

ASS. REC. BY:

REF: 08/INC19014705/KSD302 Special Instruction:

Surveyor: KennethASSIGNMENT (Office)From (Person): Daniel Koh of INC Date/Time: 9:15am @ 2/18/19

Estimated Cost: _____ Bill for: _____

OD ~~FF~~ WS/TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLV 2243U Insured: SMJ 284Rat Workshop m/s: Lien Her Motor Tel: 91082728of Blk 5038 # 01-405 AMK hd. park 2Policy No: _____ Claim No: M1/1057583-002

Sum Insured: _____ Excess: _____

Make of Vch: _____ D.O.A. 14/8/2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 10:44am @ 2/18/19 Person Contacted: Anthony Vehicle IN OUT

Date/Time	Action/Instruction
	<u>10:44am</u>
	<u>C/Sy 836501 Confirmed</u>
	<u>(5 3,716.73 Red - 51%)</u>

ASS. REC. BY:

REF:

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

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

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

1 / File pass to

RECEIVED 11/11/2019

Veh No:

SVV 2243V

Yr Regn:

12.17

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

Truck / Trailer or

Make:

Toy CHR

c.c

17PZ

Colour:

M. Gray

A/C:

Insured / Std / NI / NA

Sp. Reading

156147

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

74X10

2087406

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215/60R17

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front

Rear

R/Bal.

J mm

R/Bal.

J mm

L/Bal.

J mm

L/Bal.

J mm

D.O.A.

14/8/19

D.O.I.

21/8/19

Survey held at

10:40

Des. of Damages: Fnt / Rear / O/S / N/S / UIC / Rooftop or

N/S Rear body

The UIC / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

12/11/19

1) Typist

Date/Time, File Return to?

2)



: Prel. Report



: Final Report

Days Of Repair:

4

Resurvey No. of Trip:

2

Survey Fee:

Transportation:

\$ - RS - SI

Fixes

Others

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

Report Format :

Lump Sum / I.B.I. (\$

3,650/- 4/51

TOTAL

250

Nivitha (LKK Auto)

From: Daniel Koh <daniel.koh@income.com.sg>
Sent: Wednesday, 21 August 2019 3:43 PM
To: 'assignments@lkkauto.com'
Cc: admin-d@lkkauto.com
Subject: FW: TP CASES FARMED OUT TO LKK ON 21/8/2019

Dear LKK,

RESEND WITH CLAIM NUMBER & OIC

From: Daniel Koh
Sent: Wednesday, 21 August 2019 9:45 AM
To: 'assignments@lkkauto.com' <assignments@lkkauto.com>
Cc: 'admin-d@lkkauto.com' <admin-d@lkkauto.com>; Teng Ken Leong <kenleong.teng@income.com.sg>; Thio Tse Kiat <tsekiat.thio@income.com.sg>
Subject: FW: TP CASES FARMED OUT TO LKK ON 21/8/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng's instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	OIV	DOA	Additional Remarks
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1	FIONA SHEN	MT/1057247-002	SKS9427M	CARZ AUTO SERVICES PTE LTD	61 WOODLANDS INDUSTRIAL PARK E9 (E9 PREMIUM) #04-04 SINGAPORE 757047	Jeslyn Chua / 8322 7418	SLG4424E	13/8/2019	
2	HELENA TAN	MT/1052090-002	GBC4504Y	CYS AUTOMOBILE SERVICES PTE LTD	38 WOODLANDS INDUSTRIAL PARK E1 #07-17 ADMIRALTY IND PARK SINGAPORE 757700	Ms Tee Wee Sin / 62192098	FBL5374B	5/7/2019	
3	JEFF LIN	MT/1057583-002	SLV2243U	LIAN HER MOTORS	BLK 5038 #01-405 ANG MO KIO INDUSTRIAL PARK 2	Anthony Cheong / 91082728	SMJ284R	14/8/2019	1/8/2019
4	WO JESSIE	MT/1058357-002	SHB6644Y	SOON HOCK MOTOR PTE LTD	10 ANG MO KIO IND PK 2-A #01-05/06 AMK AUTOPOINT SINGAPORE 568047	Ms Lynn or Ms Irene / 65425119	PC7436A	17/8/2019	6542 7162
5	WO JESSIE	MT/1058567-001	SHD3069S	SOON HOCK MOTOR PTE LTD	10 ANG MO KIO IND PK 2-A #01-05/06 AMK AUTOPOINT SINGAPORE 568047	Ms Lynn or Ms Irene / 65425119	SGC269T	18/8/2019	6542 7162

7/8 NTUC

MSUB19106260 / Eu Brothers' Motor Workshop - AMK
ENTRY DATE & TIME: 14/08/2019 14:49
SUBMITTED BY: Koh Siew Ling

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 willful 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	14/08/2019 14:49
Date Of Accident	14/08/2019 08:40
Exact Location Of Accident	MARINA BOULEVARD TWDS SHEARES AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV2243U
Insured/Policyholder	
Name Of Registered Owner	H.L CAR RENTAL PTE LTD
Co Reg No	201004543E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87829671
Alternative Phone No	OFFICE-87829671

Vehicle Particulars

Manufacturer	TOYOTA
Model	C-HR
Exact Purpose for which vehicle was being used at time of accident	GRAB
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5109155610-000103
Cover Note Number	

Driver

Name of Driver	TAN SIONG HUAT (CHEN SONGFA)
NRIC No	S7720686H
Date Of Birth	23/07/1977
Occupation	OUTDOOR
Date Of Driving Pass	03/12/2004
Driving Experience	14 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87829671
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 108 HOUGANG AVE 1 #04-1285
Postcode	530108
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own 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)	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

I WAS TRAVELLING FROM MARINA BOULEVARD TURNING LEFT TOWARDS SHEARES AVE WHEN CAR B HIT MY SIDE.

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	SMJ284R
Vehicle Make/Model/Colour	TOYOTA
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	TAN SIONG HUAT (CHEN SONGFA)
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Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLV2243U

Were seat belts worn?

Was this injured conveyed to hospital by
ambulance?

Address

Postcode

SKETCH PLANIMPORTANT 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 willful misrepresentation or withholding of material facts may allow insurance companies to regulate 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 if needed.
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 Insurers) 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 server of providers/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/are 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 based 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, law or court orders.

H.L. CAR RENTAL PTE LTD

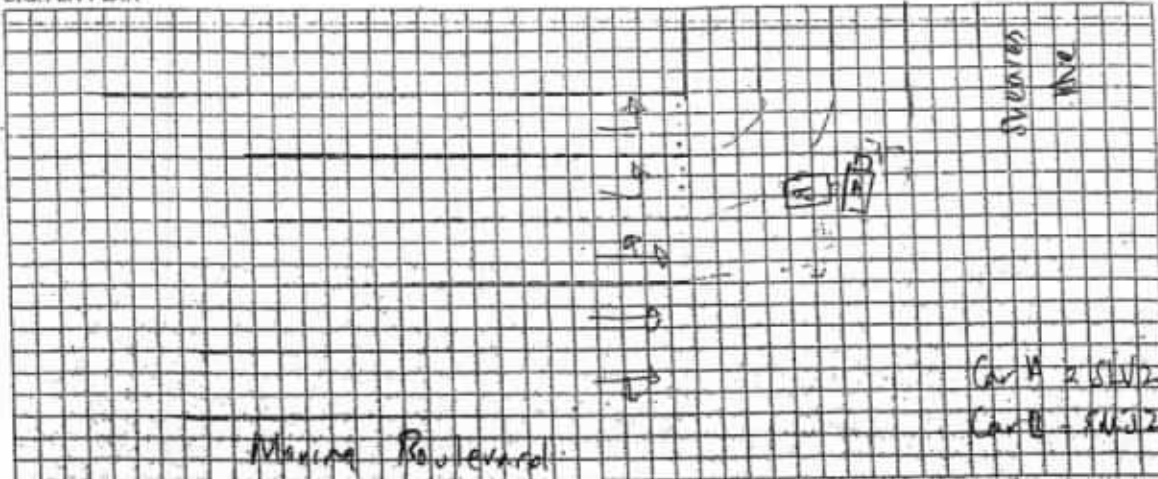
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling from Marina Boulevard turning left towards squares Ave when Car B hit my side.

DECLARATION

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

H.L. CAR RENTAL PTE LTD

Policyholder's Signature
Date & Time:

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

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

612442 1111111111111111

Lian Her Motors

Blk 5038 #01-405 Ang Mo Kio Industrial PK 2 Singapore 569541
Tel : 64817221

Fax : 64816131

NTUC Income
73 Bras Basah Road
#05-01 NTUC Trade Union House
Singapore 188556

Vehicle No : SLV 2243 U
Make/Model : Toyota C-HR
Year : 2017

*Not Authorized
C/Pg 836501
Recovery After Paint*

Qty	Description	Unit Price	Amount
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Estimate cost of repair

1 pc	Rear n/s door assy	<i>RM</i> \$1,218.50	<i>✓</i>
1 pc	Rear n/s door protector	<i>RM</i> \$376.10	<i>✓</i>
1 pc	Rear n/s door frame black sticker	<i>RM</i> \$134.50	<i>✓</i>
1 pc	Rear n/s fender arch garnish	<i>RM</i> \$255.10	<i>✓</i>
1 pc	Rear bumper	<i>RM</i> \$1,183.60	<i>x</i>
1 pc	Rear bumper lower garnish	<i>RM</i> \$655.70	<i>✓</i>
1 pc	Rear n/s shock absorber	<i>RM</i> \$497.80	<i>✓</i>
1 pc	Rear n/s lower arm	<i>RM</i> \$497.80	<i>✓</i>
1 pc	Rear n/s knuckle arm	<i>RM</i> \$847.60	<i>✓</i>
1 pc	Rear n/s trailing arm	<i>RM</i> \$255.60	<i>✓</i>
		\$5,922.30	
		Less 25 %	\$1,480.57
			\$4,441.73

S Nett

1 pc	Rear n/s tyre rim	<i>RM</i> \$450.00	<i>✓</i>
20 pcs	Clip	\$2.50 <i>RM</i>	<i>✓</i>

Labour Charges

Remove/renew the above parts including knocking, welding & cutting.	\$800.00	<i>4001</i>
To putty and spray paint	\$800.00	<i>4401</i>
Check & reconnect wiring	\$45.00	<i>201</i>
To respray anti-rust proofing treatment	\$120.00	<i>301</i>
Remove/refit rear tail-gate mechanism to new door.	\$150.00	<i>601</i>
		balance c/f
		\$6,856.73



SLV 2243 U

balance b/f \$6,856.73

Labour Charges

Remove/renew rear axle, hub and shock absorber.

\$450.00 7602

Check and realign wheel alignment.

\$60.00 ✓

Total

\$7,366.73



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

DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19014705/Ksd3n2

73 BRAS BASAH ROAD

Date: 18-11-2019

#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556



ATTN: JEFF LIN

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SMJ 284R	Veh. Inspected	SLV 2243U
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1057583-002	Excess (\$)	0.00
Assign From	DANIEL KOH	Assign Date	21/08/2019

2. Vehicle Particulars & Condition

Make & Model	TOYOTA C-HR (A)	c.c	1797
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	ZYX102087406	Colour	METALLIC GREY
Odometer	156147 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R17	YOKOHAMA	8 mm
L/H Front Tyre	215/60 R17	YOKOHAMA	8 mm
R/H Rear Tyre	215/60 R17	YOKOHAMA	8 mm
L/H Rear Tyre	215/60 R17	YOKOHAMA	8 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S REAR BODY.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	14/08/2019	Inspect Date / Time	21/08/2019 (10:40 AM)
Survey held at	LIAN HER MOTORS BLK 5038 ANG MO KIO INDUSTRIAL PARK 2, #01-405 SINGAPORE 569541.		

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. SLV 2243U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR N/S DOOR ASSY	BENT	1,218.50	1,218.50
1	REAR N/S DOOR PROTECTOR	SERVICEABLE	376.10	-
1	REAR N/S DOOR FRAME BLACK STICKER	NECESSARY	134.50	134.50
1	REAR N/S FENDER ARCG GARNISH	CUT	255.10	255.10
1	REAR BUMPER	TO REPAIR SEE LABOUR	1,183.60	-
1	REAR BUMPER LOWER GARNISH	CUT	655.70	655.70
1	REAR N/S SHOCK ABSORBER	SERVICEABLE	497.80	-
1	REAR N/S LOWER ARM	DISTORTED	497.80	497.80
1	REAR N/S KNUCKLE ARM	BENT	847.60	847.60
1	REAR N/S TRAILING ARM	DISTORTED	255.60	255.60
	LESS 25% DISCOUNT		-1,480.58	-966.20
			4,441.72	2,898.60
SPECIAL NETT ITEMS				
1	REAR N/S TYRE RIM (SN)	DENTED / SCRATCHED	450.00	450.00
20	CLIP @\$2.50 (SN)	NECESSARY	50.00	50.00
			500.00	500.00
LABOUR				
	REMOVE/RENEW THE ABOVE PARTS INCLUDING KNOCKING,WELDING & CUTTING.INCLUSIVE OF THE REPAIR OF REAR BUMPER.		800.00	400.00
	TO PUTTY AND SPRAY PAINT.		800.00	440.00
	CHECK & RECONNECT WIRING.		45.00	20.00
	TO RESPRAY ANTI-RUST PROOFING TREATMENT.		120.00	30.00
	REMOVE/REFIT REAR TAIL-GATE MECHANISM TO NEW DOOR.		150.00	60.00
	REMOVE/RENEW REAR AXLE,HUB AND SHOCK ABSORBER.		450.00	160.00
	CHECK AND REALIGN WHEEL ALIGNMENT.		60.00	60.00
			2,425.00	1,170.00
GRAND TOTAL			7,366.72	4,568.60

Report Ref No. CS/INC19014705/Ksd3n2



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			3,650.00
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Report Ref No. CS/INC19014705/Ksd3n2

KONG SENG CHEONG

Licensed Appraiser

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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