Surveyor Rasul From (Person): Tan Kah). Estimated Cost:	ASS	IGNMEN (11	T (Office)		Oota/Tima	16.2.19	16.21 p.w
Estimated Cost:	——————————————————————————————————————	F	Bill to:		Jacz Fine.		
Estimated Cost: OD (TP) WS / TP RES / OD To Inspect Vehicle No:	RES/EVA/INV	/ MV / CS		Insured:	YP	9778	×
at Workshop m/s Mova	Auto motive			Tel:	627)	3992	
of BIC 1008 # 01-0	4/06 Bula	mrah	Lane 3				
Policy No: DMCVSN183	97518000		Claim No:	SNM19	020372	2102	
Sum Insured:			Excess:				
Make of Veh: (Client's Record)				1	D.O.A. 7.	8-2010	ì
CA / REV / REP. / REV 2 Date/Time: 19.8.19 (0.	4 HRS 984m Person Co		Shu au	Ve	H.O.D. End	OUT	
Date/Time Action/Instruct	on (/) E	timate			-		
Spn 23451	- X	TO THE					
YP 9788-	ξ -×						
							y liasili

Wri Men

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status		
Main	15 Aug 2019		16 Aug 2019 16:21 Assign				New Assigna Cancel Case		
	Main	Re	ference	Clai	m Details	Docume	nts	Show All	
	UBFOLDER DET	AILS				[Cre	ated by insur	er]	
Insured: Main Clair	mant:	TEOLA	Y HWA, ID: S16	005148					
Vehicle Re		SDM2		100	e of Loss:	07/0	07/08/2019 09:00 - :59		
Claim Typ	e:	TP / S	NM19D2037220			DMCVSN1839751			
Vehicle Re	g. No. (Insured):				Policy No. (Claimant):		0.01103373100	00	
					ess:	S\$1,5	500.00		
Repairer:		Mova A Merah -	utomotive Pte Lt Tel: 62723892/64	d (Bukit Mer. 763333	ah) Blk 1008, #01-0	4/06/08/94, Bukit	Merah Lane 3,	159722 Bukit	
Handling 1	Insurer:	China 1 638961	aiping Insurance	(Singapore)	Pte. Ltd. (HQ) - Te	el: 6389 6111 [Handled by Tar	Kah Leong	
Claimant's	Insurer:		ncome Insurance	Co-operativ	e Ltd (HQ) - Tel:				
Adjuster:		LKK Au	to Consultants Pt	te Ltd (HQ) -	Tel: 6256-3561 [Final Rpt due 2	27/08/2019]		
ASSOCIA	TED MAIL REC	EIVED				View All	Compos	e Case Mail	
There are	no mail for this c	ase.						2002 11011	
Е									
ALL ACC	OCIATED TASK	S .			View All Search	h Tasks Cre	ate New Task	Complete	

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 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.

By the lodgement of this report to the insurers, you hereby co aforesaid.	nsent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	07/08/2019 12:21
Date Of Accident	07/08/2019 09:10
Exact Location Of Accident	JUNCTION OF JLN BT MERAH & BT MERAH CENTRAL
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SDM2345B
Insured/Policyholder	
Name Of Registered Owner	TEO LAY HWA
NRIC No	S1699514B
Email Address	JOANTEO@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93666893
Alternative Phone No	OFFICE-93666893
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180-1.6 (A)
Exact Purpose for which vehicle was being used a time of accident	at
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	

NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number

Cover Note Number

Driver

Name of Driver TEO LAY HWA NRIC No S1699514B Date Of Birth 27/11/1965 Occupation **INDOOR** Date Of Driving Pass 22/04/1994

Driving Experience 25 YEARS AND 3 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-93666893

Fax Number

Contact Number OFFICE-93666893

EMail Address JOANTEO@HOTMAIL.COM Address

25 DAIRY FARM RD

#01-05

Postcode

679047

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

=

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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?

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

BOTH VEHICLES YP9788X & SDM2345B ARE STATIONARY AT THE TRAFFIC JUNCTION, AFTER THAT YP9788X MADE A VERY SHARP RIGHT TURN HAS CUT INTO MY LANE AND HIT THE LEFT SIDE OF MY VEHICLE SDM2345B. THE DRIVER OF YP9788X, MR. VEEMARASU THIYAGU, LICENCE NO: G8137107K ADMITTED HIS MISTAKE AND ASKED ME TO CONTACT HIS BOSS MR. KELVIN (HP: 97868534) THE DRIVER'S HP: 83129213 COMPANY NAME: SENG SOON HUAT CONTRUCTION

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

YP9788X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate 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 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 Signature Date & Time: Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No

Murit Merah central. SKETCH PLAN Dalan BUKIL Merah DESCRIBE CIRCUMSTANCES OF THE ACCIDENT SDM2345B LICENSE PLATE: ACCIDENT DATE & TIME: 7/8/19 (a) 9.12am CONTACT NUMBER: 93666893 ioanteo@ hotmail. com E-MAIL ADDRESS: LOCATION: Bt. Merah Junction at Jalan merch Central Both C489788X and SDM 2345B) Stationary P9788X vary Sharp no lane SDM2345R1 9788X Vermarasy Mr No 98137107 K) mi'stalce contact HP is Sena Soon Huat NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION Please state: () Claim Own Policy Claim Third Party () Claim OD/TP at other workshop Reporting Only DECLARATION I/We declare the foregoing particulars are true in every respect. Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Time: (If driver is not the policyholder) Name: Date & Time: NRIC/FIN No .:

GUARNIC SheichleanForm_v3



Page # Estimate

15/08/2019

CHINA TAIPING INSURANCE (S) PTE LTD

3 Anson Road

Attention :- XA017

#16-00 Springleaf Tower

Singapore 079909.

Veh#

SDM2345B

Veh Model :-

MERCEDES BENZ C180

Estimate# :-

CK419545

Claim #

TP/CK135810

ACC. Date :- 07/08/19

Terms

C.O.D Days

Remarks

:- MFG OL APR 2013 (2013)

No. 22, Jalan Kilang, Singapore 159419 Tel: (65) 6476 3333 Fax: (65) 6271 5891 www.mova.com.sq

Main Office: Mova Building

Workshop Dept: Block 1008 Bukit Merah Lane 3 #01-04/06/08/94

Singapore 159722 Tel: (65) 6272 3892 Fax: (65) 6270 8314

Co. Reg. 198904033G GST Reg. M2-0088864-2

No.	Description	Qty	U.Price	Amounts S\$
1	LIST ITEMS : HEADLAMP LH SUR	4. [4 045 00	1,045.00
2.	FRONT BUMPER SUL		PC 1,045.00 PC 1,283.00	
3.	FRONT BUMPER CHROME LH	200 50	PC 96.00	96.00
4.	FRONT BUMPER CHROME RH ~~		PC 96.00	96.00
5.	FRONT FENDER LH FARMY	1 F	PC 895.00	895.00
	LIST TOTAL S\$			3,415.00
	10% DISCOUNT S\$			-341.50
				3,073.50
	LABOUR :			***************************************
	TO INSPECT FRONT LIGHTING MECHANISM & RESET FUNCTION.			40 80.00
	TO REMOVE & REPLACE DAMAGED ITEMS. REALIGN			200
	CONNECTION			300 400.00
	TO SPRAY PAINT ON REPAIRED AREAS			40 80.00 300 400.00 400 500.00
	LABOUR TOTAL S\$		***	980.00

E. & O.E

NON-TAX AMOUNT S

AMOUNT S\$

4,053.50

GST @ 7 %

283.75

AMOUNT DUE S\$

4,337.25

40000068

3 days

48

30/08/19 @15W

Rewry etter regin (

Customer's Signature/Co. Stamp MOVA AUTOMOTIVE PTE LTD

Tadyn

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

LAIM SU	BFOLDER TRA	CKING					
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitte	d Ins Auth'ed	Status
Main	15 Aug 2019		16 Aug 2019 16:21 Edit Adj Rpt	S\$3,008.00 Edit Estimates	S\$3,008.00 View Rpt		Report Cancel Case
	Main	R	eference	Claim Det	tails	Document	s Show All
CLAIM S	UBFOLDER DE	TAILS			[Creat	ed by insurer]	
Insured:	-, Co. Re	g. No.; -					
Main Claimant:	TEO LAY	HWA, ID: S169	9514B				
Vehicle Re No.:	SDM234	15B		Date of	Loss: [76 Mo	2019 09:00 - :59 nths and 3 Days Fror	n LTA Reg Date (Man Yr)]
Claim Typ	e: TP / SN	M19D203722C0	2	Policy/C Note No		N18397518000	
Vehicle Re No. (Insured)	YP9788X			Policy N (Claima			
				Excess:	S\$1,500	0.00	
Repairer:		comotive Pte Ltd /64763333	(Bukit Merah) Blk	1008, #01-04/06/0	8/94, Bukit Mer	rah Lane 3, 159722 E	Bukit Merah - Tel:
Handling Insurer:	China Tai	ping Insurance	(Singapore) Pte. L	td. (HQ) - Tel: 6389	6111 [Han	dled by Tan Kah Led	ong - 63896193]
Claimant's Insurer:	NTUC Inc	ome Insurance	Co-operative Ltd (I	HQ) - Tel:			
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62	56-3561 [Handled	by MOHD RA	SUL] [Final Rp	t due 27/08/2019]
ASSOCIA	ATED MAIL RE	CEIVED				Vie	ew All Compose Case Mail
There are	no mail for this	case.					
ALL ASS	OCIATED TAS	re=			No	1	
2000 1000					View All		Create New Task Complete
Due Da	ite Priority	Type Task	Group Subjec	t Handler A	Assigned By	Completed On	Created On Done

Claim Documents

Up	load Documents Up	load Photos Compose New Letter	View	View in Brows	ser 🗸
Pho	tos/Images		3 per p	page 🔻	V
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	26/11/19 09:56	General View	0	Load JPG	V
2	26/11/19 09:56	General View	0	Load JPG	V
3	26/11/19 09:56	General View	0	Load JPG	V
4	26/11/19 09:56	General View	6	Load JPG	V
5	26/11/19 09:56	General View	0	Load JPG	V
6	26/11/19 09:56	General View	0	Load JPG	V
7	26/11/19 09:56	General View	6	Load JPG	V
8	26/11/19 09:56	General View	6	Load JPG	V
9	26/11/19 09:56	General View	0	Load JPG	V
10	26/11/19 09:56	General View	0	Load JPG	V
11	26/11/19 09:56	General View	6	Load JPG	V
12	26/11/19 09:56	General View	0	Load JPG	V
13	26/11/19 09:56	General View	0	Load JPG	V
14	26/11/19 09:56	General View	0	Load JPG	V
15	26/11/19 09:56	General View	0	Load JPG	V
16	26/11/19 09:56	General View	0	Load JPG	V
17	26/11/19 09:56	General View	0	Load JPG	V
18	26/11/19 09:56	General View	0	Load JPG	V

Linked Accident Report Documents

			View	View in Brows	ser 🗸
Ass	essment Reports		1 per p	page 🔻	V
No	Finalized On	Mova Automotive Pte Ltd (Bukit Merah)		Thumbnail	Print
1	07/08/19 17:33	Accident Statement	0	Load HTM	
Pho	otos/Images		3 per p	page 🔻	V
No	Finalized On	Mova Automotive Pte Ltd (Bukit Merah)		Thumbnail	Print
1	07/08/19 13:48	Accident Photo	0	Load JPG	V
2	07/08/19 13:48	Accident Photo	•	Load JPG	V
3	07/08/19 13:48	Accident Photo	0	Load JPG	V
4	07/08/19 13:48	Accident Photo	8	Load JPG	V
5	07/08/19 13:48	Accident Photo	0	Load JPG	V
6	07/08/19 13:48	Accident Photo	0	Load JPG	V
Doc	cumentation		1 per g	page 🗸	V
No	Finalized On	Mova Automotive Pte Ltd (Bukit Merah)		Thumbnail	Print
1	07/08/19 17:32	Sketch Plan	0	Load TIF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

/
V

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/CTI19014352/R1SF3E2

Date:

04/12/2019

REFERENCE

China Taiping Insurance Handling Insurer:

(Singapore) Pte. Ltd.

Policy No:

DMCVSN18397518000

Claimant Vehicle No:

SDM2345B

Insured Vehicle No:

YP9788X

Date of Loss:

07/08/2019

Nature of Claim: TP

Claim No:

SNM19D203722C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SDM2345B

Make & Model:

MERCEDES-BENZ C180, 1.6 (A)

Engine No:

27491030042753

Reg. Date: Colour:

04/04/2013 (Man. Year: 2013) Black

Chassis No: Odometer:

WDD2043312G081995 67175 km

Engine Capacity:

1595 cc

Market Value/New Car

N/A

Price:

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Sum Insured (S\$):

Steering (Serviceable):

Yes Engine Modification:

Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

225/45Z R17

Rear Tyre Size:

225/45Z R17

Front Left Side:

Michelin 6 mm

Rear Left Side:

Michelin 6 mm

Front Right Side:

Michelin 6 mm

Rear Right Side:

Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	3,073.50	2,268.00	805.50	26.21
Miscellaneous Items	0.00	0.00	0.00	
Labour	980.00	740.00	240.00	24.49
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	4,053.50	3,008.00	1,045.50	25.79
+ GST 7.00/7.00% (S\$)	283.75	210.56	73.19	25.79
Nett Amount (S\$)	4,337.25	3,218.56	1,118.69	25.79

INSPECTION

Date of Assignment:

16/08/2019

Date Inspected:

30/08/2019 Inspected At:

Mova Automotive Pte Ltd (Bukit

Merah)

Blk 1008, #01-04/06/08/94, Bukit

Merah Lane 3 Singapore 159722

Estimated Period of Repair:

3.0 days

Adjuster: MOHD RASUL Manager: Hiew May Fung Adjuster Report Page 2 of 5

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.

THE VEHICLE HAS NOT SEND IN FOR REPAIRS.

(REPAIR COST NOT CONCLUDE)

REPAIR DETAILS

Referen	ce				
Part Source	: MRM-SG	Version: 1.0 (Last Synchronised: 04 Dec 2019)			
Parts:	143	MERCEDES-BENZ C180 1.6 (A) (Catalogue:Merimen Singapore 1.0)			
Labour:	Repairer's	(Price-denominated Standard List)			
Print Code:	(Unsubmitted	, no print-code for SDM2345B)			
Validity:	These estima numbers with	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		*HEADLAMP LH	Scratched	1,045.00 FL	*1,045.00 FL
2	1		*FRONT BUMPER	Scratched	1,283.00 FL	*1,283.00 FL
3	1		*FRONT BUMPER CHROME LH	Necessary	96.00 FL	*96.00 FL
4	1		*FRONT BUMPER CHROME RH	Necessary	96.00 FL	*96.00 FL
5	1		*FRONT FENDER LH	Repair	895.00 FL	*-FL
F=Fra	anchise	part. L=ListIte		Sub Total (S\$)	3,415.00 341.50	2,520.00 252.00
			- List Item Discount on L Items	10.00/10.00% (5\$)_	341.50	252.00
				Total Parts (S\$)	3,073.50	2,268.00
			Report was unsubmitted d	uring this print-out.		•

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TO REMOVE & REPLACE DAMAGED ITEMS. REALIGN CONNECTION	New	400.00	300.00
2	TO SPRAY PAINT ON REPAIRED AREAS	New	500.00	400.00
3	TO INSPECT FRONT LIGHTING MECHANISM & RESET FUNCTION	New	80.00	40.00
	Gross Labour Cost (S\$)		980.00	740.00
	Report was unsubmitted dur	ing this print-out		

< END OF ESTIMATES >