

ASS. REC. BY:

REF:

08/AGI19014687/KYB

Special Instruction:

Survey: Kenneth

ASSIGNMENT (Office)

From (Person): Ivy Retilla

of AGI

Date/Time: 20/8/2019 @ 2:08pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SFL8362T

Insured: SKD272SC

at Workshop in/ BFG Sin Ming Autocare

Tel: 6455 0600.

of 176 Sin Ming Drive # 02-05

Policy No:

Claim No: C10003795/JM

Sum Insured:

Excess:

Make of Veh:

D.O.A. 16/08/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

22/8/19

H.O.D. Endorsement:

Date/Time: 11:18am @ 21/8/19

Person Contacted: Angela

Vehicle: IN/OUT

Date/Time	Action/Instruction
	Angela wants Kenneth to survey.
	SFL8362T-X.
	SKD272SC - NA/INC/19014687/21/8/19
23/8/19 @ 11:23am	revised to Ivy by email.

ASSIGNMENT

From:

Date:

22/8/19

Estimated Cost:

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

To inspect Vehicle No:

SFL 8362T

at Workshop m/s

BFA Sin Ming

of 176 Sin Ming Drive # 02-05

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

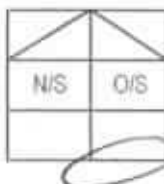
(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

04

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS 'up'

12/23

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SFL 8362T

Yr Regn:

12, 08

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

Truck / Trailer or

Make:

Audi

A4

C.C.

1798

Colour

M. Grey

A/C:

Insured / Std / NI / NA

Sp Reading

202728

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WTAU 2228K 89A 146402

Gen. Cond:

Good / Fair / Poor / Burnt

Steering:

In order / Jammed / Leaked / Burnt or

Brake:

In order / Jammed / Leaked / Burnt or

Modi:

Nil / S/Rim / STD / Rim or

Tyre Size:

F:

255/35R19

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

16/8/19

D.O.A.

22/8/19

Survey held at:

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

Rear O/S

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

Date / Time

Action / Instruction

30/8 1129 8490d email to confirm (Red to 6122.57, 56%)

RECEIVED 5 OCT 2019

Date/Time, File Pass to?

☐

: Prel. Report

11/31/10 1129

☐

: Final Report

Date/Time, File Return to?

3

Days Of Repair:

4

Resurvey No. of Trip:

2

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Parking

Others

TOTAL

350

Report Format:

7P

Lump Sum / HRS:

4900



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL.: (065) 62563561 FAX : (065) 62564315

Your Ref: C10003795/JM

Date: 23rd August 2019

Our Ref: CS/AG119014687/Kqd3

The Motor Claims Department
Auto & General Insurance (Budget Direct Insurance)

Attn: Ivy

Dear Sirs/Mdm

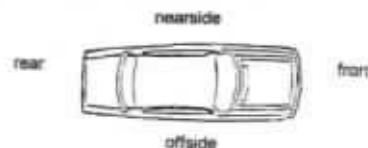
PRELIMINARY ADVICE OF VEHICLE NO. SFL 8362T

We thank you for the instruction on 16/08/2019.

Please be informed that we had conducted the inspection of the abovementioned vehicle on 22/08/2019 at the premises of M/s BFG SIN MING AUTOCARE and have the following to report:-

Workshop Estimate Amount	: S\$ <u>9,904.50</u>
Revised Estimate Amount	: S\$ <u>6,515.20</u>
"Check" Items Amount	: S\$ <u>218.50</u>
Market Value	: S\$ <u>-</u>
LTA Rebate Amount	: S\$ <u>-</u>
Nett Value	: S\$ <u>-</u>

Description of Damage:
The vehicle sustained damages at the rear o/s portion.



Comments/ Present Status:
Damages consistent.
Days of repair: 4 days.
We have NOT authorise repair.

Yours faithfully

KONG SENG CHEONG
Licensed Appraiser

Nivitha (LKK Auto)

From: Ivy Ratilla <ivy.r@budgetdirect.com.sg>
Sent: Tuesday, 20 August 2019 2:08 PM
To: Motor Claims; Claims; Admin-D (LKKAuto)
Cc: Julie Mangubat; sur@lkkauto.com
Subject: TPPD Survey: Claim ref:C10003795/JM || OI- SKD2725C (Black) TP- SFL8362T || Est:0.00 || Sin Ming Autocare
Attachments: SAS SFL8362T..pdf

Hi Team,

We would like to arrange for TP Survey for SFL8362T. Workshop has chosen Mr. Kenneth Kong to survey the vehicle.

Kindly confirm.

Regards,

Ivy Ratilla
Executive, Claims Admin

T +65 6540 2185
F +65 6725 0853
E ivy.r@budgetdirect.com.sg



Customer Care +65 6221 2111
Claims +65 6221 2199
Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01
Singapore Shopping Centre
Singapore
239924
budgetdirect.com.sg

auto  general

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as **Budget Direct Insurance**.

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From: Motor Claims <motorclaims@autocare.com.sg>
Sent: Tuesday, 20 August 2019 1:39 PM
To: Ivy Ratilla <ivy.r@budgetdirect.com.sg>; Claims <claims@budgetdirect.com.sg>
Cc: Julie Mangubat <julie.m@budgetdirect.com.sg>
Subject: RE: THIRD PARTY CLAIM SFL8362T & SKD2725C ACCIDENT ON 16.8.2019 || C10003795

Dear Ivy,

Our selection surveyor is Kenneth Kong (LKK)

Thank you

With Regards,
Angela Tan
Claims & Admin Executive



Sin Ming Autocare BFG Pte Ltd
176 SIN MING DRIVE, #02-05 SINGAPORE 575721
Email: motorclaims@autocare.com.sg
Tel : 6455 0600 | Fax : 6455 6192

From: Motor Claims <motorclaims@autocare.com.sg>
Sent: Tuesday, 20 August 2019 12:29 PM
To: Claims <claims@budgetdirect.com.sg>
Subject: THIRD PARTY CLAIM SFL8362T & SKD2725C ACCIDENT ON 16.8.2019

To: Auto & General Insurance Motor Claims Dept. (Arrangement of Surveyor Unit)

**RE: NOTICE TO THIRD PARTY INSURERS TO CONDUCT PRE-REPAIR INSPECTION WITHIN 2 WORKINGS DAY
PURSUANT TO
PARAGRAPH PHOTOCOL FOR NIN-INJURY MOTOR ACCIDENT CLAIMS (NIMA)
ACCIDENT INVOLVING SFL8362T & SKD2725C ALONG SLE TOWARDS CTE,5.8KM, LAMP POST 332 ON
16.08.2019**

We are repairer for CHAN XUAN LIANG the owner of vehicle no SFL2725C.

Please be informed that the said vehicle can inspected at the following venue:

Sin Ming Autocare BFG Pte Ltd
176 Sin Ming Drive #02-05 Singapore 575721
Tel: 6455 0600 Fax: 64556192 Email: motorclaims@autocare.com.sg

Contact Person: Angela Tan

Please also provide us a list of 10 surveyors as your nominated SJE (Single Joint Expert)

PLEASE ARRANGE OFFICER-IN-CHARGE TO LET US KNOW ASAP IF WE COULD DO DIRECT SETTLEMENT FOR THIS CASE.

Thank you

With Regards,
Angela Tan
Claims & Admin Executive



Sin Ming Autocare BFG Pte Ltd
176 SIN MING DRIVE, #02-05 SINGAPORE 575721
Email: motorclaims@autocare.com.sg
Tel : 6455 0600 I Fax : 6455 6192

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Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Friday, 23 August 2019 11:23 AM
To: 'Ivy Ratilla'; assignments; 'Claims'
Cc: 'Julie Mangubat'; SUR
Subject: RE: TPPD Survey: Claim ref:C10003795/JM || OI- SKD2725C (Black) TP- SFL8362T || Est:0.00 || Sin Ming Autocare
Attachments: CSAGI19014687Kqd3.pdf

Dear Ivy,

Enclosed herewith preliminary advice of SFL 8362T.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAUTO) <admin-d@lkkauto.com>
Sent: Wednesday, 21 August 2019 11:17 AM
To: 'Ivy Ratilla' <ivy.r@budgetdirect.com.sg>; assignments <assignments@lkkauto.com>; 'Claims' <claims@budgetdirect.com.sg>
Cc: 'Julie Mangubat' <julie.m@budgetdirect.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: TPPD Survey: Claim ref:C10003795/JM || OI- SKD2725C (Black) TP- SFL8362T || Est:0.00 || Sin Ming Autocare

Dear Sir/Mdm,

Thank you for the assignment.

Please be informed that repairer arrange survey on 22/08/2019.

Best Regards

G.NIVITHA

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ivy Ratilla [<mailto:ivy.r@budgetdirect.com.sg>]
Sent: Tuesday, 20 August 2019 2:08 PM
To: Motor Claims <motorclaims@autocare.com.sg>; Claims <claims@budgetdirect.com.sg>; Admin-D (LKKAUTO) <admin-d@lkkauto.com>
Cc: Julie Mangubat <julie.m@budgetdirect.com.sg>; sur@lkkauto.com

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	19/08/2019 10:16
Date Of Accident	16/08/2019 19:30
Exact Location Of Accident	SLE TOWARDS CTE, 5.8KM, LAMP POST 332.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFL8362T
Insured/Policyholder	
Name Of Registered Owner	CHAN XUAN LIANG
NRIC No	S9242051E
Email Address	SHINCHAN1517@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93859070
Alternative Phone No	OTHERS-93859070
Vehicle Particulars	
Manufacturer	AUDI
Model	A4 1.8 TFSI MU ATTRACTION
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 CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	18000144356
Cover Note Number	
Driver	
Name of Driver	CHAN XUAN LIANG
NRIC No	S9242051E
Date Of Birth	09/11/1992
Occupation	INDOOR
Date Of Driving Pass	27/02/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	+65-93859070
Fax Number	
Contact Number	OTHERS-93859070
Email Address	SHINCHAN1517@GMAIL.COM

Address BLK 363 WOODLANDS AVENUE 5
#07-434
Postcode 730363
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 5
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. YES
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
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: T/201980817/7014.

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 SKD2725C
Vehicle Make/Model/Colour HYUNDAI
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJD5744P

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 OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SMD8663J

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 OTHER VEHICLE PROPERTY 4

Vehicle Registration Number

SJR8883C

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

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SKD2725C

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

YES

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.

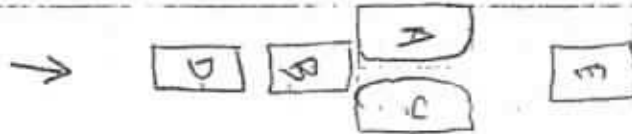

 Policyholder's Signature
 Date & Time:
 19 AUG 2019
 10:10 AM

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


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

SKETCH PLAN

A - SFL8362 T (mine)
 C - SJD5744P
 B - SKD2725C
 D - SMD8663J
 E - SJR8883C



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along lane 1 on SLE towards CTE, L/P 332 when a car in front of me E-brake (SJR8883C). I managed to e-brake in time. However, as I checked my rear mirror, the car that was behind me (C), was coming up at a very fast speed. Instantly, I swerve my car slightly to the left, whilst keeping within lane 1, before I managed to swerve, car B had collided into my rear, while pushing car C beside my car.

Refer to Police report: T/20190817/7014.

Repair at workshop: Vas Motorwerkz Pte Ltd

DECLARATION

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

Policyholder's Signature
 Date & Time: 19 AUG 2019

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

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



**SINGAPORE
POLICE FORCE**



T/20190819/7013

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20190819/7013

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/08/2019 13:29		Vide Report No.: L/20190816/0130		Station Diary No.:	
Informant's Particulars					
Name of Informant: CHAN XUAN LIANG			Address: APT BLK 363 WOODLANDS AVENUE 5 #07-434 SINGAPORE 730363		
ID Type / ID No.: NRIC NO / S9242051E			Contact No.: Home/Office: Mobile: 93859070		
Nationality: SINGAPORE CITIZEN			Email: shinchan1517@gmail.com		
Sex: Male	Age: 26	Date of Birth: 09/11/1992	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: INSURANCE AGENT			Driving Licence Information: Class: 3A		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/08/2019 19:30	Type of Location: Straight Road
Location: SLE towards CTE L/p 332				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFL8362T	Car	AUDI	A4+1.8T+FS I+MU+CVT+ ABS+D/AB+ 2WD+4DR	Grey	Seriously Damaged	0
SJD5744P	Car	MERCEDES BENZ				0
SJR8883C	Car	MERCEDES BENZ		White		0
SKD2725C	Car	HYUNDAI				1



**SINGAPORE
POLICE FORCE**



T/20190819/7013

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20190819/7013

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMD8663J	Car	MERCEDES BENZ		Black		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SFL8362T	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800144366	29/12/2018	28/12/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHAN XUAN LIANG		ID No. S9242051E
Related Vehicle	SFL8362T (Car)		Contact No. 93859070
Hospital/Clinic	MOUNT ELIZABETH NOVENA HOSPITAL		Class of Driving Licence & Expiry Date Class: 3A Date of Expiry: NIL
Date Treatment	17/08/2019		Date Discharge 17/08/2019
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

I was travelling on lane 1 at SLE towards CTE, L/P 332, when a car (SJR8883C) that was in front of me E-brake. As such, I proceed to E-brake my car in time. However, from my rear mirror, the car behind me was approaching me at a relatively fast speed, instinctively, I swerve slightly to my left, while maintaining my position within lane 1. The car that was behind me, (SMD8663J) hit me slightly and brushed pass me on the right, while the car that was behind SMD8663J, (SKD2725C) collided into my rear

Subsequently, another car (SJD5744P) hit SKD2725C.



**SINGAPORE
POLICE FORCE**



T/20190819/7013

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190819/7013

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
HO JIEKANG, IVAN
Contact No.: 65476170

Authentication Stamp

NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:
19/08/2019 13:29

Classification Of Case:



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-03 Singapore 048880
 Tel: (65) 6224 0010 Fax: (65) 6224 0010
 Operating Hours: Monday to Friday, 09:00 - 17:00
 UEN: S66990000 / GST Reg. No: T400027728

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MLHM19108149 Vehicle Registration No: SFL 8362T
 Name (as shown in NRIC): CHAN YUAN LIANG NRIC/FIN/Passport No: S9242051C
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address: 363 WOODLANDS AVE 5 #03-434 Singapore (730363)
 Contact (Tel): _____ Mobile No: 93859070
 Email Address: _____
 Date of Accident: 16/8/19 Time of Accident: 19:30
 Place of Accident: SLE TOWARDS CTC, 5.8km, LAMP POST 332
 Insurance Company: MG ASIA PACIFIC INSURANCE

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

REFER TO SKETCH PLAN, VEHICLE C SHOULD BE SMD 8663J
AND VEHICLE D SHOULD BE SSD 5744P

A - SFL 8362T
B - SKD 2725C
C - SMD 8663J
D - SSD 5744P
E - SSR 8883C

Policyholder / Driver's Signature

Date:

20 AUG 2019

Reporting Centre Personnel's Signature

Name: Jenny

NRIC/FIN No.:

Date:

20 AUG 2019



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
Sin Ming Autocare Complex
Singapore 575721
Tel : (65) 6455 0600
Fax : (65) 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

BUDGET DIRECT INSURANCE

190 CLEMENCEAU AVE

#03-01 SINGAPORE SHOPPING CENTRE 239924

Attention : Motor Claim Department

Contact : 62212111

Estimate : E19/2508

Date : 21/08/2019

Vehicle Num. : SFL8362T

Make/Model : AUDI A4-2008

Chassis/Eng# : WAUZZZ8K89S146402

Accident Date : 16/08/2019

Claim No. : BFG

Reference : TP CLAIM

Policy No. : 1800144356 (AIG)

*Not Notified
L1 Rm 8?
Resony After Paint
4 days*

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

- | | | | | |
|-----|------|---------------------------|--|--|
| 1. | 1PC | LIST ITEMS : | | |
| 2. | 2PCS | REAR BUMPER | | |
| 3. | 1PC | REAR BUMPER RETAINER | | |
| 4. | 2PCS | REAR BUMPER TOWING COVER | | |
| 5. | 1PC | REAR BUMPER BRACKET | | |
| 6. | 1PC | REAR BUMPER REINFORCEMENT | | |
| 7. | 2PCS | REAR BUMPER LOWER SPOILER | | |
| 8. | 1PC | TAILLAMP | | |
| 9. | 1PC | BOOT LID REFLECTOR RH | | |
| 10. | 1PC | BOOT LID | | |
| 11. | 1PC | EMBLEM (A4) | | |
| 12. | 1PC | REAR END PANEL | | |
| 13. | 1PC | REAR END PANEL GARNISH | | |
| 14. | 1PC | BOOT LID INNER LOCK | | |
| 15. | 1PC | BOOT LID RUBBER | | |

List TotalS\$:

5.00% Discount S\$:

- | | | | | |
|----|------|----------------------|--|--|
| 1. | 1PCS | SPECIAL NETT ITEMS : | | |
| 2. | 6PCS | REVERSE SENSOR | | |
| | | BUMPER CLIPS | | |

Special Nett Total S\$:

LABOUR :

TO PUTTY & SPRAY PAINT ALL AFFECTED AREAS

TO KNOCK, STRAIGHTEN, REALIGN ALL AFFECTED AREAS &

1,664.00	✓
75.00	✓
150.00	✓
85.00	✓
115.00	✓
230.00	✓
693.00	✓
486.00	✓
346.00	✓
692.00	✓
202.00	✓
1,564.00	✓
73.00	✓
625.00	✓
328.00	✓
225.00	✓
253.00	✓
7,270.00	
363.50	
6,906.50	

352.00	1,408.00	✓
5.00	30.00	✓
	1,438.00	
	650.00	

CONTINUE / ...

UK Auto Consultants hence notify the Repairer of the following:

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

Acknowledged by Repairer

Signature:

Date:



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
 Sin Ming Autocare Complex
 Singapore 575721
 Tel : (65) 6455 0600
 Fax : (65) 6455 6192
 Website: www.autocare.com.sg
 GST Reg. No: 20-0210033-N

BUDGET DIRECT INSURANCE
 190 CLEMENCEAU AVE
 #03-01 SINGAPORE SHOPPING CENTRE 239924

Attention : Motor Claim Department
 Contact : 62212111

Estimate : E19/2508

Date : 21/08/2019
 Vehicle Num. : SFL8362T
 Make/Model : AUDI A4-2008
 Chassis/Eng# : WAUZZZ8K89S146402
 Accident Date : 16/08/2019
 Claim No. : BFG
 Reference : TP CLAIM
 Policy No. : 1800144356 (AIG)

S/N	Quantity	Particular	Unit Price	Amount S\$
		RENEW PARTS AS ABOVE		500/-
		TO REMOVE & REFIX REVERSE SENSOR	60/-	650.00
		TO REMOVE & REFIX BOOTLID PARTS	60/-	80.00
		TO CHECK ELECTRICAL WIRINGS	20/-	60.00
		RUST PROOFING ON AFFECTED PORTIONS	30/-	40.00
		Labour Total S\$:		1,560.00

E. & O.E.

Total S\$: 9,904.50

for Sin Ming Autocare BFG Pte Ltd



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
Sin Ming Autocare Complex
Singapore 575721
Tel : (65) 6455 0600
Fax : (65) 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

MSIG INSURANCE (SINGAPORE) PTE LTD
4 SHENTON WAY #21-01 SGX CENTRE 2
SINGAPORE 068807

Estimate : E19/2508

Attention : Motor Claim Department

Contact : 6827 7666 6827 7660 Fax No. : 6225 6371

Date : 21/08/2019
Vehicle Num. : SFL8362T
Make/Model : AUDI A4-2008
Chassis/Eng# : WAUZZZ8K89S146402
Accident Date : 16/08/2019
Claim No. : BFG
Reference : TP CLAIM
Policy No. : 1800144356 (AIG)

Not Authorized
L1P & 4900h
Resurvey After Paint 5days

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

- | | | | | |
|-----|------|---------------------------|---------|--|
| 1. | 1PC | LIST ITEMS : | | |
| 2. | 2PCS | REAR BUMPER | 1395.10 | |
| 3. | 1PC | REAR BUMPER RETAINER | | |
| 4. | 2PCS | REAR BUMPER TOWING COVER | | |
| 5. | 1PC | REAR BUMPER BRACKET | | |
| 6. | 1PC | REAR BUMPER REINFORCEMENT | | |
| 7. | 2PCS | REAR BUMPER LOWER SPOILER | | |
| 8. | 1PC | TAILLAMP | | |
| 9. | 1PC | BOOT LID REFLECTOR RH | | |
| 10. | 1PC | BOOT LID | 1250 | |
| 11. | 1PC | EMBLEM (A4) | | |
| 12. | 1PC | REAR END PANEL | | |
| 13. | 1PC | REAR END PANEL GARNISH | | |
| 14. | 1PC | BOOT LID INNER LOCK | | |
| 15. | 1PC | BOOT LID RUBBER | | |
| 16. | 1PC | TAIL LAMP INNER PANEL | | |
| 17. | 1PC | AIR INTAKE VENT | | |

List TotalS\$:
5.00% Discount S\$:

01/01/1	75.00	Tn	1,664.00	✓
01/01/1	115.00	Rd	150.00	✓
01/01/1	115.00	Rd	85.00	✓
01/01/1	346.00	Rd	230.00	✓
01/01/1	346.00	Rd	693.00	✓
01/01/1	346.00	Rd	486.00	✓
01/01/1	346.00	Rd	692.00	✓
01/01/1	346.00	Rd	202.00	✓
01/01/1	346.00	Rd	1,564.00	✓
01/01/1	346.00	Rd	73.00	✓
01/01/1	346.00	Rd	625.00	✓
01/01/1	346.00	Rd	328.00	✓
01/01/1	346.00	Rd	225.00	✓
01/01/1	346.00	Rd	253.00	✓
01/01/1	346.00	Rd	174.50	✓
01/01/1	346.00	Rd	55.05	✓
List TotalS\$:			7,499.55	
5.00% Discount S\$:			374.98	
			7,124.57	

- | | | | | |
|----|------|----------------------|---------|--|
| 1. | 1PCS | SPECIAL NETT ITEMS : | | |
| 2. | 6PCS | REVERSE SENSOR | 0245.00 | |
| | | BUMPER CLIPS | | |

Special Nett Total S\$:

LABOUR :
TO PUTTY & SPRAY PAINT ALL AFFECTED AREAS

84m	352.00	1,408.00	✓
5.00	30.00	30.00	✓
		1,438.00	
		1,200.00	✓

CONTINUE / ...

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before 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:



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
Sin Ming Autocare Complex
Singapore 575721
Tel : (65) 6455 0600
Fax : (65) 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

MSIG INSURANCE (SINGAPORE) PTE LTD
4 SHENTON WAY #21-01 SGX CENTRE 2
SINGAPORE 068807

Attention : Motor Claim Department

Contact : 8827 7666 6827 7660 Fax No. : 6225 6371

Estimate : E19/2508

Date : 21/08/2019
Vehicle Num. : SFL8362T
Make/Model : AUDI A4-2008
Chassis/Eng# : WAUZZZ8K89S146402
Accident Date : 16/08/2019
Claim No. : BFG
Reference : TP CLAIM
Policy No. : 1800144356 (AIG)

S/N	Quantity	Particular	Unit Price	Amount S\$
		TO KNOCK, STRAIGHTEN, REALIGN ALL AFFECTED AREAS & RENEW PARTS AS ABOVE		1,000.00
		TO REMOVE & REFIX REVERSE SENSOR		80.00
		TO REMOVE & REFIX BOOTLID PARTS		80.00
		TO CHECK ELECTRICAL WIRINGS		60.00
		RUST PROOFING ON AFFECTED PORTIONS		40.00
		Labour Total S\$:		2,460.00

6000
600
600
200

E. & O.E.

Total S\$: 11,022.57

=====

for Sin Ming Autocare BFG Pte Ltd



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

Affiliated to Federation Internationale Des Experts En Automobile				
AUTO & GENERAL INSURANCE (S) PL		Ref : CS/AGI19014687/Kqd3n2		
(BUDGET DIRECT INSURANCE) 190 CLEMENCEAU AVENUE #03-01 SINGAPORE SHOPPING CENTRESINGAPORE 239924		Date : 04-11-2019		
		Code : AGI		
1. Policy Particulars :- THIRD PARTY CLAIM				
	Insured Veh.	SKD 2725C	Veh. Inspected	SFL 8362T
	Policy No.		Coverage (\$)	0.00
	Claim No.	C10003795/JM	Excess (\$)	0.00
	Assign From	IVY RATILLA	Assign Date	20/08/2019
2. Vehicle Particulars & Condition				
	Make & Model	AUDI A4 (A)	c.c	1798
	Engine No.	HIDDEN	Year of Reg.	2008
	Chassis No.	WAUZZZ8K89A146402	Colour	METALLIC GREY
	Odometer	202728	Steering	IN ORDER
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
	General	GOOD		
3. Conditions of Tyres				
		Size	Make	Balance
	R/H Front Tyre	255/35 R19	MICHELIN	7 mm
	L/H Front Tyre	255/35 R19	MICHELIN	7 mm
	R/H Rear Tyre	255/35 R19	MICHELIN	7 mm
	L/H Rear Tyre	255/35 R19	MICHELIN	7 mm
4. Description of Damages				
	THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.			
	DAMAGES SEE DETAILS.			
5. General Information				
	Accident Date	16/08/2019	Inspection Date	22/08/2019
	Survey held at	SIN MING AUTOCARE BFG PTE LTD 176, SIN MING DRIVE #02-05 SIN MING AUTOCARE COMPLEX SINGAPORE 575721		
5a. Remarks				
	A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair				
	ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days	



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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SFL 8362T

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	TORN	1,664.00	1,395.10
2	REAR BUMPER RETAINER @\$75.00	O/S DISTORTED	150.00	75.00
1	REAR BUMPER TOWING COVER	DENTED	85.00	85.00
2	REAR BUMPER BRACKET @\$115.00	O/S CRACKED	230.00	115.00
1	REAR BUMPER REINFORCEMENT	BENT	693.00	693.00
1	REAR BUMPER LOWER SPOILER	BUCKLED / DENTED	486.00	486.00
2	TAILLAMP @\$346.00	O/S CUT	692.00	346.00
1	BOOT LID REFLECTOR RH	SERVICEABLE	202.00	-
1	BOOT LID	BENT	1,564.00	1,250.00
1	EMBLEM (A4)	NECESSARY	73.00	73.00
1	REAR END PANEL	TO REPAIR SEE LABOUR	625.00	-
1	REAR END PANEL GARNISH	SERVICEABLE	328.00	-
1	BOOT LID INNER LOCK	TO REPAIR SEE LABOUR	225.00	-
1	TAIL LAMP INNER PANEL	BENT	174.50	174.50
1	AIR INTAKE VENT	CRACKED	55.05	55.05
	LESS 5% DISCOUNT		-362.33	-237.38
			6,884.22	4,510.27
1	BOOT LID RUBBER (50%)(SN)	DISTORTED / DENTED	253.00	126.50
	LESS 5% DISCOUNT		-12.65	-
			240.35	126.50
SPECIAL NETT ITEMS				
4	REVERSE SENSOR @\$352.00 (SN)	SHORTED (1 PC ONLY)	1,408.00	245.00
6	BUMPER CLIPS @\$5.00 (SN)	NECESSARY	30.00	30.00
			1,438.00	275.00
LABOUR				
	TO PUTTY & SPRAY PAINT ALL AFFECTED AREAS.		1,200.00	600.00

Report Ref No. CS/AGI19014687/Kqd3n2



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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO KNOCK,STRAIGHTEN,REALIGN ALL AFFECTED AREAS & RENEW PARTS AS ABOVE.INCLUSIVE OF THE REPAIR OF REAR END PANEL AND BOOT LID INNER LOCK.		1,000.00	600.00
	TO REMOVE & REFIX REVERSE SENSOR.		80.00	60.00
	TO REMOVE & REFIX BOOTLID PARTS.		80.00	60.00
	TO CHECK ELECTRICAL WIRINGS.		60.00	20.00
	RUST PROOFING ON AFFECTED PORTIONS.		40.00	40.00
			2,460.00	1,380.00
GRAND TOTAL			11,022.57	6,291.77
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				4,900.00

Report Ref No. CS/AGI19014687/Kqd3n2

KONG SENG CHEONG

Licensed Appraiser

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