

ASS. REC. BY:

REF:

CS/JNC19018166 / 12 + f3 / 12 Special Instruction:

SURVIVOR

Taufikh

ASSIGNMENT (Office)From (Person): Theresa Vimala of JNC Date/Time: 15 October 2019

Estimated Cost: _____ Bill to: _____

OD / ~~TP~~ + WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: XE4320P Insured: SJH 7384Kat Workshop m/s VFix Auto Pte Ltd Tel: 6455 2957of 26 Chia Ping RoadPolicy No: _____ Claim No: WT/1064107-002

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 26/09/2019
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 15/10/2019 @ 02:15pm Person Contacted: Weng Sheng Vehicle: OUT

Date/Time	Action/Instruction (✓) Estimate
<u>XE4320P</u>	<u>CS/CT339003867/13XX DON: 21/03/2019</u>
	<u>SJH 7384K X</u>

ASS. REC. BY:

Tayf

REF:

INC

ASSIGNMENT

From: _____ Date: 15-10-2019

Estimated Cost: _____

OD / TP / VS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: XG 4320P

at Workshop m/s: VFix

of No. Chua Ping Road

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 Report: _____ 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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: XE4320P

Yr Regn: 2018, My

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

Truck / Trailer or

Tipper-truck.

Make: Mercedes Benz

cc 10677

Colour: white

A/C: Insured / Std / NI / NA

Sp. Reading: _____

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: _____

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. 8 mm

R/Bal. 8 mm

L/Bal. 8 mm

L/Bal. 8 mm

D.O.A. _____

D.O.L. 15/10/17

Survey held at Vfix

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

Frt N/S

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

Date / Time Action / Instruction

XD 7022K

11/11 15/4400, 3 days e-mail w/s, confirm with Wang
(Red. 6654.27, 60%)

RECEIVED 19 NOV 2019

Date/Time, File Pass to?

11/11/11 Typist

Date/Time, File Return to?

to

Rep. Form:

Lump Sum / B.B.: 4400/-

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee:

Site Insp (\$)

Interview (\$)

Tech. Invs (\$)

Weekend (\$)

Survey Fee:

Transportation:

S + RS - SI

Petrol

Other

TOTAL

250

Summer Lee (LKK Auto)

From: Theresa Vimala D/O Balagangadharan <thrsvim.bala@income.com.sg>
Sent: Wednesday, 16 October, 2019 9:07 AM
To: assignments
Subject: RE: TP CASES FARMED OUT TO LKK ON 15/10/2019

Hi Lkk, here is the list of the OIC names etc...

With Regards

Theresa Vimala
Senior Administrator
Motor Insurance
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers

in with you

From: Theresa Vimala D/O Balagangadharan
Sent: Tuesday, 15 October 2019 10:07 AM
To: assignments <assignments@lkkauto.com>
Cc: Teng Ken Leong <kenleong.teng@income.com.sg>; Thio Tse Kiat <tsekiat.thio@income.com.sg>; Theresa Vimala D/O Balagangadharan <thrsvim.bala@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 15/10/2019

Dear LKK,

Please assist to survey the following vehicles .

SN	OIC	Claim No.	Survey Date	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
1	SERENE	MT/1066803-001	15/10/2019	SLD39252	BAN CHOON MOTOR WORKS	3 PIONEER ROAD NORTH #01-14/15 SINGAPORE 628457	Perlin / 62641191		SIW7966C	7/10	
2	CHARLOTTE	MT/1064715-002	15/10/2019	GY8801M	MOTORWAY CAR CARE CENTRE PTE LTD	1094 LOWER DELTA ROAD MOTORWAY BUILDING SINGAPORE 169205	Annie Tew / 6571 9642	10-00-12-00	SKQ8849X	30/9	
3	JEFF	MT/1064107-002	15/10/2019	XE4320P	VFIX AUTO PTE LTD	26 CHIA PING ROAD SINGAPORE 619977	Weng Sheng / 6455 2957	14-00-16-00	SIH7384K	26/9	Owner waiting
4	JEFF	MT/1066455-002	15/10/2019	SIW7856L	AUTO INSURE PTE LTD	6 MARSILING LANE	Sam Goh / 9743 6363		SIW9804D	11/10	
5	DAVID	MT/1066634-001	15/10/2019	SUN3940B	AUTO INSURE PTE LTD	6 MARSILING LANE	Geraldine Lim / 9743 6363		SGR6525K	10/10	
6	HELENA	MT/1059149-002	15/10/2019	SCG6128D	TAN CHONG MOTOR SALES PTE LTD	913 BUKIT TIMAH ROAD SINGAPORE 589623	ZUHRI / 67038916	10-00-12-00	SKZ7039B	22/8	Owner waiting
7	HUEY HUEY	MT/1062604-002	15/10/2019	GBD3120Y	TAN CHONG MOTOR SALES PTE LTD	913 BUKIT TIMAH ROAD SINGAPORE 589623	ZUHRI / 67038916	10-00-12-00	GBB3923H	16/9	Owner waiting

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

With Regards

Theresa Vimala
Senior Administrator
Motor Insurance
T +65 6430 7898
www.income.com.sg



made different



in with
you

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Please assist to survey the following vehicles .

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2	CHARLOTTE	MT/1064715-002	15/10/2019	GY8801M	MOTORWAY CAR CARE CENTRE PTE LTD	1094 LOWER DELTA ROAD MOTORWAY BUILDING SINGAPORE 169205	Annie Tew / 6571 9642	10:00-12:00	SKQ8849X	30/9	
3	JEFF	MT/1064107-002	15/10/2019	XE4320P	VFIX AUTO PTE LTD	26 CHIA PING ROAD SINGAPORE 619977	Weng Sheng / 6455 2957	14:00-16:00	SJH7384K	26/9	Owner waiting
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in with you

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	26/09/2019 16:25
Date Of Accident	26/09/2019 09:15
Exact Location Of Accident	PAYA LEBAR TWDS UPPER PAYA LEBAR RD(LAMP POST 12)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE4320P
Insured/Policyholder	
Name Of Registered Owner	KOK TONG TRANSPORT & ENGINEERING PTE LTD
Co Reg No	199904117E
Email Address	KINHOE.NG@KTCGROUP.COM.SG
Mobile Phone No	(LOCAL) +65-96155910
Alternative Phone No	OFFICE-64874646

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	3336K/6X4-11.9 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1827621901
Cover Note Number	

Driver

Name of Driver	PEH YONG CHUAN
NRIC No	S1360296D
Date Of Birth	29/10/1959
Occupation	OUTDOOR
Date Of Driving Pass	04/10/1986
Driving Experience	32 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87199249
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 756 PASIR RIS ST 71 #03-156
Postcode	510756
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	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?	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 26/09/2019 AROUND 0915HRS, VEHICLE A DRIVING FROM PAYA LEBAR TWDS UPPER PAYA LEBAR RD (LAMP POST 12) AT LANE 2 SUDDENLY VEHICLE B FROM LANE 3 CUT TO LANE 2 & COLLIDED ONTO VEHICLE A LEFT SIDE.

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	SJH7384K
Vehicle Make/Model/Colour	HONDA STREAM 1.8AX A
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)	

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:

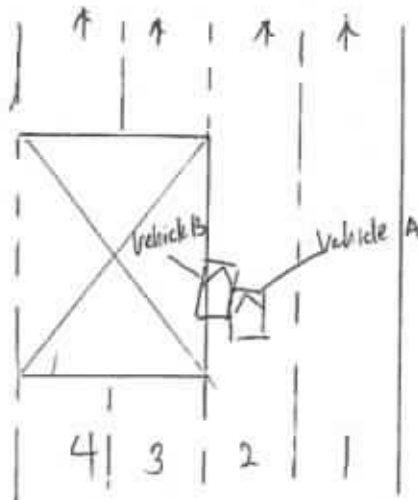
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/9/2019 around 0915 hrs, Vehicle A driving from Paya Lebar towards Upper Paya Lebar Rd (Jamp post 12) at lane 2 suddenly vehicle B from lane 3 cut to lane 2 and collided into vehicle A left side.

☐ Claim own policy
☐ Claim third party
☒ Claim on other at other workshop ✓ Fix Auto
☐ For record purpose only
Policy No DMCUSN 1839 62 (70)
Insurer Chase (C) Mob No XE4320P

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.: _____



Vfix Auto Pte Ltd
26 Chia Ping Road
Singapore 619977
Email : contact@vfixauto.com.sg
Tel : 6445 9268 Fax: 6445 2368
UEN / GST Reg No. : 201830761R

ESTIMATE

DATE :
ACC DATE :
REF NO :
POLICY NO :

Attention: Motor Claim Department

RE : VEHICLE NO :XE4320P MERCEDES AROCS

DESCRIPTION	AMOUNT S\$
1 1 HEAD LAMP LH	2,747.50 <i>Xun</i>
2 1 HEAD LAMP RIM LH	432.00 <i>cut</i>
3 1 FRONT SIDE BUMPER LH	1393 1,692.50 <i>ly</i>
4 1 FRONT MUDGUARD LH	1,114.30 <i>Xun</i>
5 1 FRONT MUDGUARD SIGNAL LAMP LH	210.00 <i>cut</i>
6 1 FRONT STEP GARNISH LH	1,970.00 <i>cut</i>
7 1 FRONT STEP PLATE LH	270.00 <i>Xun</i>
8 1 FRONT BOTTOM STEP LH	1,003.00 <i>ly</i>
9 1 FRONT RIM LH	411.00 <i>Xun</i>
10 1 FRONT RIM HUD CAP LH	210.00 <i>Xun</i>

\$ 10,060.30

LESS 10% \$ 9,054.27

5008

10% 4507.20

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

DESCRIPTIONS

UNIT PRICE

AMOUNT S\$

SPECIAL NETT

1

\$ -

LABOUR & MISCELLANEOUS :

AMOUNT S\$

1	To remove damaged body panel with all necessary components/attachments apply hot-works where necessary straighten front door pillar, repair/reshape body dented panels in accordance with factory specifications replace new parts refit and align into position refit all necessary components / attachments	1,400.00 600
2	To spray paint replaced/repared body panels inclusive of preparatory works and painting materials	450 600.00
		1050
		\$ 2,000.00

GRAND TOTAL : \$ 11,054.27

Vfix Auto Pte Ltd

4507.20.
1050
5557.20.
1/5/4400
3 days

Taufiq 9749 5744
15/10/19 @ 430pm
Lump sum
Reskin after repair
sure 1 hour on
3 days



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

DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC19018166/T1t3n2

73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 22-11-2019



ATTN: JEFF LIN

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJH 7384K	Veh. Inspected	XE 4320P
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1064107-002	Excess (\$)	0.00
Assign From	THERESA VIMALA	Assign Date	15/10/2019

2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ TIPPER-TRUCK	c.c	10677
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	WDB96421620269010	Colour	WHITE
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	315/80 R22.5	TRIANGLE	8 mm
L/H Front Tyre	315/80 R22.5	TRIANGLE	8 mm
R/H Rear Tyre	315/80 R22.5 (D)	TRIANGLE	8/8 mm
L/H Rear Tyre	315/80 R22.5 (D)	TRIANGLE	8/8 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	26/09/2019	Inspect Date / Time	15/10/2019 (04:28 PM)
Survey held at	VFIX AUTO SERVICE PTE LTD 26, CHIA PING ROAD, SINGAPORE 619977		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
-------------------------------------	----------------

**LKK Auto Consultants Pte Ltd**

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.: 1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. XE 4320P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	HEAD LAMP LH	NOT NECESSARY	2,747.50	-
1	HEAD LAMP RIM LH	CUT	432.00	432.00
1	FRONT SIDE BUMPER LH	DISTORTED	1,692.50	1,393.00
1	FRONT MUDGUARD LH	NOT NECESSARY	1,114.30	-
1	FRONT MUDGUARD SIGNAL LAMP LH	CUT	210.00	210.00
1	FRONT STEP GARNISH LH	CRACKED	1,970.00	1,970.00
1	FRONT STEP PLATE LH	NOT NECESSARY	270.00	-
1	FRONT BOTTOM STEP LH	DEFORMED	1,003.00	1,003.00
1	FRONT RIM LH	NOT NECESSARY	411.00	-
1	FRONT RIM HUD CAP LH	NOT NECESSARY	210.00	-
	LESS 10% DISCOUNT		-1,006.03	-500.80
			9,054.27	4,507.20
	<u>LABOUR</u>			
	TO REMOVE DAMAGED BODY PANEL WITH ALL NECESSARY COMPONENTS/ATTACHMENTS APPLY HOT -WORKS WHERE NECESSARY STRAIGHTEN FRONT DOOR PILLAR, REPAIR/RESHAPE BODY DENTED PANELS IN ACCORDANCE WITH FACTORY SPECIFICATIONS REPLACE NEW PARTS REFIT AND ALIGN INTO POSITION REFIT ALL NECESSARY COMPONENTS/ATTACHMENTS.		1,400.00	600.00
	TO SPRAY PAINT REPLACED/REPAIRED BODY PANELS INCLUSIVE OF PREPARATORY WORKS AND PAINTING MATERIALS.		600.00	450.00
			2,000.00	1,050.00
	GRAND TOTAL		11,054.27	5,557.20
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			4,400.00

Report Ref No. CS/INC19018166/T1tf3n2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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