

ASS. REC. BY:

REF: CS/CT1 20004635/RT f3

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person): Ruthu Tham

of

CT1

Date/Time: 27.3.2020 17.13pm

Estimated Cost:

Bill to:

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

To inspect Vehicle No: SKT 13C

Insured:

GBD 4026Eat Workshop m/s Cheng Auto Bodyworks c/c

Tel:

66310707of 5 Soon Lee Street #01-62 Pandan LoopPolicy No: DMXVSX 30746019000

Claim No:

SVM201 201522

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 20/03/2020

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 30/3/20 9.30am

Person Contacted:

RachelVehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>SKT 13C - NA/CT1 20004519/h4 DOA - 20/03/2020</u>
	<u>GBD 4026E - NA/CT2 20004519/h4 DOA - 20/03/2020</u>
	<u>Vehicle not sent in for repair, withdraw claim.</u>
	<u>Submit prelim advise - change to c/c w/s</u>

TOTAL

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	26 Mar 2020 Sendback Est	26 Mar 2020 14:34 \$S\$14,605.98	27 Mar 2020 17:13 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

Insured:	BAN POH ENGINEERING PTE LTD, Co. Reg. No.: 0, Tel: +6596286963		
Main Claimant:	LUAH KIAN TIONG, ID: S7418136H		
Vehicle Reg. No.:	SKT13C	Date of Loss:	20/03/2020 21:00 - :59 [54 Months and 10 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / SNM20D201522/GBD4026E/PAULINE	Policy/Cover Note No.:	DMCVSN30746019000
Vehicle Reg. No. (Insured):	GBD4026E	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	Cheng Auto Bodyworks (HQ) 5 Soon Lee Street #01-62 Pioneer Point, 627607 Pioneer - Tel: 6631 0707		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Pauline Tham]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 07/04/2020]		
Driver/Custodian (Insured):	LIM BAN POH (/ Male), NRIC: S1427107D, Tel: +6596286963 Email:		

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.									

Rasul (LKKAuto)

From: claims@chengauto.com
Sent: Thursday, 2 April, 2020 3:45 PM
To: Rasul (LKKAuto)
Subject: SKT 13C - LUAH KIAN TIONG | DOA : 20/03/2020 | REF. NO. : NEW

Dear Mr. Rasul,

With reference to this Third party claim, our client has expressed interest for another workshop to continue with this claim.

Cheng Auto Bodyworks will be withdrawing the claim on our end.

Please let us know if there is anything else that needs to be done to facilitate this.

Thanks & Best Regards,
Claims Department

Murugesan

CHENG AUTO
B o d y w o r k s

CHENG AUTO BODYWORKS

HP: 8666 7775 | Office-Tel: 6631 0707 | Fax: 6316 2431

Change Wkg.

Denise Tay (LKKAUTO)

From: Pauline Tham <pauline.tham@sg.cntaiping.com>
Sent: Monday, 6 April 2020 3:32 PM
To: alan.quek@cyclecarriage.com.sg
Cc: Claims Dept of CTI; SUR; assignments; Admin-D (LKKAUTO)
Subject: FW: O/R : SNM20D201526/GBD4026E/PAULINE - SKT13C / GBD4026E Date of accident:20-03-2020
Attachments: SKT 13 C.PDF.pdf; img-404162434-0001.pdf

Without Prejudice

Dear Alan,

Liability is cleared for your client, pending insured agreement on damages and quantum.

Dear LKK

Please take note.

NOTICE :

In response to the escalating Covid-19 cases, please refrain from sending hardcopy documents to us as delay is to be expected for handling hardcopy documents. All correspondence should be made via email claimsdept@sg.cntaiping.com or fax at 6224 7175. Any inconvenience caused is much regretted

Thanks.

Pauline Tham
Senior Executive
Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower Singapore 079909
DID: (65) 6389 6541 | F: (65) 6224 7175

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平狮城 Taiping SG

From: Claims Dept of CTI
Sent: Monday, April 6, 2020 2:29 PM
To: Pauline Tham <pauline.tham@sg.cntaiping.com>; alan.quek@cyclecarriage.com.sg
Cc:
Subject: O/R : SNM20D201526/GBD4026E/PAULINE - SKT13C / GBD4026E Date of accident:20-03-2020

Dear Pauline,

Please conduct PRS for SKT13C.

Note : officer in charge – Pauline 63896541

*** Kindly quote our reference number when replying.

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	23/03/2020 10:46
Date Of Accident	20/03/2020 21:40
Exact Location Of Accident	ELIAS ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT13C
Insured/Policyholder	
Name Of Registered Owner	LUAH KIAN TIONG
NRIC No	SXXXX136H
Email Address	LUAHDAMIEN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81399652
Alternative Phone No	OFFICE-81399652

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	GLA45 AMG 4MATIC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	8-V0017829-MVA-R001
Cover Note Number	

Driver

Name of Driver	LUAH KIAN TIONG
NRIC No	SXXXX136H
Date Of Birth	13/06/1974
Occupation	INDOOR
Date Of Driving Pass	19/07/1993
Driving Experience	26 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81399652
Fax Number	
Contact Number	OFFICE-81399652
EMail Address	LUAHDAMIEN@GMAIL.COM

Address	89 HILLVIEW AVENUE #01-16
Postcode	669624
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	COLLIDED INTO PARKED VEHICLE
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?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : WIFE GENDER: : FEMALE

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	GBD4026E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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. 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: 23/03/20
 10.40 AM

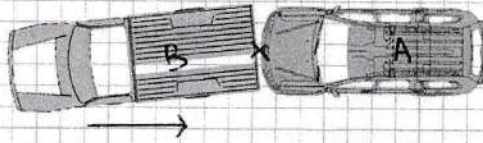
Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

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

Sketch Plan #2 Pg. 1

SKETCH PLAN

Date of Accident: 20/03/2020



A : SKT13C
B : GBD4026E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20/03/2020 at 2140hrs, my vehicle was stationary along Elias Mall. Vehicle B (GBD4026E) reversed and knocked into my vehicle's front. At that time, my wife was in the vehicle & she immediately came out of the vehicle and called for me.

- ☐ Own Damage Claim
☐ Third Party Claim
☒ OD/TP Claim at another workshop :
☐ Reporting Only

DECLARATION

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

Policyholder's Signature _____

Date & Time: 23/03/20
10:13 AM

GIARMC SketchPlanForm_V3

Driver's Signature

Driver's Signature
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Photo



Accident Photo



Accident Photo



Cheng Auto Bodyworks (Co.Reg.No:53315238X)
5 Soon Lee Street #01-62 Pioneer Point
Singapore 627607
Tel: 6631 0707 Fax: 6316 2431 Email: cab@chengauto.com

TP INSURER: China Taiping Insurance (Singapore) Pte. Ltd. (HQ)
BAN POH ENGINEERING PTE LTD

Singapore

PARTICULARS OF CLAIM

Claim Type:	Third Party	Ref. No:	
Policy No:		Date of Loss:	20/03/2020
Vehicle Reg. No.:	SKT13C	Driveable?	
Party At Fault:	UNKNOWN		
Driver (TP):	LUAH KIAN TIONG	Driver (Insured):	LIM BAN POH
Make/Model:	MERCEDES-BENZ A45 AMG, 2.0 (A)	Vehicle Reg. Date:	10/09/2015
Vehicle Colour:	Grey		
Engine No:	13398080039279	Chassis No:	WDC1569522J150655
Odometer:	0 KM		
Paint Type:			
List Item Discount:	10.00 %		
Total Loss?	NO		
Est. Duration of Repair (day)	1		
Present Location:	CHENG AUTO BODYWORKS (HQ)		

COST OF CLAIMS

	Amount
Parts	11,305.98
Miscellaneous Items	900.00
Labour	1,400.00
Paintwork Labour	1,000.00
Towing	0.00
Gross Total (S\$)	14,605.98
+ GST 7.00% (S\$)	1,022.42
Nett Amount (S\$)	15,628.40

This claim is handled by: MURUGESAN S/O REGUNATHAN

Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 26 Mar 2020)
Parts: 143 MERCEDES-BENZ A45 AMG 2.0 (A) (Catalogue: Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: Cheng Auto Bodyworks/SKT13C/26/03/2020 14:34
Validity: 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

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
1	1		*FRT BUMPER <i>De</i>	10.00	0.00	*1,517.25 FL
2	1		*FRT BUMPER RETAINER RH <i>X</i>	10.00	0.00	*136.50 FL <i>X</i>
3	1		*FRT BUMPER RETAINER LH <i>X</i>	10.00	0.00	*136.50 FL <i>X</i>
4	1		*FRT BUMPER INNER CORE GARNISH <i>?</i>	10.00	0.00	*1,165.50 FL <i>X</i>
5	1		*FRT SPONGE <i>?</i>	10.00	0.00	*155.40 FL
6	1		*HEADLAMP RH <i>?</i>	10.00	0.00	*2,874.90 FL
7	1		*HEADLAMP LH <i>X</i>	10.00	0.00	*2,874.90 FL <i>X</i>
8	1		*BUMPER LOGO <i># rec</i>	10.00	0.00	*68.25 FL
9	1		*RADIATOR GRILLE ASSY <i>?</i>	10.00	0.00	*1,680.00 FL
10	1		*GRILLE LOGO <i>?</i>	10.00	0.00	*144.90 FL
11	2		*PARKING SENSOR OUTER <i>X</i>	10.00	0.00	*367.50 FL <i>X</i>
12	2		*PARKING SENSOR INNER <i>X</i>	10.00	0.00	*367.50 FL <i>X</i>
13	1		*RH FRT FENDER ARC GARNISH <i>?</i>	10.00	0.00	*222.60 FL
14	1		*INTERCOOLER <i>X</i>	10.00	0.00	*850.50 FL <i>X</i>

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	12,562.20
- List Item Discount on L Items (S\$)	1,256.22
Total Parts (S\$)	11,305.98

Cheng Auto Bodyworks/SKT13C/26/03/2020 14:34. Not valid without Reference section.
 Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

No Qty Particulars

Amount

Miscellaneous Items

1	1	BRACKET BUMPER 6 PIECES		300.00
2	1	FRT BUMPER CLIPS SET	60	100.00
3	1	STICKER LOWER BUMPER GRILLE		200.00
4	1	STICKERS BUMPER	100	300.00

Sub Total (S\$) 900.00

Estimates on Labour

No Particulars

Lab.Type

Amount

Paintwork Labour

1	SPRAYPAINT LABOUR	350	250	1,000.00
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Labour Items

2	LABOUR	New		1,000.00
3	DISCONNECT & CHECK ELECTRICAL WIRING, HARNESS, WIRE SOCKETS, ETC., REMOVE & REINSTALL DAMAGED PARTS, TEST & RECTIFY FOR PROPER FUNCTIONING	New	250	1,000.00
		New	100	400.00

Gross Labour Cost (S\$) 2,400.00

Cheng Auto Bodyworks/SKT13C/26/03/2020 14:34. Not valid without Reference section.

Generated using Merimen e-Claims IEAS

< END OF ESTIMATES >

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:

Resul
Hp 90010068
3 days
L/S
02/04/2020
P1445
Resy after repair



Mercedes-Benz

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

ESTIMATE FOR SKT13C

CHINA TAIPING INSURANCE (S) PTE
LTD
ATTN: MOTOR CLAIM DEPARTMENT
3 ANSON ROAD #16-00
SPRINGLEAF TOWER
SINGAPORE 079909
62222366

Vehicle & Document Information

WIP No 42657
Reg No/Reg Date SKT13C / 10/09/2015
Date In/Mileage
Chassis No WDC1569522J150636
Engine No 13398080039279
Make/Model MB/GLA 45 AMG 4MATIC (X156)
Colour/Trim 026 662 designo mou/ 048 811 Leather Bla

Account No	Terms	Date/Time Printed	CSE	Operator
WC000668	Credit	04/04/2020/ 16:24	AQ	305 / Alan Quek Ai Lun
Description of Goods / Services				
Qty	Unit Price	Disc%	Amount	

<p>M BPNSUN POLICY NO/ACC DATE : 8-W0017829-MVA-P001 / 20-03-2020 DRIVE IN 04-04-2020 / TP CAR NO:GB04026E CHINA TAIPING INSURANCE DATE IN/DATE SURVEY: BY/AUTHORIZED ON :</p>					THIS IS NOT AN OFFICIAL TAX INVOICE				
A BPILAB	USE XENTRY TO CHECK CONTROL UNITS & RESET MEMORY TO STANDARD SETTINGS.NETT	0.10			380.00	/			
A BPILAB	CHECK HEADLAMP WITH FOCUS ADJUSTMENT.NETT				120.00	/			
S BPNSUB	SUPPLY 1 PC REG. PLATE WITH HOUSING.NETT				60.00	X			
	PURCHASE ORDER NO:								
A BPILAB	REMOVE & REPLACE FRONT BUMPER & REMOVE FRONT SUPPORT ASSY COMPONENTS & REFINISH.				1440.00	960			
A BPIRES	RESPRAY FRONT BUMPER				1200.00	1000			
M RH/F HEADLAMP ?		1.00	2885.53	00.00	2885.53				
M FRT BUMPER ?		1.00	1763.08	00.00	1763.08				
M CT/F IMPACT ABSORBER ?		1.00	142.02	00.00	142.02				
M CT/F BASIC MOUNTING FOR BUMPER ?		1.00	164.95	00.00	164.95				
M RADIATOR GRILLE STAR ?		1.00	136.49	00.00	136.49				
M FRT CROSS MEMBER ?		1.00	333.68	00.00	333.68				

Alan Quek
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DiD: 6771 4377 HP: 9186 5112 Fax: 6872 1272
Email: alan.quek@cyclecarriage.com.sg

Confirmed & accepted by

7% GST on **Nett 8,625.75**
8625.75 603.80

Authorized signatory and company stamp

Total Payable 9,229.55

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.
Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

Pandan Loop Service Center
188 Pandan Loop
Singapore 128378
Tel: 6777 8388
Fax: 6779 5383
www.mercedes-benz.com.sg