

ASS. REC. BY: Typist

REF: CS/CT124090274/Tg/h3

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. _____

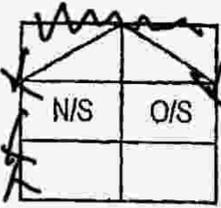
Sum Insured: _____ Excess: \$2000

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: \$42K

IDAC Accident Rport 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: SNP195BK Yr Regn: 2017 / 04

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

Make: Infiniti Q30 c.c. 1461

Colour: Black A/C: Insured / Std / NI / NA

Sp. Reading: - T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: SSK0AAH1541 026009

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/50 R18

R: 2 1

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Continental

Front R/Bal. 6 mm Rear R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. _____ D.O.I. 17/9/24

Survey held at ARC Tak Guan

Des. of Damages: Frt / Rear / N/S / N/S / N/S / Rto top or

The U/C / Chassis/frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>Battery weak</u>
	<u>Vehicle badly damage front portion, engine & undercarriage affected, front RH chassis also bent badly, vehicle recommended total loss.</u>
<u>24/09/24</u>	<u>Submit Uneconomical Total Loss report</u>

Date/Time, File Pass to? : Prell. Report

i) 24/09 Typist : Final Report

Date/Time, File Return to? _____

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$)
 : Interview (\$)
 : Tech. Invs (\$)
 : Weekend (\$)

Survey Fee:	
Transportation:	
\$ + RS. SI	
Photos	
Others	
TOTAL	

Rep. Format: MER-OD-TL/U

Lump Sum / L.B.L. (\$) _____

ARC Automotive Repair Centre Pte Ltd
 CO. Reg. No. : 201312913C
 GST Reg. No. : 201312913C

48 Toh Guan Road East (Enterprise Hub)
 #02-146, Singapore 608586
 Tel: 64688834 Fax: 67228585
 E-mail: claims@automotiverepaircentre.com.sg

ESTIMATE NO. : EST2409-CT-TG
 DATE : 16/09/2024
 POLICY NO. :
 VEHICLE NO. : SNP1956K

Attn:
Motor Claim Department
CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

Letter of Extensive Damages

We have received an accident vehicle SNP1956K with extensive damages that caused the structural integrity compromised, the estimated repair cost will be more than S\$60,000. There are no second-hand parts for this vehicle.

The insurer may choose not to repair it for economic reasons and to total loss of the vehicle.

Please arrange for this vehicle to be surveyed. Thank you.

Prepared By,

Read, and Agreed By,



Taufik 97415749/62563561.
Not Authorized Ex 92000

RAZALI

16/09/2024

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:

WP' 17/9/24 @ 2pm.
Taufik @ lkkauto.com