

**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. : SAC2401683

INV Date : 05-12-2024

Reference CS/SMR24090491/Avp3m4

Code SMR

**PROFESSIONAL SERVICE FEE**

Vehicle No. SMW 8620H  
Insured Veh. SHB 1183T  
Claim No. TAX/09/24/2084  
Policy No.  
Accident Date 25/09/2024  
Inspection Date 27/09/2024

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**

**SML**

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## Affiliated to Federation Internationale Des Experts En Automobile

MS STRIDES PREMIER AUTOMOTIVE SERVICES PL.	Ref:	CS/SMR24090491/Avp3m4
60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705	Date:	05/12/2024
	Code:	SMR

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHB 1183T	Veh. Inspected	SMW 8620H
Policy No.	-	Coverage	0
Claim No.	TAX/09/24/2084	Excess	\$0.00
Assign From	HUA YEN	Assign Date	27/09/2024

### 2. Vehicle Details

Make & Model	TOYOTA YARIS CROSS	C.C	1490
Engine No.	M15AY079305	Year of Reg.	15/12/2020
Chassis No.	JTDKBAB3X0L002689	Colour	RED
Odometer	107532 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	215/60R16	TRIANGLE	6
L/H Front Tyre	215/60R16	TRIANGLE	6
R/H Rear Tyre	215/60R16	TRIANGLE	6
L/H Rear Tyre	215/60R16	TRIANGLE	6

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.

DAMAGES SEE DETAILS.

### 5. General Information

Accident Date	25/09/2024	Inspection Date	27/09/2024
Survey held at	BIFROST AUTO PTE LTD 8 KAKI BUKIT AVENUE 4 #01-49 PREMIER @ KAKI BUKIT SINGAPORE 415875		

### 5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.  
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: 6 Working Days



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO SMW 8620H

REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	TAILGATE	DENTED	\$2,175.40	\$1,405.00
1	TAILGATE WINDSCREEN GLASS RUBBER MOULDING	NECESSARY	\$38.90	\$38.90
1	TAILGATE "YARIS CROSS" EMBLEM	NECESSARY	\$63.40	\$63.40
1	TAILGATE CENTRE EMBLEM	NOT NECESSARY	\$56.70	\$0.00
1	TAILGATE "HYBRID" EMBLEM	NECESSARY	\$83.40	\$83.40
1	TAILGATE CENTRE LAMP	NOT NECESSARY	\$609.80	\$0.00
1	TAILGATE LOCK	DAMAGED	\$647.10	\$415.00
1	TAILGATE LOCK CATCH	NOT NECESSARY	\$66.70	\$0.00
1	TAILGATE INNER TRIM BOARD	CRACKED	\$743.20	\$743.20
1	SET TAILGATE INNER TRIM BOARD CLIPS	NECESSARY	\$70.00	\$30.00
1	TAILGATE RH LAMP	NOT NECESSARY	\$514.80	\$0.00
1	TAILGATE LH LAMP	NOT NECESSARY	\$514.80	\$0.00
1	TAILGATE WIPER MOTOR	NOT NECESSARY	\$677.30	\$0.00
1	REAR BUMPER (UPPER)	DEFORMED	\$444.00	\$444.00
1	REAR BUMPER (LOWER)	DEFORMED	\$766.70	\$766.70
1	REAR BUMPER RH REFLECTOR	NOT NECESSARY	\$83.40	\$0.00
1	REAR BUMPER LH REFLECTOR	NOT NECESSARY	\$83.40	\$0.00
1	REAR BUMPER RH SIDE REVERSE SENSOR	NOT NECESSARY	\$503.90	\$0.00
1	REAR BUMPER RH SIDE REVERSE SENSOR LOCK CLIPS	NOT NECESSARY	\$55.20	\$0.00
1	REAR BUMPER RH REVERSE SENSOR	DAMAGED	\$503.90	\$260.00
1	REAR BUMPER RH REVERSE SENSOR LOCK CLIPS	NOT NECESSARY	\$55.20	\$0.00
1	REAR BUMPER LH REVERSE SENSOR	DAMAGED	\$503.90	\$260.00
1	REAR BUMPER LH REVERSE SENSOR LOCK CLIPS	NOT NECESSARY	\$55.20	\$0.00
1	REAR BUMPER LH SIDE REVERSE SENSOR	NOT NECESSARY	\$503.90	\$0.00
1	REAR BUMPER LH SIDE REVERSE SENSOR LOCK CLIPS	NOT NECESSARY	\$55.20	\$0.00
1	REAR BUMPER RH SIDE RETAINER	NOT NECESSARY	\$153.50	\$0.00
1	REAR BUMPER LH SIDE RETAINER	NOT NECESSARY	\$153.50	\$0.00
1	END PANEL	DENTED	\$1,058.90	\$885.00
1	END PANEL INNER GARNISH	DEFORMED	\$440.10	\$440.10
1	SET END PANEL INNER GARNISH CLIPS	NECESSARY	\$70.00	\$30.00



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REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	RH TAILLAMP ASSY	NOT NECESSARY	\$679.40	\$0.00
1	RH TAILLAMP GASKET	NOT NECESSARY	\$88.90	\$0.00
1	RH TAILLAMP PANEL	NOT NECESSARY	\$201.20	\$0.00
1	SET RH TAILLAMP LOCK CLIPS	NOT NECESSARY	\$50.00	\$0.00
1	LH TAILLAMP ASSY	NOT NECESSARY	\$679.40	\$0.00
1	LH TAILLAMP GASKET	NOT NECESSARY	\$88.90	\$0.00
1	LH TAILLAMP PANEL	NOT NECESSARY	\$201.20	\$0.00
1	SET LH TAILLAMP LOCK CLIPS	NOT NECESSARY	\$50.00	\$0.00
1	REAR ANTENNA SENSOR	CRACKED	\$100.00	\$100.00
1	REAR COMPARTMENT PANEL BOARD	DEFORMED	\$557.80	\$557.80
1	SPARE TYRE SPONGE	NOT NECESSARY	\$129.10	\$0.00
1	REAR RH FENDER INNER TRIM BOARD	NOT NECESSARY	\$829.80	\$0.00
1	SET REAR RH FENDER INNER TRIM BOARD CLIPS	NOT NECESSARY	\$70.00	\$0.00
1	REAR LH FENDER INNER TRIM BOARD	NOT NECESSARY	\$829.80	\$0.00
1	SET REAR LH FENDER INNER TRIM BOARD CLIPS	NOT NECESSARY	\$70.00	\$0.00
1	EXHAUST SILENCER	NOT NECESSARY	\$1,502.30	\$0.00
1	EXHAUST SILENCER GASKET	NOT NECESSARY	\$66.80	\$0.00
	<b>LESS 25.00% DISCOUNT</b>		(\$4,486.50)	(\$1,630.63)
			\$13,459.50	\$4,891.87

Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	TAILGATE WINDSCREEN GLASS SEALANT (SN)	NECESSARY	\$80.00	\$40.00
1	TAILGATE WINDSCREEN GLASS INNER SEAL (SN)	NECESSARY	\$60.00	\$30.00
1	TAILGATE REVERSE CAMERA (SN)	NOT NECESSARY	\$680.00	\$0.00
1	END PANEL JOINT SEALANT (SN)	NECESSARY	\$80.00	\$60.00
			\$900.00	\$130.00

Labour				
	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
	LABOUR CHARGES TO REMOVE, CHECK, REPLACE AND REINSTALL DAMAGES BODYPARTS. TO PANEL BEATING, CUT/WELD AND REALIGN ALL AFFECTED PANELS AND AREAS		\$1,800.00	\$800.00



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Labour				
	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
	SPRAY PAINTING ON AFFECTED AREAS AND PANELS	NOT NECESSARY	\$1,600.00	\$800.00
	CHECK WIRING AND LIGHTING SYSTEM ON AFFECTED AREAS		\$80.00	\$30.00
	APPLY RUST COATING CHEMICAL ON AFFECTED AREAS AND PANELS		\$100.00	\$60.00
	REMOVE AND REPLACE TAILGATE WINDSCREEN GLASS TO ASSIST REPAIR		\$220.00	\$120.00
	REMOVE AND REPLACE TAILGATE REVERSE CAMERA TO ASSIST REPAIR		\$100.00	\$50.00
	REMOVE AND REPLACE TAILGATE INNER MECHANISM TO NEW TAILGATE		\$120.00	\$60.00
	REMOVE AND REPLACE REAR BUMPER REVERSE SENSORS		\$80.00	\$50.00
	REMOVE AND REPLACE REAR INNER TRIMS AND GARNISH TO ASSIST REPAIR		\$380.00	\$60.00
	REMOVE AND REPLACE EXHAUST SILENCER AND GASKET TO ASSIST REPAIR		\$180.00	\$0.00
			\$4,660.00	\$2,030.00
GRAND TOTAL			\$19,019.50	\$7,051.87
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)		\$5,600.00	
Report Ref No: CS/SMR24090491/Avp3m4				

**LWP**

ADRIAN LING WAI PING

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 rely 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 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 First Submission .....	25/09/2024 17:32 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	25/09/2024 11:10 (SGT)
Exact Location of Accident .....	Boon Lay, Singapore
Additional Location Information .....	Tradehub 21 ( Boonlay way )
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMW8620H
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	Royale Rental Pte Ltd
Company Reg No .....	7895N
Email Address .....	
Mobile Phone No .....	-
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Yaris
Variant .....	-
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 - Claiming third party
Vehicle Category .....	Private hire
Transmission .....	Auto
CC .....	1500
Vehicle Fuel .....	-
First Registration Date .....	-
Chassis no .....	-
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5141884938

#### DRIVER

Name of Driver .....	KENNY LAW YI XUN
NRIC No .....	
Date Of Birth .....	
Occupation .....	Outdoor
Driving Pass Date .....	04/11/2010
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	13 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	
Alt. Phone Number .....	-
Email Address .....	
Address .....	
Address complement .....	
Postcode .....	
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### PASSENGER 1

Name .....	Unnamed
Gender .....	Male

#### PASSENGER 2

Name .....	Unnamed
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

Refer to police report.

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 ..... SHB1183T  
Vehicle Manufacturer ..... MG  
Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
Vehicle Category ..... Taxi  
Name of Driver ..... Ong Chuan Guan  
NRIC No .....  
Contact Number .....  
Address ..... -  
Address complement ..... -  
Postcode ..... -  
Insurance Company Name ..... -  
Nature Of Damage ..... -  
Details of property damaged in accident ..... -  
No. Of Passenger (Including Driver) ..... -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person ..... KENNY LAW YI XUN  
Gender ..... Male  
Phone No .....  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... Muscle ache  
Injured person in which vehicle? ..... SMW8620H  
Were seat belts worn? ..... Yes  
Was this injured conveyed to hospital by ambulance? ..... No




**SINGAPORE  
POLICE FORCE**


T/20240925/7062

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20240925/7062

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/09/2024 15:16		Vide Report No.: J/20240925/7050		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: Kenny Law Yi Xun			Address:		
ID Type / ID No.: NRIC NO /			Contact No.: Home/Office: Mobile		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age:	Date of Birth:	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Private-hire car driver			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/09/2024 11:00	Type of Location: X-Junction
Location:  BOON LAY WAY				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMW8620H	Motor car					0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20240925/7062

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3  
Report No. T/20240925/7062

CONTINUATION OF REPORT

Driver			
Name	Kenny Law Yi Xun		ID No. [REDACTED]
Related Vehicle	SMW8620H (Motor car)		Contact No. [REDACTED]
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	Slight

**Brief Details.**

On 25/09/2024 at 1110hrs along boon lay way ( outside of tradehub21 ) towards clementi , i was driving my vehicle ( SMW 8620H ) while waiting for the traffic light to turn green at the junction , suddenly a taxi ( SHB 1183 T ) hit my vehicle from the back . We both got down vehicle and exchange particulars



**SINGAPORE  
POLICE FORCE**



T/20240925/7062

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20240925/7062

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
FAHKRUL RAZI BIN SUHAIME  
Contact No.: 65476404

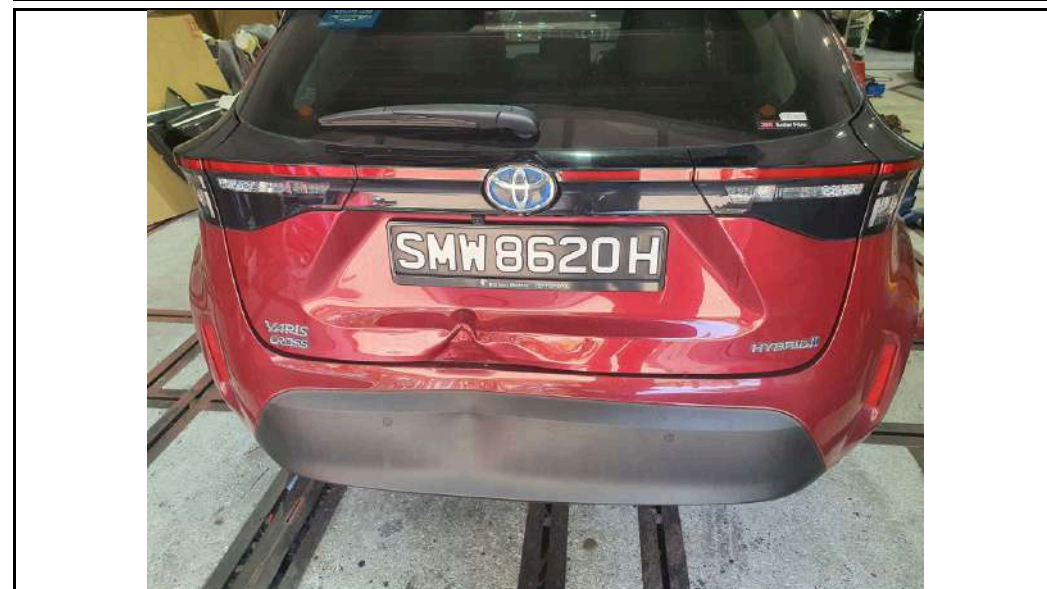
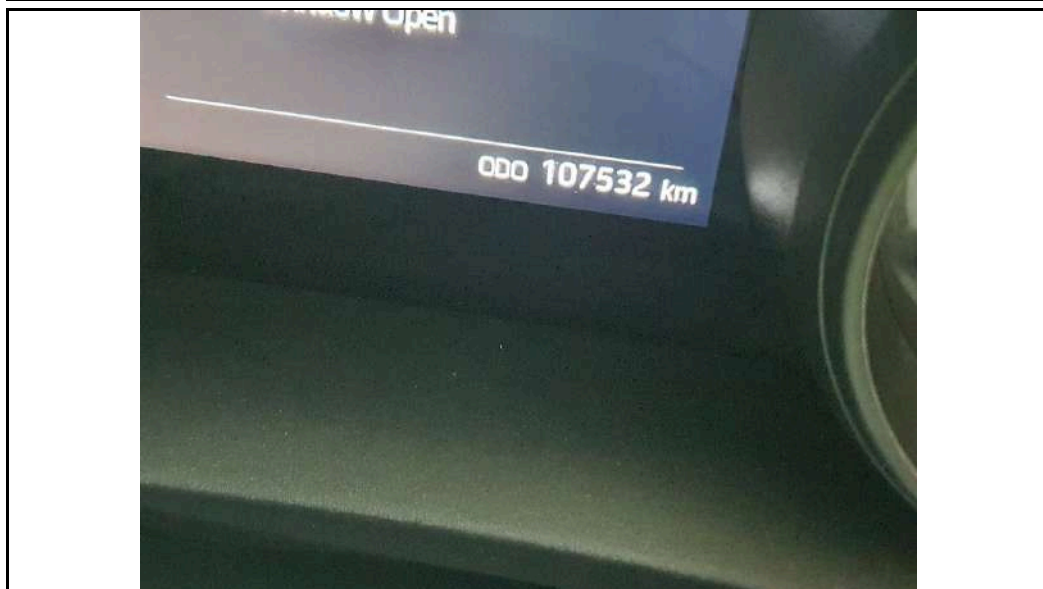
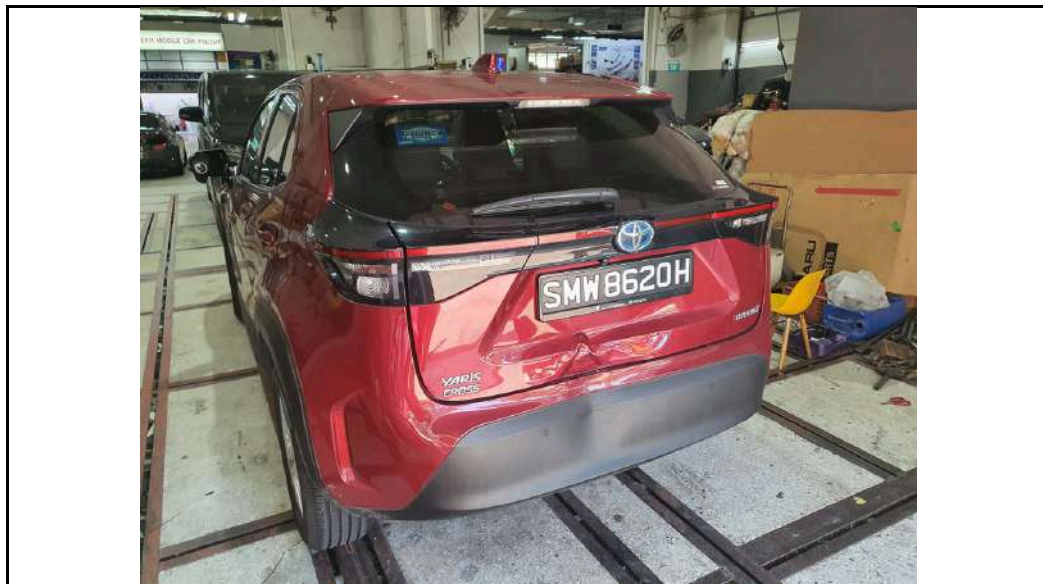
Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
25/09/2024 15:16

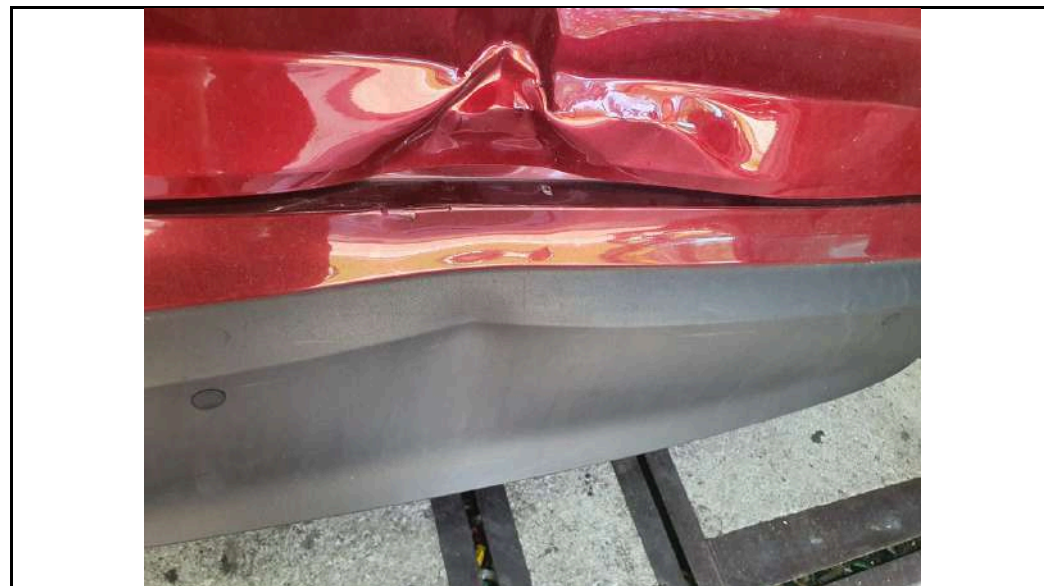
Classification Of Case:

NP168

**PHOTOGRAPHS FOR VEHICLE NO. : SMW 8620H**



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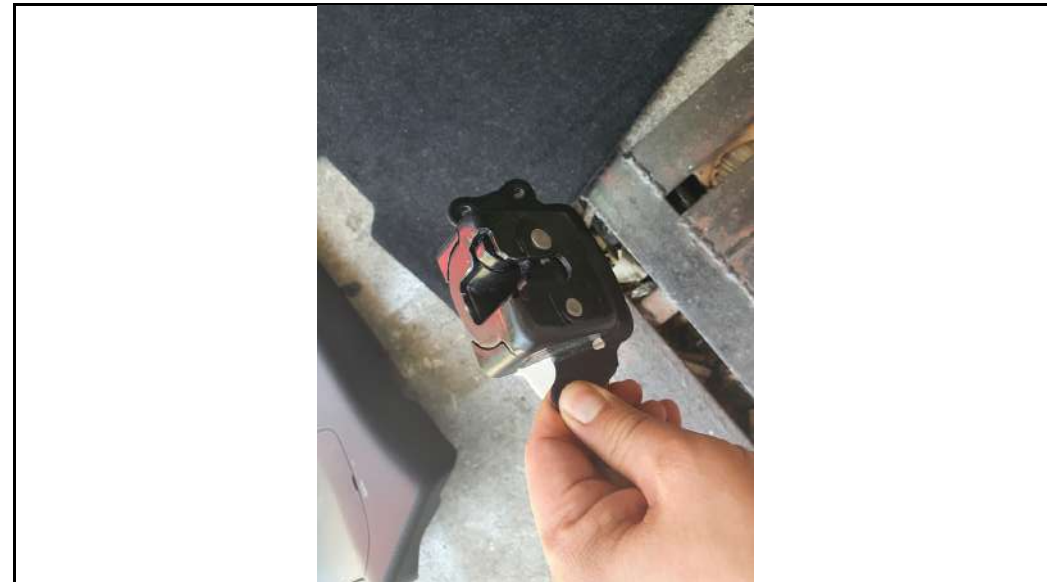
**PHOTOGRAPHS FOR VEHICLE NO. : SMW 8620H**



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REINSPECTION PHOTOS (Page 9 of 9)

### PHOTOGRAPHS FOR VEHICLE NO. : SMW 8620H

