

22/03/2002

ASS. REC. BY:

REF: CS/CTI 2000 2973/ Fy f3

Special Instruction:

Surveyor: Ram

ASSIGNMENT (Office)

From (Person): Adeline Chng Pui Winof CTIDate/Time: 21.2.2020 9.15a.m

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SG 1017JInsured: SMJ 8368Eat Workshop m/s Go ahead Singapore

Tel:

of 2- loyang wayPolicy No: DM4(SNA00000481900Claim No: SM201500709002

Sum Insured:

Excess:

Make of Veh:

D.O.A. 7.2.2020

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 21/2/2020 9:10-30am

Person Contacted:

denise aVehicle: IN/OUT

Date/Time	Action/Instruction (✓) Estimate Pool - 90036715
	SG 1017J - NA/CTI 20002209/h4 D.O.A - 07/01/2020
	SMJ 8368E - NA/CTI 20002209/h4 D.O.A - 07/01/2020

ASS. REC. BY:

Ram

REF: CTI

## ASSIGNMENT

From:

Date:

24/2/2020

Estimated Cost:

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

To Inspect Vehicle No:

SG1017J

at Workshop m/s

Go-Ahead

of

2 layeng way

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

10am-11am  
clan's sa

(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

(up)

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SG1017J

Yr Regn:

08/06/2016

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

Truck / Trailer or

Make:

mercedes caitano

c.c

6374

Colour

green

A/C:

Insured / Std / NI / NA

Sp. Reading

277282.5

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

NFB2508323130482

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:

275/70 R22.5

R:

275/70 R22.5

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

TOYO / YOKO or

conti

Front

Rear

R/Bal.

6

mm

R/Bal.

6/6

mm

L/Bal.

6

mm

L/Bal.

6/6

mm

D.O.A.

07/02/2020

D.O.I.

24/02/2020

Survey held at

Go ahead Singapore

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

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

28/4/20 Typist

Report Format :

Lump Sum / LBI: (\$

P/P \$9861-53

Days Of Repair: 5

Resurvey No. of Trip: 2

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

Photos

Others

TOTAL

P/P: \$9861.53/= with 5 repair days (Red \$1258-90, 11%)

confirm on 6/4/2020 with Yag Shen

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	17 Feb 2020		21 Feb 2020 09:25 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:			
Main Claimant:	GO AHEAD SINGAPORE PTE LTD, Co. Reg. No.: 201541900C		
Vehicle Reg. No.:	SG1017J	Date of Loss:	07/02/2020 05:00 - :59
Claim Type:	TP / SNM20D200709C02	Policy/Cover Note No.:	DMHCSNA00000481900
Vehicle Reg. No. (Insured):	SMJ8368E	Policy No. (Claimant):	D-19094111MFBP
		Excess:	S\$2,000.00
Repairer:	Go-ahead Singapore (HQ) 2 LOYANG WAY, 508776 Loyang - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Adeline Chng Pei Wen]		
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 03/03/2020]		
Adj Asg. Remarks:	survey revert		

### ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

### 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.									

**Summer Lee (LKK Auto)**

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**From:** Adeline Chng <adeline.chng@sg.cntaiping.com>  
**Sent:** Friday, 21 February, 2020 9:02 AM  
**To:** 'assignments'  
**Cc:** Clarissa Koh; Claims Dept of CTI  
**Subject:** RE: [EXTERNAL] RE: OUR REF: SNM20D200709/SMJ8368E/ADELINE - Accident involving SG1017J x SMJ8368E on 07/02/20

Without Prejudice

Dear LKK

Please refer to below email and liaise with third party workshop.

Thank you.

**Adeline Chng**  
Executive  
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.  
3 Anson Road #15-00 Springleaf Tower Singapore 079909  
DID: (65) 6389 6178 | F: (65) 6225 5879

W: [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | FB: [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | WeChat: 太平獅城 Taiping SG

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**From:** Clarissa Koh [mailto:[clarissa.koh@go-aheadsingapore.com](mailto:clarissa.koh@go-aheadsingapore.com)]  
**Sent:** Friday, 21 February 2020 8:39 AM  
**To:** Adeline Chng <adeline.chng@sg.cntaiping.com>; Claims Dept of CTI <claimsdept@sg.cntaiping.com>  
**Subject:** RE: [EXTERNAL] RE: OUR REF: SNM20D200709/SMJ8368E/ADELINE - Accident involving SG1017J x SMJ8368E on 07/02/20

Dear Adeline,

We would like to appoint Kelvin Ang for the survey at our depot.

Best regards,  
Clarissa

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**From:** Adeline Chng <adeline.chng@sg.cntaiping.com>  
**Sent:** Thursday, 20 February, 2020 5:55 PM  
**To:** Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Clarissa Koh <clarissa.koh@go-aheadsingapore.com>

**Subject:** [EXTERNAL] RE: OUR REF: SNM20D200709/SMJ8368E/ADELINE - Accident involving SG1017J x SMJ8368E on 07/02/20

**Without Prejudice**

Dear Sirs

We refer to the above matter.

Attached PRS letter for your next action.

**Thank you.**

**Adeline Chng**

Executive

Claims Department

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

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 6389 6178 | F: (65) 6225 5879

W: [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | FB: [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | WeChat: 太平獅城 Taiping SG

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**From:** Claims Dept of CTI

**Sent:** Thursday, 20 February 2020 5:29 PM

**To:** Adeline Chng <[adeline.chng@sg.cntaiping.com](mailto:adeline.chng@sg.cntaiping.com)>; [clarissa.koh@go-aheadsingapore.com](mailto:clarissa.koh@go-aheadsingapore.com)

**Cc:** Claims Dept of CTI <[claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)>

**Subject:** OUR REF: SNM20D200709/SMJ8368E/ADELINE - Accident involving SG1017J x SMJ8368E on 07/02/20

Dear Adeline,

Please conduct PRS for SG1017J.

Note : officer in charge – Adeline 63896155.

\*\*\* 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

DID: (65) 63896116 | F: (65) 62247175

W: [www.sg.cntaiping.com](http://www.sg.cntaiping.com) | FB: [www.facebook.com/chinataipingsg/](https://www.facebook.com/chinataipingsg/) | WeChat: 太平獅城 Taiping SG

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**From:** Clarissa Koh <[clarissa.koh@go-aheadsingapore.com](mailto:clarissa.koh@go-aheadsingapore.com)>  
**Sent:** Thursday, February 20, 2020 3:53 PM  
**To:** Claims Dept of CTI <[claimsdept@sg.cntaiping.com](mailto:claimsdept@sg.cntaiping.com)>  
**Subject:** FW: Accident involving SG1017J x SMJ8368E on 07/02/20

Hi Sir/Madam,

Please refer.

Best regards,  
Clarissa

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**From:** Clarissa Koh  
**Sent:** Monday, 17 February, 2020 3:42 PM  
**To:** [e-claims@sg.cntaiping.com](mailto:e-claims@sg.cntaiping.com)  
**Cc:** Wilson Yeoh Wei Sheng <[wilson.yeoh@go-aheadsingapore.com](mailto:wilson.yeoh@go-aheadsingapore.com)>  
**Subject:** Accident involving SG1017J x SMJ8368E on 07/02/20

Dear Sir/Madam,

Please refer to attached PRI involving our bus and your insured and arrange for a survey on our bus soonest possible.

Best regards,  
Clarissa

## 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	11/02/2020 11:10
Date Of Accident	07/02/2020 05:50
Exact Location Of Accident	PASIR RIS DR 6 X PASIR RIS ST 11
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SG1017J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GO AHEAD SINGAPORE PTE LTD
Co Reg No	2XXXXX900C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63847169

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	CITARO O530-6.4 L AT TURBO ABS (A)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	BUS

### Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	D-19094111MFBP
Cover Note Number	

### Driver

Name of Driver	SIEW AH LIN
NRIC No	SXXXX878F
Date Of Birth	04/06/1959
Occupation	OUTDOOR
Date Of Driving Pass	31/08/1995
Driving Experience	24 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94468368
Fax Number	
Contact Number	
Email Address	NOEMAIL



Address	212 TAMPINES ST 23 #04-127
Postcode	521212
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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 ON COLLISION
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE HEADQUARTERS
Police Station Address	ROAD: 10 UBI AVENUE 3 SINGAPORE , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

WHILE STATIONARY INSIDE THE RIGHT-TURN POCKET AT THE ABOVE-MENTIONED LOCATION WAITING THE GREEN ARROW TO APPEAR AS MY VIEW WAS BEING BLOCKED BY A GREY HONDA FREED & A PRIVATE COACH FROM THE OPPOSITE DIRECTION OF PASIR RIS DR 1. WHEN THE GREEN ARROW APPEARED, THE PRIVATE COACH HONKED AT SMJ8368E BUT IT DIDN'T MOVE SO THE COACH OVERTOOK FROM THE RIGHT. WHILE INCHING OUT AS THE GREEN ARROW WAS IN MY FAVOR, SMJ8368E FROM THE OPPOSITE DIRECTION OF PASIR RIS DR 1 DASHED OUT & COLLIDED ON TO THE FRONT BUMPER OF MY BUS

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	DIFFERENT FORMAT
Was there any audio recorded?	NO

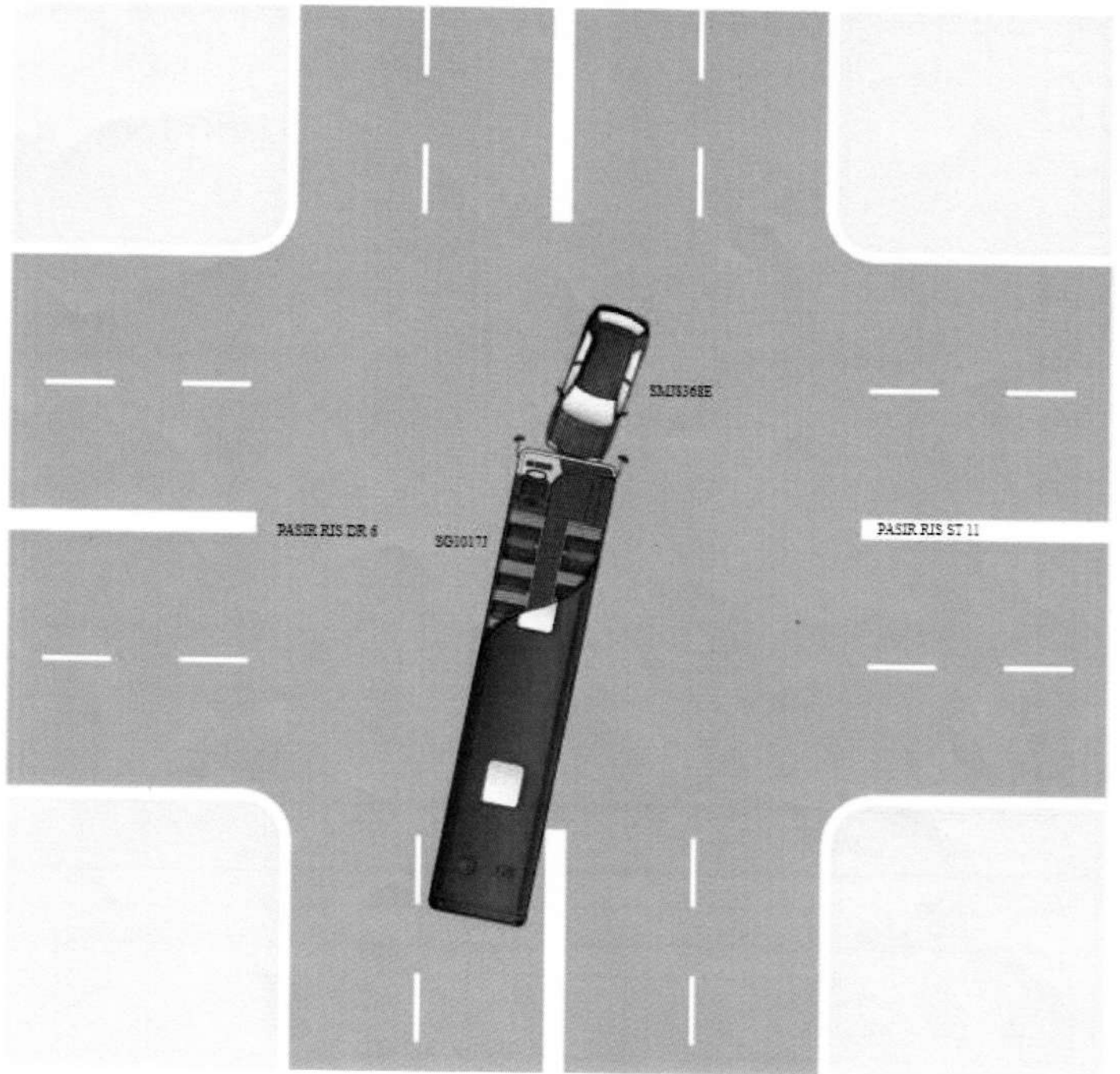
#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMJ8368E
Vehicle Make/Model/Colour	PURPLE HONDA FREED HYBRID 1.5G AUTO
Details Of Properties	FRONT BUMPER
Vehicle Category	PRIVATE HIRE
Name of Driver	NG SHI RONG
NRIC/Passport Number	



Contact Number	93889024
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

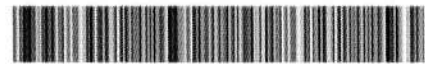
Sketch Plan



## POLICE REPORT 1



**SINGAPORE  
POLICE FORCE**



T/20200210/7024

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20200210/7024

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/02/2020 14:56		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: SIEW AH LIN			Address: APT BLK 212 TAMPINES STREET 23 #04-127 SINGAPORE 520212		
ID Type / ID No.: NRIC NO / S2699878F			Contact No.: Home/Office:		Mobile: 94468368
Nationality: MALAYSIAN			Email: siewahlin1959@gmail.com		
Sex: Female	Age: 60	Date of Birth: 04/06/1959	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Bus driver		Driving Licence Information: Class: 3,4A		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/02/2020 05:45	Type of Location: X-Junction
Location:  PASIR RIS DRIVE 6 X PASIR RIS ST 11				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 20 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head On			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SG1017J	Lorry	MERCEDES BENZ	CITARO	Green	Slightly Damaged	0
SMJ8368E	Car	HONDA	FREED HYBRID 1.5G AUTO	Purple	Slightly Damaged	0

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

## POLICE REPORT 2



**SINGAPORE  
POLICE FORCE**



T/20200210/7024

2 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20200210/7024

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	SIEW AH LIN		ID No. S2699878F
Related Vehicle	SG1017J (Lorry)		Contact No. 94468368
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3,4A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
<b>Driver</b>			
Name	NG SHI RONG		ID No. NIL
Related Vehicle	SMJ8368E (Car)		Contact No. 93889024
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3,4A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

## Brief Details.

WHILE STATIONARY INSIDE THE RIGHT-TURN POCKET AT THE ABOVE-MENTIONED LOCATION WAITING THE GREEN ARROW TO APPEAR AS MY VIEW WAS BEING BLOCKED BY A GREY HONDA FREED [SMJ8368E] & A PRIVATE COACH FROM THE OPPOSITE DIRECTION OF PASIR RIS DR 1. WHEN THE GREEN ARROW APPEARED, THE PRIVATE COACH HONKED AT SMJ8368E BUT IT DIDN'T MOVE SO THE COACH OVERTOOK FROM THE RIGHT. WHILE INCHING OUT AS THE GREEN ARROW WAS IN MY FAVOR, SMJ8368E FROM THE OPPOSITE DIRECTION OF PASIR RIS DR 1 DASHED OUT AND COLLIDED ON TO THE FRONT BUMPER OF MY BUS

POLICE REPORT 3



**SINGAPORE  
POLICE FORCE**



T/20200210/7024

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20200210/7024

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

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.
Signature Of Interpreter: Not applicable	Date/Time: 10/02/2020 14:56
Officer In Charge Of Case: TP / TPIB / ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
Authentication Stamp NP168	

Accident Photo







### Vehicle Accident Costing

Depot:  
Reg. No:  
Fleet No:  
Place of Accident:  
Date:  
Time:  
Description of Damage:  
Tyre Damage

Loyang Depot  
SG 1017J

Claim Number

#### MATERIALS USED

Bin No.	Description	\$
	Bracket <del>BT</del> 1	30.00
	Support <del>DD</del> 1	1,731.67
	Flap with Mercedes Star <del>SCRA</del> 1	1,270.67
	Mercedes Logo <del>SC</del> 1	93.47
	Flap bracket <del>DM</del> 1	351.05
	Front bumper <del>BR</del> 1	912.95
	Hinge <del>BT</del> 2	38.42
	Fastener <del>BT</del> <del>nec</del> 3 2	49.33
	Fastener bumper <del>BT</del> <del>nec</del> 2 1	15.17
	CITARO Wording <del>nec</del> 1	160.83
	Lock <del>BT</del> 2	35.47
	Front RHS bumper <del>CRG</del> 1	1,005.83
	Base Bracket <del>BT</del> 1	250.88
	Stand Bracket <del>XUN</del> 1 0	215.17
	Hinge <del>DD</del> 2	42.93
	Lock <del>BT</del> 1	53.47
	Head lamp <del>BT</del> 1	690.50
	Indicator lamp <del>BT</del> 1 0	42.93
	Test Connection <del>BT</del> 1	39.33
	Test Connection nut <del>nec</del> 1	4.90
	Carplate number SG1017J (White) <del>nec</del> 1	83.33
	Go-Ahead front sticker <del>nec</del> 1	1.33
Total of Materials		7119.63

Hours and Materials correct:

Engineering Supervisor

Summary		
Total Cost of Labour & Spray Painting		4000.80
Total Cost of Material		7119.63
Recovery charge	Miles at	
Tyre Charge		
Other charges		
Loss of use days	days at \$ PER DAY	
Total		11120.43

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:

Date:

2/3/2020

RAM (LKK)  
24/02/2020 1200hrs  
P925urcu@lkkauto.com  
88622778  
Pignante / Ref print  
5 days