

22/03/2002

ASS. REC. BY:

REF CS31 LPE 19019520 / RLC f3^{sz}

Special Instruction:

Surveyor: Rosa

ASSIGNMENT (Office)

From (Person): Gerald Bohof LP^cDate/Time: 5.11.19 12:29pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: GY 4460PInsured: XE 1865Dat Workshop m/s AAK Logistics Services
of 4 Penjuru closeTel: 6 6650190 / 66776227

Policy No:

Claim No: 191191191 VC06/022587

Sum Insured:

Excess:

Make of Veh:
(Client's Record)D.O.A. 29/10/2019

CA / REV / REP. / REV 24 HRS

mp³

H.O.D. Endorsement:

Date/Time: 5.11.19 1:43p.mPerson Contacted: Pet JuanVehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	<u>GY 4460P - X</u>
	<u>XE 1865D - X</u>

ASS. REC. BY:

REF: LPC

388

COE: 2024 / July

ASSIGNMENT

From:

Date:

6.11.2019

Veh No:

G4 4460P

Yr Regn: 2005 / APR

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

Truck / Trailer or

Estimated Cost:

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

To Inspect Vehicle No:

G4 4460P

at Workshop m/s

AAK Logistics Services

of 4 Penjuru Close

Insured:

Policy No.

Claims No.

Sum Insured:

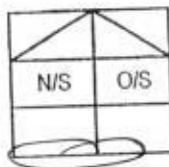
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

30K

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

Vehicle: IN / OUT

Date:

Person Contacted:

Make:

TOYOTA HILUX MANUAL

C.C

2494

Colour:

WHITE

A/C: Insured / Std / NI / NA

Sp. Reading

483457

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTFH502P300012688

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:

195R15C

R:

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

TOYO / YOKO or

G17

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

29/10/19

D.O.I.

06/11/19 3.02pm

Survey held at

AAK

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

RECEIVED 20 NOV 2019

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Report Formet:

PRG

Lump Sum / L.B.T. C

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Invs (\$)

☐

: Weekend (\$)

Survey Fee:

Transportation:

S + RS \$

Photos

Others

TOTAL

Nivitha (LKK Auto)

From: GERALD POH WEE BIN <geraldpoh@lonpac.com>
Sent: Tuesday, 5 November 2019 12:29 PM
To: assignments@lkkauto.com
Cc: MT_Claim_SG
Subject: FW: 2nd Notice to conduct Pre-Prepair Survey - Your Ref: 19/19/19/VC06/022587and our ref: GY4460P/AAK/jn/cl [External Confidential]
Attachments: 2nd PRS (reject) - 04.11.19.pdf

Lonpac External - Confidential

Our Ref:19/19/19/VC06/022587

Dear Nivitha,

Please see attached and proceed with the pre-repair survey.

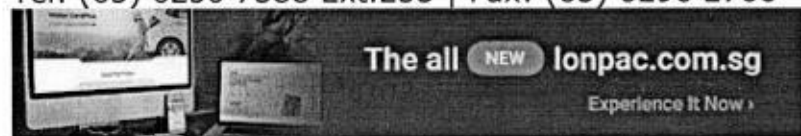
Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706



Lonpac External - Confidential data is for use by authorised external parties only.

From: Accident@kscgp.com [mailto:Accident@kscgp.com]
Sent: Monday, 4 November, 2019 5:35 PM
To: ONG LI LI; MT_Claim_SG
Subject: 2nd Notice to conduct Pre-Prepair Survey - Your Ref: 19/19/19/VC06/022587and our ref: GY4460P/AAK/jn/cl

Dear Li Li,

Please find enclosed our 2nd PRS for your attention.

Regards,

Calshie

for and on behalf of Mr Gurdeep Singh Sekhon

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0982 / Fax: 6538 3708

Email: accident@kscgp.com

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----- Original Message -----

From: ONG LI LI [mailto:llong@lonpac.com]
To: Accident@kscgp.com,mt_claim@lonpac.com
Sent: Mon, 4 Nov 2019 08:22:00 +0000
Subject:

Without Prejudice
Save as to Costs

Dear Sir/Mdm

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the following list to conduct the joint pre-repair survey as a single joint expert.

1	Kalvin Ang
2	Xing Guo Qiang
3	Mohamad Taufikh
4	Mohammed Rasul
5	Adrian Ling
6	Marcus Chua
7	Kenneth Kong
8	Bryan Ang
9	Nicholas Tey
10	Jackson Quek

Please let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

Regards,
Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse
Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

From: Accident@kscgp.com [mailto:Accident@kscgp.com]
Sent: Monday, 4 November 2019 3:47 PM
To: MT_Claim_SG
Subject: URGENT - 1st Notice to conduct Pre-Prepair Survey - Your insured's vehicle: XE 1865D and our ref: GY 4460P/AAK/jn/cl

Dear Sirs,

Please find enclosed herein the 1st Notice to conduct Pre-Repair Survey for your attention and necessary action.

Thank you.

Regards,

Calshie

for and on behalf of Mr Gurdeep Singh Sekhon

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0982/ Fax: 6538 3708

Email: accident@kscgp.com

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Your Ref : 19/19/19/VC06/022587
Our Ref : GY 4460P/AAK/jn/cl
Date : 4 November 2019

Fax : 6538 3708
Tel : 3152 0986
Email : accident@kscgp.com

LONPAC INSURANCE BHD

BY EMAIL ONLY

DATE OF ACCIDENT: 29 OCTOBER 2019

NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS

We refer to your email of even date.

Please be informed that our client is not agreeable to your proposed motor surveyors. Instead we propose you to choose a surveyor from our client's list of surveyors as appended below:-

S/no.	Name of Surveyor	Company Name
1.	Errol Tan	Pro Plus Automobile Engineers
2.	Dave Chang	Sincere Appraisal Services
3.	Lee Kok Weng	Lee Automobile Services

Please be informed that if we do not hear from you within 2 working days from the date hereof, we will assume, as per the Protocol, that you have no objections to our list of motor surveyors. You will be deemed to have agreed to any of the above motor surveyors as a "single joint expert". We will inform you who the "single joint expert" is in due course.

If you object to our client's list of motor surveyors, we will accordingly inform the client to instruct his choice of motor surveyor to conduct the pre-repair survey. Also, please let us know within 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle failing which our client will commence repairs thereafter without any further notice or reference to you. Please be informed that the said vehicle can be surveyed / inspected at:

Address : AAK Logistics Services Pte Ltd
4 Penjuru Close
Singapore 608574
Contact Person/Tel : Ms. Lee Pei Juan (6665 0190 / 9762 3134)

Yours faithfully,

FCL

6677627

Your Ref : 19/19/19/VC06/022587

Our Ref : GY 4460P/AAK/jn/cl

Date : 4 November 2019

Acknowledgement

This is to confirm that I _____ *[Full Name of Surveyor]* of
_____ *[Surveyor's Company]* have completed as follows:-

(a) Pre- Repair Survey/Inspection on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(b) Pre- Repair Survey/Inspection (during dismantling) on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(c) Re-inspection of new replacement part (part by part) on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(d) Post – Repair Survey/Inspection on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

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	31/10/2019 17:32
Date Of Accident	29/10/2019 13:00
Exact Location Of Accident	TPE EXPRESSWAY BEFORE EXIT 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY4460P
Insured/Policyholder	
Name Of Registered Owner	RHINO RENTAL PTE LTD
Co Reg No	201325388E
Email Address	INFO@RHINO RENTAL.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62548858

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-2.0 (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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	5107952193-000032
Cover Note Number	

Driver

Name of Driver	VASANTHAN ASHOKKUMAR
NRIC No	G6872388X
Date Of Birth	23/03/1977
Occupation	OUTDOOR
Date Of Driving Pass	25/04/2019
Driving Experience	0 YEAR AND 6 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90366563
Fax Number	
Contact Number	
Email Address	NOEMAIL

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.
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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:

31/10/19 @ 4.40pm



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

V. Ashok Kumar

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:	388E
Vehicle Details	
Vehicle No.:	GY4460P
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Nov 2019
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	White
Manufacturing Year:	2005
Engine No.:	2KD1242632
Chassis No.:	JTFHS02P300012688
Maximum Power Output:	-
Open Market Value:	\$23,804.00
Original Registration Date:	05 Apr 2005
First Registration Date:	05 Apr 2005
Transfer Count:	3
Actual ARF Paid:	\$1,191.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Jul 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$13,880.00
COE Rebate Amount:	\$13,133.00
Total Rebate Amount:	\$13,133.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 07 Nov 2019

OK

30,000
13,133

16,867


**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

PRE-REPAIR INSPECTION REPORT			
LONPAC INSURANCE BHD		Ref: CS3/LPC19019520/R1cf3s2	
300 BEACH ROAD		Date: 27-11-2019	
#17-04/07 THE CONCOURSESINGAPORE 199555		Code: LPC2	
<div style="text-align: right;">  </div>			
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	XE 1865D	Veh. Inspected	GY 4460P
Policy No.		Coverage (\$)	0.00
Claim No.	19/19/19/VC06/022587	Excess (\$)	0.00
Assign From	GERALD POH	Assign Date	05/11/2019
2. Vehicle Particulars & Condition			
Make & Model	TOYOTA HIACE MANUAL	c.c	2494
Engine No.	HIDDEN	Year of Reg.	2005
Chassis No.	JTFHS02P300012688	Colour	WHITE
Odometer	483457 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	195 R15C	GITI	6 mm
L/H Front Tyre	195 R15C	GITI	6 mm
R/H Rear Tyre	195 R15C	GITI	6 mm
L/H Rear Tyre	195 R15C	GITI	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.			
5. General Information			
Accident Date	29/10/2019	Inspect Date / Time	06/11/2019 (03:05 PM)
Survey held at	AAK LOGISTICS SERVICES PL 4 PENJURU CLOSE SINGAPORE 608574		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.			

Report Ref No. CS3/LPC19019520/R1cf3s2

Inspected By



MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor



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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