

REF: CS3 / MSG 19011923 / 1143-1 Special Instruction

ASS REC BY: Tau Hui **ASSIGNMENT (Office)**

From (Person): Jasmin Lot Ung Kwe of MSLG Date/Time 5.11.19

Estimated Cost: Bill to

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

To Inspect Vehicle No: YN 499IT Insured: XE 3384 L

at Workshop m/s Miracle Works Tel: 9647568

of 48 Toh Guan Road East #04-126

Policy No: 29004165MLC Claim No: 598456

Sum Insured: Excess:

Make of Veh: D.O.A 30.6.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS ny H.O.D. Enforcement

Date/Time: 4.11.19 10:14 AM Person Contacted: Micelle Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	<u>Lump Sum \$5800/- (Cred: 1400, 19%)</u>
	<u>Resurvey: 8/11/2019</u>
	<u>18/11/2019 CR removed -</u>
	<u>Telamp L/R removed</u>

Do Not Finalise



4/59 5800
9 days

RECEIVED 10 NOV 2019

Tanpin

MS19

ASSIGNMENT

DATE: 4-7-2019

VEHICLE NO.

VEHICLE TYPE

VEHICLE MAKE

VEHICLE MODEL

VEHICLE REGISTRATION NO.

VEHICLE COLOR

VEHICLE TYPE

VEHICLE MAKE

VEHICLE MODEL

VEHICLE REGISTRATION NO.

VEHICLE COLOR

VEHICLE CONDITION

Damage: The vehicle commenced the repair at the time of inspection.

VEHICLE MAKE

VEHICLE MODEL

VEHICLE REGISTRATION NO.

VEHICLE COLOR

VEHICLE TYPE

VEHICLE MAKE

VEHICLE MODEL

VEHICLE REGISTRATION NO.

VEHICLE COLOR

VEHICLE TYPE

Damage: The vehicle commenced the repair at the time of inspection.

Estimated repair range \$4,500 - \$5,300

9/7/2019

VEHICLE NO. YN 4991T

VEHICLE TYPE M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Private Motor /

VEHICLE MAKE

VEHICLE MODEL

VEHICLE REGISTRATION NO.

VEHICLE COLOR

VEHICLE TYPE

VEHICLE MAKE

VEHICLE MODEL

VEHICLE REGISTRATION NO.

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VEHICLE MAKE

VEHICLE MODEL

VEHICLE REGISTRATION NO.

VEHICLE COLOR

VEHICLE TYPE

VEHICLE MAKE

Days Of Repair

Recovery No. of Trip

Add Log

Auto Trip (5)

Auto View (5)

Auto Line (5)

Weekend (5)

Carney Fee

Insurance

Other

Other

Other

Other

Other

Other

Other

Other

Other

120

11

131

Nivitha (LKK Auto)

From: Jasmine Lok Kheng Kwei <jasmine_lok@sg.msig-asia.com>
Sent: Tuesday, 5 November 2019 10:54 AM
To: assignments
Cc: SUR
Subject: Our ref: M598456 TP vehicle: YN4991T DOA: 28/06/2019

Hi all,

Please conduct paper survey.

Grants right in merimen.

Please let us have the report by 18/11/2019.

Your sincerely,

Jasmine Lok

Executive, Claims Services (Motor)

DID: +65 6594 2550 | F: +65 6225 7402 | jasmine_lok@sg.msig-asia.com



MSIG

MSIG Insurance (Singapore) Pte Ltd 16 Raffles Quay, #24-01 Hong Leong Building, Singapore 048581 | T: +65 6220 9644 | F: +65 6225 6371 | Co. Reg. No. 200412212G | msig.com.sg



A Member of **MS&AD** INSURANCE GROUP

CONFIDENTIALITY NOTICE

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INVOICE

TO : MCI CORP PTE LTD
C/O: MIRACLE WORKZ PTE LTD
48 TOH GUAN ROAD EAST,
#04-126 ENTERPRISE HUB,
SINGAPORE 608586

Invoice No.: 719/MW231
Date: 30-Jul-2019

PARTICULARS

Vehicle Registration No.: YN 4991 T
Date of Loss: 28-Jun-2019
Date of Assessment: 03-Jul-2019

SERVICES

FEES

1. Assessment with report Photographs -
Including films, developing, storage and Transport. \$450.00

TOTAL \$450.00

SINGAPORE DOLLARS FOUR HUNDRED FIFTY ONLY

We would appreciate your cheque crossed and made payable to:
"AEON AUTO CONSULTANTS LLP" with our invoice no. written on the back of the cheque.

AEON AUTO CONSULTANTS LLP



AEON AUTO CONSULTANTS LLP

50 Chin Swee Road #09-04 Thong Chai Building Singapore 169874
Telephone +65 97687958 Facsimile +65 68264112 Email amas@aeonac.com
Reg. No. LL0701273L (registered with limited liability)

AUTOMOBILE ASSESSMENT REPORT

TO: MCI CORP PTE LTD
C/O: MIRACLE WORKZ PTE LTD
48 TOH GUAN ROAD EAST,
#04-126 ENTERPRISE HUB,
SINGAPORE 608586

Our Reference: 719/MW231
Date: 30-Jul-2019

ASSESSMENT OF VEHICLE NO. YN 4991 T

DATE OF LOSS: 28-Jun-2019

We have carried out a physical assessment at MIRACLE WORKZ PTE LTD,
48 Toh Guan Road East, #04-126 Enterprise Hub, Singapore 608586, according to your instruction
on 03-Jul-2019 and are pleased to submit our report herewith.

1. VEHICLE PARTICULARS

Registration No.: YN 4991 T
Make & Model: MITSUBISHI CANTER FEB21ER3SDEB
Year of Registration: 2014
Engine Capacity: 2998
Chassis No.: FEB21EA00220
Engine No.: 4P10802840
Colour: WHITE
Mileage (km): 426121

2. VEHICLE CONDITION

Body Paint: GOOD
Steering: SERVICEABLE
Foot Brake: SERVICEABLE
Parking Brake: SERVICEABLE
Modification: NIL

3. TYRE PARTICULARS & CONDITION

Front
RH Make/Size/Thread: YOKOHAMA 195/85 R15 – 70%
LH Make/Size/Thread: YOKOHAMA 195/85 R15 – 70%

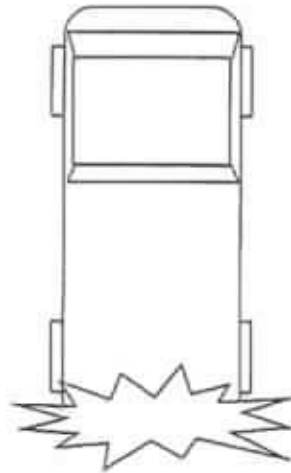
Rear
RH Make/Size/Thread: BRIDGESTONE 195/85 R15 – 70%
LH Make/Size/Thread: BRIDGESTONE 195/85 R15 – 70%

4. DESCRIPTION OF DAMAGE

At the time of the inspection, the vehicle sustained damages to the REAR portion.

5. REMARKS

Market Value:	Na
Salvage Value:	Na
Repair Limit:	Na
Estimated Amount:	\$29,254.20
Adjusted Amount:	\$10,893.20
Lump Sum:	\$7,200.00
Estimated Repair Days:	10 days



Pursuant to your instruction, we have **NOT AUTHORISED** repair.

The assessment was conducted on a "Without Prejudice" basis.

If we are not notified of anything to the contrary within **14 days** from the date hereof, this report shall be treated as correct.

Disclaimer

This report is intended for the exclusive use of the addressee solely in relation to the loss occurrence in which the assessed vehicle is involved. No liability or responsibility whatsoever shall be held by Aeon Auto Consultants LLP for any reliance on this report by any third party.

ASSESSMENT REPORT FOR VEHICLE NO. YN 4991 T

PARTS (LIST ITEMS)

Qty	Description	Condition	Workshop's Estimate	Our Assessment
1	REAR AXLE ASSY	Repair	11,313.18	-
2	REAR HALF SHAFT L/R	Repair	1,602.68	-
2	REAR HALF SHAFT BEARING L/R	Jammed	288.16	NLX 288.16
2	REAR HALF SHAFT OIL SEAL L/R	Necessary	75.79	NLX 75.79
2	REAR LEAF SPRING ASSY L/R	Repair	3,415.18	-
8	REAR LEAF SPRING ASSY U-BOLT L/R	Bent	858.56	858.56
2	REAR SHOCK ABSORBER L/R	Repair	503.40	-
2	REAR TAILLAMP L/R	Cracked	568.40	568.40
2	REAR TAILLAMP BRACKET L/R	Bent	253.76	253.76
1	ENGINE TIMING SIDE COVER	Bent	380.00	380.00
1	ENGINE HOSE	Cracked	80.00	80.00
			2140.72	
			19,339.11	2,504.67
Less 10% discount			1,933.91	250.47
Parts Total:			17,405.20	2,254.20
			1926.65	

ASSESSMENT REPORT FOR VEHICLE NO. YN 4991 T

SPECIAL NETT ITEMS

1	REAR WOODEN TAILGATE	Cracked	1,800.00	1,800.00	1500
1	REAR TAILGATE '23PAX' STICKER	Necessary	12.00	12.00	
1	REAR WOODEN TAILGATE '60KM/H' STICKER	Necessary	15.00	15.00	
4	REAR WOODEN TAILGATE HINGES	Bent	320.00	320.00	200
1	REAR WOODEN TAILGATE LOWER WOODEN PANEL	Cracked	680.00	680.00	480
1	REAR WOODEN STEP PANEL	Cracked	380.00	380.00	200
2	REAR TAILLAMP 'BRAKE' BULB L/R	Faulty	24.00	24.00	dis
2	REAR TAILLAMP 'REVERSE' BULB L/R	Faulty	24.00	24.00	dis
2	REAR TAILLAMP 'SIGNAL' BULB L/R	Faulty	24.00	24.00	dis
1	REAR BUMPER ASSY	Repair	1,600.00	-	
3	REAR CARGO CARRIER FRONT WOODEN FENCE PANEL - PCS	Cracked	600.00	600.00	450
1	REAR CARGO CARRIER METAL FRAME	Repair	1,200.00	-	
1	REAR CARGO CARRIER WOODEN CROSS MEMBER RH	Cracked	800.00	800.00	600
4	REAR WOODEN FLOOR PANEL - PCS	Cracked	1,200.00	1,200.00	800
Special Nett Total :			8,679.00	5,879.00	4329

LABOUR

S/N	Description	Workshop's Estimate	Our Assessment
1	To remove, reinstall electrical wiring harness, check lighting, resetting headlamp focussing and rewire.	150.00	130.00
2	To remove, reinstall top trim upholstery, cushion seat, trim garnish, trim liner carpet.	120.00	100.00
3	To reset system after repair works.	400.00	350.00
4	To re-spray painting on the change bodyparts, repair portion, and where consistent to the accident.	1,100.00	1,000.00
5	To provide labour, workmanship to change the above damaged bodyparts, repair, re-construct and re-align body structure, body alignments and damaged consistent to the accident.	1,300.00	1,100.00
6	To apply anti-rust chemical on repaired and replaced panel.	100.00	80.00
Labour Total :		3,170.00	2,760.00
TOTAL (PARTS & LABOUR) \$		29,254.20	10,893.20

The workshop has agreed to undertake the repair on a Lump Sum basis.

The final adjusted Lump Sum contract amount is

\$7,200.00

(SINGAPORE DOLLARS SEVEN THOUSAND TWO HUNDRED ONLY)



Amas Ong
Automobile Assessor

Our Ref : CY.10631.19.PD.MW(HW).wp(PT)

Your Ref : 598456

17 September 2019

BY HAND

MSIG Insurance (Singapore) Pte Ltd
(Motor Claims Department)
4Shenton Way #21-01
SGX Centre 2
Singapore 068807

Dear Sirs

**ROAD TRAFFIC ACCIDENT INVOLVING MOTOR VEHICLES YN 4991T & XE 3384L ON
28.06.2019 @ 1030HRS ALONG ADMIRALTY ROAD**

We are instructed by Mci Corp Pte Ltd to claim damages and losses against you in connection with the above-captioned road traffic accident which our client's vehicle YN 4991T was damaged by vehicle **XE 3384L** by your insured at the material time.

We are instructed that the said accident was caused by your insured's negligent driving and/or management of the vehicle no. **XE 3384L**. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

1)	Repair Costs	\$ 7,704.00
2)	Loss of use	\$ 1,800.00
3)	Survey Fee	\$ 450.00
4)	LTA fee	\$ 7.49
5)	Accident report fee	\$ 29.00
6)	Costs & Incidental	\$ 1,000.00
7)	GST on costs & Incidentals	\$ 70.00
		<u>\$11,060.49</u>

A copy each of the following supporting documents is enclosed:-

- 1) Accident report on our client's vehicle
- 2) Survey Report and survey invoice on YN 4991T with coloured photographs
- 3) Final repair bill
- 4) LTA search on **XE 3384L**

We had on **2 July 2019** notified your company of the above accident and a pre-repair inspection was carried out by your appointed surveyor.

Please let us know within the next seven (7) days upon receipt of this letter whether you intend to re-inspect our client's vehicle failing which the said vehicle will no longer be available for the same.


(CY.10631.19.PD.MW(HW).wp(PT))

Page 2

Please note that you should send to us an acknowledgment of receipt of this letter within fourteen(14) days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against your insured without further notice to you.

Please note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within eight (8) weeks of your receipt of this letter.

Yours faithfully



C. YOGARAJAH LLC
Enc

Cc **Ang Poh Eng**
c/o Progress Galvanizing Pte Ltd
19 Tuas Road
Singapore 638488
(Documents were enclosed to your insurers)



MIRACLE WORKZ PTE LTD

CO.REF: 201119510W
GST Registration No: 201119510W
NO 48 TOH GUAN ROAD EAST
#04-126 ENTERPRISE HUB
SINGAPORE 608586
DIRECT LINE: 96472568
TEL: 64683096
FAX: 65155434

Attn: Motor Claims Department
MSIG Insurance (Singapore) Pte Ltd
4 Shenton Way #21-01
SGX Centre 2
Singapore 068807

Final Bill: MW-335 - 4991
Date: 11/09/2019
Vehicle No: YN4991T
Make & Model: Mitsubishi Canter FEB21
Accident Date: 28/06/2019
Third Party Vehicle: XE3384L

S/N	DESCRIPTION	AMOUNT
1	REPAIR COST (LUMPSUM)	\$7,200.00

SUB TOTAL	\$7,200.00
7% GST TOTAL	\$504.00
GRAND TOTAL	<u>\$7,704.00</u>

Kindly make payment to : MIRACLE WORKZ PTE LTD


MIRACLE WORKZ PTE LTD

Enquire Vehicle & Owner Information (Vehicle No. XE3384L As At 28 Jun 2019 / 10:30:00)**Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: CYYN4991T.19.MW(HW)

Current Owner Details

Owner ID Type: Company

Owner ID: 199101791K

Owner Name: PROGRESS GALVANIZING PTE. LTD.

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 19

Registered Street Name: TUAS ROAD

Registered Unit No.: -

Registered Building Name: -

Registered Postal Code: 638488

Current Vehicle Details

Vehicle No.: XE3384L

Make Description/Model: MITSUBISHI / FUSO FV51SS3VDEA

Insurance Company Name: MSIG INSURANCE (SINGAPORE) PTE LTD

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	6231W
Vehicle Details	
Vehicle No.:	YN4991T
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Jul 2019
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEB21ER3SDEB
Primary Colour:	White
Manufacturing Year:	2013
Engine No.:	4P10B02840
Chassis No.:	FEB21EA00220
Maximum Power Output:	-
Open Market Value:	\$29,658.00
Original Registration Date:	25 Mar 2014
First Registration Date:	25 Mar 2014
Transfer Count:	0
Actual ARF Paid:	\$1,483.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	24 Mar 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$56,302.00
COE Rebate Amount:	\$26,546.00
Total Rebate Amount:	\$26,546.00

The information contained herein is correct as at 06 Jul 2019

OK

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 28/06/2019 13:37
Date Of Accident 28/06/2019 10:30
Exact Location Of Accident ADMIRALTY ROAD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN4991T
Insured/Policyholder
Name Of Registered Owner MCI CORP PTE LTD
Co Reg No 199506231W
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-84230053
Alternative Phone No OFFICE-98318554

Vehicle Particulars

Manufacturer TOYOTA
Model DYNA 150-3.0 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 NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number 5108392048
Cover Note Number

Driver

Name of Driver RAJA SATHISH
NRIC No G2199671N
Date Of Birth 14/02/1991
Occupation OUTDOOR
Date Of Driving Pass 24/01/2015
Driving Experience 4 YEARS AND 5 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-98318554
Fax Number
Contact Number OFFICE-98318554
EMail Address NOEMAIL

Address	30 BUKIT BATOK CRESCENT
Postcode	S658070
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?	
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

MY VEHICLE WAS STOPPED AT THE JUNCTION ADMIRALTY ROAD DUE TO "RED" LIGHT INFRONT, ALL OF A SUDDEN, A TRUCK CAME FROM BEHIND AND HIT ONTO THE REAR PORTION OF MY VEHICLE.

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	XE3384L
Vehicle Make/Model/Colour	TRUCK
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ANG POH ENG
NRIC/Passport Number	S1565244F
Contact Number	
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.

IDAC BUKIT BATOK (MAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

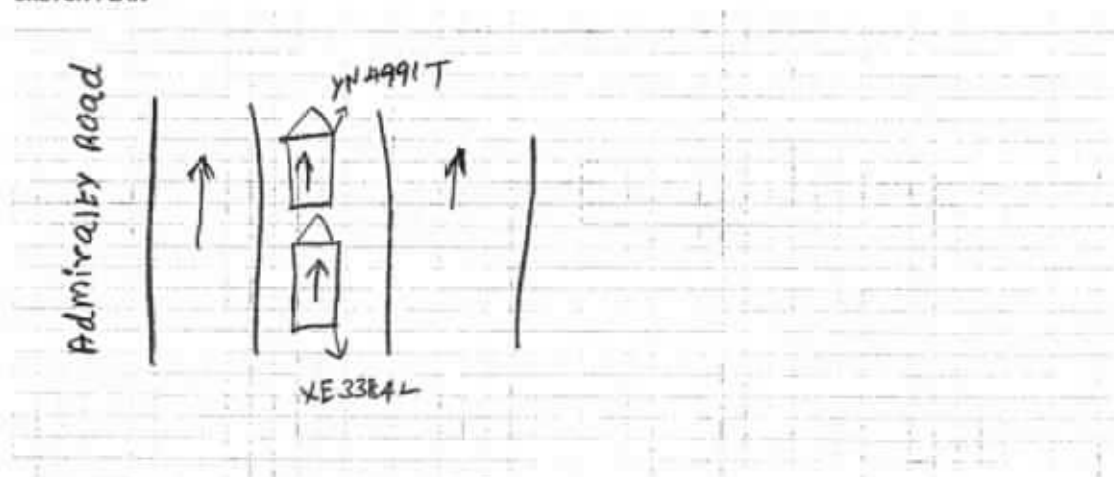


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

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



Policyholder's Signature
Date & Time:

[Signature]

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

IDAC BUKIT BATOK (IAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

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

Accident Photo



04/28/2019 20:18

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #13-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S63550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No: YN 4991T
Name (as shown in NRIC) : Kaya Sathish NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 28/06/2019 Time of Accident : _____
Place of Accident : _____
Insurance Company : NTHC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Change company information

28 JUN 2019

Policyholder / Driver's Signature
Date:

IDAC BURIT EATON (IAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vaehh@sigonet.com.sg

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

MSI319088113 / STA INSPECTION PTE LTD - Boon Lay
ENTRY DATE & TIME: 06/07/2019 16:21
SUBMITTED BY: Woodford Richard Vincent

Your NCD will be affected due to late reporting
Actual e-Filing Submission Date & Time: 06/07/2019 16:33

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	06/07/2019 16:21
Date Of Accident	28/06/2019 10:00
Exact Location Of Accident	T-JUNCTION OF ADMIRALTY ROAD & RIVERSIDE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE3384L
Insured/Policyholder	
Name Of Registered Owner	PROGRESS GALVANIZING PTE LTD
Co Reg No	NA
Email Address	PROGRESS@PROGRESS-SINGAPORE.COM.SG
Mobile Phone No	
Alternative Phone No	Office-68614488

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 29004012 MAR
Cover Note Number	

Driver

Name of Driver	ANG POH ENG
NRIC No	S1565244F
Date Of Birth	22/10/1962
Occupation	OUTDOOR
Date Of Driving Pass	26/04/1984
Driving Experience	35 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91007886

Fax Number	
Contact Number	OFFICE-68614488
E-Mail Address	NOEMAIL
Address	BLK 115 TECK WHYE LANE #04-700
Postcode	680115
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)	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

REFER 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	YN4991T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NA
NRIC/Passport Number	
Contact Number	NA
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**.
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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:

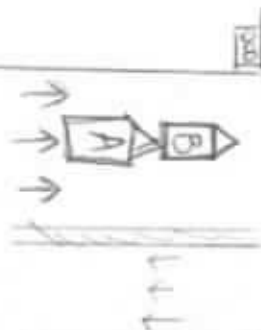
Driver's Signature
(if driver is not the policyholder)
Date & Time:

09/07/19

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

Sketch Plan #2

SKETCH PLAN

ADMIRALTY
ROADA: YE 3384 L
B: YN 4991 T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I was driving vehicle A along Admiralty Road towards Senoko. Vehicle B which in front of me E-brake due to the amber light, my vehicle A couldn't stop in time and hit on to the rear of vehicle B.

Only 2 vehicle involved
No one was hurt.

DECLARATION

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

Policyholder's Signature
Date & Time:Driver's Signature
(if driver is not the policyholder)
Date & Time: 05/07/19Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo











































...CLAIM SUBFOLDER...(Pending for Survey Report)





































CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	02 Jul 2019		03 Jul 2019 16:06 Edit Adj Rpt	S\$5,800.00 Edit Estimates	S\$5,800.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	Progress Galvanizing Pte Ltd, Co. Reg. No.: 199101791K								
Main Claimant:	MCI Corp Pte Ltd								
Vehicle Reg. No.:	YN4991T	Date of Loss:	28/06/2019 10:00 - :59 [63 Months and 3 Days From LTA Reg Date (Man Yr)]						
Claims Type:	TP / 598456	Policy/Cover Note No.:	29004165MKC (Comprehensive) Coverage: 11/08/2018 - 10/08/2019						
Vehicle Reg. No. (Insured):	XE3384L	Policy No. (Claimant):							
		Excess:							
Repairer:	Miracle Works Pte Ltd (HQ) 48 TOH GUAN ROAD EAST #04-126 ENTERPRISE HUB, 608586 Jurong West - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jasmine Lok Kheng Kwei - 6594 2550]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 07/11/2019]								
Adj Asg. Remarks:	on WP. Liab: dispute (OI NR) TP lawyer disagree on SJE - assign LKK Auto. Contact: Nicole @ 8204 5858 / 9647 2568/ 6468 3096.								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> MSIG_SG (05/11/2019): Report Send Back Alerts - YN4991T (TP) 									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*YN4991T (598456)
 [XE3384L]
 TP
 MCI Corp Pte Ltd
 Jun 28 2019 10:00AM
 [Progress Galvanizing Pte Ltd]
 Miracle Works Pte Ltd

Upload Documents		Upload Photos	Compose New Letter	View View in Browser	
Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print	
1	08/07/19 08:24	Accident Statement From: SC - Reg. No: XE3384L, Claimant: PROGRESS GALVANIZING PTE LTD	 Load HTM		
Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print	
1	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
2	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
3	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
4	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
5	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
6	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
7	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
8	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
9	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
10	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
11	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
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37	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
38	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	
39	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>	

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
40	06/07/19 15:08	General View	 Load JPG	<input checked="" type="checkbox"/>
41	11/07/19 19:38	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
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43	11/07/19 19:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
44	11/07/19 19:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
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63	11/07/19 19:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
64	11/07/19 19:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	02/07/19 17:13	PRI from C Yogarajah LLC	 Load PDF	
2	03/07/19 11:42	Disagree on SJE	 Load PDF	
3	08/07/19 08:41	TP YN4991T E-FILE REPORT	 Load PDF	
4	19/09/19 12:52	TP QUANTIFICATION LOD & DOCS	 Load PDF	
5	19/09/19 12:52	SURVEY REPORT	 Load PDF	
6	19/09/19 12:52	COLOURED PHOTOS -1	 Load PDF	
7	19/09/19 12:52	COLOURED PHOTOS -2	 Load PDF	
8	19/09/19 12:52	COLOURED PHOTOS -3	 Load PDF	
9	19/09/19 12:52	COLOURED PHOTOS -4	 Load PDF	
10	19/09/19 12:52	COLOURED PHOTOS -5	 Load PDF	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	18/11/19 14:52	PRS Invoice	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

LKK Auto Consultants Pte Ltd

(Co.Reg No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/MSG19011823/T1TF3E2-1

Date: 18/11/2019

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: 29004165MKC

Claimant YN4991T

Insured Vehicle No : XE3384L

Vehicle No : YN4991T

Nature of Claim: TP

Claim No: 598456

Date of Loss: 28/06/2019

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: YN4991T

Make & Model: MITSUBISHI CANTER, 3.0 D FEB21ER3SDEB (M)

Engine No: 4P10B02840

Reg. Date: 25/03/2014 (Man. Year: 2013)

Chassis No: FEB21EA00220

Colour: White

Odometer: 426121 km

Engine Capacity: 2998 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes

Engine Modification:

No

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 195/85 R15

Rear Tyre Size: 195/85 R15 (D)

Front Left Side: Yokohama 6 mm

Rear Left Side: Yokohama 6/6 mm

Front Right Side: Yokohama 6 mm

Rear Right Side: Yokohama 6/6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	26,084.20	5,443.70	20,640.50	79.13
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,170.00	1,990.00	1,180.00	37.22
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	29,254.20	7,433.70	21,820.50	74.59
Approved Total (Overridden) (S\$)		5,800.00		
Nett Amount (S\$)	29,254.20	5,800.00	23,454.20	80.17

INSPECTION

Date of Assignment: 03/07/2019

Date Inspected: 04/07/2019 Inspected At:

Miracle Works Pte Ltd (HQ)

48 TOH GUAN ROAD EAST #04-126

ENTERPRISE HUB

Singapore 608586

Estimated Period of Repair: 9.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: DENISE TAY KWEE CHENG

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 18 Nov 2019)	
Parts:	N/A	mitsubishi canter 3.0 D FEB21ER3SDEB (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for YN4991T)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR AXLE ASSY	Repair	11,313.18 FL	*- FL
2	2		*REAR HALF SHAFT L/R	Repair	1,602.68 FL	*- FL
3	2		*REAR HALF SHAFT BEARING L/R (JAMMED)	Not Consistent To The Impact	288.16 FL	*- FL
4	2		*REAR HALF SHAFT OIL SEAL L/R (NECESSARY)	Not Consistent To The Impact	75.79 FL	*- FL
5	2		*REAR LEAF SPRING ASSY L/R	Repair	3,415.18 FL	*- FL
6	8		*REAR LEAF SPRING ASSY U-BOLT L/R	Bent	858.56 FL	*858.56 FL
7	2		*REAR SHOCK ABSORBER L/R	Repair	503.40 FL	*- FL
8	2		*REAR TAILLAMP L/R	Not Necessary	568.40 FL	*- FL
9	2		*REAR TAILLAMP BRACKET L/R	Not Necessary	253.76 FL	*- FL
10	1		*ENGINE TIMING SIDE COVER	Bent	380.00 FL	*380.00 FL
11	1		*ENGINE HOSE	Cracked	80.00 FL	*80.00 FL
12	1		*REAR WOODEN TAILGATE	Cracked	1,800.00 FS	*1,500.00 FS
13	1		*REAR TAILGATE 23PAX STICKER	Necessary	12.00 FS	*12.00 FS
14	1		*REAR WOODEN TAILGATE 60KM/H STICKER	Necessary	15.00 FS	*15.00 FS
15	4		*REAR WOODEN TAILGATE HINGES	Bent	320.00 FS	*200.00 FS
16	1		*REAR WOODEN TAILGATE LOWER WOODEN PANEL	Cracked	680.00 FS	*480.00 FS
17	1		*REAR WOODEN STEP PANEL	Cracked	380.00 FS	*200.00 FS
18	2		*REAR TAILLAMP BRAKE BULB L/R	Not Necessary	24.00 FS	*- FS
19	2		*REAR TAILLAMP REVERSE BULB L/R	Not Necessary	24.00 FS	*- FS
20	2		*REAR TAILLAMP SIGNAL BULB L/R	Not Necessary	24.00 FS	*- FS
21	1		*REAR BUMPER ASSY	Repair	1,600.00 FS	*- FS
22	3		*REAR CARGO CARRIER FRONT WOODEN FENCE PANEL - PCS	Cracked	600.00 FS	*450.00 FS
23	1		*REAR CARGO CARRIER METAL FRAME	Repair	1,200.00 FS	*- FS
24	1		*REAR CARGO CARRIER WOODEN CROSS MEMBER RH	Cracked	800.00 FS	*600.00 FS
25	4		*REAR WOODEN FLOOR PANEL - PCS	Cracked	1,200.00 FS	*800.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (S\$) 28,018.11 5,575.56
 - List Item Discount on L Items 10.00/10.00% (S\$) 1,933.91 131.86

Total Parts (S\$) 26,084.20 5,443.70

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO REMOVE, REINSTALL ELECTRICAL WIRING HARNESS, CHECK LIGHTING, RESETTING HEADLAMP FOCUSING AND REWIRE	New	150.00	30.00
2	TO REMOVE, REINSTALL TOP TRIM UPHOLSTERY, CUSHION SEAT, TRIM GARNISH, TRIM LINER CARPET	New	120.00	60.00
3	TO RESET SYSTEM AFTER REPAIR WORKS	New	400.00	150.00
4	TO RE-SPRAY PAINTING ON THE CHANGE BODYPARTS, REPAIR PORTION, AND WHERE CONSISTENT TO THE ACCIDENT	New	1,100.00	800.00
5	TO PROVIDE LABOUR, WORKMANSHIP TO CHANGE THE ABOVE DAMAGED BODYPARTS, REPAIR, RE-CONSTRUCT AND RE-ALIGN BODY STRUCTURE, BODY ALIGNMENTS AND DAMAGED CONSISTENT TO THE ACCIDENT	New	1,300.00	900.00
6	TO APPLY ANTI-RUST CHEMICAL ON REPAIRED AND REPLACED PANEL	New	100.00	50.00
Gross Labour Cost (S\$)			3,170.00	1,990.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >