

ASS. REC. BY:

REF:

LPC / 2000 81661K4

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(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: days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

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

Truck / Trailer or

Make:

Colour:

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

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

07/08/20 @ 5.43pm revert to Ong Li Li via Merimen. (T/L)

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RS, SI

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

Lump Sum / I.B.I.: (\$





CO. REG. NO: 199402370D  
GST NO: M2-0123250-3

AUTO PTE LTD

## 金興(龔)汽車私人有限公司

160 Sin Ming Drive, #02-18/19/20/21,  
Sin Ming AutoCity, Singapore 575722  
Tel: 6452 7018 Fax: 6458 3895  
Email: service@kkimhin.com.sg

INSURER: Lonpac Insurance Bhd (HQ)

### PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	
Policy No:	Z19VC05003631	Date of Loss:	01/08/2020
Vehicle Reg. No.:	GBD4480B	Driveable?	
Driver Age/Info:	60 / MALE	Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	NO
Insured/Claimant:	COOL AIR-CONDITIONING ENGRG PTE LTD		
Driver:	RAYMOND KWEK SOO LIAN		

Make/Model:	NISSAN NV200, 1.5 L ABS AIRBAG 2WD 6DR EURO 5 (M)	Vehicle Reg. Date:	21/10/2014
Vehicle Colour:	BLACK	Chassis No:	VSJYBAM20Z0088873
Engine No:	K9KC400D053765		
Odometer:	0 KM		

Paint Type:  
Total Loss? YES  
Est. Duration of Repair (day) 99

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 subject to approval from Insurance Company

Not Authoriz  
T/Loss

Description of Accident/Loss PLEASE REFER TO SKETCH PLAN

Remarks:

FIRE CASE. VEHICLE IS IN THE WORKSHOP. WE ARE OF THE OPINION THAT IT IS NOT ECONOMICAL TO REPAIR. THE REPAIR COST IS ESTIMATED TO BE \$35000 BEFORE GST. THANK YOU. SANDRA

Present Location: K KIM HIN AUTO PTE LTD (HQ)

### COST OF CLAIMS

	Amount
Parts	0.00
Miscellaneous Items	0.00
Labour	0.00
Paintwork Labour	0.00
Towing	0.00
<b>Nett Amount (\$\$)</b>	<b>0.00</b>

This claim is handled by: SANDRA KHONG YEE TENG

Generated using Merimen e-Claims Internet Estimation & Adjusting System

## 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	03/08/2020 18:47
Date Of Accident	01/08/2020 18:00
Exact Location Of Accident	76 HOUGANG AVE 7 THE FLORIDA CONDOMINIUM CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD4480B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COOL AIR-CONDITIONING ENGRG PTE LTD
Co Reg No	2XXXXX594D
Email Address	COOLAIR1001@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-66490101

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV200-1.5 L ABS AIRBAG 2WD 6DR EURO 5 (M)
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?	YES
If No, Please state action to be taken	

Vehicle Category	COMMERCIAL VEHICLE
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### Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z19VC05003631
Cover Note Number	

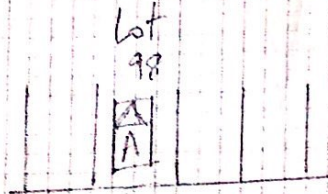
### Driver

Name of Driver	RAYMOND KWEK SOO LIAN
NRIC No	SXXXX061I
Date Of Birth	16/04/1960
Occupation	INDOOR
Date Of Driving Pass	09/01/1980
Driving Experience	40 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	+65-83121010
Fax Number	
Contact Number	
EMail Address	NOEMAIL



### SKETCH PLAN

A: GBD 4480 B



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

PLEASE REFER POLICE REPORT.

I PARKED THE VEHICLE INTO THE LOT.  
THEN I SAW SMOKE AND I CARRIED MY  
GRANDSON OUT OF THE VEHICLE QUICKLY.

NO OTHER CARS BESIDE MY VEHICLE.

### DECLARATION

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

Policyholder's Signature

Date &amp; Time:

Company Chop (if applicable)

Driver's Signature

(If driver is not the policyholder)

**Date & Time:**

Reporting Centre Personnel's Signature

Name: \_\_\_\_\_

~~NRIC/FIN No.:~~





**SINGAPORE  
POLICE FORCE**



G/20200805/2061

1 of 2

Report No. G/20200805/2061

**POLICE REPORT (NP299)**

Police Station Of Origin  
MacPherson NPP  
54 Phip Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

Date/Time Report Made 05/08/2020 15:36		Vide Report No. F/20200801/0232		Station Diary No. 37	
Name Of Informant RAYMOND KWEK SOO LIAN		Address APT BLK 349 UBI AVENUE 1 #10-1033 SINGAPORE 400349			
ID Type / ID No. NRIC NO / S14190611		Contact No. Home/Office		Mobile 83121010	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation Technician		Sex Male	Age 80	Date of Birth 16/04/1980	Race Chinese
Institution/School Name		Language			
Date/Time Of Incident 01/08/2020 18:00		Location Of Incident 76 HOUGANG AVENUE 7 THE FLORIDA SINGAPORE 538807 Carpark			

**Brief details.**

With reference the following Incident F/20200801/0232

On the 01/08/2020 at about 1800hrs, I drove my wife to the above mentioned location to make delivery

My wife then got off the vehicle while I stayed on the car, suddenly I began to smell a burnt smell which

Signature Of Officer Recording The Report:

G / Sgt 3 ANG YI FENG, ELSON

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
G / Bedok Police Divisional Investigation Branch /  
Insp BENJAMIN HENG JIA MING  
Contact No.: 82447200

Signature Of Informant

Date/Time:  
05/08/2020 15:36

Classification Of Case

Authentication Stamp

