

ASS. REC. BY:

REF: CS/CT1/90/0257/ uf d3 n2 Special Instruction:

Special instruction:

Survivor: Marcus

ASSIGNMENT (Office)

From (Person): Elaine Chong

of Cu

Date/Time: 11.6.19 13:32p.m

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SLX 99014

Insured: GBH 42834

at Workshop m/s Skytech Auto

Tel: 96853843

of 2 Bkkt Bkkt No 2 # 01-02

Policy No: DMCYS41847521701

Claim No: SMM 19D 202530(02

Sum Insured:

Excellent

Make of Veh:

D.O.A 6-6-2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Enforcement

Date/Time: 11.6.19 2.30 p.m.

Person Contacted: Vincent

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SLX 99014-X
	GBH 42934-X

(08/11/13) wef

ASS. REC. BY: *Marcus*

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: *SLX9901Y*at Workshop m/s *stytech*

of

Insured: *GAR/ 4283H*

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____

Consistent? : Yes or No

GIA / PR Seen: _____

Consistent? : Yes or No

Est. Repairs: *3*

days

Res.: Yes or No

Lum Sum: *20*

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

HA52970

Vehicle: IN / OUT

Date: _____

Person Contacted: _____

Veh No: *SLX9901Y*Yr Regn: *5, 16*

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

Truck / Trailer or *(A)*Make: *Nissan X-trail**c.c 1997*Colour: *Grey*

A/C: Insured / Std / NI / NA

Sp. Reading: *67791*

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: *JN1JANT3220001956*Gen. Cond: *Good* / Fair / Poor / BurntSteering: *In order* / Jammed / Leaked / Burnt orBrake: *In order* / Jammed / Leaked / Burnt or

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

Tyre Size: F: *225/60R18*

R: _____

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

TOYO / YOKO or

Front: *6*Rear: *6*

R/Bal. _____

mm

R/Bal. _____

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. *6/6/19*D.O.I. *14/6/19*

Survey held at _____

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

O/S H.

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

Date / Time

Action / Instruction

17/6/19 4/5 @ 2800 costumed with vinton. (Red: 2834.10, 56%)

RECEIVED 17 JUN 2019

Date/Time, File Pass to?

1) *Alb Typist*

Date/Time, File Return to?

2) _____

☐

: Prel. Report

☒

: Final Report

Days Of Repair: *3*

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐

: Site Insp (\$ _____)

) \$ + RS \$ _____

☐

: Interview (\$ _____)

) Photos

☐

: Tech. Invs (\$ _____)

) Others

☐

: Weekend (\$ _____)

) _____

Report Format: *TP*Lump Sum / I.B.I. (\$ *2800*)

TOTAL

220

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Jun 2019		11 Jun 2019 13:32 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	----------

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:			
Main Claimant:	PANG KOON SOON, ID: S7461012I		
Vehicle Reg. No.:	SLX9901Y	Date of Loss:	06/06/2019 15:00 - :59
Claim Type:	TP / SNM19D202530C02	Policy/Cover Note No.:	DMCVSN1817521901
Vehicle Reg. No. (Insured):	GBH4283H	Policy No. (Claimant):	GA354558
		Excess:	S\$350.00
Repairer:	Skytech Auto Pte Ltd (HQ) 2 KAKI BUKIT AVE 2, #01-02, 417921 Kaki Bukit - Tel: 96858843		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Elaine Cheong]		
Claimant's Insurer:	AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 20/06/2019]		

ASSOCIATED MAIL RECEIVED

View All

Compose Case Mail

There are no mail for this case.



ALL ASSOCIATED TASKS

View All

Search Tasks

Create New Task

Complete

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 1012I

Vehicle Details

Vehicle No.: SLX9901Y
Vehicle to be Exported: No
Intended Deregistration Date: 14 Jun 2019
Vehicle Make: NISSAN
Vehicle Model: X-TRAIL 2.0 CVT ABS 4WD S/R 7-STR
Primary Colour: Grey
Manufacturing Year: 2016
Engine No.: MR20863069B
Chassis No.: JN1JANT32Z0001956
Maximum Power Output: 106.0 kW (142 bhp)
Open Market Value: \$22,509.00
Original Registration Date: 19 May 2016
First Registration Date: 19 May 2016
Transfer Count: 1
Actual ARF Paid: \$23,513.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 18 May 2026
PARF Rebate Amount: \$17,634.00

Intended COE Rebate Details

COE Expiry Date: 18 May 2026
COE Category: B - Car above 1600cc or 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$51,010.00
COE Rebate Amount: \$35,336.00
Total Rebate Amount: \$52,970.00

The information contained herein is correct as at 14 Jun 2019

OK

MSME19074309 / SME Motor Pte Ltd - Kallu Bukit
ENTRY DATE & TIME: 07/06/2019 15:18
SUBMITTED BY: Chia Pei Ying

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 07/06/2019 15:18
Date Of Accident 06/06/2019 15:40
Exact Location Of Accident ANG MO KIO IND PARK 2 BLK 5058
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLX9901Y
Insured/Policyholder
Name Of Registered Owner PANG KOON SOON
NRIC No S7461012I
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-91001276
Alternative Phone No OFFICE-91001276

Vehicle Particulars

Manufacturer NISSAN
Model X-TRAIL
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 GA354558
Cover Note Number

Driver

Name of Driver PANG KOON SOON
NRIC No S7461012I
Date Of Birth 06/12/1974
Occupation INDOOR
Date Of Driving Pass 24/02/1998
Driving Experience 21 YEARS AND 3 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-91001276
Fax Number
Contact Number OFFICE-91001276
Email Address NOEMAIL

Address BLK 503 TAMPINES CENTRAL 1 #09-293
 Postcode 520503
 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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
 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 2
 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) 0

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

ON 06/06/2019 AT 1540HRS, I WAS PARKING MY CAR (SLX9901Y) ALONG ANG MO KIO IND PARK 2 AND I WAS AT BLK 5058 COFFEESHOP. SUDDENLY, I HEARD A BANG SOUND SO I RAN OVER TO CHECK MY CAR HIT BY A LORRY (GBH4283H). MY CAR VIDEO ALSO CAPTURED THE INCIDENT HAPPENED.

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 GBH4283H
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver DURAIRAJ RAJA
 NRIC/Passport Number G8342910R
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLANIMPORTANT 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.:

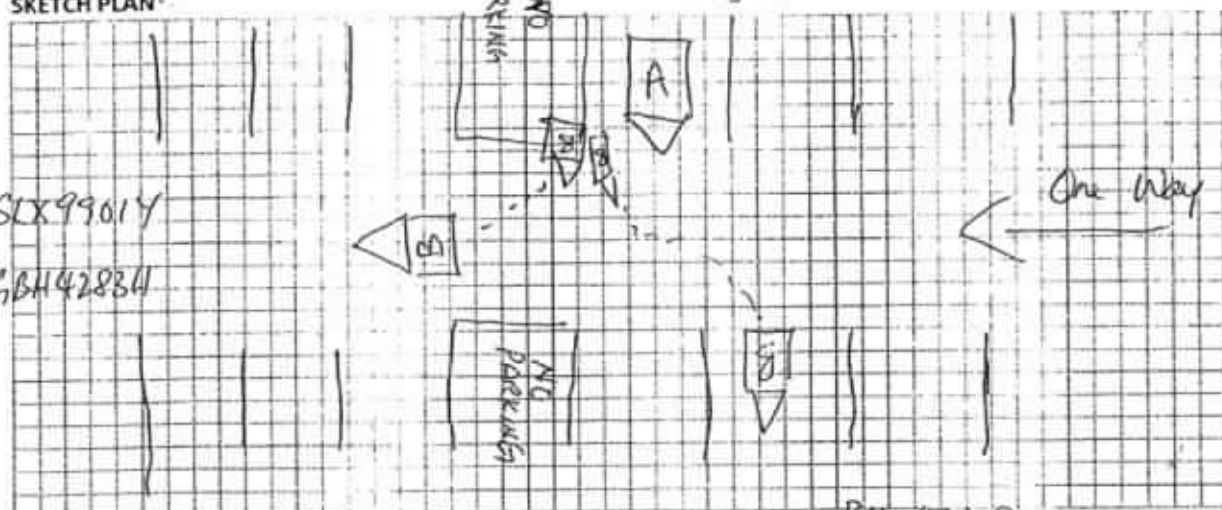
Sketch Plan #2 Pg. 1

SKETCH PLAN

Ang Mo Kio Ind Park 2

(A) SLX9901Y

(B) GBH4283H



BIK 5058

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 06/06/19 @ 1540, I was parking my car SLX9901Y along Ang Mo Kio Ind Park 2 and I was at BIK 5058 Coffee Shop, Suddenly I heard a bang sound so I run over to check my car hit by a lorry GBH4283H. My Car Video also capture the incident happen

DECLARATION

I/We 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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SLX9901Y

Make & Model:

NISSAN X-TRAIL

Chassis No:

JN1NT32Z0001956

[illegible]

Labour					
1	Panel Beating			\$ 600.00	300
2	Paintwork			\$ 700.00	400
3	Anti Rust Proofing			\$ 80.00	11x
4	Check Wiring			\$ 80.00	20
					5634-10

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Part(s) must be subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No work modification is allowed
- Supplemental work(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer:

Signature: _____

Date: _____

not added
 2/5 ~~\$2800~~
 3 Jy.
 14/6/19
 Wm, W. H. M. M.

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/CTI19010257/UTD3N2

Date: 21/06/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN1817521901	
Claimant Vehicle No :	SLX9901Y	Insured Vehicle No :	GBH4283H	
Date of Loss:	06/06/2019	Nature of Claim:	TP	Claim No: SNM19D202530C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLX9901Y	Engine No:	MR20863069B
Make & Model:	NISSAN X-TRAIL, 2.0 (A)	Chassis No:	JN1JANT32Z0001956
Reg. Date:	19/05/2016 (Man. Year: 2016)	Odometer:	67791 km
Colour:	Grey		
Engine Capacity:	1997 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):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	225/60R18	Rear Tyre Size:	225/60R18
Front Left Side:	Dunlop 6 mm	Rear Left Side:	Dunlop 6 mm
Front Right Side:	Dunlop 6 mm	Rear Right Side:	Dunlop 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	4,174.10	2,811.03	1,363.07	32.66
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,460.00	720.00	740.00	50.68
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	5,634.10	3,531.03	2,103.07	37.33
Approved Total (Overridden) (S\$)		2,800.00		
Nett Amount (S\$)	5,634.10	2,800.00	2,834.10	50.30

INSPECTION

Date of Assignment:	11/06/2019	
Date Inspected:	14/06/2019	Inspected At: Skytech Auto Pte Ltd (HQ) 2 KAKI BUKIT AVE 2, #01-02 Singapore 417921
Estimated Period of Repair:	3.0 days	

Adjuster: MARCUS CHUA

Manager: DENISE TAY KWEE CHENG

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

Reference		
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 21 Jun 2019)
Parts:	M1-MPV	NISSAN X-TRAIL 2.0 (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLX9901Y)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with 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 HEADLAMP (RIGHT)	Scratched	2,353.00 F	*2,352.00 FN
2	1	*FRONT BUMPER	Deep Cut	534.70 F	*534.70 FN
3	1	*FRONT BUMPER RETAINER (RIGHT)	Not Necessary	28.00 F	*- FN
4	1	*FRONT BUMPER FOG LAMP (RIGHT)	Not Necessary	320.00 F	*- FN
5	1	*FRONT BUMPER FOG LAMP GARNISH (RIGHT)	Not Necessary	115.00 F	*- FN
6	1	*FRONT FENDER (RIGHT)	Repair	583.40 F	*- FN
7	1	*FRONT FENDER SIDE GARNISH (RIGHT)	Scratched	180.00 F	*170.00 FN
8	1	*FRONT BUMPER CHIPS	Necessary	30.00 FS	*30.00 FS
9	1	*FRONT FENDER INNER SHIELD CLIPS (RIGHT)	Necessary	30.00 FS	*30.00 FS
				Sub Total (S\$)	4,174.10 3,116.70
				- Nett Item Discount on N Items 0.00/10.00% (S\$)	0.00 305.67
				Total Parts (S\$)	4,174.10 2,811.03

F=Franchise part. S=SpcNett. N=NettItemDisc.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	600.00	300.00
2	PAINTWORK	New	700.00	400.00
3	ANTI RUST PROOFING	New	80.00	0.00
4	CHECK WIRING	New	80.00	20.00
Gross Labour Cost (S\$)			1,460.00	720.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >