

01/07/2002

ASS. REC. BY:

REF: CS/CTI 19018323/Ey f3

Special Instruction:

Supervisor:

Steve

ASSIGNMENT (Office)

From (Person): Tan Kah Loong

of

CTI

Date/Time: 17.10.19 10.32am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: PC 5554E

Insured:

GBG 9913X Yong Shun

at Workshop m/s Lexbuild Inter national

Tel:

64563533 / 9099 6574

of 2 Woodland sector / #05-12

Policy No: DMCRSIR 3097 2918011

Claim No: SNM K1004 881002

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 10.10.2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 17.10.19 11.01a.m

Person Contacted:

Yong Shun

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

PC 5554E - CC61 AIG12020642/RK K3W2 RQA - 11/10/2012

GBG 9913X - X

ASS. REC. BY:

Steve

REF:

CT1

ASSIGNMENT

From: _____ Date: 21. 10. 2019

Estimated Cost: _____

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

To Inspect Vehicle No: PC5554 E

at Workshop m/s Lexbuild

of 2 woodland sector 1 #105-12

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: 11.00am owner nearby

(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: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

mp

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: PC5554E

Yr Regn: 10/9/15

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

Truck / Trailer or

Make: King Long

XMR 6922 K

C.C. 6690

Colour: Multi-colour

A/C: Insured / Std / NI / NA

Sp. Reading: 164387

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LA6R1DS<4EB103121

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 255/70 R22.5

R: L

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

TOYO / YOKO or

Front

Rear

R/Bal. 5

mm

R/Bal. 5

mm

L/Bal. 5

mm

L/Bal. 5

mm

D.O.A. 10/10/19

D.O.I. 21/10/19

Survey held at Lex build

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

MV-1008

Pending Estimate (Car Not In)

L/S \$1750/- (Red \$3304.00, 65%)

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

5/6/20 Typist

Rep. Format:

Lump Sum

L.S. / C.

\$1750/-

Days Of Repair: 3

Resurvey No. of Trip: 2

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Invs (\$)

☐

: Weekend (\$)

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	16 Oct 2019		17 Oct 2019 10:32 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS									
Insured:				[Created by insurer]					
Main Claimant:	J SQUARE EXPRESS PTE LTD, Co. Reg. No.: 201405385Z								
Vehicle Reg. No.:	PC5554E	Date of Loss:	10/10/2019 11:00 - :59						
Claim Type:	TP / SNM19D204881C02	Policy/Cover Note No.:	DMCVSN30972918011						
Vehicle Reg. No. (Insured):	GBG9913X	Policy No. (Claimant):	SD19V03929/VBS/R04						
		Excess:	S\$500.00						
Repairer:	LexBuild International Pte Ltd (HQ) 2 Woodlands Sector 1 (Woodlands Spectrum 1), #05-12, 738068 Woodlands - Tel: 6456 3533								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Tan Kah Leong - 63896193]								
Claimant's Insurer:	Liberty Insurance Pte Ltd (HQ) - Tel: (65) 6221 8611								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 29/10/2019]								
ASSOCIATED MAIL RECEIVED									
There are no mail for this case.				View All Compose Case Mail					
ALL ASSOCIATED TASKS									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Nivitha (LKK Auto)

From: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>
Sent: Thursday, 17 October 2019 10:25 AM
To: Shirley Lim; assignments
Cc: LBI Claims
Subject: RE: OUR REF: SNM19D204881-GBG9913X-TKL & YOUR REF: AC19/077 -Accident claims for PC5554E & GBG9913X - To Conduct PRS

WITHOUT PREJUDICE

Dear Shirley,

We refer to your email dated 17.10.2019.

We will be assigning M/s LKK Auto Consultants to survey your client's vehicle on a without prejudice basis.

Aside to LKK,

Please refer to the email below & proceed to survey the third party vehicle.

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: Shirley Lim [mailto:shirleylim@lexbuild.com]
Sent: Thursday, October 17, 2019 9:16 AM
To: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>; LBI Claims <claims@lexbuild.com>
Subject: RE: OUR REF: SNM19D204881-GBG9913X-TKL & YOUR REF: AC19/077 -Accident claims for PC5554E & GBG9913X - To Conduct PRS

Hi Kah Leong,

We will select surveyor Mr. Kelvin Ang.

Thank you.

Best Regards,

Shirley Lim
Operation Admin Executive
Mobile : +65 9615 8280
Email : shirleylim@lexbuild.com

From: Tan Kah Leong [<mailto:KahLeong.Tan@sg.cntaiping.com>]

Sent: Wednesday, 16 October, 2019 12:13 PM

To: LBI Claims <claims@lexbuild.com>; Shirley Lim <shirleylim@lexbuild.com>

Subject: RE: OUR REF: SNM19D204881-GBG9913X-TKL & YOUR REF: AC19/077 -Accident claims for PC5554E & GBG9913X - To Conduct PRS

Without Prejudice

Dear Shirley,

Please see attached and let us know if you agree with SJE.

Thank you.

Regards

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: Claims Dept of CTI

Sent: Wednesday, October 16, 2019 11:59 AM

To: Tan Kah Leong <KahLeong.Tan@sg.cntaiping.com>; claims@lexbuild.com; shirleylim@lexbuild.com

Subject: OUR REF: SNM19D204881-GBG9913X-TKL & YOUR REF: AC19/077 -Accident claims for PC5554E & GBG9913X - To Conduct PRS

Dear Kah Leong

Please conduct PRS - PC5554E –soonest possible.

File with officer in charge –Tan Kah Leong –did:6389 6193

Regards,

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

T: (65) 63896116 | F: (65) 62247175

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG

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From: Shirley Lim [<mailto:shirleylim@lexbuild.com>]

Sent: Wednesday, 16 October, 2019 11:29 AM

To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Cc: LBI Claims <claims@lexbuild.com>

Subject: Accident claims for PC5554E & GBG9913X

Good afternoon Sir/Mdm,

Attached please find the documents for the above case, our client is filing for a third party claim against your insurer **GBG9913X**

- 1) Accident Report
- 2) Notice of Accident (AC19/077)
- 3) Authorization to Act

Please contact us to arrange for survey of the above vehicle

Thank you.

Best Regards,

Shirley Lim

Operation Admin Executive

Mobile : +65 9615 8280

Email : shirleylim@lexbuild.com


LexBuildTM
LexBuild International Pte Ltd
2 Woodlands Sector 1
#05-12 (Woodlands Spectrum 1)
Singapore 738068
Tel : +65 6456 3533
Fax : +65 6456 3353
Website : www.LexBuild.com
a new train of thoughts



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AC19/077

MLTM19134795-01 / Lim Tan Motor Pte Ltd - HQ
 ENTRY DATE & TIME: 11/10/2019 10:43
 SUBMITTED BY: Mandy Lim Li Choo (Lin Lizhi)

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	11/10/2019 10:43
Date Of Accident	10/10/2019 11:55
Exact Location Of Accident	CLARKE QUAY TOWARDS RIVER VALLEY ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5554E
Insured/Policyholder	
Name Of Registered Owner	J SQUARE EXPRESS PTE LTD
Co Reg No	201405385Z
Email Address	COACH@SEAWHEEL.COM.SG
Mobile Phone No	(LOCAL) +65-97285557
Alternative Phone No	OFFICE-97285557

Vehicle Particulars

Manufacturer	KING LONG
Model	XMQ6902K-6.7 D (A)
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	BUS

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD19V03929/VBS/R04
Cover Note Number	

Driver

Name of Driver	GOH AH HUAT
NRIC No	S1170528F
Date Of Birth	07/10/1956
Occupation	OUTDOOR
Date Of Driving Pass	10/05/1977
Driving Experience	42 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98206879
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 123 HOUGANG AVE 1 #07-1414
Postcode	530123
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	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?	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

VEH A AND VEH B BOTH TURNING OUT FROM CLARKE QUAY TOWARDS RIVER VALLEY ROAD. WHILE TURNING, VEH B ENCROACHED INTO VEH A'S LANE AND THUS IT'S FRONT RIGHT COLLIDED ONTO VEH A'S LEFT SIDE. NOBODY INJURY.

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	GBG9913X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ZHANG HE
NRIC/Passport Number	G5266160P
Contact Number	97739611
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

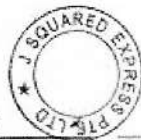
IMPORTANT NOTICE


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:

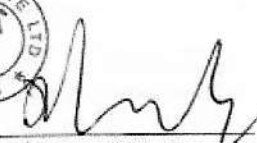
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 Personnel's Signature
Name:
NRIC/FIN No.:

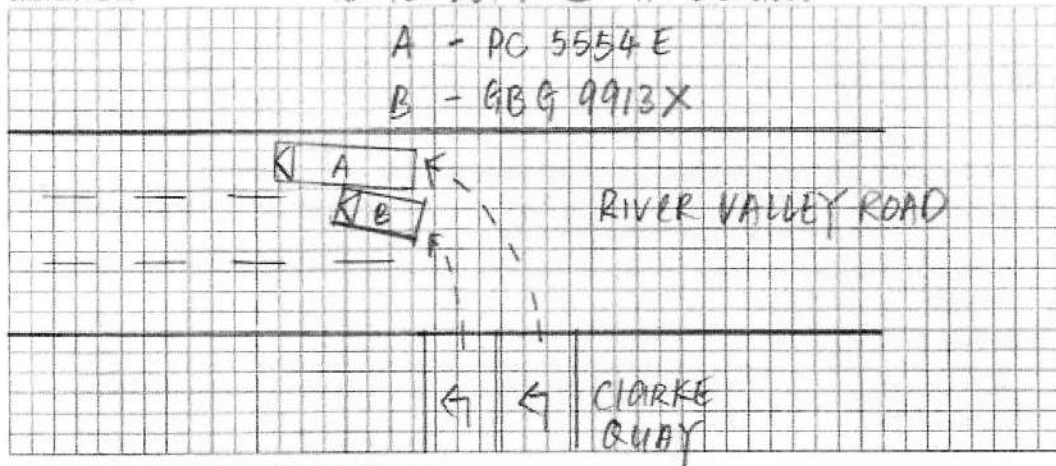
Sketch Plan #2

SKETCH PLAN

10.10.2019 @ 11.55 am

A - PG 5554 E

B - GBB 9913 X

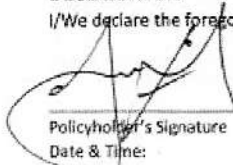


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

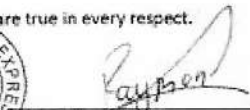
veh A and veh B both turning out from clark Quay towards River Valley Rd. while turning, veh B encroached into veh A's lane and there it's front right collided onto veh A's left side. Nobody injury.

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.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	385Z
Vehicle Details	
Vehicle No.:	PC5554E
Vehicle to be Exported:	No
Intended Deregistration Date:	21 Oct 2019
Vehicle Make:	KING LONG
Vehicle Model:	XMQ6902K A
Primary Colour:	Multicolor
Manufacturing Year:	2014
Engine No.:	ISB67E522522003479
Chassis No.:	LA6R1DSC4EB103121
Maximum Power Output:	-
Open Market Value:	\$107,382.00
Original Registration Date:	10 Sep 2015
First Registration Date:	10 Sep 2015
Transfer Count:	0
Actual ARF Paid:	\$5,370.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	09 Sep 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$6,448.00
COE Rebate Amount:	\$3,794.00
Total Rebate Amount:	\$3,794.00

The information contained herein is correct as at 21 Oct 2019

OK

18th October 2019

China Taiping Insurance (S) Pte Ltd
3 Anson Rd,
#16-00 Springleaf Tower
Singapore 079909

Attention: Motor Claims Department

Dear Sir / Madam,

We are pleased to submit herein, our quotation for your consideration.

We are pleased to submit herein, our quotation for Accident Bus PC5554E - KingLong 6902K with GBG9913X on 10/10/2019

S/n	Description	Qty		Unit Price	Total Price
1	To supply panel lock	3	pcs	\$35.00	\$ 105.00
2	To supply marker lamp	3	pcs	\$28.00	\$ 84.00
3	To supply compartment door handle / CUT	1	pcs	\$75.00	\$ 75.00
4	To supply Tyer Rim cover / CUT	1	set	\$1,400.00	\$ 1,400.00
5	To supply road lamp / CUT	1	pcs	\$90.00	\$ 90.00
6	Company sticker / MC	1	pcs	\$100.00	\$ 100.00
7	To supply skilled labour to repair, putty, grinding and spray paint LHS 2nd big luggage compartment panel, rear LHS wheelarc panel, LHS 2nd last bodypanel with cover, LHS last grill panel (3- color code) 4 days	4	lot	\$800.00	\$ 3,200.00
Total amount in Singapore Dollar					\$ 5,054.00
GST 7%					\$ 353.78
Total					\$ 5,407.78

Terms and Conditions:

Validity : 30 days

Payment Term : COD

Delivery : 4 working day upon confirmamtion

Remarks : Additional jobs upon finding will quote separately

Yours faithfully,

Shirley Lim

Shirley Lim
hp : 96158280

LexBuild International Pte. Ltd.

2 Woodlands Sector 1, #05-12 (Woodlands Spectrum 1), Singapore 738068.

Tel: (65) 6456 3533, Fax: (65) 6456 3353

Website: www.LexBuild.com | Email: claims@LexBuild.com

畅通国际

LexBuild™

ROC / CR / GST Reg No: 200004370R

Quotation No.: Q19-OPS-1477

ML MIC
3 dy
L/S
My AL sy

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: