

ASS. REC. BY:

REF: CSI/INC 20003504 / Gg-fs

Special Instruction:

Surveyor:

GQ

ASSIGNMENT (Office)

From (Person):

Amie Koh

of

INC

Date/Time:

3/3/20 9:28am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLK 8426C

Insured:

Sjx 4428D

at Workshop m/s

STE AUTO

Tel:

6346 0669

of NUB Kabi Bura Ave 4 #103-21

Policy No:

Claim No:

MT / 1086137-002

Sum Insured:

Excess:

Make of Veh:

D.O.A. 27/2/2020

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

3/3/2020 10:09am

Person Contacted:

Linda

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SLK 8426C - NUB / INC 20003504 / RUA - 27/02/2020
	Sjx 4428D - NUB / INC 20003504 / RUA - 27/02/2020

ASS. REC. BY:

REF: INC

ASSIGNMENT

From:

Date:

3/31/2020

Estimated Cost:

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

To inspect Vehicle No: SLK 8426 C

at Workshop m/s STK Auto

of NO 8 Kaki Bukit Av1 4 #03-21

Insured:

Policy No.

Claims No.

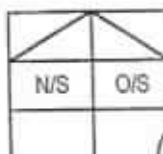
Sum Insured: Excess:

(Client's Record)

Make of Veh: 4pm owner waiting

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt: Consistent?: Yes or No

GIA / PR Seen: Consistent?: Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

ap

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

SLK 8426 C

Yr Regn:

01 Feb 2017

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

Truck / Trailer or

Make:

BMW 218i

C.C.

1499

Colour:

white

A/C:

Insured / Std / NI / NA

Sp. Reading:

68793

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WBA 2D320X05E76402

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/55R17

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal.

S

mm

R/Bal.

S

mm

L/Bal.

S

mm

L/Bal.

S

mm

D.O.A.

D.O.I.

03-03-20

Survey held at

W/S

4pm

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

03/3 Timelized, \$1200 with linds (Red 10390.91, 76%)

RECEIVED 10 MAR 2020

Date/Time, File Pass to?

☐

: Prel. Report

1) 10/3 Inria

☐

: Final Report

Date/Time, File Return to?

2)

Rep. Form:

7P

Lump Sum / Fee:

(1200)

Days Of Repair:

2

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

\$ = RS \$

Photos

Others

TOTAL

250

Summer Lee (LKK Auto)

From: Annie Koh <annie.koh@income.com.sg>
Sent: Tuesday, 3 March, 2020 3:38 PM
To: 'assignments@lkkauto.com'; Admin-D (LKKAuto)
Subject: RE: TP CASES FARMED OUT TO LKK ON 03/03/2020

Hi,

Please take note of the OIC and claim number for SLK8426C**

6	Eng Huey Huey	MT/1086137-002	SLK8426C	STK AUTO PTE LTD	NO. 8 KAKI BUKIT AVENUE 4 #03-21 PREMIER @ KAKI BUKIT GATE 2	tan guohua / 91237949	SIX44280	27/02/2020	63860669
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Warmest Regards

Annie Koh
Senior Admin,
Operations, Motor & Personal Lines (PL)
T +65 64307899
www.income.com.sg



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in with you

From: Annie Koh
Sent: Tuesday, 3 March 2020 11:11 AM

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Details	
Owner ID Type:	Company
Owner ID:	736R
Vehicle Details	
Vehicle No.:	SLK8426C
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Mar 2020
Vehicle Make:	B.M.W.
Vehicle Model:	218I GRAN TOURER AUTO
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	32249811B38A15A
Chassis No.:	WBA2D320X05E76402
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$33,244.00
Original Registration Date:	01 Feb 2017
First Registration Date:	01 Feb 2017
Transfer Count:	1
Actual ARF Paid:	\$33,542.00
Intended PARF Eligibility	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Jan 2027
PARF Rebate Amount:	\$25,156.00
Intended COE Rebate Details	
COE Expiry Date:	31 Jan 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$55,501.00
COE Rebate Amount:	\$38,343.00
Total Rebate Amount:	\$63,499.00

The information contained herein is correct as at 03 Mar 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	02/03/2020 14:36
Date Of Accident	27/02/2020 12:45
Exact Location Of Accident	UBI AVENUE 1 CP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK8426C
Insured/Policyholder	
Name Of Registered Owner	SINO ELITE TRAVEL SERVICES PTE LTD
Co Reg No	2XXXXX736R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62061160

Vehicle Particulars

Manufacturer	BMW
Model	218I GRAN TOURER AUTO
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5116037083
Cover Note Number	

Driver

Name of Driver	ZHAO HENG
NRIC No	SXXXX239D
Date Of Birth	02/08/1982
Occupation	INDOOR
Date Of Driving Pass	18/09/2009
Driving Experience	10 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98007960
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	11 COMPASSVALE ROAD #10-05
Postcode	544749
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 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

REFER ATTACHED;

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	SJX4428D
Vehicle Make/Model/Colour	HONDA / INSIGHT 1.3G A
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR GOH
NRIC/Passport Number	
Contact Number	98315732
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

FORM 1 (REV. 7/2015)

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 rescind 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:

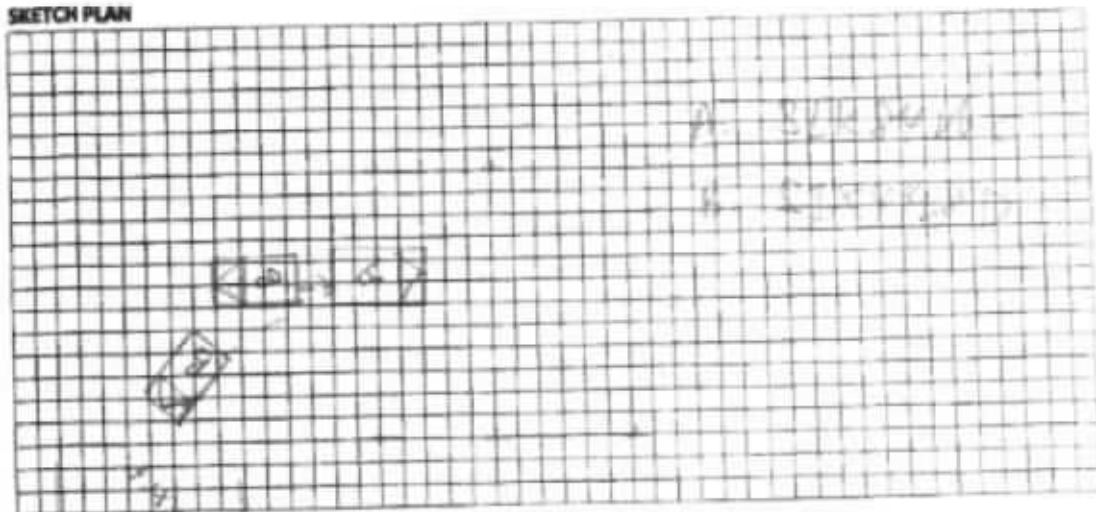
Authorised Driver's Signature
(Driver is not the policyholder)
Date & Time:

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/02/2022 at about 12:42 PM, while I was waiting for the car parking lot. Suddenly one car reverse into my car's left rear portion.

DECLARATION

I/We declare the above information is true in every respect.

Policyholder's Signature
Date & Time:

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg

Reporting Centre Personnel's Signature
Name:
NRIC/PIH No.:

PLEASE ARRANGE TO SURVEY VEHICLE AT
NO.8 KAKI BUKIT AVE 4 GATE 2
#03-21
SINGAPORE 415675

LINDA LIAO
STK AUTO (S) PTE LTD

Date: 29/02/2020
To: NTUC INCOME INSURANCE CO-OPERATIVE LIMITED
Attn: Motor Claim Department

67418434
ms Sa Sumner
Gmo Qian 82880282

Owner: SINO ELITE TRAVEL SERVICES PTE LTD
NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Certificate Number: 5116037083 Accident Date: 27/02/2020

Vehicle Number: SLK8426C

Make & Model: BMW 218i

ESTIMATED REPAIR COST DETAILS

QTY	DESCRIPTION	REPAIR AMOUNT	SURVEYOR APP.
1	REAR BUMPER / cut	\$ 1,045.45	/
1	REAR BUMPER RETAINER RH X } NN	\$ 61.35	X
1	REAR BUMPER RETAINER LH X } NN	\$ 61.35	X
1	REAR BUMPER REFLECTOR RH - SCR	\$ 125.60	X
1	REAR BUMPER LOWER GARNISH X	\$ 165.00	X
1	REAR BUMPER LOWER GARNISH CHROME X } NN	\$ 110.56	X
1	RH TAILLAMP X	\$ 450.80	X
10	REAR BUMPER CLIPS / AC	\$ 80.00	40 (SN)
	Sub Total	\$ 2,079.90	
	DISCOUNT 10% on Parts	\$ 207.99	1143.85
	Total	\$ 1,871.91	10%: 1029.47
<u>Special Net Item</u>			
10	REAR BUMPER CLIPS X Repair	\$ 80.00	
1	REAR BUMPER REVERSE SENSOR X NN	\$ 350.00	
		\$ 430.00	
<u>Labour & Misc</u>			
1	TO STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	\$ 1,500.00	200
1	TO SPRAY PAINT ON ACCIDENT AREAS	\$ 800.00	250
1	TO REMOVE AND REFIT REAR COMPARTMENT	\$ 150.00	X
1	TO RUST PROOFING ACCIDENT AREAS	\$ 150.00	X } NN 1519.47
	Sub Total	\$ 2,600.00	450
	Grand Total	\$ 4,901.91	20%: 1200

2 Days.
Imp Sum repair.
After repair photos.
Gmo Qian - 82880282
03/3/2020

STK 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
- Supplemental item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:



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

DAMAGE ASSESSMENT REPORT

NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: CS/INC20003504/Gqf3n2

73 BRAS BASAH ROAD
#05-01 NTUC TRADE UNION HOUSESINGAPORE
189556

Date: 11-03-2020



ATTN: ENG HUEY HUEY

Code: INC

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJX 4428D	Veh. Inspected	SLK 8426C
Policy No.		Coverage (\$)	0.00
Claim No.	MT/1086137-002	Excess (\$)	0.00
Assign From	ANNIE KOH	Assign Date	03/03/2020

2. Vehicle Particulars & Condition

Make & Model	B.M.W 218i	c.c	1499
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	WBA2D320X05E76402	Colour	WHITE
Odometer	68793 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/55 R17	PIRELLI	5 mm
L/H Front Tyre	205/55 R17	PIRELLI	5 mm
R/H Rear Tyre	205/55 R17	PIRELLI	5 mm
L/H Rear Tyre	205/55 R17	PIRELLI	5 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	27/02/2020	Inspect Date / Time	03/03/2020 (04:00 PM)
Survey held at	STK AUTO (S) PTE LTD 8 KAKI BUKIT AVE 4 #03-21 PREMIER@KAKI BUKIT SSINGAPORE 415875		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLK 8426C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	CUT	1,045.45	1,045.45
1	REAR BUMPER RETAINER RH	NOT NECESSARY	61.35	-
1	REAR BUMPER RETAINER LH	NOT NECESSARY	61.35	-
1	REAR BUMPER REFLECTOR RH	SCRATCHED	125.60	98.40
1	REAR BUMPER LOWER GARNISH	NOT NECESSARY	165.00	-
1	REAR BUMPER LOWER GARNISH CHROME	NOT NECESSARY	110.55	-
1	RH TAILLAMP	NOT NECESSARY	450.60	-
	LESS 10% DISCOUNT		-201.99	-114.39
			1,817.91	1,029.46
10	REAR BUMPER CLIPS (SN)	NECESSARY	60.00	40.00
	LESS 10% DISCOUNT		-6.00	-
			54.00	40.00
SPECIAL NETT ITEMS				
10	REAR BUMPER CLIPS (SN)	REPEATED	80.00	-
1	REAR BUMPER REVERSE SENSOR (SN)	NOT NECESSARY	350.00	-
			430.00	-
LABOUR				
	TO STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS.		1,500.00	200.00
	TO SPRAY PAINT ON ACCIDENT AREAS.		800.00	250.00
	TO REMOVE AND REFIT REAR COMPARTMENT.	NOT NECESSARY	150.00	-
	TO RUST PROOFING ACCIDENT AREAS.	NOT NECESSARY	150.00	-
	-		-	-
	-		-	-
	-		-	-
			2,600.00	450.00
GRAND TOTAL			4,901.91	1,519.46



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)			1,200.00
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Report Ref No. CS/INC20003504/Gqf3n2

XING GUO QIANG

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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