

INS. CASE OWNER:

CC3/CTI19019350/K1ka3

LKK:
IDAC:

ASSIGNMENT

Surveyor:

KALVIN

DOI: 31/10/2019

Date / Time: 31/10/2019

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. SGG 5257Z

Claim No.:

Name of Insured:

Koh Hong Eng

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A: 27/10/2019 01:00

Place of Accident: SENTOSA GATEWAY

Is driver the owner?

(YES) / NO

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L) (YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: % Final ? Yes / No

SHC 8536H



INSRS:

WSP: CDGE LOYANG

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time	STAGE	DATE / PIC
SHC 8536H - CC3/AIG16010362/Ghb3q2; DOA: 31.5.16	Non-Reporting ltr (1st):	
- CS/FCI15004009/Avbq2; DOA: 4.3.15	Non-Reporting ltr (2nd):	
SGG 5257Z - NA/INC12009212/s2; DOA: 08.05.12	Non-Reporting ltr (Final):	
RECD TP 1400 31/10/2019 THAT BOTH PARTY CHARGED INTO SHC 8536H.	Notification ltr (if non-pickup):	
	Call OI: 7/11/2019	
	After call ltr to OI:	
	Documentation Check List: Handler Typist	
	Notification ltr (if non-pickup)	☐
	After call ltr to OI:	☒
	Authorisation To Act:	☒
	Release Voucher:	☒
	Final Repair Bill:	☒
	Car Rental Invoice:	☒
	Towing Invoice:	☐
	LTA / GIA:	☒
	Medical Bill:	☐
	PIR:	☐
	Mandate/Reject Instruction:	☐
	LOD:	☒
	Payment Breakdown Form:	☐
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos: ☒
		Others: ☐
FINALIZATION Date/Time:	Confirm with:	Confirm by: <i>Amik</i>
Repair Cost: <i>SS 1,289.40</i>	(Agreed / Assessed) BOLA S/N No.: <i>19</i>	Email ☒ Call ☐
Reduction: <i>43 %</i>		
FINAL SETTLEMENT Date/Time: 19/10/2019	Confirm with: OFFICIAL	Email ☒ Call ☐
Final Liability: <i>100 %</i>	(Agreed / Assessed) BOLA S/N No.: <i>19</i>	If NO or B 28, Ass. Lia:
Repair Cost: <i>SS 1,289.40</i>		
Loss of Rental (LOR): <i>SS 116.95</i>	(Agreed / Assessed) BOLA S/N No.: <i>19</i>	
Loss of Use (LOU): <i>SS -</i>	(5 x 2 days)	
Loss of Income (LOI): <i>SS 50.00</i>	(550 x 2 days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒	(Tick only one)	
GIA/LTA Search: <i>SS 7.99</i>		
Medical: <i>SS -</i>		
Disbursement: <i>SS -</i>	(e.g. Tow/ Independent)	
Legal Cost: <i>SS -</i>		
Total: <i>SS 1,426.39</i>	Global Sum SS: <i>230</i>	
FINAL PAYMENT Date/Time: 19/10/2019	Confirm with: OFFICIAL	Email ☒ Call ☐
Payee 1: <i>SS 1,426.39</i>	Name 1: <i>CONFIDENTIAL ENGINEERING PTE LTD</i>	
Payee 2: (Strike if N.A.) <i>SS</i>	Name 2:	
Payee 3: (Strike if N.A.) <i>SS</i>	Name 3:	

COPY SENT
19/10/2019

Surveyor: Kalvin

REF: *

19380/1916

ASSIGNMENT

From: _____ Date: _____

Estimate Cost: _____

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

To Inspected 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.

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHC8536H Yr Regt: Dec 2015

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

Truck / Trailer or

Make: Hyundai 240 c.c. 1685Colour: Blue A/C: Insured / Std / Nil / NASp. Reading: 45 6328 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: KMH6841444408104Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD Rim orTyre Size: F: 205 / 60R16

R: _____

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

TOYO / YOKO or

Durature

Front

Rear

R/Bal. 7 mm R/Bal. 7 mmL/Bal. 7 mm L/Bal. 7 mmD.O.A. 22/11/11 D.O.I. 31/10/11Survey held at C/DHE (Loyang)

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

o/s Front

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

Date / Time	Action / Instruction
	40% + 1200 (USD: + 901.84 45%)

Date/Time, File Pass to?

☐ : Prel. Report

Days Of Repair: _____

1) _____

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2) _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)

Survey Fee:

Transportation:

S - RS, SI

Photos

Remarks:



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: TBA
Our ref: CC3/CTI19019350/K1ea3

Date: 04.11.2019

The Motor Claims Department
M/s CHINA TAIPING INSURANCE (S) PTE LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHC 8536H

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 31/10/2019 at the premises of M/s ComfortDelGro Engineering Pte Ltd (Loyang) and have the following to report:-

Workshop Estimate Amount	: S\$	2,357.84
Revised Estimate Amount	: S\$	1,200.00
"Check" Items Amount	: S\$	-
Total (Including Check Items)	: S\$	1,200.00

Market Value	: S\$	-	(est.)
LTA Reimbursement Value	: S\$	-	(est.)
Nett Value	: S\$	-	(est.)

Description of Damage:

The vehicle sustained damages at the
O/S Front portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

A member of COMFORTDELGRO

Date/Time: 01.11.2019 09:02 Page : 1

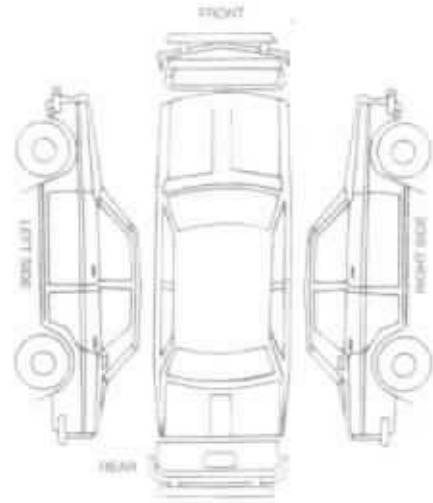
Team:	ARC Repair TP(CLS0)1	JOB CARD	Sales Order:	JC NO.: 305345604
TOMER		REGN NO.: SHC8536H	MILEAGE	
MS	COMFORT TRANSPORTATION PTE LTD	MAKE: HYUNDAI	FUEL	
TOMER NO.	7010045	MODEL	DATE/TIME IN	
RESS	383 SIN MING DRIVE	I-40	31.10.2019 17:31	
	Singapore SINGAPORE 575717	YR OF MANU	TARGET DATE	
(R)	65508755	10.12.2015		
(P)		CHASSIS CODE	COMPLETION DATE/TIME	
		RMHLB41UMGU081001		
COUNT CARD NO.				

Kalvin - chine

JOB DESCRIPTION

Accident Date: 27.10.2019
NATURE: 3P 27.10.2019

S/NO LABOR CODE DESCRIPTION



CKED & PASSED OUT BY:

SERVICE ADVISOR		CUSTOMER'S SIGNATURE	
Acknowledgement Slip		Exit Pass	
No.:	SHC8536H LIMITS	Vehicle No.:	SHC8536H
Signature/Date		Name of Service Advisor	Date
Returned to Service Reception upon collection		To be kept by Security Guard	

China Taiping CL(S) TS

LKK-kalvin.

DATE 01/11/19

LKK-kalvin.

_____ must hence notify
_____ of the following:

- _____ shall give spray painting
- _____ damaged part(s) during resurvey
- _____ measure turned to confirmation
- Total paint survey is on a "Without Prejudice" basis
- No legal modification is allowed
- Supplementary part(s) must be resurveyed and
is subject to final approval from Insurance Council

Acknowledged by Reparer
Signature: _____
Date: _____

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE*

China Taiping CLS) TS

VEHICLE NO : SHC8536H

MAKE :

LKK - kalvin.

DATE

01/11/19

MODEL : HYUNDAI i40

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Front Bumper Cover photo at			\$1,052.20
	Front Fender (RH) X regu			\$663.00
	Front Wheel Cap (RH) X su			\$107.10
	SUB TOTAL			\$1,822.30
	LESS 20%			\$364.46
	DISCOUNTED TOTAL			\$1,457.84
	Labour Charge			
	Panel Beating			280 \$300.00
	Spray Painting Charge			\$200.00 400
	Tuff Kote			\$40.00 X 10
	Tow Fee			\$60.00 X 10
	TOTAL LABOUR			\$650.00
	ESTIMATE TOTAL			\$2,107.84
<i>Kalvin 16/11/19</i> <i>31/10/19 1520</i> <i>2071</i> <i>4/5</i> <i>After Repair photo</i> LKK Auto Consultant the Registrar of the Motor Vehicle - To survey damaged parts and painting - Parts prices are subject to commercial - Third party survey is on a "without prejudice" basis - No illegal modification is allowed - Supplementary item(s) must be insured and is subject to final approval from insurance company Acknowledged by Repairer Signature: Date:				
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.				



JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: 28/10/19	Time Received: 0125	3. Vehicle Type: ☐ Private ☒ Taxi (CTPL/CCPL) ☐ Fleet ☐ STK (Boon Lay)	4. Type of Towing: ☒ Normal Tow ☐ King Dolly ☐ Flat Bed ☐ Crane-up
2. ☐ New Name of Customer: Chng Teck Hong	☐ SPARK Kakis Contact No.: 91662080	5. Nature of Service: ☐ Jumpstart ☐ Recovery ☐ Change Tyre / Battery	6. Parts Replaced/Remarks:
Vehicle No.: SHC8536H	Make / Model / Colour: I40		
Engine No.:			

7. Location: Woodlands Ave 5	8. Vehicle Tow - In Workshop: ☐ Smoky Exhaust ☐ Overheating ☐ Brake Faulty ☐ Starting Problem ☒ Accident ☐ Return Taxi ☐ Wheel Jammed ☐ Steering Faulty ☐ Alternator Faulty ☐ Loss Power ☐ Engine Stalled
9. Preferred Workshop: ☐ Braddell ☐ Sin Ming ☐ Senoko ☐ Others:	☒ Loyang ☐ Sungei Kadut ☐ Komoco (UBI / Leng Kee) ☐ Pandan ☐ Ubi ☐ Cycle & Carriage (PD)

10. Odometer Reading:	11. Radio / CD Player: ☐ OK ☐ Faulty ☐ Not tested
Fuel Level: F 1/4 1/2 3/4 E	

Job Attended

2. Tow Truck / Recovery Van: ☐ VRS ☐ QA ☐ GAO ☒ TZ ☐ YISHUN TOWING ☐ OTHERS	 #: Cracked X: Dented /: Scratched O: Missing Signature of Customer:
Name of Driver: Bay	
Vehicle No.: YN7337H	
Time Dispatch: 0125	
Time of Arrival: 0200	
Time Completed: 0245	

Cash Invoice Details (if applicable)

1. Cash Invoice No.:

Customer Acknowledgement

I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.
I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

Date: 28/10/19	Time: 0200	Signature of Customer:
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WORKSHOP

Our Job Ref No : 305345604

Date : 04/11/19

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN ANG

Vehicle Reg No. : SHC8536H

Date of Accident : 27-Oct-19

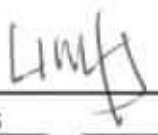
The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: CHINA TAIPING --- SGG5257Z
2. The finalized amount shall be:
 - (a) Spare Parts after List discount
 - (b) Labour Charges
 - Total for Part-By-Part Repair Cost**
 - (c.) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: 20% \$1,200.00
Final Lumpsum Repair cost \$1,200.00

3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and
finalized amountSignature : 

Name : LIM T S

Tel : 62148398

Fax : 65468156

Signature : 

Name : KALVIN

Date : 5/11/19

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees	-----			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

Mei Kwan (LKKAUTO)

From: Tang Hock Lye <hocklye.tang@sg.cntaiping.com>
Sent: Tuesday, 5 November, 2019 5:05 PM
To: Claims Dept of CTI; Mei Kwan (LKKAUTO); Asher Sng (LKKAUTO); Jeffrey Tay
Subject: RE: OUR REF: SNM19D205113-SGG5257Z-CML- Accident Involving SGG5257Z (OI : CTI - TBA) and SHC8536H (TP : LKK REF - CC3/CTI19019350/K1ka3) on 27/10/2019
Attachments: SGG5257Z- SAS Report.pdf
Categories: HMK

Dear Mei Kwan

Please refer to attached our insured SAS report.

Thank you.

Best Regards
Ben Tang
Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #XX-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6175 | F: (65) 6222 1033

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

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From: Claims Dept of CTI
Sent: Tuesday, November 5, 2019 1:14 PM
To: Mei Kwan (LKKAUTO) <Meikwan@lkkauto.com>; Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>; Tang Hock Lye <hocklye.tang@sg.cntaiping.com>; Jeffrey Tay <Jeffrey.Tay@sg.cntaiping.com>
Subject: OUR REF: SNM19D205113-SGG5257Z-CML- Accident Involving SGG5257Z (OI : CTI - TBA) and SHC8536H (TP : LKK REF - CC3/CTI19019350/K1ka3) on 27/10/2019

Dear Ben,

Please revert LKK.

Note: officer in charge – Ben Tang

Thank you

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 63896116 | F: (65) 62247175



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 : CC3/CTI19019350/K1ea3n2	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 19-02-2020	
		Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SGG 5257Z	Veh. Inspected	SHC 8536H
Policy No.	DMPCSN1224561806	Coverage (\$)	0.00
Claim No.	SNM19D205113	Excess (\$)	0.00
Assign From		Assign Date	31/10/2019
2. Vehicle Particulars & Condition			
Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	KMHLB41UMGU081001	Colour	BLUE
Odometer	456328	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/60 R16	DURATURN	7 mm
L/H Front Tyre	205/60 R16	DURATURN	7 mm
R/H Rear Tyre	205/60 R16	DURATURN	7 mm
L/H Rear Tyre	205/60 R16	DURATURN	7 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE O/S FRONT PORTION. DAMAGES SEE DETAILS.			
5. General Information			
Accident Date	27/10/2019	Inspection Date	31/10/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		
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:		2 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. SHC 8536H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER COVER	CUT	1,052.20	1,052.20
1	FRONT FENDER (RH)	TO REPAIR SEE LABOUR	663.00	-
1	FRONT WHEEL CAP (RH)	SERVICEABLE	107.10	-
	LESS 20% DISCOUNT		-364.46	-210.44
			1,457.84	841.76
LABOUR				
	PANEL BEATING, INCLUSIVE OF THE REPAIR OF FRONT FENDER (RH).		300.00	280.00
	SPRAY PAINTING CHARGE.		500.00	400.00
	TUFF KOTE.	NOT NECESSARY	40.00	-
	TOW FEE.	NOT NECESSARY	60.00	-
			900.00	680.00
GRAND TOTAL			2,357.84	1,521.76
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,200.00

Report Ref No. CC3/CT19019350/K1ea3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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