

SIS. REC. BY:

REP: CS/CTE 19020703/Kvd3

Special Instructions:

Assigner:

Methuen

## ASSIGNMENT (Office)

From (Person):

Irene Tay

of

CTI

Date/Time:

21/11/19 @ 3.09pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SMK 6278P

Insured:

PA 6215M

at Workshop m/s:

Supreme Auto

Tel:

6452 6715

of

176 Sin Ming Drive # 02-01

9736 8619

Policy No:

DMBISN 17448519022

Claim No:

8NM19D 205508102

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

19/11/2019

CA / REV / REP. / REV 24 HRS

up

H.O.D. Endorsement:

Date/Time:

9:11am @ 22/11/19

Person Contacted:

Winnie

Vehicle IN / OUT

Date/Time

Action/Instruction

19/11/19 1/1

SMK 6278P - NBA / CTI 19020456 / Y

DOA: 19/11/19

PA 6215M - NBA / CTI 19020456 / Y

DOA: 19/11/19

17/12 61 Dp 8 2550 email &amp; confirm (Red 2029.72, 479)

ASS. REC. BY:

REF:

CTF

## ASSIGNMENT

From:

Date:

22/11/19

Estimated Cost:

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

To Inspect Vehicle No:

SMK6278P

at Workshop mis

Supreme Auto

of

176 Sin Ming Drive #02-01

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

After 10am

(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: 05 days Res.: Yes or No

Lum Sum: 20 % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SMK 6278P

Yr Regn:

04 19

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

Truck / Trailer or

Make:

Honda Shuttle

C.C.

1496

Colour:

M. Grey

A/C:

Insured / Std / NI / NA

Sp. Reading

6278P

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

GP7

2003997

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F: B5

185/60R15

R: APH5

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

TOYO / YOKO or

Front

R/Bal.

4

mm

Rear

R/Bal.

8

mm

L/Bal.

4

mm

L/Bal.

8

mm

D.O.A.

19/11/19

D.O.I.

22/11/19

Survey held at

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

C/S Area

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

Date / Time

Action / Instruction

RECEIVED 17 DEC 2019

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 17/12 - typist

Report Format:

merimen

Lump Sum / L.B.I. (#

2550/-

Days Of Repair:

5

Resurvey No. of Trip:

1

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Wheel and (\$

Survey Fee:

Transportation:

3 + PS. 10

Phone:

Other:

TOTAL

220

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	21 Nov 2019		21 Nov 2019 15:09 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
------	-----------	---------------	-----------	--------------------------

#### CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:				
Main Claimant:	<b>OH SOO KHOON</b>			
Vehicle Reg. No.:	<b>SMK6278P</b>	Date of Loss:	19/11/2019 07:00 - :59	
Claim Type:	<b>TP / SNM19D205508C02</b>	Policy/Cover Note No.:	DMBISN17448519022	
Vehicle Reg. No. (Insured):	<b>PA6215M</b>	Policy No. (Claimant):		
		Excess:	S\$0.00	
Repairer:	<b>Supreme Auto Service Pte Ltd (HQ)</b> 176 Sin Ming Drive #02-01, Sin Ming Autocare, 575721 Sin Ming - Tel: 6452 0715			
Handling Insurer:	<b>China Taiping Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: 6389 6111 ... [Handled by <b>Irene Tay Hui Ping</b> - 638986192]			
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... <b>[Final Rpt due 02/12/2019]</b>			
Adj Asg. Remarks:	PLEASE SURVEY AND REVERT			

#### ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

There are no mail for this case.

#### 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.									

## 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	20/11/2019 10:29
Date Of Accident	19/11/2019 07:35
Exact Location Of Accident	ALONG YISHUN AVE 3 BEFORE JUNCTION YISHUN RING RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMK6278P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TIDAL CARS PTE LTD
Co Reg No	201901000M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91454984
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	SHUTTLE
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	PRIVATE HIRE
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107965449
Cover Note Number	
<b>Driver</b>	
Name of Driver	OH SOO KHOON
NRIC No	S1267646H
Date Of Birth	05/02/1957
Occupation	INDOOR
Date Of Driving Pass	15/09/1975
Driving Experience	44 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91454984
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 635 YISHUN STREET 61 #09-88 SINGAPORE
Postcode	760635
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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)	2
Passenger 1	NAME: : NA GENDER: : FEMALE

#### 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)

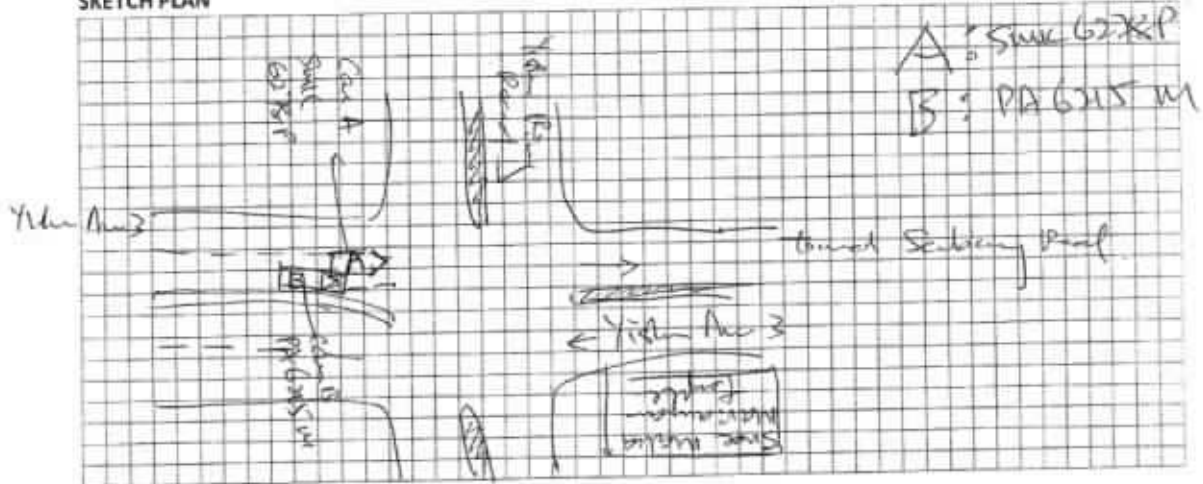
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PA6215M
Vehicle Make/Model/Colour	
Details Of Properties	REFER ATTACHED
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MR.LOW
NRIC/Passport Number	
Contact Number	82968285
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19/4/2015 at about 0735hr, I was driving Great car SMK 6278P (car A) with a female passenger from Block 604 Yishu St 61 to Riverside Primary School, while along Yishu Ave 3, stopped before junction with Yishu River Road, waiting for traffic green light a few second later, a school bus PA 6215 M (car B) travelling along the same direction try to squeeze through the turning right lane and hit onto the right rear side of my car, causing the damages (as shown in photographs taken at scene, thank all

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: 19/4/2015

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

# **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.

## **B. 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.:

# SUPREME AUTO SERVICE PTE LTD

c/o 176 SIN MING DRIVE #02-01 SINGAPORE 575721

TEL: 6452 8211 FAX: 6451 7420

## ESTIMATE

TIDAL CARS PTE LTD

*Not with work  
11/11/2019  
Rear After Paint  
5 days*

Date: 21/11/2019

QUANTITY	PARTICULARS	AMOUNT (\$)
<b>RE: HONDA SHUTTLE / SMK 6278 P</b>		
1 pc	rear bumper <i>1150</i>	<i>Bul/ur</i> 1,269.80 ✓
1 pc	rear bumper retainer <i>66.70</i>	<i>ur</i> 183.60 ✓
1 pc	rear fender <i>1010.90</i>	<i>Bu</i> 1,869.80 ✓
1 pc	side glass <i>M/H</i>	<i>ur</i> 100.00 ✓
	Sub-total	3,423.20
	Less 15% <i>80%</i>	513.48
	Sub-total	2,909.72
1 pc	sealant s/nett	<i>ur</i> 80.00 ✓
	To remove and replace all the parts mentioned above, knocking and straighten up the necessary affected areas.	600.00 ✓
	To spray painting on affected areas.	650.00 ✓
	To remove carpet, trimming and seats to enable repair.	150.00 ✓
	To remove side windscreen glass(es) to enable repair.	150.00 ✓
	To apply rust proofing on affected areas.	80.00 ✓
	To apply water proof sealant on affected areas.	80.00 ✓
	To install reverse sensors & reverse camera.	80.00 ✓
	<b>Total</b>	<b>4,779.72</b>

*Supreme Auto Consultants hereby notify the Repairer of the following:*

- To recover claims for repair work
- To display damaged parts using recovery
- Parts prices are subject to confirmation
- This price survey is on a "Without Prejudice" basis
- All repairs and materials are subject to approval
- All work must be carried out in accordance with the approved repair plan

# 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:** CS/CTI19020703/KVD3N2  
**Date:** 24/12/2019

### REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMBISN17448519022
Claimant Vehicle No :	SMK6278P	Insured Vehicle No :	PA6215M
Date of Loss:	19/11/2019	Nature of Claim:	TP
		Claim No:	SNM19D205508C02

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SMK6278P	Engine No:	LEB7105202
Make & Model:	HONDA SHUTTLE, 1.5 (A)	Chassis No:	GP72003997
Reg. Date:	17/04/2019 (Man. Year: 2018)	Odometer:	62679 km
Colour:	Metallic Grey		
Engine Capacity:	1496 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:	185/60R15	Rear Tyre Size:	185/60R15
Front Left Side:	Bridgestone 4 mm	Rear Left Side:	APLUS 8 mm
Front Right Side:	Bridgestone 4 mm	Rear Right Side:	APLUS 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,989.72	1,902.08	1,087.64	36.38
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,790.00	1,300.00	490.00	27.37
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>4,779.72</b>	<b>3,202.08</b>	<b>1,577.64</b>	<b>33.01</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>2,550.00</b>		
<b>Nett Amount (S\$)</b>	<b>4,779.72</b>	<b>2,550.00</b>	<b>2,229.72</b>	<b>46.65</b>

### INSPECTION

Date of Assignment:	21/11/2019	Supreme Auto Service Pte Ltd (HQ)
Date Inspected:	22/11/2019	Inspected At: 176 Sin Ming Drive #02-01, Sin Ming Autocare Singapore 575721
Estimated Period of Repair:	5.0 days	

**Adjuster:** KENNETH KONG

**Manager:** VERON CHEN

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

<b>Part Source:</b>	(Last Synchronised: 24 Dec 2019)	
<b>Parts:</b>	N/A	HONDA SHUTTLE 1.5 (A) (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SMK6278P)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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 BUMPER	Buckled/Cut	1,269.80 FL	*1,150.00 FL
2	1		*REAR BUMPER RETAINER	Necessary	183.60 FL	*66.70 FL
3	1		*REAR FENDER	Bent	1,869.80 FL	*1,010.90 FL
4	1		*SIDE GLASS MLDG	Necessary	100.00 FL	*100.00 FL
5	1		*SEALANT	Necessary	80.00 FS	*40.00 FS
					<b>Sub Total (\$\$)</b>	<b>2,367.60</b>
					<b>- List Item Discount on L Items 15.00/20.00% (\$\$)</b>	<b>465.52</b>
					<b>Total Parts (\$\$)</b>	<b>1,902.08</b>

F=Franchise part, S=SpchNett, L=ListItemDisc.

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
<b>Labour Items</b>				
1	TO REMOVE AND REPLACE ALL THE PARTS MENTIONED ABOVE,KNOCKING AND STRAIGHTEN UP THE NECESSARY AFFECTED AREAS	New	600.00	600.00
2	TO SPRAY PAINTING ON AFFECTED AREAS	New	650.00	440.00
3	TO REMOVE CARPET,TRIMMING AND SEATS TO ENABLE REPAIR	New	150.00	100.00
4	TO REMOVE SIDE WINDSCREEN GLASS (ES) TO ENABLE REPAIR	New	150.00	60.00
5	TO APPLY RUST PROOFING ON AFFECTED AREAS	New	80.00	30.00
6	TO APPLY WATER PROOF SEALANT ON AFFECTED AREAS	New	80.00	20.00
7	TO INSTALL REVERSE SENSORS & REVERSE CAMERA	New	80.00	50.00
Gross Labour Cost (\$\$)			1,790.00	1,300.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >