ASS. REC. BY:

REF: CS/INC 14097121 Avf3

Special Instruction:

Surveyor: Adwin

ASSIGNMENT (Office)

From (Person): Hazqiyah Sa Bantu Ibrahim of: INC

Date/Time: 1.11.19 10.03a.m

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: YN 1408G

Insured: GV 3920B

at Workshop m/s: Chin Ming Motors

Tel: 96820522

of: 1 Kaki Bukit Ave 6 #01-40/63

Policy No:

Claim No: MT/1069303-002

Sum Insured:

Excess:

Make of Veh:
(Client's Record)

D.O.A: 29.10.2019

CA / REV / REP. / REV 24 HRS "Imp"

R.O.D. Endorsement:

Date/Time: 1.11.19 11.00am

Person Contacted: melvin

Vehicle: IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	YN 1408G – NBA INC 16006101 4 PLA – 01104/2/1

ASS FED. BY: REF:

ASSIGNMENT

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD 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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: 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: YN1408G. Yr Regn: 2010 / May.

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

Truck / Trailer or

Make: Isuzu. NHR85 c.c. 2999.

Colour Blue. A/C: Insured / Std / NI / NA

Sp.Reading 253761. T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JAANHR85E9710048.

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: 195/75R16C. Goodride.

R: 185R14C Falken.

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

TOYO / YOKO or

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A		D.O.I.	07/11/19.

Survey held at Chin Meng.

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
	TP/NC.
	MV : 4K.
	PV : 1.1K
	Nett. 2.9K.

Date/Time, File Pass to? : Preli. Report

1) : Final Report

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.E.I. :

Days Of Repair:

Resurvey No. of Trip:

Add Fee: : Site Insp ($) : Interview ($) : Tech. Insp ($) : Weekend ($)

Survey Fee:	
Transportation:	$ + RS. $
Photos:	
Other:	
TOTAL	

Nivitha (LKK Auto)

From: Hazalysa Binte Ibrahim <hazalysa.ibrahim@income.com.sg>
Sent: Thursday, 7 November 2019 11:28 AM
To: Admin-D (LKKAuto); assignments; SUR
Cc: Hazalysa Binte Ibrahim
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear LKK,

Re-send with details.

Thank you.

Warmest Regards

Hazalysa Bte Ibrahim
Admin Assistant
Motor Department
www.income.com.sg

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]
Sent: Thursday, 7 November 2019 10:56 AM
To: Hazalysa Binte Ibrahim <hazalysa.ibrahim@income.com.sg>; assignments <assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear Hazalysa,

Noted with thanks.

Best Regards

G.NIVITHA
LKK Auto Consultants Pte Ltd
Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Hazalysa Binte Ibrahim [mailto:hazalysa.ibrahim@income.com.sg]
Sent: Thursday, 7 November 2019 10:54 AM
To: Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments <assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Hazalysa Binte Ibrahim <hazalysa.ibrahim@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear LKK,

Please cancel the survey.

Thank you.

5		MT/1069323-001	GBB8385C	RYDER AUTO PTE LTD	2 KAKI BUKIT AVE 2 #02-19 AUTOHUB @ KAKI BUKIT SINGAPOR 417921	june / 67418277	10:00-12:00			

Warmest Regards

Hazalysa Bte Ibrahim
Admin Assistant
Motor Department
www.income.com.sg

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]
Sent: Thursday, 7 November 2019 10:33 AM
To: Hazalysa Binte Ibrahim <hazalysa.ibrahim@income.com.sg>; assignments <assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>
Subject: RE: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear Sir/Madam,

Thank you for your assignment.

SDB2382B,SMM5544S car not in the workshop,repairer will arrange.

Best Regards,
Summer Lee | Admin
LKK Auto Consultants Pte Ltd
Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Hazalysa Binte Ibrahim <hazalysa.ibrahim@income.com.sg>
Sent: Thursday, 7 November, 2019 10:08 AM
To: Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments <assignments@lkkauto.com>
Cc: Thio Tse Kiat <tsekiat.thio@income.com.sg>; Hazalysa Binte Ibrahim <hazalysa.ibrahim@income.com.sg>
Subject: TP CASES FARMED OUT TO LKK ON 07/11/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
1	Jeff Lin	MT/1069832-002	SMG282L	ADVANCE AUTO GARAGE	23 KAKI BUKIT AVE 4 #04-01 AAS KAKI BUKIT CENTRE SINGAPORE 415933	Xavier Lim / 9007 9247		SMN6759C	04/11/19	
2	Azhari	MT/1070238-002	SMH8938X	DYNAMIC AUTOWORK PTE LTD	8 KAKI BUKIT AVENUE 4 #08-09 PREMIER @ KAKI BUKIT	Michelle / 9856 4815		SLR4461P	05/11/19	
3	Charlotte Chew	MT/1070066-002	SLZ9192R	MG SOLUTION PTE LTD	23 KAKI BUKIT AVENUE 4 #02-03B (SOUTH WING)	Ms Hong / 6243 1373		SMD5781X	05/11/19	
4	Quek Swee Keng	MT/1070309-001	SHC6019Y	PREMIER AUTOMOTIVE SERVICES PTE LTD	23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443	MR CHUA / 65446689		FBP5293E	05/11/19	
~~5~~		~~MT/1069323-001~~	~~GBB8385C~~	~~RYDER AUTO PTE LTD~~	~~2 KAKI BUKIT AVE 2 #02-19 AUTOHUB @ KAKI BUKIT SINGAPOR 417921~~	~~june - f 67418277~~	~~10:00-12:00~~			CANCEL THE SURVEY
6	Muhammad Airwan	MT/1062113-003	JTM5751	STAXX PTE LTD	1 KAKI BUKIT ROAD 1 #02-09 ENTERPRISE ONE SINGAPORE 415934	Chong / 6741 1480 / 9839 1819		YN7098C	11/09/19	
7	David Phua	MT/1070247-001	SKK6749X	CHEW MOTOR PTE LTD	1 KAKI BUKIT AVENUE 6 #01-11/41 AUTOBAY @ KAKI BUKIT	Sukyi Chong / 6747 9241		SLN6600M	05/11/19	

8	Charlotte Chew	MT/1069303-002	YN1408G	CHIN MENG MOTORS	1 KAKI BUKIT AVENUE 6 #01-40/63 AUTOBAY @ KAKI BUKIT SINGAPORE 417883	QUEK KIM SENG / 67474810	10:00-12:00	GY3920B	29/10/19	
9	Azhari	MT/1068654-002	SDB23828	SME MOTOR PTE. LTD.	1 KAKI BUKIT AVENUE 6 #02-15 AUTOBAY @ KAKI BUKIT SINGAPORE 417883	Jacob Ang / 6747 6106	10:00-12:00	SMG3816C	24/10/19	
10	Fiona Shen	MT/1069889-002	SMM5544S	SME MOTOR PTE. LTD.	1 KAKI BUKIT AVENUE 6 #02-15 AUTOBAY @ KAKI BUKIT SINGAPORE 417883	Jacob Ang / 6747 6106	10:00-12:00	SLT2636E	01/11/19	

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Warmest Regards

Hazalysa Bte Ibrahim
Admin Assistant
Motor Department
T +65 6430 7902
www.income.com.sg

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This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

MOMV191-16742 / Chin Meng Motors - HQ
ENTRY DATE & TIME: 05/11/2019 22:12
SUBMITTED BY: QUEK KIM SENG

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 05/11/2019 22:18

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	05/11/2019 22:12
Date Of Accident	29/10/2019 16:15
Exact Location Of Accident	SEMBAWANG RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN1408G
Insured/Policyholder	
Name Of Registered Owner	CERTIS CISCO AUXILIARY POLICE FORCE PTE LTD
Co Reg No	200900882K
Email Address	JEREMYYC_QUEK@CERTISSECURITY.COM
Mobile Phone No	
Alternative Phone No	OFFICE-68428849
Vehicle Particulars	
Manufacturer	ISUZU
Model	NHR85AUE4A-3.0 D (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	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	MOMVC000004054-02-000
Cover Note Number	
Driver	
Name of Driver	THINAGARAN MUNIANDY
Passport No/FIN	G6500022P
Date Of Birth	03/10/1990
Occupation	OUTDOOR
Date Of Driving Pass	15/05/2015
Driving Experience	4 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86228552
Fax Number	
Contact Number	
EMail Address	JEREMYYC_QUEK@CERTISSECURITY.COM

Address	C/O: 20 JALAN AFIFI
Postcode	409179
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 - HEAD TO REAR
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)	2
Passenger 1	NAME: : TEAM LEADER CVSO 47277 GENDER: : MALE

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

AS ATTACHED

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	GV3920B
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	JASNI BIN ALI
NRIC/Passport Number	S1747462F
Contact Number	97430160
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

1. [illegible]
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. [illegible] repudiate policy liability.
4. [illegible]
5. Any false reporting may be referred to the Police for investigation.
6. [illegible]
7. [illegible]

II. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

(i) [illegible] General Insurance Association of Singapore ("GIA") [illegible] "Personal Information" [illegible]

(i) [illegible]

(ii) [illegible]

(iii) [illegible]

(iv) [illegible]

(v) [illegible] "Purposes")

(ii) [illegible]

(iii) [illegible]

(iv) [illegible]

(v) [illegible]

(i) [illegible]

(ii) [illegible]

Policyholder's [illegible]
Date & Time

31/10/2019
Driver's Signature
[illegible] 1015hr
Date & Time

Reporting [illegible] Signature
Name
NRIC/Passport [illegible]EK KIM SENG [illegible]

SKETCH PLAN

A - YBM108G
B - GV3930B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As attached.

DECLARATION

31/10/2019

1015hr

QUEK KIM SENG
S8013338C

certis CISCO

INCIDENT REPORT FOR DUTY POST

Location of Duty Post	Type of Business (Bank/KINs/Embassy/Residence/Factory)	Date of Incident	Time of Incident	Weather Condition
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Person(s) Involved	Particulars of Witness(es)
[illegible]	TEAM LEADER, [illegible] 47277

Details of Incident
(Who, What, Where, When, Why, How and Other Essential Details)

On the above date [illegible] while [illegible] driving [illegible] vehicle [illegible] [illegible] Ave at the [illegible] waiting for vehicle oncoming from [illegible] Ave [illegible] one [illegible] vehicle [illegible] me behind my vehicle and [illegible] my [illegible] vehicle damaged. That's all

Reported by: (Rank/Svc No/Name)	Signature	Date	Time
[illegible]		[illegible]	[illegible]