

ASS. REC. BY:

REF: CS3 / ASM20002254/TIV f3eb Special Instruction:

Surveyor: Tanak

ASSIGNMENT (Office)

From (Person): Chan Kian Chuan of ASM AXA Date/Time: 10/1/2020

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SX 4529X Insured: SCP 44

at Workshop m/s Teammark Tel: 68442475

of BIK 53 uls Ave 1 #01-24

Policy No: Claim No: S0M02PSD

Sum Insured: Excess:

Make of Veh: D.O.A. 7.2.2020

(Client's Record)

CA / REV / REP. / REV 24 HRS

Date/Time: 10/1/2020 11.45am Person Contacted: Shu Shan

H.O.D. Endorsement:

Vehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	SJX 4529X - CC3/AXA 110/6024/NQ/IC3L1 D. of - 31/07/2011
	SCP 44 - X
12/2/20	Send IA in SMART claim
14/2/20	Submit PRS, repair range \$5000 - \$6000
	Dismantle parts: 11/02/2020

ASS. REC. BY:

REF: ASM(A-XA)

PRS

ASSIGNMENT

From:

Date:

10/21/2020

Estimated Cost:

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

To Inspect Vehicle No: SJX 4529X

at Workshop m/s Teamwork Garage

of 53 Ubi Ave (#01-24

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.

N/S	O/S

Bal. or Market Value: \$15K - \$17K.

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

mp'

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SJX 4529X Yr Regn: 2010 June.

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

Truck / Trailer or

Make:

Mazda 2 sedan

c.c

1498

Colour:

Black

A/C: Insured / Std / NI / NA

Sp. Reading

143555

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

MM 60E1ay1A0106584

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:

155/55R15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

C

mm

R/Bal.

C

mm

L/Bal.

L

mm

L/Bal.

L

mm

D.O.A.

D.O.I.

10/2/20

Survey held at

Teamwork Garage

0120PM

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

\$5000 - \$6000, 7 days

12/2/2020

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2) 14/2 - typist

Days Of Repair: 7

Resurvey No. of Trip:

Survey Fee:

100

Transportation:

S + RS. SI

Photos

Others

Report Format: SMART claim

Lump Sum / L.B.I.:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Insp (\$

☐

Weekend (\$

TOTAL

100




Service Request Details

Claim

S0M02FSD

Reference

None 

Loss Date

February 7, 2020

Report Date

Feb 10, 2020 10:08:36 AM

Request Date

February 10, 2020

Due Date

February 17, 2020

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SJX4529X



Model
MAZDA

Service Address

1.1.1

Primary Contact/Insured

LIM CHEOW YOUNG (LIN ZHAORONG)
40 SPRINGLEAF HEIGHT, 788134, Singapore

MOTOR.OPERATIONS@GNM.COM.SG

Claim Handler

CHAN Kian Chuan
68805444
kianchuan.chan@axa.com.sg

Additional Instructions

4

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message

Summer Lee (LKK Auto)

From: Darren <claims@teamworkgarage.com>
Sent: Monday, 10 February, 2020 10:10 AM
To: do not reply
Subject: [EXTERNAL] RE: YOUR REF : SJX4529X OUR REF: SOM02FSD/KC

Categories: Shailendra

WITHOUT PREJUDICE

We refer to the list below, it is not acceptable.

We propose to use one of the motor surveyors named below:

WG APPRAISAL – WINSON

CL APPRAISAL – ALAN

Darren
Teamwork Garage Pte Ltd
53 Ubi Avenue 1
#01-24 Paya Ubi Industrial Park
Singapore 408934
Tel: 68442475
Fax: 68442474

From: do not reply
Sent: Monday, 10 February 2020 10:11 AM
To: TEAMWORK
Subject: YOUR REF : SJX4529X OUR REF: SOM02FSD/KC

'WITHOUT PREJUDICE'
SAVE AS TO COSTS

Dear Sir,

We want 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 below to conduct the joint pre-repair survey as a Single Joint Expert.

List of our motor surveyors:	
1.	LKK Auto Consultants Pte Ltd
2.	Infiniti Appraisal Services
3.	Priority Services Pte Ltd
4.	AXA in house surveyor

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 one or more of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert. Meanwhile, please furnish us with estimate quotation in order for our surveyor to complete the pre repair survey.

If there be any injury claims by your client, please combine it in one Letter of Demand in light of one cause of action, save as to costs and expenses.

Should you have any queries, please feel free to contact our Claims Service Team at 1800-8804888 or email us at motor.survey@axa.com.sg

Best Regards
Shailendra

From: TEAMWORK [mailto:claims@teamworkgarage.com]
Sent: Monday, February 10, 2020 9:29 AM
To: SG AXA Insurance SM AXA SGP - Motor Survey <motor.survey@axa.com.sg>
Cc: TEAMWORK <claims@teamworkgarage.com>
Subject: [EXTERNAL] OUR REF : 2002-18 // YOUR REF : SCP4U ACCIDENT INVOLVING SCP4U AND SJX4529X

WITHOUT PREJUDICE

OUR REF : 2002-18
YOUR REF : SCP4U

Dear Sir / Madam,
PRE-REPAIR INSPECTION FOR SJX4529X
ACCIDENT INVOLVING SCP4U AND SJX4529X ON 07.02.2020.

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

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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	774H
Vehicle Details	
Vehicle No.:	SJX4529X
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Feb 2020
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA2 SDN AT V GRADE
Primary Colour:	Black
Manufacturing Year:	2010
Engine No.:	ZY598907
Chassis No.:	MM6DE10Y1A0106384
Maximum Power Output:	76.0 kW (101 bhp)
Open Market Value:	\$16,352.00
Original Registration Date:	16 Jun 2010
First Registration Date:	16 Jun 2010
Transfer Count:	1
Actual ARF Paid:	\$16,352.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Jun 2020
PARF Rebate Amount:	\$8,176.00
Intended COE Rebate Details	
COE Expiry Date:	15 Jun 2020
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$30,051.00
COE Rebate Amount:	\$1,035.00
Total Rebate Amount:	\$9,211.00

The information contained herein is correct as at 11 Feb 2020

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	07/02/2020 15:52
Date Of Accident	07/02/2020 13:45
Exact Location Of Accident	ALONG 53 UBI AVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX4529X
Insured/Policyholder	
Name Of Registered Owner	LOH TANG MENG
NRIC No	SXXXX774H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96654417
Alternative Phone No	OTHERS-96654417

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA2 SDN AT V GRADE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA105182/1
Cover Note Number	

Driver

Name of Driver	LOH HUNG SEAH
NRIC No	SXXXX159G
Date Of Birth	19/12/1936
Occupation	INDOOR
Date Of Driving Pass	17/12/1960
Driving Experience	59 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96954417
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	13A SEA BREEZE AVENUE SPORE 487539
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
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 SKETCH PLAN

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	SCP4U
Vehicle Make/Model/Colour	LAND ROVER / RANGE ROVER SPORT 3.0S/C TSS 7S SR
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	LOH HUNG SEAH
------	---------------

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SJX4529X

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan

SKETCH PLAN

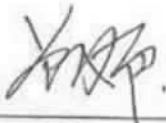
IMPORTANT NOTICE

- 1) Please report correctly on the details of the accident to speed up the claims process.
- 2) This form must be completed by the policy holder 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 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.
- 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 the [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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposed stated, or
 - (II) For complying with requirements under my regulations, laws or court orders.

Policyholder's Signature
Date & Time:



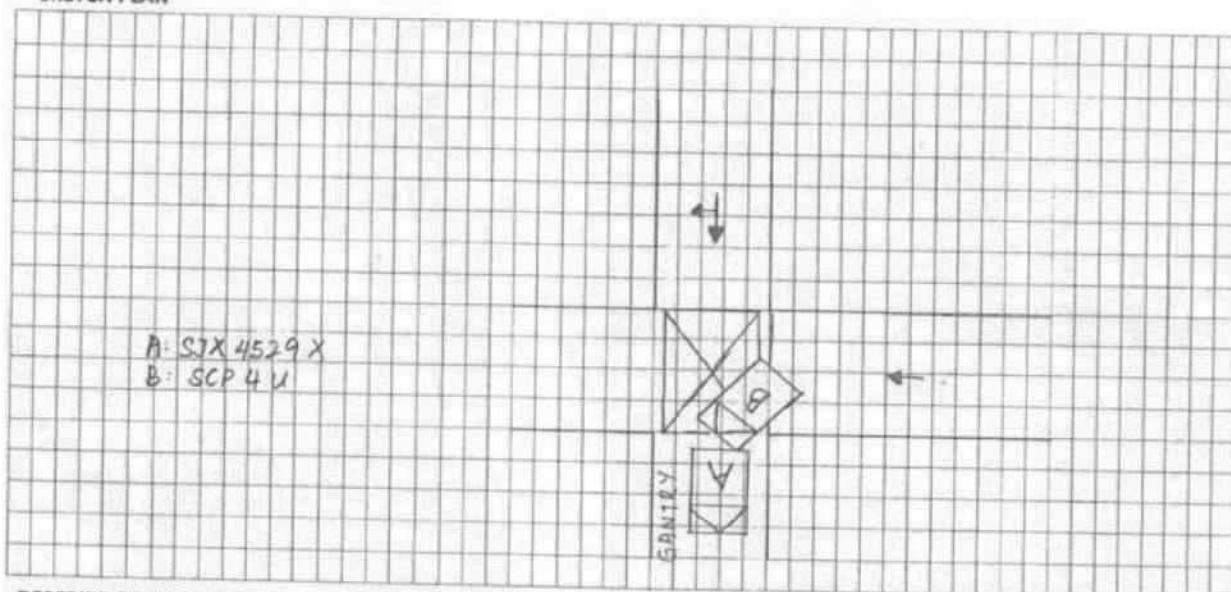
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stationary to wait the traffic to be clear before exiting 53 Ubi Avenue 1. When I was about to move off, I suddenly felt an impact from my rear. Vehicle B collided onto the rear portion of my vehicle.

*****for company vehicle only*****
I _____ is the _____ of
company _____ and im using the vehicle
_____ for work /private purpose .

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.: _____


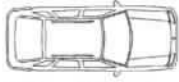
**LKK Auto Consultants Pte Ltd**

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/ASM20002254/T1vf3e2		
8 SHENTON WAY #24-01 AXA TOWERS SINGAPORE 068811		Date: 14-02-2020		
ATTN : CHAN KIAN CHUAN		Code: ASM		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SCP 4U	Veh. Inspected	SJX 4529X	
Policy No.		Coverage (\$)	0.00	
Claim No.	S0M02FSD	Excess (\$)	0.00	
Assign From	CHAN KIAN CHUAN	Assign Date	10/02/2020	
2. Vehicle Particulars & Condition				
Make & Model	MAZDA2 SDN	c.c	1498	
Engine No.	HIDDEN	Year of Reg.	2010	
Chassis No.	MM6DE10Y1A0106384	Colour	BLACK	
Odometer	143555 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	185/55 R15	BRIDGESTONE	6 mm	
L/H Front Tyre	185/55 R15	BRIDGESTONE	6 mm	
R/H Rear Tyre	185/55 R15	BRIDGESTONE	6 mm	
L/H Rear Tyre	185/55 R15	BRIDGESTONE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
5. General Information				
Accident Date	07/02/2020	Inspect Date / Time	10/02/2020 (01:20 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 \$5,000-\$6,000				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		7 Working Days		

Report Ref No. CS3/ASM20002254/T1vf3e2

Inspected By



MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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