Unity : Start ASSI MINITY : Start Boon & of	71 90 2832 GCd3 Special Instructions GNMENT (Office)
stimated Cost; DD 1701 WS-1 TP RES / OD RES / EVA / INV To Inspect Vehicle No: GBH Workshop m/s G93 J Wood!	1MV 1CS 9155L Insured: 3KN 9549X
Policy No: DMPCSN 30349S1604 Sum Insured: Make of Veh:	20141 1 1 20 2 664 (0 1
(Client's Record) CA / REV / REP. / REV 24 HRS Date/Time: DIApro allolia Person C	Ontseted: Mr. 160 Vehicle IN OUT
Date/Time Action/Instruction Introduction (ABH 9155L-CS/C711) SKN 9540×-×	010 111110
Dismartle: 10/10/2019. Adter repair: 16/10/2019	

5 m	over Steve	REF:	¥		
Gilla	type UTeve		45S1G	INMENT	
From:		Date:		Veh No: GBH 9155L Type: M.Car / M.Cycle / Bus / Van / Lor	Yr Regn: 29 10 11
OD / To Ins	ated Cost: TP / WS / TP RES / OD RES / spect Vehicle No:	EVA/INV/MV		Truck / Trailer or Mako: Toyota Hinre Colour Red	c.c 2982 A/C: Insured / Std / NI / NA
of Insure	orkshop m/s			Sp.Reading 27860 Eng/No:	T/Radio: Insured / Std / NI / NA
Policy	500 TO			CiNo: JTFHT01F. Gen. Cond: Good File Poor Burnt	
	Insured: ient's Record)	Excess:		Steering: Inorder / Jammed / Leaked / Brake: norder / Jammed / Leaked / Modi: Nil / S/Rim / STQ A/Rim or	
	e of Veh:		× × · · · · · · · · · · · · · · · · · ·	Modi: Nil / S/Rim / STO A/Rim or Tyre Size: F: [6]	95/RISC
200	olicy Condition) nark: The veh had commence repair at the time of ins	L	N/S O/S	A	MIC / OHTSU / PIR / SUMI /
Bal.	or Market Value:		//	Eront R/Bal. 5 mm	Rear R/Bal. mm
GIA	/ PR Seen:	Consistent?: Yes or Consistent?: Yes or ys Res.: Yes or 3 Val.: Yes or	No No	L/Bal. 5 mm D.O.A. 3/19//9	L/Bal. 5 mm D.O.I. 9/10/19
75	m Sum: % . / REV / REP. / 24 HR	RS	ehicle: IN/OUT	Des. of Damages : Fry Rear / O/S	
Dat	te: Person Co	ontacted:		The U/C / Chassis frame / Boo	y Structure affected due to collision
D	Action / Instruction / Instruc		ergt - 6 1 Hays 14pm OCT 2019	K-7K monto	9
	1 x-1-	к (
1)		Prell. Report Final Report		Days Of Repair: 9 Resurvey No. of Trip:	Survey Fee;
2)			Add Fe	: Interview (\$.) s + Rs SI) Photos
	Report Format : PRS. .ump Sum / I.B.I: (\$)	: Tech Invs (\$) Others
			200		TOTAL

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

	BFOLDER TRA		Transaction of	TV:VEW:000	Typesen	C. (100 Carlo)	Tall to a construction	(meneric)		
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Sub	mitted	Ins Auth'ed	Status		
Main	09 Oct 2019		09 Oct 2019 13:49 Assign			2.01109.02		New Assignment Cancel Case		
	Main	Re	ference		Claim Details		Docume	nts] [Show All
CLAIM S	UBFOLDER DI	TAILS	A Samuel Control of the Control of t		A STATE OF THE OWNER, OR THE OWNER, O	[Create	d by insurer]			
Insured:										
Main Claimant:	NINJA LO	GISTICS PTE LT	D, Co. Reg. No	o.: 2014120	14E					
Vehicle Re No.:	GBH915	5L			Date of Loss:	03/10/2	019 07:00 - :59			
Claim Type	e: TP / SN	M19D204664C0	Policy/Cover Note No.:	DMPCSN30349518044						
Vehicle Re No. (Insured):	SKN9549	×			Policy No. (Claimant):	DMCVSN1834951800				
					Excess:	5\$0.00				
Repairer:	Eng Soor	Painting Service	es (HQ) 3931 W	OODLANDS	ROAD, 677978 W	Voodlands	- Tel: 67606271			
Handling Insurer:	China Ta	iping Insurance ((Singapore) Pt	e. Ltd. (HQ) - Tel: 6389 611	1 (Han	dled by Chong B	oon Sen]		
Claimant's Insurer:	China ia	iping Insurance								
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel	6256-3561	[Final Rpt	due 18/	10/2019]			
ASSOCIA	ATED MAIL RI	CEIVED						View All	Compos	e Case Ma
There are	no mail for this	case.								
ALL ASS	OCIATED TA	sks ⁼				View A	II Search Tasks	Create N	New Task	Comple
ASSOCIA There are	ATED MAIL RI no mail for this	ECEIVED s case. SKS⊟				y topozota to		Create N	_	

No results.

MSYH19131684 / Sin Yew Hup Auto Pte Ltd - HQ ENTRY DATE & TIME: 04/10/2019 16:55 SUBMITTED BY: Teo Hong Eng

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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.
- 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.
- 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

04/10/2019 16:55 03/10/2019 07:40

Date Of Accident

00/10/2010 07.40

Exact Location Of Accident

CLEMENTI AVENUE 6

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE
GBH9155L

Vehicle Registration Number

Insured/Policyholder

NINJA LOGISTICS PTE LTD

Name Of Registered Owner

201412014E

Co Reg No Email Address

NOEMAIL

Mobile Phone No

Alternative Phone No

Office-87485447

Vehicle Particulars

Manufacturer

TOYOTA

Model

HIACE-3.0 D TURBO 5 DR (M)

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

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

DMCVSN1834951800

Cover Note Number

Driver

Name of Driver

RAIMMIE BIN ROHANI

NRIC No

S7601490F

Date Of Birth

15/01/1976

Occupation

OUTDOOR

Date Of Driving Pass

18/04/2013

Driving Experience

18/04/2013

Driving Experience

6 YEARS AND 5 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-86206510

Fax Number

Contact Number

EMail Address

RAIMMIE 1976@OUTLOOK.COM

Address

BLK 438 CHOA CHU KANG AVENUE 4 #10-475

Postcode

680438

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)

3

involved in the accident

YES

Was any body injured in the Accident?
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?

YES

If Yes, Please state which Police Station

Police Station Name

JURONG EAST NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: NO. 92 BOON LAY WAY, POSTCODE: 609962, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-8999999 - FAX NO: 66655791

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT NO. T/20191003/2060.

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

SMN5261C

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE HIRE

Vehicle Category Name of Driver

THANG KOK WEI JOHN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKN9549X

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

KOO YOON SEONG

NRIC/Passport Number

Contact Number

91519283

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

RAIMMIE BIN ROHANI

Approximate Age

Injuries Sustain

Injured person in which vehicle?

GBH9155L

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Oriver.
- 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 admitsion 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.

NINJA LOGISTICS PTE. LTD ROC NO. 201412014E

Policyholder's Signature Data & Time:

The State of the Particle

Criver's Signature

(If driver is not the policyholder)

Date & Time: /

1540 HR

Faporaria Canda Fersonnel's Signature

NRIC/FIN No.:

51100072/Z

Accident Sketch Plan

			the same of the sa	
A GBH9155L	1	1 . 1		
B: 5KM 9549 X	-	1 21		
C: SMN 5261 C		A		
		! A!		
		[8]		
ESCRIBE CIRCUMSTANCES OF				
Please refer to	Police	Report No.	T/20191003	3 2060
1				1
	2000			
	re tra trica In-			
	rs sie true In (every respect.		
We declare the foregoing particula	/	every factors.		
DECLARATION We deciare the foregoing particular A LOGISTICS PTE. LTI ROC NO. 201412014E	o. /	hu		Josephina
A LOGISTICS PTE. LTI ROC NO. 201412014E olicyholder's Signs ture	D. briver's Si	Ignature	Feporil	OSCANIA Personnel's Signature
We declare the foregoing particular A LOGISTICS PTE. LTI ROC NO. 201412014E	Oriver's St	hu	F.epofil Name	Teo Hong Eng

Accident Sketch Plan





Police Station Of Origin: Jurong East N.P.C

92 Boon Lay Way SINGAPORE 609962

Tel No: 1800-8999999

1 of 4 Report No. T/20191003/2060

F A TRAFFIC	ACCIDENT	CHANACTERS WILLIAM CO.				
	ade:	Vide Report No.: Station Diary 1 53				
t's Particu	ılars		·特别和1982年(4)			
Informant:		Address: APT BLK 438 CHOA CHU KANG AVENUE 4 #10-475				
	90F	Contact No.: Home/Office: Mobile: 86206510				
	EN · ·	Email:				
Age:	Date of Birth: 15/01/1976	Type of Informant: Driver				
Male 43 15/01/1976 Race: Malay		Language: English	Institution / School Name:			
		Driving Licence Information: Class: 3,4	Information: Date of Expiry:			
	e Report M 19 12:12 It's Particulation Particulation Particulation Informant: BIN ROH. ID No.: 0 / S760148 ty: ORE CITIZ Age: 43	Informant: E BIN ROHANI ID No.: 0 / S7601490F ty: ORE CITIZEN Age: Date of Birth: 43 15/01/1976	re Report Made: 19 12:12 Int's Particulars Informant: BIN ROHANI ID No.: O / S7601490F Age: Age: Age: Age: Age: Date of Birth: 43 15/01/1976 Driver Language: English Driving Licence Information:			

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/10/2019 07:40	Straight Road
Location: Along Road 1 CLEMENTI A Clementi Ave Weather:		ne exit		Road Speed Limit:
Clear		Dry		The second secon
Traffic Flow: One Way		- Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collis	ion: ing Vehicles - Head	d To Rear		Anyone conveyed by ambulance:

Details of Vo	The second secon	Make	Model	Color	Condition	No of Passenge
GBH9155L	Van	TOYOTA	HIACE	Red	Slightly Damaged	0 -
SKN9549X	Car	VOLVO		Maroon		0
SMN5261C	Car	HONDA	FIT	Grey		0





Police Station Of Origin: Jurong East N.P.C 92 Boon Lay Way SINGAPORE 609962 Tel No: 1800-8999999

2 of 4 Report No. T/20191003/2060

CONTINUATION OF REPORT

Any Pedestrian In	volved: No				
No. of Pedestrian		Use of Pe	edestrian	Cross	ing: NA
Driver					
Name	RAIMMIE BIN ROHANI		ID No.	*	S7601490F
Related Vehicle	GBH9155L (Van)		Contac	t No.	86206510
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL			of l e & Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	03/10/2019	Date Dis	charge		
No. of Days grant	ed Medical Leave 03	Degree o	of Injury	NIL	
Driver		WEST TO			
Name	KOO YOON SEONG		ID No.		S2693102I
Related Vehicle	SKN9549X (Car)			et No.	NIL
Hospital/Clinic	NIL .			of e & Date	Class: NIL Date of Expiry: NIL
Date Treatment	NII ·	Date Dis	charge	NIL	
No of Days gran	ted Medical Leave NIL	Degree	of Injury	NIL	
Driver			1500	State C	
Name	THANG KOK WEI		ID No.		S7935500C
Related Vehicle	SMN5261C (Car)		Conta	ct No.	NIL
Hospital/Clinic	NIL .		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Di	scharge	NIL	
Date Heatment	ited Medical Leave NIL	Degree	of Injury	NIL	

On 03/10/2019 at about 0740hrs, I was driving my company van (GBH9155L). I just exited PIE and entered Clementi Ave 6. I was driving on the second lane of the three lanes and the traffic was quite heavy at the point of time. I wanted to change lane to the first lane. Hence, I checked the first lane to ensure that the traffic was clear. As I was checking clear, I did not realized that the traffic in front was coming to a stop. When I realized that the vehicle (SMN5261C) in front of me was stopping, I applied brake and swerved my van to the right in order to avoid colliding into it. However, the car behind me (SKN9549X) rear ended my van and the impact caused my van to swerve forward to hit the car in front(SMN5261C).

Accident Sketch Plan





T/20191003/2060

3 of 4 Report No. T/20191003/2060

Police Station Of Origin: Jurong East N.P.C. 92 Boon Lay Way SINGAPORE 609962 Tel No: 1800-8999999

CONTINUATION OF REPORT

After the accident, all the drivers involved then alighted from the vehicle, checked damages and exchanged our particulars. At the point of time, nobody was injured hence, we all left after exchanging our particulars. However, after the accident, I felt pain on my back. I then proceeded to Ng Teng Fong General Hospital to see a doctor and I was given 3 days of medical leave. I wish to state that I have in car -camera recording of the accident.





Police Station Of Origin: Jurong East N.P.C. 92 Boon Lay Way SINGAPORE 609962 Tel No: 1800-8999999

Report No. T/20191003/2060

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

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

Signature Of Officer Recording The Report: D / Sgt 3 LEONG HIN CHI	Signature of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 03/10/2019 12:12
Officer In Charge Of Case: TP / AEIT / SI MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 66476204	Classification Of Case:
Authentication Stamp NP168	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID: Vehicle Details	014E	
Vehicle No.:	GBH9155L	
Vehicle to be Exported:	No	
Intended Deregistration Date:	09 Oct 2019	
Vehicle Make:	TOYOTA	
Vehicle Model:	HIACE VAN TURBO 5DR MT	
Primary Colour:	White	
Manufacturing Year:	2018	
Engine No.:	1KD2827714	
Chassis No.:	JTFHT02P100246146	
Maximum Power Output:		
Open Market Value:	\$28,136.00	
Original Registration Date:	29 Oct 2018	
First Registration Date:	29 Oct 2018	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$1,407.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	¥	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	28 Oct 2028	
COE Category:	C - Goods Vehicle & Bus	
COE Period(Years):	10	
QP Paid:	\$29,501.00	
COE Rebate Amount:	\$26,701.00	
Total Rebate Amount:	\$26,701.00	

The information contained herein is correct as at 09 Oct 2019

OK

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

Case N	stified.	Est Submitted	Adj Assigned	Adj Rpt	Adj Sul	bmitted	Ins Auth'ed	Status		
-	Oct 2019		09 Oct 2019 13:49 Edit Adj Rpt	S\$0.00 Edit Estimate	\$\$0.00 View F	Sovered Co.		Pending for Survey Report Cancel Case		
Ma	în	Re	ference	CI	aim Details		Document	s	Show All	
CLAIM SUBI	OLDER DE	TAILS	AND DESCRIPTION OF THE PARTY.			[Created	l by insurer]			
insured:	-, Co. Re	g. No.: -								
Main Claimant:	NINJA LO	GISTICS PTE LT	D , Co. Reg. No	o.: 201412014	E					
Vehicle Reg.	GBH915	5L			Date of Loss	03/10/20 [11 Mont	19 07:00 - :59 hs and 4 Days Fro	m LTA Reg Date (N	fan Yr)]	
Claim Type:	TP / SNN	419D204664C0		Policy/Cover Note No.:	DMPCSN3	DMPCSN30349518044				
Vehicle Reg. No. (Insured):	SKN9549X				Policy No. (Claimant):	DMCVSN1834951800				
(11130100)1					Excess:	S\$0.00				
Repairer:	Eng Soon	Painting Service	es (HQ) 3931 W	OODLANDS RO	DAD, 677978	Woodlands -	Tel: 67606271			
Handling Insurer:	China Tai	ping Insurance	(Singapore) Pt	e. Ltd. (HQ) -	Tel: 6389 61	11 [Hand	lled by Chong Boo	on Sen]		
Claimant's Insurer:		ping Insurance						D-1-1-10/10	/2010]	
Adjuster:	LKK Auto	Consultants Pte	e Ltd (HQ) - Tel	: 6256-3561	. [Handled by	CHEN TSU	E YEE] [Final	Rpt due 18/10	/2019]	
ASSOCIATE	D MAIL RE	CEIVED						View All Compo	se Case Mail	
There are no	mail for this	case.								
ALL ASSOC	IATED TAS	sks⊟				View Al	Search Tasks	Create New Task	Complete	
Due Date	Priority	Type Task	Group Sub	ject Hand	ler Assig	gned By	Completed On	Created Or	Done?	
No results.	7007450500420									
ALL ASSOC	IATED TAS	sks⊟	: Group Sub	oject Hand	ler Assi				-	

Claim Documents

*GBH9155L (SNM19D204664C02) [SKN9549X] TP NINJA LOGISTICS PTE LTD Oct 3 2019 7:00AM [-] Eng Soon Painting Services

Uplo	ssessment Reports		1 per	page 🔻	•
	Finalized On	Sin Yew Hup Auto Pte Ltd (HQ)		Thumbnail	Print
lo.	04/10/19 17:17	Accident Statement	0	Load HTM	
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ho	tos/Images		J per	Thumbnail	
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5	04/10/19 17:17	Accident Photo [Linked Accident Report Documents]	0	Load JPG	•
6	04/10/19 17:17	Accident Photo [Linked Accident Report Documents]	0	Load JPG	•
7	04/10/19 17:17	Accident Photo [Linked Accident Report Documents]	0	Load JPG	•
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	-
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2	11/10/19 09:52	General View	0	Load JPG	•
3	11/10/19 09:52	General View	0	Load JPG	1
4	11/10/19 09:52	General View	0	Load JPG	•
5	11/10/19 09:52	General View	0	Load JPG	•
6	11/10/19 09:52	General View	0	Load JPG	•
7	11/10/19 09:52	General View	0	Load JPG	
8	11/10/19 09:52	General View	0	Load JPG	4
9	11/10/19 09:52	General View	0	Load JPG	•
10	11/10/19 09:52	General View	0	Load JPG	4
11	11/10/19 09:52	General View	0	Load JPG	4
12	11/10/19 09:52	General View	0	Load JPG	4
13	11/10/19 09:52	General View	0	Load JPG	~
14	11/10/19 09:52	General View	0	Load JPG	
15	11/10/19 09:52	General View	0	Load JPG	~
16	11/10/19 09:52	General View	0	Load JPG	4
17	11/10/19 09:52	General View	0	Load JPG	
18	11/10/19 09:52	General View	0	Load JPG	1
19		General View	0	Load JPG	
20		General View	0	Load JPG	6
21		General View	0	Load JPG	
22		General View	0	Load JPG	6
23		General View	0	Load JPG	
24		General View	0	Load JPG	
-		General View	0	Load JPG	6
25		General View	0	Load JPG	6
26		General View	0		6

Asse	essment Reports		1 per p		•
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5	11/10/19 09:52	General View	0	Load JPG	8
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6	11/10/19 09:52	General View	0	Load JPG	6
7	11/10/19 09:52	Chassis Number	0	Load JPG	6
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Linked Accident Report Documents

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Documents Checklist

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
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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/CTI19017832/ECD3S2

Date:

25/10/2019

REFERENCE

Handling Insurer:

China Taiping Insurance (Singapore) Pte. Ltd.

Policy No:

DMPCSN30349518044

Claimant Vehicle

Insured Vehicle

No:

GBH9155L

No:

SKN9549X

TP

Date of Loss:

03/10/2019

Nature of Claim:

Claim SNM19D204664C02 No:

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

GBH9155L

Make & Model:

TOYOTA HIACE, 3.0 D TURBO 5 DR (M)

Engine No:

1KD2827714

Reg. Date:

29/10/2018 (Man. Year: 2018)

Chassis No:

JTFHT02P100246146

Colour:

Red

2982 cc

Odometer:

27860 km

Engine Capacity: 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:

Good

Steering (Serviceable):

Footbrake (Serviceable):

Handbrake (Serviceable):

Yes

Engine Modification:

Pre-accident Condition: No

Yes

CONDITION OF TYRES

Front Tyre Size:

195 R15C

Rear Tyre Size:

195 R15C

Bridgestone 5 mm

Rear Left Side:

Bridgestone 5 mm

Front Left Side:

Bridgestone 5 mm

Rear Right Side:

Bridgestone 5 mm

Front Right Side: The above values represent the remaining tyre treads depth

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

INSPECTION

Date Inspected:

Date of Assignment:

09/10/2019

09/10/2019

Eng Soon Painting Services (HQ) 393J WOODLANDS ROAD

Singapore 677978

Estimated Period of Repair:

9.0 days

CHEN TSUE YEE Adjuster:

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.

Inspected At:

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.

THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.

C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$6,000.00 - \$7,000.00

REPAIR DETAILS

Reference

Version: 1.0 (Last Synchronised: 25 Oct 2019) Part Source: MRM-SG

TOYOTA HIACE 3.0 D TURBO 5 DR (M) (Catalogue:Merimen Singapore 1.0) 213 Parts:

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

Print Code: (Unsubmitted, no print-code for GBH9155L)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with Validity:

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 >