CO RES	EVA/INV I MV	Track Finaller or 4		
To Inspect Vehicle 10 - GB(Make NISSAN	OJEV	2488
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Insured.	27. U. 70. U. 30. 397	Eng/Ni	0	
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		Brake (hope Lalammed Leaker	/ Burnt or	
(Climit's Fiscont) Make of Veli		Modi Nil PSIRim / STO A/Rim		
		Tyre Size F: /95		
Philas Country		100000		
(Policy Condition) Remark The vehicle remaining	105	OIS ESTON EXHOLATON ISTLEZA	FINIC/OHTSU/PIR/	0.0002
repair at the time of kes-		40YO YOKO		
		Front	Row	1
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THE DECEMBER OF THE PARTY OF TH	Consistent? Van tic Na	L/Bai 6	L/B/IL C	5
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Lum Sum.		Des. of Osmayes: Frt. / Rapt. / O/S	/ N/S / U/C / Roofts	n or
CA / REV / REP. / 24 HR	S TWP" Vehicle: IN	4/	2/5	Mac .
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Date / Time Action Instruct	100 , 3			
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3-41	۷.	RECSIVES 6 9 1 2	111	
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Date/Time, Fire Rathers (s)	mar Report	resulting the or trip.	Transportunion.	
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Report Formal PRS		1 1 1 1 1 (S	1 1965	r0
Lump Sum / LB.3: ()		department (\$,	

Dates

Nivitha (LKK Auto)

From:

Accounts (LKKAuto) <account@lkkauto.com>

Sent:

Monday, 27 May 2019 9:49 AM

To:

Admin-D (LKKAuto)

Cc:

assignments; Accounts (LKKAuto)

Subject:

Report Send Back Alerts - GBC8186E (TP)

Dear Nivitha / Summer,

FYNA Please...

Pending for Survey Report-CS3/MSG19007705/UCD3E2

20 27 May 2019 08:52 Ins Send Back Adj Rpt Paper adjustment

[1] Monica Chung Pei Zhen

21 27 May 2019 08:52 Adj Next Rpt Changed Next Rpt:Final Rpt.Due Date:2019/05/29

[1] Merimen Administrator

22 27 May 2019 08:52 Adj Mandate Set

Maintained.

[1] Merimen Administrator

Thank You

Best Regards,

SuthaShelia (Shelia) | Accounts Dept.

LKK Auto Consultants Pte Ltd

Phone: 6841 1891 | email: account@lkkauto.com | fax: 6844-8805

Bik 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Do-Not-Reply [mailto:do-not-reply@merimen.com]

Sent: Monday, 27 May 2019 9:00 AM

To: account@lkkauto.com

Subject: Report Send Back Alerts - GBC8186E (TP)

Dear Sir / Madam.

Please login to Merimen Online at www.merimen.com.sg for more information.

Thanks:

The Merimen Team



This email has been checked for viruses by AVG antivirus software. www.avg.com



Workshop: 1 Kaki Bukit Ave 6 (Unit B) #01-28 (Unit C) #01-51/53/55 Singapore 417883 Hp: 9755 2088 Tel: 6745 2088 Fax: 6841 2088 Website: www.bluwel.com.sg Email: bluwel2088@yahoo.com.sg

Co. Reg. No.: 200704951N GST Reg. No.: 200704951N

Vehicle No

: GBC 8186 E

Date

14-May-19

Make/Model : Nissan NV350 Urvan

Name

: M/S The Green Box

Address

: c/o No.1 Kaki Bukit Ave 6

#01-53/55 AutoBay@ Kaki Bukit

Singapore 417883

QTY	ITEM	ITEM		MT (S\$)
	Lump sum repair costs		\$	5,400.00
		GST 7 %	S	378.0
		Grand-total	S	5,778.00

Dollars: Five Thousand Seven Hundred And Seventy Eight Only



No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417583 Tel: 6748 6653 Fax: 67471017 Registration No: 200723252D

Invoice No 19006-05/AY

Billing Name & Address

Date

14 May 2019

M/S The Green Box c/o No.1 Kaki Bukit Ave 6 #01-53/55 AutoBay@ Kaki Bukit Singapore 417883

Vehicle No : GBC 8186 E

Model: Nissan NV350 Urvan

Item	Descriptions	Amount S\$
1	Date of inspection: 3 May 2019 A copy of the inspection / survey report Correspondence, postages and etc.	
2	Photography Services - Develop photographs - Storage of digital photographs - Submission of photographs 84 copies	
3	Transportation Charges	
4	2nd Inspection & Final Inspection To	stal\$ 644.00
	SDLS : SIX HUNDRED AND FORTY-FOUR ONLY	

Notes:

- All cheque payment should be "Crossed" and made payable to "Mc-Coy Appraiser Pte. Ltd."
- 2. All cheque should have our "Invoice No." written on the reverse side of the cheque
- 3. For further enquiries on this invoice, please feel free to contact us

Official Stamp

E & O. E

No. I Kaki Bukit Ave 6 #01-28 AutoBay @ Kuki Bukit Singapore 417933 Tel: 6743 6653 Fax: 67471017 Registration No: 200723252D

Report Reference : TP / 19006-05/AY / 2019

Date of Report

: 14 May 2019

M/S The Green Box c/o No.1 Kaki Bukit Ave 6 #01-53/55 AutoBay@ Kaki Bukit Singapore 417883

THIRD PARTY SURVEY ACCIDENT HAPPENED ON

29 Apr 2019

Workshop Address :

Bluwel Automotive Service Pte Ltd

No.1 Kakl Bukit Ave 6

#01-53/55 AutoBay@ Kaki Bukit

Singapore 417883

As per your instruction dated 3 May 2019 carried out a physical inspection on the said vehicle our report and findings as follows:

with regard to the above matter. We have GBC 8186 E . We enclosed herewith

1. VEHICLE PARTICULARS

Registration No : GBC 8186 E

Engine No :

YD25337502A

: Nissan NV350 Urvan

Mileage

203526

Year / Capacity : 2013/2488

Chassis No

: JN1MC2E26Z0001395

Colour

White

2. TYRES CONDITION

Emalor and Company		Size	Made	Balance		Rim
FRONT O/S	- 8	195 R15	Bridgestone	6.00	mm	Normal
REAR O/S	1	195 R15	Bridgestone	6.00	mm	Normal
FRONT N/S	1	195 R15	Bridgestone	6.00	mm	Normal
REAR N/S	-	195 R15	Bridgestone	6.00	mm	Normal



3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the front o/s portion(s). For more detail of the damages, please see photograph attached.

- 4. Estimated normal period of repair : 6 working days to complete.
- Enclosed number of photograph : 84 copies.
- In accordance to your instruction, we have <u>Not Authorised</u> repair to the vehicle and the survey was done on a <u>"Without Prejudice"</u> basis. We hope that this report will be of assistance to you in dealing with the matter.
- Should you discover any discrepancy in the report, please kindly notify us within 2 weeks, or the
 report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle No:

GBC 8186 E

Report No:

TP/ 19006-05/AY / 2019

		(4)	6		
SP	ARI	ΕP	Α	RT	s

Qty	Parts Description		Condition		rkshop's timation	0.000	r Revised timation
71	List Items Front grille Front bumper 197. 114. Front bumper o/s side bracket	70 scount	Damage (A Damage	5555	528.50 892.70 91.70 1512.90 453.87 1059.03	\$ \$ \$ \$ \$ \$	528.50 892.70 91.70 1512.90 453.87 1059.03
1 1 1 1 1 1 1 1	Nett Items Front o/s corner panel Front o/s headlamp Front grille logo Front o/s door step garnish Front bumper o/s fog lamp Front bumper o/s fog lamp cover Air con condenser Turbo cooler	65.50 alc	Damage 0.0 Damage 0.0 Necessary 11 Damage 0.0 Damage 10.1 Damage 11 Damage 11	***	437.10 412.60 42.80 142.60 311.80 107.80 1052.80 2121.60	****	437.10 412.60 42.80 × 142.60 311.80 107.80 1052.80 × 2121.60
	Dis	count	10.0%	5 5	4629.10 462.91 4166.19	\$	4629.10 462.91 4188.19

434.14

N-4006.2 107 3608:58 Vehicle No:

GBC 8186 E

Report No:

TP/ 19006-05/AY / 2019

LABOUR COST

S/No	Job Descriptions		orkshop's stimation	1122	Revised mation	
	Spare Parts Total c/f	\$	5225.22	\$	5225.22	
1	To remove and refit damage parts, test for proper functioning and focus of headlamps.	\$	50,00	\$	40.00 20	
2	To remove and replace air-con system, refill gas and test for leakages.	\$	200.00	\$ 17	120.00 📈	
3	To remove and replace the above damaged parts, straighten, knock out, realign and repair including cut and wield body panels. To re-adjust to the original position using power tools.	\$	900.00	\$	660.00SV	
4	To spray paint on the replaced and repaired parts, prepare spray such as masking tape the unaffected areas with paper, cleaning and sanding of surfaces, final polishing and waxing are also available.	\$	900.00	\$	660.00	
5	To apply undercoating on the repaired and replaced panels for rust protection.	\$	100.00	Not Re	equired	
	Total	\$	7375.22	\$	6705.22	
	The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount		7634.76	-	1-211-72	
	to a Lump Sum Repair Contract of:	\$	5400.00			

SDLS: FIVE THOUSAND FOUR HUNDRED ONLY

1180

Qualified Appraiser

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

Fax Number Contact Number EMail Address

Gender

- 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.
- 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

	ACCIDENT STATEMENT
Date Of Report	30/04/2019 14:28
Date Of Accident	29/04/2019 11:30
Exact Location Of Accident	PASIR PANJANG WHOLESALE CENTRE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC8186E
Insured/Policyholder	
Name Of Registered Owner	M/S THE GREEN BOX
Co Reg No	53349872D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-82364635
Vehicle Particulars	
Manufacturer	NISSAN
Model	*
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No. Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3033951800
Cover Note Number	
Driver	
lame of Driver	DAVID ELIAS JASON
IRIC No	\$7247527E
Date Of Birth	12/12/1972
Occupation	OUTDOOR
ate Of Driving Pass	13/07/2009

9 YEARS AND 9 MONTHS

(LOCAL) +65-82364635

MALE

NOEMAIL

Address 219 LOYANG RISE

Postcode 507382

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 COLLIDED INTO PARKED VEHICLE

1

YES

Weather Conditions CLEAR Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle) 2 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) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera? NO

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number WD2068Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver TAN BOCK HOCK

NRIC/Passport Number

Contact Number 97314055

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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 withit 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
- Any false reporting may be referred to the Police for investigation.
- 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
- By the longment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of
- 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)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary
 - (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
- (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
- 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. EdS
- 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

150

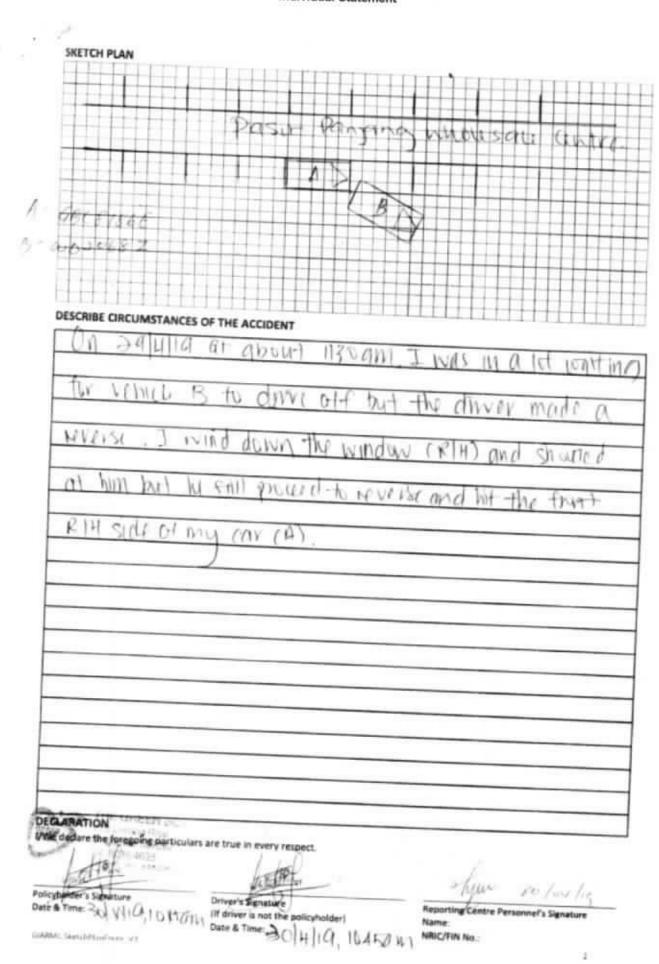
Date & Time:

Driver's Signature TUY SCHOOLE & Time: 30 | Y | 19 1041, 41

Reporting Centre Personnel's Signature

NAIC/FIN No.:

Individual Statement



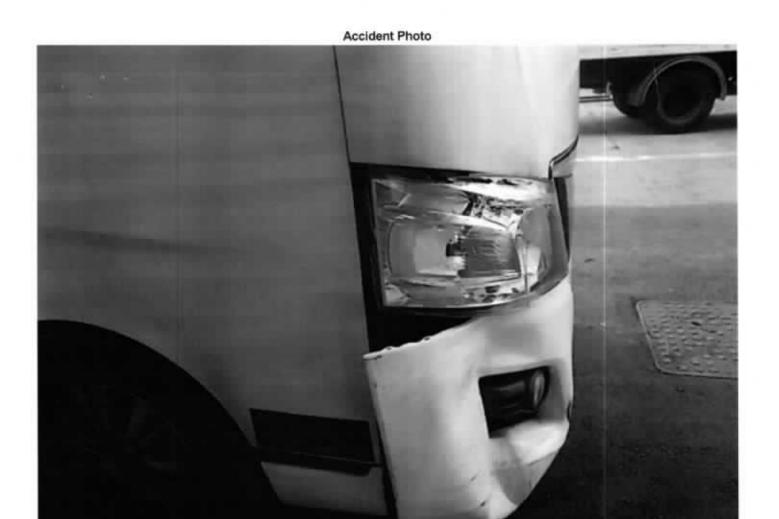
2

















Identification Card









SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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 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 30/04/2019 11:34
Date Of Accident 29/04/2019 11:30

Exact Location Of Accident BLK 26 PASIR PANJANG WHOLESALSE CENTRE #01-213

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number WD2068Z

Insured/Policyholder

Name Of Registered Owner PTKN VEG TRADING

Co Reg No 5232300J

Email Address PTKN88@SINGNET.COM.SG

Mobile Phone No. (LOCAL) +65-97314055

Alternative Phone No Office-97314055

Vehicle Particulars

Manufacturer TOYOTA Model FORKLIFT

Exact Purpose for which vehicle was being used at

time of accident

WORKING

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken REPORTING ONLY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company MSIG INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage THIRD PARTY

Fleet Policy NO

Policy Number B 29077585 TMV

Cover Note Number

Driver

Name of Driver TAN BOCK HOCK

 NRIC No
 \$1336979H

 Date Of Birth
 07/06/1958

 Occupation
 INDOOR

 Date Of Driving Pass
 05/12/2006

Driving Experience 12 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97314055

Fax Number

Contact Number OTHERS-97314055

EMail Address PTKN88@SINGNET.COM.SG

Address 17 TAMARIND ROAD

Postcode 806026

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

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

PLEASE REFER TO 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 **GBC8186E** Vehicle Make/Model/Colour NISSAN

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

4

- 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.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withheiding of material facts may allow insurance companies to regudiate policy liability.
- 4. This issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
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- 5 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. Coment 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 tramfer 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 enquiries by me:
 - [iv] administering my claims (including the mailing of correspondence, statements, involces, 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 (ii) above may be shared / disclosed
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing traud, 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

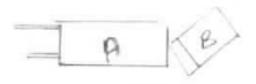
Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Pygunglet s Signature

NRIC/FIN NO



A) ND20612 F) GBC 9186F

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

20	18 29 4 19 I was doing work me neverte my	
6	which hit behind the sett velole no are 8181	
	at his right side head light	_
		_
		_
		1
		_
		_

UWe declare the foregoing particulars are true in every respect.

Policyholder's Signature Date & Time

Driver's Signature

(if driver is not the policyholder)

Date & Time



















Identification Card





E 1

TAN BOOK HOCK

Tat Hong Training Centre





Forkill Driver's Training Course Same Tan Back Hock Same Tan Back Hock

FOT CHEST

This is to certify that the person has assembledly completed that store mentioned course on \$ Discontinue 2000.

ON CONTROL OF THE PROPERTY OF

THE

Tot Hong Ersteing Services Pte Lot 19 Songe Eader Avenue Stagepore 120004 Tel 62003200 Face 6200600 Email: 8009060000000000 Merimen e-Claims

...CLAIM SUBFOLDER...(Pending for Survey Report)

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Case 1	lotified	Est Submitted	Ad) Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status	_	
Main 0	2 May 2019		02 May 2019 14:27 Edit Adj Rpt	5\$4,150.00 Edit Estimates	5\$4,150.00 View Rpt		Pending for Survey Report Cancel Case		
M	ain	R	eference	Claim De	tails	Documents		Show All	
CLAIM SUB	FOLDER DE	TAILS			[Created	by insurer]			
Insured:	PTKN VEG	TRADING, Co.	Reg. No.: 52323003						
Main Claimant:	THE GREE	N BOX							
Vehicle Reg. No.:	GBC818	6E		Date of		19 11:00 - :59 ns and 4 Days From	LTA Reg Date (Man Yr)]	
Claim Type:	TP / 592	101		Policy/C Note No		STMV (Third Party : 02/04/2019 - 01/			
Vehicle Reg. No. (Insured):	WD2068Z			Policy N (Claima	00				
				Excess					
Repairer:	Tel: 67452		e Pte Ltd (HQ) 1 Ka	ki Bukit Avenue 6,	#01-28/37/53/5	5/56 Autobay⊕Kak	Bukit, 417883	Kaki Bukit	
Handling Insurer:	MSIG Ins	urance (Singapo	re) Pte. Ltd. (HQ)	Tel: +65 6827 78	88 [Handled by	Monica Chung P	ei Zhen - 6594	2552]	
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 625	5-3561 [Handle	d by MARCUS CH	iua] [Final R	pt due 03/06/	2019]	
Driver/Custo dian (Insured):	TAN BOCK	HOCK () , NRIC	: 51336979H, Tel:	+6597314055 Em	ail:				
Ad) Asg. Remarks:	on WP. (M/	ANUAL ASSIGNED) SURVEY DISAGREE	ON SJE - ASSIGN	LKK. LIABILITY: 1	100% CONTACT:67	45 2088		
ASSOCIATE	D MAIL RE	CEIVED				Vie	w All Compo	se Case Ma	
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ALL ASSUC		Type Task	Group Subject	Handler A	Assigned By	Completed On	Created O	n Done	

Merimen e-Claims Page 1 of 3

Claim Documents

*GBC8186E (592101)
[WD2068Z]
TP
THE GREEN BOX
Apr 29 2019 11:00AM
[PTKN VEG TRADING]
Bluwel Automotive Service Pte Ltd

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11	27/05/19 08:50	REPAIR BILL, SURVEY BILL, SURVEY REPORT	0	Load PDF	

Merimen e-Claims Page 3 of 3

Assessment Reports			1 per page V		₩
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1	02/05/19 14:25	Email - Outsource	0	Load PDF	
No.	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnall	Print
1	30/05/19 12:44	Colour Photo	0	Load PDF	
2	30/05/19 12:45	PRS Invoice	0	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
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Show Remarks To: Handling Insurer Note: Remarks are private unless you show it to other parties.	

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

51 Ubi Ave 1 #01-25, Pava 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:

CS3/MSG19007705/UQD3E2-1

Date:

30/05/2019

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

B29077585TMV

Claimant Vehicle GBC8186E No:

Insured Vehicle No:

WD2068Z

Date of Loss:

29/04/2019

Nature of Claim:

TP

Claim No: 592101

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

GBC8186E

Make & Model:

NISSAN NV350, 2.5 5MT 5DR EURO V (A)

Engine No:

YD25337502A

Reg. Date: Colour:

25/11/2013 (Man. Year: 2013)

Chassis No: Odometer:

JN1MC2E26Z0001395 203526 km

Engine Capacity:

White

2488 cc

Market Value/New Car Price: N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Yes Engine Modification:

Pre-accident Condition:

Front Tyre Size:

195 R15

Rear Tyre Size:

195 R15

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

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	5,403.76	4,039.72	1,364.04	25.24
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,150.00	1,180.00	970.00	45.12
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	7,553.76	5,219.72	2,334.04	30.90
Approved Total (Overridden) (S\$)		4,150.00		
(S\$)	7,553.76	4,150.00	3,403.76	45.06
+ GST 7.00/7.00% (S\$)	528.76	290.50	238.26	45.06
Nett Amount (S\$)	8,082.52	4,440.50	3,642.02	45.06

INSPECTION

Date of Assignment:

02/05/2019

Date Inspected:

03/05/2019 Inspected At:

Bluwel Automotive Service Pte Ltd (HQ) 1 Kaki Bukit Avenue 6, #01-28/37/53/55/56

Autobay@Kaki Bukit Singapore 417883

Estimated Period of Repair:

4.0 days

Adjuster Report Page 2 of 4

Adjuster: MARCUS CHUA Manager: SHIAU CHAN

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.

Adjuster Report Page 3 of 4

REPAIR DETAILS

Referen	ce	
Part Source		(Last Synchronised: 30 May 2019)
Parts:	N/A	NISSAN NV350 2.5 5MT 5DR EURO V (A) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted	, no print-code for GBC8186E)
Validity:		tes 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	not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT GRILLE	Cracked	528.50 FL	*528.50 FL
2	1		*FRONT BUMPER O/S SIDE BRACKET	Cracked	91.70 FL	*91.70 FL
3	1		*FRONT BUMPER	Distorted	892.70 FN	*514.70 FN
4	1		*FRONT O/S CORNER PANEL	Dented	437.10 FN	*437.10 FN
5	1		*FRONT O/S HEADLAMP	Cracked	412.60 FN	*412.60 FN
6	1		*FRONT GRILLE LOGO	Not Necessary	42.80 FN	*-FN
7	1		*FRONT O/S DOOR STEP GARNISH	Cut	142.60 FN	*142.60 FN
8	1		*FRONT BUMPER O/S FOG LAMP	Cracked	311.80 FN	*311.80 FN
9	1		*FRONT BUMPER O/S FOG LAMP COVER	Torn	107.80 FN	*65.80 FN
10	1		*AIR CON CONDENSER (NOT NECESSARY)	Not Consistent With The Impact	1,052.80 FN	*-FN
11	1		*TURBO COOLER	Punctured	2,121.60 FN	*2,121.60 FN
F=Fra	inchise	part L=L	istItemDisc. N=NettItemDisc.		Different States	Contraction
				Sub Total (S\$)	6,142.00	4,626.40
			- List Item Discoun	it on L Items 30.00/30.00% (S\$)	186.06	186.06
			- Nett Item Discoun	t on N Items 10.00/10.00% (S\$)	552.18	400.62
				Total Parts (S\$)	5,403.76	4,039.72

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

Particulars	Lab.Type	Repairer's	Amount
our Items			
TO REMOVE AND REFIT DAMAGE PARTS, TEST FOR PROPER FUNCTIONING AND FOCUS OF HEADLAMPS	New	50.00	20.00
TO REMOVE AND REPLACE AIR-CON SYSTEM, REFILL GAS AND TEST FOR LEAKAGES	New	200.00	0.00
TO REMOVE AND REPLACE THE ABOVE DAMAGED PARTS, STRAIGHTEN, KNOCK OUT, REALIGN AND REPAIR INCLUDING CUT AND WIELD BODY PANELS. TO RE-ADJUST TO THE ORIGINAL POSITION USING POWER TOOLS	New	900.00	500.00
TO SPRAY PAINT ON THE REPLACED AND REPAIRED PARTS, PREPARE SPRAY SUCH AS MASKING TAPE THE UNAFFECTED AREAS WITH PAPER, CLEANING AND SANDING OF SURFACES, FINAL POLISHING AND WAXING ARE ALSO AVAILABLE	New	900.00	660.00
TO APPLY UNDERCOATING ON THE REPAIRED AND REPLACED PANELS FOR RUST PROTECTION	New	100.00	0.00
Gross Labour	r Cost (S\$)	2,150.00	1,180.00
	TO REMOVE AND REFIT DAMAGE PARTS, TEST FOR PROPER FUNCTIONING AND FOCUS OF HEADLAMPS TO REMOVE AND REPLACE AIR-CON SYSTEM, REFILL GAS AND TEST FOR LEAKAGES TO REMOVE AND REPLACE THE ABOVE DAMAGED PARTS, STRAIGHTEN, KNOCK OUT, REALIGN AND REPAIR INCLUDING CUT AND WIELD BODY PANELS. TO RE-ADJUST TO THE ORIGINAL POSITION USING POWER TOOLS TO SPRAY PAINT ON THE REPLACED AND REPAIRED PARTS, PREPARE SPRAY SUCH AS MASKING TAPE THE UNAFFECTED AREAS WITH PAPER, CLEANING AND SANDING OF SURFACES, FINAL POLISHING AND WAXING ARE ALSO AVAILABLE TO APPLY UNDERCOATING ON THE REPAIRED AND REPLACED PANELS FOR RUST PROTECTION	TO REMOVE AND REFIT DAMAGE PARTS, TEST FOR PROPER FUNCTIONING AND FOCUS OF HEADLAMPS TO REMOVE AND REPLACE AIR-CON SYSTEM, REFILL GAS New AND TEST FOR LEAKAGES TO REMOVE AND REPLACE THE ABOVE DAMAGED PARTS, New STRAIGHTEN, KNOCK OUT, REALIGN AND REPAIR INCLUDING CUT AND WIELD BODY PANELS. TO RE-ADJUST TO THE ORIGINAL POSITION USING POWER TOOLS TO SPRAY PAINT ON THE REPLACED AND REPAIRED New PARTS, PREPARE SPRAY SUCH AS MASKING TAPE THE UNAFFECTED AREAS WITH PAPER, CLEANING AND SANDING OF SURFACES, FINAL POLISHING AND WAXING ARE ALSO AVAILABLE TO APPLY UNDERCOATING ON THE REPAIRED AND New	TO REMOVE AND REFIT DAMAGE PARTS, TEST FOR New 50.00 PROPER FUNCTIONING AND FOCUS OF HEADLAMPS TO REMOVE AND REPLACE AIR-CON SYSTEM, REFILL GAS New 200.00 AND TEST FOR LEAKAGES TO REMOVE AND REPLACE THE ABOVE DAMAGED PARTS, STRAIGHTEN, KNOCK OUT, REALIGN AND REPAIR INCLUDING CUT AND WIELD BODY PANELS. TO RE-ADJUST TO THE ORIGINAL POSITION USING POWER TOOLS TO SPRAY PAINT ON THE REPLACED AND REPAIRED New 900.00 PARTS, PREPARE SPRAY SUCH AS MASKING TAPE THE UNAFFECTED AREAS WITH PAPER, CLEANING AND SANDING OF SURFACES, FINAL POLISHING AND WAXING ARE ALSO AVAILABLE TO APPLY UNDERCOATING ON THE REPAIRED AND New 100.00 REPLACED PANELS FOR RUST PROTECTION

< END OF ESTIMATES >