Surveyor : Rasi	()	ASSIGN	MENT (Office)			
From (Person); GGV9	low	of	C1L	Date/Time:	71.2.nn	10.599.M
Estimated Cost:			Bill to:			
OD TP/WS/TPRE		A/INV/MV	7CS			
To Inspect Vehicle No:		749L	Ins	ured:		
at Workshop m/s Sn/) Ah Tu			Tel: 62 6	86183	
of Blt 3 No nar	Roud North	NO1-18		contr.		
Policy No: DMCVS			Claim No: SNW	ווףשפכנופל	/ XDTAUG	L/CECILIA
Sum Insured:			Excess:			
Make of Veh: (Client's Becord)				D.O.A	18/21 20	20
CA (REV) REP. / Date/Time: 11-05a. W	REV 24 HRS カルカカ P	erson Contacte	Joyce	H.O.D. En	dorsement:	
Date/Time Action/	Instruction (v	') Estimo	te Remark: Check	the Cau	so of Are	(Pine of The
2012	SHam Spoke	n to	Cecilia naed	to do in	nvocti gati	on
241>100 @9				D 10 11		

.

	4	ASSIGNMENT	COEXPIRY: 2027
From:	Date: 21. 1. 70.70	Veh No: X01749L	Yr Regn: 2007 / SH
Estimated Cost:		Type: M.Car / M.Cycle / Bus / Var	
OD / TP / WS / TP RES / OD RES	J EVA / INV / MV	(ruck) Trailer or	
	D 749L	Make: (Suzu CYZ	52L ac 15681
at Workshop m/s Sng	An Tee	Colour WHITE	A/C: Insured / Std / NI / N
The contract of the contract o	d hoah #01-18	Sp.Reading	T/Radio: Insured / Std / NI / I
Insured:	,	Eng/No:	
Policy No.			217700086
Claims No.		Gen. Cond: Good (Call) Poor (C	
Sum Insured:	Excess:	Steering: Inorder / Jammed / Lea	
con avec of	LAUGSS.	Brake: Inorder / Jammed / Lea	~
(Client's Record)	Source of the Care of the	Modi: MIP S/Rim / STD A/Ri	
Make of Ven. (Nect +Ne	STUGF CAPACE CHAPE IN		
12/11/12/19/14/14			15/80R22-8
(Policy Condition)	ed its N/S	R: O/S RS / DUN / FXNOVA / GY / FS / I	The Lattice Columnia Lattice Columnia
Remark: The veh had commend repair at the time of in	1,47,10	TOYO / YOKO or	LIZA / MIC / OHTSU / PIR / SUMI /
600 To 100 Server 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Bal, or Market Value:	60K	Front	R/Bal. 8/8
IDAC Accident Rport:	Consistent?: Yes or No	R/Bal. 8 mm	cle
GIA / PR Seen:	Consistent? : Yes or No	11111	L/Bal. 6/8
The state of the s	ys Res.: Yes or No	10 00	0.01. 21/02/2021
Lum Sum: %	3 Val.: Yes or No		A4 186
CA (REV) REP. / 24 H			O/S / N/S / U/C / Rooftop or
Date: Person C	Vehicle: IN ontacted:		Body Structure affected due to coll
Date / Time Action / Instru		The Ord / Chassis maine /	Body Structure anested due to con
XD H441		0	1
			Marengo
			24/2/2020
			V V 1
*			
		. F.	
Date/Time, File Pass to?	Preli. Report	Days Of Repair:	
1)	Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?			Transportation:
2)	Ad	d Fee: Site Insp (\$)3+R5SI
		Interview (\$	Phoios
Report Formet :		Tech. Inya (\$) OBER (900F) \$17088
Lump Sum / LBJ: (\$)	: Washing Q)
		/\ .	TOTAL

...CLAIM SUBFOLDER...(New Assignment)

1344	Natified :	Est Submitted	200 200	_						
14222	19 Feb 2020	19 Feb 2020	21 Feb 2020			id) Submitt	est InstAuthin	nd	Status	
Main	Sendback Est	17:05 \$\$0.00	10:59 Assign							ignment
	Hain	Referen	ice	CI	im Details		Decision		_	25.
CLAIM SL	BFOLDER DETA	ILS	-				Docume	nts		Show All
Insured:		INSTRUCTION PTE	170							
Vehicle Reg No.:	XD1749L	THOUSAND PIE	LID, Co. Reg.			18/02/20	020 09:00 - :59			
Claim Type	OD / CHUR				Date of Loss	148 Mo	nths and 22 Day	From 13	A Bee De	
	OD / SNM20	D200911/XD174	9L/CECILIA	1	Policy/Cover Note No.:	mi. i.m. a. 2014	[148 Months and 22 Days From LTA Reg Date (Man Yr)] DMCVSN7052401912 (TP, Fire & Theft) Coverage: 27/09/2019 - 26/09/2020			e (Man Yr))
Repairer:	Sng Ah Tee M	lotor & Panel Servi		1	xcess:	5\$0.00		10/09/201	20	
Handling Insurer:	China Taiping	lotor & Panel Serv Insurance (Singa	pore) Pte. Ltd	oneer) Bil	c 3 Pioneer F	load North,	#01-18, 628457	Planeer	- Tel: 626	8 6183
Adjuster:	LKK Auto Con	sultants Pte 11d ((O) Toll dame		ci: 0399 91	II [Hand	lled by Cecilia Lo	ow - 638	96530]	
Driver/Custi fian:	· Comment of the second	sultants Pte Ltd (F I CHOY (39 / Male)	14/ - TELL DESD	*3561 [Final Dat	ALIA D310	2/20201			
Adj Asg. Remarks:	PLEASE SURVE	Y/CHECK THE CAUSE	OF FIRE (FIRE	& THEFT	DOI 1047	0337 Email	NOEMAIL			
SSOCIAT	ED MAIL RECEIV									
	mail for this case.						1	View All	Compose	Case Mail
ALL ASSOC	TATED TASKS									
Due Date						View All	Search Tasks	Create 8	lew Task	****
io results.	5.1190.004. 440	pe Task Group	Subject	Handler	Assign	ed By	Completed On		sated On	Complete Done?

View Received Message

This mail is associated with :

XD1749L (SNM20D200911/XD1749L/CECILIA)

Feb 18 2020 9:00AM [SING TEC CONSTRUCTION PTE LTD] Sng Ah Tee Motor & Panel Service Pte Ltd

Reply	Reply All	Mark as Unread	Print Message	Delete Message	Forward				
From To Subject	LKK_HQ	aiping Insurance Adj Mandate App						21:44 PM.	
Approved	i:0,00:plea	se let us have you	r findings on the	cause of fire to da	maged vehicle	for our next	t course of act	ion.	

DOCUMENTS SUMMARY

There are no documents.

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

То:	China Taiping Insurance (Singapore) Pte. Ltd. 3 Anson Road #16-00 Springleaf Tower Singapore 079909	From:	LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933	
Attn:	Cecilia Low	Date:	24 Feb 2020	
	Desiles les	A also	d	

Preliminary Advice

Vehicle No	: XD1749L	Accident Date	: 18/02/2020
Make	: ISUZU CYZ52L	Policy No.	: DMCVSN7052401912
Assignment Date	: 21/02/2020	Excess	: S\$0.00
Date of Inspection	: 21/02/2020	Est. Duration of Repair	: 0.00
Inspection At	: SNG AH TEE MOTOR & PAN BLK 3 PIONEER ROAD NOR SINGAPORE 628457	EL SERVICE PTE LTD (PIONEER) TH, #01-18	

The vehicle sustained impact / damages front portion and parts claimed are consistent to the accident.

Point of Impact / General Description of Damages

Salvage Value

Margin for Repair

Repairer's Estimate (Gross)	:S\$	TOTAL LOSS	
Revised Amount	:S\$	TOTAL LOSS	
Check Items (Estimated)	:S\$	0.00	
Total	:S\$	0.00	
Lump Sum Repair	:S\$		
Total Loss Consideration			
New for Old Value	:5\$		
Pre-Accident Value	:S\$	60,000.00	
COE / PARF Rebate	:S\$	30,817.00	

:S\$

:S\$

29,183.00

Re	em	ark	<u>us</u>
()	The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
(X)	The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
()	Other comments :

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No. XD1749L	
Make/Model ISUZU / CYZ52L	
Vehicle Type :	Vehicle Attachment 1:
B33 - Goods (Open) Tipper/Dumper Truck	No Attachment
Vehicle Scheme:	Charles W.
Normal	Chassis No.: JALCYZ52L77000086
# WO	JALC 12321/7000066
Propellant: Diesel	Engine No.:
Diesei	6WG1406564
Motor No.:	Engine Capacity:
	15681 cc
Power Rating:	Maximum Power Output :
(*)	- Cathair Cathat:
Maximum Laden Weight :	Total News Contractor
28000 kg	Unladen Weight:
	11400 kg
Year Of Manufacture : 2007	Original Registration Date:
2007	27 Sep 2007
Lifespan Expiry Date:	COE Category:
26 Sep 2027	C - Goods Vehicle & Bus
PQP Paid:	COE Explry Date :
\$40,535.00	26 Sep 2027
Road Tax Expiry Date:	
w	PARF Eligibility Expiry Date :
W 1007 151	
Lay-up Expiry Date:	Inspection Due Date :
27 Feb 2021	26 Sep 2020
Intended Transfer Date: 06 Mar 2020	
00 Mai 2020	
CO2 Emission :	CEV/VES Rebate Utilised Amount:
*	The state of the s
CO Emission :	HC Emission :
•	·
NOx Emission :	
The second of th	PM Emission:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	598M
Vehicle Details	
Vehicle No.:	XD1749L
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Feb 2020
Vehicle Make:	ISUZU
Vehicle Model:	CYZ52L
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	6WG1406564
Chassis No.:	JALCYZ52L77000086
Maximum Power Output:	5
Open Market Value:	\$80,494.00
Original Registration Date:	27 Sep 2007
First Registration Date:	27 Sep 2007
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	(912)F36
PARF Eligibility:	No
PARF Eligibility Expiry Date:	·
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	26 Sep 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$40,535.00
COE Rebate Amount:	\$30,817.00
Total Rebate Amount:	\$30,817.00
The information contained herein is correct as at 19 Feb 202	0

OK

60,000 30,817 29,183

Enquire if Your Vehicle is Under Recall

Vehicle Recall Details

* ONLY INFORMATION ON VEHICLE RECALLS SUBMITTED FROM 9 APRIL 2007 IS AVAILABLE

Owner ID 598M Vehicle No. XD1749L Make/Model ISUZU/ CYZ52L Engine No.: 6WG1406564 Chassis No.:	
Make/Model ISUZU/ CYZ52L Engine No.: 6WG1406564	
Engine No.: 6WG1406564	
6WG1406564	
Chassis No.:	
JALCYZ52L77000086	
Recall Details:	
No Recall Detail records	

Save as PDF

OK >

Print

MSAT20022196 / Sng Ah Tee Motor & Panel Service Phe Ltd. - Phoneer ENTRY DATE & TIME. 19/02/2020 09:50 SUBMITTED BY: Samantha Tan Yong Sing

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 <u>truthful and accurate</u> as possible. Any willful misrepresentation or witholding 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 ladgement 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.

	A SECURITION OF THE PROPERTY O
	ACCIDENT STATEMENT
Date Of Report	19/02/2020 09:50
Date Of Accident	18/02/2020 09:50
Exact Location Of Accident	WOODLANDS AVE 12 BEF WOODLANDS AVE 5 JUNCTION
Country/State of Loss	SINGAPORE
D CHARLES AND THE RESERVE OF THE PARTY OF TH	DETAILS OF OWN VEHICLE
Vehicle Registration Number	XD1749L
Insured/Policyholder	
Name Of Registered Owner	SING TEC CONSTRUCTION PTE LTD
Co Reg No	1XXXXXXX9BM
Email Address	SY.TAN@SINGTEC.COM.SG - MLI - TO TOLL WANT
Mobile Phone No	non Je leta. Hidin
Alternative Phone No	OFFICE-63162108 - Cay carl collect
Vehicle Particulars	
Manufacturer	ISUZU MAIL STONES
Model	CYZ52L-15.7 D (M) COLL Har to Seroko
Exact Purpose for which vehicle was being used at time of accident	Mil
Are you claiming under your own insurance policy for repair to your vehicle?	YES - che barbons.
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE - ILL JONANNIO WITH
Insurance Company	- respirate top advisely
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO ENO CO DUNT OFFICE
Policy Number	DMCVSN7052401912
Cover Note Number	- not arough.
Driver	1111
Name of Driver	RONLY LEE WAI CHOY - NSTAN - (0) 1) SCOT-
Passport No/FIN	manager and the second
Date Of Birth	29/09/1980 - SCDFCONCIA 4 MI
Occupation	
Date Of Driving Pass	OUTDOOR 07/10/2008 - SID Mh put out 11 YEARS AND 4 MONTHS MALE
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE TO TO
Mobile Number	MALE (LOCAL) +65-91506337 - police come fate Statement. NOEMAIL - GUMANGE Page 1 of 26
Fax Number	
	chatener +.
Contact Number	

i		- towner care in
(a)		towing can
		- Ja houl.
Address	N/A	2 -4) -3
Postcode		
Was driver an employee of the Insured's Company	YES	- the Marage say!
If No, Relationship of the Driver with the Insured		1 2-Paylon
Vehicle Registration Number of Driver's Own		- Driving for 7-8 millis.
Vehicle		
Insurance Company of Driver's Own Vehicle		- I pasor drive
		- 1000
0 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-	- he toke for solvicili.
General Information of the Accident		- VE 10/42 and 2000,000
Type Of Accident	FIRE, EXPLOSION OR LIGHTN	WING .
Weather Conditions	CLEAR	- no public rulight
Road Surface	DRY	10 64 x 1001 10 110 111
Other Information		
Was any foreign vehicle involved in this accident?	NO	
Number of vehicles (including own vehicle) involved in the accident	1	_
Was any body injured in the Accident?	NO	
Was any injured conveyed to hospital by ambulance?	NO	
Was any other material or property damaged?	NO	
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	WOODLANDS DIVISION HQ	
Police Station Address	ROAD: 1 WOODLANDS STREE SINGAPORE	ET 12 , POSTCODE: 738622 , COUNTRY:
Police Station Contact	TEL NO: - FAX NO:	
Was notice of intended Prosecution given?	NO	
If Yes,against whom?		
Circumstances of Accident		
AS PER POLICE REPORT NO: L/20200218/7018		
Attachment(s)		
Are accident photos available for attachment?	YES	
Was there any video captured by Car Camera?	NO	
Was there any audio recorded?	NO	

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 faise reporting may be referred to the Police for investigation.
- 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.
- 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 the purpose(s).
 - 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 Patsonal 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;
 - 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.

SHETRICTON TO

Policyholder's Signature Date & Time: #

Oriver's Signature (If driver is not the policyholder) Date & Time: 8~

NRIC/FIN No.:

Reporting Centre Personnel's Signature Name:

I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TRIGERAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY, I WILL CHECK MY POLICY FOR MORE DETAILS.

ATMANUE SECTION SUB-ES

Sketch Plan Pg. 2

	G [[] [] [] [] []						-
						(B)xb1748	11
					1		1-1"
	1181				-11-11		
			Phensippor			- 1	
			W/(13				
		A CONTRACTOR OF THE PARTY OF TH	el AVL5	•	-		
			1				
				- 13 11	111		- 4
				+++			
					17.5		
				1 1. 10		1 1	
CRIBE CIRCUMSTA	NCES OF THE ACCID	DENT					
			. 1=		_		
HE DRY DON	a aport No	: 12020	021 F/70	ld .			
11-1-1	-						
					own policy		
				D Claim	third owly		
				D Claim	third party OD / TP at	other works hop_	
				D Claim	third party OD / TP at	other works hop_e	
TARATION				D Claim D Claim D Form	third party OD / TP at cord purpos DW	もくせん TOF WO VA	019
				D Claim D Claim D Form Policy No.	OD / TP at cord purpor	もくせん TOF WO VA	019
declare this psegoin	g particulars are true	In every respect-		D Claim D Claim D Form	third party OD / TP at cord purpos DW	other works hop_ ev Sw37th 24 	019
declare the megain	g particulars are true	In every respect.		D Claim D Claim D Form Policy No.	third party OD / TP at cord purpos DW	もくせん TOF WO VA	019
declare the megain	g particulars are true	In every respect.		D Claim D Claim D Form Policy No.	third party OD / TP at cord purpos DW	もくせん TOF WO VA	019
declare this psegoin	g particulars are true	In every respect.		D Claim D Claim D For re Policy No.	Third party OD / TP at cord purpor DWI Chiri A	CV SW 70±24 CV SW	が出
decigle the assigning		45		D Claim D Claim D For re Policy No.	Third party OD / TP at cord purpor DWI Chiri A	CV SW 70±24 CV SW	が出め
18/	Driver's	In every respect	politier)	D Claim D Claim D For re Policy No.	third party OD / TP at cord purpor DWI Chtr\A -	もくせん TOF WO VA	が出め

POLICE REPORT Pg. 1





1 of 2

Report No. L/20200218/7018

POLICE REPORT (NP299)

Police Station Of Origin Woodlands Division HQ 1 Woodlands Street 12 SINGAPORE 738622 Tel No:1800-4660000

Date/Time Report Made 18/02/2020 13:21	Vide Report No.		Station Diary No.	
Name Of Informant RONLY LEE WAI CHOY	Address 895C W WOODL	Saray Advance		
ID Type / ID No. FIN NO / F2810481L	Contact No. Home/Office: Mobile: 91506337			
Nationality MALAYSIAN	Email Address zaklee111@gmail.com			
Occupation LORRY DRIVER	Sex Male	Age 39	Date of Birth 29/09/1980	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 18/02/2020 09:50	Location Of Incident WOODLANDS AVENUE 12			
Brief details.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

I am employed under SING TEC DEVELOPMENT PTE, LTD.

On 18/02/2020 at 0950hrs, I was driving my lorry (XD1749L) towards Senoko drive. As I was travelling along. I noticed there were weird sound coming from the vehicle hence I had stopped along the road to make a check.

I then saw the fire coming from the front left tyre, I tried to use the fire extinguisher but to no avail.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this		
Not applicable	report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 18/02/2020 13:21		
Officer In-Charge Of Case:	Classification Of Case:		

Authentication Stamp

POLICE REPORT Pg. 2





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20200218/7018

The fire then became bigger hence I then called for SCDF. Police and Firefrighters were on scene. The fire was only managed to be put out upon SCDF arrival.

I amn lodging this report for my company's insurance purpose.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Informant:
The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:
18/02/2020 13:21

Officer In-Charge Of Case:

Classification Of Case:

Sng Ah Tee Motor & Panel Service Pte Ltd (Co. Reg. No. 200810440N)

Blk 3 Pioneer Road North, #01-18 Singapore 628457

Tel: 6268 6183 Fax: 6268 1429 Email: sngahtee@singnet.com.sg;darren@sngahtee.com;janice@sngahtee.com

Ref. No: Date of Loss:

Driveable?

Party At Fault:

Third Party Involved?

Vehicle Reg. Date:

Chassis No:

18/02/2020

UNKNOWN

27/09/2007

JALCYZ52L77000086

NO

INSURER:

China Taiping Insurance (Singapore) Pte. Ltd. (HQ)

PARTICULARS OF CLAIM

Claim Type: Policy No:

OD (OWN DAMAGE)

DMCVSN7052401912

XD1749L

Driver Age/Info: TP Injury Involved?

Insured/Claimant:

Vehicle Reg. No.:

39 / MALE

NO

Driver:

SING TEC CONSTRUCTION PTE LTD

RONLY LEE WAI CHOY

Make/Model: Vehicle Colour: ISUZU CYZ52L, 15.7 D (M)

WHITE

Engine No:

6WG1406564

Odometer: 5 KM

Paint Type:

Total Loss?

YES

Est. Duration of Repair (day) 0

Description of Accident/Loss AS PER POLICE REPORT NO: L/20200218/7018

Present Location:

SNG AH TEE MOTOR & PANEL SERVICE PTE LTD (PIONEER)

	Amount
	0.00
	0.00
	0.00
	0.00
	0.00
Nett Amount (S\$)	0.00
	Nett Amount (S\$)

This claim is handled by: SAMANTHA TAN YONG SING

Generated using Merimen e-Claims Internet Estimation & Adjusting System

Hp 90010068
21/02/2026 @/610
Total Loss
Vehille is uneconomical
to reper

REPAIR DETAILS

Reference

Part Source:

Parts:

ISUZU CYZ52L 15.7 D (M) (Model not available in database)

Labour:

Repairer's

(Price-denominated Standard List)

Print Code: Sng Ah Tee Motor & Panel Service Pte Ltd/XD1749L/19/02/2020 11:17

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 *.

Estimates on Parts

There are no new parts selected.

Sng Ah Tee Motor & Panel Service Pte Ltd/XD1749L/19/02/2020 11:17. Not valid without Reference section. Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

.There are no new miscellaneous items selected.

Estimates on Labour

There are no labour items selected.

Sng Ah Tee Motor & Panel Service Pte Ltd/XD1749L/19/02/2020 11:17. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >





Date/Time: 25/02/2020 15:00

Fire Report Application

Your request for the Fire Report has been confirmed and the amount of SGD170.00 will be deducted from your account. You will receive the report within 8 working days upon completion of investigations. Please quote the following transaction number when making enquiries.

● Download Tax Invoice/Receipt

Transaction Number: FR2020022504598

Transaction Number: FR2	2020022504598		Date/Time: 25/	12/2020 15:00				
INCIDENT DETAILS								
Date and Time	18/02/2020 09:50							
Location of Fire	WOODLANDS AVE 12	WOODLANDS AVE 12 BEFORE WOODLANDS AVE 5 JUNCTION						
Fire Involved	XD1749L							
REQUESTOR DETAILS								
Requestor Type	Insurance Companies							
Requestor ID Type	Singapore Pink	Requestor ID	S7028214C					
Name of Applicant	VERON CHEN							
Company Name	LKK AUTO CONSULTA	ANTS PTE LTD						
Company UEN								
Company Reference Number	CS/CTI20002982/R1vf3	3						
CONTACT DETAILS								
Mode of Collection	Email							
Main Contact No.	62563561	Office No.	62563561					
Handphone No.	Fax No. 62564315							
Email Address	sur@lkkauto.com							
Address	Block No.	51 Floor No.	01 Unit No.	25				
	Street Name	UBI AVE 1						
	Building Name	PAYA UBI INDUSTR	IAL PARK Postal Code	408933				
PAYMENT DETAILS								
Payment Mode	Credit/Debit Card							
EP Reference No.	5826143374786758203	3271						
PSi Reference No.	aa73477e-4a2c-4cd9-b	7ef-4dabbf0fb147						
Total Fees	SGD170.00							



SINGAPORE CIVIL DEFENCE FORCE 91 UBI AVENUE 4 SINGAPORE 408827 TELEPHONE: 6280 0000 GST REG NO: MG-8400000-5

TAX INVOICE/RECEIPT

Name

: VERON CHEN

Address : 51 UBI AVE 1

#01-25 PAYA UBI INDUSTRIAL PARK

Singapore 408933

Receipt No: 5826143374786758203271

Date/Time : 25/02/2020 15:00

eService ID: FR2020022504598

S/No	Payment Mode	Description	Reference No	Net Amount	GST (7% GST)	Gross Amount
1	Credit Card	Fire Report	FR2020022504598	170.00	0.00	170.00
					Total Amount (SGD)	170.00

REMARKS: Date and Time [18/02/2020 09:50] - Location of Fire [WOODLANDS AVE 12 BEFORE WOODLANDS AVE 5 JUNCTION]]

Note: This is a computer generated receipt. No signature is required. Receipt is void if payment is dishonoured.

Veron Chen (LKKAuto)

From:

SCDF Payment Acknowledgement <donotreply@scdf.gov.sg>

Sent:

Tuesday, 25 February 2020 3:06 PM

To:

SUR

Subject:

Order Confirmation

CyberSource

Receipt

Date: 02-25-2020 Order Number: FR2020022504598

Billing Information

LKK AUTO CONSULANTS PTE LTD

CHEN VERON

51 UBI AVE 1 #01-25 PAYA UBI INDUSTRIAL PARK

SINGAPORE

SG

408933

sur@lkkauto.com

62563561

Payment Details

Order Total

Visa

Total amount SGD 170.00

xxxxxxxxxxxx9189

Please keep a copy of this receipt for your records