

ASS. REC. BY:

Envelope: Kenneth

REF: CS/AGI1908197/Ktd3n2

Special Instructions:

ASSIGNMENT (Office)

From (Person): Ivy Ratilla

of AGI

Date/Time: 15/10/2019 @ 3:29pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SJE 8414

Insured: SKV 1470Z

at Workshop m/s: Massive Trading

Tel: 9108 2728

of Blk 5038 AMK Ind. Park 2 # 01-405

Policy No: _____

Claim No: C10004271/LA

Sum Insured: _____

Excess: _____

Make of Voh:
(Client's Record)

D.O.A. 12/10/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 4:30pm 15/10/19

Person Contacted: Anthony

Vehicle IN/OUT

Time/Time	Action/Instruction
	<u>Ishtiaq ✓</u>
	<u>SJE 8414-X</u>
	<u>SKV 1470Z-X</u>
<u>3/11/19</u>	<u>1500 6114 813501 email & confirm (Red: 910: 39%)</u>

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

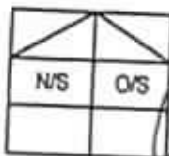
Claims No. _____

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: 03 days Res.: Yes or No

Lum Sum: 10 + 1% 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: STE8416 Yr Regn: 04, 16

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

Truck / Trailer or _____

Make: M. E250 cc 1991

Colour: M. Black AC: Insured / Std / NI / NA

Sp. Reading: 60079 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WDD 2120362B 261070

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: NI / S/Rim / STD A/Rim or

Tyre Size: F: 245/40R18

R: 265/35R18

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

TOYO / YOKO or

Front

R/Bal: 8 mm

L/Bal: 8 mm

D.O.A. 12/10/19

Survey held at

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

O/S Acc

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

Date / Time

Action / Instruction

1 File pass to
CAA & EIA not ready

RECEIVED 1 OCT 2019

Date/Time, File Pass to?

11/10 Typist

Date/Time, File Return to?

2



Prell. Report



Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee:



Site Insp (\$



Interview (\$



Tech Invs (\$



Weekend (\$

Survey Fee:

Transportation:

S + RS. SI

Fees

Others

TOTAL

250

Report Format:

Lump Sum / I.B.I. (\$

1500/-

Nivitha (LKK Auto)

From: Ivy Ratilla <ivy.r@budgetdirect.com.sg>
Sent: Tuesday, 15 October 2019 3:29 PM
To: Admin-D (LKKAuto)
Cc: SUR; Loganathan Agoram
Subject: TPPD Survey: Claim ref: C10004271/LA || OI- SKV1470Z (White) TP- SJE84U || Est:0.00 || Massive Trading & Auto
Attachments: TP PRS from TKSL.pdf

Hi Team,

We would like to arrange TP PRS SJE84U. They have chosen Mr. Kenneth Kong to survey the vehicle.

Please confirm. Thank you.

Regards,

Ivy Ratilla
Executive, Claims Admin

T +65 6540 2185
F +65 6725 0853
E ivy.r@budgetdirect.com.sg



Customer Care +65 6221 2111
Claims +65 6221 2199
Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01
Singapore Shopping Centre
Singapore
239924
budgetdirect.com.sg

auto  general

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as **Budget Direct Insurance**.

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From: Janice Kee <janice.kee@ksteoptr.com>
Sent: Tuesday, 15 October 2019 10:02 AM
To: Ivy Ratilla <ivy.r@budgetdirect.com.sg>
Cc: Claims <claims@budgetdirect.com.sg>; Anthony Cheong <cheonganthony@yahoo.com.sg>; Loganathan Agoram <loganathan.a@budgetdirect.com.sg>
Subject: Re: Pre Repair Survey for SJE 841 U (Your Ref: SKV 1470 Z Our Ref: TKSF/M492-ACC-42658.19/sf) || C10004271

Without Prejudice

Dear Ivy

Our client has agree to the usage of Mr Kenneth Kong from LKK Auto Consultants Pte Ltd as the Single Joint Expert to conduct the Pre-Repair Survey.

Kindly proceed to engage Mr Kenneth Kong from LKK Auto Consultants Pte Ltd to perform the said Pre-Repair Survey in accordance to the NIMA Protocol.

Thank you.

Regards,
Janice Kee
c/o Teo Keng Siang LLC
111 North Bridge Road,
#29-07/08 Peninsula Plaza,
Singapore 179098
Tel: 6333 4222 Fax: 6333 5676

From: Janice Kee <janice.kee@ksteoptr.com>
Sent: Monday, 14 October 2019 6:19 PM
To: Claims <claims@budgetdirect.com.sg>; Ivy Ratilla <ivy.r@budgetdirect.com.sg>; Justin Wong <justin.wong@budgetdirect.com.sg>; Julie Mangubat <julie.m@budgetdirect.com.sg>
Cc: Anthony Cheong <cheonganthony@yahoo.com.sg>
Subject: Pre Repair Survey for SJE 841 U (Your Ref: SKV 1470 Z Our Ref: TKSF/M492-ACC-42658.19/sf)

Dear Sir

We attach herewith our Pre-repair survey letter for your attention.

Kindly let us have the surveyor list for our attention.

Thank you.

Regards,

Janice Kee

c/o Teo Keng Siang LLC

111 North Bridge Road,
#29-07/08 Peninsula Plaza,
Singapore 179098
Tel: 6333 4222 Fax: 6333 5676

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Teo Keng Siang LLC

Advocates & Solicitors • Notary Public • Commissioner For Oaths

111 North Bridge Road #29-07/08 Peninsula Plaza Singapore 179098
ROC: 201510228C GST Reg No.: 201510228C

Tel: 6333 4222 Fax: 6333 5676 / 5688
Email: KSTEOCO@singnet.com.sg
(FAX - NOT FOR SERVICE OF COURT DOCUMENTS)

Our Ref : TKSF/M492-ACC-42658.19/sf (mc)
Your Ref : SKV 1470 Z
Date : 14 October 2019

Secretary in charge: Janice

Tel : 6333 4222 (ext 60)
Fax : 6333 5676 / 6333 5688
Email : janice.kee@ksteoptr.com

To: Auto & General Insurance (Singapore) Pte Ltd
190 Clemenceau Avenue
#03-01, Singapore Shopping Centre
Singapore 239924
Attn: Motor Claims Dept

WITHOUT PREJUDICE
BY FAX: (65) 6725 0853 & BY HAND

cc: Koh Thong Chuang (Owner & Driver)
7 Rivervale Link
#08-46
Singapore 545125

BY POST ONLY

Dear Sirs

RE: ACCIDENT INVOLVING SJE 841 U / SKV 1470 Z ON 12/10/19 ALONG BEGONIA DRIVE TAMARIND ROAD

We are instructed by Tan Hong Joo to notify you of a road traffic accident 12/10/19 at about 12:40 hours at ALONG BEGONIA DRIVE TAMARIND ROAD involving our client's vehicle registration number SJE 841 U and vehicle registration number SKV 1470 Z driven by you at the material time. A copy of our client's Singapore accident statement is enclosed. Kindly let us have a copy your Singapore accident statement report on an urgent basis.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please note that our client's motor vehicle SJE 841 U is now at the following workshop:-

Massive Trading & Auto
Blk 5038 Ang Mo Kio Industrial Park 2
#01-405
Singapore 569541
Contact: 9108 2728 Anthony

Yours faithfully,



M/s Teo Keng Siang LLC
encs

**Survey was conducted by:-

Name of Surveyor:

Date of Survey:

Time of Survey:

Signature

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 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 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	14/10/2019 15:07
Date Of Accident	12/10/2019 12:40
Exact Location Of Accident	BEGONIA DRIVE TAMARIND RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJE841U
Insured/Policyholder	
Name Of Registered Owner	TAN HONG JOO
NRIC No	S1799452B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96770070
Alternative Phone No	OTHERS-83994555

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250-2.0 SEDAN EDITION E (R18 LED SR) (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA437402/1
Cover Note Number	18/01/2019 - 31/03/2020

Driver

Name of Driver	TAN JUN LIANG JOE
NRIC No	S9639597C
Date Of Birth	31/10/1996
Occupation	INDOOR
Date Of Driving Pass	21/06/2018
Driving Experience	1 YEAR AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83994555
Fax Number	
Contact Number	OTHERS-96770070
Email Address	JOETJL@OUTLOOK.COM

Address	157G TAMARIND ROAD #03-02
Postcode	806111
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	3
Passenger 1	NAME: : TAN SHI JUN JOIE GENDER: : FEMALE
Passenger 2	NAME: : TAN SHI BING JAMIE 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

REFER TO THE SKETCH PLAN BY DRIVER

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKV1470Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KOH THONG CHUANG
NRIC/Passport Number	S1539985F
Contact Number	97300423
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/Insurer's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

Date of accident: 12/10/19 Time: 12:40 pm Location: Benjara Drive, Kamman Rd
 My Vehicle A: SJEB416 Vehicle B: CKV 1492 Vehicle C: —

SKETCH PLAN

Refer to the attached.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the attached.

Car B - Kohn Theng Chuang
 S157235 F
 97300428

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop : Prospere today
 Email address : chemsanthony@yahoo.com.sg
 & myself :
 Email address : JUETEL@OUTLOOK.COM

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

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

Policyholder's Signature
 Date & Time:

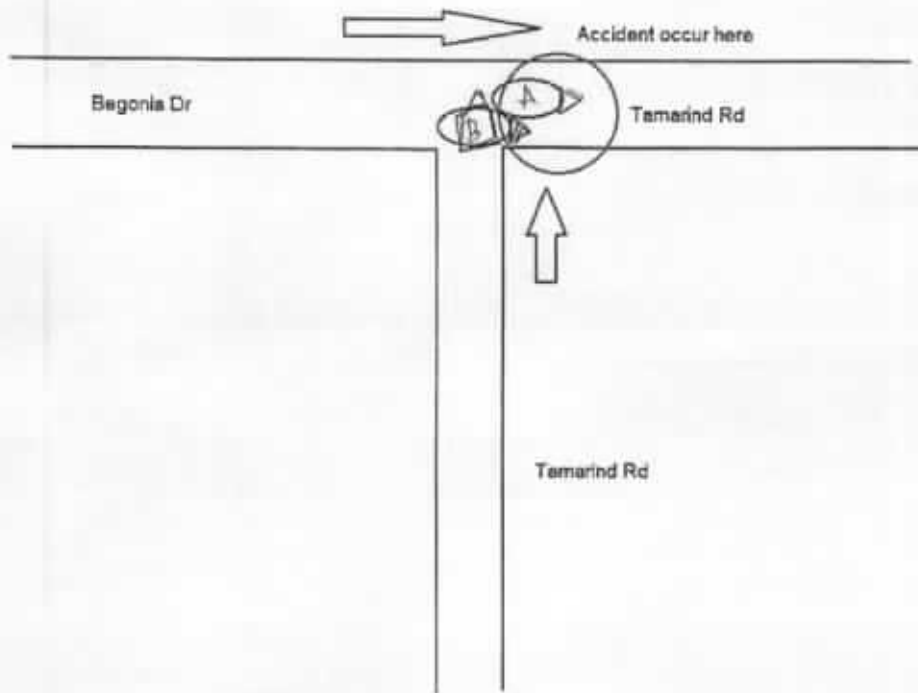
Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

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



AH LIM MOTOR COMPANY

Sketch Plan:



12:42PM when going from the main road of Begonia Dr towards Tamarind, the other party turned right without checking if the traffic is cleared to turn and hit on to the side of my vehicle upon impact.

Time of accident: 12:42PM

Place of accident: Begonia Drive, Tamarind Rd, Hse 150-178

To Whom It May Concern,

Accident involving my vehicle no. 5JEG 411 on 12/10/19 (date) with SKV 1470E (other vehicle no) along Begunah Pate Tarnaguz Rd

I, Tan Hong Joo Nric No. S179545213

Owner of vehicle no. SGE 9411 am aware of the accident of my vehicle on
12/10/14 (Date) while car was driven by Tan Jun Liang SGE

Nric No. 5063054C. I hereby, authorise him / her to make the report.

Natty

Date:

To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the above accident.

Name

Date:

Massive Trading & Auto

Mailing address : Blk 225 #07-579 Ang Mo Kio Ave 1 Singapore 560225
H/p 91082728

Fax : 64816131

Tan Hong Joo
157G Tamarind Road
#03-02
Singapore 806111

Vehicle No : SJE 841 U
Make/Model : Mercedes E250 - 2.0
Year : 2016

Not Withdraw
Recovery After Paint

3 days
61 Days @ 12500 / 15000

Qty	Description	Unit Price	Amount
-----	-------------	------------	--------

Estimate Cost Of Repair

S Nett

1 pc Rear o/s tyre rim

10%
Not by \$750.00 ✓

Labour Charges

Remove/renew the above accident parts including knocking, welding & cutting.

\$800.00 *400*

To putty and spray paint

~~\$800.00~~ *600*

Check & reconnect wiring.

nn \$40.00 *20 X*

To respray anti-rust proofing treatment

nn \$80.00 *40 X*

Total \$2,470.00

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:



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				
AUTO & GENERAL INSURANCE (S) PL		Ref : CS/AGI19018197/Ktd3n2		
(BUDGET DIRECT INSURANCE) 190 CLEMENCEAU AVENUE #03-01 SINGAPORE SHOPPING CENTRESINGAPORE 239924		Date : 05-11-2019		
		Code : AGI		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SKV 1470Z	Veh. Inspected	SJE 841U	
Policy No.		Coverage (\$)	0.00	
Claim No.	C10004271/LA	Excess (\$)	0.00	
Assign From	IVY RATILLA	Assign Date	15/10/2019	
2. Vehicle Particulars & Condition				
Make & Model	MERCEDES E250 (A)	c.c	1991	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	WDD2120362B261070	Colour	METALLIC BLACK	
Odometer	60079	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	245/40 R18	PIRELLI	8 mm	
L/H Front Tyre	245/40 R18	PIRELLI	8 mm	
R/H Rear Tyre	265/35 R18	PIRELLI	8 mm	
L/H Rear Tyre	265/35 R18	PIRELLI	8 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	12/10/2019	Inspection Date	15/10/2019	
Survey held at	BLK 5038 AMK IND PARK 2 #01-405			
Repairer	MASSIVE TRADING & AUTO			
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. SJE 841U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR O/S TYRE RIM	DENTED / CUT	750.00	750.00
	LESS 10% DISCOUNT		-	-75.00
			750.00	675.00
	LABOUR			
	REMOVE/RENEW THE ABOVE ACCIDENT PARTS INCLUDING KNOCKING,WELDING & CUTTING.		800.00	400.00
	TO PUTTY AND SPRAY PAINT.		800.00	600.00
	CHECK & RECONNECT WIRING.	NOT NECESSARY	40.00	-
	TO RESPRAY ANTI-RUST PROOFING TREATMENT.	NOT NECESSARY	80.00	-
			1,720.00	1,000.00
	GRAND TOTAL		2,470.00	1,675.00
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			1,500.00

Report Ref No. CS/AGI19018197/Ktd3n2

KONG SENG CHEONG

Licensed Appraiser

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