

PERSON:

ASS. REC. BY:

REF:

3  
CS/SMO/9017896/Hud302

Special Instruction:

Surveyor: Hack Ann

## ASSIGNMENT (Office)

Menmen

From (Person): Huang Shiang Yi

of

SMO

Date/Time: 10/10/19 @ 7:53pm

Estimated Cost:

Bill to:

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

To inspect Vehicle No:

SLB 5759J

Insured:

SMN 4999P

at Workshop n/s

My Cer Consultant

Tel:

88608832

of

53 Ubi Ave 1 # 01-33

Policy No:

DIAM7PV01010029

Claim No:

CMTD1904699

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A

27/9/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

11:05am 10/10/19

Person Contacted:

Hui Qin

Vehicle:

IN/OUT

Date/Time	Action/Instruction (Initials /)
	SLB 5759J - NA/IN/9017896/24
	SMN 4999P - NA/IN/9017896/24
	Estimate Given

11/10/19 3:30pm Nivitha spoken to Kai Ling, she will provide us the estimate.

17/10/19 Informed Shiang Yi pending workshop est by menmen

10/10/19 → Survey taken

11/10/19 → Survey taken

12/10/19 → Survey taken

H. ANN

SMD

## ASSIGNMENT

PRS

Front

Date

10/10/19

Estimated Cost:

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

To Inspect Vehicle No:

SLB 5759J

at Workshop n/s

My car consultant

of

53 ubi Avenue 1 #01-33

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

5

days

Res.:

Yes or No

Lum Sum:

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

1up

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SLB 5759J

Yr Regn:

14 / 04 / 2016

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

Truck / Trailer or

Make:

T. VEILFINE 2.5 V AT C.C. 2493

Colour:

Black

A/C:

Insured / Std / NI / NA

Sp Reading:

83792/km T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

AGH 3000 245 24

Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ BurntSteering: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt orBrake: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt orMod: ☒ Nil / ☐ S/Rim / ☐ STD A/Rim or

Tyre Size:

F:

225/60/R17

R:

225/60/R17

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

TOYO / YOKO or

Front

R/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

27/7/19

Survey held at

my car car

Des. of Damages: ☐ Frt / ☒ Rear / ☐ N/S / ☐ UIC / ☐ Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time

Action / Instruction

RECEIVED 11 FEB 2020

11/2/20

@348pm Hui Qin said no est provided

MV - 120000

PV - 62557

NV - 57400

MV - 120000

11/2/20

@350pm spoken to Shiang Yi will submit PRS report

11/2/20

submit PRS - Repair range \$5K - \$6K

Date/Time, File Path to:

☐

: Prelim. Report

i)

☐

: Final Report

Date/Time, File Path to:

Days Of Repair:

5

Resurvey No. of Trip:

2

Survey Fee:

100

Transportation:

60

S + RS, ST

60

Photos:

Notes:

11

Total:

231

Addl Fee:

☐

: Site Insp

\$

☐

: Interview

\$

☐

: Tech. Insp

\$

☐

: Wash and

\$

Report Format:

PRS

Lump Sum / M.R.B.:

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	29 Sep 2019		10 Oct 2019 07:53 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

<a href="#">Main</a>	<a href="#">Reference</a>	<a href="#">Claim Details</a>	<a href="#">Documents</a>	<a href="#">Show All</a>
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### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	TAN GHIM LENG MARK, ID: S77009291, Tel: +6581880914, Email: mark.bigworks@gmail.com		
Main Claimant:	LIM SHING KAI, ID: S82009852		
Vehicle Reg. No.:	SLB5759J	Date of Loss:	27/09/2019 18:00 - :59
Claim Type:	TP / CMTD1904699	Policy/Cover Note No.:	D19MTPV01010029 (Comprehensive)
Vehicle Reg. No. (Insured):	SMN4999P	Policy No. (Claimant):	
		Excess:	
Repairer:	- Not Applicable - (-)		
Handling Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Hwang Shiang Yi - 6329 5205]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 21/10/2019]		
Driver/Custodian (Insured):	TAN GHIM LENG MARK (42 / Male) , NRIC: S77009291, Tel: +6581880914 Email: mark.bigworks@gmail.com		

### ASSOCIATED MAIL RECEIVED

[View All](#)

[Compose Case Mail](#)

There are no mail for this case.

### ALL ASSOCIATED TASKS

[View All](#)

[Search Tasks](#)

[Create New Task](#)

[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Hock Ann (LKK Auto)

---

**From:** Hock Ann (LKK Auto)  
**Sent:** Monday, 30 December, 2019 8:53 AM  
**To:** Hwang, Shiang Yi  
**Cc:** Veron Chen (LKKAuto); SUR; Bryan Ang (LKKAuto)  
**Subject:** RE: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

**'WITHOUT PREJUDICE'**

**SAVE AS TO COSTS**

Dear shiang yi ,

Good day, Regarding the latest issue 4 DEC 2019 vehicle SLB 5759J , you finally replied to my first case car that happened in Email. Accidental gia report. Did the garage answer you? If they don't acknowledge and reply to you, I will use the second case gia report to do my damage assignment summit.

Thanks.

Best Regards,

**Hock Ann** | Assistant Automotive Assessor

**LKK Auto Consultants**

Phone: 6741 3061 | Email: [HockAnn@lkkauto.com](mailto:HockAnn@lkkauto.com) | fax: 6256-4315

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

---

**From:** Hwang, Shiang Yi [<mailto:shiangyi.hwang@sompo.com.sg>]  
**Sent:** Wednesday, 4 December, 2019 11:32 AM  
**To:** Hock Ann (LKK Auto)  
**Cc:** Veron Chen (LKKAuto); SUR  
**Subject:** RE: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

Dear Hock Ann,

We have checked with Huiqin from My Car Consultant Pet Ltd this morning, they are still pending their client revert on the report for the 1<sup>st</sup> accident.

Best Regards

**Hwang Shiang Yi**

Claims Division

D: 6329 5205 | T: 6461 6555 | F: 6221 3147



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---

**From:** Hock Ann (LKK Auto) <[HockAnn@lkkauto.com](mailto:HockAnn@lkkauto.com)>  
**Sent:** Wednesday, 4 December, 2019 8:47 AM  
**To:** Hwang, Shiang Yi <[shiangyi.hwang@sompo.com.sg](mailto:shiangyi.hwang@sompo.com.sg)>  
**Cc:** Veron Chen (LKKAuto) <[veronchen@lkkauto.com](mailto:veronchen@lkkauto.com)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Subject:** RE: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

**'WITHOUT PREJUDICE'**  
**SAVE AS TO COSTS**

Dear shiang yi,

Good day, regarding yours last updated me email on 31.OCT.2019 say pending the workshop reply for the 1<sup>st</sup> accident GIA report for vehicle SLB 5759J toyota vellfire 2.5v 27.9.19 frist moring and damages photo. May know have any update on workshop with you ? olready 1 month later workshop never update? Coz I need refer insult damage related on frist accident .

Please to update back soon asap .

Hope will received yours good news.

Thanks.

Best Regards,

**Hock Ann** | Assistant Automotive Assessor

**LKK Auto Consultants**

Phone: 6741 3061 | Email: [HockAnn@lkkauto.com](mailto:HockAnn@lkkauto.com) | fax: 6256-4315

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

---

**From:** Hwang, Shiang Yi [<mailto:shiangyi.hwang@sompo.com.sg>]  
**Sent:** Thursday, 31 October, 2019 2:09 PM  
**To:** Hock Ann (LKK Auto)  
**Cc:** Veron Chen (LKKAuto); SUR  
**Subject:** RE: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

Dear Hock Ann,

We are still pending the workshop reply for the 1<sup>st</sup> accident.

We will sent the reminder and revert.

Best Regards

**Hwang Shiang Yi**

Claims Division



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---

**From:** Hock Ann (LKK Auto) <[HockAnn@lkkauto.com](mailto:HockAnn@lkkauto.com)>

**Sent:** Thursday, 24 October, 2019 11:32 AM

**To:** Hwang, Shiang Yi <[shiangyi.hwang@sompo.com.sg](mailto:shiangyi.hwang@sompo.com.sg)>

**Cc:** Veron Chen (LKKAuto) <[veronchen@lkkauto.com](mailto:veronchen@lkkauto.com)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>

**Subject:** RE: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

**'WITHOUT PREJUDICE'**

**SAVE AS TO COSTS**

Dear shiang yi,

Good day, thanks for your update photographs SLB 5759J damage refer , but photo is second accident damage impact .

May can help your requested to the workshop on the time vehicle SLB 5759J toyota vellfire 2.5v 27.9.19 frist moring accident GIA REPORT and damages photo ?

Coz I need refer insult damage related on frist accident .

Please to update back soon asap .

Thanks.

Best Regards,

**Hock Ann** | Assistant Automotive Assessor

**LKK Auto Consultants**

Phone: 6741 3061 | Email: [HockAnn@lkkauto.com](mailto:HockAnn@lkkauto.com) | fax: 6256-4315

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

---

**From:** Hwang, Shiang Yi [<mailto:shiangyi.hwang@sompo.com.sg>]

**Sent:** Thursday, 24 October, 2019 9:38 AM

**To:** Hock Ann (LKK Auto)

**Cc:** Veron Chen (LKKAuto); SUR

**Subject:** RE: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

Dear Hock Ann,

The SLB5859J did not report for the 1<sup>st</sup> morning accident. We will check with the workshop.

Attached herewith the scene photographs provided by our Insured vehicle no SLB5759J.

Best Regards

Hwang Shiang Yi

Claims Division

D: 6329 5205 | T: 6461 6555 | F: 6221 3147



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**From:** Hock Ann (LKK Auto) <[HockAnn@lkkauto.com](mailto:HockAnn@lkkauto.com)>

**Sent:** Thursday, 24 October, 2019 8:55 AM

**To:** Hwang, Shiang Yi <[shiangyi.hwang@sompo.com.sg](mailto:shiangyi.hwang@sompo.com.sg)>

**Cc:** Veron Chen (LKKAuto) <[veronchen@lkkauto.com](mailto:veronchen@lkkauto.com)>; SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>

**Subject:** RE: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

**'WITHOUT PREJUDICE'**

**SAVE AS TO COSTS**

Dear shiang yi,

Good day, kindly help provides vehicle SLB 5759J toyota vellfire 2.5v 27.9.19 frist moring accident GIA REPORT and damages photo?

Coz I need refer insult damage related on frist accident .

Please to update back soon asap .

Thanks.

Best Regards,

**Hock Ann** | Assistant Automotive Assessor

**LKK Auto Consultants**

Phone: 6741 3061 | Email: [HockAnn@lkkauto.com](mailto:HockAnn@lkkauto.com) | fax: 6256-4315

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

---

**From:** Veron Chen (LKKAuto)

**Sent:** Wednesday, 23 October, 2019 12:05 PM

**To:** Hwang, Shiang Yi; SUR; Hock Ann (LKK Auto)

**Subject:** FW: PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

Dear Shiang Yi,

Kindly provides damaged photos for SLB 5759J on 27/09/2019 @ 9.30 collided to rear of SJT5968B.

Best Regards,

**Veron Chen** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

---

**From:** Hwang, Shiang Yi <[shiangyi.hwang@sompo.com.sg](mailto:shiangyi.hwang@sompo.com.sg)>

**Sent:** Friday, 18 October 2019 1:51 PM

**To:** assignments <[assignments@lkkauto.com](mailto:assignments@lkkauto.com)>

**Cc:** SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>

**Subject:** PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)

Dear Sirs,

Refer to the above matter and the assignment through merimen system.

We noted the vehicle SLB5759J involved 2 accident within a day.

27/09/2019 @ 9.30 – SLB5759J collided to rear of SJT5968B.

27/09/2019 @ 18.50 –SLB5759J involving accident with our Insured vehicle no SMN4999P.

Attached herewith the accident report for vehicle no SMN4999P, SLB5759J & SJT5968B for your reference.

We are pending the video footage and scene photographs from Insured.

Please assist to check the consistency of the damages.

Best Regards

**Hwang Shiang Yi**

Claims Division

D: 6329 5205 | T: 6461 6555 | F: 6221 3147



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**Veron Chen (LKKAUTO)**

---

**From:** Hwang, Shiang Yi <shiangyi.hwang@sompo.com.sg>  
**Sent:** Friday, 18 October 2019 1:51 PM  
**To:** assignments  
**Cc:** SUR  
**Subject:** PRE -REPAIR SURVEY FOR VEHICLE NO SLB5759J (CMTD1904699/SYH)  
**Attachments:** SLB5759J.PDF; SJT5968B.PDF; SMN4999P.PDF

Dear Sirs,

Refer to the above matter and the assignment through merimen system.

We noted the vehicle SLB5759J involved 2 accident within a day.

27/09/2019 @ 9.30 – SLB5759J collided to rear of SJT5968B. *(AIG)*

27/09/2019 @ 18.50 – SLB5759J involving accident with our Insured vehicle no SMN4999P. *second time*

Attached herewith the accident report for vehicle no SMN4999P, SLB5759J & SJT5968B for your reference.  
We are pending the video footage and scene photographs from Insured.

Please assist to check the consistency of the damages.

Best Regards

**Hwang Shiang Yi**

Claims Division

D: 6329 5205 | T: 6461 6555 | F: 6221 3147



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## View Sent Message

This mail is associated with :

**\*SLB5759J (CMTD1904699)  
[SMN4999P]**

TP  
LIM SHING KAI  
Sep 27 2019 6:00PM  
[TAN GHIM LENG MARK]

[Resend](#) [View Recipients](#) [Print Message](#) [Delete Message](#) [Forward](#)

**From** LKK Auto Consultants Pte Ltd (LKK\_HQ), sent on 17/10/2019 14:52 PM.  
**To** shiangyi.hwang@sompo.com.sg  
**Subject** TP SURVEY SLB 5759J

Dear Shiang Yi,

Please be informed that we have inspected the vehicle SLB 5759J on 10/10/2019.

We are pending workshop estimate from repairer.

Best Regards,  
Veron Chen

### DOCUMENTS SUMMARY

There are no documents.

## Henry, Irene James

---

**From:** My Car Consultant <admin@mycar.sg>  
**Sent:** Wednesday, 9 October, 2019 1:55 PM  
**To:** Henry, Irene James  
**Subject:** re: SOMPO REF:CMTD1904699/RE: OUR REF: SLB5759J YOUR REF: SMN4999PPRE-REPAIR INSPECTION FOR SLB5759J

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

WITHOUT PREJUDICE

Dear all,

Please appoint LKK Auto Consultants Pte Ltd for survey.

Best Regards,

Sylvia

Claims | My Car Consultant Pte Ltd

☎ [+65 83300060](tel:+6583300060)

✉ [Admin@mycar.sg](mailto:Admin@mycar.sg)

🌐 [Mycar.sg](http://Mycar.sg)

📍 53 Ubi Ave 1, Paya Ubi Industrial Park, 01-33, S408934

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---

**From:** "Henry, Irene James" <irene.henry@sompo.com.sg>  
**Sent:** Wednesday, October 9, 2019 11:28 AM  
**To:** "admin@mycar.sg" <admin@mycar.sg>  
**Cc:** "Hwang, Shiang Yi" <shiangyi.hwang@sompo.com.sg>  
**Subject:** SOMPO REF:CMTD1904699/RE: OUR REF: SLB5759J YOUR REF: SMN4999PPRE-REPAIR INSPECTION FOR SLB5759J

Without Prejudice

Dear Sirs,

We refer to the above matter.

Please be informed that Shiang Yi is the handler for this matter.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert.

**Pre-Repair Survey**

	Motor Surveyor	Surveyor	Selection (Indicate as tick)
1	Raleigh Services	Vincent Ng	
		Andrew Ow Yong	
2	LKK Auto Consultants	Kenneth Kong (North area)	
		Marcus Chua (East area)	
		Mohd Rasul (West area)	
		Mohd Taufikh (West area)	
3	Priority Services	Jimmy Lee	
		Lawrence Ng	
		Jeffrey Ong	
4	In House Surveyor	Teo See Ling	

Please let us know within **two (2) working days** whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Best Regards

**Irene Henry**

Claims Division

D: 6322 4618 | T: 6461 6555 | F: 6221 3147



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**From:** My Car Consultant <admin@mycar.sg>

**Sent:** Tuesday, 8 October, 2019 6:11 PM

**To:** Claims - Motor Survey <MotorSurvey@sompo.com.sg>

**Subject:** OUR REF: SLB5759J YOUR REF: SMN4999P PRE-REPAIR INSPECTION FOR SLB5759J

**WITHOUT PREJUDICE**

OUR REF: SLB5759J  
YOUR REF: SMN4999P

Dear Sir/Madam,

PRE-REPAIR INSPECTION FOR SLB5759J  
ACCIDENT INVOLVING SLB5759J AND SMN4999P

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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> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Business  
Owner ID: 778E

### Vehicle Details

Vehicle No.: SLB5759J  
Vehicle to be Exported: Yes  
Intended Deregistration Date: 15 Oct 2019  
Vehicle Make: TOYOTA  
Vehicle Model: VELLFIRE 2.5V CVT ABS AIRBAG 2WD 5DR  
Primary Colour: Black  
Manufacturing Year: 2015  
Engine No.: 2ARH581593  
Chassis No.: AGH300024524  
Maximum Power Output: 134.0 kW (179 bhp)  
Open Market Value: \$36,216.00  
Original Registration Date: 14 Apr 2016  
First Registration Date: 14 Apr 2016  
Transfer Count: 1  
Actual ARF Paid: \$42,703.00 — 21351

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 13 Apr 2026  
PARF Rebate Amount: \$32,027.00

### Intended COE Rebate Details

COE Expiry Date: 13 Apr 2026  
COE Category: B - Car above 1600cc or 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$47,000.00  
COE Rebate Amount: \$30,530.00  
**Total Rebate Amount: \$62,557.00**

The information contained herein is correct as at 15 Oct 2019

OK

## Enquire Vehicle Transfer Fee

### Vehicle Details

Vehicle No.  
SLB5759J

Make / Model  
TOYOTA / VELLFIRE 2.5V CVT ABS AIRBAG 2WD SDR

Vehicle Type:  
Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover

Vehicle Scheme:  
Normal

Propellant:  
Petrol

Motor No.:  
-

Power Rating:  
-

Maximum Laden Weight:  
2405 kg

Year Of Manufacture:  
2015

Lifespan Expiry Date:  
-

Quota Premium:  
\$47,000.00

Road Tax Expiry Date:  
13 Oct 2019

Inspection Due Date:  
13 Apr 2021

CO2 Emission:  
203.00 (g/km)

CO Emission:  
-

NOx Emission:  
-

Vehicle Attachment 1:  
With Sun Roof

Chassis No.:  
AGH300024524

Engine No.:  
2ARH581593

Engine Capacity:  
2493 cc

Maximum Power Output:  
134.0 kW (179 bhp)

Unladen Weight:  
2020 kg

Original Registration Date:  
14 Apr 2016

COE Category:  
B - Car above 1600cc or 97kW (130bhp)

COE Expiry Date:  
13 Apr 2026

PARF Eligibility Expiry Date:  
13 Apr 2026

Intended Transfer Date:  
15 Oct 2019

CEV/VES Rebate Utilised Amount:  
-

HC Emission:  
-

PM Emission:  
-

### Fees To Be Paid For Transfer

Transfer Fees

Road Tax Renewal - 6 months (14 Oct 2019 to 13 Apr 2020)

Road Tax Renewal - 12 months (14 Oct 2019 to 13 Oct 2020)

\$25.00

\$896.00

\$1,792.00

### 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.

Print

Save as PDF

Copy as Text

DORA = 27/9/13

MV - 120000

PV - 62557

IVV - 57400

MV - 12010

Blumie → 6yr 7 months  
Depreciation → 15000 per  
15000 ÷ 12 = 1250 months  
90000 + 21351 + 8750  
= 12010

OK →





TOYOTA VEILFIRE | Price Range | Depreciation | 2019 | Vehicle Type

View 1000 Cars in Region Automated? No Log a Toyota Veilfire 2019

## Toyota Veilfire 7.5A V

Price	Depreciation	mileage	Road Tax	Stamp Duty	COE	Engine Cap	Curb Weight	Type of Vehicle
\$425,000	\$12,280 for 1000 miles with 10% depreciation	45,624 km (28.36 mi)	\$1,762 for	24-Sep-2018 (Buyer's Stamp Duty COE 440)	2019	2,000 cc	2,000 kg	MPV

**Features**  
Powerful And Reliable 3.5L 4-Cylinder In-Line 16-Valve 3000cc Engine Producing 170hp, 220km Torque, Super CVT 4-Auto Transmission, Cruise Control, New gears of the Toyota Veilfire.

**Accessories**  
Leather Seats With Electronic Memory Seats, Smart Entry And Push-Start System, LED Cornering Lamps, Power Windows, Two-Mounted, Dual Power Seats.

**Description**  
High AMP Accident Free, Customized Luxury Leather Seats, Extremely Well Maintained By Previous Owner, Powerful And One Of The Most Spacious Cabin 440, Perfect For Big Families Or As A Business High Trade-In, Available With Privilege To Invest Loan And Bank Loan (Must Be 50% On The Monthly Salary) A Call For A Non-Objectional Viewing Visit Or Visit Our Car Showroom Today!

**Category**  
MPV 7 Seater, Automatic, AC, ABS

**Status**  
Available

### Accessories



Car Wash - Free  
Red but the market value of your existing car for free, too, contact



Vehicle Evaluation  
What if I want? Request to have this car evaluated professionally. This will make

View 1000 Cars in Region Automated? No Log a Toyota Veilfire 2019

Transfer Fee	Down Payment	Let installment	Insurance	Total Upfront Payment
\$0	\$12,280 for 1000 miles	\$1,762 for 1000 miles	You'll also need a valid car insurance to drive this vehicle. 10% off with new CARIS (not a quote yet)	\$45,755 (20% cash deposit)

### Products and Services



Buy & Sell  
New & Used Cars & Vehicles



Complete Details



1000 Miles (1000 Miles)



View More



Location: Singapore

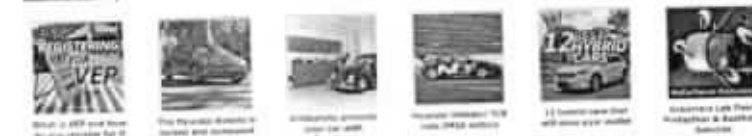


Brand: Complete for Sale

Check out the special services for Toyota cars - Pramia AUTOMOBILE PTE LTD

Highly Recommended - Pramia AUTOMOBILE PTE LTD - Toyota Veilfire 2019 - 45,624 km (28.36 mi) - 170hp, 220km Torque, Super CVT 4-Auto Transmission, Cruise Control, New gears of the Toyota Veilfire.

### Recommended for you



SLB 5759 J parts Damage

- 1.) Head lamp R/H - 2625
- 2.) Head lamp panel R/H - 174.24
- 3.) Front Fender R/H - 927.60
- 4.) " " cowling R/H - 249.60
- 5.) " " clips (set) - 30
- 6.) Fuel Inlet - 1662.71
7. " " clips (set) - 30
- " " side retainers R/H → 121.10
- " " sponge → 180.81
- " " lower grille → 311.27
- " " parking sensor R/H → 366.20
- Fuel Grille Assy → 412.00

7072.45

25% / 0 parts

5319.30

600 labor

20 - check wing.

100 - repair the body  
and the paintwork

600 → spray

6639.30

20 → 4/5

\$ 5300 → 5311.40

### 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	08/10/2019 17:16
Date Of Accident	27/09/2019 19:00
Exact Location Of Accident	DHOBY GHAUT MRT OUTSIDE PLAZA SINGAPURA
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB5759J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PIXEL LINK
Co Reg No	53378778E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88778742
Alternative Phone No	OFFICE-88778742

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	VELLFIRE 2.5V CVT ABS AIRBAG 2WD 5DR
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 HIRE

#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5110508243
Cover Note Number	

#### Driver

Name of Driver	LIM SHING KAI, JOEY (LIN XINKAI, JOEY)
NRIC No	S8200985Z
Date Of Birth	16/01/1982
Occupation	INDOOR
Date Of Driving Pass	26/09/2001
Driving Experience	18 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97898277
Fax Number	
Contact Number	OFFICE-97898277
Email Address	NOEMAIL

Address	BLK 225 COMPASSVALE WALK #04-355
Postcode	543225
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

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

#### 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 STATEMENT.

#### 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	SMN4999P
Vehicle Make/Model/Colour	MERCEDES C CLASS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. The Form must be completed by the Policyholder and/or the Archived Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 fees concerning 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. Consistent 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 my 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/mailed 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.

PIXEL INK  
53378778E

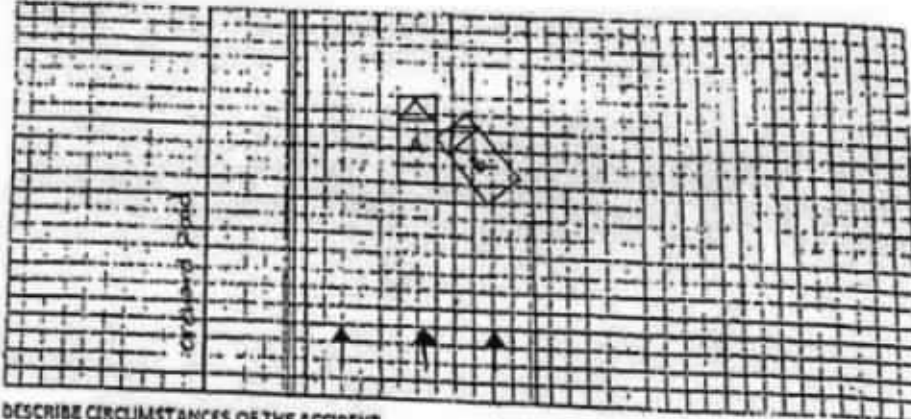
Policyholder's Signature  
Date & Time:

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

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

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated time and date,  
 I WAS TRAVELLING STRAIGHT ON ORCHARD ROAD ON LANE 2.  
 Suddenly vehicle B bearing carplate number 5M149999 turned left  
 without checking blindspot and collided onto the right hand side of my vehicle.

## DECLARATION

PIXE 44NK The following particulars are true in every respect.

53378778E

Policyholder's Signature  
 Date & Time:

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

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

## 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	29/09/2019 05:48
Date Of Accident	27/09/2019 18:50
Exact Location Of Accident	ORCHARD RD OUTSIDE PLAZA SINGAPURA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN4999P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN GHIM LENG MARK
NRIC No	S7700929I
Email Address	MARK.BIGWORKS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81880914
Alternative Phone No	OFFICE-81880914

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C200 COUPE AUTO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01010029
Cover Note Number	N.A.

### Driver

Name of Driver	TAN GHIM LENG MARK
NRIC No	S7700929I
Date Of Birth	13/01/1977
Occupation	INDOOR
Date Of Driving Pass	30/12/2014
Driving Experience	4 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81880914
Fax Number	
Contact Number	OFFICE-81880914
Email Address	MARK.BIGWORKS@GMAIL.COM



Address	NA
Postcode	
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

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

#### Details of Police Action

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

#### Circumstances of Accident

My vehicle was already changed into the left lane. Suddenly I felt an impact from behind and saw a vehicle had brushed onto my vehicle left side rear portion. The traffic flows was slow moving along ORCHARD RD .

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NA
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB5759J
Vehicle Make/Model/Colour	TOYOTA/VELLFIRE/BLA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM SHING KAI
NRIC/Passport Number	S8200985Z
Contact Number	97898277
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.
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.

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER  
AIZAM BIN ATAN

Policyholder's Signature  
Date & Time:

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

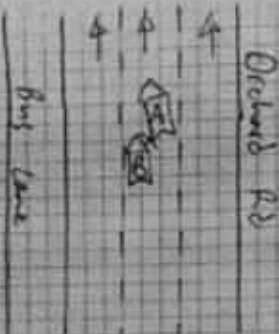
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

000000000000000000000000

Sketch Plan #2

SKETCH PLAN

A: SMN 4999P  
B: SLB 5759J



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

DECLARATION

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

Witness's Signature  
Date & Time

Driver's Signature  
If driver is not the declarant  
Date & Time

VERIFY BY AJAX MARS (ARC)  
REPORTING OFFICER  
AIZAM BIN ATAN

Reporting Constable/Inspector's Signature  
Name  
Date & Time

Common Statement

**ACCIDENT STATEMENT (2000 characters)**

My vehicle was already changed into the left lane. Suddenly I felt an impact from behind and saw a vehicle had brushed onto my vehicle left side rear portion. The traffic flows was slow moving along ORCHARD RD .

Taxi Voucher No.:

**DECLARATION**

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
AIZAM BIN ATAN

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

28 September 2019 at 4:00 PM

Date/Time:

28 September 2019 at 4:00 PM

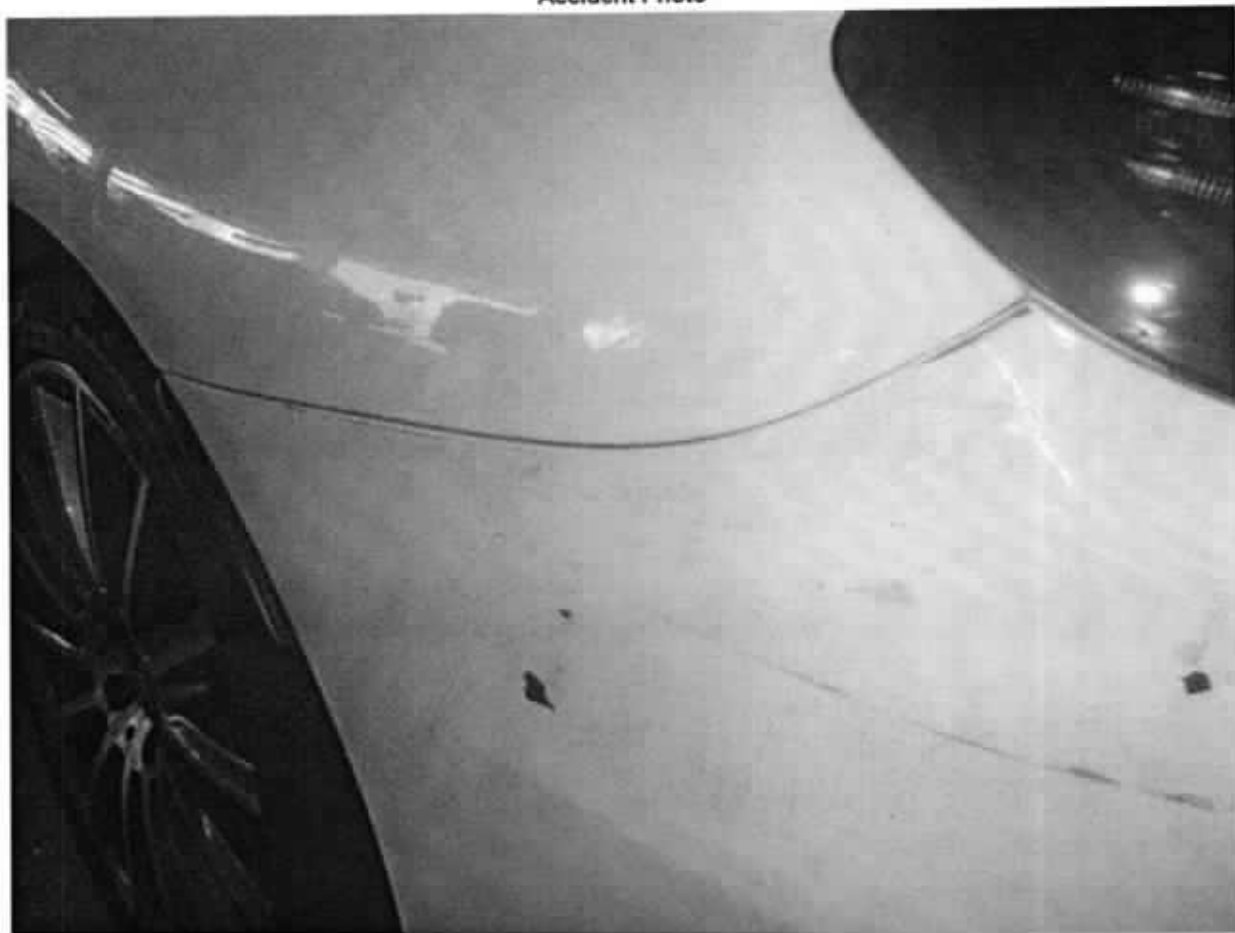
Accident Photo



Accident Photo



Accident Photo



Accident Photo

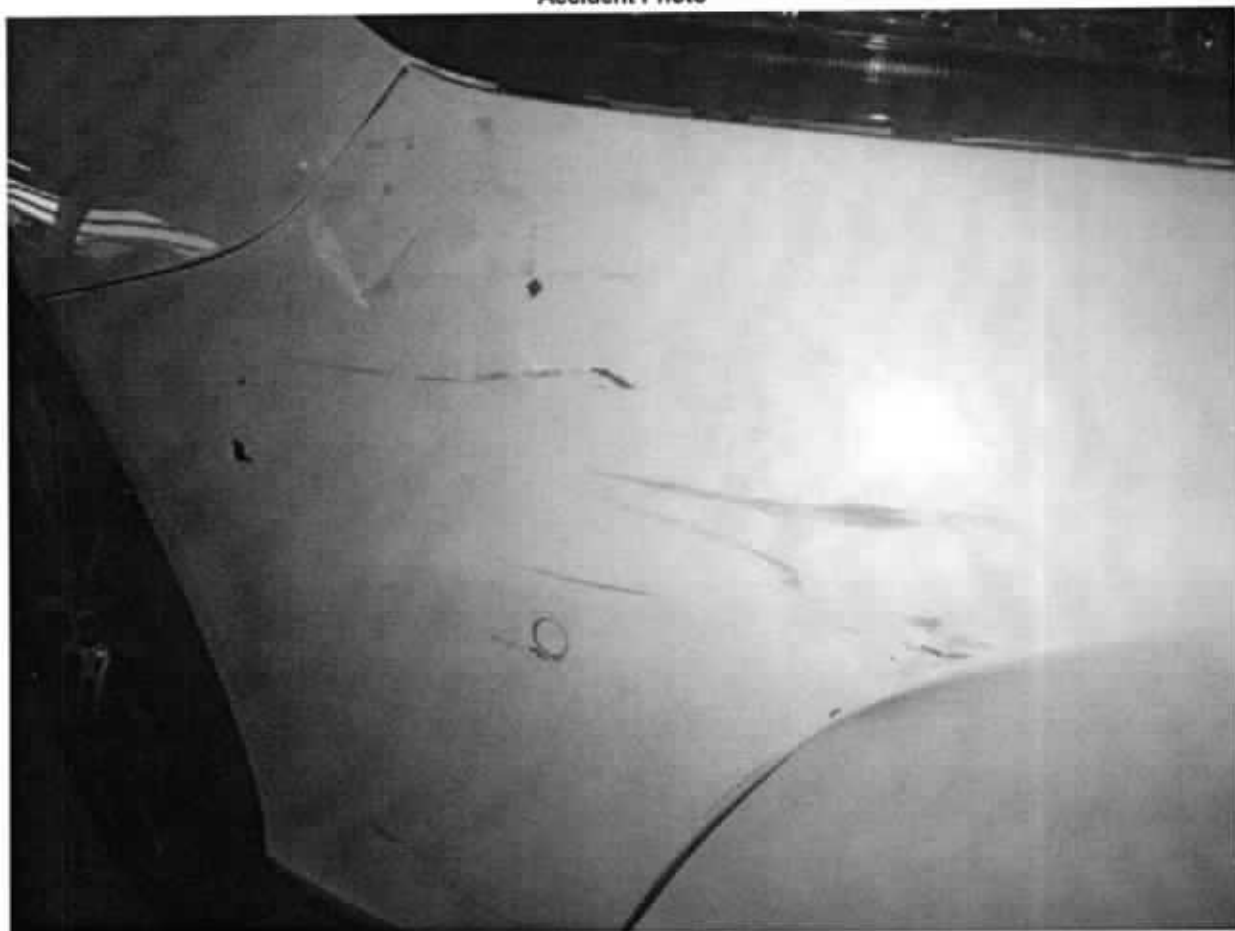




Accident Photo



Accident Photo



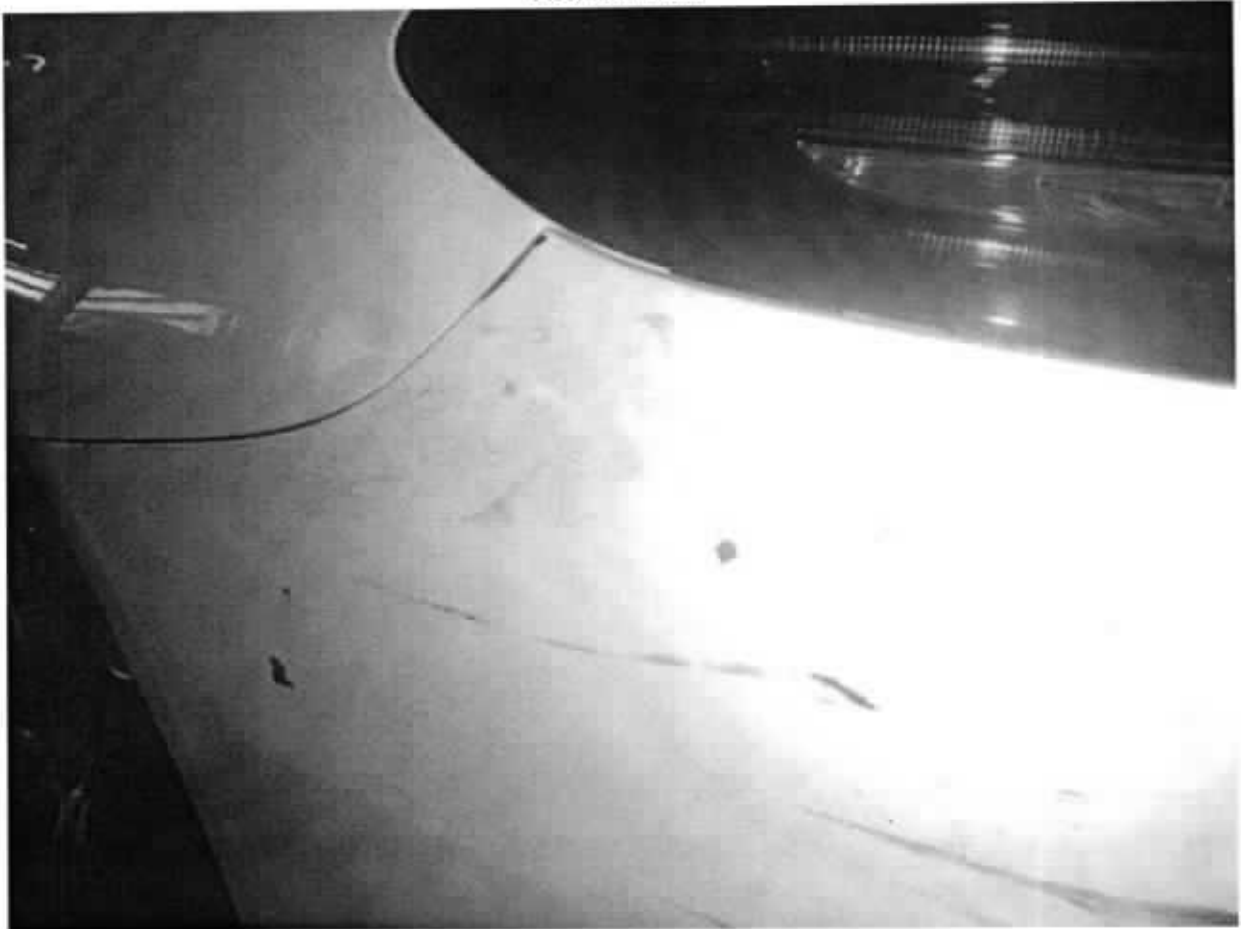
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

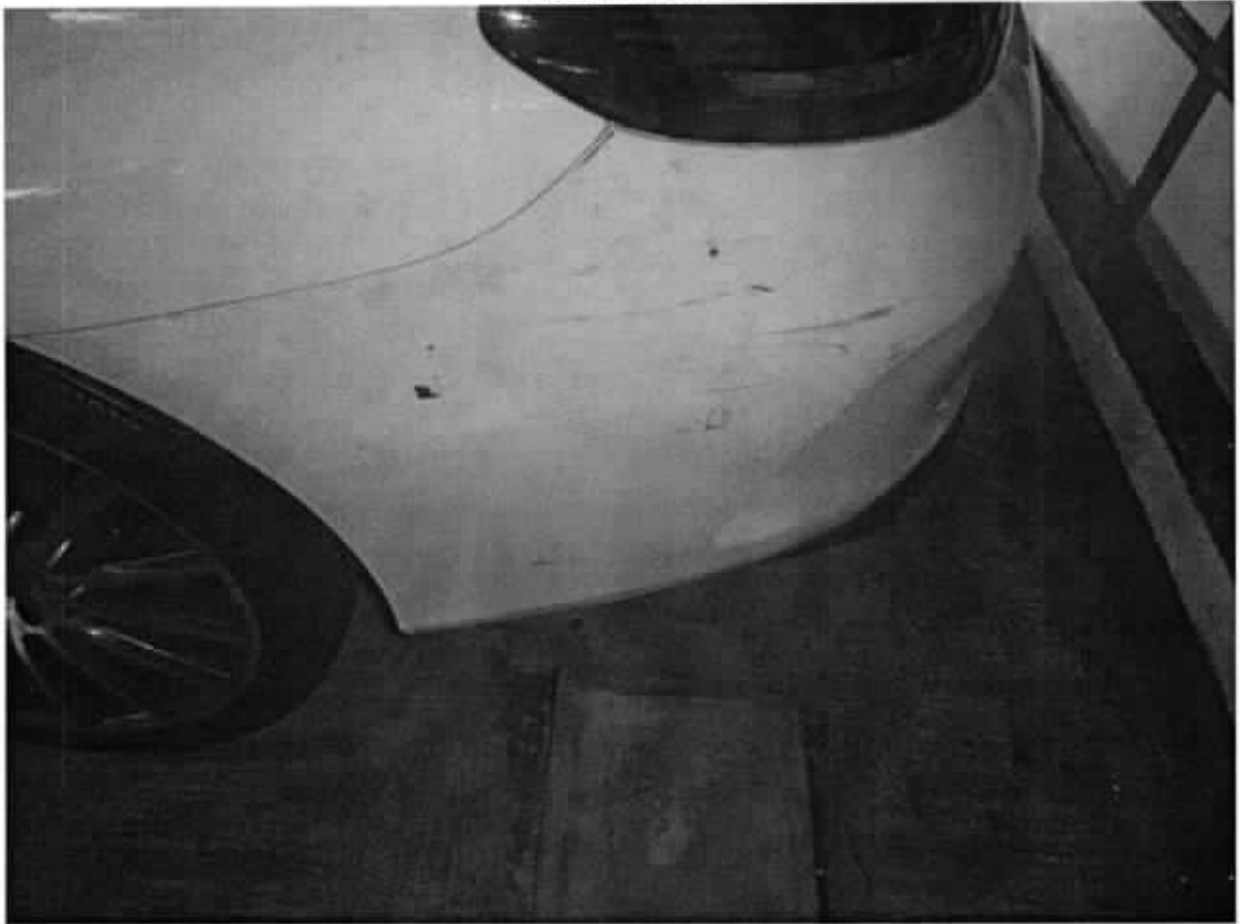




Accident Photo



Accident Photo



Accident Photo



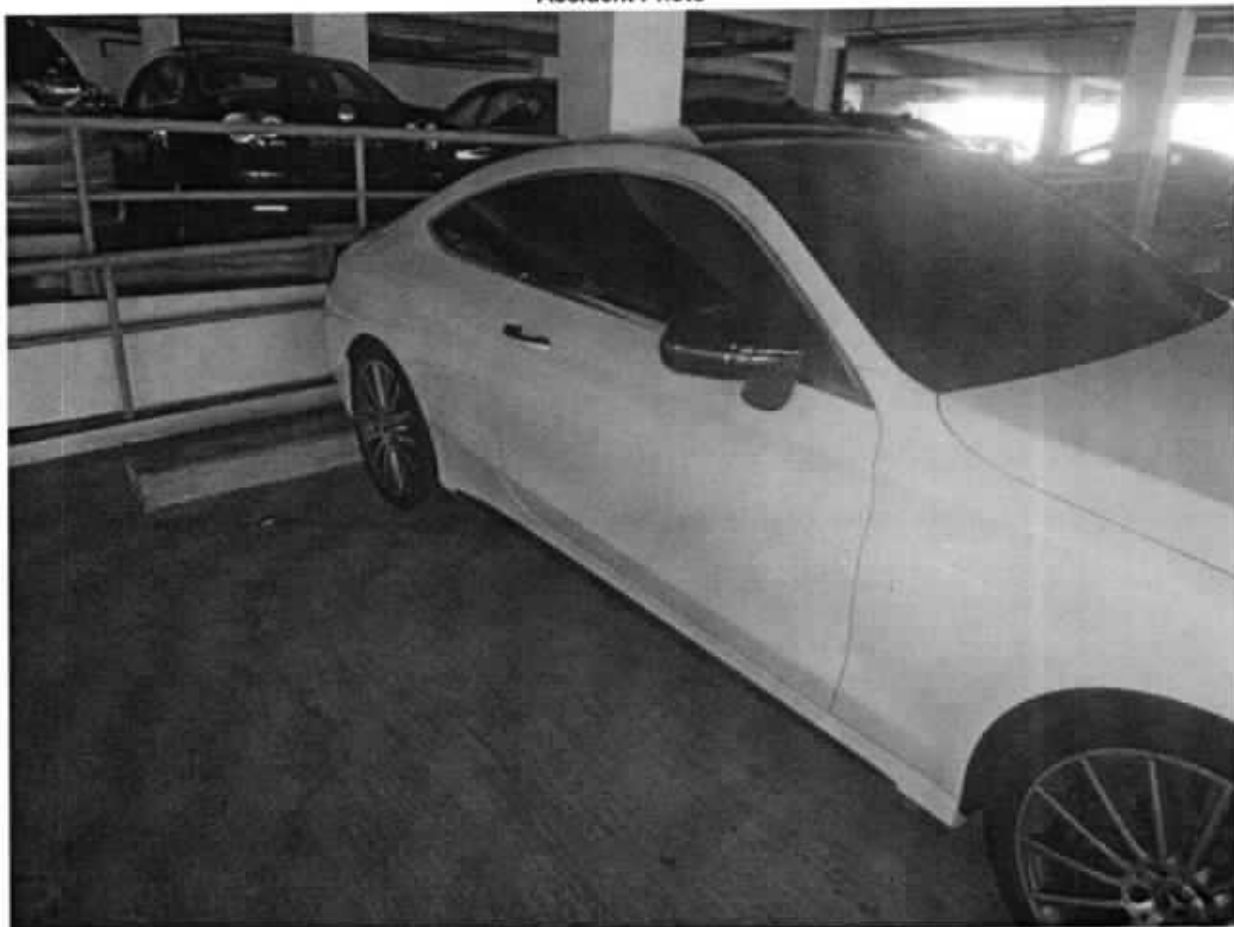
Accident Photo



Accident Photo



Accident Photo



Accident Photo



**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MBHH19128664 Vehicle Registration No: SMN4999P  
Name(as shown in NRIC) : TAN GHIM LENG MARK NRIC/FIN/Passport No : S7700929I  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 81880914  
Email Address : mark.bigworks@gmail.com  
Date of Accident : 27/06/2019 Time of Accident : 18:50  
Place of Accident : ORCHARD RD OUTSIDE PLAZA SINGAPURA  
Insurance Company : SOMPO INSURANCE SINGAPORE PTE. LTD.

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

AMEND ACCIDENT DATE : 27/09/2019

\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

SUSAN  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: f s neo  
NRIC/FIN No.:  
Date: 01/10/2019



## 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	27/09/2019 12:49
Date Of Accident	27/09/2019 09:30
Exact Location Of Accident	CAIRNHILL ROAD TOWARDS 65 RITZ CARLTON RESIDENCES
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT5968B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ASSET LIMO
Co Reg No	53309913K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87579019
Alternative Phone No	OFFICE-87579019

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	999994238
Cover Note Number	

### Driver

Name of Driver	SELAMAT BIN HUDICK
NRIC No	S7346498F
Date Of Birth	29/12/1973
Occupation	OUTDOOR
Date Of Driving Pass	04/09/2013
Driving Experience	6 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87579019
Fax Number	
Contact Number	OTHERS-87579019
EMail Address	NOEMAIL

Address	BLK 180A RIVERVALE CRESCENT #3-331
Postcode	541180
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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)	2
Passenger 1	NAME: : MS NILVIA 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

PLEASE 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	SLB5759J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM SHING KAI JOEY
NRIC/Passport Number	S8200985Z
Contact Number	97898277
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.
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.

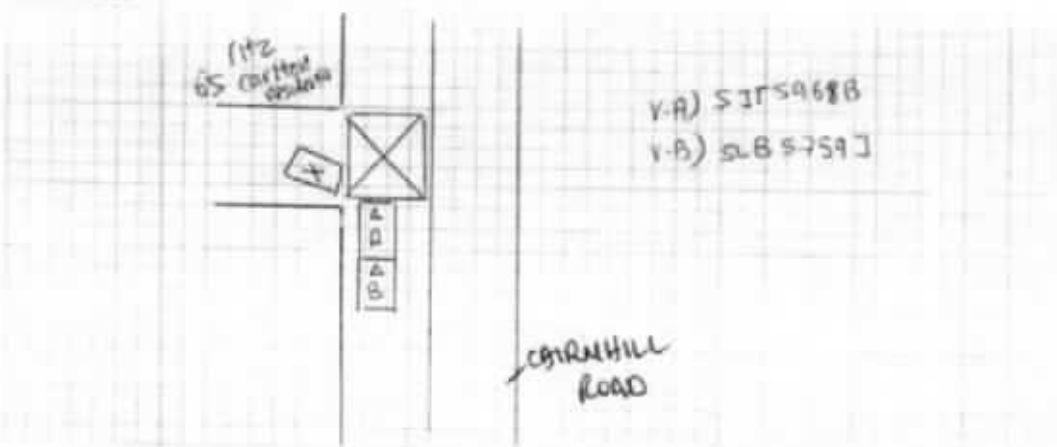


Policyholder's Signature  
Date & Time:

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

Reporting Centre Person(s)' Signature  
Name:  
NRIC/PSN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle 'A' SITS968B was travelling

on the stated route I was travelling straight in my lane with

signal left on as my passenger drop off point is at Rita Carlton

residence. There was a car in front of me slowed down and turning left

too. When I'm just about to turn, suddenly vehicle 'B' SLB5759J

collide against my vehicle rear portion. The impact caused my vehicle

to surge directly forward. shortly I got out of my vehicle and

noted my vehicle rear portion was badly damaged, while vehicle 'B'

front portion was badly damaged too.

## 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:

Reported Centre Personnel's Signature  
Name:  
Signature No.:

27/06/2019  
Rita Carlton

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

2



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





































CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	29 Sep 2019		10 Oct 2019 07:53 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>


















































  

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by Insurer]</span>									
Insured:	TAN GHIM LENG MARK, ID: S7700929I, Tel: +6581880914, Email: mark.bigworks@gmail.com								
Main Claimant:	LIM SHING KAI, ID: S8200985Z								
Vehicle Reg. No.:	SLB5759J	Date of Loss:	27/09/2019 18:00 - :59 [41 Months and 13 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / CMTD1904699	Policy/Cover Note No.:	D19MTPV01010029 (Comprehensive)						
Vehicle Reg. No. (Insured):	SMN4999P	Policy No. (Claimant):							
		Excess:							
Repairer:	- Not Applicable - (-)								
Handling Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Hwang Shiang Yi - 6329 5205]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by LEE HOCK ANN] ... [Final Rpt due 21/10/2019]								
Driver/Custodian (Insured):	TAN GHIM LENG MARK (42 / Male) , NRIC: S7700929I, Tel: +6581880914 Email: mark.bigworks@gmail.com								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

\*SLB5759J (CMTD1904699)  
[SMN4999P]  
TP  
LIM SHING KAI  
Sep 27 2019 6:00PM  
[TAN GHIM LENG MARK]

<a href="#">Upload Documents</a> <a href="#">Upload Photos</a> <a href="#">Compose New Letter</a>			<b>View</b> <a href="#">View in Browser</a>	
<b>Photos/Images</b>			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	15/10/19 09:26	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
2	15/10/19 09:27	Odometer Reading	 Load JPG	<input checked="" type="checkbox"/>
3	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
4	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
5	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
6	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
7	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
8	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
9	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
10	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
11	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
12	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
13	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
14	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
15	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
16	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
17	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
18	15/10/19 09:28	General View	 Load JPG	<input checked="" type="checkbox"/>
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21	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
22	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
23	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
24	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
25	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
26	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
27	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
28	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
29	15/10/19 09:29	General View	 Load JPG	<input checked="" type="checkbox"/>
30	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
31	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
32	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
33	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
34	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
35	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
36	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
37	15/10/19 09:29	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
38	15/10/19 09:29	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/ Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
				<input checked="" type="checkbox"/>
39	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
40	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
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42	15/10/19 09:29	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
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66	15/10/19 09:30	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
67	15/10/19 09:30	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
68	15/10/19 09:30	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
69	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
70	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
71	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
72	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
73	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
74	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
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81	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
82	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
83	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
84	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
85	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
86	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
87	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
88	17/10/19 16:55	After Repair Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Sompo Insurance Singapore Pte. Ltd. (HQ)	Thumbnail	Print
1	10/10/19 07:54	Pre-Repair Survey-MY CAR CONSULTANT ACK/AGREE LKK AUTO	 Load PDF	
2	10/10/19 07:55	Third Party E-filed GIA report	 Load PDF	

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
<div>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</div> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

# 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/SMO19017896/HVD3E2

Date: 13/02/2020

### REFERENCE

Handling Insurer: Sompo Insurance Singapore Pte. Ltd. Policy No: D19MTPV01010029

Claimant Vehicle No: SLB5759J

Insured Vehicle No: SMN4999P

Date of Loss: 27/09/2019

Nature of Claim: TP

Claim No: CMTD1904699

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SLB5759J

Make & Model: TOYOTA VELLFIRE, 2.5 (A)

Engine No: 2ARH581593

Reg. Date: 14/04/2016 (Man. Year: 2015)

Chassis No: AGH300024524

Colour: Black

Odometer: 83792 km

Engine Capacity: 2493 cc

Market Value/New Car Price: N/A

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

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

### CONDITION OF TYRES

Front Tyre Size: 225/60 R17

Rear Tyre Size: 225/60 R17

Front Left Side: Continental 5 mm

Rear Left Side: Falken 5 mm

Front Right Side: Continental 5 mm

Rear Right Side: Falken 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	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

### INSPECTION

Date of Assignment: 10/10/2019

Date Inspected: 10/10/2019 Inspected At:

MY CAR CONSULTANT PTE LTD  
53 UBI AVENUE 1 #01-33  
PAYA UBI INDUSTRIAL PARK  
SINGAPORE 408934

Estimated Period of Repair: 5.0 days

Adjuster: LEE HOCK ANN

Manager: VERON CHEN

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.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$5,000.00 - \$6,000.00

## REPAIR DETAILS

### Reference

<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 13 Feb 2020)
<b>Parts:</b> M1-MPV	TOYOTA VELLFIRE 2.5 (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SLB5759J)
<b>Validity:</b>	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
<b>Further Info:</b>	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.
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< END OF ESTIMATES >