

Assign

ASSIGNMENT

Vehicle

Mr Lim

REIC53/LPC 1004374 / BV13-1

Officer Name

ASSIGNMENT (Office)

Form/Person

Chenald poh

at

LPC

Date/Time

3.10.2019

Estimated Cost

Bill to

OD / TP / WS / TP RES / OD RES / EVA / INV / MYTCS

To Inspect Vehicle No

GV 8158C

Insured

8152585

at Workshop no

Hup Lay Huat

Tel

9677 3832

of

1 Kaki Bkt Ave 6 #01-35

Policy No

Claim No

18/19/19/VPOS / 021469

Name Insured

Excess

Make of Veh
(Client's Record)

D.O.A

28/2/2019

CA / REV / REP / REV 24 HRS

HOOD, Endorsement

Date/Time

12/3/19 11am

Person Contacted

Mr Tan

Vehicle IN

(OFF)

Date/Time

Action/Instruction (X) Estimate

Celine call since 5/3/19 - 11/3/19 - No answer from the wleap.
12/3/19 - he just answer.

GV 8158C - CS3/AIG 13022289/K1/hq 3W2

D.O.A - 26/11/2013

SJT 52585 - CS3/AWA 19004107/13cd3

D.O.A - 21/02/2019

29/3/19

@ 4:17pm Mr Tan said no estimate

29/3/19

Submit PRS report

3/10/19

Submit LS \$ 1900 (Red 2859, 60%) , 3 days


3/10/2019

RECEIVED 04 OCT 2019

REF: JPC

PRS

ASSIGNMENT

From: Date: 19/3/19

Estimated Cost:

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

To Inspect Vehicle No: GV 8158C

at Workshop m/s

of 1 kaki Bkt Ave 6 #01-35 Autobay

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: 3 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GV 8158C Yr Regn: 4/8/2006

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

Truck / Trailer or

Make: TOYOTA DYNA 150 D C.C 2986

Colour: SILVER

A/C: Insured / Std / NI / NA

Sp. Reading: 583358

T/Radio: Insured / Std / NI / NA

Eng/No: 5L5657119

C/No: JTF4F344303012084

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Good / Jammed / Leaked / Burnt or

Brake: Good / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185 R 14C

R: 155 R 12C

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm

R/Bal. 6 mm

L/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 28/2/19

D.O.I. 19/3/19

Survey held at Hup Ley Huat

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

Range 3,000/2 - 4,000/2

Lump Sum: 1600/2 TRIM 3/18/19

RECEIVED 1 APR 2019

MV 17,000/2

PV 10,904/2

NV 6,096/2

TRIM 25/3/19

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair:

1)

☐ : Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

2) 29/3- typist

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

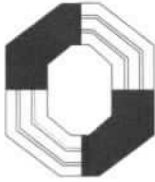
Others

TOTAL

490

Report Format :

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



LONPAC INSURANCE BHD

(S98FC5635C)

Our Ref : 18/19/19/VP05/021469

Your Ref : CS3/LPC19004574/Bvd3e2

1 October 2019

M/s LKK Auto Consultants Pte Ltd
51 Ubi Ave 1
#01-25 Paya Ubi Industrial Pk
Singapore 408933

Dear Sirs/Madam

PAPER SURVEY OF GV8158C

We refer to the above matter.

We enclose the following documents :-

- a) Survey report & photos of GV8158C
- b) GIA report GV8158C
- c) GIA report and photos of SJT5258S

Kindly study the documents and let us have your report by 15 October 2019.

Yours faithfully

GERALD POH
SENIOR EXECUTIVE
(CLAIMS)
Email : mt_claim@lonpac.com

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	01/03/2019 11:04
Date Of Accident	28/02/2019 11:30
Exact Location Of Accident	WOODLANDS AVENUE 10
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GV8158C
Insured/Policyholder	
Name Of Registered Owner	BESTDECO PTE LTD
Co Reg No	199608581C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67523983

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 D
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5102801208
Cover Note Number	

Driver

Name of Driver	KALYANASUNDARAM SOUNDARARAJAN
Passport No/FIN	G8481503P
Date Of Birth	18/07/1988
Occupation	OUTDOOR
Date Of Driving Pass	30/09/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96289782
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	10 ADMIRALTY STREET #04-64 NORTH LINK BUILDING
Postcode	757695
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	CHAIN COLLISION
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	3
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

REFER TO BELOW STATEMENT/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	SJT5258S
Vehicle Make/Model/Colour	HYUNDAI AVANTE 1.6 AT ABS D/AB 2WD 4DR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHOO LIAK HUNG
NRIC/Passport Number	S0204021B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YP6771M
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Vehicle Make/Model/Colour	HINO XZU710R-HKFMS3
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YANG MING
NRIC/Passport Number	G2683067U
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.



Policyholder's Signature
Date & Time:

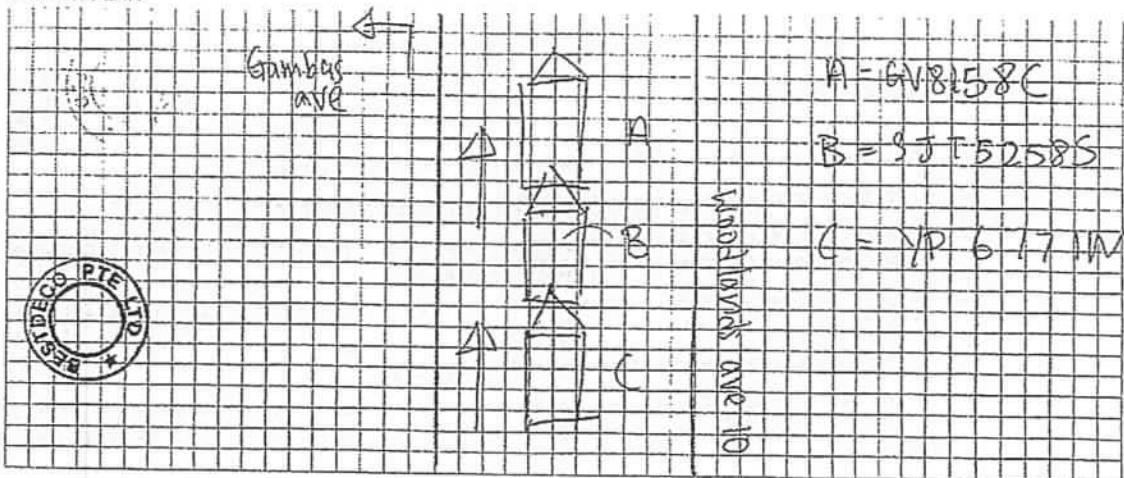
Driver's Signature
(If driver is not the policyholder)
Date & Time:

- 1 MAR 2019

IDAC KAKI BUKIT (VAC)

Reporting Centre Reason for Signature 4
Name: Singapore 415933
NRIC/ID: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

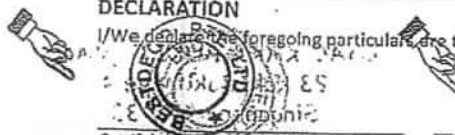
straight

I was on woodlands ave 10, heading towards gambas ave.

Suddenly, My front vehicle slowed down, from which I followed. Suddenly, I heard a loud crash at the rear of my vehicle.

DECLARATION

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



Policyholder's Signature
Date & Time:

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

- 1 MAR 2019

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Reporting Centre Personnel's Signature
Name: Singapore 415933
Tel: 67416697 Fax: 67492305
NRIC/Passport: Email: vackb@singnet.com.sg

AUTOMAX SURVEY

Blk 110 Bedok Reservoir Road, #07-280, Singapore 470110
Mobile : 9855 6879 Email : automaxsurvey@gmail.com
Registration No. 53110062J

Report Ref : TP19020039

Date: 11 Sept 2019

BESTDECO Pte Ltd
c/o Hup Ley Huat Motor Spray Painting Services
Blk 1, #01- 35
Kaki Bukit Ave 6
Singapore 489978

THIRD PARTY SURVEY ACCIDENT OCCURED ON 28 FEB 2019

Workshop Name and Address

Hup Ley Huat Motor Spray Painting Services
Blk 1, #01- 35
Kaki Bukit Ave 6
Singapore 417883

As per your instruction dated 19 March 2019 with regard to the above matter.
We have carried out a physical inspection on the said GV8158C
We enclosed herewith our report and findings as follows:

1. VEHICLE PARTICULARS

Registration No : GV8158C
Model : TOYOTA DYNA 150
Year / Capacity : Aug 2006 / 2982 cc
Chassis No : JTFUF34Y303012084

Engine No : 5L5657119
Mileage : 583 368 km
Colour : Metallic Silver

2. TYRES CONDITION

	<u>Size</u>	<u>Made</u>	<u>Balance</u>	<u>Rim</u>
FRONT O/S :	195/50/R15	Bridgestone	9.00 mm	Normal
REAR O/S :	155 R 12	Bridgestone	9.00 mm	Normal
FRONT N/S :	195/50/R15	Bridgestone	9.00 mm	Normal
REAR N/S :	155 R 12	Bridgestone	9.00 mm	Normal

AUTOMAX SURVEY

Blk 110 Bedok Reservoir Road , #07-280, Singapore 470110

Mobile : 9855 6879

Email : automaxsurvey@gmail.com

Registration No. 53110062J

3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the Rear portion(s). For more detail of the damages, please see photograph attached.

4. Estimated normal period of repair : 04 working days to complete

5. In accordance to your instruction, we have Not Authorised repair to the vehicle and the survey done on a "Without Prejudice" basis. We hope that this report will be of assistance to you in dealing with the matter.

6. Should you discover any discrepancy in the report, please kindly notify us within 1 week, or the report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle Number : GV8158C

SPARE PARTS

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (S\$)	Our Revised Estimation (S\$)
<u>List Items</u>				
1 pc	Tailboard with hinges	Bent/deformed	\$ 1,264.90	\$ 1,264.90 1,064.90 BT ✓
1 pc	Tailboard lock	Damaged	\$ 165.00	\$ 165.00 99.80 PL ✓
✓ 2 pcs	Tailboard rubber stopper 1 pc @ 35.00	Warped/deformed	\$ 78.50	\$ 78.50 35.00 BT ✓
1 pc	Tailboard lower member	Bent/distorted	\$ 289.90	\$ 289.90 289.90 NDN ✓
1 pc	Side gate support hinges	distorted	\$ 110.00	\$ 110.00 110.00 NDN ✓
1 pc	Side board	Bent - repair	\$ 1,385.00	\$ 1,385.00 1,385.00 RX ✓
1 pc	Sticker 'TOYOTA'	Essential	\$ 96.60	\$ 96.60 96.60 } N/A ✓
1 pc	Sticker 'DYNA'	Essential	\$ 31.90	\$ 31.90 31.90 } N/A ✓
2 pcs	Rear number plate lamp	cracked	\$ 76.20	\$ 76.20 76.20 KAX ✓
1 pc	Rear number plate panel	bent	\$ 100.00	\$ 100.00 100.00 SVC ✓
1 pc	Taillamps	Base cracked	\$ 225.00	\$ 225.00 225.00 BRV ✓
1 pc	Taillamp brackets	Dent/distorted	\$ 110.00	\$ 110.00 110.00 BT ✓
1 pc	Exhaust silencer	Bent/distorted	\$ 647.35	\$ 647.35 545.10 BT ✓
1 pc	Exhaust silencer rubber	Bent/deformed	\$ 75.00	\$ 75.00 48.60 PL ✓
Parts Sub-Total			\$ 4,655.35	\$ 4,655.35 2,128.40 4,655.50
Discount 25.00%			\$ 1,163.84	\$ 1,163.84 532.10 1,163.88
			\$ 3,491.51	\$ 3,491.51 1,596.30 3,491.63

Vehicle Number : GV8158C

SPARE PARTS

QTY	PARTS DESCRIPTION	CONDITION	Workshop Estimation (S\$)	Our Revised Estimation (S\$)
<u>Special Nett Items</u>				
1 pc	Sticker '70KM/H'	Essential	\$ 35.00	\$ 35.00 15.00
1 pc	Rear number plate	damaged	\$ 65.00	\$ 65.00 25.00
Special Nett Sub-Total			\$ 100.00	\$ 100.00 40.00 100.00
Spare Parts Total			\$ 3,591.51	\$ 3,591.51 3,591.63

40.00

1636.30

LABOUR COST

S/No	JOB DESCRIPTIONS	Workshop Estimation (S\$)	Our Revised Estimation (S\$)
------	------------------	---------------------------	------------------------------

Spare Parts Total c/f \$ 3,591.51 \$ ~~1636.30~~ 3,591.63

- | | | | |
|---|---|-------------|-------------------------------|
| 1 | Labour charges to repair and panel beat the tailboard lower support, rear cargo deck and replace the above mentioned parts. | \$ 1,400.00 | \$ 400.00 1,200.00 |
| 2 | To check wiring functions & conduct water leakage test. | \$ 80.00 | \$ 30.00 60.00 |
| 3 | To putty, apply primer & spray-paint the affected areas. | \$ 1,200.00 | \$ 300.00 1,000.00 |
| 4 | To apply rust-proofing on repaired/replaced panels. | \$ 100.00 | \$ 30.00 80.00 |

Total \$ 6,371.51 \$ ~~2396.30~~ 5,931.63

@ 20% ~~479.26~~
1917.04

The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a Lump Sum Repair of :

\$ 4,750.00


Fong Kok Heng
Qualified Appraiser



4/5 1917.04

L/S 1900.00 TGLM
3/10/19

Hup Ley Huat Motor Spray Painting Services

No.1 Kaki Bukit Ave 6 #01-35 AutoBay, Singapore 417883

TEL:6746 0674 FAX: 6841 7639 HP:96773832 EMAIL: Hup.ley.huat@gmail.com

BESTDECO Pte Ltd

61 Ubi Ave 2 #04-12

Automobile Megamart

(S) 408898

Date : 14/09/19

Vehicle No. : **GV8158C**

Make : Toyota Dyna 150

Acc Date : 28/02/19

Lump Sum Repair Costs

\$ 4750.00

Singapore Dollars: Four Thousand Seven Hundred And fifty dollars only.

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.
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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	28/02/2019 14:22
Date Of Accident	28/02/2019 11:15
Exact Location Of Accident	ALONG WOODLANDS AVE 10 & GAMBAS AVE X-JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT5258S
Insured/Policyholder	
Name Of Registered Owner	CHOO LIAK HUNG
NRIC No	S0204021B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93493830
Alternative Phone No	OTHERS-93493830

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE
Exact Purpose for which vehicle was being used at time of accident	PTE USE
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 CAR

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05020517
Cover Note Number	16/10/18 - 15/10/19

Driver

Name of Driver	CHOO LIAK HUNG
NRIC No	S0204021B
Date Of Birth	01/01/1951
Occupation	INDOOR
Date Of Driving Pass	16/08/1979
Driving Experience	39 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93493830
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 603 ANG MO KIO AVE 5 #08-2677
Postcode	560603
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	CHAIN COLLISION
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	3
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

REFER TO ATTACH. *THIRD PARTY CLAIM BY SENG HWEE MOTOR*

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	YP6771M
Vehicle Make/Model/Colour	HINO 300 LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YANG MING
NRIC/Passport Number	G2683067U
Contact Number	82394801
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GV8158C
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Vehicle Make/Model/Colour	TOYOTA DYNA 150D
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

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.
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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: 28-02-2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

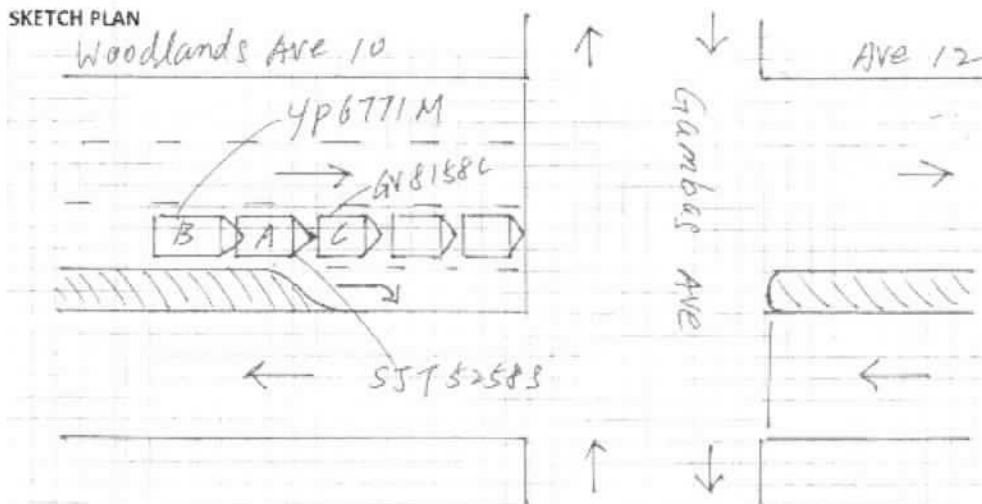
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 28-02-2019 @ 11.15 hrs, I was driving my car A (SJT5258S) along Woodlands Ave 10 towards Woodlands Ave 12 upon reaching the X-junction, the traffic light turns red and all the front vehicles including my car slowed down and stopped. After a few seconds the lorry B (YP6771M) which was behind me, did not stop in time and collided onto the rear portion of my car. Due to the huge impact, my car was forced to move forward and hit against the front lorry C (GV8158C). After the accident, I was feeling unwell and I will go for a checkup at the clinic. My car was badly damaged at both the front and rear portions.

That is all.

DECLARATION

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

Policyholder's Signature

Date & Time: 28-02-2019

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Center Personnel's Signature

Name: (YS)
NRIC/FIN No:

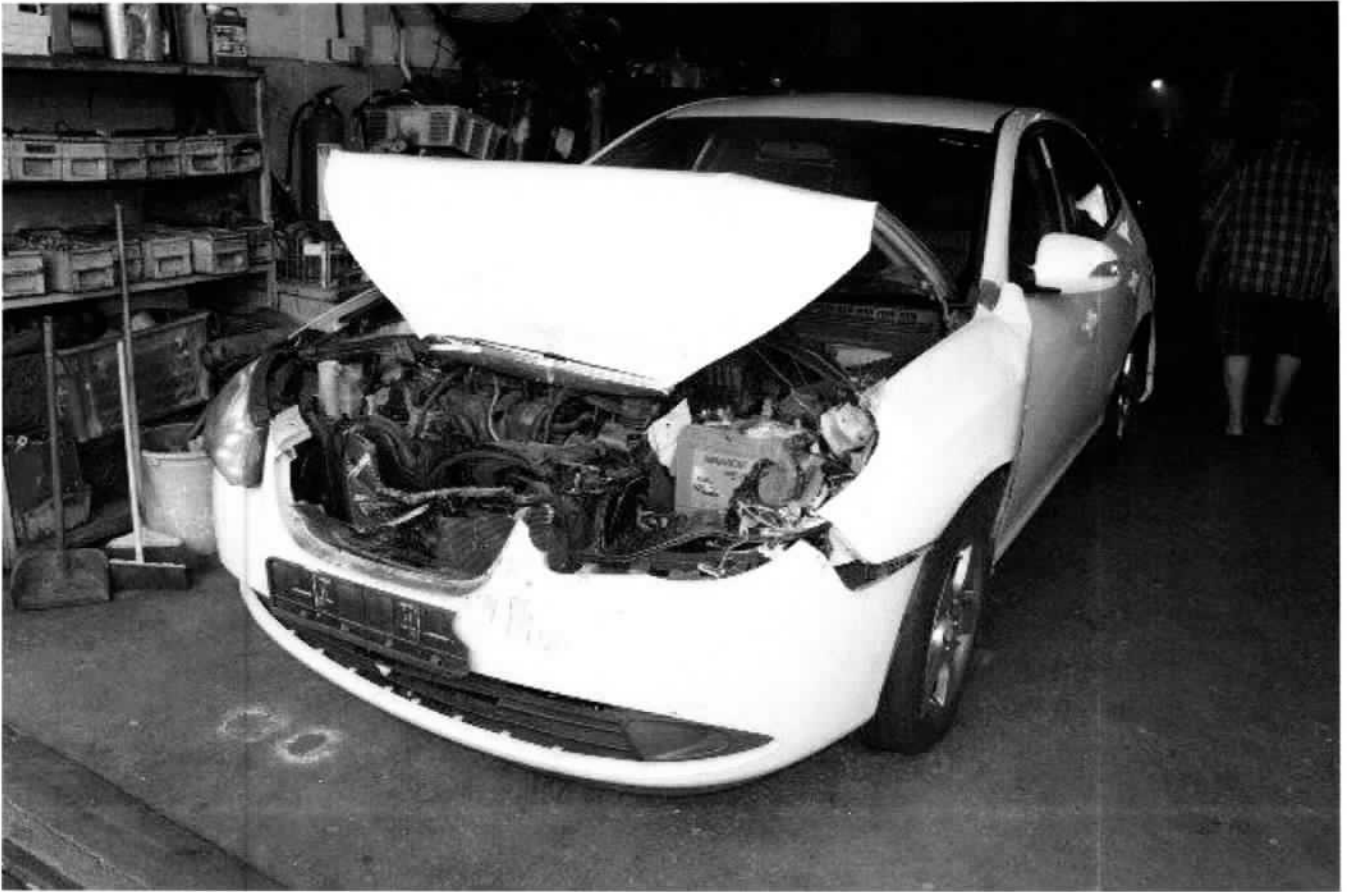
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo






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

Affiliated to Federation Internationale Des Experts En Automobile				
LONPAC INSURANCE BHD		Ref : CS3/LPC19004574/Bvf3e2-1		
300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Date : 07-10-2019		
		Code : LPC2		
1. Policy Particulars :- THIRD PARTY CLAIM				
	Insured Veh.	SJT 5258S	Veh. Inspected	GV 8158C
	Policy No.		Coverage (\$)	0.00
	Claim No.	18/19/19/VP05/021469	Excess (\$)	0.00
	Assign From	GERALD POH	Assign Date	03/10/2019
2. Vehicle Particulars & Condition				
	Make & Model	TOYOTA DYNA 150 D	c.c	2986
	Engine No.	HIDDEN	Year of Reg.	2006
	Chassis No.	JTFUF34Y303012084	Colour	SILVER
	Odometer	583358	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	GOOD		
3. Conditions of Tyres				
		Size	Make	Balance
	R/H Front Tyre	185 R14C	YOKOHAMA	6 mm
	L/H Front Tyre	185 R14C	YOKOHAMA	6 mm
	R/H Rear Tyre	155 R12C	YOKOHAMA	6 mm
	L/H Rear Tyre	155 R12C	YOKOHAMA	6 mm
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
DAMAGES SEE DETAILS.				
5. General Information				
	Accident Date	28/02/2019	Inspection Date	19/03/2019
	Survey held at	HUP LEY HUAT MOTOR SPRAY PAINTING SVS BLK 1 KAKI BUKIT AVE 6, #01-35 AUTOBAY SINGAPORE 417883		
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:			3 Working Days	



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Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GV 8158C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	TAILBOARD WITH HINGES	BENT	1,264.90	1,064.90
1	TAILBOARD LOCK	DISLODGE	165.00	99.80
2	TAILBOARD RUBBER STOPPER	BENT (1 PC ONLY)	78.50	35.00
1	TAILBOARD LOWER MEMBER	NO DAMAGED	289.90	-
1	SIDE GATE SUPPORT HINGES	NO DAMAGED	110.00	-
1	SIDE BOARD	TO REPAIR SEE LABOUR	1,385.00	-
1	STICKER "TOYOTA"	NO APPLICATION	96.60	-
1	STICKER "DYNA"	NO APPLICATION	31.90	-
2	REAR NUMBER PLATE LAMP	NO APPLICATION	76.20	-
1	REAR NUMBER PLATE PANEL	SERVICEABLE	100.00	-
1	TAILLAMPS	BROKEN	225.00	225.00
1	TAILLAMP BRACKETS	BENT	110.00	110.00
1	EXHAUST SILENCER	BENT	647.35	545.10
1	EXHAUST SILENCER RUBBER	DISLODGE	75.00	48.60
	LESS 25% DISCOUNT		-1,163.84	-532.10
			3,491.51	1,596.30
<u>SPECIAL NETT ITEMS</u>				
1	STICKER "70KM/H" (SN)	ESSENTIAL	35.00	15.00
1	REAR NUMBER PLATE (SN)	DAMAGED	65.00	25.00
			100.00	40.00
<u>LABOUR</u>				
	LABOUR CHARGES TO REPAIR AND PANEL BEAT THE TAILBOARD LOWER SUPPORT, REAR CARGO DECK AND REPLACE THE ABOVE MENTIONED PARTS. INCLUSIVE OF THE REPAIR OF SIDE BOARD.		1,400.00	400.00
	TO CHECK WIRING FUNCTIONS & CONDUCT WATER LEAKAGE TEST.		80.00	30.00
	TO PUTTY, APPLY PRIMER & SPRAY-PAINT THE AFFECTED AREAS.		1,200.00	300.00



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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO APPLY RUST-PROOFING ON REPAIRED/REPLACED PANELS.		100.00	30.00
			2,780.00	760.00
GRAND TOTAL			6,371.51	2,396.30
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,900.00

Report Ref No. CS3/LPC19004574/Bvf3e2-1

LIM TEOW GUAN

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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