

ASS. REC. BY:

REF: CS/SMD19012258/Gt f3

Special Instruction:

Survivor: GA

## ASSIGNMENT (Office)

From (Person): Ruth Chua Gek Tiang of SMD

Date/Time: 10 July 2019 16:09

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: GBD 2857L

Insured: SJT 6427P

at Workshop m/s Tan Hup Seng Auto Repair Workshop

Tel: 64536069 / 98306069

of BIK 19 Sin Ming Ind Estate #01-09

Policy No: D18MTPV01017510

Claim No: CMTD1903251

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 07/07/2019

CA / REV / REP. / REV 24 HRS

Date/Time: 11.7.19 9:55A-m

Person Contacted:

Tony


H.O.D. Endorsement:

Vehicle: IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	Inspection: 160 Sin Ming Auto city #01-03.
	SJT 6427P-X
	GBD 2857L: NA/INC17003889/h4 D.O.A: 24/02/2017
12/July	Revised preli advise via menmen
19/11	Finalise.

menmen

## TOTAL

	
N/S	O/S

[illegible]

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	08 Jul 2019		10 Jul 2019 16:09 Assign				<b>New Assignment</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:		MAK KUM HONG, ID: S1171006I, Tel: +6597552371, Email: NOEMAIL							
Main Claimant:		J.O.I ENVIRONMENTAL PTE. LTD., Co. Reg. No.: 200808235Z							
Vehicle Reg. No.:		GBD2857L	Date of Loss:	07/07/2019 13:00 - :59					
Claim Type:		TP / CMTD1903251	Policy/Cover Note No.:	D18MTPV01017510 (Comprehensive)					
Vehicle Reg. No. (Insured):		SJT6427P	Policy No. (Claimant):						
		Excess:							
Repairer:		Tan Hup Seng Auto Repair Workshop (HQ) BLK 19 SIN MING INDUSTRIAL ESTATE, #01-09, 575677 Sin Ming - Tel:							
Handling Insurer:		Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Ruth Chua Gek Tiang - 6329 5153]							
Adjuster:		LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 19/07/2019]							
Driver/Custodian (Insured):		MAK KUM HONG (63 / Male), NRIC: S1171006I, Tel: +6597552371 Email: NOEMAIL							
Adj Asg. Remarks:		Please assign to Mr Kenneth Kong							
<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.									

# 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

To: Sompoo Insurance Singapore Pte. Ltd.  
50 Raffles Place  
#05-01/06, Singapore Land Tower  
Singapore 048623

From: LKK Auto Consultants Pte Ltd  
51 Ubi Ave 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933

Attn: Ruth Chua Gek Tiang

Date: 12 Jul 2019

## Preliminary Advice

Insured Vehicle No	: SJT6427P	Accident Date	: 07/07/2019
TP Vehicle No	: GBD2857L	Assignment Date	: 10/07/2019
Make	: MITSUBISHI CANTER	Est. Duration of Repair	: 8.00
Date of Inspection	: 11/07/2019		
Inspection At	: TAN HUP SENG AUTO REPAIR WORKSHOP (HQ) BLK 19 SIN MING INDUSTRIAL ESTATE, #01-09 SINGAPORE 575677		

### Point of Impact / General Description of Damages

The vehicle sustained impact / damages front portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	2,420.00 Labour only
Revised Amount	:S\$	Pending part prices
Check Items (Estimated)	:S\$	0.00
Total	:S\$	2,420.00
Lump Sum Repair	:S\$	

### Total Loss Consideration

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

### Remarks

- ( ) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- ( ) The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- ( x ) Other comments : Survey on "WP"

## 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	08/07/2019 13:51
Date Of Accident	07/07/2019 11:50
Exact Location Of Accident	CROSS JUNCTION OF STAMFORD ROAD AND NICOLL HIGHWAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD2857L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	J.O.L ENVIRONMENTAL PTE. LTD.
Co Reg No	200808235Z
Email Address	SALES@JOL.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67431040

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER FEA01BR2SDEB (CBU)
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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

### Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V09398/VCH/R04
Cover Note Number	

### Driver

Name of Driver	HAQUE MOHAMMAD ASRAFUL
Passport No/FIN	G2245957R
Date Of Birth	27/05/1991
Occupation	OUTDOOR
Date Of Driving Pass	15/11/2017
Driving Experience	1 YEAR AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84141309
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address C/O 65 LORONG 8 GEYLANG  
#06-02  
Postcode 84141309  
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 -  
Vehicle -  
Insurance Company of Driver's Own Vehicle -  
-

#### General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION  
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? 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) 3  
Passenger 1  
NAME: : MOSTAFA  
GENDER: : MALE  
Passenger 2  
NAME: : NONUN  
GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police? YES  
If Yes, Please state which Police Station  
Police Station Name GEYLANG N.P.C  
Police Station Address ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE  
Police Station Contact TEL NO: - FAX NO:  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: T/20190708/2036.

#### Attachment(s)

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? YES  
Remarks/ Reasons: VIDEO - TAN HUP SENG AUTO REPAIR WORKSHOP  
Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJT6427P  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR

Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name	HAQUE MOHAMMAD ASRAFUL
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	GBD2857L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	
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: 08 JUL 2019  
13:51 hr

Driver's Signature

(If driver is not the policyholder)

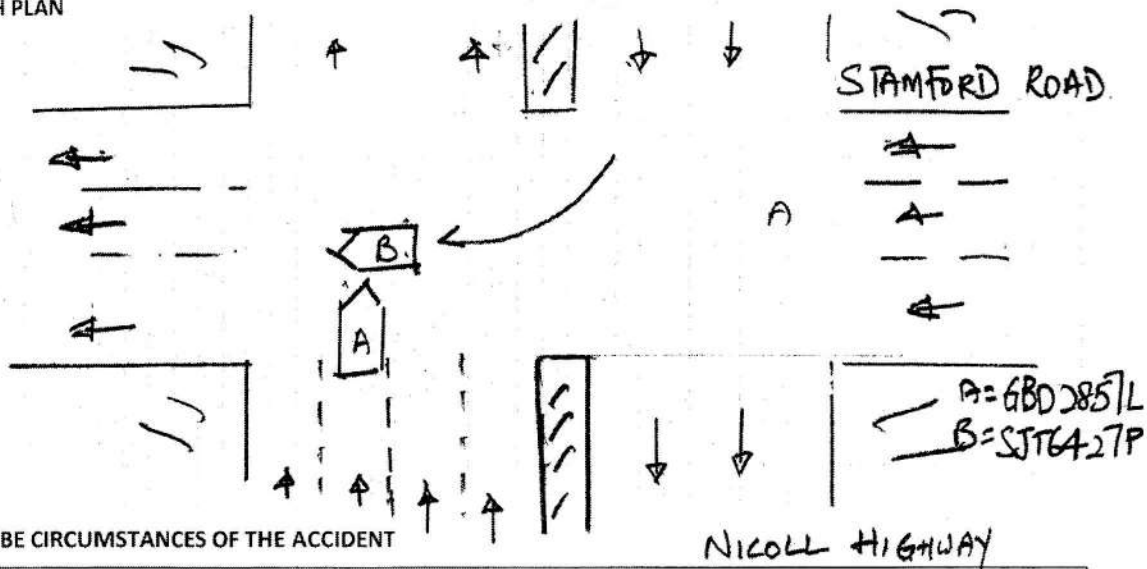
Date & Time: 08 JUL 2019  
13:51 hr

Reporting Centre Personnel's Signature

Name: Poh Kwee Choo  
NRIC/FIN No.: S8840583A



### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

NICOLL HIGHWAY

As Per Police Report : T/20190708/2036.

Repair at workshop : Tan Hui Seng Auto Repair Workshop  
# 98306069

## DECLARATION

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

Policyholder's Signature

Date & Time: 08 JUL 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time: 08 JUL 2019

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Poh Kwee Choo  
S6840583A

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	8235Z
Vehicle No.:	GBD2857L
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Jul 2019
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEA01BR2SDEB (CBU)
Primary Colour:	Yellow
Manufacturing Year:	2014
Engine No.:	4P10B28699
Chassis No.:	FEA01BA00415
Maximum Power Output:	-
Open Market Value:	\$26,821.00
Original Registration Date:	26 Aug 2014
First Registration Date:	26 Aug 2014
Transfer Count:	0
Actual ARF Paid:	\$1,342.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	25 Aug 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$54,009.00
COE Rebate Amount:	\$27,657.00
<b>Total Rebate Amount:</b>	<b>\$27,657.00</b>

The information contained herein is correct as at 11 Jul 2019

OK

TAN HUP SENG AUTO REPAIR WORKSHOP  
 160 SIN MING DRIVE #01-03  
 SIN MING AUTO CITY  
 SINGAPORE 575722  
 TEL : 64536069 Fax : 64536731  
 Email: tonytong@singnet.com.sg

HP:98306069

*[Signature]*  
 12/1/19

FEA01BA415  
 GBD 2857L

FEA01BA00415  
 MIT CENTER

Estimate cost of repair

1	FRONT BUMPER	/ BT	1 PC
2	FRONT BUMPER BRACKET RH	/ LBT.	1 PC
3	FRONT BUMPER BRACKET LH	/ LBT.	1 PC
4	FRONT RH BUNMPER SIDE	/ Re	1 PC
5	REAR NUMBER PLATE LAMP	X NA	1 PC
6	FRONT PANEL	/ BUC	1 PC
7	FRONT PANEL CLIP	/ MC	8 PC
8	FRONT WIPER PANEL	X Repair.	1 PC
9	FRONT GRILLE	/ CRA	1 PC
10	FRONT HEAD LAMP RH	/ CRA	1 PC
11	FRONT SIDE GARNISH RH	/ mis	1 PC
12	FRONT SIGNAL LAMP RH	/ CRA	1 PC
13	FRONT CORNER PANEL RH	/ Re	1 PC
14	FRONT WING MIRROR STAY TOP COVER	X NA	1 PC
15	FRONT DOOR PILLAR RH	X Repair.	1 PC
16	AIR CON CONSOLE CASING	?	1 PC

8 Days.  
 Lump sum repair.  
 After repair photos.  
 Eric Qiang.  
 82 880282  
 11/7/19.

Air bag /  
 " " steering cone / Act  
 " " less 20%  
 " " ECU /  
 Front Grille Emblem / MC  
 FRONT NUMBER PLATE / BT.

**LKK Auto Consultants** hence notify  
 the Repairer of the following:

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

Acknowledged by Repairer  
 Signature:  
 Date:

LABOUR CHARGES FOR REPLACE OF FRONT PANEL  
 RESPRAY PAINTWORKS  
 WIRING OF LIGHTING .  
 REWIRING OF CCTV  
 DISMENTLE DASH BOARD  
 REPAIR OF AIR CON CONSOLE

TOTAL

\$	950.00	600
\$	750.00	600
\$	80.00	30.
\$	80.00	40
\$	280.00	200
\$	280.00	150
\$	<b>2,420.00</b>	