

ASS. REC. BY:

REF: CS/ASM/9013040/

Sc 309

Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person):

Peter Wang

of

$$ASM(A \times A)$$

Date/Time:

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SBR 8893T

Insured:

at Workshop m/s

Tel:

of

Policy No:

Claim No:

S9M01NW5

Sum Insured:

Excess:

TBA

Make of Veh:

D.Q.A.

18/05	2019
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(Client's Record)

CA / (REV) / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehic IN OUT

Date/Time

Action/Instruction	Date	Time	Location	Weather	Remarks
1. Start engine					
2. Check oil level					
3. Check water level					
4. Start engine					
5. Check oil level					
6. Check water level					
7. Start engine					
8. Check oil level					
9. Check water level					
10. Start engine					
11. Check oil level					
12. Check water level					
13. Start engine					
14. Check oil level					
15. Check water level					
16. Start engine					
17. Check oil level					
18. Check water level					
19. Start engine					
20. Check oil level					
21. Check water level					
22. Start engine					
23. Check oil level					
24. Check water level					
25. Start engine					

1) Estimate

SBR 8893T-X

SVN 3805

$$SCDF = \$170.00 + 20$$

24/7/19

Shirley Hiew (LKK Auto)

From: SCDF Payment Acknowledgement <donotreply@scdf.gov.sg>
Sent: Wednesday, 24 July 2019 2:08 PM
To: sur@lkkauto.com
Subject: Order Confirmation



Receipt

Date: 07-24-2019
Order Number:
FR2019072403517

Billing Information

LKK Auto Consultants Pte Ltd
HIEW MAY FUNG
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1
, #02-25 | S408933
SINGAPORE
SG
408933

sur@lkkauto.com
62563561

Payment Details

Visa
xxxxxxxxxxxx9189

Order Total

Total amount SGD 170.00

Please keep a copy of this receipt for your records



Fire Report Application

Your request for the Fire Report has been confirmed and the amount of SGD170.00 will be deducted from your account. You will receive the report within 8 working days upon completion of investigations. Please quote the following transaction number when making enquiries.

Download Tax Invoice/Receipt

Transaction Number: FR2019072403517

Date/Time: 24/07/2019 14:04

INCIDENT DETAILS							
Date and Time	18/05/2019 10:20						
Location of Fire	ALONG 60 BENOI ROAD S629906						
Fire Involved	SBR 8893T						
REQUESTOR DETAILS							
Requestor Type	Insurance Companies						
Requestor ID Type	Foreign International	Requestor ID	G2706880X				
Name of Applicant	SHIRLEY HIEW						
Company Name	LKK AUTO CONSULTANTS PTE LTD						
Company UEN							
Company Reference Number							
CONTACT DETAILS							
Mode of Collection	Email						
Main Contact No.	62563561	Office No.	62563561				
Handphone No.		Fax No.					
Email Address	sur@lkkauto.com						
Address	Block No.	Blk 51	Floor No.	02	Unit No.	25	
	Street Name	Ubi Avenue 1					
	Building Name	Paya Ubi Industrial Park	Postal Code	408933			
PAYMENT DETAILS							
Payment Mode	Credit/Debit Card						
EP Reference No.	5639484736466072203042						
PSI Reference No.	65e589af-c3f1-46b5-b187-ae5c3556c11f						
Total Fees	SGD170.00						



Service Request Details

Claim

S9M01NW5

Veh No: SBR 8893 T

Reference

None 

Loss Date

May 18, 2019

Report Date

Jun 6, 2019 12:00:00 AM

Request Date

June 6, 2019

Due Date

June 7, 2020

Type of Loss

Third Party Property Damage

Services

Fire

Actions

Next Step

Finish the work

Complete Work

More ▾

Service Address

51 Ubi Avenue 1, #01-25, , 408933

Primary Contact/Insured

VBISHIMARK168@SINGNET.COM.SG

Claim Handler

WANG Peter

peter.wang@axa.com.sg

Additional Instructions

OI vehicle reversed into electric box and caused fire. Pls conduct fire investigation.

Messages

Invoices

History

Documents

Metrics

Notes

New Message

TYPE

SENT

7/16/19 11:24 AM

FROM

WANG Peter

SUBJECT

Pls check if SCDF / police was conducting any investigation

BODY

Pls request for the SCDF report.

Apply SCDF
and bill admin fee
24/07/2019.

TYPE

SENT

6/13/19 3:28 PM

FROM

LKK AUTO CONSULTANTS PTE LTD (TP)

SUBJECT

Vehicle has been scrapped

BODY

Dear Sir/Mdm, Please be informed that vehicle was ...

TYPE

FROM

WANG Peter

SUBJECT

Pls conduct investigation on OD vehicle

BODY

This is a third-party claim. Please contact insure...



TYPE



SENT

6/6/19 2:25 PM

FROM

WANG Peter

SUBJECT

Pls check for damage consistency & if there is any modification done

BODY





Pls check if SCDF / police was conducting any investigation

Type

🔗 Question

Message

Pls request for the SCDF report.

Reply

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	18/05/2019 16:20
Date Of Accident	18/05/2019 10:20
Exact Location Of Accident	ALONG 60 BENOI ROAD 629906
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SBR8893T
Insured/Policyholder	
Name Of Registered Owner	SAVANANDI TANGASAMY
NRIC No	S0196258B
Email Address	VBISMARK168@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96410570
Alternative Phone No	OFFICE-96410570
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	280SE 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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	GA031611/1
Cover Note Number	
Driver	
Name of Driver	SAVANANDI TANGASAMY
NRIC No	S0196258B
Date Of Birth	10/06/1951
Occupation	INDOOR
Date Of Driving Pass	11/09/1973
Driving Experience	45 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96410570
Fax Number	
Contact Number	OFFICE-96410570
Email Address	VBISMARK168@SINGNET.COM.SG

Address	787E WOODLANDS CRESCENT #12-08
Postcode	735787
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	SDH7950Y SB9714D -
Insurance Company of Driver's Own Vehicle	TOKIO MARINE INSURANCE SINGAPORE LTD NTUC INCOME INSURANCE CO-OPERATIVE LTD -

General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
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	1
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	JURONG NPP
Police Station Address	ROAD: 158 YUNG LOH ROAD #01-58 , POSTCODE: 610158 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

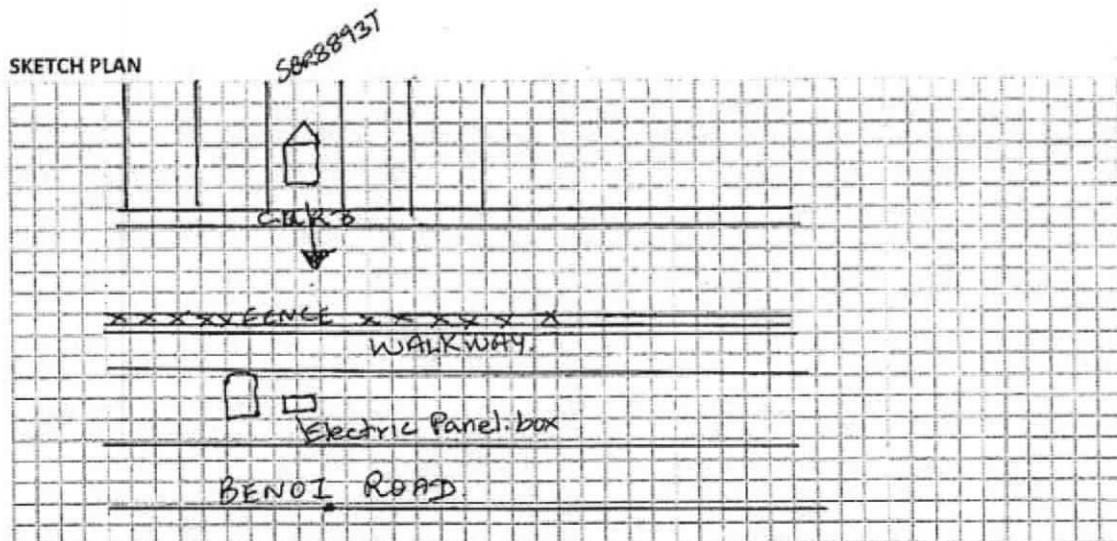
REFER TO ATTACHED.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 18/5/2019 at about 10.00am I reached my Company with my vehicle SBR8893T. I then wish to park my vehicle in one of the parking lot which inside my company compound at 60 Benoi Road.

As I was reversing my vehicle, the car accidentally mounted the curb and subsequently hit the fence and then stopped onto an electric box panel, outside 60 Benoi Road. As it mounted the curb, the fuel tank erupted and as the electric panel box was under the vehicle, the car caught fire.

I managed to escape from my vehicle and suffered no injury. My vehicle then caught fire police was at scene.

DECLARATION


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


Policyholder's Signature

Date & Time: 18/5/2019.
12:13hrs.

WV Motor Insurance Policy No. 11

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


Reporting Centre Personnel's Signature
Name: Mr. [Signature]
NRIC/FIN No.: S45024403