From (Person)	Cabriel Que	of	T		Date/Time: 1 to 2019
Estimated Cos		Thirties -	Bil	1 to:	
	hicle No: SCM 113		MV i CS		Insured: SHA 7985L
at Workshop i	as Auto Recovere	\			Tel: 9753 2933
	odlaude Ind Patt	THE WOL	-24	Claim No: _	MCT19090.649
Sum Insured:				Excess: _	
Make of Veh (Client's Recor CA / REV Date/Time:	***	Person Co	200	10/2019 11 Lim -	D.O.A. DS 9 2019  ILOM.  H.O.D. Endorsement:  Vehicle IN OUT
Date/Time	Action/Instruction (	X) E	timate		
	SCM1131U-X SHA 7985L-X				

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

and the second second second second	OLDER TRAC			Tall man	Adj Subr	militari I	Ins Auth'ed	Status		
	(Not Notified) Edit Reg	Est Submitted	03 Oct 2019 00:00 Edit Adj Rpt	Adj Rpt	waj subi	nicted:	Ins. Auth eu	Pendin Report	Pending for Survey Report Cancel Case	
М	lain	Re	eference	Y	Claim Details		Documer	nts	s	how All
CLAIM SUE	FOLDER DE	TAILS				[Created	by adjuster]			
Insured:										
Main Claimant:	SOH CHEE	MENG, ID; S1	811508E							
Vehicle Reg. No.:	SCM113	10				25/09/20	19 00:00 - :59			
Claim Type:	TP				Policy/Cover Note No.:					
Vehicle Reg. No. (Insured):	SHA7985	86			Policy No. (Claimant):					
					Excess:					
Repairer:	Auto Reco	very Hub Pte L	td (HQ) Block 8	#01-14 Mai	siling Industrial E	state Road	3, 739252 Sing	apore City	- Tel: +65	6100218
Handling Insurer:		ernational Insur								0.3
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Handled by	DI SUN PI	N] [Final R	pt due 14	/10/201	9]
ASSOCIAT	ED MAIL RE	CEIVED						View All	Compose	Case Mai
There are no	mail for this	case.								
ALL ASSO	CIATED TAS	KS-				View All	Search Tasks	Create N	lew Task	Complet
Due Date	Priority	Type Task	Group Sub	ject Ha	ndler Assign	ned By	Completed 0	n Cre	ated On	Done

### Nivitha (LKK Auto)

From:

Motor Claim - III < motorclaim@iii.com.sg>

Sent:

Tuesday, 1 October 2019 3:51 PM

To:

Jennifer Guay; 'sur@lkkauto.com'; Admin-D (LKKAuto)

Cc:

sales@arh-group.com.sg; 'ADMIN-ARH'; Manivel Priyadarshini

Subject:

RE: OUR REF: AW-INS-A77-111702-19.jgv & YR REF: SHA 7985 L

Dear Sir / Mdm

#### This Pre-Repair Survey is on Without Prejudice Basis.

THIRD PARTY VEHICLE NO.

SCM1131U

III INSURED VEHICLE NO.

SHA7985L

DATE OF LOSS

25.09.19

We acknowledge receipt of your email.

### In compliance to Pre-Action Protocol for NIMA cases, we note that

We disagree to the list of motor surveyors that you have proposed.

Therefore, we have appointed our surveyor LKK AUTO CONSULTANTS to conduct the pre-repair survey.

This claim is handled by Priya.

Please let us have your client's <u>accident report and repair estimate</u> for our appointed surveyor to conclude his report.

\*\*We would like to conduct a re-survey after spray painting. Please contact our surveyor to arrange.

\*\*Surveyor kindly upload this assignment to Merimen.

Thank You.

#### Best Regards, Gabriel Wee



64 Cecil Street; #05 - IOB Building Singapore 049711

Tel: 6347 6100, Ext – 248

From: Jennifer Guay [mailto:jenniferguay@visionlawllc.com]

Sent: 01 October, 2019 2:04 PM

To: Motor Claim - III < motorclaim@iii.com.sg>

Cc: sales@arh-group.com.sg; 'ADMIN-ARH' <admin@arh-group.com.sg> Subject: RE: OUR REF: AW-INS-A77-111702-19.jgv & YR REF: SHA 7985 L

Importance: High

PRE - REPAIR SURVEY

CLAIMANT: SOH CHEE MENG

ACCIDENT INVOLVING SCM 1131 U & SHA 7985 L ON 25 SEPTEMBER 2019 ALONG SLIP RD FROM BUKIT TIMAH RD TOWARDS CHOA CHU KANG RD

Dear Sirs

Refer to your email of 30 September 2019 informing that you wish to conduct a pre-repair survey and to your List of Surveyors.

TAKE NOTICE that we object to all your surveyors stated in your said List, for appointment as the Single Joint Expert.

Pursuant to Pre-Action Protocol for NIMA cases, we now propose for appointment as Single Joint Expert the following surveyors for your consideration:-

1. Daniel Lim @ Les Appraiser

Please also be informed that our client's vehicle SJB 5545 H is available for Pre-repair inspection as follows

Venue

: AUTO RECOVERY HUB PTE LTD

61 WOODLANDS INDUSTRIAL PARK E9 #01-27

SINGAPORE 757047, 9 PREMIUM

Contact:

Mr Lim (Tel: 9753 2933)

Please reply within 2 working days.

Regards

### Jennifer Guay

(Secretary for Ms Audrey Wong)

#### VISION LAW LLC

133 New Bridge Road #18-01 Chinatown Point Singapore 059413

Tel: 6534 2811 (Ext 116)

Fax: 6535 6802

From: Motor Claim - III [mailto:motorclaim@iii.com.sg]

Sent: Monday, 30 September, 2019 3:57 PM

To: Jennifer Guay

Cc: sales@arh-group.com.sg; 'ADMIN-ARH'

Subject: RE: OUR REF: AW-INS-A77-SCM1131U-19.jgv & YR REF: SHA 7985 L

Dear Sir / Mdm,

We acknowledge receipt of your email.

We proprose using one of the following motor surveyors:

- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

#### Best Regards, Gabriel Wee



64 Cecil Street; #05 - IOB Building Singapore 049711

Tel: 6347 6100, Ext - 248

From: Jennifer Guay [mailto:jenniferguay@visionlawllc.com]

Sent: 30 September, 2019 2:29 PM

To: Motor Claim - III < motorclaim@iii.com.sg>

Cc: sales@arh-group.com.sg; 'ADMIN-ARH' <admin@arh-group.com.sg>
Subject: OUR REF: AW-INS-A77-SCM1131U-19.jgv & YR REF: SHA 7985 L

PRE - REPAIR SURVEY

CLAIMANT: SOH CHEE MENG

ACCIDENT INVOLVING SCM 1131 U & SHA 7985 L ON 25 SEPTEMBER 2019 ALONG SLIP RD FROM BUKIT TIMAH RD TOWARDS CHOA CHU KANG RD

Dear Sirs

We are instructed by SOH CHEE MENG to notify you of a road accident on 25 SEPETEMBER 2019 at about 15.50hr ALONG SLIP ROAD FROM BUKITTIMAH RD TOWARDS CHOA CHU KANG RD involving our client's SCM 1131 U & SHA 7985 L driven by your driver at the material time.

As a result of the accident, our client's vehicle has been damage. Before our client proceed to repair the damage vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Regards

Jennifer Guay (Secretary) VISION LAW LLC 133 New Bridge Road #18-01 Chinatown Point Singapore 059413 Tel: 6534 2811 (Ext 116) Fax: 6535 6802

For Surveyor	
Please initial here after completion of pre-repair sun Thank you.	vey.
Appointed Surveyor:	
Contact:	
Date & Time	

VISION LAW LLC

Advocates & Solicitors

(Incorporated with limited liability)

Unique Entity No. 200721148H

Head Office: 133 New Bridge Road #18-01/02 Chinatown Point, Singapore 059413 Branch: 490 Lorong 6 Toa Payoh #03-11 HDB Hub (Biz 3 Lobby 1), Singapore 310490

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India International Insurance Pte Ltd.

Registration No. 198703792-K

VISION LAW LLC Advocates & Solicitors (Incorporated with limited liability) Unique Entity No. 200721148H

Head Office: 133 New Bridge Road #18-01/02 Chinatown Point, Singapore 059413 Branch: 490 Lorong 6 Toa Payoh #03-11 HDB Hub (Biz 3 Lobby 1), Singapore 310490

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Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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Registration No. 198703792-K

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Mobile Number

Fax Number Contact Number

EMail Address

- 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.

aforesald.	
	ACCIDENT STATEMENT
Date Of Report	26/09/2019 14:33
Date Of Accident	25/09/2019 15:50
Exact Location Of Accident	SLIP RD FROM BUKIT TIMAH RD TWDS CHOA CHU KANG RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SCM1131U
nsured/Policyholder	
Name Of Registered Owner	SOH CHEE MENG
NRIC No	S1811508E
Email Address	ADDYSOH@TEDINTL.COM
Mobile Phone No	(LOCAL) +65-97627776
Alternative Phone No	OTHERS-97627776
Vehicle Particulars	
Manufacturer	TOYOTA
Model	TOYOTA / VOXY 2.0X A
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
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
nsurance Company	
Name of Insurance Company	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P10050702R01
Cover Note Number	
Driver	
Name of Driver	SOH CHEE MENG
NRIC No	S1811508E
Date Of Birth	27/06/1967
Occupation	INDOOR
Date Of Driving Pass	19/03/1994
Driving Experience	25 YEARS AND 6 MONTHS
Gender	MALE
Markella Microstona	A COALLY OF STREET

(LOCAL) +65-97627776

ADDYSOH@TEDINTL.COM

OTHERS-97627776

Address

BLK 345 CHOA CHU KANG AVENUE 3 #03-30

Postcode

689876

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:

: WOO YUEN KWAN AUDREY

GENDER:

: FEMALE

**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

REFER TO SKETCH PLAN

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

SHA7985L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

ROSLI BIN MOHAMMED LAZIM

NRIC/Passport Number

S1671012A

Contact Number

96799865

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 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 will in insrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)

l 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:
  - 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:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing frapd, 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.

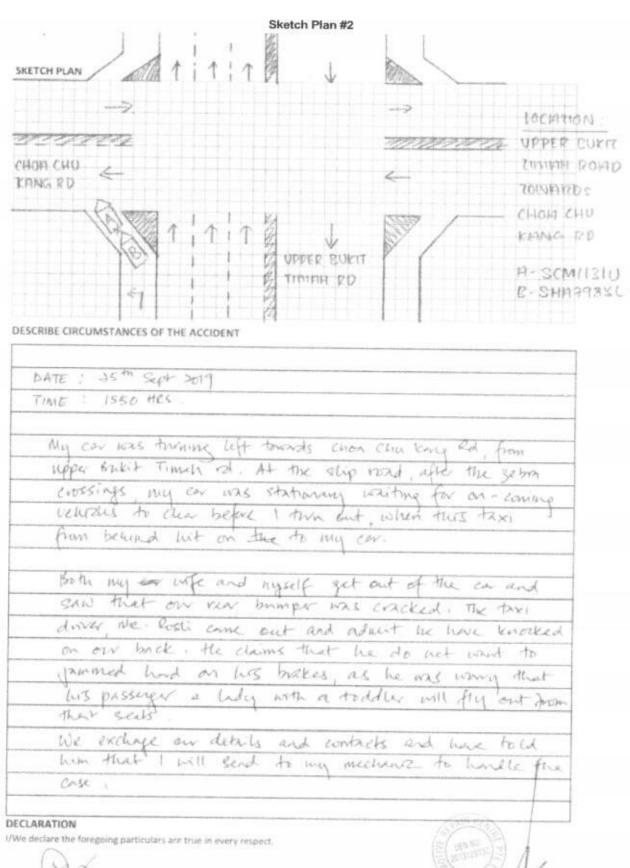
Policyholder's Signature Date & Time: 26 A

14:40 hy

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

Reporting Centre Personnol's Signature Name

NRIC/FIN No.



Policyholder's Signature Date & Time: 26 9 19

14 41 pm

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No:

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	508E	
Vehicle No.:	SCM1131U	
Vehicle to be Exported:	No	
Intended Deregistration Date:	02 Oct 2019	
Vehicle Make:	TOYOTA	
Vehicle Model:	VOXY 2.0X A	
Primary Colour:	Black	
Manufacturing Year:	2016	
Engine No.:	3ZRB795571	
Chassis No.:	ZRR800209291	
Maximum Power Output:	112.0 kW (150 bhp)	
Open Market Value:	\$24,416.00	
Original Registration Date:	08 Mar 2017 /	
First Registration Date:	08 Mar 2017	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$26,183.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	07 Mar 2027	
PARF Rebate Amount: Intended COE Rebate Details	\$19,637.00	
COE Expiry Date:	07 Mar 2027	
COE Category:	B - Car above 1600cc or 97kW (130bhp)	
COE Period(Years):	10	
QP Paid:	\$50,621.00	
COE Rebate Amount:	\$37,611.00	
Total Rebate Amount:	\$57,248.00	

The information contained herein is correct as at 02 Oct 2019

11,000

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VALUE FOR TIME
A PEACE OF MIND

HOTLINE: 6741 9997

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

Case 1	lotified	Est Submitted	Adj Assigned	Adj Rpt		Adj Subi	mitted	Ins Auth'ed	Status	
Main	3 Oct 2019 Edit Reg		01 Oct 2019 00:00 Edit Adj Rpt	S\$0.00 Edit Estim	ates	S\$0.00 View Rp	Committee of the Commit		Pending Report Cancel Ca	for Survey
М	ain	Re	ference		Claim	Details		Documer	nts	Show All
CLAIM SUB	FOLDER DE	TAILS			ON OWNER	-	[Create	ed by adjuster]	AND DAMESTED	
Insured:	-, Co. Re	g. No.: -					J. S.			
Main Claimant:	SOH CHEE	MENG, ID: S1	811508E							
Vehicle Reg. No.:	eg. SCM1131U			Date	e of Loss:	A STATE OF THE PARTY OF THE PAR	25/09/2019 00:00 - :59 [ <b>30</b> Months and <b>17</b> Days From LTA Reg Date (Man Yr)]			
Claim Type:	e: <b>TP</b> / MCT19090649				cy/Cover e No.:	MCOM0015				
Vehicle Reg. No. (Insured):	SHA7985L			cy No. imant):						
	- Alexandra				Exc					
Repairer:	Auto Reco	overy Hub Pte Lt	d (HQ) Block 8	#01-14 Mar	siling I	ndustrial E	state Ro	ad 3, 739252 Sing	apore City - T	el: +65 6100218
Handling Insurer:	37,000,000	ernational Insur								
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Ha	ndled by (	DI SUN F	PIN] [Final R	<b>pt</b> due 14/1	0/2019]
ASSOCIATI	D MAIL RE	CEIVED							View All	Compose Case Mai
There are no	mail for this	case.								
ALL ASSOC	IATED TAS	KS⊟					View A	All   Search Tasks	Create New	Task   Complete
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## **Claim Documents**

\*SCM1131U (MCT19090649) [SHA7985L] TP SOH CHEE MENG Sep 25 2019 12:00AM [-] Auto Recovery Hub Pte Ltd

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## **Documents Checklist**

DOCUMENTS CHECKLIST	Reset   Save   Print
There are no document checklists configured.	AND DESCRIPTION OF THE PARTY OF
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
Show Remarks To: Handling Insurer  Note: Remarks are private unless you show it to other parties.	

## 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/III19017300/QCF3S2

Date:

16/10/2019

REFERENCE

Handling Insurer: India International Insurance Pte Ltd Policy No:

MCOM0015

Claimant Vehicle No:

SCM1131U

Insured Vehicle No:

SHA7985L

Date of Loss:

25/09/2019

Nature of Claim:

TP

Claim No: MCT19090649

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SCM1131U

Make & Model:

TOYOTA VOXY, 2.0(A) 08/03/2017 (Man. Year: 2016) Engine No: Chassis No: 3ZRB795571 ZRR800209291

Reg. Date: Colour:

Black

Odometer:

76808 km

Engine Capacity:

1986 cc

Market Value/New Car Price: Sum Insured (S\$):

N/A

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable): Fair

Yes Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification: Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size:

205/55 R16

Rear Tyre Size:

205/55 R16

Front Left Side:

Dunlop 5 mm

Rear Left Side: Rear Right Side: Dunlop 5 mm Dunlop 5 mm

Front Right Side: Dunlop 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:

01/10/2019

Date Inspected:

02/10/2019 Inspected At: 61 Woodlands Industrial Park E9#01-27 Repairer: Auto Recovery Hub Pte Ltd

Estimated Period of Repair:

0.0 days

Adjuster: OI SUN PIN

CELINE FONG Manager:

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.

## REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 16 Oct 2019)

Parts: M1-MPV TOYOTA VOXY 2.0(A) (Catalogue:Merimen Singapore 1.0)

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

Print Code: (Unsubmitted, no print-code for SCM1131U)

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 >