

ASS. REC. BY: Rasul

REF: CS 3/MSG190105921 R1cd34

Special Instruction:

Surveyor:

## ASSIGNMENT (Office)

From (Person): Monica Chung Bei Zhen of MSG

Date/Time: 14.6.19 16:35 p.m.

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SJM 1998C

Insured: FBP 1398M

at Workshop m/s Kok Wang Car

Tel: 91839633

of NO 1 Soon Lee Street #06-40

Policy No: MSD/VMS/19-998681

Claim No: MSC/V/19-000680

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 12.6.2019

CA / REV / REP. / REV 24 HRS

Date/Time: 14.6.19 4:45 p.m.

Person Contacted: Mr Kok

H.O.D. Endorsement:

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	SJM 1998C - NS/INC 13019786/YUM34 D.O.A - 18/10/2013
	FBP 1398M - <
	Dismantle: 2/7/2019
	After repair: 3/7/2019

(08/11/13)

ASS. REC. BY: *James*

REF MSG

44006

Car 44006: 2028/19

## ASSIGNMENT

From:

Date:

1-7-2019

Estimated Cost:

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

To Inspect Vehicle No:

SJM 1998C

at Workshop m/s

Kok Wang Car

of 1 Soon Lee Street Flab-46 Pioneer

Insured:

Policy No.

Claims No.

Sum Insured:

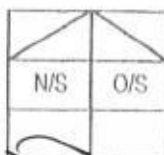
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.:

Yes or No

Lump Sum:

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

sup

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SJM 1998C

Yr Regn:

2008 / 19

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

Truck / Trailer or

Make:

HONDA FREED 1.5 A

c.c

1496

Colour:

GREY

A/C:

Insured / Std / NI / NA

Sp. Reading

180712

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

GB31028307

Gen. Cond: Good (Fair) / Poor / Burnt

Steering: (order) / Jammed / Leaked / Burnt or

Brake: (order) / Jammed / Leaked / Burnt or

Modi: Nil / (Rim) / STD A/Rim or

Tyre Size:

F:

205/50R16

R:

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

TOYO / YOKO or

FALKEN

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

12/06/19

D.O.A.

01/07/19

Survey held at

Kok Wang

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

Rear N/S

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

Date / Time

Action / Instruction

Ramp + Days - 4K - 5K / 58 days

mont

9/7/2019

Date/Time, File Pass to?



Preli. Report

1)



Final Report

Date/Time, File Return to?

2)

Days Of Repair:

5

Resurvey No. of Trip:

2

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

120

Transportation:

3 + RS, SI

Photos

Others

TOTAL

131

Report Format:

PR

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

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	13 Jun 2019		14 Jun 2019 16:35 Assign				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All
<b>CLAIM SUBFOLDER DETAILS</b>			<b>[Created by insurer]</b>	
Insured:	<b>AZRIN BIN HAMDAN, ID: S9505785C</b>			
Main Claimant:	<b>TING CHIAP SOON, ID: S7144400G</b>			
Vehicle Reg. No.:	<b>SJM1998C</b>	Date of Loss:	12/06/2019 00:00 - :59 [126 Months and 10 Days From LTA Reg Date (Man Yr)]	
Claim Type:	<b>TP</b>	Policy/Cover Note No.:	MSD/VMS/19-998681 (TP, Fire & Theft) Coverage: 11/02/2019 - 10/02/2020	
Vehicle Reg. No. (Insured):	<b>FBP1398M</b>	Policy No. (Claimant):		
		Excess:		
Repairer:	<b>Kok Wang Car Grooming - Pioneer (HQ) No. 1 Soon Lee Street, #06-40 Pioneer Centre, 627603 Pioneer - Tel: 91839633</b>			
Handling Insurer:	<b>MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Monica Chung Pei Zhen - 6594 2552]</b>			
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 15/06/2019]</b>			
Adj Asg. Remarks:	on WP. Liab: dispute (OI NR) TP lawyer disagree on SJE - Assign LKK. Contact: Mr. Kok @ 9183 9633			
<b>ASSOCIATED MAIL RECEIVED</b>			<a href="#">View All</a>	<a href="#">Compose Case Mail</a>
There are no mail for this case.				
<div> <div> <div></div> <div>ALL ASSOCIATED TASKS</div> </div> <div> <div>View All</div> <div>Search Tasks</div> <div>Create New Task</div> <div>Complete</div> </div> <div> <div>Due Date</div> <div>Priority</div> <div>Type</div> <div>Task Group</div> <div>Subject</div> <div>Handler</div> <div>Assigned By</div> <div>Completed On</div> <div>Created On</div> <div>Done?</div> </div> </div>				
No results.				

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	4400G
<b>Vehicle Details</b>	
Vehicle No.:	SJM1998C
Vehicle to be Exported:	No
Intended Deregistration Date:	08 Jul 2019
Vehicle Make:	HONDA
Vehicle Model:	FREED 1.5G A
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	L15A2328649
Chassis No.:	GB31028307
Maximum Power Output:	87.0 kW (116 bhp)
Open Market Value:	\$18,906.00
Original Registration Date:	02 Dec 2008
First Registration Date:	02 Dec 2008
Transfer Count:	5
Actual ARF Paid:	\$18,906.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	01 Dec 2028
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$27,571.00
COE Rebate Amount:	\$25,908.00
<b>Total Rebate Amount:</b>	<b>\$25,908.00</b>

The information contained herein is correct as at 08 Jul 2019

OK

MS1319077145 / STA INSPECTION PTE LTD - Boon Lay  
ENTRY DATE & TIME: 13/06/2019 14:22  
SUBMITTED BY: Woodford Richard Vincent

## 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 13/06/2019 14:22  
Date Of Accident 12/06/2019 19:30  
Exact Location Of Accident ALONG BEACH ROAD BESIDE HAWKER CENTRE  
Country/State of Loss SINGAPORE

**DETAILS OF OWN VEHICLE**

Vehicle Registration Number SJM1998C  
**Insured/Policyholder**  
Name Of Registered Owner TING CHIAP SOON  
NRIC No S7144400G  
Email Address NOEMAIL  
Mobile Phone No (LOCAL) +65-91812965  
Alternative Phone No OFFICE-91812965  
**Vehicle Particulars**  
Manufacturer HONDA  
Model FREED  
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? NO  
If No, Please state action to be taken THIRD PARTY  
Vehicle Category PRIVATE HIRE  
**Insurance Company**  
Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number 5105898641  
Cover Note Number  
**Driver**  
Name of Driver TING CHIAP SOON  
NRIC No S7144400G  
Date Of Birth 12/12/1971  
Occupation OUTDOOR  
Date Of Driving Pass 06/03/2008  
Driving Experience 11 YEARS AND 3 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-91812965  
Fax Number  
Contact Number OFFICE-91812965  
Email Address NOEMAIL

Address BLK 210C COMPASSVALE LANE #02-188  
 Postcode 543210  
 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 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 2  
 Was any body injured in the Accident? YES  
 Was any injured conveyed to hospital by ambulance? YES  
 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) 1

**Details of Police Action**

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name BISHAN NEIGHBOURHOOD POLICE CENTRE  
 Police Station Address ROAD: 20 BISHAN STREET 23, POSTCODE: 579757, COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 1800-5529999 - FAX NO: 65561905  
 Was notice of intended Prosecution given? NO

If Yes, against whom?

**Circumstances of Accident**

REFER ATTACHED

**Attachment(s)**

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: VIDEO WITH TRAFFIC POLICE  
 Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number FBP1398M  
 Vehicle Make/Model/Colour NA  
 Details Of Properties NA  
 Vehicle Category MOTORCYCLE  
 Name of Driver AZRIN BIN HAMDAN  
 NRIC/Passport Number S9505785C  
 Contact Number NA  
 Address  
 Postcode  
 Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name TING CHIAP SOON

Approximate Age

Injuries Sustain REFER ATTACHED

Injured person in which vehicle? SJM1998C

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address NA  
NA

Postcode

**DETAILS OF INJURED PERSON 2**

Name AZRIN BIN HAMDAN

Approximate Age

Injuries Sustain REFER REPORT

Injured person in which vehicle? FBP1398M

Were seat belts worn? NO

Was this injured conveyed to hospital by ambulance? YES

Address NA  
NA

Postcode

**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:

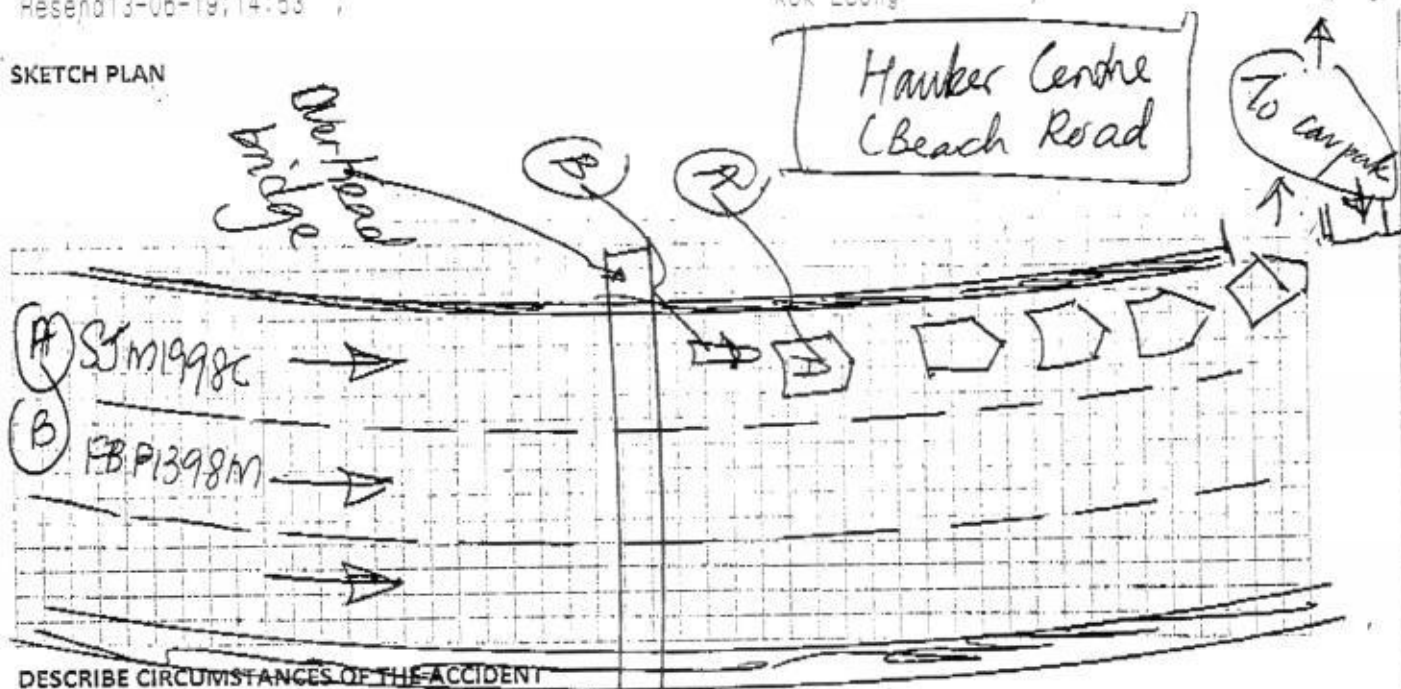
\_\_\_\_\_  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:

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

Rms 13/6/2019



## SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police

7/20190613/2033

## DECLARATION

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

*[Signature]*  
Policyholder's Signature  
Date & Time:

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

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

*[Signature]* 13/6/2019



## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5105898641 ✓

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle

: SJM1998C ✓

Chassis Number

: GB31028307

2. Name of Policyholder

: TING CHIAP SOON ✓

3. Effective Date of Insurance

: 02 Dec 2018 ✓

4. Expiry Date of Insurance

: 01 Dec 2019 ✓

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

# Limitations rendered Inoperative by Section 2 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)

: S\$2,000

EXCESS (SECTION 2)

: S\$1,500

WINDSCREEN EXCESS

: S\$100

ADDITIONAL EXCESS

: N/A

UNNAMED DRIVER EXCESS

: PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP

: NO

INSURE WITH COE

: YES

NCD PROTECTION

: NO

TRANSPORT ALLOWANCE

: NO

EXCESS WAIVER

: NO

PRIMARY DRIVER

: TING CHIAP SOON

NAMED DRIVER (1)

: N/A

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: EFIZZIG CREDIT PTE LTD

SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : S &amp; M ALLIANCE PTE LTD (00000614373)

Date of Issue : 28 Nov 2018 13:20 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive



# SINGAPORE POLICE FORCE



T/20190613/2033

Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

1 of 3

Report No. T/20190613/2033

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/06/2019 11:34		Vide Report No.: A/20190612/0097		Station Diary No.: 41	
<b>Informants Particulars</b>					
Name of Informant: TING CHIAP SOON			Address: APT BLK 210C COMPASSVALE LANE #02-188 SINGAPORE 543210		
ID Type / ID No.: NRIC NO / S7144400G			Contact No.: Home/Office: Mobile: 91812965		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 47	Date of Birth: 12/12/1971	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3,4 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/06/2019 19:30	Type of Location: Straight Road
Location: Along Road 1 BEACH ROAD CRAWFORD STREET BEACH ROAD towards CRAWFORD STREET				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP1398M		HONDA	CB150R ABS	Black		0
SJM1998C		HONDA	FREED 1.5G A	Silver		0

<b>Details of Vehicle Insurance</b>					
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date	
SJM1998C	NTUC Income Insurance Co-Operative Limited	5105898641	02/12/2018	01/12/2019	



**SINGAPORE  
POLICE FORCE**



T/20190613/2033

2 of 3

Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

Report No. T/20190613/2033

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	AZRIN BIN HAMDAN	ID No.	S9505785C
Related Vehicle	FBP1398M	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	TING CHIAP SOON	ID No.	S7144400G
Related Vehicle	SJM1998C	Contact No.	91812965
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 12/06/2019 at about 1930hrs, I was driving my vehicle (SJM1998C) along BEACH ROAD towards CRAWFORD STREET.

At the point of time, my vehicle was stop stationary waiting for my turn to enter the carpark. Suddenly I felt an impact from the rear of my vehicle as such I alighted to make a check and discovered that my vehicle was hit by (FBP1398M) and the rider was injured.

There was police and ambulance attended to the accident and the rider was conveyed to the hospital. My vehicle does have in built camera.

I am lodging this report for insurance claim purpose.

**SINGAPORE  
POLICE FORCE**

T/20190613/2033

Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

3 of 3

Report No. T/20190613/2033

## CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

E /

Sgt 2 TAN CHIN SENG, JASON

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

13/06/2019 11:34

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MARIAH BINTE ZAKARIA

Contact No.: 65476433



Classification Of Case:

SN 061

Authentication Stamp

NP168

SIGNATURE

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	13 Jun 2019		14 Jun 2019 16:35 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured: <b>AZRIN BIN HAMDAN</b> , ID: S9505785C									
Main Claimant: <b>TING CHIAP SOON</b> , ID: S7144400G									
Vehicle Reg. No.: <b>SJM1998C</b>		Date of Loss: 12/06/2019 00:00 - :59 [126 Months and 10 Days From LTA Reg Date (Man Yr)]							
Claim Type: <b>TP / MSC/V/19-000680</b>		Policy/Cover Note No.: MSD/VMS/19-998681 (TP, Fire & Theft) Coverage: 11/02/2019 - 10/02/2020							
Vehicle Reg. No. (Insured): <b>FBP1398M</b>		Policy No. (Claimant):							
		Excess:							
Repairer: <b>Kok Wang Car Grooming - Pioneer (HQ)</b> No. 1 Soon Lee Street, #06-40 Pioneer Centre, 627603 Pioneer - Tel: 91839633									
Handling Insurer: <b>MSIG Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: +65 6827 7888 ... [Handled by <b>Monica Chung Pei Zhen</b> - 6594 2552]									
Adjuster: <b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>MOHD RASUL</b> ] ... [Imm.Advice due 15/06/2019]									
Adj Asg. Remarks: on WP. Liab: dispute (OI NR) TP lawyer disagree on SJE - Assign LKK. Contact: Mr. Kok @ 9183 9633									
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									



## Claim Documents

\*SJM1998C (MSC/V/19-000680)

[FBP1398M]






























TP



































TING CHIAP SOON

Jun 12 2019 12:00AM

[AZRIN BIN HAMDAN]

Kok Wang Car Grooming - Pioneer

Upload Documents			Upload Photos		Compose New Letter		View		View in Browser	
Photos/Images							3 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)					Thumbnail	Print		
1	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
2	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
3	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
4	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
5	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
6	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
7	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
8	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
9	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
10	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
11	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
12	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
13	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
14	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
15	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
16	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
17	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
18	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
19	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
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29	08/07/19 16:03	General View					 Load JPG	<input checked="" type="checkbox"/>		
30	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		
31	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		
32	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		
33	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		
34	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		
35	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		
36	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		
37	08/07/19 16:03	General View					Load JPG	<input checked="" type="checkbox"/>		

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
38	08/07/19 16:03	General View	 Load JPG	<input checked="" type="checkbox"/>
39	08/07/19 16:03	General View	 Load JPG	<input checked="" type="checkbox"/>
40	08/07/19 16:04	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
41	08/07/19 16:04	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
42	08/07/19 16:04	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
43	08/07/19 16:04	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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61	08/07/19 16:04	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
62	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
63	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
64	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
65	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
66	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
67	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
68	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
69	08/07/19 16:05	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	14/06/19 10:31	PRI & THIRD PARTY REPORT	 Load PDF	
2	14/06/19 11:01	Disagree on SJE & Workshop details.	 Load PDF	

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>		Reset	Save	Print
There are no document checklists configured.				
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>				
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>				





## 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: CS3/MSG19010592/R1CD3E2  
Date: 15/07/2019

## REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VMS/19-998681
Claimant Vehicle No:	SJM1998C	Insured Vehicle No:	FBP1398M
Date of Loss:	12/06/2019	Nature of Claim:	TP
		Claim No:	MSC/V/19-000680

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	<b>SJM1998C</b>	Engine No:	L15A2328649
Make & Model:	HONDA FREED, 1.5 (A)	Chassis No:	GB31028307
Reg. Date:	02/12/2008 (Man. Year: 2008)	Odometer:	180712 km
Colour:	Grey		
Engine Capacity:	1496 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	<b>Market Value/New Car Price</b>		

## 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:	205/50 R16	Rear Tyre Size:	205/50 R16
Front Left Side:	Falken 6 mm	Rear Left Side:	Falken 6 mm
Front Right Side:	Falken 6 mm	Rear Right Side:	Falken 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (\$\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

## INSPECTION

Date of Assignment:	14/06/2019	
Date Inspected:	01/07/2019 Inspected At:	Kok Wang Car Grooming - Pioneer (HQ) No. 1 Soon Lee Street, #06-40 Pioneer Centre Singapore 627603
Estimated Period of Repair:	5.0 days	

Adjuster: MOHD RASUL

Manager: CELINE FONG

*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.*

- 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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$4,000.00 - \$5,000.00

## REPAIR DETAILS

### Reference

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 15 Jul 2019)
<b>Parts:</b>	M1-MPV	HONDA FREED 1.5 (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SJM1998C)	
<b>Validity:</b>	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	
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.	

### Recommended Parts

There are no new parts selected.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.
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< END OF ESTIMATES >