

Insurer: Tan Ah K

ASSIGNMENT (Office)

From (Person): Ben. Tang of CTI Date/Time: 29/1/2020 @ 12.01pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SMA 8198B Insured: SMK 572D

at Workshop m/s Cycle 7 Carriage Industries Tel: 83320062

of 188 Pandan Loop

Policy No: _____ Claim No: SNM20D200512/SMK572D/BEN

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 29/01/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS (wp) H.O.D. Endorsement: _____

Date/Time: 12:05pm @ 29/1/2020 Person Contacted: Vincent Vehicle-IN OUT

Date/Time	Action/Instruction	Estimated
	SMA 8198B-X	✓
	SMK 572D-X	

ASS. REC. BY:

Tanphi

REF: CTF

ASSIGNMENT

From: _____ Date: 07/02/2020

Estimated Cost: _____

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

To Inspect Vehicle No: SMA 8198B

at Workshop m/s Cycle & Carriage Industries

of 188 Pandan Loop

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: 11:30am (waiting)

Vincent (8332 0062)

(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: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (wp)

Date: _____ Person Contacted: Vincent

Vehicle: IN / OUT

Veh No: SMA 8198B Yr Regn: 2018 April

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

Truck / Trailer or

Make: Mercedes Benz C180 c.c. 1595

Colour: Black A/C: Insured / Std / NI / NA

Sp. Reading: 24441 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WD172050402R36728

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/50R17

R: _____

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

TOYO / YOKO or Cooper

Front Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. _____ D.O.I. 07/02/20

Survey held at C&C Pandan Loop

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

O/S Rear

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

Date / Time	Action / Instruction

Date/Time, File Pass to? : Prel. Report

: Final Report

Date/Time, File Return to?

1)

Date/Time, File Return to?

Report Format: _____

Lump Sum / M.B.R: _____

Days Of Repair: _____

Resurvey No. of Trip: _____

- Add Fee:
- Site Insp (\$)
 - Interview (\$)
 - Tech. Invs (\$)
 - Meeting (\$)

Survey Fee:

Transportation:	_____
_____ \$ + RS. \$	_____
Photos	_____
Others:	_____
TOTAL	_____

Nivitha (LKK Auto)

From: Ben Tang <Ben.Tang@sg.cntaiping.com>
Sent: Wednesday, 29 January 2020 12:01 PM
To: assignments@lkkauto.com
Subject: FW: OUR REF: SNM20D200512/SMK572D/BEN & YOUR REF: SMA8198B -PRS & DIRECT SETTLEMENT

Dear Sirs

We refer to above matter.

Please assist to arrange for PRS survey of TP vehicle SMA8198B.

Thank you.

Best Regards
Ben Tang
Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #XX-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6175 | F: (65) 6222 1033

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平狮城 Taiping SG

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From: Vincent Seah <vincent.seah@cyclecarriage.com.sg>
Sent: Wednesday, January 29, 2020 11:51 AM
To: Ben Tang <Ben.Tang@sg.cntaiping.com>
Cc: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Subject: RE: OUR REF: SNM20D200512/SMK572D/BEN & YOUR REF: SMA8198B -PRS & DIRECT SETTLEMENT

Morning Ben

LKK FOR SURVEY

Kindly revert liability

TKS

Vincent Seah
Cycle & Carriage Ind. Pte Limited
Body Care & Repair - Pandan Loop Service Center
188 Pandan Loop Singapore 128378
Tel : 83320062 (H/P) DID: 6771 4401

From: Ben Tang [mailto:Ben.Tang@sg.cntaiping.com]
Sent: Wednesday, 29 January 2020 11:30 AM
To: Vincent Seah <vincent.seah@cyclecarriage.com.sg>
Cc: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Subject: RE: OUR REF: SNM20D200512/SMK572D/BEN & YOUR REF: SMA8198B -PRS & DIRECT SETTLEMENT

This email was sent from outside of your organisation

WITHOUT PREJUDICE

Dear Sir,

We refer to your email dated 29 January 2020.

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

LKK / LBS / STA

ADRIAN LING
Kelvin Ang
SEE CHEW SENG
MOHD FADHILAH BIN OSMAN
XING QUO QIANG
KENNETH KONG
SIMON HO
CHUA WEIJIE
MARCUS CHUA
HENRY NG

You may select one of the listed motor surveyors and we will bear the cost of the pre-repair survey carried out by the single joint expert.

If we do not hear from you within two days of this letter, you shall have deemed to have agreed that the surveyor appointed by us shall be Single Joint Expert for this matter.

Thank you.

Best Regards
Ben Tang
Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #XX-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6175 | F: (65) 6222 1033

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

From: Claims Dept of CTI

Sent: Wednesday, January 29, 2020 11:24 AM

To: Ben Tang <Ben.Tang@sg.cntaiping.com>; vincent.seah@cyclecarriage.com.sg

Subject: OUR REF: SNM20D200512/SMK572D/BEN & YOUR REF: SMA8198B -PRS & DIRECT SETTLEMENT

Dear Ben,

Please conduct PRS-SMA8198B soonest possible.

Officer In Charge- Ben Tang-DID : 6389 6175.

Dear Vincent,

*** kindly quote our reference number when replying.***

Thank you.

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

Tel: 6389 6116

Fax (65) 6224 7175 / 6224 7478

Email : claimsdept@sg.cntaiping.com

Website:www.sg.cntaiping.com

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

From: Vincent Seah <vincent.seah@cyclecarriage.com.sg>

Sent: Tuesday, January 28, 2020 6:26 PM

To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Subject: SMA8198B/SMK572D= DIRECT SETTLEMENT

TO : CHINA TAIPING

Accident Claim Dept.

RE: Accident involving motor vehicle nos. SMA8198B & SMK572D along CHOA CHU KANG BLK 234 OPEN CARPARK , Accident date: 23.01.2020

Dear Officer In-Charge,

This email is with regards to the above accident which has been reported by our customer. We have since been instructed by him/her (motor vehicle number SMA8198B), to submit a claim on his/her behalf as we are the authorised repair workshop for his/her car.

We note that you are the insurer (3rd party) of the (motor vehicle number SMK572D) involved. As such we are proposing for a Direct Settlement with regards to the repair costs and other consequential losses.

We appreciate your assistance in this matter and look forward to your agreement on this direct settlement.

I can be reached at vincent.seah@cyclecarriage.com.sg

Regards

Vincent Seah
Cycle & Carriage Industries Pte Limited
Body Care & Repair - Pandan Loop Service Center
188 Pandan Loop Singapore 128378
Tel: 8332 0062 (H/P)
Fax: 6872 1272

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DISCLAIMER:- This email and any attachment to it is confidential and intended only for the use of the individual or entity named above and may contain information that is privileged. If you are not the intended recipient, you are notified that any dissemination, distribution or copying of this email or any attachment is strictly prohibited. If you have received this email in error, please notify us immediately by return email and destroy the original message. Any views expressed are those of the individual sender, and not necessarily the views of Cycle Carriage Industries Pte Ltd and/or any of its related corporations.

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	28/01/2020 15:04
Date Of Accident	23/01/2020 20:50
Exact Location Of Accident	CHOA CHU KANG CENTRAL BLK 234 OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA8198B
Insured/Policyholder	
Name Of Registered Owner	CHUA TIAN TENG
NRIC No	SXXXX812G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96165338
Alternative Phone No	OFFICE-96165338

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A29120860QMY
Cover Note Number	

Driver

Name of Driver	CHUA BEE LING PAULINE
NRIC No	SXXXX324F
Date Of Birth	07/01/1981
Occupation	INDOOR
Date Of Driving Pass	28/01/1992
Driving Experience	27 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96608198
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	4 HILLVIEW CRESCENT
Postcode	669429
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

MY CAR WAS PARKED WAITING A LOT OF CHOA CHU KANG CENTRAL BLK 234 OPEN CARPARK. CAR B (SMK572D) WAS REVERSING INTO OPP. LOT WHILE DOING SO HIS CAR HIT INTO MY CAR RIGHT REAR PORTION. I DID HAD AN OPERATION ON 7 JAN 2020.

Attachment(s)

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

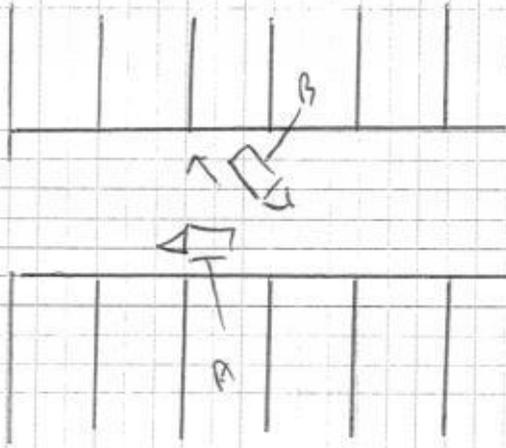
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMK572D
Vehicle Make/Model/Colour	BMW
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

A: SMA 8198B

B: SML-5720



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

waiting a lot

My vehicle was parked ~~in a lot~~ of chao chu kang central B116 234 open car park. Vehicle SML 5720 was ~~reversing~~ reversing into opp lot, while doing so his vehicle hit into my vehicle SMA 8198B right rear portion.
I did had an operation on 07/01/2020

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Vincent Seah
 Vehicle & Carriage Insurance Center
 Body Care & Repair Center
 Tel: 83270002 Fax: 88727177
 Email: vincentseah@vcc.com.sg

Policyholder's Signature

Date & Time 28/01/2020
12:35PM

Driver's Signature

(If driver is not the policyholder)
Date & Time 28/01/2020
12:35PM

Reporting Centre Personnel's

Name: _____
Date & Time: _____

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 28/01/2020
12:35pm

Driver's Signature

(If driver is not the policyholder)

Date & Time 28/01/2020
12:35pm

Reporting Centre Personnel's

Name: [Signature]
Date & Time 28/01/2020

Vincent Seah
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
Tel: 6771 4401 HP: 8332 0062 Fax: 6771 1272
Email: vincent.seah@cycliccarriage.com.sg



Mercedes-Benz

Cycle & Carriage Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

ESTIMATE FOR SMA8198B

CHINA TAIPING INSURANCE (S) PTE LTD
ATTN: MOTOR CLAIM DEPARTMENT
3 ANSON ROAD #16-00
SPRINGLEAF TOWER
SINGAPORE 079909
62222366

Vehicle & Document Information

WIP No 41017
Reg No/Reg Date SMA8198B / 18/04/2018
Date In/Mileage / 0
Chassis No WDD2060402R367787
Engine No 27491031259899
Make/Model MB/MB C 180 SEDAN (W205) "AVANTGARDE / A
Colour/Trim 021 197 Obsidian Bl/ 041 101 Leather Bla

Account No	Terms	Date/Time Printed	CSE	Operator
WC000668	Credit	28/01/2020/ 18:07	VS	356 / Vincent Seah

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
M BPNSUN POLICY NO/ACC DATE : A291208600MY // 23.01.2020 DRIVE IN/EXCESS : 28.01.2020 // TP CAR NO.: SMK572D=CHINA TAIPING DATE IN/DATE SURVEY: BY/AUTHORIZED ON :				
A BPILAB "USE XENTRY TO CHECK CONTROL UNITS & RESET MEMORY TO STANDARD SETTINGS.NETT"			0.10	✓ 380.00
A BPILAB REMOVE & REPLACE ON REAR BUMPER, RHR FENDER				1920 2400.00
A BPIRES RESPRAY ON REAR BUMPER, RHR FENDER				1200 1800.00
M REAR BUMPER	1.00	1643.61	00.00	Rx 1643.61
M RIVET	4.00	4.59	00.00	* 18.36

THIS IS NOT AN OFFICIAL TAX INVOICE
ESTIMATE

Handwritten signature
11/2/20
Taufik 97495429
Wp 7/2/20 @ 1130.
sur@lkkauto.com
taufik@lkkauto.com
4 days
Resurvey after repair

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:

Confirmed & accepted by

Nett 6,241.97
7% GST on 6241.97 436.94
Total Payable 6,678.91

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.
Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg