

ASS. REC. BY:

REF: CS3/FCI19011495/RIcd352 Special Instruction:

Surveyor: Rasu

## ASSIGNMENT (Office)

From (Person): May chun

of FCI

Date/Time: 28.6.2019 2.07pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: GW3900D

Insured:

SHA 1960Y

at Workshop m/s Lion City Electric

Tel:

62746490

of BIK 1001 Bukit Merah Lane 3 #01-45

Policy No:

Claim No: D19004195MFSH

Sum Insured:

Excess:

Make of Veh:

D.O.A. 25.6.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 28.6.19 2.46pm

Person Contacted:

ms Veeo

Vehicle IN/OUT

Date/Time

Action/Instruction ( X ) Estimate

SHA 1960Y: NBA/INC19011461Y D.O.A: 25/06/2019

GW 3900D NBA/INC19011461Y D.O.A: 25/06/2019

Dismantle: 1/7/2019.

After repair: 3/7/2019.



**MOTOR SURVEY ASSIGNMENT**

<b>Date</b>	26-06-2019	<b>Our Ref No.</b> D19004195MFSH
<b>Accident Date</b>	25-06-2019	<b>Claim Type.</b> Third Party
<b>Insured Vehicle</b>	SHA1960Y	<b>Third Party Vehicle.</b> GW3900D
<b>Survey Location</b>	BLK 1001 BUKIT MERAH LANE 3#01-45	
<b>Contact Person.</b>	MS YEO	
<b>Contact No.</b>	62746490/ 0	<b>Fax No.</b> 0
<b>Survey Type</b>	WITHOUT PREJUDICE:	
<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD	
<b>Contact Person</b>	NA	<b>Fax No.</b> 68416315
<b>Contact Number.</b>	NA	

**FOR DIRECT SETTLEMENT**

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

**THIRD PARTY SURVEY REQUEST**

<b>Cc : Workshop</b>	LION CITY ELECTRIC PTE LTD	<b>Attention.</b> NIL
<b>Cc : TP Solicitor</b>	K. K. CHENG & CO	<b>TP Solicitor Fax No.</b> NA
<b>Officer Incharge</b>	MAY CHUA	

**IMPORTANT NOTE**

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.  
This is a computer generated letter, no signature required.

## 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	25/06/2019 09:37
Date Of Accident	25/06/2019 07:30
Exact Location Of Accident	ALONG SENJA LINK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GW3900D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LION CITY ELECTRIC PTE LTD
Co Reg No	199300982H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91195549
Alternative Phone No	OFFICE-91195549
<b>Vehicle Particulars</b>	
Manufacturer	SUZUKI
Model	CARRY-1.3 D (M)
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY TO WORK
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	COMMERCIAL VEHICLE
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5049112455-08
Cover Note Number	
<b>Driver</b>	
Name of Driver	LIM SENG LEE
NRIC No	S2600368G
Date Of Birth	19/05/1957
Occupation	INDOOR
Date Of Driving Pass	29/10/1975
Driving Experience	43 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91195549
Fax Number	
Contact Number	OFFICE-91195549
Email Address	NOEMAIL

Address	BLK 630 SENJA ROAD
	#11-208
Postcode	670630
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	SIDE SWIPE
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?	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)	1

#### 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	SHA1960Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	ONG CHYE HOCK
NRIC/Passport Number	S0761852B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## SKETCH PLAN

### IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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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.
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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:

25.6.19

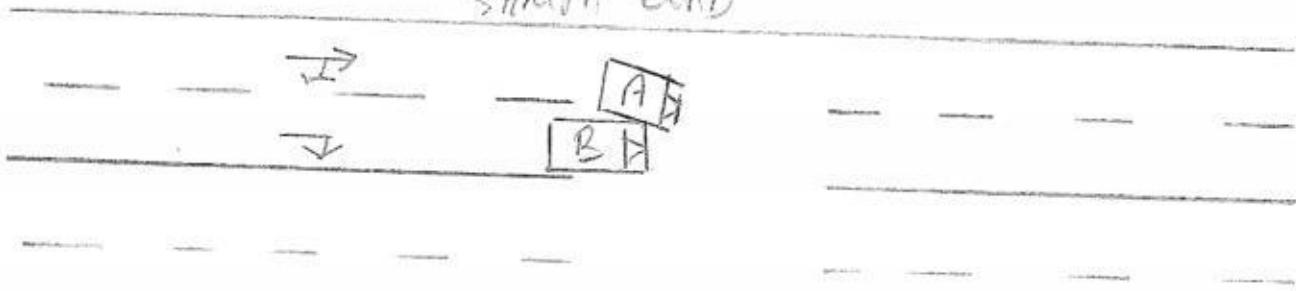
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

25/06/2019  
K28N 187/1003

SKETCH PLAN

SEKITA ROAD



A) GW 3900D

B) SHA 1960Y

SEKITA  
WAY

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 25/06/2019 AT ABOUT 07:30HRS I WAS DRIVING  
MY VAN GW 3900D ALONG SEKITA ROAD & WAS IN  
THE LEFT LANE WANTED TO TURN INTO SEKITA WAY.  
SUDDENLY ON MY RIGHT WAS A TAXI SHA 1960Y. INSTEAD  
OF TURNING RIGHT HE DROVE STRAIGHT & BOOM INTO MY  
VANE THAT ALL.

DECLARATION

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

Policyholder's Signature

Date & Time:

25.6.19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

25/06/2019  
ROSH WATSON



&gt; Back to OneMotoring

M.V. - \$19,000 - \$21,000

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Details	
Owner ID Type:	Company
Owner ID:	0982H
Vehicle Details	
Vehicle No.:	GW3900D
Vehicle to be Exported:	No
Intended Deregistration Date:	01 Jul 2019
Vehicle Make:	SUZUKI
Vehicle Model:	CARRY 1.3
Primary Colour:	Silver
Manufacturing Year:	2003
Engine No.:	G13BB828783
Chassis No.:	JSAFDA32V00138242
Maximum Power Output:	-
Open Market Value:	\$8,715.00
Original Registration Date:	18 Jun 2003
First Registration Date:	18 Jun 2003
Transfer Count:	1
Actual ARF Paid:	\$436.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 May 2023
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$17,865.00
COE Rebate Amount:	\$13,984.00
Total Rebate Amount:	\$13,984.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 01 Jul 2019

OK

Bal: 3yrs 11mths




**LKK Auto Consultants Pte Ltd**

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

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PRE-REPAIR INSPECTION REPORT				
MS FIRST CAPITAL INSURANCE LTD		Ref: CS3/FCI19011495/R1cd3s2		
36 ROBINSON ROAD		Date: 12-07-2019		
#16-01 CITY HOUSES SINGAPORE 068877		Code: FCI2		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SHA 1960Y	Veh. Inspected	GW 3900D	
Policy No.		Coverage (\$)	0.00	
Claim No.	D19004195MFSH	Excess (\$)	0.00	
Assign From	MAY CHUA	Assign Date	28/06/2019	
2. Vehicle Particulars & Condition				
Make & Model	SUZUKI CARRY 1.3	c.c	1298	
Engine No.	HIDDEN	Year of Reg.	2003	
Chassis No.	JSAFDA32V00138242	Colour	GREY	
Odometer	354954 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	155 R13	YOKOHAMA	5 mm	
L/H Front Tyre	155 R13	YOKOHAMA	5 mm	
R/H Rear Tyre	155 R13	YOKOHAMA	5 mm	
L/H Rear Tyre	155 R13	YOKOHAMA	5 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION.				
5. General Information				
Accident Date	25/06/2019	Inspect Date / Time	28/06/2019 ( 04:44 PM )	
Survey held at	LION CITY ELECTRIC PTE LTD BLK 1001 BUKIT MERAH LANE 3 #01-45 SINGAPORE 159718			
5a. Remarks				
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. D) MARKET VALUE \$20,000.00				

Report Ref No. CS3/FCI19011495/R1cd3s2

Inspected By



MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor



K.K. LAU CPT (RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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