

ASS. REC. BY:

REP:

CS31 ASM 20001991 / T14f302

Special Instruction:

SW/Ven/

TANACH

ASSIGNMENT (Office)

From (Person):

Kitty TEO

of

ASM (AXA)

Date/Time:

5/21/2020

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKH 4217T

Insured:

SMA 1886 U

at Workshop m/s

Teamwork

Tel:

68442476

of

BKS3 Ubi AXA 1 #01-28

Policy No:

Claim No:

SOM02P31

Sum Insured:

Excess:

Make of Veh:

D.O.A.

1.2.2020

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

5/21/2020

11:30am

Person Contacted:

Shu Shan

Vehicle

IN / OUT

Date/Time	Action/Instruction (X) Estimate
	SKH 4217T - X
	SMA 1886U - X
	Dismantle: 6/2/2020.
	After repair: 7/2/2020.

ASS. REC. BY:

Toupin

REF:

AXA

ASSIGNMENT

COE 2022 Dec

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:

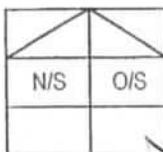
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

\$40K

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

PRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SKH4217T

Yr Regn:

2012 Dec

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

Truck / Trailer or

Make:

Honda City

C.C

1497

Colour

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

98/61

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MR HGM 25509802000

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

175/65R15

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

5/2/20

Survey held at

Teamwork

1253PM

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

Rear o/s

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

Date / Time

Action / Instruction

No estimate

\$4000 - \$5000; 6 days

RECEIVED 10 MAR 2020

Date/Time, File Pass to?



Preli. Report



Final Report

1)

Date/Time, File Return to?

2)

10/3/20 Typist

Report Form:

PRS

Lump Sum / U.C. /

Days Of Repair:

6

Resurvey No. of Trip:

2

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Week end (\$)

Survey Fee:

100

Transportation:

S + RS. \$

Photos

Others

TOTAL

100




Service Request Details

Claim

S0M02F3I

Reference

None 

Loss Date

February 1, 2020

Report Date

Feb 3, 2020 2:06:39 PM

Request Date

February 5, 2020

Due Date

February 12, 2020

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Standard workshop survey

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SKH4217T

Model
CITY-1.5 VTEC (A)

Service Address

...

Primary Contact/Insured

SIM MENG KOON
2 JALAN KELICHAP, 538758, Singapore

Claim Handler

TEO Kitty
6568804602
kitty.teo@axa.com.sg

Additional Instructions
Wkshop - Teamwork Garage

1			4			
Messages	Invoices	History	Documents	Assessment	Metrics	Notes

New Message

TYPE ?

SENT 2/5/20 11:26 AM

FROM TEO Kitty

SUBJECT NR, please get video from TP

BODY
*
↩

NIKAM Santosh Pandurang

From: TEAMWORK <claims@teamworkgarage.com>
Sent: Monday, February 03, 2020 12:58 PM
To: SG AXA Insurance SM AXA SGP - Motor Survey
Cc: TEAMWORK
Subject: [EXTERNAL] OUR REF : 2002-02 // YOUR REF : SMA1886U ACCIDENT INVOLVING SMA1886U AND SKH4217T
Attachments: GIA REPORT- SKH 4217 T.PDF
Categories: Santosh

WITHOUT PREJUDICE

OUR REF : 2002-02
YOUR REF : SMA1886U

Dear Sir / Madam,
PRE-REPAIR INSPECTION FOR SKH4217T
ACCIDENT INVOLVING SMA1886U AND SKH4217T ON 01.02.2020.

We refer to the above matter and enclosed herewith our client' s GIA report and notification of Pre-repair inspection for your attention.

We also enclosed herewith the State Court of the Republic of Singapore Practice Direction-Amendment No. 1 of 2016 of 2016 of Pre-repair Inspection for your attention.

Thank you and have a nice day.

Regards,

Shu Shan
Teamwork Garage Pte Ltd
Blk 53 Ubi Avenue 1
#01-24
Paya Ubi Industrial Park
Singapore 408934
Tel: 6844 2475
Fax:6844 2474



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62563562

To : AXA Insurance Pte Ltd

6/3/2020

Survey details

Date of loss	1-Feb-20
Date of appointment	5-Feb-20
Date of survey	5-Feb-20
Location of survey	Teamwork Garage Pte Ltd

Vehicle Details:

Claim Type:	Third Party
Vehicle number	SKH 4217T
Make and Model	HONDA CITY 1.5L I-VTEC MT
Date of registration	5-Dec-12
Excess	
Market Value	\$40,000
Parf Rebate	\$32,537
Nett Loss	\$7,463

Repair details

Initial Estimate	
------------------	--

Proposed/Revised repair cost:

Parts	
Check item	
Labour	
Total	
Lump Sum(if applicable)	

Number of days of repair	6
--------------------------	---

Remarks:

The estimated repair cost of the damaged vehicle is in the region of \$4,000.00 - \$5,000.00

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	718J
Vehicle Details	
Vehicle No.:	SKH4217T
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Feb 2020
Vehicle Make:	HONDA
Vehicle Model:	CITY 1.5L I-VTEC MT
Primary Colour:	Black
Manufacturing Year:	2009
Engine No.:	L15A71804667
Chassis No.:	MRHGM25509P020090
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$18,487.00
Original Registration Date:	05 Dec 2012
First Registration Date:	05 Dec 2012
Transfer Count:	0
Actual ARF Paid:	\$18,487.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	04 Dec 2022
PARF Rebate Amount:	\$11,092.00
Intended COE Rebate Details	
COE Expiry Date:	04 Dec 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$77,291.00
COE Rebate Amount:	\$21,445.00
Total Rebate Amount:	\$32,537.00
Message	
Transfer of ownership or deregistration is not allowed for this vehicle.	

The information contained herein is correct as at 25 Feb 2020

OK

HONDA CITY Used Vehicle List (3 vehicles)

Car Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Company	Availability
Honda City 1.5A SV	\$41,800	\$8,520 /yr	19-Sep-2014	1,497 cc	111,000 km	Auto Advice	Available

Sporty Black Beauty. Regularly And Well Maintained By Owner Who Loves The Car But Is Changing To A 7 Seater. Fully Stock Condition. Perfect Black On Black Combination. Excellent Fuel Economy. Powerful...

Office No. - -

Kelvin - 88180086

Honda City 1.5A SV	\$45,800	\$8,830 /yr	23-Dec-2014	1,497 cc	102,981 km	Thong Lee Trading Pte Ltd	Available
---------------------------	-----------------	-------------	-------------	----------	------------	---------------------------	------------------

SMS Series! Fully Agent Maintain! Very Rare Most Popular Sedan Honda City With Best Fuel Efficiency! Beautiful Showroom Condition With Lowest Depreciation! Best In The Market! Accredited 2019-2020 Pre...

Office No. - 68419655

Ting Fong - 81005015 | Kelvin Tan - 90618082

Honda City 1.5A SV	\$46,800	\$9,010 /yr	29-Dec-2014	1,497 cc	-	Sing Thai Hin Car	Available
---------------------------	-----------------	-------------	-------------	----------	---	-------------------	------------------

Under Utilizer Honda City, Condition Is Almost Flawless, It's SV High Specifications Version, Beautiful Sporty Grey Exterior, Matching Black Interior, Loan Quantum, Trade-In Can Be Discussed. WhatsApp...

Office No. - 67490238

Alan - 96622171 | Joey - 81867412

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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	03/02/2020 12:13
Date Of Accident	01/02/2020 11:30
Exact Location Of Accident	ALONG 42 PAYA LEBAR CRESCENT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH4217T
Insured/Policyholder	
Name Of Registered Owner	WONG YOKE MUI
NRIC No	SXXXX718J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98172884
Alternative Phone No	OTHERS-91066373

Vehicle Particulars

Manufacturer	HONDA
Model	CITY-1.5 VTEC (A)
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00274876
Cover Note Number	

Driver

Name of Driver	WONG YOKE MUI
NRIC No	SXXXX718J
Date Of Birth	24/04/1946
Occupation	INDOOR
Date Of Driving Pass	17/04/1967
Driving Experience	52 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98172884
Fax Number	
Contact Number	OTHERS-91066373
Email Address	NOEMAIL

Address	17 TAI KENG PLACE
Postcode	534335
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?	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACH STATEMENT RECORDED BY KAREN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO WITH THE OWNER.
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMA1886U
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)	

DETAILS OF INJURED PERSON 1

Name	WONG YOKE MUI
Approximate Age	
Injuries Sustain	FACE & SHOULDER
Injured person in which vehicle?	SKH4217T
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

SKETCH PLAN

	Vehicle A - SKH4217T B - SMA1886U
	Legend

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was stationary outside of 42 Paya Lebar Crescent to give way to vehicle B. I stopped to wait the vehicle B to pass by. When vehicle B was travelling, she suddenly accelerated and collided onto my rear right portion of my vehicle. I have video footage to prove my statement.

DECLARATION

I/We declare the foregoing particulars are true in every respect.
 Please be advised that your insurer may have a fourteen (14) days clause whereby the claim against own policy must be made within the stipulated timeframe from the day of occurrence. Kindly check your policy for more details.

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 #2

SKETCH PLAN

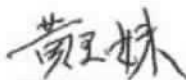
IMPORTANT NOTICE

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 Authorized 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.
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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.
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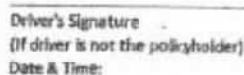
8. Consent under the Personal Data Protection Act (PDPA)

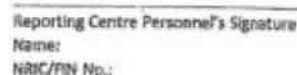
I understand, acknowledge, agree and consent that:

- (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.:


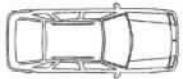
**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

PRE-REPAIR INSPECTION REPORT				
AXA INSURANCE PTE LTD		Ref: CS3/ASM20001991/T1yf3e2		
8 SHENTON WAY #24-01 AXA TOWER		Date: 10-03-2020		
SINGAPORE 068811				
ATTN : KITTY TEO		Code: ASM		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SMA 1886U	Veh. Inspected	SKH 4217T	
Policy No.		Coverage (\$)	0.00	
Claim No.	S0M02F3I	Excess (\$)	0.00	
Assign From	KITTY TEO	Assign Date	05/02/2020	
2. Vehicle Particulars & Condition				
Make & Model	HONDA CITY	c.c	1497	
Engine No.	HIDDEN	Year of Reg.	2012	
Chassis No.	MRHGM25509P020090	Colour	BLACK	
Odometer	98161 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	175/65 R15	BRIDGESTONE	6 mm	
L/H Front Tyre	175/65 R15	BRIDGESTONE	6 mm	
R/H Rear Tyre	175/65 R15	BRIDGESTONE	6 mm	
L/H Rear Tyre	175/65 R15	BRIDGESTONE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.				
5. General Information				
Accident Date	01/02/2020	Inspect Date / Time	05/02/2020 (12:53 PM)	
Survey held at	TEAMWORK GARAGE PTE LTD 53 UBI AVENUE 1 #01-24 SINGAPORE 408934			
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 \$4,000-\$5,000				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		6 Working Days		

Report Ref No. CS3/ASM20001991/T1yf3e2

Inspected By



MOHAMAD TAUFIKH

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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