	Hock Ann	ASSIGNMENT (Office)			
From (Person	leter wang	of ASm (4x4)	Date/Time: 8-10.19 8.50.19		
Estimated Cos	st	Bill to:			
To Inspect Ve	strrrestodreste chicle No: SJQ 54	VA/INV/MV/CS	Insured: SMG 2707R Tel: 98686000		
	m/s my cor con		Tel: 98686000		
of 53 Ub	Mu 1 #101-	33			
Policy No:		Claim No:	S 9moorp C		
Sum Insured:		Excess:			
Make of Veh:	The same of the sa	N. N.	D.O.A. 4.10. 2019		
CA / REV Date/Time:	REP. / REV 24 HRS	Yup" Person Contacted: Hui Qy	H.O.D. Endorsement:		
Date/Time	Action/Instruction (X) Estimate	4 y		
	STQ S460P-NA INC19017513 Z4 DOA: 4 10/2019				
	SMG J FOFR - X	The Court of	- Post		
	After paint = 14/10/19				
	153 mantle year	ruen = cyliuly			

200		ASSIGNMENT	11 (x	0 ,	/ 0
PRS	Date 9.10 - 2019	1 (10)		Yr Regn: 16/6	
Estimated Cost:		Type M.Car / M.C	ycle / Bus / Van / Lo	rry / Taxi / Prime Move	er /
OD TP INS I TP RES I OD I	RES / EVA / INV / MV	Truck / Trai			
To Inspect Vehicle No:		Make:	4. HO AVAI	UTE AT C.C	1591
at Workshop m/s My	car consultant	Colour	Beize	A/C: Insured / St	td / NI / NA
of 53 Ubi Amenu	1 #01-33	Sp.Reading	120693km	T/Radio: Insured / S	td/NI/NA
Insured:		Eng/No:			
Policy No.		C/No:	KMHD441B1	294751853	
Claims No.		Gen. Cond: Good	/ Fair / Poor / Burnt		•
Sum Insured:	Excess:	Steering (Inorder	/ Jammed / Leaked /	Burnt or	
(Client's Record)		Brake: Inorder	/ Jammed / Leaked	Burnt or	-
Make of Veh:			Rim / STD A/Rim or		
		Tyre Size: F		185/65/R	15
(Policy Condition)		F	t: /c	85/65/RI	15
Remark: The veh had comm	nenced its N/S	O/S BS / DUN / EXNO	OVA / GY / FS / LIZA	/ MIC / OHTSU / PIR / S	SUMI /
repair at the time	of inspection.	TOYO / YOKO			
Bal. or Market Value:		Front	Folken mm Falken	Rear	- BRIDESTOR
IDAC Accident Rport:	Consistent? : Yes or No	R/Bal.	mm	R/Bal. 5	mm
GIA / PR Seen:	Consistent? : Yes or No	L/Bal.	mm Falker	L/Bal. 3	mm Mm
Est Repairs: 3	days Res.: Yes or No	D.O.A. 4/10	1/19	D.O.I. 9/10/	17 1124 av
Lum Sum:	% 3 Val.: Yes or No	Survey held at		1 car con	
Editi Gaiti	Du pil	Des. of Damages	s: Frt / Rear / O/S	I NIS I UIC I Roofte	ор ог
CA / REV / REP. / 2	24 HKS	IN / OUT			
Date: Pers	on Contacted:		hassis frame / Boo	ly Structure affected d	lue to collision.
Date / Time Action / In	nstruction			1-7 -	-1110
					5460P
		Hyand Amele 1		COR	Extende s) case
	22900		18k 7.3k		27 0 10 -
pv-	11895	Roys >	108K 23K	1. 10	
NV-	17000	dr 22	1	posedy	
MV	-21-2214				
			1	Lligh	2019
	7	Davis Of Pons	le-	((
Date/Time, File Pass to?	: Preli. Report	Days Of Repa		Survey Fee:	100
1) or typical	: Final Report	Resurvey No.	of Trip:	Transportation:	100
Date/Time, File Return to?		Add Fee: Site Ins	_{SD} (\$)s+Rssi	
2)		: Intervie) Photos	
Property Control	Don.	: Tech. I) Offrees	
Fep Former:	TKZ.	: Weel's			
Lump Sum I t.P. I: Ca	1	10000	0.190	TOTAL	100
				12/106	100

Menu



Service Request Details

Claim

S9M022PC

Reference

CC4/ASM19017798/ga3

Loss Date

October 4, 2019

Report Date

Oct 4, 2019 8:50:00 AM

Request Date

October 8, 2019

Due Date

October 8, 2020

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

ctions		
ext Step		
nish the work		
Complete Work	More ▼	

Vehicle Information

Incident Vehicle Registration #

SJQ5460P

LKK AUTO CONSULTANTS PTE LTD (TP) -

Menu

Model

. . .

HD AVANTE 1.6 A

Service Address

Primary Contact/Insured

ZHANG JIANHUA 176 CANBERRA DRIVE, #02-13, 767950, Singapore 94594822

Claim Handler

WANG Peter

peter.wang@axa.com.sg

Additional Instructions

Messages Invoices History Documents Assessment Metrics Notes

New Message

DHIWAR Namrata

From:

My Car Consultant <admin@mycar.sg>

Sent:

Friday, October 04, 2019 3:41 PM

To:

SG AXA Insurance SM AXA SGP - Motor Survey

Subject:

[EXTERNAL] OUR REF: SJQ5460P YOUR REF: SMG2707R PRE-REPAIR INSPECTION

FOR SJQ5460P

Attachments:

SJQ5460P_04102019.PDF

Categories:

Namrata

WITHOUT PREJUDICE

OUR REF: SJQ5460P YOUR REF: SMG2707R

Dear Sir/Madam,

PRE-REPAIR INSPECTION FOR SJQ5460P ACCIDENT INVOLVING SJQ5460P AND SMG2707R

We refer to the above matter and enclosed herewith our client's GIA report and Notification of Pre-repair inspection for your attention.

We also enclosed herewith the State Court of the Republic of Singapore Practice Direction - Amendment No. 1 of 2016 of 2016 of Pre-repair Inspection for your attention

Warm Regards, Kai Ling

My Car Consultant Pte Ltd 53 Ubi Avenue 1 Paya Ubi Industrial Park #01-33 S(408934)

Tel: +65 9868 6000 / Fax: 6925 5219

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51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL.: (065) 62563561 FAX: (065) 62564315

Immediate Advice

To: AXA Insurance Pte Ltd

21/10/2019

Survey Details:

Date of loss	4-Oct-19
Date of appointment	8-Oct-19
Date of survey	9-Oct-19
Location of survey	MY CAR CONSULTANTS PTE LTD

Vehicle Details:

Claim Type:	Third Party Claim	
Vehicle number	SJQ 5460P	
Make and Model	HYUNDAI HD AVANTE 1.6A	
Date of registration	16/5/2009	
Excess	-	
Market Value	\$	22,000.00
Parf Rebate	\$	11,895.00
Nett Loss	\$	10,105.00

Repair details:

Initial Estimate	\$	(a)
------------------	----	-----

Proposed/Revised repair cost:

Parts	
Check items (estimate)	
Labour	
Total	\$ -
Lump Sum(if applicable)	

North and Alexander and Alexander	2
Number of days for repair	3

51 UBLAVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

The estimate repair cost of the damaged vehicle is in the
region of \$1,800.00 - \$2,300.00.

Mandate:

Liability(TP)	%	
Proposed repair cost	\$	
Loss of use	\$	no. of days
Loss of rental	\$	no. of days
Loss of income	\$	no. of days
LTA search fees	\$	
Others	\$	
Proposed Total	#VALUE!	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	6201
Vehicle No.:	SJQ5460P
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Oct 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	HD AVANTE 1.6 A
Primary Colour:	Beige
Manufacturing Year:	2009
Engine No.:	G4FC9U648317
Chassis No.:	KMHDU41BR9U751853
Maximum Power Output:	89.7 kW (120 bhp)
Open Market Value:	\$11,706.00
Original Registration Date:	16 May 2009
First Registration Date:	16 May 2009
Transfer Count:	3
Actual ARF Paid: Intended PARF Rebate Details	\$11,706.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	30 Apr 2024
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$13,088.00
COE Rebate Amount:	\$11,895.00
Total Rebate Amount: Message	\$11,895.00

The information contained herein is correct as at 14 Oct 2019

COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No. SJQ5460P

HYUNDAI / HD AVANTE 1.6 A

Vehicle Type:

P10 - Passenger Motor Car

Vehicle Scheme:

Normal

Propellant:

Petrol

Motor No.:

Power Rating:

Maximum Laden Weight:

1760 kg

Year Of Manufacture:

2009

Lifespan Expiry Date:

PQP Paid:

\$13,088.00

Road Tax Expiry Date:

15 Nov 2019

Inspection Due Date :

15 May 2020

CO2 Emission:

CO Emission:

NOx Emission:

Vehicle Attachment 1:

No Attachment

Chassis No.:

KMHDU41BR9U751853

G4FC9U648317

Engine Capacity:

1591 cc

Maximum Power Output:

89.7 kW (120 bhp)

Unladen Weight:

1264 kg

Original Registration Date:

16 May 2009

COE Category:

A - Car (1600cc & below)

COE Expiry Date:

30 Apr 2024

PARF Eligibility Expiry Date:

Intended Transfer Date:

14 Oct 2019

CEV/VES Rebate Utilised Amount:

HC Emission:

PM Emission:

Fees To Be Paid For Transfer

\$25.00 \$406.00 Road Tax Renewal - 6 months (16 Nov 2019 to 15 May 2020) \$849.00 Road Tax Renewal - 12 months (16 Nov 2019 to 15 Nov 2020)

Message

The fees above do not include any late road tax fees, which apply if road tax or lay-up has expired. You can use the digital service Enquire Road Tax Payable to check if there are any late road tax fees. Any road tax that has been paid for the vehicle will be transferred to the next owner. Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever

is earlier.

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OK +

All Sections

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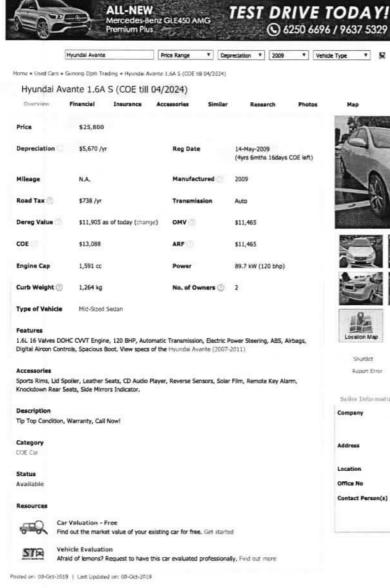
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Sciles Information **Gunong Djati Trading** Gealer's priorint Gealer's priorint Gealer's priorint Car Half If The Grandstund 64649355 Ronnie 90077238 97810867 98804444 90097159

Unfront Payment Transfer Fee \$25 Down Payment \$7,740 (change) Based on 3.75% admest rate 1st Instalment \$391 \$1,191 onwards

Not at fault? No upfront payment required! (Cet a quote)
Quote assumes a standant profile. Yest a quote for exact figure MI AVIVA Check with seller for exact figure Total Upfront Payment \$9,347







437 (1) Por Bops 30 22) Per Super clips 3.) per Ruper so In notiones 2/1/ 65.60 (4.) In But starte 145.30 5.) teil gate Endlin 20130 31.20 (,) fa, 1 gla 28/090 (Aute) 7.) to, 1 gul 195 (5) 20.30 8.) tail gate lock 11830 9.) tant gate Rusbur 165,00 10.) Per verge sugar 200 - met net 1033.20 200/0 Spur 826.56 (9 km 450 (008 2076.56 spe nett = 220 20% -4/5 1(77.24 12004

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to
- 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.
- 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

ACCIL	JENT	STAT	EMEN	T
247 TV TV TV				_

Date Of Report

04/10/2019 14:41

Date Of Accident

04/10/2019 08:50

Exact Location Of Accident

JUNC MARRYMOUNT RD & PEMIMPIN DR

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJQ5460P

Insured/Policyholder

Name Of Registered Owner

MUHAMMAD HAFIZ BIN ABDUL RAHIM

NRIC No

S9107620I

Email Address

NOEMAIL

Mobile Phone No.

(LOCAL) +65-90068994

Alternative Phone No.

OFFICE-90068994

Vehicle Particulars

Manufacturer

HYUNDAI

Model

HD AVANTE 1.6 A

Exact Purpose for which vehicle was being used at PRIVATE USE

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5110835478

Cover Note Number

Driver

Name of Driver

MUHAMMAD HAFIZ BIN ABDUL RAHIM

NRIC No

S9107620I

Date Of Birth Occupation

07/03/1991 OUTDOOR

Date Of Driving Pass

03/06/2019

Driving Experience

Gender

0 YEAR AND 4 MONTH

Mobile Number

MALE

Fax Number

(LOCAL) +65-90068994

Contact Number

OFFICE-90068994

EMail Address

NOEMAIL

Address

BLK 617 YISHUN RING ROAD

#10-3252

Postcode

760617

Was driver an employee of the Insured's Company NO

OWNER

If No, Relationship of the Driver with the Insured

Vehicle

Insurance Company of Driver's Own Vehicle

Vehicle Registration Number of Driver's Own

General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

WET

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?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

5

Number of Passengers (Including Driver)

Passenger 1

NAME:

GENDER:

: MALE

Passenger 2

NAME:

GENDER:

: FEMALE

Passenger 3

NAME:

GENDER:

: FEMALE

Passenger 4

NAME:

9 4

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

ON STATED DATE AND TIME, I WAS TRAVELLING STRAIGHT ALONG THE STATED VENUE. FRONT CAR STOPPED, I STOPPED MY VEHICLE AS WELL. SUDDENLY I FELT AN IMPACT OF MY VEHICLE AND REALIZED THAT VEHICLE B HIT ONTO MY VEHICLE REAR PORTION. THERE WERE 3 VEHICLES INVOLVED IN THIS ACCIDENT.

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

SMG2707R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR ZHANG JIANHUA

S8475206A

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SMK8212R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

JESSICA WOON SIEW LI

S8083891C

Accident 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.
- 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.
- 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.
- 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)

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:
 - 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 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:

Reporting Centre Personnel's Signat

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN A: Wasybop. 8: 3×6020072 1 Dring, mpin (10 () D) DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Refer to HI 9te MINT DECLARATION I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

CUMMC Skinger Frankrick, VI

Date & Time:

Driver's Signature

Date & Time:

(If driver is not the policyholder)

Page 5 of 15

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



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

Page No.:1 of 1

		PRE-REPAIR INS	PECTION REPO	ORT
AXA	INSURANCE PTE	LTD	Ref: CS3/ASM1	19017798/Hcf3e2
8 SHENTON WAY #24-01 AXA TOWER SINGAPORE 068811			Date: 23-10-2019	9
ATTN : PETER WANG			Code: ASM	
		Policy Particulars	:- (THIRD PARTY	CLAIM)
	Insured Veh.	SMG 2707R	Veh. Inspected	SJQ 5460P
	Policy No.		Coverage (\$)	0.00
	Claim No.	S9M022PC	Excess (\$)	0.00
	Assign From	PETER WANG	Assign Date	08/10/2019
		Vehicle Par	ticulars & Condition	on
	Make & Model	HYUNDAI HD AVANTE 1.6 A	c.c	1591
	Engine No.	HIDDEN	Year of Reg.	2009
	Chassis No.	KMHDU41BR9U751853	Colour	BEIGE
	Odometer	120693 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
		Cond	itions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	185/65 R15	FALKEN	5 mm
	L/H Front Tyre	185/65 R15	FALKEN	5 mm
	R/H Rear Tyre	185/65 R15	BRIDGESTONE	5 mm
	L/H Rear Tyre	185/65 R15	BRIDGESTONE	5 mm
		Descrip	tion of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE R	EAR PORTION.	
5.		Gene	ral Information	
	Accident Date	04/10/2019	Inspect Date / Ti	ime 09/10/2019 (11:24 AM)
	Survey held at	MY CAR CONSULTANT PTE L	.TD	
		53 UBI AVENUE 1 #01-33 PAY	'A UBI INDUSTRIAL F	PARK SINGAPORE 408934
ia.			Remarks	
	B) THE REPAIR E	ON WAS CONDUCTED ON A "V STIMATE WAS NOT PRESENTE VAS TOLD TO PREPARE THE E	ED AT THE TIME OF STIMATE.	
	C) ENCLOSED PLD) THE ESTIMATE	EASE FIND DAMAGED VEHICL ED REPAIR COST OF THE DAM	AGED VEHICLE IS IN	THE REGION OF \$1,800-\$2,300
5b.	C) ENCLOSED PL D) THE ESTIMATE	ED REPAIR COST OF THE DAM	AGED VEHICLE IS IN	N THE REGION OF \$1,800-\$2,300

Report Ref No. CS3/ASM19017798/Hcf3e2

Inspected By

les

LEE HOCK ANN

K.K.LAU CPT(RET)

Asst. Automotive Assessor

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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