

ASS. REC. BY:

REF: CS3/MSG19015819/GC F312

Special Instruction:

Surveyor: GQ

ASSIGNMENT (Office)

Merimen From (Person): Onhia Nyuk Pui of MSG Date/Time: 06/09/2019

Estimated Cost: Bill to:

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

To Inspect Vehicle No: GBD 4324U

Insured: FBA 50453

at Workshop m/s My Car Consultant Pte Ltd

Tel:

of 53 Ubi Ave 1 #01-33

Policy No: MSD/VM1/19-500601-WTT

Claim No: MSC/V/19-001085

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 04/09/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 6.9.19 3.45 PM

Person Contacted: Hui Qin

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	FBA 50453 : NA/MSG19015727/24 D.O.A. = 04/09/2019
	GBD 4324U : NA/MSG19015727/24 D.O.A. = 04/09/2019
	After repair: 12/9/2019

A.S. REC. BY

62.

REF: MS/G

PRS

ASSIGNMENT

From:

Date:

10/9/19

Estimated Cost:

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

To Inspect Vehicle No:

GBD 43244

at Workshop m/s

Myer Consultant

of

53 ubi Ave #01-33

Insured:

Policy No.

Claims No.

Sum Insured:

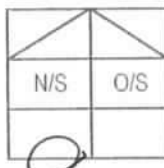
Excess:

(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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

3

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

up

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

GBD43244

Yr Regn:

Oct / 14

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

Truck / Trailer or

Make:

Toyota Dyna

C.C

2982

Colour:

Silver

A/C:

Insured / Std / NI / NA

Sp. Reading

154000

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JTFAT35Y 80K 203631

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 A/Rim or

Tyre Size:

F:

195R15 (linlong)

R:

155R12 (Fire n za)

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

D.O.I.

10-09-19

Survey held at

IDAC NAC

10:30

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

\$ 800 - \$ 1000

Date/Time, File Pass to?



: Prel. Report

1)



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

3

Resurvey No. of Trip:

1

Survey Fee:

120

Transportation:

S + RS SI

Photos

Others

TOTAL

11

131

Report Format:

PRS

Lump Sum / H.R. / G

Add Fee:



: Site Insp (\$)



: Interview (\$)



: Tech. Insp (\$)



: Weekend (\$)

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	05 Sep 2019		06 Sep 2019 15:30 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS		[Created by insurer]							
Insured:	RAFHANAH BINTE RAHIM, ID: S8729137E, Tel: +6596738737								
Main Claimant:	CHIN HOR RENOVATION SERVICE, Co. Reg. No.: 53227413W								
Vehicle Reg. No.:	GBD4324U	Date of Loss:	04/09/2019 09:00 - :59 [58 Months and 8 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / MSC/V/19-001085	Policy/Cover Note No.:	MSD/VMT/19-500601-WTT (Third Party Only) Coverage: 26/05/2019 - 25/05/2020						
Vehicle Reg. No. (Insured):	FBA5045J	Policy No. (Claimant):							
		Excess:							
Repairer:	My Car Consultant Pte Ltd (Ubi) 53 Ubi Ave 1, #01-33, Paya Ubi Industrial Park, 408934 Ubi - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 07/09/2019]								
Driver/Custodian (Insured):	RAFHANAH BINTE RAHIM (31 / Female), NRIC: S8729137E, Tel: +6596738737 Email:								
Adj Asg. Remarks:	on WP. Liab: NR. Disagree on SJE. Contact: Huiqin @ 8866 8832.								
ASSOCIATED MAIL RECEIVED		View All Compose Case Mail							
There are no mail for this case.									
ALL ASSOCIATED TASKS									
View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	413W
Vehicle Details	
Vehicle No.:	GBD4324U
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Sep 2019
Vehicle Make:	TOYOTA
Vehicle Model:	TOYOTA DYNA 150 MANUAL
Primary Colour:	Silver
Manufacturing Year:	2014
Engine No.:	1KD2450519
Chassis No.:	JTFAT35Y80K203631
Maximum Power Output:	-
Open Market Value:	\$27,856.00
Original Registration Date:	27 Oct 2014
First Registration Date:	27 Oct 2014
Transfer Count:	0
Actual ARF Paid:	\$1,393.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	26 Oct 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$31,571.00
COE Rebate Amount:	\$16,108.00
Total Rebate Amount:	\$16,108.00

The information contained herein is correct as at 19 Sep 2019

OK

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	05/09/2019 11:36
Date Of Accident	04/09/2019 09:40
Exact Location Of Accident	BRADDELL RD TWDS BARTLEY RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBD4324U
Insured/Policyholder	
Name Of Registered Owner	CHIN HOR RENOVATION SERVICE
Co Reg No	53227413W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84283806
Alternative Phone No	OFFICE-84283806
Vehicle Particulars	
Manufacturer	TOYOTA
Model	TOYOTA DYNA 150 MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A29097815MKC
Cover Note Number	
Driver	
Name of Driver	POH SENG KIT
NRIC No	S1123389I
Date Of Birth	19/05/1955
Occupation	INDOOR
Date Of Driving Pass	26/07/1976
Driving Experience	43 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-84283806
Fax Number	
Contact Number	OFFICE-84283806
EEmail Address	NOEMAIL

Address	BLK 408 TAMPINES STREET 41 #05-169
Postcode	520408
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	RAINING
Road Surface	WET

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)	2
Passenger 1	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JOO CHIAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: 267 ONAN ROAD , POSTCODE: 424773 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-3459999 - FAX NO: 64474181
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20190904/2061.

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	FBA5045J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	S8729137E
Contact Number	96738737
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

1. Please render correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Dealer.
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 filing 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 statement 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/call 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 situated 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 (a) 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) in complying with requirements under any regulations, laws or court orders.



Poh Say Kit
Policyholder's Signature
Date & Time:

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

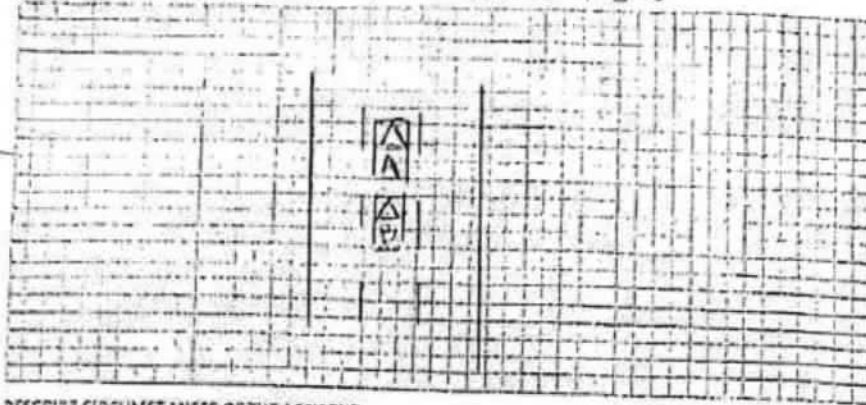
[Signature]
Reporting Centre Person's Signature
Name:
KRIC/FIR No.:

Accident Sketch Plan

CAR A : GBU 1324U.
CAR B : FBJ 5045J.

ALONG BRADDELL ROAD
TO BARTLEY ROAD

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT ATTACH.

DECLARATION

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

Pol Eng ki T x
Policeholder's Signature
Date & Time:

Pol Eng ki T x
Driver's Signature
(if driver is not the policeholder)
Date & Time:

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

Scanned by CamScanner

Police Report



**SINGAPORE
POLICE FORCE**



T/20190904/2061

1 of 3

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

Report No: T/20190904/2061

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/09/2019 12:39		Vide Report No.: F/20190904/0053		Station Diary No.: 9	
Informant's Particulars					
Name of Informant: POH SENG KIT			Address: APT BLK 408 TAMPINES STREET 41 #05-169 SINGAPORE 520408		
ID Type / ID No.: NRIC NO / S1123389I			Contact No.: Home/Office: Mobile: 84283806		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 64	Date of Birth: 19/05/1955	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: RENOVATOR			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 04/09/2019 09:30	Type of Location: Straight Road
Location: Along Road 1 BRADDELL ROAD towards Bartley Road				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBA5045J	Motorcycle	YAMAHA	Spark	White		0
GBD4324U	Lorry	TOYOTA	Dyna	Silver	Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

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Police Report



**SINGAPORE
POLICE FORCE**



T/20190904/2061

Police Station Of Origin:
Joo Chiat NPP
287 Onan Road SINGAPORE 424773
Tel No: 1800-3455999

2 of 3

Report No. T/20190904/2061

CONTINUATION OF REPORT

Driver			
Name	POH SENG KIT		ID No. S1123389I
Related Vehicle	GBD4324U (Lorry)		Contact No. 84283806
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Rider			
Name	RAFHANAH BTE RAHIM		ID No. S8729137E
Related Vehicle	NIL		Contact No. 96738737
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date and time, I was driving along Braddel Road in the middle lane of a 3 lane road towards Bartley Road. I then felt an impact coming from the rear of my lorry. I drove my lorry to the road shoulder and stopped my lorry. I then discovered that a lady rider was laying down on the road and a motorcycle laying flat on the road just slightly behind her. I assisted to carry her motorcycle to the road shoulder while other road users were helping her with her condition. One pedestrian on an overhead bridge approached me and informed that he saw the lady rider colliding into the back of my lorry. My nephew assisted to call for ambulance. The rider was conveyed to hospital conscious. MYy vehicle sustained some scratches on the rear left of my vehicle and my rear left tail lamp is damaged.

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Police Report



SINGAPORE
POLICE FORCE



T/20190904/2061

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

3 of 3
Report No: T/20190904/2061

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Sgt 3 MUHAMMAD IRFAN HAKIM BIN ROSLI	Signature Of Informant: <i>Ng L Seng Kit</i>
Signature Of Interpreter: Not applicable	Date/Time: 04/09/2019 12:39
Officer In Charge Of Case: TP / GIT / Sgt 2 PHUA TIAK YEE Contact No.: 65472077	Classification Of Case:
Authentication Stamp NP168 	

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	05 Sep 2019		06 Sep 2019 15:30 Edit Adj Rpt	\$0.00 Edit Estimates	\$0.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured: RAFHANAH BINTE RAHIM , ID: S8729137E, Tel: +6596738737									
Main Claimant: CHIN HOR RENOVATION SERVICE , Co. Reg. No.: 53227413W									
Vehicle Reg. No.: GBD4324U		Date of Loss: 04/09/2019 09:00 - :59 [58 Months and 8 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / MSC/V/19-001085		Policy/Cover Note No.: MSD/VMT/19-500601-WTT (Third Party Only) Coverage: 26/05/2019 - 25/05/2020							
Vehicle Reg. No. (Insured): FBA5045J		Policy No. (Claimant):							
		Excess:							
Repairer: My Car Consultant Pte Ltd (Ubi) 53 Ubi Ave 1, #01-33, Paya Ubi Industrial Park, 408934 Ubi - Tel:									
Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Imm.Advice due 07/09/2019]									
Driver/Custodian (Insured): RAFHANAH BINTE RAHIM (31 / Female) , NRIC: S8729137E, Tel: +6596738737 Email:									
Adj Asg. Remarks: on WP, Liab: NR. Disagree on SJE. Contact: Huiqin @ 8866 8832.									
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*GBD4324U (MSC/V/19-001085)
[FBA5045J]
TP
CHIN HOR RENOVATION SERVICE
Sep 4 2019 9:00AM
[RAFHANAH BINTE RAHIM]
My Car Consultant Pte Ltd

Upload Documents		Upload Photos	Compose New Letter	View View In Browser	
Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print	
1	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
2	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
3	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
4	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
5	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
6	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
7	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
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15	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
16	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
17	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
18	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
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21	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
22	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
23	13/09/19 17:49	General View	Load JPG	<input checked="" type="checkbox"/>	
24	13/09/19 17:50	Odometer Reading	Load JPG	<input checked="" type="checkbox"/>	
25	13/09/19 17:50	Chassis Number	Load JPG	<input checked="" type="checkbox"/>	
26	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
27	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
28	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
29	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
30	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
31	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
32	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
33	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
34	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
35	13/09/19 17:50	After Repair Photo	Load JPG	<input checked="" type="checkbox"/>	
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print	
1	06/09/19 10:10	TPD GBD4324U GIA REPORT	Load PDF		
2	06/09/19 10:10	TPD GBD4324U - PRI	Load PDF		
3	06/09/19 10:27	Disagree on SJE	Load PDF		

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)			
<div></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer			
<small>Note: Remarks are private unless you show it to other parties.</small>			

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: CS3/MSG19015819/GCF3E2

Date: 20/09/2019

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/MT/19-500601-WTT
Claimant Vehicle No :	GBD4324U	Insured Vehicle No :	FBA5045J
Date of Loss:	04/09/2019	Nature of Claim:	TP
		Claim No:	MSC/V/19-001085

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	GBD4324U		
Make & Model:	TOYOTA DYNA 150, 3.0 D (M)	Engine No:	1KD2450519
Reg. Date:	27/10/2014 (Man. Year: 2014)	Chassis No:	JTFAT35Y80K203631
Colour:	Silver	Odometer:	154000 km
Engine Capacity:	2982 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:	195 R15	Rear Tyre Size:	155 R12
Front Left Side:	Linglong 5 mm	Rear Left Side:	Firenza 5 mm
Front Right Side:	Linglong 5 mm	Rear Right Side:	Firenza 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:	06/09/2019	
Date Inspected:	10/09/2019 Inspected At:	My Car Consultant Pte Ltd (Ubi) 53 Ubi Ave 1, #01-33, Paya Ubi Industrial Park Singapore 408934
Estimated Period of Repair:	3.0 days	

Adjuster: XING GUO QIANG

Manager: CELINE FONG

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.

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
- C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$500.00 -\$1,000.00

REPAIR DETAILS

Reference

Part Source: (Last Synchronised: 20 Sep 2019)

Parts: N/A TOYOTA DYNA 150 3.0 D (M) (Model not available in database)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for GBD4324U)

Validity: 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

There are no new parts selected.

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >