

3/20/2020

ASS. REC. BY:

REF: 083 / MSG19 001625 / GY03-1

Special Instructions:

Surveyor:

GEO. GONG

ASSIGNMENT (Office)

From (Person):

Christen Wong

of MSG

Date/Time: 26/12/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLX3787A

Insured:

FBL9777X

at Workshop m/s

MJE Motor

Tel:

6454 2203

of

Blk 7 - Sin Ming Ind. Est. Sec. #01-96

Policy No:

MSD/VMFT/18-3846B

Claim No:

MSC/V/19-000102

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A 21/01/2019

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

3:27pm 29/1/19

Person Contacted:

jo

Vehicle: IN/OUT

Date/Time

Action/Instruction (X) Estimate

SLX3787A - NBA/INC18021977/Y

D.O.A: 4/11/18

FBL9777X - X

Dismantle: 25/1/2019

\$6150, 3 Days
\$500

Do Not Finalise

19/3/2020

20/3/20 File pass to Typist

RECEIVED 20 MAR 2020

20

Surveyor **PMS**
XMF

REF: **MSG**

CP75/W

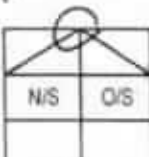
ASSIGNMENT

(-2020)

From: _____ Date: _____
Estimated Cost: _____
OD / TP / VS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: _____
at Workshop m/s: **MIE Motor**
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: **\$43K**
IDAC Accident Rpt: _____ Consistent?: Yes or No
GIA / PR Seen: _____ Consistent?: Yes or No
Est. Repairs: **3** days Res.: Yes or No
Lum Sum: **20** % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: **SLX3787A** Yr Regn: **03 Mar 2010**
Type: **M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /**
Truck / Trailer or _____
Make: **Merce E200** c.c. **1796**
Colour: **Black** A/C: Insured / Std / NI / NA
Sp. Reading: **138872** T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: **WDD212048A104107**
Gen. Cond: **Good** / Fair / Poor / Burnt
Steering: **In order** / Jammed / Leaked / Burnt or _____
Brake: **In order** / Jammed / Leaked / Burnt or _____
Modi: Nil / S/Rim / **STD** / Rim or _____
Tyre Size: F: **225/55 R16**
R: **11**
BS / DUN / EXNOVA / GY / FS / LIZA / **MC** / OHTSU / PIR / SUMI /
TOYO / YOKO or _____
Front: _____ Rear: _____
R/Bal: **5** mm R/Bal: **5** mm
L/Bal: **5** mm L/Bal: **5** mm
D.O.A. _____ D.O.I. **24-01-19**
Survey held at **w/s** **CPM**
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
	\$2000 - \$3000

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

Date/Time, File Return to?

2)

Days Of Repair: **3**

Resurvey No. of Trip: **1**

Survey Fee: **120**

Transportation:

S + R + SI

Person

Other

TOTAL

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

Report Format: **PR2**

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

120
10
130

Nivitha (LKK Auto)

From: Shelia (LKK Auto) <account@lkkauto.com>
Sent: Friday, 27 December 2019 1:19 PM
To: 'Admin-D (LKKAuto)'
Cc: 'Accounts (LKKAuto)'
Subject: RE: Report Send Back Alerts - SLX3787A (TP)

Dear Nivitha,

FYNA Please...

Pending for Survey Report- CS3/MSG19001625/GCD3E2

19 26 Dec 2019 10:49	Ins Send Back Adj Rpt	Please do paper survey Urgently. Thanks	[1] Christina Wong
20 26 Dec 2019 10:49	Adj Next Rpt Changed	Next Rpt:Final Rpt.Due Date:2019/12/30	[1] Merimen Administrator
21 26 Dec 2019 10:49	Adj Mandate Set	Maintained.	[1] Merimen Administrator

Thank You

Best Regards,

SuthaShelia (Shelia) | Accounts Dept.
LKK Auto Consultants Pte Ltd

Phone: **6841 1891** | email: account@lkkauto.com | fax: 6844-8805

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Do-Not-Reply <do-not-reply@merimen.com>
Sent: Thursday, 26 December 2019 11:00 AM
To: account@lkkauto.com
Subject: Report Send Back Alerts - SLX3787A (TP)

Dear Sir / Madam,

Please login to Merimen Online at www.merimen.com.sg for more information.

Thanks,
The Merimen Team



This email has been checked for viruses by AVG antivirus software.
www.avg.com



LEE AUTOMOBILE APPRAISERS SERVICES

CORRESPONDENCE : BUKIT PANJANG POST OFFICE P.O.BOX 244, SINGAPORE 916809
FAX: (65) 6763 3827, HANDPHONE: 8188 2833
BUSINESS REG. NO.: 52891429D

TO: **VIDA & PARTNERS PTE LTD**
c/o BLK 7 SIN MING IND EST SECTOR C
#01-96
SINGAPORE 575642

INVOICE NO. L19101150
YOUR REF
OUR REF LEE/TP/01/2351/19
DATE 31 OCT 2019

PARTICULARS		AMOUNTS (\$\$)
VEHICLE REGISTRATION NO.	SLX 3787 A	\$664.00
MAKE/MODEL	MERCEDES BENZ E200	
TO OUR PROFESSIONAL CHARGES FOR		
<input checked="" type="checkbox"/> INSPECTION OF VEHICLE		
<input checked="" type="checkbox"/> APPRAISAL REPORT		
<input checked="" type="checkbox"/> PHOTOGRAPHY		
<input checked="" type="checkbox"/> TRANSPORT CHARGES		
<input checked="" type="checkbox"/> REINSPECTION OF VEHICLE		
<input type="checkbox"/> AUTOMOTIVE CONSULTATION		
<input checked="" type="checkbox"/> CORRESPONDENCE, POSTAGE & OTHER DISBURSEMENT		
<input type="checkbox"/> OTHERS		
<input type="checkbox"/>		
<input type="checkbox"/>		
DOLLARS: SIX HUNDRED AND SIXTY FOUR ONLY		

(* CHEQUE SHOULD BE CROSSED AND MAKE PAYABLE TO "LEE AUTOMOBILE APPRAISERS SERVICES")





LEE AUTOMOBILE APPRAISERS SERVICES

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FAX: (65) 6763 3827, HANDPHONE: 8188 2833
BUSINESS REG. NO.: 52891429D

TO: VIDA & PARTNERS PTE LTD
c/o BLK 7 SIN MING IND. EST. SECTOR C
#01-96
SINGAPORE 575642

OUR REF. LEE/TP/01/2351/19
DATE 31 OCT 2019

AUTOMOBILE APPRAISAL REPORT

Vehicle Registration No. : SLX 3787 A
Make/Model : Mercedes Benz E200
Year Manufacture/Register : 2010
Colour : Black
Engine No. : Obscure
Chassis No. : WDD2120482A104107
Nature Of Inspection : Third Party
Date Of Accident : 21 Jan 2019
Date Of Inspection : 23 Jan 2019
Name of Workshop : MJE Motor
: Blk 7 Sin Ming Ind. Est. Sector A #01-96
: Singapore 575642

TYRE CONDITION ON VEHICLE

Location	Make	Size	Thread Balance
Nearside Front	Michelin	225/55R16	8mm
Offside Front	Michelin	225/55R16	8mm
Nearside Rear	Michelin	225/55R16	8mm
Offside Rear	Michelin	225/55R16	8mm

*(The above represent on estimated remaining life of the tyre thread in mm)

GENERAL DESCRIPTION OF DAMAGE VEHICLE

The damages sustained on the vehicle were apparently confined at its front portion.

(Details are describe in the attached schedule).

NOTE : This revised estimate was from a visual inspection. Should there be any discrepancy or unseen items in this survey, kindly notify the company within (7) days from the date hereof. Otherwise this revised amount shall be treated as valid.



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FAX: (65) 6763 3827, HANDPHONE: 8188 2833
BUSINESS REG. NO.: 52891429D

APPRAISEMENT SCHEDULE

Vehicle Registration No: SLX 3787 A

Our Ref.LEE/TP/01/2351/19

S/NO.	Qty	Description	Conditions	Repairer's Estimate	Assessed Amount
		NETT ITEMS			
1	1	Front bumper	distorted	\$ 1,450.00	\$ 1,450.00
2	1	Front bumper reinforcement	deformed	\$ 630.00	\$ 630.00 630.00 <i>SVC</i>
3	1	Front headlamp n/s	bent/holder snapped	\$ 2,535.00	\$ 2,535.00 2,535.00 <i>1268</i>
4	1	Front radiator grille assy	torn	\$ 1,100.00	\$ 1,100.00
5	1	Front bonnet cover	distorted/bent	\$ 2,421.00	\$ 2,421.00
		Less 10%		\$ 8,136.00	\$ 8,136.00 <i>6289</i>
		Sub-total parts		\$ -	\$ (813.60)
				\$ 8,136.00	\$ 7,322.40 <i>5615.1</i>
		(SPECIAL NETT ITEMS)			
1	1	Front number plate c/w frame	bent/cut	\$ 60.00	\$ 60.00 <i>40</i>
2	1	Front bumper sensor	bent/cut	\$ 200.00	\$ 200.00 200.00 <i>SVC</i>
		Total parts		\$ 8,396.00	\$ 7,582.40
		To check front wiring and function including to refocus headlamp.		\$ 120.00	\$ 30 100.00
		Labour charge as recommended for repaired & replaced damaged parts.		\$ 750.00	\$ 300 600.00
		To putty and spraypainting including touch up all affected areas.		\$ 800.00	\$ 400 700.00
		To apply rustproof treatment to the replaced/repared panels.		\$ 140.00	\$ 120.00 120.00
					730
					62,851
					2% = 5100
					3 Days
		GRAND TOTAL		\$ 10,206.00	\$ 9,102.40



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FAX: (65) 6763 3827, HANDPHONE: 8188 2833

BUSINESS REG. NO.: 52891429D

Vehicle Number: - SLX3787 A

Our Ref: LEE/TP/01/2351/19

ASSESSMENT SUMMARY

The damages sustained on the vehicle were thoroughly inspected and every item that was mentioned in the repair estimate against the actual damages found on the vehicle. Before we arrived at our recommendation as to whether the parts needed to be replaced or repair.

We have listed the breakdown of our finding and our recommendation as per schedule attached.

Our assessment to reinstate the vehicle is **\$9102.40** revised amounts of the repairer's estimate of **\$10206.00**. The aforesaid recommendation, in our opinion, is fair and reasonable for the restoration of the vehicle to its pre-accident condition.

However, after taken into consideration the age and condition of the vehicle and the availability of the recondition components and to economize the repair, we therefore recommend a contract **Lump Sum at \$7300.00** corresponding to supply of parts, labour and spraypainting charges.

33 photographs were taken at the times of static inspection.

Under normal circumstances, the repairs should be completed within a reasonable period **05** full working days

This inspection was conducted entirely on a **'Without Prejudice'** basis and we have not given authorization and instruction to the repairer to proceed with the repair.

We are reverting the matter to you for your discretion.

Very truly yours



.....
K. W. LEE Dip. Auto. Engrg.
MIAME, AMIMI, CAE, ENG. TECH, MSAE, AMIRTE, AMSOE
AUTOMOTIVE ENGINEER ASSESSOR

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	4751W
Vehicle No.:	SLX3787A
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Jan 2019
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	E 200CGI
Primary Colour:	Beige
Manufacturing Year:	2009
Engine No.:	27186030010607
Chassis No.:	WDD2120482A104107
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$51,188.00
Original Registration Date:	03 Mar 2010
First Registration Date:	03 Mar 2010
Transfer Count:	1
Actual ARF Paid:	\$51,188.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 Mar 2020
PARF Rebate Amount:	\$28,153.00
COE Expiry Date:	02 Mar 2020
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$23,889.00
COE Rebate Amount:	\$2,628.00
Total Rebate Amount:	\$30,781.00

The information contained herein is correct as at 25 Jan 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	22/01/2019 17:33
Date Of Accident	21/01/2019 19:30
Exact Location Of Accident	11 UNITY STREET TOWARDS CLEMENCEAU AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX3787A
Insured/Policyholder	
Name Of Registered Owner	VIDA & PARTNERS PTE LTD
Co Reg No	201534751W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83815449

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200
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

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5078366583-02
Cover Note Number	

Driver

Name of Driver	TOK CHER KIONG
NRIC No	S1790676C
Date Of Birth	19/09/1967
Occupation	OUTDOOR
Date Of Driving Pass	09/11/1987
Driving Experience	31 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83815449
Fax Number	
Contact Number	

Address	BLK 8 FRENCH ROAD #19-16
Postcode	200008
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	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)	3
Passenger 1	NAME: : NA GENDER: : MALE
Passenger 2	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	FBL9777X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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:

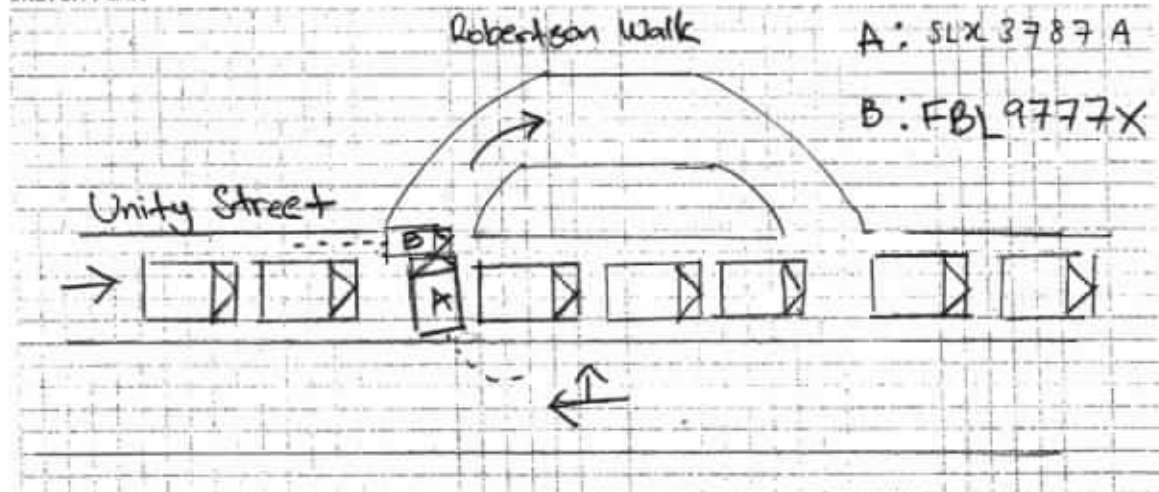


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Unity Street towards Clemenceau Ave dropping my passengers at Robertson Walk. There was a jam at the opposite traffic. I stopped & signalled right. The vehicle before the junction stopped & give way for me to turn right. I proceed with my right turn slowly. Suddenly a motor bicycle (vehicle B) squeezed from the left of all ~~the~~ stationary vehicle & collided into my front vehicle at the junction.

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:

Reporting 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



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	23/01/2019 14:52
Date Of Accident	21/01/2019 19:40
Exact Location Of Accident	UNITY STREET TOWARDS MOHAMED SULTAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBL9777X
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD SHAHREZAL BIN ABDUL HALIM
NRIC No	S9242084A
Email Address	REZALDESTINY6@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98517412
Alternative Phone No	OTHERS-98517412

Vehicle Particulars

Manufacturer	YAMAHA
Model	NMAX
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/18-384613-CA
Cover Note Number	

Driver

Name of Driver	MUHAMMAD SHAHREZAL BIN ABDUL HALIM
NRIC No	S9242084A
Date Of Birth	19/11/1992
Occupation	OUTDOOR
Date Of Driving Pass	01/06/2011
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98517412
Fax Number	
Contact Number	OTHERS-98517412

Address	BLK 671 WOODLANDS DRIVE 71 #04-43
Postcode	730671
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 - MAJOR/MINOR RD
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?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BISHAN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5529999 - FAX NO: 65561905
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER ATTACHED AND NOTICE OF REPORTING

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	SLX3787A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TOK CHER KIONG
NRIC/Passport Number	S1790676C
Contact Number	83815449
Address	
Postcode	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name MUHAMMAD SHAHREZAL BIN ABDUL HALIM

Approximate Age

Injuries Sustain REFER REPORT

Injured person in which vehicle? FBL9777X

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan

SKETCH PLAN

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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: 23/1/2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

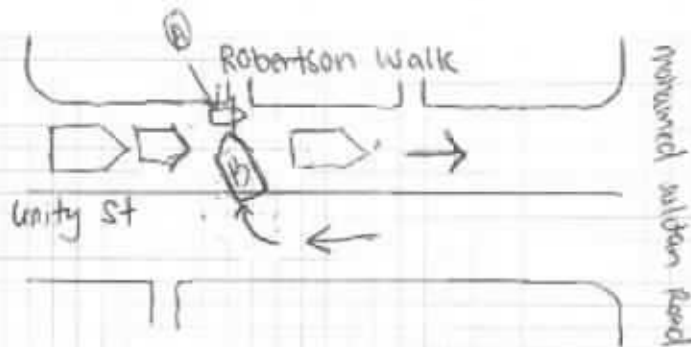
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



Ⓐ FBL 9717X

Ⓑ SLX 3787A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was riding towards Mohamed Sultan whereby vehicle number SLX 3787A turning right towards Robertson walk hit me at the ~~front~~ right side of my motorcycle.

refer to police report.

DECLARATION

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

Policyholder's Signature

Date & Time: 23/1/2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre/Police Station's Signature

Name:

NRIC/FIN No.:

Common Statement

Annex D

NOTICE OF REPORTING

This is to confirm that Muhammad Shahrezal Bin Abdul Halim, S9242084A (HP 98517412) has reported to the Police a non-injury accident.

On 21.01.2019 at about 7.40pm, along Unity Street at the junction into Robertson Walk.

I was riding my motorcycle along Unity Street at the junction of Robertson Walk when I was suddenly hit on the right side by another car. I am a Deliveroo Rider and I had no pillion at that time.

I wish to state that it was a minor accident where no government properties were damaged and no cyclists or pedestrians were involved. No ambulance or traffic police at scene. I have not sought any medical attention as of yet.

Complainant's vehicle: FBI.9777X, One Grey Yamaha MX

Other party's vehicle: SLX3787A, One Black Mercedes

Other party's Name: Tok Cher Kiong, S1790676C

2. If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

BISHAN NPC
23 BISHAN STREET 23
SINGAPORE 579757
TEL: 1800.5529000

Rank/Name of Issuing Officer: SGT T170261 Theodore Lee

Date and Time of Report: 21/01/2019 at 20.49hrs.

S/D Ref: 141

Police Post/ Unit: Bishan NPC

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	Irs Auth'd	Status
Main	24 Jan 2019 10:25		24 Jan 2019 15:12 Edit Adj Rpt	S\$5,100.00 Edit Estimates	S\$5,100.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by Insurer]									
Insured: MUHAMMAD SHAHREZAL BIN ABDUL HALIM , ID: S9242084A									
Main Claimant: VIDA & PARTNERS PTE LTD , Co. Reg. No.: 201534751W									
Vehicle Reg. No.: SLX3787A		Date of Loss: 21/01/2019 19:00 - :59 [106 Months and 18 Days From LTA Reg Date (Man Yr)]							
Claim Type: TP / MSC/V/19-000102		Policy/Cover Note No.: MSD/VMS/18-384613-CA (TP, Fire & Theft) Coverage: 09/06/2018 - 08/06/2019							
Vehicle Reg. No. (Insured): FBL9777X		Policy No. (Claimant):							
		Excess:							
Repairer: Mje Motor (sin Ming, #01-96) (HQ) Block 7 Sin Ming Industrial Estate Sector C, #01-96, 575642 Sin Ming - Tel:									
Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by XING GUO QIANG] ... [Final Rpt due 30/12/2019]									
Driver/Custodian (Insured): MUHAMMAD SHAHREZAL BIN ABDUL HALIM (), NRIC: S9242084A Email:									
Adj Asg. Remarks: Liability unclear. TP disagree with our SJE list. Proceed to appoint LKK as the SJE. Contact Person: Y Y - 9225 1391 / Jo - 6454 2203.									
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> MSIG_SG (26/12/2019): Report Send Back Alerts - SLX3787A (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

*SLX3787A (MSC/V/19-000102)
[FBL9777X]
TP
VIDA & PARTNERS PTE LTD
Jan 21 2019 7:00PM
[MUHAMMAD SHAHREZAL BIN ABDUL HALIM]
Mje Motor (sin Ming, #01-96)

Upload Documents

Upload Photos

Compose New Letter

View

View in Browser

Photos/Images

3 per page

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
2	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
3	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
4	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
5	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
6	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
7	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
8	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
9	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
10	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
11	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
12	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
13	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
14	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
15	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
16	25/01/19 16:18	General View		Load JPG	<input checked="" type="checkbox"/>
17	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
18	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
19	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
20	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
21	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
22	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
23	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
24	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
25	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
26	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
27	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>
28	28/01/19 14:24	Photographs of Damaged Parts		Load JPG	<input checked="" type="checkbox"/>

Documentation

1 per page

No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	24/01/19 10:26	SLX3787A GIA Rpt		Load PDF	
2	24/01/19 10:26	FBL9777X GIA Rpt		Load PDF	
3	24/01/19 10:29	PRI & LTA Search		Load PDF	
4	17/12/19 09:50	TPD SLX3787A - SURVEY REPORT , SURVEY INVOICE & COLOUR PHOTO		Load PDF	

Photos/Images

3 per page

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	23/03/20 10:32	Colour Photo		Load PDF	
2	23/03/20 10:32	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></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/MSG19001625/GYD3E2-1

Date: 23/03/2020

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VMS/18-384613-CA
Claimant Vehicle No :	SLX3787A	Insured Vehicle No :	FBL9777X
Date of Loss:	21/01/2019	Nature of Claim:	TP
		Claim No:	MSCV/19-000102

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLX3787A	Engine No:	27186030010607
Make & Model:	MERCEDES-BENZ E200, 1.8 CGI (A)	Chassis No:	WDD2120482A104107
Reg. Date:	03/03/2010 (Man. Year: 2009)	Odometer:	138872 km
Colour:	Black		
Engine Capacity:	1796 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:	225/55 R16	Rear Tyre Size:	225/55 R16
Front Left Side:	Michelin 5 mm	Rear Left Side:	Michelin 5 mm
Front Right Side:	Michelin 5 mm	Rear Right Side:	Michelin 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	8,396.00	5,655.10	2,740.90	32.65
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,810.00	730.00	1,080.00	59.67
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	10,206.00	6,385.10	3,820.90	37.44
Approved Total (Overridden) (S\$)		5,100.00		
Nett Amount (S\$)	10,206.00	5,100.00	5,106.00	50.03

INSPECTION

Date of Assignment:	24/01/2019	
Date Inspected:	24/01/2019 Inspected At:	Mje Motor (sin Ming, #01-96) (HQ) Block 7 Sin Ming Industrial Estate Sector C, #01-96 Singapore 575642
Estimated Period of Repair:	3.0 days	

Adjuster: XING GUO QIANG

Manager: YVONNE WONG YIN 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:	MRM-SG	Version: 1.0 (Last Synchronised: 23 Mar 2020)
Parts:	143	MERCEDES-BENZ E200 1.8 CGI (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLX3787A)	
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		*FRONT BUMPER	Distorted	1,450.00 F	*1,450.00 FN
2	1		*FRONT BUMPER REINFORCEMENT	Serviceable	630.00 F	*- FN
3	1		*FRONT HEADLAMP N/S	Bent / Holder Snapped	2,535.00 F	*1,268.00 FN
4	1		*FRONT RADIATOR GRILLE ASSY	Torn	1,100.00 F	*1,100.00 FN
5	1		*FRONT BONNET COVER	Distorted / Bent	2,421.00 F	*2,421.00 FN
6	1		*FRONT NUMBER PLATE C/W FRAME	Bent / Cut	60.00 FS	*40.00 FS
7	1		*FRONT BUMPER SENSOR	Serviceable	200.00 FS	*- FS

F=Franchise part. S=SpcNett. N=NettItemDisc.

Sub Total (\$\$)	8,396.00	6,279.00
- Nett Item Discount on N Items 0.00/10.00% (\$\$)	0.00	623.90
Total Parts (\$\$)	8,396.00	5,655.10

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 CHECK FRONT WIRING AND FUNCTION INCLUDING TO REFOCUS HEADLAMP	New	120.00	30.00
2	LABOUR CHARGES AS RECOMMENDED FOR REPAIRED & REPLACED DAMAGED PARTS	New	750.00	300.00
3	TO PUTTY AND SPRAYPAINTING INCLUDING TOUCH UP ALL AFFECTED AREAS	New	800.00	400.00
4	TO APPLY RUSTPROOF TREATMENT TO THE REPLACED / REPAIRED PANELS	New	140.00	0.00
Gross Labour Cost (S\$)			1,810.00	730.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >