22/02/2019

ASS. REC. BY: | REF: CS/INC/A015591/Kod3n2 | Special Instructions:

Assessor: Kennith

ASSIGNMENT (Office)

From (Person): Annie Koh of INC Date/Time: 9.41am @ 3/9/19

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLV 2705D Insured: SCV 5017T

at Workshop m/s Lian Her Motor Tel: 9108 2728

of Blk 5038 #01-405 Amk hd·park 2

Policy No: Claim No: MT/1060555-001

Sum Insured: Excess:

Make of Veh: D.O.A. 16/8/19
(Client's Record)

CA / REV / REP. / REV 24 HRS (up)

R.O.D. Endorsement:

Date/Time: 10.20am @ 3/9/19 Person Contacted: Anthony Vehicle IN / OUT

Date/Time	Action/Instruction
	SLV 2705D - NA/CTI180698S2/24 Dor: 30/5/2018
	SCV 5017T - CS/AXA13000067/71vu2 Dor: 24/12/2012
919	Liaise & 2850 email & Confirm
	($ 2,514.12 Red - 47%)

ASS. REC. BY: Kenneth | REF: INC/

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s Liang Her

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SLV 2705D Yr Regn: 12, 17

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (A)

Make: Toy CHR c.c 1797

Colour M. Brown A/C: Insured / Std / NI / NA

Sp.Reading 136212 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ZYX10 · 208P790

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi : Nil / S/Rim / STD A/Rim or _____

Tyre Size: 215/60R17

Bing Long

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

Front		Rear	
R/Bal.	7 mm	R/Bal.	3 mm
L/Bal.	7 mm	L/Bal.	3 mm
D.O.A.	1/19	D.O.I	3/9/19

Survey held at _____ 1.54pm

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

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

Date / Time	Action / Instruction
/	File pass to

RECEIVED 13 SEP 2019

Date/Time, File Pass to? 13/09/19

1) Type: 4

Date/Time, File Return to?

2)

☐ : Prell. Report

☑ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee: 250

Transportation: $ - RS ___ SI

Parts

Others

TOTAL

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ Tech Invs ($)

☐ Weekend ($)

Report Format :

Lump Sum / I.B.I: (S 2,850/- 4S

Nivitha (LKK Auto)

From: Annie Koh <annie.koh@income.com.sg>
Sent: Tuesday, 3 September 2019 11:13 AM
To: 'assignments@lkkauto.com'; Admin-D (LKKAuto)
Subject: RE: TP CASES FARMED OUT TO LKK ON 03/09/2019

Re-send

Warmest Regards

Annie Koh
Senior Admin,
Motor Insurance
T +65 64307899
www.income.com.sg

income
made different

From: Annie Koh
Sent: Tuesday, 3 September 2019 9:41 AM
To: 'assignments@lkkauto.com' <assignments@lkkauto.com>; 'Admin-D (LKKAuto)' <admin-d@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Teng Ken Leong <kenleong.teng@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 03/09/2019

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	OI VEH	DOA	Additional Remarks

1	Jared Liu	MT/1060401-001	SLK1628H	CH MOTOR REPAIRS AND SERVICES	BLK 10 ANG MO KIO INDUSTRIAL PARK 2A ANG MO KIO AUTOPOINT #05-19	SUSAN / 91004390	SLM822J	30/8/19	
2	Jeff Lin	MT/1059895-002	SKB 1584J	JWG INTERNATIONAL PTE. LTD	10 ANG MO KIO INDUSTRIAL PARK 2A #03-08 AMK AUTOPOINT SINGAPORE 568047	terence loh / 82996103	GX4100J	27/8/19	
3	Eric Tang	MT/1060555-001	SLV2705D	LIAN HER MOTORS	BLK 5038 #01-405 ANG MO KIO INDUSTRIAL PARK 2	anthony cheong / 91082728	SCV5017T	16/8/19	
4	Serene Lim	MT/1060596-002	SLE4063Z	LION CITY RENTALS PTE LTD	60 JALAN LAM HUAT #04-01 CARROS CENTRE SINGAPORE 737869	s t sim / 62524991	SDW810K	31/8/19	
5	Jeff Lin	MT/1060418-001	SMC5694U	OPTIMA WERKZ PTE LTD	9A SERANGOON NORTH AVE 5	sharon ten / 64811522	SJV4149U	30/8/19	Please avoid 1pm to 2pm
6	Serene Lim	MT/1040823-002	PA8151A	SC AUTO INDUSTRIES (S) PTE LTD	51 SENOKO ROAD #03-01 SENOKO INDUSTRIAL BUILDING SINGAPORE 758133	hamimah / 65719958	SLN1725U	17/4/19	
7	Quek Swee Keng	MT/1060611-001	SHA3654T	SOON HOCK MOTOR PTE LTD	10 ANG MO KIO IND PK 2-A #01-05/06 AMK AUTOPOINT SINGAPORE 568047	LYNN / 65425119	SJE35E	1/9/19	

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Annie Koh
Senior Admin Assistant, **Motor Insurance**
T +65 6430 7899
www.income.com.sg

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NTUC

MSUB19107306 / Su Brothers' Motor Workshop - AMK
ENTRY DATE & TIME: 16/08/2019 11:45
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 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 aforesaid.

ACCIDENT STATEMENT	
Date Of Report	16/08/2019 11:45
Date Of Accident	16/08/2019 10:10
Exact Location Of Accident	KRETA AYER RD TWDS EU TONG SEN ST
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLV2705D
Insured/Policyholder	
Name Of Registered Owner	H.L CAR RENTAL PTE LTD
Co Reg No	201004543E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96828096
Alternative Phone No	OFFICE-96828096
Vehicle Particulars	
Manufacturer	TOYOTA
Model	C-HR
Exact Purpose for which vehicle was being used at time of accident	GOJEK
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	YES
Policy Number	5109155610-000106
Cover Note Number	
Driver	
Name of Driver	YEO ENG SENG
NRIC No	S1661721J
Date Of Birth	06/01/1964
Occupation	OUTDOOR
Date Of Driving Pass	28/10/1987
Driving Experience	31 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96828096
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 302 WOODLANDS ST 31 #04-281
Postcode	720302
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 - 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	2
Was any body injured in the Accident?	NO
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 STOPPED MY VEHICLE DUE TO RED TRAFFIC LIGHT AND SUDDENLY CAR B HIT MY REAR.

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	SCV5017T
Vehicle Make/Model/Colour	TOYOTA ALTIS
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)	

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:

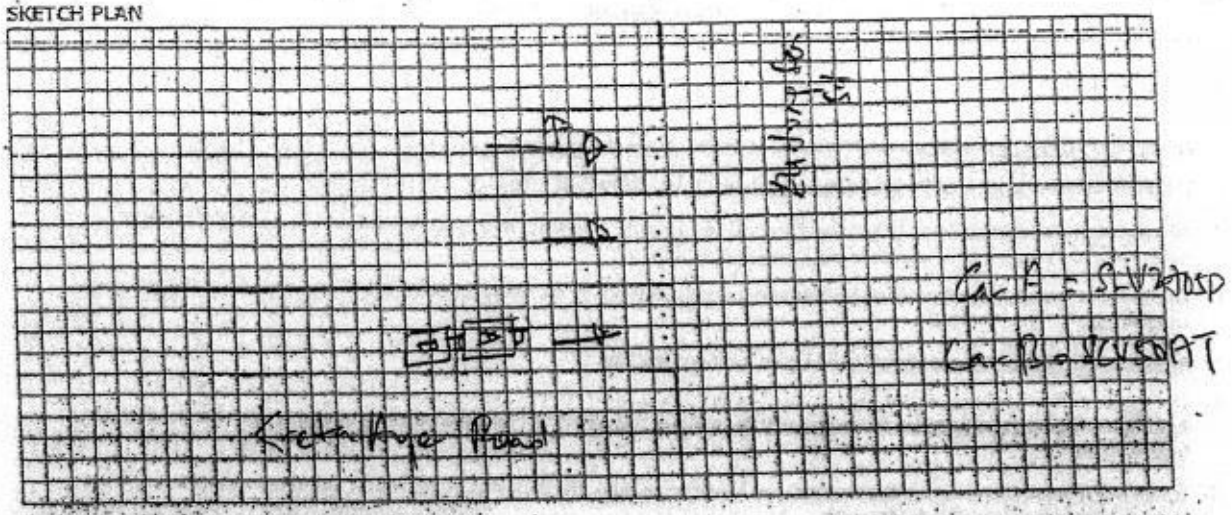
   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

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 :

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I stopped my vehicle due to red traffic light, and suddenly car B hit my rear.

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.:

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
#05-00 NTUC Trade Union House
Singapore 189556

Vehicle No : SLV 2705 D
Make : Toyota C-HR
Year : 2017

Qty	Description	Unit Price	Amount
Estimate Cost Of Repair			
1 pc	Rear tail-gate assy		$1,237.60
1 pc	Rear bumper		$1,183.60
1 pc	Rear bumper reinforcement		$483.20
2 pcs	Rear bumper reflector garnish	$125.60	$251.20
1 pc	Rear lower bumper		$655.70
1 pc	Rear bumper center lower cover		$65.20
1 pc	Rear o/s bumper side retainer		$75.10
1 pc	Rear o/s fender arch garnish		$246.10
1 pc	Rear end panel		$725.70
1 pc	Rear end panel inner garnish 189.20		$402.10
			$5,325.50
		Less 25 %	$1,331.38
			$3,994.12
S Nett			
15 pcs	Rear bumper clip	$2.00	$30.00
1 pc	Rear reverse sensor		$200.00

Labour Charges

Description	Amount
Remove/renew the above parts including knocking, welding & cutting.	$1,000.00 450
To putty & spray paint on accident affected portion	$1,000.00 600
Check and recoonect wiring	$40.00 15
To anit- rust proofing	$100.00 X
Total	$6,364.12

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:

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
73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556
ATTN: ERIC TANG

Ref: CS/INC19015599/Ksd3n2
Date: 17-09-2019
Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SCV 5017T	**Veh. Inspected**	SLV 2705D
	Policy No.		**Coverage ($)**	0.00
	Claim No.	MT/1060555-001	**Excess ($)**	0.00
	Assign From	ANNIE KOH	**Assign Date**	03/09/2019

2. Vehicle Particulars & Condition

	Make & Model	TOYOTA C-HR (A)	**c.c**	1797
	Engine No.	HIDDEN	**Year of Reg.**	2017
	Chassis No.	ZYX102089790	**Colour**	METALLIC BROWN
	Odometer	136212 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	7 mm
	L/H Front Tyre	215/60 R17	YOKOHAMA	7 mm
	R/H Rear Tyre	215/60 R17	LING LONG	3 mm
	L/H Rear Tyre	215/60 R17	LING LONG	3 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.

DAMAGES SEE DETAILS.

5. General Information

	Accident Date	16/08/2019	**Inspect Date / Time**	03/09/2019 (01:54 PM)
	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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLV 2705D

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	REAR TAIL-GATE ASSY	TO REPAIR SEE LABOUR	1,237.60	-
1	REAR BUMPER	MTG CRACKED	1,183.60	1,183.60
1	REAR BUMPER REINFORCEMENT	BENT	483.20	483.20
2	REAR BUMPER REFLECTOR GARNISH @$125.60	CUT	251.20	251.20
1	REAR LOWER BUMPER	DENTED / CUT	655.70	655.70
1	REAR BUMPER CENTER LOWER COVER	CRACKED	65.20	65.20
1	REAR O/S BUMPER SIDE RETAINER	SERVICEABLE	75.10	-
1	REAR O/S FENDER ARCH GARNISH	MTG DISTORTED	246.10	246.10
1	REAR END PANEL	TO REPAIR SEE LABOUR	725.70	-
1	REAR END PANEL INNER GARNISH	MTG CRACKED	402.10	189.20
	LESS 25% DISCOUNT		-1,331.38	-768.55
			3,994.12	2,305.65
	SPECIAL NETT ITEMS			
15	REAR BUMPER CLIP @$2.00 (SN)	NECESSARY	30.00	30.00
1	REAR REVERSE SENSOR (SN)	DENTED	200.00	200.00
			230.00	230.00
	LABOUR			
	REMOVE/RENEW THE ABOVE PARTS INCLUDING KNOCKING,WELDING & CUTTING.INCLUSIVE OF THE REPAIR OF REAR TAIL-GATE ASSY AND REAR END PANEL.		1,000.00	450.00
	TO PUTTY & SPRAY PAINT ON ACCIDENT AFFECTED PORTION.		1,000.00	600.00
	CHECK AND RECONNECT WIRING.		40.00	15.00
	TO ANTI-RUST PROOFING.	NOT NECESSARY	100.00	-
			2,140.00	1,065.00
	GRAND TOTAL		**6,364.12**	**3,600.65**

	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			**2,850.00**

Report Ref No. CS/INC19015599/Ksd3n2

Report Ref No. CS/INC19015599/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