Without Prejudice

Dear Mariah,

We refer to the above matter and to your Letter of Demand dated 7 May 2019.

We note from your client's police report he has the video footage. Please let us have the same and we will revert in due course.

Thank you.

Regards, Sherini Pillai

Motor Claims Department India International Insurance Pte Ltd

64 Cecil Street, #04/#05 IOB Building, Singapore 049711

DID: 6347 6128 Fax: 6224 4174



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This email is intended solely for the person to whom it has been addressed. It may contain confidential and/or legally privileged information. If you are not the person for whom this e-mail was intended, or if this e-mail has reached you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful. Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses. Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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 <u>truthful and accurate</u> 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

oresaid.	The second secon
	ACCIDENT STATEMENT
late Of Report	14/03/2019 16:01
late Of Accident	13/03/2019 20:15
xact Location Of Accident	T JUNCTION OF HOLLAND RD AND TYERSALL AVE
country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
ehicle Registration Number	SHC3182C
nsured/Policyholder	
lame Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
o Reg No	199303821R
mail Address	FLEETSAFETY@CDGTAXI.COM.SG
fobile Phone No	
Iternative Phone No	OFFICE-65508768
ehicle Particulars	
lanufacturer	HYUNDAI
lodel	SONATA
xact Purpose for which vehicle was being used at me of accident	t de la constantination de la constantinatio
re you claiming under your own insurance policy or repair to your vehicle?	NO
No, Please state action to be taken	REPORTING ONLY
ehicle Category	PRIVATE HIRE
nsurance Company	
ame of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
ype Of Coverage	THIRD PARTY FIRE AND/OR THEFT
leet Policy	YES
olicy Number	MCOM0015
over Note Number	
river	
ame of Driver	SOH CHENG FOH
RIC No	S1415229F
ate Of Birth	18/05/1960
ccupation	OUTDOOR
ate Of Driving Pass	23/09/1977
riving Experience	41 YEARS AND 5 MONTHS
ender	MALE
obile Number	(LOCAL) +65-96167375
ax Number	

WHYEBOON@GMAIL.COM

Address 311C 08-30 ANCHORVALE LANE

Postcode 543311

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - TAXI DRIVER

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 BICYCLIST

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

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)

2

Passenger 1

ambulance?

NAME:

GENDER:

: FEMALE

Details of Police Action

YES

Was the accident reported to the police? If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] AMK S NPC

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

SEE POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties BICYCLE

Vehicle Category NAJUNKNOWN

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

NOT SURE

No. Of Passenger (Including Driver)

		And the second	San Street, St
DETAI	1000	IN III IOCE	PERSON 1
LIFE LAI			I PERSON I

Name

CYCLIST

Approximate Age

Injuries Sustain

NOT SURE

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

SKETCH PLAN		
		\mathbf{N}
		1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 +
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R- Cunties		
2 100000		NA A
		╢╢┼╫┼╁ ┼┼╫┼┼┼
		Juersa
		Ava
	As per ortlached	d police report
CLARATION		7
	culars are true in every respect.	1
CO REG. NO. 19	PATION PTE - 6 - 9303821R	14/3
te & Time:	Oriver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:
	The second secon	NRIC/FIN No.: Loke Wei Yieng

GIABMC Sketch@Georgess_V1

Sketch Plan Pg. 2

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>regudiate policy liability</u>.
- 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.
- 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. 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:
 - 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 invoive 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.

CO REG NO. 199303821R

好.

Policyholder's Signature Data & Time:

Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Loke Wei Yleng

GIAIMC StatchPlanForm_V3

10.0

11





Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

1 of 3 Report No. T/20190313/2187

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 13/03/2019 22:22		Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars		
Carlo Carlo Carlo Carlo	Informant: IENG FOH		Address: APT BLK 311C ANCHORVAL 543311	LE LANE #08-30 SINGAPORE
and the second s	/ ID No.: D / S14152	29F	Contact No.: Home/Office:	Mobile: 96167375
Nationality: SINGAPORE CITIZEN		EN	Email:	4
Sex: Male	Age: 58	Date of Birth: 18/05/1960	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2,3,4,5	Date of Expiry:

General Infor	mation of the Accident	A PRODUCTION OF THE PARTY OF	尼州市市市市	GENERAL STREET
Type of Accident: Injury Pedestrian / Cyclist		Drink Drive: No	Date/Time of Accident: 13/03/2019 20:15	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 HOLLAND ROAD TYERSALL AVENUE			1	
Weather: Clear		Road Surface: Dry	R	oad Speed Limit:
Traffic Flow:		Traffic Control:	10000	raffic Volume: oderate
Type of Collis Moving Vehic	ion: le Against - Others		Ar an No	nyone conveyed by nbulance:

Vehicle No.	Туре	Make	Model	Color	O-Wata	NV.
SHC3182C		D. TIGOTO	MIDDO	COIO	Condition	No of Passenge
011001020	Car				Siightly	1
		*2				1
		*2			Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	The state of the s
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Sketch Plan Pg. 4





Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 2 of 3 Report No. T/20190313/2167

Tel No: 1800-4519999

CONTINUATION OF REPORT

Driver				10000	NAME OF THE OWNER, OWNE	1000
Name	SOH CHENG FOH			ID No	VI.	S1415229F
Related Vehicle	SHC3182C (Car)			Conta	ct No.	96167375
Hospital/Clinic	NIL		Class Drivin Licens Explry	g	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	and the same of the same of	NIL	

Brief Details.

On 13/03/2019 at about 2015hr, I was driving my taxi SHC 3182C with my passenger sitting behind, along Holland Rd towards Tyersall Ave. From the distant, I saw a cyclist who was riding in a slow pace at the opposite direction along Holland Road. Thus I decided to make a right turn in Tyersall Ave, however the cyclist picked up his speed and I hit the cyclist's bicycle centre mass.

The said cyclist was conveyed to the hospital by the Ambulance. My passenger and I were not injured. My taxi number plate slightly damaged.

Sketch Plan Pg. 5





Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 Tel No: 1800-4519999

3 of 3 Report No. T/20190313/2187

CONTINUATION OF REPORT

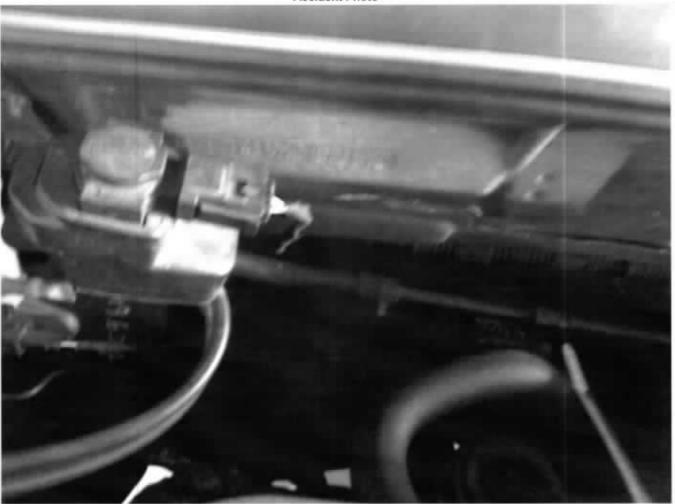
Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: F / SI SITTI QAMARIYAH BINTE MOHD NAJIB	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 13/03/2019 22:22
Officer In Charge Of Case: TP / AEIT /	Classification of Gase.
Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172 Authentication Stamp	·
the same	anera la de l'urce

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.

Accident Photo



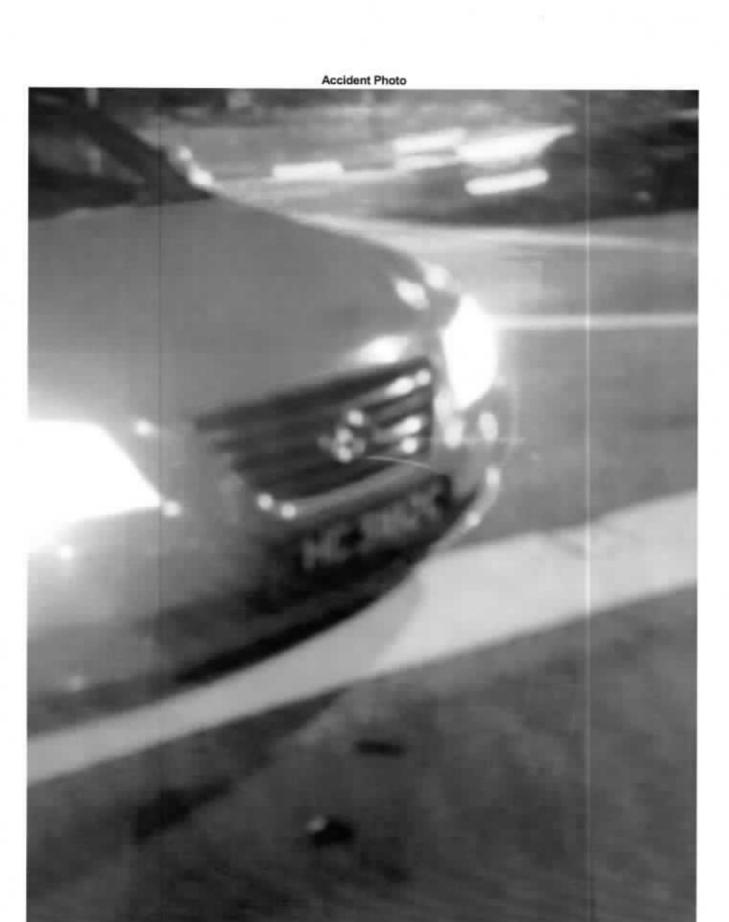


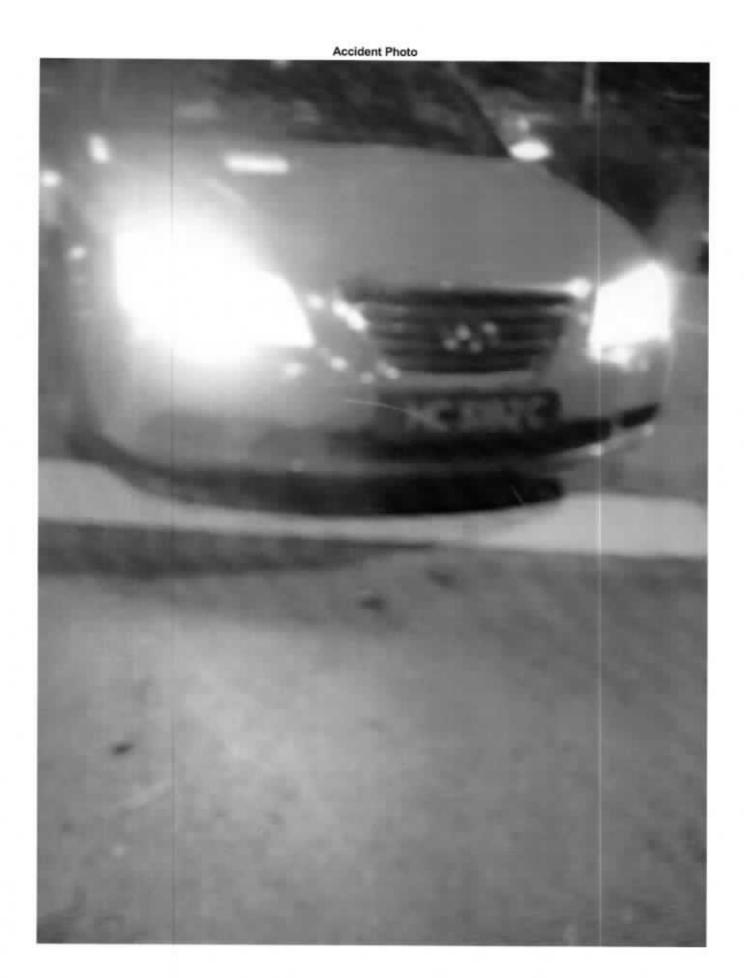
Accident Photo















Your Ref: MCT19030360

Date: 05th September 2019

Our Ref: CS1/III19011833/Lqd3

M/s INDIA INTERNATIONAL INSURANCE PTE LTD 64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711

Dear Sir / Madam,

EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT BICYCLE INSURED VEHICLE: SHC 3182C ACCIDENT DATE: 13/03/2019

We thank you for your instruction on 04/07/2019.

We acknowledge receipt of the following documents via Merimen System:-

- a) Letter of Demand from Third Party.
- b) OI SHC 3182C's Singapore Accident Statement.
- c) Colour damaged bicycle photographs.

Based on the documents received from you, we have evaluated the damages of the bicycle and have the following comments:-

(a) The bicycle sustained damages at the rear chassis, and it beyond reports

(b) In view of this, we are of the opinion that it would be unsafe to proceed with the repairs due to extensive damages on the chassis under the category of the section 2 of THE ROAD TRAFFIC ACT on THE MOTOR VEHICLES (CONSTRUCTION AND USE) (AMENDMENT NO.2) RULES 1989, that: no vehicle shall be fitted with a replacement chassis or any body part where the chassis is an integral part of the vehicle. and we therefore recommend it to be written off as "Total Loss".

According to claiment the parallel charact.

This bigger a was the the provided charact.

Bue to lack of information on the said.

(c) Due to lack of information on the original purchased invoice of this bicycle, we shall apply depreciation method of the new bicycle of the similar model as follows:

: \$3,600.00 Similar model :\$ 360.00 Less 10% of depreciation : \$3,240.00 Recommendation cost of repair

K.K.LAU CPT(RET) BEng(Hons), B.Bus, MBA, PEng(UK), PE(USA), MASME(USA), MInstAEA(UK), MIRTE, MCIArb REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES - This Report is made solely for the use and benefit of the Client named on the front page of this Report. No liability or responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

Your Ref: MCT19030360

Date: 05th September 2019

Our Ref: CS1/III19011833/Lqd3

M/s INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711

Dear Sir / Madam,

EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT BICYCLE INSURED VEHICLE: SHC 3182C ACCIDENT DATE: 13/03/2019

We thank you for your instruction on 04/07/2019.

We acknowledge receipt of the following documents via Merimen System:-

- a) Letter of Demand from Third Party.
- OI SHC 3182C's Singapore Accident Statement.
- c) Colour damaged bicycle photographs.

Based on the documents received from you, we have evaluated the damages of the bicycle and have the following comments:-

We have checked and are of the opinion that the bicycle would be unsafe to proceed with the repairs due to extensive damages on the chassis. We also note that the bicycle was purchased less than a year before the date of accident and hence insurer may want to consider applying some depreciation 10% of the bicycle - S\$ 3,240.00 (S\$3,600.00-10%).

Due to lack of information as the original purchased answire of mis biasele, we shall apply depresed depre cation me mode!

The new biasele of the similar mode!

The new biasele of the similar mode!

Similar to the similar to the similar mode!

Your Ref

: 5072378347

Date: 16th February 2016

Our Ref

: NS/INC16002271/H1gbd1

M/s NTUC INCOME INSURANCE CO-OPERATIVE LTD

1 Maritime Square #10-01 Harbourfour Centre Singapore 099253 (The Motor Claims Department)

Dear Sir/Madam,

AUTOMOBILE INSPECTION REPORT OF ACCIDENT VEHICLE NO: SHA 5175X ACCIDENT ON 31/01/2016 INSURED VEHICLE GBD 8723A

Instruction was received to inspect the vehicle Reg. No: SHA 5175X. The inspection was conducted on 03/02/2016 at the premises of M/s: ComfortDelgro Engineering Pte Ltd, 59 Loyang Drive Singapore 508969.

The following vehicle information was recorded: -

Registration Number : SHA 5175X

Make & Model : Hyundai Sonata (A)

Year of Registration : 2011 Engine Capacity : 1991cc Body Colour : Blue

Chassis Number : KMHET41VMBA810095

The following are our comments: -

t the front portion.(Details see photographs enclosed.)

(a) The vehicle sustained damages at the front portion. (Details see photographs enclosed.)

(b) In view of this, we are of the opinion that it would be unsafe to proceed with the repairs due to extensive damages on the chassis under the category of the section 2 of THE ROAD TRAFFIC ACT on THE MOTOR VEHICLES (CONSTRUCTION AND USE) (AMENDMENT NO.2) RULES 1989, that:

no vehicle shall be fitted with a replacement chassis or any body part where the chassis is an integral part of the vehicle. and we therefore recommend it to be written off as "Total Loss". Your Ref: MCT19030360 Date: 05th September 2019

Our Ref: CS1/III19011833/Lqd3

M/s INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711

Dear Sir / Madam,

EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT BICYCLE INSURED VEHICLE: SHC 3182C ACCIDENT DATE: 13/03/2019

We thank you for your instruction on 04/07/2019.

We acknowledge receipt of the following documents via Merimen System:-

- a) Letter of Demand from Third Party.
- b) OI SHC 3182C's Singapore Accident Statement.
- c) Colour damaged bicycle photographs.

Based on the documents received from you, we have evaluated the damages of the bicycle and have the following comments:-

1

We have checked and are of the opinion that the price of the bicycle as stated in the invoices are fair and reasonable. We also note that the bicycle were purchased less than a year before the date of accident and hence insurer may want to consider applying some depreciation 10% of the bicycle - S\$ 3,240.00 (S\$3,600.00-10%).



51 UBI AVE 1, #01/02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 6256 3561 FAX: (065) 6256 4315

Your Ref: MCT19030360

Date: 11th September 2019

Our Ref: CS1/III19011833/Lqd3e2

M/s INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711

Dear Sir / Madam,

EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT BICYCLE INSURED VEHICLE: SHC 3182C ACCIDENT DATE: 13/03/2019

We thank you for your instruction on 04/07/2019.

We acknowledge receipt of the following documents via Merimen System:-

- a) Letter of Demand from Third Party.
- b) OI SHC 3182C's Singapore Accident Statement.
- c) Colour damaged bicycle photographs.

Based on the documents received from you, we have evaluated the damages of the bicycle and have the following comments: -

- (a) The bicycle sustained damages at the rear chassis and it beyond repairs.
- (b) In view of this, we are of the opinion that it would be unsafe to proceed with the repairs due to extensive damages on the chassis under the category of the section 2 of THE ROAD TRAFFIC ACT on THE MOTOR VEHICLES (CONSTRUCTION AND USE) (AMENDMENT NO.2) RULES 1989, that: no vehicle shall be fitted with a replacement chassis or any body part

no vehicle shall be fitted with a replacement chassis or any body part where the chassis is an integral part of the vehicle. and we therefore recommend it to be written off as "Total Loss".



51 UBI AVE 1, #01/02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 6256 3561 FAX: (065) 6256 4315

(c) According to claimant, this bicycle was about one years old at the time of accident, due to lack of information on the original purchased invoice provided by the claimant of this bicycle, we shall apply depreciation method of the new bicycle of the similar model as follows:

Similar model : \$3,600.00 Less 10% of depreciation : \$ 360.00 Recommendation cost of damages : \$3,240.00

K.K.LAU CPT(RET)

BEng(Hons), B. Bus, MBA, PEng(UK), PE(USA), MASME(USA), MInstAEA(UK), MIRTE, MCIArb REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report. No liability or responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

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

LAIM SUB	FOLDER TRA	CKING										
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt		Adj Submitted	Ins Authred	Status				
Main	18 Mar 2019		12 Sep 2019 16:02 Edit Adj Rot	S\$0.00 Edit Est	3/10/2 (TOTAL)	S\$0.00 View Rpt		Pending fo Report Cancel Cas				
	Main) R	eference	C	laim Deta	ils	Documents		Show All			
CLAIM SU	BFOLDER DE	TAILS				[Created	by insurer]					
Insured:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R											
Main Claimant:	WONG Y	YONG, ID: -										
Vehicle Rep No.:	BICYCL	E			Date of Lo	ss: 13/03/201	9 20:00 - :59					
Claim Type	TP / MC	ACT19030360			Policy/Cov Note No.:						1)	
Vehicle Reg No. (Insured):	5HC3182	c			Policy No. (Claimant							
					Excess:							
Repairer:	- Not App	licable - (-)										
Handling Insurer:	India Int	ernational Insur	ance Pte Ltd (HQ)	- Tel: 6347	6100 [H	andled by Sher	ini Pillai)					
Claimant's Insurer:	India Int	ernational Insur	ance Pte Ltd (HQ)	- Tel: 6347	6100							
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62	56-3561	[Handled t	y K.K.LAU]	[Final Rpt due	23/09/2019]				
ASSOCIA	TED MAIL RE	CEIVED					Vie	w All Compo	se Case Mail			
There are r	no mail for this	case.										
ALL ASSO	CIATED TAS	iks=				View All	Search Tasks C	reate New Task	Complete			
Due Dat No results.		Type Task	Group Subjec	t Handl	er As	signed By	Completed On	Created O	n Done?			

Claim Documents

*BICYCLE (MCT19030360) [SHC3182C] TP WONG YU YONG Mar 13 2019 8:00PM [COMFORT TRANSPORTATION PTE LTD]

Doc	umentation		1 per s	page 🗸	21
No	Finalized On	India International Insurance Pte Ltd (HQ)		Thumbnail	Print
1	12/09/19 16:03	Letter of Demand from Third Party From: TP PD - Reg. No: BICYCLE, Claimant: WONG YU YONG	0	Load PDF	
2	12/09/19 16:03	3.7.19 - Sent offer for TPI and also request for colored photos of 3P bicycle Fram: TP PD - Reg. No: BICYCLE, Claimant: WONG YU YONG	0	Load PDF	
3	12/09/19 16:03	Singapore Accident Statement From: TP PD - Reg. No: BICYCLE, Claimant: WONG YU YONG	0	Load PDF	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	13/09/19 09:03	LKKLetter	0	Load PDF	

Linked Accident Report Documents

			View	View in Brown	er 🕶
Ass	essment Reports		1 per	page 🔍	V
No	Finalized On	ComfortDeiGro Engineering Pte Ltd (Loyang)		Thumbnall	Print
1	14/03/19 16:09	Accident Statement	0	Load HTM	
Pho	otos/Images		3 per	page V	2
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
1	14/03/19 16:09	Accident Photo	0	Load 3PG	2
2	14/03/19 16:09	Accident Photo	0	Load JPG	2
3	14/03/19 16:09	Accident Photo	0	Load JPG	V
4	14/03/19 16:09	Accident Photo	0	Load JPG	Ø
5	14/03/19 16:09	Accident Photo	0	Load JPG	Ø
6	14/03/19 16:09	Accident Photo	0	Load 3PG	2
7	14/03/19 16:09	Accident Photo	0	Load JPG	
8	14/03/19 16:09	Accident Photo	0	Load JPG	8
9	14/03/19 16:09	Accident Photo	0	Load JPG	Ø
Doc	cumentation		1 per	page 🔻	V
No	Finalized On	ComfortDelGro Engineering Pte Ltd (Loyang)		Thumbnail	Print
1	14/03/19 16:09	Sketch Plan	0	Load TIF	

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. 199607 198R)

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:

CS1/III19011833/LQD3E2

Date:

13/09/2019

REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No:

MCOM0015

Claimant Vehicle No:

BICYCLE

Insured Vehicle No: SHC3182C

Date of Loss:

13/03/2019

Nature of Claim:

TP

Claim No: MCT19030360

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

BICYCLE

Make & Model:

ELECTRIC BICYCLE SUV-7, (A)

Engine No:

HIDDEN

Reg. Date: Colour:

(Man. Year:) Yellow

Chassis No:

HIDDEN

Engine Capacity:

0 cc

Odometer:

0 km

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:

0 mm

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

Front Right Side:

Rear Tyre Size:

Front Left Side: 0 mm

Rear Left Side: Rear Right Side: 0 mm 0 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	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:

Estimated Period of Repair:

12/09/2019

Date Inspected:

12/09/2019 0.0 days

Inspected At:

TAY JUNCTION

Adjuster: K.K.LAU

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 2 of 3

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 13 Sep 2019)

Parts: N/A ELECTRIC BICYCLE SUV-7 (A) (Catalogue:Merimen Singapore 1.0) (Model not available in

database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for BICYCLE)

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

There are no new parts selected.

Report was unsubmitted during this print-out.

Adjuster Report Page 3 of 3

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.

< END OF ESTIMATES >