## LKK

#### 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

#### **Tax Invoice**

STRIDES PREMIER AUTOMOTIVE SERVICES PL.

60 WOODLANDS INDUSTRIAL PARK E4

SINGAPORE 757705

INV No.: SAC2400917

INV Date: 10-10-2024

Reference CS/SMR24080362/Rqp3e2

Code SMR

**PROFESSIONAL SERVICE FEE** 

Vehicle No. SMP 287B Insured Veh. SHB 5223K

Claim No. TAX/08/24/2042

Policy No.

Accident Date 13/08/2024 Inspection Date 23/09/2024

Description	Amount
Survey Inspection	128.00
Resurvey Inspection	0.00
Digital Photographs	0.00
Transportation	0.00
Sub-Total	128.00
GST (9%)	11.52
Grand Total	139.52

We shall be glad if you could forward the payment at your earliest convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

#### **LKK Auto Consultants Pte Ltd**

KHM



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

		Affiliated to Federation Internation	ale Des Experts En	Automobile
MS	STRIDES PREMIF	R AUTOMOTIVE SERVICES PL.	Ref:	CS/SMR24080362/Rqp3e2
-	60 WOODLANDS I	NDUSTRIAL PARK E4 SINGAPORE	Date:	22/08/2024
	757705		Code:	SMR
1.		Policy Particulars :-	THIRD PARTY CLA	IM
	Insured Veh.	SHB 5223K	Veh. Inspected	SMP 287B
	Policy No.	-	Coverage	0
	Claim No.	TAX/08/24/2042	Excess	\$0.00
	Assign From	HUA YEN	Assign Date	21/08/2024
2.		Vehicle	Details	
	Make & Model	HONDA SHUTTLE HYBRID 1.5 A	C.C	1496
	Engine No.	LEB7103104	Year of Reg.	05/09/2019
	Chassis No.	GP72002316	Colour	BLUE
	Odometer	267853 KM	Steering	IN ORDER
	Brakes	IN ORDER	General	GOOD
	Modification(s)	RIMS: SPORTS RIM		
3. Conditions of Tyres				
		Size	Make	Balance (mm)
	R/H Front Tyre	185/60 R15	BLACKHAWK	6
	L/H Front Tyre	185/60 R15	BLACKHAWK	6
	R/H Rear Tyre	185/60 R15	BLACKHAWK	6
	L/H Rear Tyre	185/60 R15	BLACKHAWK	6
4.		Description	of Damages	
	VEHICLE SUSTAIN	IED DAMAGES AT THE N/S FRONT PO .S.	ORTION.	
5.		General Ir	nformation	
	Accident Date	13/08/2024	Inspection Date	23/09/2024
	Survey held at	KOK WANG CAR GROOMING (HQ) 1 SOON LEE STREET #06-40 PIONE	EER CENTRE SING	APORE 627605
5a.		Rem	narks	
		AS CONDUCTED ON A"WITHOUT PR O YOUR INSTRUCTIONS, WE HAVE N		REPAIRS.
5b.		Estimate Da	ys of Repair	
ST	IMATED NORMAL F	PERIOD FOR REPAIR: 4 Working Days		



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

#### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO SMP 287B

	REPLACEMENT OF PARTS			
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	FRONT BUMPER	TO REPAIR SEE LABOUR	\$1,050.60	\$0.00
1	FRONT BUMPER RETAINER LH	NOT NECESSARY	\$15.40	\$0.00
1	FRONT BUMPER SIDE COVER LH	NOT NECESSARY	\$33.20	\$0.00
1	FRONT BUMPER FOG LAMP LH	NOT NECESSARY	\$287.80	\$0.00
1	FRONT BUMPER FOG LAMP COVER LH	NOT NECESSARY	\$45.10	\$0.00
1	FRONT FENDER LH	TO REPAIR SEE LABOUR	\$435.20	\$0.00
1	FRONT FENDER BRACKET LH	NOT NECESSARY	\$49.50	\$0.00
1	FRONT FENDER INNER SHIELD LH	CRACKED	\$120.50	\$120.50
1	FRONT FENDER 'HYBRID' EMBLEM LH	NECESSARY	\$65.30	\$65.30
1	FRONT HEADLAMP LH	SCRATCHED	\$2,315.60	\$2,250.00
1	FRONT HEADLAMP LOWER BRACKET LH	NOT NECESSARY	\$45.30	\$0.00
1	FRONT SHOCK ABSORBER LH	NOT NECESSARY	\$480.00	\$0.00
1	FRONT KNUCKLE ARM LH	NOT NECESSARY	\$395.00	\$0.00
1	FRONT KNUCKLE ARM BEARING LH	NOT NECESSARY	\$184.80	\$0.00
1	FRONT LOWER ARM LH	NOT NECESSARY	\$355.00	\$0.00
1	FRONT STABILIZER LINK LH	NOT NECESSARY	\$56.80	\$0.00
	LESS 20.00% DISCOUNT		(\$1,187.02)	(\$487.16)
			\$4,748.08	\$1,948.64

	Special Nett			
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	SET FRONT BUMPER CLIPS (SN)	NECESSARY	\$60.00	\$30.00
1	FRONT FENDER INNER SHIELD CLIPS LH (SN)	NECESSARY	\$60.00	\$30.00
1	FRONT SPORT RIM LH (SN)	SCRATCHED	\$450.00	\$300.00
1	FRONT TYRE LH (SN)	NOT NECESSARY	\$300.00	\$0.00
			\$870.00	\$360.00

Labour			
Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
TO DISMANTLE, REPLACE & PANEL BEATING AFFECTED PORTION. INCLUSIVE OF THE REPAIR OF FRONT BUMPER AND FRONT FENDER LH		\$1,000.00	\$400.00
TO SPRAY PAINT ON AFFECTED PORTION		\$800.00	\$400.00



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

Labour			
Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
TO REMOVE / REPLACE / REINSTALL FRONT UNDER CARRIAGE COMPONENTS		\$300.00	\$80.00
TO APPLY ANTI-RUST ON AFFECTED AREAS		\$60.00	\$40.00
TO CHECK WIRING FOR FRONT PORTION		\$60.00	\$30.00
TO PERFORM SYSTEM DIAGNOSTIC & RESET ECU SYSTEM		\$300.00	\$100.00
		\$2,520.00	\$1,050.00
GRAND TOTAL \$8,138.08			\$3,358.64
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			\$2,700.00
Report Ref No: CS/SMR24080362/Rqp3e2			

#### **MRB**

MOHAMMED RASUL BIN MOHD YUNUS

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of reposibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.

# 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 Actual 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

Date of First Submission	14/08/2024 15:35 (SGT)
Reported by	Actual Driver
Date of Accident	13/08/2024 19:30 (SGT)
Exact Location of Accident	Shenton Wy, Singapore
Additional Location Information	
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP287B
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner	Yes GRAN TORINO PTE. LTD.

383C

Mobile Phone No	
Alternative Phone No	. ≈ 20 50

## VEHICLE PARTICULARS

Company Reg No

**Email Address** 

Manufacturer	Honda
Model	Shuttle
Variant	<b>■</b> ()
Exact purpose for which vehicle was being used at time of accident	<b>=</b> 0
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1496
Vehicle Fuel	
First Regisration Date	
Chassis no	<del>=</del> ₽
Effective Date/Time of Ownership	<b>-</b> 32

## INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2030218172

DRIVER



Name of Driver SOO CHEE LEUNG NRIC No Date Of Birth Occupation Outdoor Driving Pass Date 20/05/1997 Driving License Pass Class Driving License Validity Driving experience 27 YEARS AND 3 MONTHS Gender Mobile Number Alt. Phone Number **Email Address** Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Employee Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collision - Change/cross lane Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No Translator's name Translator's ID Translator's email Original language used in the statement -DETAILS OF POLICE ACTION Was the accident reported to the police? No 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 **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SHB5223K Vehicle Manufacturer





Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	<del></del> 0
Vehicle Category	Taxi
Name of Driver	-
Contact Number	=07
Address	
Address complement	-
Postcode	-
Insurance Company Name	<del>=</del> 0
Nature Of Damage	<del>-</del> -0
Details of property damaged in accident	=:
No. Of Passenger (Including Driver)	-

## SKETCH PLAN

## IMPORTANT NOTICE

- 1 Please report <u>correctly</u> the details of the accident to speed up the claims process
- This Form must be completed by the Policyholder and/or the Actual Driver
- 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.
- .1 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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 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.

## S 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 for process my personal data/personal information set out in this [form] and any other personal information provided by me or process 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 indirectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetony Authority of Singapore and any relevant disversment agency/authority (such as the police), for the purpose(s) of

til processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims.

on investigating the accident and/or my claims;

call carrying out and/or dealing with my instructions or responding to any enquines by me;

(iz) administrang my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve declosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve declosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve declosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail

(or complying with applicable law in administering, processing, handling and/or dealing with my claims and/ortycly the "Purposes")

go all incurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law tirms, may/are permitted to collect, to e. disclose and/or process my Personal Information for one or more of the above Purposes, and

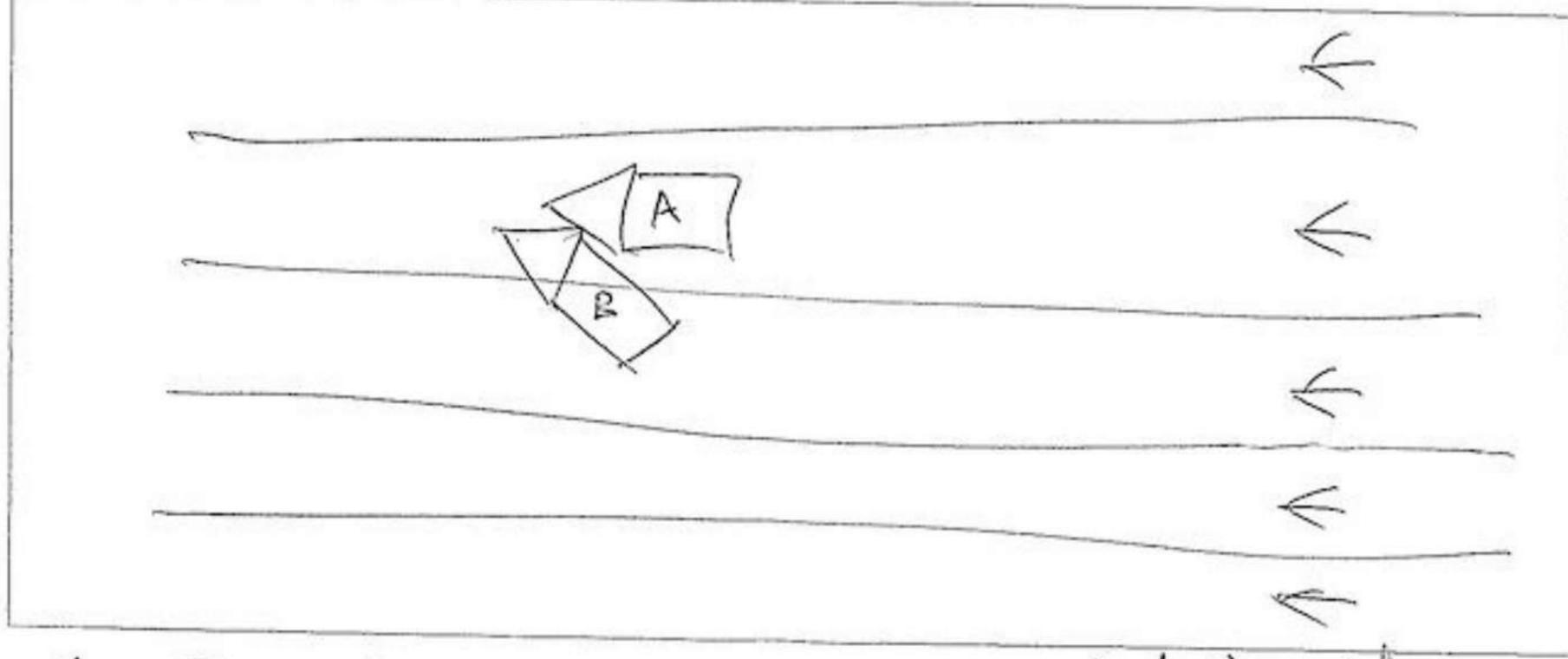
to may Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents and turning their lawyers/Jaw firms), which may be siled outside cJ/Singapore, for one or more of the above Purposes

Diswipplifer's Signature / Date & Time

Driver's Signature (if ringer is not the policyhoklar) / Date & Time:

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



A-SMP2873 B-SHB 5223K A Mundos plate.

VEHICLE NO: SIMP		ACCIDE	SOO Chee leurs @ Sma	024 19-30 pm
CONTACT NUMBER:	The state of the s	E-MAIL:	soo chee leng @ Qmai	il.com
OCATION: 316	ston way			
Vehicle	graf and	3K KUT	eft side )	e wate
OWN DAMAG	E CLAIM UNDER YOUR	R OWN BOLICY, PLEASE	14 DAYS TIME FRAME FOR YOU TO S CHECK YOUR POLICY FOR MORE IN	FORMATION.
Declaration I/We declare the foregoi	ng particulars are true in	FOL Wand	( ) CLAIM CONTP AT OTHER WORKSHOP	1) REPORTING ONLY
Policyholder's Signature 70	ate & Time Drivers	Signals (if driver is not the p	olicyholder) / Date Witnessed by Re	porting Centre Personnel

CS CamScanner



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

**INSPECTION PHOTOS (Page 1 of 12)** 











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

**INSPECTION PHOTOS (Page 2 of 12)** 











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

**INSPECTION PHOTOS (Page 3 of 12)** 











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

**INSPECTION PHOTOS (Page 4 of 12)** 













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

**INSPECTION PHOTOS (Page 5 of 12)** 













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

**INSPECTION PHOTOS (Page 6 of 12)** 













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

**INSPECTION PHOTOS (Page 7 of 12)** 











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

**INSPECTION PHOTOS (Page 8 of 12)** 











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

**INSPECTION PHOTOS (Page 9 of 12)** 











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

**INSPECTION PHOTOS (Page 10 of 12)** 











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

**INSPECTION PHOTOS (Page 11 of 12)** 













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

**INSPECTION PHOTOS (Page 12 of 12)** 







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

**REINSPECTION PHOTOS (Page 1 of 1)** 







