

ASS. REC. BY:

REF: CS3/SM019022340/Gtd3<sup>92</sup> Special Instruction:Surveyor: GQ ASSIGNMENT (Office)From (Person): Grace Teo of SMO Date/Time: 19/12/19 @ 3.01pm

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD (IP) / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: CB7971E Insured: SKT2770Lat Workshop m/s Yellow Bus Tel: 9833 5843of 160 Sin Ming Auto # 01-07Policy No: \_\_\_\_\_ Claim No: CMTD1905251/RUC

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 7/11/2019  
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 3:55pm @ 19/12/19 Person Contacted: DavidVehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	<u>CB7971E - X</u>
	<u>SKT2770L - CC61A1616008013/Kp93y2</u> <u>D.O.A. 29/4/2016</u>
	<u>After Repair \$ 26/12/2019</u>

ASS. REC. BY:

fcd.  
PRS

REF: SMO

## ASSIGNMENT

From:

Date:

26/12/19

Veh No:

CB7971E

Yr Regn:

4  
23 Dec 2019 17

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

CB 7971E

Make:

Mjt Rosa

C.C.

2998

at Workshop m/s

Yellow BUS

Colour

white

A/C:

Insured / Std / NI / NA

of

160 Sin Ming Drive # 01-07

Sp. Reading

85052

T/Radio:

Insured / Std / NI / NA

Insured:

Eng/No:

BE64/JK 30402

Policy No.

C/No:

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: In order / Jammed / Leaked / Burnt or

(Client's Record)

Brake: In order / Jammed / Leaked / Burnt or

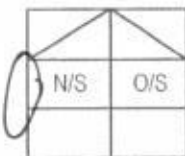
Make of Veh:

Vehicle In

Modi:

Nil / S/Rim / STD A/Rim or

(Policy Condition)

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

Tyre Size:

F:

205/85R16

R:

11

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

TOYO / YOKO or

Bal. or Market Value:

Front

Rear

IDAC Accident Rpt:

Consistent?: Yes or No

R/Bal.

5

mm

R/Bal.

5/5

mm

GIA / PR Seen:

Consistent?: Yes or No

L/Bal.

5

mm

L/Bal.

5/5

mm

Est. Repairs:

4

days

Res.:

Yes or No

D.O.A.

D.O.I.

Lum Sum:

%

3 Val.: Yes or No

Survey held at

w/s

CA / REV / REP. / 24 HRS

lup

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

Date:

Person Contacted:

Vehicle: IN / OUT

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

Date / Time

Action / Instruction

\$ 2000 - \$ 3000  
(Repair Range)

21/12/2019

RECEIVED 17 JAN 2020

Date/Time, File Pass to?



Preli. Report

1) btl Typist



Final Report

Date/Time, File Return to?

Days Of Repair:

4

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

2)

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Report Format:

DAR

Lump Sum / L.E. (\$)

## Nivitha (LKK Auto)

---

**From:** Teo, Grace <grace.teo@sompo.com.sg>  
**Sent:** Thursday, 19 December 2019 3:01 PM  
**To:** 'accident@kscgp.com'; 'admin-d@lkkauto.com'; 'assignments@lkkauto.com'  
**Cc:** Chua, Gek Tiang Ruth; Ye, Yong Kang Melvin; Henry, Irene James  
**Subject:** 2nd PRS - CMTD1905251/RUC - PRI(LKK)/ SKT2770L & CB7971E ACC ON 07.11.19/  
Notice to Conduct Pre-repair inspection Our ref: GS/19/5380/YB/jn/sl  
**Attachments:** 2nd PRS (reject).pdf; 1st PRS - GS\_20191219104226.pdf

Our Reference : CMTD1905251/RUC  
Your Reference : GS/19/5380/YB/jn/sl

Without Prejudice  
EMAIL ONLY

Date: 19.12.2019

OUR Email: [motorsurvey@sompo.com.sg](mailto:motorsurvey@sompo.com.sg)

**Attention:**  
**KSCGP Juris LLP**

Dear Sharon,

### ACCIDENT INVOLVING SKT2770L & CB7971E ON 07.11.2019

We refer to your email reply of today.

We do not agree to your list of surveyors.

As such, we will be appointing our motor surveyor, **LKK AUTO** to conduct the pre-repair survey of your client's vehicle.

The pre-repair survey will include a survey of the vehicle when its damaged parts are being dismantled prior to the commencement of repairs.

We would like our motor surveyor to conduct a post repair inspection once your client's vehicle has been repaired.

The survey is conducted on a without Prejudice basis and without any admission of liability.

Aside to **LKK Auto**,

Please make the arrangement to survey for **CB7971E** on a without prejudice basis and revert your report upon completion of survey to my colleague, Ms. Ruth.

Our office will be closed on Christmas, New Year's Eve and New Year Day. Business will resume on 26<sup>th</sup> December 2019 and 2<sup>nd</sup> January 2020 respectively.  
We wish you a Merry Christmas and a Happy New Year!

Best Regards

Grace Teo

Claims Division

D: 6329 5170 | T: 6461 6555 | F: 6221 3147

For motor claims survey request, please email to [motorsurvey@sompo.com.sg](mailto:motorsurvey@sompo.com.sg)



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**From:** Accident@kscgp.com <Accident@kscgp.com>

**Sent:** Thursday, December 19, 2019 12:53 PM

**To:** Teo, Grace <grace.teo@sompo.com.sg>; Chua, Gek Tiang Ruth <ruth.chua@sompo.com.sg>

**Cc:** Ye, Yong Kang Melvin <melvin.ye@sompo.com.sg>; Henry, Irene James <irene.henry@sompo.com.sg>

**Subject:** 2nd PRS - CMTD1905251/RUC - PRI/ SKT2770L & CB7971E ACC ON 07.11.19/ Notice to Conduct Pre-repair inspection Our ref: GS/19/5380/YB/jn/sl

Dear Sirs,

We refer to the matter above and your email of even date.

Please see enclosed our 2nd Notice to Conduct Pre- Repair Survey. Our client is not agreeable to your proposed motor surveyors as a Single Joint Expert.

The workshop details as follows:

Yellowbus Workshop & Trading Pte Ltd

160 Sin Ming Drive

#01-07 Sin Ming Au-to City

Contact person:

Mr David Lim (H/P :9833 5843)

Thank you.

Regards,

Sharon

for and on behalf of Mr Gurdeep Singh Sekhon

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0983 / Fax: 6538 3708

Email: [accident@kscgp.com](mailto:accident@kscgp.com)

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

**From:** Teo, Grace [<mailto:grace.teo@sompo.com.sg>]

**To:** [accident@kscgp.com](mailto:accident@kscgp.com), [ruth.chua@sompo.com.sg](mailto:ruth.chua@sompo.com.sg)

**Cc:** [melvin.ye@sompo.com.sg](mailto:melvin.ye@sompo.com.sg), [irene.henry@sompo.com.sg](mailto:irene.henry@sompo.com.sg)

**Sent:** Thu, 19 Dec 2019 04:27:49 +0000

**Subject:**

Our Reference : CMTD1905251/RUC

Your Reference : GS/19/5380/YB/jn/sl

Without Prejudice

EMAIL ONLY

Date: 19.12.2019

**OUR Email:**

[motorsurvey@sompo.com.sg](mailto:motorsurvey@sompo.com.sg)

**Attention:**

KSCGP Juris LLP

Dear Sharon,

**ACCIDENT INVOLVING SKT2770L & CB7971E ON 07.11.2019**

We refer to your Notice of Accident dated 19.12.2019.

Please be informed that **Ms. Ruth Chua** the handler of this case who can be contacted at 63295 153/  
[ruth.chua@sompo.com.sg](mailto:ruth.chua@sompo.com.sg).

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

**Pre-Repair Survey**

	Motor Surveyor	Surveyor	Selection (Indicate as tick)
1	Raleigh Services	Andrew Ow Yong	
		Vincent Ng	
2	LKK Auto Consultants	Kenneth Kong (North area)	
		Marcus Chua (East area)	
		Mohd Rasul (West area)	
		Mohd Taufikh (West area)	
3	Priority Services	Jimmy Lee	
		Lawrence Ng	
		Jeffery Ong	

Please let us know within **two (2) working days** whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Our office will be closed on Christmas, New Year's Eve and New Year Day. Business will resume on 26th December 2019 and 2nd January 2020 respectively.  
We wish you a Merry Christmas and a Happy New Year!

Best Regards

**Grace Teo**

Claims Division

D: 6329 5170 | T: 6461 6555 | F: 6221 3147

For motor claims survey request, please email to [motorsurvey@sompo.com.sg](mailto:motorsurvey@sompo.com.sg)



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**From:** [Accident@kscgp.com](mailto:Accident@kscgp.com) <[Accident@kscgp.com](mailto:Accident@kscgp.com)>

**Sent:** Thursday, December 19, 2019 11:02 AM

**To:** Claims - Motor Survey <[MotorSurvey@sompo.com.sg](mailto:MotorSurvey@sompo.com.sg)>

**Subject:** URGENT PLEASE - Notice to Conduct Pre-repair inspection - Your insured veh: SKT 2770L - Our ref: GS/19/5380/YB/jn/sl

Dear Sirs,

We refer to the above matter.

We enclose herein the notice to conduct pre-repair inspection for your necessary action.

Thank you.

Regards,

Sharon

for and on behalf of Mr Gurdeep Singh Sekhon

KSCGP Juris LLP

10 Hoe Chiang Road

#13-03A Keppel Towers

Singapore 089315

Tel: 6538 3611 / DID: 3152 0983 / Fax: 6538 3708

Email: [accident@kscgp.com](mailto:accident@kscgp.com)

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## 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 08/11/2019 10:33  
Date Of Accident 07/11/2019 18:55  
Exact Location Of Accident CHU YEN ST  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number CB7971E  
**Insured/Policyholder**  
Name Of Registered Owner TEO CHIEW YONG  
NRIC No S1831660I  
Email Address NOEMAIL  
Mobile Phone No (LOCAL) +65-98273335  
Alternative Phone No OFFICE-98273335

### Vehicle Particulars

Manufacturer MITSUBISHI  
Model ROSA

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 BUS

### Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number 5096084628-01  
Cover Note Number

### Driver

Name of Driver TEO CHIEW YONG  
NRIC No S1831660I  
Date Of Birth 01/04/1967  
Occupation OUTDOOR  
Date Of Driving Pass 02/10/1992  
Driving Experience 27 YEARS AND 1 MONTH  
Gender FEMALE  
Mobile Number (LOCAL) +65-98273335  
Fax Number  
Contact Number OFFICE-98273335  
Email Address NOEMAIL



Address

Postcode

BLK 747 JURONG WEST ST 73 #06-69

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

SIDE SWIPE

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) 7

### 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

PLS REFER ATTACHED ACCIDENT REPORT FROM THE DRIVER.

### 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

SKT2770L

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**

**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:

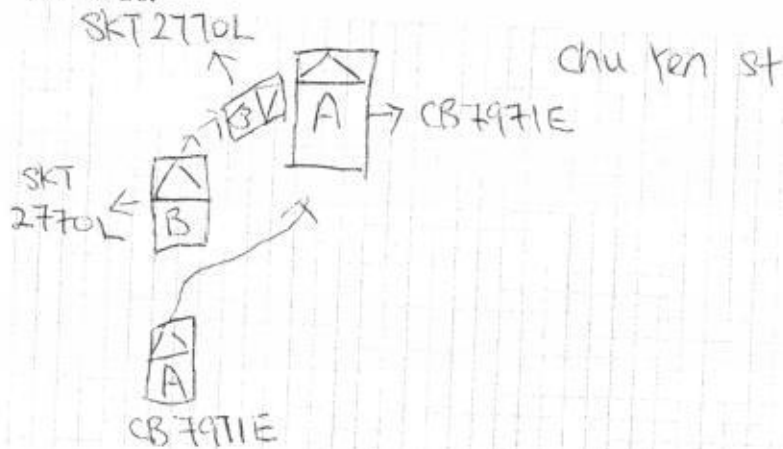
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

**IDAC PUKIT BATOK (VAC)**  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At this place and time I was travelling along this road. Infront Vehicle (B) Stopped I followed suit, i waited almost 15 seconds and gently horn and alert infront vehicle (B) But vehicle (B) never move, and never indicate any Hazard light signal. So checked right and signal right, and proceed to overtake, after my vehicle was going straight, out of sudden stationary Vehicle (B) turn right and hit onto my vehicle (A) left side portion.

DECLARATION

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

  
Policyholder's Signature  
Date & Time:

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

IDAQ BUKIT BATOK (VAC)  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	660I
Vehicle Details	
Vehicle No.:	CB7971E
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Dec 2019
Vehicle Make:	MITSUBISHI
Vehicle Model:	ROSA BUS BE641JRMDEB
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	4P10C63293
Chassis No.:	BE641JK30402
Maximum Power Output:	-
Open Market Value:	\$70,562.00
Original Registration Date:	04 Dec 2017
First Registration Date:	04 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$3,529.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Rebate Amount:	\$0.00
<b>Total Rebate Amount:</b>	<b>\$0.00</b>

The information contained herein is correct as at 23 Dec 2019

OK



**PRE-REPAIR INSPECTION REPORT**

SOMPO INSURANCE SINGAPORE PL  
50 RAFFLES PLACE #05-01/06  
SINGAPORE LAND TOWERS SINGAPORE 048623

Ref: CS3/SMO19022340/Gtd3s2

Date: 17-01-2020



Code: SMO

**1. Policy Particulars :- (THIRD PARTY CLAIM)**

Insured Veh.	SKT 2770L	Veh. Inspected	CB 7971E
Policy No.		Coverage (\$)	0.00
Claim No.	CMTD1905251/RUC	Excess (\$)	0.00
Assign From	GRACE TEO	Assign Date	19/12/2019

**2. Vehicle Particulars & Condition**

Make & Model	MITSUBISHI ROSA	c.c	2998
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	BE641JK30402	Colour	WHITE
Odometer	85052 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	205/85 R16	YOKOHAMA	5 mm
L/H Front Tyre	205/85 R16	YOKOHAMA	5 mm
R/H Rear Tyre	205/85 R16 (D)	YOKOHAMA	5/5 mm
L/H Rear Tyre	205/85 R16 (D)	YOKOHAMA	5/5 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.	
--	--

**5. General Information**

Accident Date	07/11/2019	Inspect Date / Time	23/12/2019 ( 12:00 PM )
Survey held at	YELLOW BUS-160 SIN MING DRIVE# 01-07		
Repairer	-		

**5a. Remarks**

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,000-\$3,000
---

**5b. Estimate Days of Repair**

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
-------------------------------------	----------------

Report Ref No. CS3/SMO19022340/Gtd3s2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MinstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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