



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. : SAC2401256

INV Date : 05-11-2024

Reference CS/SMR24090506/Avp3e2

Code SMR

PROFESSIONAL SERVICE FEE

Vehicle No. SLT 4078C
Insured Veh. SG 6293U
Claim No. BUS/09/24/8028
Policy No.
Accident Date 24/09/2024
Inspection Date 25/09/2024

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



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

Affiliated to Federation Internationale Des Experts En Automobile

MS STRIDES PREMIER AUTOMOTIVE SERVICES PL. 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE 757705	Ref: CS/SMR24090506/Avp3e2 Date: 05/11/2024 Code: SMR
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1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SG 6293U	Veh. Inspected	SLT 4078C
Policy No.	-	Coverage	0
Claim No.	BUS/09/24/8028	Excess	\$0.00
Assign From	HUA YEN	Assign Date	25/09/2024

2. Vehicle Details

Make & Model	KIA CARENS	C.C	1685
Engine No.	D4FDGH117248	Year of Reg.	27/10/2017
Chassis No.	KNAHU815VJ7192774	Colour	GREY
Odometer	1685 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	215/45 R17	MEDALLION	6
L/H Front Tyre	215/45 R17	MEDALLION	6
R/H Rear Tyre	215/45 R17	MEDALLION	6
L/H Rear Tyre	215/45 R17	MEDALLION	6

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	24/09/2024	Inspection Date	25/09/2024
Survey held at	ALL AUTO SG PTE LTD - 23 KAKI BUKIT AVENUE 4 #04-01 VICOM BUILDING SINGAPORE 415933		

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: 8 Working Days



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO SLT 4078C

REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	REAR BUMPER (UPPER)	DISTORTED	\$598.60	\$598.60
1	REAR BUMPER (LOWER)	DEFORMED	\$387.50	\$387.50
1	REAR BUMPER CENTRE DIFFUSER	NOT NECESSARY	\$356.20	\$0.00
1	REAR BUMPER LAMP RH	CRACKED	\$125.06	\$125.06
1	REAR BUMPER TOWING COVER	NOT NECESSARY	\$10.00	\$0.00
2	REAR BUMPER SENSOR @\$185.30	DAMAGED (1PC ONLY)	\$370.60	\$185.30
2	REAR BUMPER SENSOR HOLDER @\$35.00	NECESSARY (1PC ONLY)	\$70.00	\$35.00
1	REAR BUMPER SENSOR WIREHARNES	SNAPPED	\$498.50	\$498.50
5	REAR BUMPER BRACKET @\$28.60	NOT NECESSARY	\$143.00	\$0.00
1	REAR BUMPER SIDE RETAINER	CRACKED	\$65.30	\$65.30
1	REAR BUMPER REINFORCEMENT	CRACKED	\$428.30	\$428.30
1	REAR BUMPER REINFORCEMENT BRACKET RH	NOT NECESSARY	\$95.80	\$0.00
1	TAILGATE	DENTED	\$1,088.00	\$1,088.00
1	TAILGATE OUTER GARNISH	NOT NECESSARY	\$256.30	\$0.00
1	TAILGATE LAMP RH	CRACKED	\$345.60	\$345.60
1	TAILGATE LOGO	NOT NECESSARY	\$85.30	\$0.00
1	TAILGATE EMBLEM 'CARENS'	NECESSARY	\$75.60	\$75.60
1	TAILGATE EMBLEM 'CRDI'	NECESSARY	\$68.90	\$68.90
1	TAILGATE INNER LOCK	NOT NECESSARY	\$225.90	\$0.00
1	TAILGATE DETECTOR	NOT NECESSARY	\$346.00	\$0.00
1	TAILGATE INNER HANDLE	NOT NECESSARY	\$28.00	\$0.00
1	TAILGATE STOPPER	NOT NECESSARY	\$14.00	\$0.00
1	TAILGATE LOCK CATCH	NOT NECESSARY	\$25.00	\$0.00
1	TAILGATE WEATHER STRIP	NOT NECESSARY	\$168.00	\$0.00
1	TAILGATE DAMPER RH	NOT NECESSARY	\$123.50	\$0.00
1	TAILLAMP RH	CRACKED	\$475.30	\$475.30
1	TAILLAMP PANEL RH	DENTED	\$325.60	\$325.60
1	REAR FENDER RH (OUTER)	BUCKLED	\$1,403.80	\$1,403.80
1	REAR FENDER RH (INNER)	TO REPAIR SEE LABOUR	\$1,385.30	\$0.00
1	REAR FENDER AIRDUCT RH	CRACKED	\$75.30	\$75.30



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REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	REAR QUARTER GLASS WITH MOLDING RH	NECESSARY	\$358.20	\$65.00
1	REAR FENDER INNER COWLING RH	TORN	\$138.90	\$138.90
1	REAR FENDER INNER COWLING COVER RH	NOT NECESSARY	\$65.30	\$0.00
1	REAR FENDER INNER TRIM TOP RH	NOT NECESSARY	\$356.30	\$0.00
1	REAR FENDER INNER TRIM BOTTOM RH	DEFORMED	\$523.60	\$523.60
1	REAR END PANEL	TO REPAIR SEE LABOUR	\$594.00	\$0.00
1	REAR END PANEL TOP GARNISH	NOT NECESSARY	\$136.80	\$0.00
1	REAR STORAGE BOX	NOT NECESSARY	\$386.00	\$0.00
1	REAR WHEEL HOUSE PANEL RH	TO REPAIR SEE LABOUR	\$846.00	\$0.00
1	REAR DOOR RH	NOT NECESSARY	\$1,432.50	\$0.00
1	REAR EXHAUST BOX	NOT NECESSARY	\$740.00	\$0.00
1	REAR EXHAUST INSULATOR	NOT NECESSARY	\$142.00	\$0.00
1	SET REAR EXHAUST GASKET	NOT NECESSARY	\$60.00	\$0.00
6	REAR EXHAUST MOUNTING @\$29.00	NOT NECESSARY	\$174.00	\$0.00
	LESS 10.00% DISCOUNT		(\$1,561.79)	(\$690.92)
			\$14,056.07	\$6,218.24

Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	SET REAR BUMPER (UPPER) CLIP (SN)	NECESSARY	\$30.00	\$30.00
1	SET REAR BUMPER (LOWER) CLIP (SN)	NECESSARY	\$30.00	\$30.00
1	TAILGATE SEALANT (SN)	NOT NECESSARY	\$150.00	\$0.00
1	SET QUARTER GLASS SEALANT (SN)	NECESSARY	\$80.00	\$30.00
1	TAILGATE EMBLEM 'CYCLE & CARRIAGE' (SN)	NECESSARY	\$80.00	\$40.00
1	TAILGATE WINDSCREEN SEALANT (SN)	NECESSARY	\$80.00	\$40.00
1	TAILGATE WINDSCREEN INNER SEAL (SN)	NECESSARY	\$60.00	\$30.00
1	SET TAILLAMP CLIP (SN)	NOT NECESSARY	\$40.00	\$0.00
1	SET REAR FENDER INNER COWLING CLIP (SN)	NECESSARY	\$40.00	\$30.00
1	SET REAR FENDER INNER TRIM CLIP (SN)	NECESSARY	\$40.00	\$30.00
1	REAR END PANEL INSULATION SEAL (SN)	NOT NECESSARY	\$100.00	\$0.00



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Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	SET REAR END PANEL TOP GARNISH CLIP (SN)	NOT NECESSARY	\$40.00	\$0.00
			\$770.00	\$260.00

Labour				
	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
	TO PANEL BEAT, REMOVE AND REPLACE PARTS. INCLUSIVE OF THE REPAIR OF REAR FENDER RH (INNER), REAR END PANEL AND REAR WHEEL HOUSE PANEL RH		\$2,200.00	\$1,100.00
	TO SPRAY PAINT AFFECTED AREA		\$2,000.00	\$900.00
	TUFF COAT		\$350.00	\$80.00
	REMOVE AND REFIX CUSHION SEAT / UPHOLSTRY & ROOF LINING TO FACILITATE REPAIR		\$300.00	\$80.00
	REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING		\$100.00	\$50.00
	REMOVE AND REFIX REVERSE CAMERA AND DISTANCE SETTING		\$100.00	\$50.00
	TRANSFER TAILGATE MECHANISM		\$80.00	\$80.00
	CONDUCT WATER LEAKAGE TEST	NOT NECESSARY	\$250.00	\$0.00
	REMOVE AND REFIX REAR EXHAUST PIPE	NOT NECESSARY	\$120.00	\$0.00
	REMOVE AND REFIX TAILGATE WINDSCREEN		\$120.00	\$120.00
	REMOVE AND REFIX REAR FENDER QUARTER GLASS		\$80.00	\$50.00
	TO CHECK DIAGNOSTICS OF VEHICLE MANAGEMENT / CONTROL UNITS, RESET MEMORIES TO SPECIFICATION ETC	NOT NECESSARY	\$350.00	\$0.00
			\$6,050.00	\$2,510.00

GRAND TOTAL			\$20,876.07	\$8,988.24
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				\$7,200.00
Report Ref No: CS/SMR24090506/Avp3e2				

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 repositibility 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 10:55 (SGT)
Reported by	Actual Driver
Date of Accident	24/09/2024 11:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Along Chua Chu Kang towards Chua Chu Kang Ave 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLT4078C

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DF LIMO PTE. LTD.
Company Reg No	2XXXXX159R
Email Address	afa2310@gmail.com
Mobile Phone No	(Phone) +65-81185292
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	CARENS 1.7 DCT DIESEL 5DR FWD
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	1685
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	5115541373-04

DRIVER

Name of Driver	Mohd Farouk Bin Abdul Kareem
NRIC No	SXXXX359J
Date Of Birth	23/10/1975
Occupation	Outdoor
Driving Pass Date	02/12/2006
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	17 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93859311
Alt. Phone Number	-
Email Address	afa2310@gmail.com
Address	314A Punggol Way #14-615 S821314
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)	1
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	-

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 attached

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	SG6293U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	-
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	Mohd Farouk Bin Abdul Kareem
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 Days MC
Injured person in which vehicle?	SLT4078C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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 willful misrepresentation or withholding of material facts may allow insurance companies to re-evaluate 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 Traffic Police Department for investigation.**
6. 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.
7. By the judgement 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.

6. 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/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed 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 collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

1015 Linc.
25/4/2024

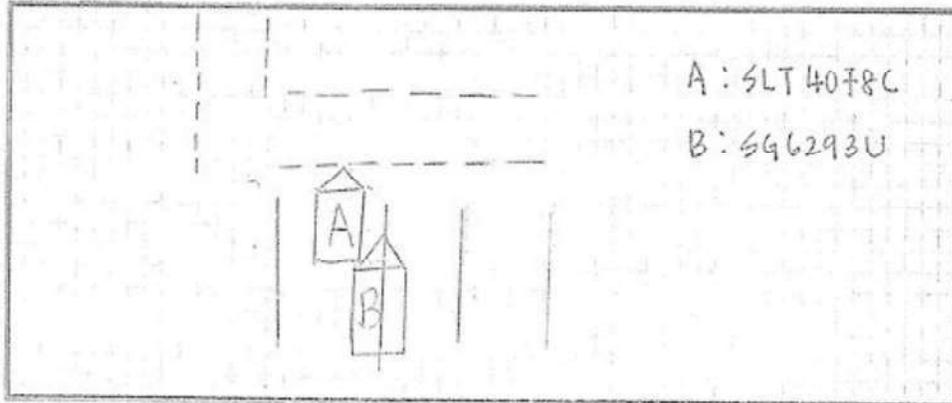


Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

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

Sketch Plan



Describe Circumstance of the Accident

refer to Police Report

Note: Please note that your insurer may have 14 days time frame for you to submit an own damage claim under your own policy, please check your policy for more information.

Declaration

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

101566
25/7/2024



Policyholder's Signature / Date & Time

Driver's Signature / If driver is not the policyholder / Date & Time

[Handwritten Signature]

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



**SINGAPORE
POLICE FORCE**



T/20240924/7077

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

2 of 3
Report No. T/20240924/7077

CONTINUATION OF REPORT

Driver			
Name	MOHD FAROUK BIN ABDUL KAREEM	ID No.	S7567359J
Related Vehicle	SLT4078C (Motor car)	Contact No.	93859311
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	03	Degree of Injury	Slight

Brief Details.

On 24 Sep 2024 around 11.10AM, I was travelling along Choa Chu Kang Way towards Chua Chu Kang Ave 3 near Block 280 Choa Chu Kang.

I was at the left lane waiting behind a Bus at the junction to turn left to Choa Chu Kang Ave 3. When the bus moved off, I moved forward and stopped before the pedestrian crossing for pedestrian to cross the road.

Suddenly, I felt an impact from the back of my car. There is another SBS number SG6293U driven by Nanthamuniyan Krisnnan hit onto the back of my car. I went down to inspect the damage. The driver apologized to me as he misjudged the distance of my car back and his bus when he wanted to travel straight.

After the accident, I have pain at the neck, back and shoulder so I went to see doctor and 3 days MC.



**SINGAPORE
POLICE FORCE**

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



T/20240924/7077

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Report No. T/20240924/7077

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/09/2024 16:03
Officer In Charge Of Case: TP / AEIT / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:

NP168

PHOTOGRAPHS FOR VEHICLE NO. : SLT 4078C



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PHOTOGRAPHS FOR VEHICLE NO. : SLT 4078C



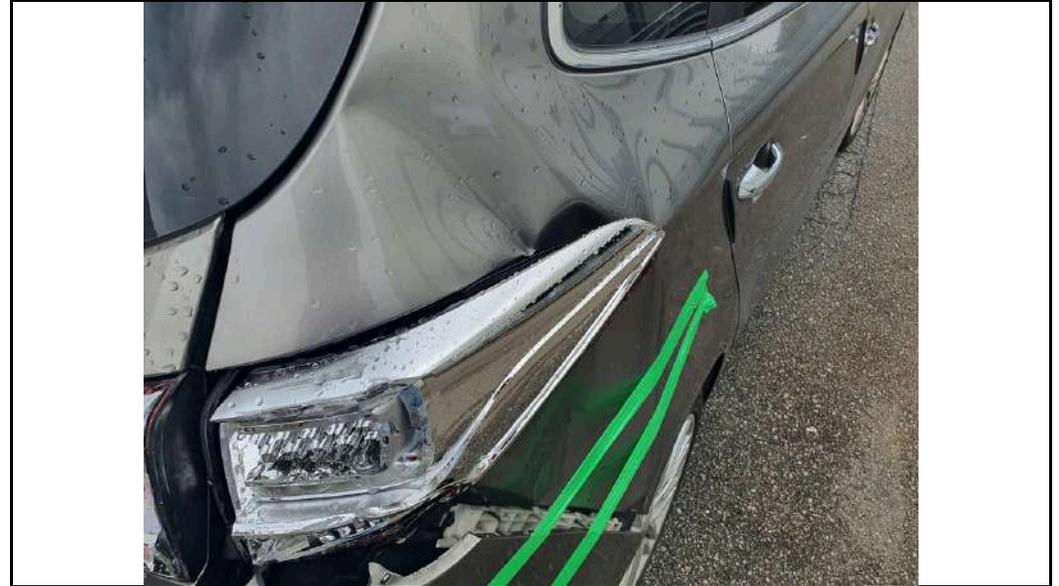
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INSPECTION PHOTOS (Page 13 of 13)

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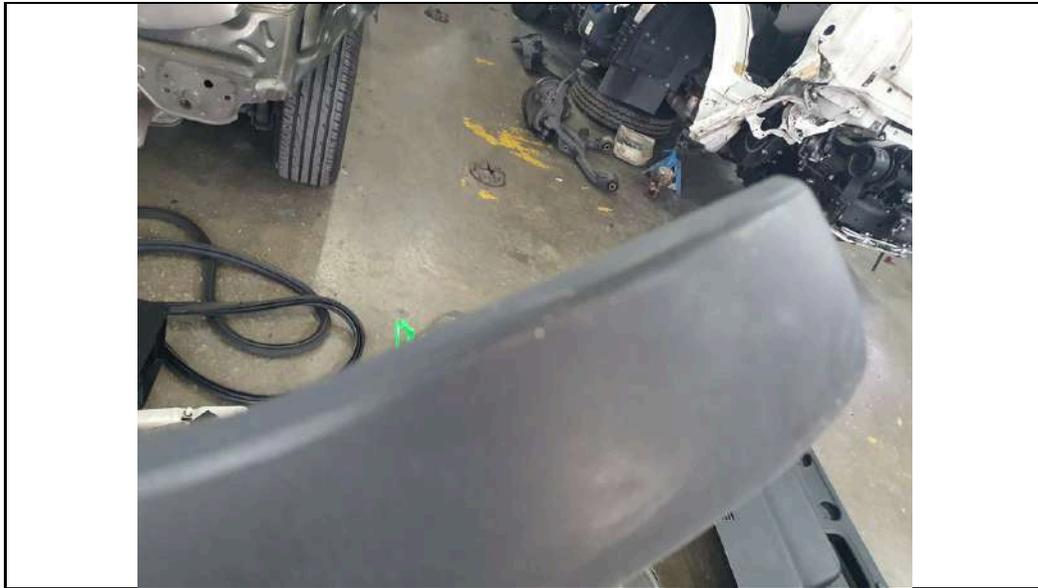
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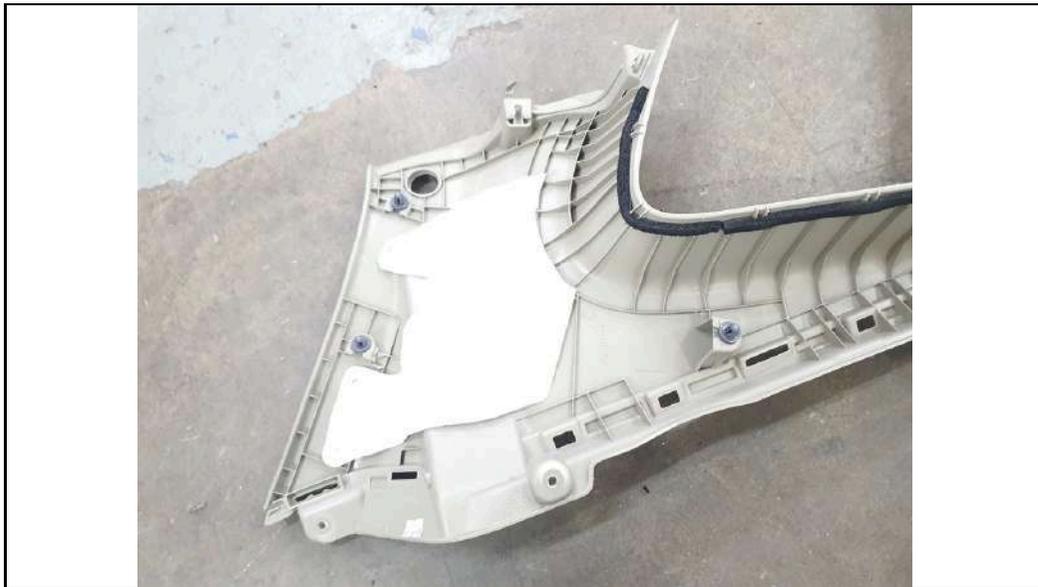
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