

ASS. REC. BY:

REF CS/CTI1901428/T1+f3

n2

Special Instruction:

Survivor: Tausseh

ASSIGNMENT (Office)

From (Person): Chong Ben Sen

of CTI

Date/Time: 20.9.19 10.59A.M

Estimated Cost: Bill to:

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

To Inspect Vehicle No: PA 9021K

Insured: SLF 6680Z

at Workshop m/s Think One

Tel: 97938472

of No 18 Dafa Ave 2

Policy No: DMPCST30293619000

Claim No: SRM19D204196

Sum Insured:

Excess:

Make of Veh: (Client's Record)

D.O.A. 4.9.2019

23.9.2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement

Date/Time: 20.9.19 11.09A.M

Person Contacted: Michael Ong

Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	PA 9021K - 130/m/s/10003471/K1 DOA - 09/04/2010
	SLF 6680Z - CS3/m/s/19019403/RHD 312-1 DOA - 20/10/2013
	confirm finalize lump sum \$1600 - (Red: 1050, 390%)



## Nivitha (LKK Auto)

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**From:** Chong Boon Sen <boonsen.chong@sg.cntaiping.com>  
**Sent:** Friday, 20 September 2019 10:59 AM  
**To:** michaelng@thinkone.com.sg  
**Cc:** assignments  
**Subject:** RE: OUR REF: SNM19D204195-SLF6680Z-CML - RE:PA9021K & SLF6680Z DOA.4.9.2019

### WITHOUT PREJUDICE

Dear Sir

We will be assigning M/s LKK AUTO CONSULTANTS to survey your client's vehicle.

Aside to LKK AUTO CONSULTANTS,

Please proceed to survey the third party vehicle on WP basis. Please merimen.

Thank you.

### Chong Boon Sen

Claims Executive  
Department

#### China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909  
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

**W:** [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | **FB:** [www.facebook.com/chinataipingsg/](http://www.facebook.com/chinataipingsg/) | **WeChat:** 太平狮城 Taiping SG 3 Anson Road #16-00 Springleaf Tower Singapore 079909  
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

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**From:** michaelng@thinkone.com.sg [mailto:michaelng@thinkone.com.sg]  
**Sent:** Friday, September 20, 2019 9:54 AM  
**To:** Chong Boon Sen <boonsen.chong@sg.cntaiping.com>  
**Subject:** RE: OUR REF: SNM19D204195-SLF6680Z-CML - RE:PA9021K & SLF6680Z DOA.4.9.2019  
**Importance:** High

Hi Boon Sen,

We would like to arrange for survey PA9021K  
We select LKK Consultants Mr Marcus

Kindly contact Michael 97938472.

Thank you

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**From:** Chong Boon Sen <boonsen.chong@sg.cntaiping.com>  
**Sent:** Wednesday, 18 September, 2019 3:11 PM  
**To:** michaelng@thinkone.com.sg  
**Subject:** RE: OUR REF: SNM19D204195-SLF6680Z-CML - RE:PA9021K & SLF6680Z DOA.4.9.2019

Without prejudice  
Dear Sir,  
LKK  
STA  
LBS

**Chong Boon Sen**

Claims Executive  
Department

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #16-00 Springleaf Tower Singapore 079909  
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

**W:** [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | **FB:** [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | **WeChat:** 太平獅城 Taiping SG 3 Anson  
Road #16-00 Springleaf Tower Singapore 079909  
DID: (65) 63896171 | M: (65) XXXX XXXX | F: (65) 6222 1033

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**From:** [michaelng@thinkone.com.sg](mailto:michaelng@thinkone.com.sg) [<mailto:michaelng@thinkone.com.sg>]  
**Sent:** Wednesday, 18 September, 2019 11:38 AM  
**To:** Claims Dept of CTI <[claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)>  
**Subject:** RE: RE:PA9021K & SCF6680Z DOA.4.9.2019  
**Importance:** High

Sorry is SLF6680Z

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**From:** Claims Dept of CTI <[claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)>  
**Sent:** Wednesday, 18 September, 2019 11:22 AM  
**To:** [michaelng@thinkone.com.sg](mailto:michaelng@thinkone.com.sg)  
**Subject:** RE: RE:PA9021K & SCF6680Z DOA.4.9.2019

Hi,

We do not have this vehicle SCF6680Z in our system.

Please confirm the vehicle number.

Regards,

Claims Department

**China Taiping Insurance (Singapore) Pte. Ltd.**

3 Anson Road #15-00 Springleaf Tower Singapore 079909  
T: (65) 63896116 | F: (65) 62247175

**W:** [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | **FB:** [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | **WeChat:** 太平獅城 Taiping SG

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**From:** [michaelng@thinkone.com.sg](mailto:michaelng@thinkone.com.sg) [<mailto:michaelng@thinkone.com.sg>]  
**Sent:** Wednesday, 18 September, 2019 8:28 AM  
**To:** Claims Dept of China Taiping Insurance <[e-claims@sg.cntaiping.com](mailto:e-claims@sg.cntaiping.com)>

**Subject:** RE:PA9021K & SCF6680Z DOA.4.9.2019  
**Importance:** High

Dear Sir/Mdm,

We would like to arrange for survey of our client vehicle PA9021K

Thank you

Michael Ng  
97938472

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## Denise Tay (LKKAuto)

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**From:** michaelng@thinkone.com.sg  
**Sent:** Thursday, 13 February 2020 5:46 PM  
**To:** Denise Tay (LKKAuto)  
**Subject:** RE: GIA,ESTIMATE PA9021K

**Importance:** High

Hi Denise.

I confirm accepted.

Thank you

Michael Ng

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**From:** Denise Tay (LKKAuto) <denisetay@lkkauto.com>  
**Sent:** Thursday, 13 February, 2020 10:12 AM  
**To:** michaelng@thinkone.com.sg  
**Subject:** RE: GIA,ESTIMATE PA9021K

Dear Michael,

Please see attached estimate.

Offer at lump sum \$1600, 2days.

Please check and confirm

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: [sur@lkkauto.com](mailto:sur@lkkauto.com) | fax: 6256-4315

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

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**From:** michaelng@thinkone.com.sg [<mailto:michaelng@thinkone.com.sg>]  
**Sent:** Wednesday, 25 September 2019 10:53 AM  
**To:** [taufikh@lkkauto.com](mailto:taufikh@lkkauto.com)  
**Subject:** RE:GIA,ESTIMATE  
**Importance:** High

Dear Taufikh

Attach file for your reference,

Thank you

Michael Ng

## 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 13:06
Date Of Accident	04/09/2019 16:40
Exact Location Of Accident	RIVERSIDE RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA9021K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RIDEWELL TRAVEL PTE. LTD.
Co Reg No	198100958D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97757057
Alternative Phone No	OFFICE-97757057
<b>Vehicle Particulars</b>	
Manufacturer	YUTONG
Model	BUS
Exact Purpose for which vehicle was being used at time of accident	
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	BUS
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5109992480
Cover Note Number	
<b>Driver</b>	
Name of Driver	WANG QINHAO
Passport No/FIN	G6747687K
Date Of Birth	09/05/1980
Occupation	OUTDOOR
Date Of Driving Pass	25/08/2010
Driving Experience	9 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97757057
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address ---  
 Postcode  
 Was driver an employee of the Insured's Company YES  
 If No, Relationship of the Driver with the Insured  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

**General Information of the Accident**

Type Of Accident SIDE SWIPE  
 Weather Conditions CLEAR  
 Road Surface DRY

**Other Information**

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles (including own vehicle) involved in the accident 2  
 Was any body injured in the Accident? NO  
 Was any injured conveyed to hospital by ambulance?  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (Including Driver) 1

**Details of Police Action**

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

**Circumstances of Accident**

MY VEHICLE WAS PARKED AT RIVERSIDE RD, AFTER RECEIVED CALL FROM THE SCHOOL TEACHER I STARTED TO MOVE OFF. SUDDENLY A VEHICLE DRIVE VERY FAST TO MY FRONT AND STOPPED AND HIT ONTO MY VEHICLE FRONT RIGHT CORNER.

**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 SLF6680Z  
 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)

Sketch Plan Pg. 1

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:

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

05/09/19



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

WAC BUKIT BATOK (VAC)



PA9021K YUTONG BUS

DATE 16/9/2019

No	Qty	PARTICULAR	AMOUNT S\$
1	1	FRONT BUMPER	2,950.00 Rx
2	1	FRONT BUMPER LAMP LH	280.00 x n
3	1	HEADLAMP LH	1500 2,500.00 cut ✓
4	1	FUSE BOX DOOR	1,544.00 x n
5	2	FUSE BOX DOOR LOCK	150.00 300.00 x n
			<u>7,574.00</u>
			1500
			10% - 1350.

LABOUR & MISCELLANEOUS:

1	To remove damaged body parts with all necessary components/attachments apply hot-works where necessary repair, reshape body dented panels in accordance with factory specifications replace new parts refit and align into position refit all necessary components/attachments	1,400.00 300
2	To spray paint replaced/repaired body parts inclusive of preparatory works and painting materials	1,200.00 200.
3	To conduct headlamp alignment	50.00 30
		<u>\$ 2,650.00</u>

10224  
 Tanjikh 97495749.  
 23/9/19 03pm  
 1980  
 4/5 \$ 1600. #  
 Lampsur  
 Resurvey after repair.  
 surellkauto.com  
 02 days

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 (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/CTI19016628/T1TF3N2

Date: 14/02/2020

## REFERENCE

Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. Policy No: DMPCSN30293619000

Claimant Vehicle No: PA9021K Insured Vehicle No: SLF6680Z

Date of Loss: 04/09/2019 Nature of Claim: TP Claim No: SNM19D204195C02

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: PA9021K

Make & Model: YUTONG ZK6100H, 6.7 D (M) Engine No: 21864679

Reg. Date: 11/08/2009 (Man. Year: 2008) Chassis No: LZYTBD6581030029

Colour: Maroon Odometer: 716244 km

Engine Capacity: 6693 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: Yes

## CONDITION OF TYRES

Front Tyre Size: 295/80R22.5 Rear Tyre Size: 295/80R22.5 (D)

Front Left Side: Double Star 8 mm Rear Left Side: Double Star 8/8 mm

Front Right Side: Double Star 8 mm Rear Right Side: Double Star 8/8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	7,574.00	1,350.00	6,224.00	82.18
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,650.00	630.00	2,020.00	76.23
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>10,224.00</b>	<b>1,980.00</b>	<b>8,244.00</b>	<b>80.63</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>1,600.00</b>		
<b>(S\$)</b>	10,224.00	1,600.00	8,624.00	84.35
<b>+ GST 7.00/7.00% (S\$)</b>	715.68	112.00	603.68	84.35
<b>Nett Amount (S\$)</b>	<b>10,939.68</b>	<b>1,712.00</b>	<b>9,227.68</b>	<b>84.35</b>

## INSPECTION

Date of Assignment: 14/02/2020

Date Inspected: 23/09/2019 Inspected At: Think One Autocare (HQ)  
NO 18 DEFU AVENUE 2  
Singapore 539522

Estimated Period of Repair: 2.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: DENISE TAY KWEE CHENG

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.

**REPAIR DETAILS****Reference****Part Source:** (Last Synchronised: 14 Feb 2020)**Parts:** N/A YUTONG ZK6100H 6.7 D (M) (Model not available in database)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** (Unsubmitted, no print-code for PA9021K)**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**

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount	
1	1		*FRONT BUMPER	Repair	2,950.00 F	*- FL	
2	1		*FRONT BUMPER LAMP LH	Not Necessary	280.00 F	*- FL	
3	1		*HEADLAMP LH	Cut	2,500.00 F	*1,500.00 FL	
4	1		*FUSE BOX DOOR	Not Necessary	1,544.00 F	*- FL	
5	2		*FUSE BOX DOOR LOCK	Not Necessary	300.00 F	*- FL	
					<b>Sub Total (S\$)</b>	<b>7,574.00</b>	<b>1,500.00</b>
					<b>- List Item Discount on L Items 0.00/10.00% (S\$)</b>	<b>0.00</b>	<b>150.00</b>
					<b>Total Parts (S\$)</b>	<b>7,574.00</b>	<b>1,350.00</b>

F=Franchise part. L=ListItemDisc.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<b>Labour Items</b>				
1	TO REMOVE DAMAGED BODY PARTS WITH ALL NECESSARY COMPONENTS/ATTACH-MENTS APPLY HOT-WORKS WHERE NECESSARY REPAIR,RESHANPE BODY DENTED PANELS IN ACCORDANCE WITH FACTORY SPECIFICATIONS REPLACE NEW PARTS REFIT AND ALIGN INTO POSITION REFIT ALL NECESSARY COMPONENTS/ATTACHMENTS	New	1,400.00	300.00
2	TO SPRAY PAINT TRPLACED/REPAIRED BODY PARTS INCLUSIVE OF PREPARATORY WORKS AND PAINTING MATERIALS	New	1,200.00	300.00
3	TO CONDUCT HEADLAMP ALIGNMENT	New	50.00	30.00
<b>Gross Labour Cost (S\$)</b>			<b>2,650.00</b>	<b>630.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >