, 1	22/03/2002 - ASS. REC, BY:		REF: CS   N	nsg 2000	4021/65	f3 Speci	al Instruction:		
80	Surveyor:	96	ASS	SIGNMEN	T (Office)				
Milm	From (Person):	Katurin W	ung of _	MS1 G		D	ate/Time: 1	6.4.200	9,399 M
	Estimated Cost:		3	F	Bill to:				
* 1	To Inspect Vehi		RESIEVAIN			Insured:	SLL 68444	853.5	8
		s Focus M				Tel:	68444	620	
			6 402-49						
	Policy No: 2	9074776	my		Claim No: _			. /	
	Sum Insured:_				Excess: _				
	Make of Veh:					E	0.O.A. 12.	3. 2020	
	(Client's Record)  CA / REV /  Date/Time:	REP. / REV 2	4 HRS 39. m Person (		Aidah	Ve	H.O.D. Endor		
	Date/Time	1	ion ( V ) (						
		Sm J 860		o- mone					
		SL1 8567	51-x						
	18/03/20	@ 17:2	12 pm	revised	PA to	, Ked	love l	way !	riq
		,							

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

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	16 Mar 2020 08:26		16 Mar 2020 09:39 Assign				New Assignment Cancel Case

CLAIM SUBI	FOLDER DETAILS			[Created	by insurer]			
Insured:	NG JENG KIAT, II	D: S1676415I						
Main Claimant:	YU ZIQIANG, ID:	S8235125F						
Vehicle Reg. No.:	SMJ8603B	SMJ8603B			12/03/2020 18:00 - :59 [ <b>36</b> Months and <b>6</b> Days From LTA Reg Date (Man Yr)]			
Claim Type:	TP	Policy/Cover Note No.:	29074276QMY (Comprehensive) Coverage: 14/03/2019 - 13/03/2020					
Vehicle Reg. No. (Insured):	SLL8563J		Policy No. (Claimant):					
			Excess:					
Repairer:	Focus Auto Pte Ltd	d (HQ) 1 Kaki Bukit Ave 6, #	02-48/50 Autobay, 4178	83 Kaki Buk	it - Tel: 68869097			
Handling Insurer:	MSIG Insurance (	Singapore) Pte. Ltd. (HQ)	- Tel: +65 6827 7888	[Handled b	Katherine Wong - 65	94 2544]		
Adjuster:	LKK Auto Consulta	nts Pte Ltd (HQ) - Tel: 625	56-3561 [ <b>Imm.Adv</b>	ice due 17	7/03/2020]			
Driver/Custo dian	NG WAI CHEONG ( /	/ Male) , NRIC: S9510643I	Email:					
(Insured):	on WP. Liab: clear. Agree on SJE. Assign: LKK Auto Consultants Pte Ltd. Contact: Aidah @ 6844 4620.							
(Insured): Adj Asg.	on WP. Liab: clear.							
(Insured): Adj Asg. Remarks:	on WP. Liab: clear. A  D MAIL RECEIVED				View All	Compose	Case Ma	
(Insured): Adj Asg. Remarks:					View All	Compose	Case Ma	
(Insured): Adj Asg. Remarks: <b>ASSOCIATE</b> There are no	D MAIL RECEIVED			View All	4	Compose  New Task		
(Insured): Adj Asg. Remarks: ASSOCIATE There are no	D MAIL RECEIVED mail for this case.	Task Group Subject	Handler Assign		Search Tasks Create		Case Ma	

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars Owner ID Type:	Singapore NRIC
Owner ID:	125F
Vehicle Details	
Vehicle No.:	SMJ8603B
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Mar 2020
Vehicle Make:	NISSAN
Vehicle Model:	QASHQAI 2.0 CVT ABS D/AIRBAG 2WD 5DR S/R
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	MR20453000W
Chassis No.:	SJNFBAJ11U1916191
Maximum Power Output:	106.0 kW (142 bhp)
Open Market Value:	\$19,507.00
Original Registration Date:	06 Mar 2017
First Registration Date:	06 Mar 2017
Transfer Count:	1
Actual ARF Paid:	\$19,507.00
menter PAR स्वकार Parils	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	05 Mar 2027
PARF Rebate Amount:	\$14,630.00
Intended (COE Rabate Details	05 Mar 2027
COE Expiry Date:	
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period (Years):	10
QP Paid:	\$50,621.00
COE Rebate Amount:	\$35,261.00
Total Rebate Amount:	\$49,891.00

The information contained herein is correct as at 16 Mar 2020

ОК

### > Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

		_	D .:	
Ve	hicle	Owner	Particu	ıars

Owner ID Type:

Owner ID:

**Vehicle Details** 

Vehicle No.:

Vehicle to be Exported:

Intended Deregistration Date:

Vehicle Make:

Vehicle Model:

Primary Colour:

Manufacturing Year:

Engine No.:

Chassis No.:

Maximum Power Output:

Open Market Value:

Original Registration Date:

First Registration Date:

Transfer Count:

Actual ARF Paid:

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date:

COE Category:

COE Period(Years):

QP Paid:

COE Rebate Amount:

**Total Rebate Amount:** 

The information contained herein is correct as at 14 Mar 2020

Singapore NRIC

125F

SMJ8603B

No

14 Mar 2020

NISSAN

QASHQAI 2.0 CVT ABS D/AIRBAG 2WD 5DR S/R

White

2017

MR20453000W

SJNFBAJ11U1916191

106.0 kW (142 bhp)

\$19,507.00

06 Mar 2017

06 Mar 2017

1

\$19,507.00

Yes

05 Mar 2027

\$14,630.00

05 Mar 2027

B - Car above 1600cc or 97kW (130bhp)

10

\$50,621.00

\$35,291.00

\$49,921.00

# 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

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park

Singapore 408933

Attn:

Katherine Wong

Date:

18 Mar 2020

## **Preliminary Advice**

Insured Vehicle No : SLL8563J

TP Vehicle No

: SMJ8603B

Accident Date

:S\$

: 12/03/2020

Make

: NISSAN QASHQAI

Assignment Date

: 16/03/2020

Date of Inspection : 16/03/2020

Est. Duration of Repair

: 5 days

Inspection At

: Focus Auto Pte Ltd (HQ) 1 Kaki Bukit Ave 6, #02-48/50 Autobay

Singapore 417883

### Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	8,946.26
Revised Amount	:S\$	5,438.34
Check Items (Estimated)	:S\$	0.00
Total	:S\$	5,438.34

Lump Sum Repair

#### **Total Loss Consideration**

New for Old Value	:S\$
Pre-Accident Value	:S\$
COE / PARF Rebate	:S\$
Salvage Value	:S\$
Margin for Repair	:S\$

### Remarks

/	1	The yeh	امان	economical/not	economical	for	repair.
100	)	The ven	ICIE IS	economical/not	Comonical	101	Topun.

( X ) The above survey was conducted on a 'without prejudice' basis.

MSME20032111 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 13/03/2020 15:07 SUBMITTED BY: Chia Pei Ying

### 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 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 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

13/03/2020 15:07 Date Of Report 12/03/2020 18:35 Date Of Accident

WOODLANDS DRIVE 50 Exact Location Of Accident

SINGAPORE Country/State of Loss

#### **DETAILS OF OWN VEHICLE**

SM.18603B Vehicle Registration Number

Insured/Policyholder

YU ZIQIANG Name Of Registered Owner

SXXXX125F NRIC No NOEMAIL

Email Address

(LOCAL) +65-81614877 Mobile Phone No

OFFICE-81614877 Alternative Phone No

Vehicle Particulars

NISSAN Manufacturer **QASHQAI** Model

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?

THIRD PARTY If No, Please state action to be taken

Vehicle Category

PRIVATE CAR

Insurance Company

FWD SINGAPORE PTE, LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

PNPV2020-0000293 Policy Number

Cover Note Number

Driver

YU ZIQIANG Name of Driver SXXXX125F NRIC No 19/10/1982 Date Of Birth **INDOOR** Occupation

Date Of Driving Pass 14/08/2009

10 YEARS AND 6 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-81614877 Mobile Number

Fax Number

OFFICE-81614877 Contact Number

NOEMAIL EMail Address

Address

BLK 889B WOODLANDS DRIVE 50 #04-239

Postcode

732889

rusicode

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?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

ILO

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

ON 12/03/2020 AT 6.35PM, I WAS DRIVING ALONG WOODLANDS DRIVE 50. CAR B (SLL8563J) CAME OUT FROM CARPARK EXIT AND HIT ONTO MY REAR RIGHT. CAR B FAILED TO STOP AND HIT ONTO MY INCOMING VEHICLE. MY VEHICLE IS DAMAGED DUE TO THE ACCIDENT.

#### 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

SLL8563J

Vehicle Make/Model/Colour

VEHICLE B

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NG WAI CHEONG

NRIC/Passport Number

Contact Number

96460413

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

#### 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 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 false 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:
  - (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 .:

FOCUS AUTO

Sketch Plan #2 Pg. 1

SKETCH PLAN



A-SMJ 8603B B-SLL 8563J

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
On 18/03) 80 @ 6.35 pm I was driving along woodlands Drive 50. Car B (SLL 8563J) Came out from Car park exit and but on my night rear back. Car B fail to Stop and but on my morning vehicle. My Vehicle 15 dange due to the accident.
Drive SD. Car B (SLL 8563J) Came out from Car park exit
and but on my night rear back. Car & fail to Stop and but
on my Incoming Vehicle. My Vehicle 15 dange due to the accident.
3 3

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Briver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

# FOCUS AUTO PTE LTD

# NO. 1 KAKI BUKIT AVENUE 6 #02-48/50 AUTOBAY @ KAKI BUKIT SINGAPORE 417883

TEL: 6886 9097 FAX: 6844 4625 Email: claims@focusauto.com.sg

GST:201004495R RCB NO:201004495R

M/S: MSIG INSURANCE

**Estimate No:** 

M001027

Date:

16-Mar-20

Veh Reg No: SMJ8603B

ATTN:

Motor Claim Department

Make/Model: NISSAN QASHQAI 2.0

Your Ref No: SMJ8603B

Chassis No: SJNFBAJ11U1916191

Claim Type: Third Party

Engine No: MR20453000W

1 - - dant Data: 12/02/2020

Reg. Date : 06/03/2017

	Accident Date: 12/03/2020	Reg. Date: 06/03/2017			
	Estimate Repair Cost to Vehicle No: SI	MJ8603B			PAGE:1/2
S/N	Description	Quantity	Unit	Price	Amount
	NETT PRICE			<u>S\$</u>	<u>S\$</u>
1	Rear Bumper /  .	1	PCS	796.70	796.70 7/7
2	Rear Bumper Side Retainer - RH X \( \infty \)	$\mathcal{N}^{-1}$	PCS	55.10	55.10 X
3	Rear Fender Dust Cover - RH 💢	1	PCS	99.10	99.10 ×
4	Rear Fender Protector - RH / SAR.	1	PCS	654.00	654.00 483
5	Rear Door - RH / Bue ,	1	PCS	1166.20	1166.20 1104.8
6	Rear Door Lock - RH X NN	1	PCS	172.30	172.30 ×
7	Rear Door Protector - RH / GoR	1	PCS	280.40	280.40 188.9
8	Rear Door Rubber × ( aud 2	1	PCS	189.80	189.80 X
9	Rear Upper Arm - RH X	1	PCS	266.40	266,40 X
10	Rear Knuckle Arm - RH SBT - plue	r, 1	PCS	1322.80	1322.80 581.3
11	Rear Lower Arm - RH	1	PCS	167.60	167.60 /
		TOTAL		5170.40	5170.40
		<b>LESS 10%</b>		4653.36	4653.36
	SPECIAL NETT PRICE				1
12	Rear Tyre - RH / T/	1	PCS	280.00	280.00 140
13	Rear Sport Rim - ( RAVS) / WAT	1	PCS	1200.00	1200.00 800.
14	Rear Shock Absorber - RH	plato 1	PCS	172.20	172.20 150
15	Rear Hub Bearing - RH	11	PCS	350.70	350.70 300
		TOTAL		2002.90	2002.90

3242.6 10%: 2918.34

## FOCUS AUTO PTE LTD

# NO. 1 KAKI BUKIT AVENUE 6 #02-48/50 AUTOBAY @ KAKI BUKIT SINGAPORE 417883

TEL: 6886 9097 FAX: 6844 4625 Email: claims@focusauto.com.sg

GST:201004495R RCB NO:201004495R

M/S: MSIG INSURANCE

Estimate No: M001027

> 16-Mar-20 Date:

Veh Reg No: SMJ8603B

Make/Model: NISSAN QASHQAI 2.0 ATTN: Motor Claim Department

Chassis No: SJNFBAJ11U1916191 Your Ref No: SMJ8603B

Engine No: MR20453000W Claim Type: Third Party

Accident Date: 12/03/2020 Reg. Date: 06/03/2017

PAGE:2/2 Estimate Repair Cost to Vehicle No: SMJ8603B

S/N Description **Quantity Unit** Price Amount

	LABOUR CHARGES	<b>S</b> \$	<b>S</b> \$	
16	Panel Beating		850.00 You	
17	Rust Proofing		$60.00 \times M$	1
18	Towing (King Roller)		100.00 80	
19	Alignment		100.00 60	
20	To Remove & Replace Rear Under Carriage		280.00 150	
21	To Remove & Replace Door Assay	117	80.00 40	
22	To Spray Paint	1150	820.00 400	
	Marin 3	TOTAL	2290.00	

**OVERALL TOTAL** 8946.26

SDAYS. Lagor cupson report.

After report photos.

Como Qiang - 82880262

Como Qiang - 82880262

Como Qiang @ Ikkanto. com 16/3/2020.

20%: 4350

## LICK Auto Consultants hence notify the Repairer of the following:

#### FOR FOCUS AUTO PTE LTD

- 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:

**AUTHORISE SIGNATURE**