

Surveyor

REF: 08/CTE19017985/ Klyd302

Special Instruction:

HS: \$ 7250.00

From (Person): Tan Kah Leong of CTI Date/Time: 10/10/19

Third Parties:

Claimant:

Surveyor: Constant Appraiser Services

Workshop: Cosmopolitan Engineering

OD/IT Re-inspection / Evaluation

To Inspect Vehicle No: GV 7374 B Insured: GY 6969 B
at Workshop m/s: Cosmopolitan Engineering Tel: 6546 7728
of: 4 loyang walk, 508 787

Policy No: Claim No:
Sum Insured: Excess:
Make of Velt: D.O.A. 26/05/2019
(Client's Record)

16/10/2019 @ 9am - 10am

H.O.D. Enforcement/Date:

Date/Time: Person Contacted: Vehicle IN / OUT

Date/Time: Confirmed with Final Fig, days (Red \$ / %; Original 10 days)

Date/Time: 23/10/19 Submit Final Fig 4/5 \$4350, 6 days (Red \$ 2900, 40 %; Original 6 days)

Date/Time	Action/Instruction
	GV 7374 B - X
	GY 6969 B - NA/19010000/19
	Repair Day 6 day

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

RECEIVED 24 OCT 2019

Para(3) : Nett Value

Market Value :
Salvage Value :
Nett Value :

Inspected/
Evaluated by:

Fee Charged:

Basic & Add
Transport
Photos
Others
Total

Date:

190

190

1) Date/Time 23/10/19 File Pass to Typist

3) Date/Time File Pass to

5) Date/Time File Pass to

2) Date/Time File Return to

4) Date/Time File Return to

6) Date/Time File Return to

ASS. REC. BY:

REF:

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res: Yes or No

Lum Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / Rim or

Tyre Size: F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Date/Time, File Pass in?

i)

Date/Time, File Return in?

ii)

Report Format:

Lump Sum / L.B.: (\$)

☐

: Pref. Report

☐

: Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

☐

: Wheel end (\$

Survey Fee:

Transportation:

S + RS: (\$

Photos

Others

TOTAL

Nivitha (LKK Auto)

From: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>
Sent: Thursday, 10 October 2019 11:20 AM
To: assignments
Cc: SUR
Subject: FW: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19 [Part 1 of 2]
Attachments: Survey Report.pdf; Photo 1.pdf; Photo 2.pdf
Importance: High

Dear LKK,

We refer to the workshop email below.

Please assists to conduct a re-inspection for the above vehicle.

Note: No PRS survey conducted.

Attached is the survey report and colour photographs.

Thank you.

Regards

Tan Kah Leong
Assistant Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6193 | F: (65) 6222 1033

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/

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From: Alicia Tan [mailto:alicia@cosmopolitan.com.sg]
Sent: Tuesday, October 8, 2019 5:47 PM
To: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>; 'Catherine Lim' <info@catherinelimllc.com>
Cc: 'COSMOPOLITAN' <coslease@cosmopolitan.com.sg>; wilson@cosmopolitan.com.sg
Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19
Importance: High

Hi Mr Tan,

The above vehicle will be ready at workshop (4 Loyang Walk S508787) on Saturday (12.10.19) @ 9am.

Feel free to contact us if above appointment need changes.

Thanks & Regards,

Alicia Tan

Cosmopolitan Engrg Services Pte Ltd
Tel : 65467728 Fax : 65467729

From: Alicia Tan [<mailto:alicia@cosmopolitan.com.sg>]
Sent: Tuesday, 8 October 2019 4:35 PM
To: 'Tan Kah Leong'; 'Catherine Lim'
Cc: 'COSMOPOLITAN'
Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19

Hi Mr Tan,

Noted.

Let me arrange with my colleague will get back to you a.s.a.p.

Thanks & Regards,

Alicia Tan

Cosmopolitan Engrg Services Pte Ltd
Tel : 65467728 Fax : 65467729

From: Tan Kah Leong [<mailto:KahLeong.Tan@sg.cntaiping.com>]
Sent: Tuesday, 8 October 2019 3:23 PM
To: Cosmopolitan; 'Catherine Lim'
Cc: wilson@cosmopolitan.com.sg
Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19

Without Prejudice

Dear Alicia,

We are sorry for the inconvenience caused.

As the survey report file size is over the size limit, we will inform our surveyor about the re-inspection.

Meanwhile, we seek your understanding to re-arrange for another date and time for our surveyor to conduct the re-inspection.

Thank you.

Regards

Tan Kah Leong
Assistant Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 6389 6193 | F: (65) 6222 1033

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/

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From: Cosmopolitan [<mailto:coslease@cosmopolitan.com.sg>]

Sent: Tuesday, October 8, 2019 2:34 PM

To: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>; 'Catherine Lim' <info@catherinelimllc.com>

Cc: wilson@cosmopolitan.com.sg; 'COSMOPOLITAN' <coslease@cosmopolitan.com.sg>

Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19

Importance: High

Hi Mr Tan,

As per above case, we yet to not received the re-survey as appointed. Please advise a.s.a.p.

Thanks & Regards,

Alicia Tan

Cosmopolitan Engrg Services Pte Ltd

Tel : 65467728 Fax : 65467729

From: Cosmopolitan [<mailto:coslease@cosmopolitan.com.sg>]

Sent: Wednesday, 25 September 2019 11:37 AM

To: 'Tan Kah Leong'; 'Catherine Lim'

Cc: 'angie@cosmopolitan.com.sg'; 'wilson@cosmopolitan.com.sg'

Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19

Importance: High

Hi Mr Tan,

Good Morning.

I have spoken to Ms Summer from LKK Auto Consultants. She inform me she didn't received any info of GV7374B to be re-survey.

Please advice a.s.a.p. because I just arrange today for the survey as per your request.

Thanks & Regards,

Alicia Tan

From: Cosmopolitan [mailto:coslease@cosmopolitan.com.sg]
Sent: Wednesday, 25 September 2019 10:02 AM
To: 'Tan Kah Leong'; 'Catherine Lim'
Cc: 'angie@cosmopolitan.com.sg'; 'wilson@cosmopolitan.com.sg'
Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19
Importance: High

Dear Mr Tan,

Vehicle is ready in workshop.

Please advice what time the surveyor will be come to conduct the re-inspection.

Thanks & Regards,

Alicia Tan

Cosmopolitan Engrg Services Pte Ltd
Tel : 65467728 Fax : 65467729

From: Tan Kah Leong [mailto:KahLeong.Tan@sg.cntaiping.com]
Sent: Friday, 20 September 2019 3:29 PM
To: Cosmopolitan; 'Catherine Lim'
Cc: angie@cosmopolitan.com.sg; wilson@cosmopolitan.com.sg
Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19

Without Prejudice

Dear Alicia,

We refer to your email below.

We had appointed M/s LKK Auto Consultants to conduct the re-inspection.

Aside to Catherine,

We will revert on our offer once the re-inspection report is ready.

Thank you.

Regards

Tan Kah Leong

Assistant Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6193 | F: (65) 6222 1033

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From: Cosmopolitan [<mailto:coslease@cosmopolitan.com.sg>]
Sent: Friday, September 20, 2019 11:06 AM
To: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>; 'Catherine Lim' <info@catherinelimllc.com>
Cc: angie@cosmopolitan.com.sg; wilson@cosmopolitan.com.sg; 'Cosmopolitan' <coslease@cosmopolitan.com.sg>
Subject: RE: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19
Importance: High

Hi Mr Tan,

The above vehicle will be ready at workshop (4 Loyang Walk S508787) on 25.09.19 @ 9am.

Feel free to contact us if above appointment need changes.

Thanks & Regards,

Alicia Tan

Cosmopolitan Engrg Services Pte Ltd
Tel : 65467728 Fax : 65467729

From: Catherine Lim LLC [<mailto:info@catherinelimllc.com>]
Sent: Friday, 19 July 2019 9:46 AM
To: coslease@cosmopolitan.com.sg
Subject: our ref: CL/190547/T/COS.sg Vehicle no. GV 7374B DOA: 26.5.19

Dear Sir/Madam,

Please refer to email below from China TaiPing. Please arrange for re-inspection as requested.

Catherine Lim LLC
20 Havelock Road
#03-01 Central Square
Singapore 059765
Tel: 64385500, Fax: 64380111

From: Tan Kah Leong
Sent: Friday, July 19, 2019 9:37 AM
To: info@catherinelimllc.com
Subject: Your ref: CL/190547/T/COS.sg Our ref: SNM19D202401C02

Without Prejudice

Dear Sirs,

We refer to your letter dated 27.06.2019.

Strictly without admission of liability basis, we would like to conduct a physical re-inspection of your client's vehicle.

Please advise us the date and time for our surveyor to do so.

Thank you.

Regards

Tan Kah Leong
Assistant Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #15-00 Springleaf Tower Singapore 079909

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Constant Appraiser Services

Qualified Automobile Accident Damage Appraisers/Loss Adjusters
Blk 2 Rivervale Link, #09-02 Singapore 545040
Tel/Fax: 6886 1106 Mobile: 9007 5234
Email: constant_as@yahoo.com.sg
RCB No. 53138015K

Automobile Inspection Report

To: Cosmopolitan Engineering Service Pte Ltd 4 Loyang Walk Singapore 508787		Date : 18/06/2019 Reference No : CAS/19-06/029	
<u>General Information</u>			
Registration No.	: GV 7374B		
Accident Date	: 26/05/2019		
<u>Particulars of Damaged Vehicle</u>			
Colour	: White	Make & Model : Toyota Hiace	
Engine Capacity	: 2986 cc	Pre-Accident Condition : Good	
Mileage (KM)	: 400376	Engine No. : 5L5253848	
Chassis No.	: LH1621007422	Steering : In Order	
Registration Date	: 09/10/2002	Brake : In Order	
<u>Tyre Condition</u>			
	Size	Make	Balance
R/H Front Tyre	185R14	FALKEN	90%
L/H Front Tyre	185R14	FALKEN	90%
R/H Rear Tyre	185R14	FALKEN	90%
L/H Rear Tyre	185R14	FALKEN	60%
<u>Inspection</u>			
Repairer	: Cosmopolitan Engineering Service Pte Ltd 4 Loyang Walk Singapore 508787		
<u>Adjustment And Recommendation Cost Of Repair</u>			
Repairer's Estimate	: \$11,455.43		
Revised Amount	: \$7,250.00		
Less Excess	: -		
Nett Total	: \$7,250.00		
<u>Remarks</u>			
(A) Survey was done on 29/05/2019			
(B) Re-survey was done on 01/06/2019			
(C) Re-survey after repair was done on 10/06/2019			
(D) The survey was conducted entirely on WITHOUT PREJUDICE basis.			
(E) We have NOT given any instruction to authorize the repair of the vehicle.			

NOTE: The revised estimate was made from a visual inspection. Should there be any discrepancy or unseen damage/item in this survey, kindly notified the company within 7 (seven) days from the date hereof. Otherwise, the revised amount shall be deemed to be valid.

Constant Appraiser Services

Vehicle No : GV 7374B

Our ref : CAS/19-06/029

Adjustment On Repair Costs And Replacement Of Parts:

S/No	Qty	Descriptions	Assessed Condition	Estimate by Workshop (\$)	Revised Amount (\$)
<u>PARTS REPLACEMENT – LIST ITEMS</u>					
1	1pc	Tailgate	Dented/Warped	1,263.40	1,263.40
2	1pc	Tailgate lock	Bent/Jammed	466.80	466.80 310.20
3	1pc	Tailgate lock catch	Bent	42.30	42.30
4	1pc	Tailgate weatherstrip <i>X 1/2"</i>	Distorted	362.80	362.80 X
5	1pc	Tailgate glass rubber	Necessary	491.30	491.30 392.88
6	1pc	Tailgate outer garnish	Serviceable	274.50	-
7	1pc	Rear bumper	Dented/Broken	428.80	428.80 380.00
8	1pc	Rear bumper beam <i>X 1/2"</i>	Bent/Twisted	279.00	279.00 X
9	1pc	Rear end panel outer <i>X 1/2"</i>	Dented	526.30	526.30 X
10	1pc	Rear end panel inner <i>X 1/2"</i>	Dented	495.30	495.30 X
11	2pcs	Taillamp @ \$372.30	Serviceable	744.60	-
12	1pc	Spare tyre bracket	Repair	179.20	-
13	1pc	Front panel	Dented	864.20	864.20
14	1pc	Front grille	Broken	476.90	476.90
15	1pc	Front grille emblem	Necessary	34.20	34.20
16	1pc	Front bumper <i>X repair</i>	Dented/Deformed	398.50	398.50 X
17	1pc	Front bumper moulding <i>X 5/8"</i>	Necessary	68.80	68.80 X
18	1pc	Front bumper reinforcement <i>X SW</i>	Dented/Bent	582.60	582.60 X
19	2pcs	Front bumper bracket @ \$107.00	Repair	214.00	-
20	2pcs	Front bumper side holder @ \$25.00	Necessary	50.00	50.00
21	1pc	Front bumper inner garnish RH	Deformed/Torn	68.80	68.80
22	1pc	Front bumper inner garnish LH	Serviceable	68.80	-
23	2pcs	Front bumper lamp cover @ \$40.50	Missing/Deformed	81.00	81.00
24	2pcs	Headlamp @ \$486.00	O/S Broken	972.00	486.00 331.00
25	2pcs	Headlamp garnish @ \$165.00	O/S Broken	330.00	165.00
26	2pcs	Side lamp @ \$198.90	O/S Broken	397.80	198.90
				10,161.90	7,830.90
Less 25%				(2,540.47)	(1,957.72)
Sub total				7,621.43	5,873.18
<u>PARTS REPLACEMENT – SPECIAL NETT ITEMS</u>					
1	1set	Front bumper clip	Necessary	22.00	22.00

Constant Appraiser Services

Vehicle No : GV 7374B

Our ref : CAS/19-06/029

S/No	Qty	Descriptions	Assessed Condition	Estimate by Workshop (\$)	Revised Amount (\$)
<u>PARTS REPLACEMENT – SPECIAL NETT ITEMS (CONT'D)</u>					
2	1set	Front grille clip	Necessary	22.00	22.00
3	4pcs	Rear bumper side clip @ \$2.50	Necessary	10.00	10.00
4	1pc	Tailgate sticker (70km/h)	Necessary	10.00	10.00
5	1set	Reverse sensor	Damaged	250.00	220.00 200
		Sub total		7,935.43	6,157.18
<u>LABOUR & MISC. CHARGES</u>					
1		Labour to repair & replace damaged parts		1,600.00	1,400.00 800
2		Spray painting on affected area		1,500.00	1,200.00 800
3		Remove & refix rear glass		120.00	80.00 60
4		Remove & refix tailgate mechanism		100.00	80.00 50
5		Check wiring & refocus headlamp		50.00	40.00
6		Tuff kote		150.00	90.00 50
		Grand total		11,455.43	9,047.18
Recommended cost of lump sum repair (To its pre-accident condition)					7,250.00

Adjustment/Recommendations

We have thoroughly inspected each and every item on the estimate against the physical damage found on the vehicle and we have listed the breakdown of our finding and our recommendation.

The repairer has agreed to undertake the job at a lump sum of **\$7,250.00** on a contractual basis. Under normal circumstances, the repair period would be about **10 (Ten)** working days.

Yours faithfully,

Constant Appraiser Services


Lim Yong Tian (Sebastian)
Licensed Appraiser
Adv. Dip. In Mechanical Engineering (AUS)
MSAAA

4/1 \$4350
6/1/19

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	27/05/2019 16:00
Date Of Accident	26/05/2019 23:00
Exact Location Of Accident	AT BLK 185 BOON LAY AVE OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GV7374B
Insured/Policyholder	
Name Of Registered Owner	COSMOPOLITAN ENGINEERING SERVICES PTE LTD
Co Reg No	198401891K
Email Address	COSLEASE@COSMOPOLITAN.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65437728

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	GOODS VEHICLE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	SD18V09704/VCZ/R11
Cover Note Number	

Driver

Name of Driver	GANESAN S/O ALAGAN PONNUSAMY
NRIC No	S8633053I
Date Of Birth	06/11/1986
Occupation	OUTDOOR
Date Of Driving Pass	11/05/2019
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98161169
Fax Number	
Contact Number	
Email Address	MADBOYINC@HOTMAIL.COM

Address	APT BLK 185 BOON LAY AVE #02-158
Postcode	640185
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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

AS PER ATTACHED SKETCH PLAN AND NOTE

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	GY6969B
Vehicle Make/Model/Colour	TOYOTA DYNA LORRY
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	RAHMAT BIN SAID
NRIC/Passport Number	S1435541C
Contact Number	85900640
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

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.

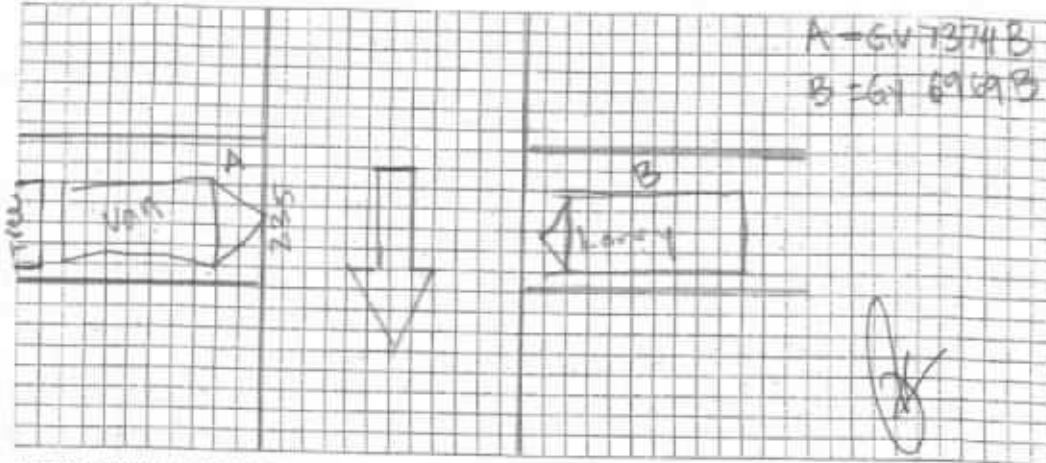
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

(GV 7374 B)
 The vehicle was stationary. It was parked in
 Beon Lay Ave. car park lot NO. 235. My friend called
 me to inform that there were police (TP) near the van. I
 went down to see. There was a note written on
 my van. That the lorry driver of GV 6969B had
 caused an accident & damaged my van. When I
 came down to scene the lorry had already been
 shifted. Then the driver of the lorry came down
 when I contacted him. He said that he banged
 the stationary van by moving forward.
 By causing the van to go off the kerb and hit the
 tree at the back.

DECLARATION

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

Policyholder's Signature
 Date & Time:

GNRHC SketchPlanForm_V3

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

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



Liberty Insurance Pte Ltd
 Registration no. 199002781D
 51 Club Street
 #03-00 Liberty House
 Singapore 069428
 Tel: (65) 6221 8811 Fax: (65) 6225 8880
 Website: <http://www.libertyinsurance.com.sg>

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1967 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No	SD18V09704 WQZ/RM
Form	MZ407
Date Of Issue	12-SEP-2018
1. Index Mark and Registration No. of Vehicle:	GV7374B
2. Chassis number of Vehicle:	LH1621007422
3. Name of Policyholder:	COSMOPOLITAN ENGINEERING SERVICES PTE LTD
4. Effective date of Commencement of Insurance for the purpose of the Act:	09-OCT-2018 00:00 AM
5. Date of Expiry of Insurance:	08-OCT-2019 23:59 PM
6. Persons or Classes of Persons entitled to drive*:	Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
7. Limitations as to use*:	A) Use for carriage of passengers or goods in connection with the Policyholder's business. B) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
8. Policy does not cover:	A) Use for racing, pace-making, reliability trials or speed-testing. B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. C) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.
*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1967 (Malaysia) are not to be included under these headings.	
(We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1967 (Malaysia).)	
For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers Authorised Signature	
For information only:	
COVERAGE:	Third Party Fire & Theft
SUM INSURED:	MARKET VALUE AT THE TIME OF LOSS
EXCESS:	All Claims \$31500, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers \$32500
FINANCE COMPANY:	
PRODUCER NAME:	IBS (SINGAPORE) PTE LTD

PLS: PLS: 12-SEP-18

12-SEP-18

To whom it may concern,

I have caused an accident
and caused damaged to your van.

I seek your apology. I will provide
my detail to you and put here

8590 0640 - Rahmat.

SORRY FOR THE INCONVENIENCE
CAUSED.

3RD PARTY LORRY



INSURED VAN



SCENE PHOTO



SCENE PHOTO



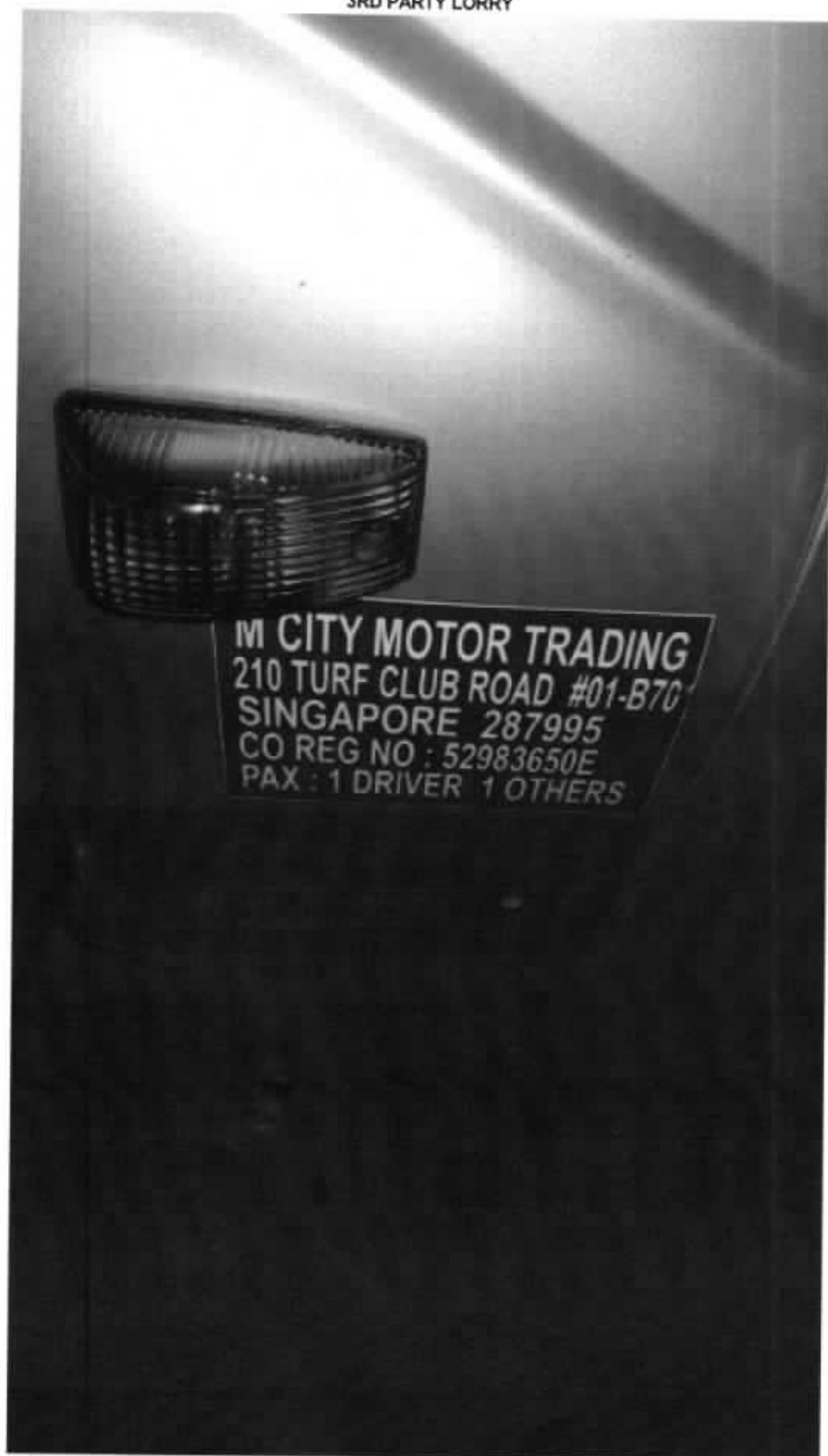
3RD PARTY LORRY



SCENE PHOTO



3RD PARTY LORRY



INSURED VAN



SCENE PHOTO



INSURED VAN



INSURED VAN



INSURED VAN



INSURED VAN



INSURED VAN



INSURED VAN



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	27/05/2019 15:05
Date Of Accident	26/05/2019 23:40
Exact Location Of Accident	BLK 185 CAR PARK BOON LAY AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY6969B
Insured/Policyholder	
Name Of Registered Owner	M CITY RENTALS
Co Reg No	53110235A
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64648880

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 100-3.0 D (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	REPORTING ONLY
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	DMCVSN1915291900
Cover Note Number	

Driver

Name of Driver	RAHMAT BIN SAID
NRIC No	S1435541C
Date Of Birth	16/03/1960
Occupation	OUTDOOR
Date Of Driving Pass	25/11/2008
Driving Experience	10 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85900640
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	210, TURF CLUB ROAD, #01-B70, THE GRANDSTAND, SINGAPORE 287995
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LESSEE
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)	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

ON 26/05/2019 AT ABOUT 2340 HRS. WHILE I WAS TRAVELLING OUT TO THE CAR PARK, MY WATER BOTTLE SUDDENLY DROP AT MY BRAKE AND TOUCH ONTO MY CLUTCH . WHEN I SAW MY WATER BOTTLE, I DIDN'T NOTICED THAT VEHICLE B WAS IN FRONT ME. WHEN I NOTICED MY VEHICLE HAD TOUCH ONTO FRT RIGHT PORTION OF VEHICLE B AND REAR OF VEHICLE B HAD COLLIDED ONTO THE TREE.

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	GV7374B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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

I AM AWARE THAT MY INSURER MAY HAVE A **14 DAYS TIMEFRAME** FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

Sketch Plan Pg. 2

SKETCH PLAN

A-GY6969B

B-GV7374B

Tree

BIK 185 Car Park Boon Lay Ave

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to circumstances

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:

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

☐ Claim own policy
☐ Claim third party
☐ Claim OD / TP at other workshop
☐ For record purpose
Policy No. DMCYSN1915291900
Insurer Chinn Veh. No. GY 6969B

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile			
CHINA TAIPING INSURANCE (S) PTE LTD		Ref : CS/CTI19017985/K1yd3e2	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 25-10-2019	
		Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)			
Insured Veh.	GY 6969B	Veh. Inspected	GV 7374B
Policy No.	DMCVSN1915291900	Coverage (\$)	0.00
Claim No.	CL/190547/T/COS.sg	Excess (\$)	0.00
Assign From	TAN KAH LEONG	Assign Date	10/10/2019
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA HIACE	c.c	2986
Engine No.	HIDDEN	Year of Reg.	2002
Chassis No.	LH1621007422	Colour	WHITE
Odometer	410778	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	185 R14C	FALKEN	8 mm
L/H Front Tyre	185 R14C	FALKEN	8 mm
R/H Rear Tyre	185 R14C	FALKEN	8 mm
L/H Rear Tyre	185 R14C	FALKEN	8 mm
4. Description of Damages			
THE VEHICLE HAD COMPLETED ITS REPAIR WORKS.			
REPAIR CONDITION SEE DETAILS.			
5. General Information			
Accident Date	26/05/2019	Inspection Date	16/10/2019
Survey held at	COSMOPOLITAN ENGRG. SERVICES PTE. LTD. 4 LOYANG WALK SINGAPORE 508787		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		6 Working Days	



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GV 7374B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	TAILGATE	REPLACED	1,263.40	1,263.40
1	TAILGATE LOCK	REPLACED	466.80	310.20
1	TAILGATE LOCK CATCH	REPLACED	42.30	42.30
1	TAILGATE WEATHERSTRIP	SERVICEABLE	362.80	-
1	TAILGATE GLASS RUBBER	REPLACED	491.30	392.48
1	TAILGATE OUTER GARNISH	SERVICEABLE	274.50	-
1	REAR BUMPER	REPLACED	428.80	380.10
1	REAR BUMPER BEAM	REPAIRED SEE LABOUR	279.00	-
1	REAR END PANEL OUTER	REPAIRED SEE LABOUR	526.30	-
1	REAR END PANEL INNER	REPAIRED SEE LABOUR	495.30	-
2	TAILLAMP @\$372.30	SERVICEABLE	744.60	-
1	SPARE TYRE BRACKET	REPAIRED SEE LABOUR	179.20	-
1	FRONT PANEL	REPLACED	864.20	864.20
1	FRONT GRILLE	REPLACED	476.90	476.90
1	FRONT GRILLE EMBLEM	REPLACED	34.20	34.20
1	FRONT BUMPER	REPAIRED SEE LABOUR	398.50	-
1	FRONT BUMPER MOULDING	SERVICEABLE	68.80	-
1	FRONT BUMPER REINFORCEMENT	SERVICEABLE	582.60	-
2	FRONT BUMPER BRACKET @\$107.00	REPAIRED SEE LABOUR	214.00	-
2	FRONT BUMPER SIDE HOLDER @\$25.00	REPLACED	50.00	50.00
1	FRONT BUMPER INNER GARNISH RH	REPLACED	68.80	68.80
1	FRONT BUMPER INNER GARNISH LH	SERVICEABLE	68.80	-
2	FRONT BUMPER LAMP COVER @\$40.50	REPLACED	81.00	81.00
2	HEADLAMP @\$486.00	O/S REPLACED	972.00	231.10
2	HEADLAMP GARNISH @\$165.00	O/S REPLACED	330.00	165.00
2	SIDE LAMP @\$198.90	O/S REPLACED	397.80	198.90

Report Ref No. CS/CTI19017985/K1yd3e2



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Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LESS 25% DISCOUNT		-2,540.48	-1,139.65
			7,621.42	3,418.93
	<u>SPECIAL NETT ITEMS</u>			
1	SET FRONT BUMPER CLIP (SN)	REPLACED	22.00	22.00
1	SET FRONT GRILLE CLIP (SN)	REPLACED	22.00	22.00
4	REAR BUMPER SIDE CLIP @\$2.50 (SN)	REPLACED	10.00	10.00
1	TAILGATE STICKER (70KM/H) (SN)	REPLACED	10.00	10.00
1	SET REVERSE SENSOR (SN)	REPLACED	250.00	200.00
			314.00	264.00
	<u>LABOUR</u>			
	LABOUR TO REPAIR & REPLACE DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF REAR BUMPER BEAM, REAR END PANEL OUTER, REAR END PANEL INNER, SPARE TYRE BRACKET, FRONT BUMPER AND FRONT BUMPER BRACKET.		1,600.00	800.00
	SPRAY PAINTING ON AFFECTED AREA.		1,500.00	800.00
	REMOVE & REFIX REAR GLASS.		120.00	60.00
	REMOVE & REFIX TAILGATE MECHANISM.		100.00	50.00
	CHECK WIRING & REFOCUS HEADLAMP.		50.00	40.00
	TUFF KOTE.		150.00	50.00
			3,520.00	1,800.00
	GRAND TOTAL		11,455.42	5,482.93
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			4,350.00

Report Ref No. CS/CT19017985/K1yd3e2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report in whole or in part, does so at his or her own risk.