

ASS. REC. BY:

REF: C8/INC19020829/Egds

Special Instruction:

Surveyor: Steve

ASSIGNMENT (Office)

From (Person) Hirzedysa Bt Ibrahim

of

INC

Date/Time: 25/11/19 @ 9:33am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLS 2782X

Insured:

SFZ 2800L

at Workshop m/s

premium

Tel:

GG90 0293

of

281 Alexander Road

Policy No:

Claim No:

MT/1071788002

Sum Insured:

Excess:

Make of Veh:

D.O.A.

17/11/19

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 9:47am @ 25/11/19

Person Contacted:

George

Vehicle ☒ IN / OUT

Date/Time	Action/Instruction	Estimated
	SLS 2782X - X	✓
	SFZ 2800L - NA / INC 09001279 / S1	
09/04/20 @ 11:55am	confirmed with Mr Chang final fig \$1784.40, 3 days by email.	
	(Red \$4246.60, 70%)	

D.O.A: 14/11/2009

Surveyor

Steve

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:

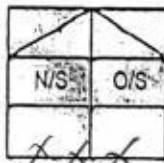
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR. Seen:

Consistent? : Yes or No

Est. Repairs:

3 days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SL5 2782X

Yr Regn:

18/9/17

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

Truck / Trailer or

Make:

Mazda 6

c.c 1998

Colour

Blue

A/C: Insured / Std / NI / NA

Sp. Reading

40373

T/Radio: Insured / Std / NI / NA

Eng/No:

Ci/No:

JM66L 1071H 0126730

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F:

225/55R17

R:

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

TOYO / YOKO or

Toyo

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

17/11/19

D.O.I.

25/11/19

Survey held at

Princeton, Alexandria Road

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

MV-80K

Date/Time, File Pass to?

☐

: Procl. Report

09/04 TYPIST

☐

: Final Report

Date/Time, File Return to?

Days Of Repair:

3

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

) S + RS, SI

) Probe

) Others

)

TOTAL

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Report Format:

TP

Lump Sum / I.B.I. (\$

p/p 1784.40

Nivitha (LKK Auto)

From: Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>
Sent: Monday, 25 November 2019 10:53 AM
To: Admin-D (LKKAuto); assignments
Cc: Hazalya Binte Ibrahim
Subject: RE: TP CASES FARMED OUT TO LKK ON 25/11/2019

Dear LKK,

Re-send with details.

Thank you.

Warmest Regards

Hazalya Bte Ibrahim
Admin Assistant
Operations, Motor & Personal Lines (PL)
www.income.com.sg



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From: Hazalya Binte Ibrahim
Sent: Monday, 25 November 2019 9:33 AM
To: Admin-D (LKKAuto) <admin-d@lkkauto.com>; assignments <assignments@lkkauto.com>
Cc: Susan Ting <susan.ting@income.com.sg>; Hazalya Binte Ibrahim <hazalya.ibrahim@income.com.sg>
Subject: TP CASES FARMED OUT TO LKK ON 25/11/2019

Dear LKK,

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

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
1	Cyndie Yong	MT/1072662-002	SHA9715L	DING AUTOMOTIVE PTE LTD	31 CORPORATION ROAD SINGAPORE 649825	VADIVELAN MOHAN / 62657130 / 96891857		SF55072M	22/11/19	
2	Azhari	MT/1071788-002	SLS2782X	PREMIUM AUTOCARE CENTRE	281 ALEXANDRA ROAD SINGAPORE 159938	George Wong / 6690 0293	10:00-12:00	SF22800L	17/11/19	
3	Jeff Lin	MT/1071968-002	SJU122C	PREMIUM AUTOCARE CENTRE	281 ALEXANDRA ROAD SINGAPORE 159938	George Wong / 6690 0293	10:00-12:00	SLP8141Y	16/11/19	
4	Jeff Lin	MT/1072687-001	G887630B	SIN SHENG ENGINEERING SERVICES	NO 8 TUAS AVENUE 18, (LEVEL 5) SINGAPORE 638892	Pei Jin / 6863 9595		GZ1445Z	19/06/17	
5	Charlotte Chew	MT/1072051-002	PA6434Y	WOODLANDS TRANSPORT SERVICE PTE LTD	8 GUL CIRCLE SINGAPORE 629564	Kenji Lee / Mr Chan / 9299 4122 / 6559 8984	16:15-17:00	FBL7412L	18/11/19	6559 8988/ 6559 8954 (workshop insisted to survey after 4pm due to client only available after 4pm)

Please contact workshops.

Please revert to officer-in-charge after survey.

Thank you.

Warmest Regards

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



in with
you

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PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

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.

Premium Autocare Centre

24 Benoi Sector, Singapore 629857.

Tel : 6474 3323 Fax : 6264 6786

Email: Nora.khai@premiumautocare.com.sg / claims@premiumautocare.com.sg

Telefax

Estimate : Accident Repairs
Workshop : 24 Benoi Sector
Contact No : 6474 3323
Fax No : 6264 6786
Reference : PAC/TP/0074/2019/GW
Date : 23-Nov-19

Vehicle not in workshop . Kindly arrange for survey.

Your insured vehicle no: SFZ 2800 L

NTUC Income Insurance Co - Claims Department

73 Bras Basah Road

#05-01 NTUC Trade Union House

Singapore 189556

Attn: Motor Claims Dept

Tel: Fax 6338 1504

Owner's Name : Mr. Chow Ho Yin
Address : 107 Bukit Batok West Ave 6
#06-112
Singapore 650107
Telephone : (HP)91173172
Type of Claim : Third Party Claims
Policy No. : 5112646522
Vehicle No : **SLS 2782 X**
Model Code : Mazda 6 Sedan 2.0 AT
Model / Year : Jan-16
Engine No : PE20957474
Chassis No : JM6BM4278G0328992
Mileage :
Date In :
Liability : -
Excess Cost : -
Estimated By : Allan Wu
Accident Date : 17-Nov-19
Place of Accident : PIE Towards Changi

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	259E
Vehicle Details	
Vehicle No.:	SLS2782X
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Nov 2019
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA6 SEDAN 2.0 AT EXECUTIVE EU6
Primary Colour:	Blue
Manufacturing Year:	2017
Engine No.:	PE20957474
Chassis No.:	JM6GL1071H0126730
Maximum Power Output:	121.0 kW (162 bhp)
Open Market Value:	\$22,930.00
Original Registration Date:	18 Sep 2017
First Registration Date:	18 Sep 2017
Transfer Count:	0
Actual ARF Paid:	\$24,102.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Sep 2027
PARF Rebate Amount:	\$18,076.00
Intended COE Rebate Details	
COE Expiry Date:	17 Sep 2027
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$52,751.00
COE Rebate Amount:	\$41,216.00
Total Rebate Amount:	\$59,292.00

The information contained herein is correct as at 25 Nov 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	18/11/2019 18:38
Date Of Accident	17/11/2019 11:05
Exact Location Of Accident	PIE TOWARDS CHANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS2782X
Insured/Policyholder	
Name Of Registered Owner	CHOW HO YIN
NRIC No	S8871259E
Email Address	TCHOW88@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91173172
Alternative Phone No	OFFICE-91173172

Vehicle Particulars

Manufacturer	MAZDA
Model	6 SEDAN 2.0 AT
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5112646522
Cover Note Number	

Driver

Name of Driver	CHOW HO YIN
NRIC No	S8871259E
Date Of Birth	05/11/1988
Occupation	INDOOR
Date Of Driving Pass	15/04/2008
Driving Experience	11 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91173172
Fax Number	
Contact Number	OFFICE-91173172
EMail Address	TCHOW88@GMAIL.COM

Address	107 BUKIT BATOK WEST AVE6 #06-112
Postcode	650107
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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: : ANGELA ANG JIE LING 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

TRAFFIC JAM ALONG PIE AS THERE WAS ANOTHER ACCIDENT IN FRONT. MY CAR SLOWED DOWN AND CAME TO A STOP. SHORTLY AFTER (WITHIN SECONDS), THE OTHER VEHICLE REAR-ENDED INTO MY CAR. WE GOT OUT OF THE CAR AND TOOK SOME PHOTOS, AND A VIDEO, AND ALSO EXCHANGED CONTACTS. DATE : 17 NOVEMBER 2019 @ 11:05AM (APPROX).

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	SFZ2800L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

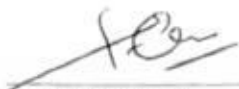
SKETCH PLAN


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.
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.

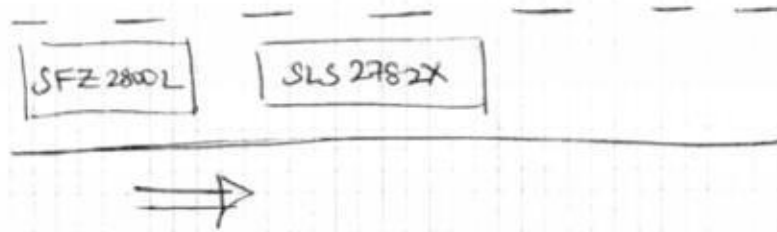

Policyholder's Signature
Date & Time: 18 Nov 2019
5:40pm


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


Reporting Centre Personnel's Signature
Name: ALONG, Huiwen SITONG, Geng
NRIC/FIN No.: C1258715X

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- TRAFFIC JAM ALONG PIE AS THERE WAS ANOTHER ACCIDENT IN FRONT.
- MY CAR SLOWED DOWN AND CAME TO A STOP.
- SHORTLY AFTER (WITHIN SECONDS), THE OTHER VEHICLE REAR-ENDED INTO MY CAR.
- WE GOT OUT OF THE CAR AND TOOK SOME PHOTOS, AND A VIDEO, AND ALSO EXCHANGED CONTACTS.
- DATE: 17 NOVEMBER 2019 @ 11:05 am (approx)

DECLARATION

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

Policyholder's Signature

Date & Time: 18 NOV 2019
5:40pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: WONG KHEONG SENG, George
NRIC/FIN No.: G2987143d



Premium Autocare Centre

24 Benoi Sector, Singapore 629857.
Tel : 6474 3323 Fax : 6264 6786

Telefax

Material List for Accident Vehicle Regn No.SLS 2782 X

S/N	Parts Description	Damaged Parts & Prices	
		S/Nett	Remark
1	REAR BUMPER / BR	\$ 1,000.00	800
2	REAR BUMPER TOW EYE COVER-RH / MIS	\$ 38.00	30.40
3	REAR BUMPER RETAINER-LH/RH / BR	2 \$ 80.00	64
4	REAR BUMPER LIGHT REFLECTOR-LH/RH X NN	2 \$ 100.00	
5	REAR BUMPER PARKING SENSOR-LH/RH / SH1	2 \$ 400.00	320
6	REAR REINFORCEMENT BAR ? X NN	\$ 488.00	
7	REAR BUMPER BRACKET-LH/RH ? X NN	2 \$ 100.00	
8	REAR END PANEL - OUTER X R	\$ 625.00	
9	ACRYLIC SEALANT ? X NN	S/N \$ 180.00	
10	CAVITY WAX ? X NN	S/N \$ 140.00	
11	STONE CHIP ? X NN	S/N \$ 180.00	
12	SUNDRIES ----- X NN	\$ 50.00	90
TOTAL SPARE PARTS CHARGES		: \$ 3,381.00	
TOTAL LABOUR CHARGES		: \$ 2,650.00	
GRAND TOTAL		: \$ 6,031.00	

All charges are not inclusive of GST.

Legend : Remarks (OK) = Approved, Remarks (X) = Not approved
Spare parts are Special Nett.

Premium Autocare Centre

24 Benoi Sector, Singapore 629857.

Tel : 6474 3323 Fax : 6264 6786

Telefax

Estimated Labour Charges for Accident Vehicle SLS 2782 X

S/n	Nature of Jobs	Estimated Charges	Surveyor's Recommendation
1	To remove and transfer rear parking sensor wiring, check function.	S/N \$ 80.00	50
2	To dislodge and reinstall rear wiring harness to repair spare wheel housing.	S/N \$ 100.00	? X
3	To dismantle and renew rear bumper and rear bumper spoiler. Cut out reweld end panelling. To repair spare wheel housing. Re-organise crash management components. Reinstall all parts removed.	\$ 1,200.00	200
4	To respray rear bumper, spare wheel housing, and end panelling. To carry out joint sealer works and stone chip treatment.	\$ 1,000.00	200
5	To carry out diagnostic check.	S/N \$ 150.00	120
TOTAL LABOUR CHARGES		: \$ 2,530.00	

Premium Autocare Centre

24 Benoi Sector, Singapore 629857.
Tel : 6474 3323 Fax : 6264 6786

Telefax


26/11/19

Name

:

Steve (LKK)

Surveyed Date

:

25/11/19, 10:30am

Authorised Date

:

P/P

Excess Cost

:

Ry BCL SM

Liability

:

Remarks

:

3 days

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and
is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Please Note

- : This estimate is based on visual inspection of the affected vehicle.
Should we require further labour charges and spare parts in the
progress of repair, we shall inform you accordingly.
For inspection of vehicle, please refer to Ms Norah Khai at
Tel:6474 3323 for appointment.

Yours faithfully,

Premium Autocare Centre

Allan Wu

Body Shop Manager