

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 INV No. AC2504086

60 WOODLANDS INDUSTRIAL PARK E4

SINGAPORE 757705

ATTN: HUA YEN

INV Date 30/06/2025

Reference CS/SMR24110574/Tqp3m4

/**N**T\

Code SMR

PROFESSIONAL SERVICE FEE

Vehicle No. SND 8247R

Insured Veh. SHF 350M

Claim No. TAX/11/24/2080

Policy No.

Accident Date 23/11/2024

Inspection Date 27/11/2024

Description	Total
Survey Inspection	128.00
Resurvey Inspection	
Digital Photographs	
Transportation	
Subtotal	128.00
GST (9%)	11.52
Grand Total	139.52

We shall be glad if you could forward the payment at your early 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 Internation	nale Des Experts En Aut	tomobile
	STRIDES PREMIE	R AUTOMOTIVE SERVICES PL	Re	f: CS/SMR24110574/Tqp3m4 (N)
	60 WOODLANDS I E4SINGAPORE 75	NDUSTRIAL PARK 7705	Da	te: 30/06/2025
	ATTN: HUA YEN		Co	de: SMR
1.		Policy Particulars	- THIRD PARTY CL	_AIM
	Insured Veh.	SHF 350M	Veh. Inspected	SND 8247R
	Policy No.		Coverage (\$)	0.00
	Claim No.	TAX/11/24/2080	Excess (\$)	0.00
	Assign From	HUA YEN	Assign Date	27/11/2024
2.		Vehicle Partic	ulars & Condition	
	Make & Model	TOYOTA ESQUIRE	c.c	1797
	Engine No.	HIDDEN	Year of Reg.	2022
	Chassis No.	ZWR800481767	Colour	PURPLE
	Odometer	82623 KM	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Condition	ons of Tyres	
		Size	Make	Balance
	R/H Front Tyre	215/55ZR17	MASTERSTEEL	6 mm
	L/H Front Tyre	215/55ZR17	MASTERSTEEL	6 mm
	R/H Rear Tyre	215/55ZR17	MASTERSTEEL	6 mm
	L/H Rear Tyre	215/55ZR17	MASTERSTEEL	6 mm
4.		Description	on of Damages	
	THE VEHICLE SUS	STAINED DAMAGES AT THE FRO	ONT AND REAR POR	TION.
	DAMAGES SEE DI	ETAILS.		
5.		General	Information	
	Accident Date	23/11/2024	Inspection Date	27/11/2024
	Survey held at	AKA AUTO PTE LTD		
		25 KAKI BUKIT ROAD 4, #05-36	, SYNERGY @ KB, SI	NGAPORE 417800
5a.		Re	emarks	
		N WAS CONDUCTED ON A"WIT E TO YOUR INSTRUCTIONS, W		
5b.		Estimate I	Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	6 W	Vorking Days



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SND 8247R

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
2	REAR BUMBER PLATE LAMP @\$78.90	NOT NECESSARY	157.80	-
1	REAR BUMPER	DEFORMED	1,180.90	950.00
2	REAR BUMPER SIDE HOLDER @\$70.90	O/S NOT NECESSARY/ N/S DEFORMED	141.80	70.90
1	REAR BUMPER TOW COVER	DEFORMED	28.10	28.10
2	REAR BUMPER REFLECTOR @\$85.90	O/S NOT NECESSARY/ N/S CUT	171.80	85.90
1	REAR END PANEL	BENT	735.70	635.00
1	REAR END PANEL TOP GARNISH	DEFORMED	148.60	148.60
1	REAR END PANEL ANTENNA SENSOR	NOT NECESSARY	184.60	-
2	TAILLAMP @\$685.10	NOT NECESSARY	1,370.20	-
2	TAILLAMP OUTER PANEL @\$311.10	NOT NECESSARY	622.20	-
2	TAILLAMP LOWER APRON @\$178.80	NOT NECESSARY	357.60	-
1	TAILGATE	BENT	1,958.90	1,812.70
1	TAILGATE LOCK	BENT	398.90	375.00
1	TAILGATE LOWER LOCK CATCH	NOT NECESSARY	38.90	-
1	TAILGATE WEATHERSTRIPE	TWISTED	375.10	275.00
1	TAILGATE OUTER MOULDING	NOT NECESSARY	581.50	-
1	TAILGATE INNER TRIM BOARD	CRACKED	761.80	580.00
2	TAILGATE DAMPER @\$326.80	NOT NECESSARY	653.60	-
2	TAILGATE HINGE @\$113.40	NOT NECESSARY	226.80	-
2	TAILGATE SIDE GARNISH @\$396.90	NOT NECESSARY	793.80	-
1	TAILGATE GLASS MOULDING	NECESSARY	420.00	185.20
1	TOYOTA LOGO	NECESSARY	78.20	78.20
1	HYBRID EMBLEM	NECESSARY	58.40	58.40
2	REAR FENDER INNER TRIM BOARD @\$906.50	NOT NECESSARY	1,813.00	-
2	REAR FENDER INNER SHIELD @\$125.90	NOT NECESSARY	251.80	-
1	JACK COVER	NOT NECESSARY	128.70	-
1	FLOOR PANEL	TO REPAIR SEE LABOUR	980.80	-

Report Ref No. CS/SMR24110574/Tqp3m4(N)



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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	FLOOR PANEL TOP BOARD	DEFORMED	950.60	691.40
1	FLOOR PANEL MAT	NOT NECESSARY	582.40	-
1	REAR EXHAUST PIPE	NOT NECESSARY	892.50	-
1	REAR EXHAUST PIPE MOUNTING	NOT NECESSARY	38.90	-
1	REAR EXHAUST PIPE GASKET	NOT NECESSARY	35.20	-
1	REAR EXHAUST PIPE HEAT SHIELD	NOT NECESSARY	188.20	-
	LESS 25% DISCOUNT		-4,326.83	-1,493.60
			12,980.47	4,480.80
	SPECIAL NETT ITEMS			
1	REAR NUMBER PLATE (SN)	NOT NECESSARY	30.00	-
1	REAR NUMBER PLATE HOLDER (SN)	NOT NECESSARY	30.00	-
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	30.00	30.00
1	SET REAR END PANEL TOP GARNISH CLIPS (SN)	NECESSARY	20.00	20.00
1	REAR END PANEL SEALANT (SN)	NECESSARY	60.00	40.00
2	SET TAILLAMP LOWER APRON CLIPS @\$20.00 (SN)	NOT NECESSARY	40.00	-
1	SET TAILGATE INNER TRIM BOARD CLIPS (SN)	NECESSARY	30.00	30.00
1	TAILGATE GLASS SEALANT (SN)	NECESSARY	60.00	60.00
1	TAILGATE STICKER (SN)	NECESSARY	30.00	30.00
1	REAR CAMERA (SN)	NOT NECESSARY	450.00	-
1	REAR VIDEO CAMERA (SN)	NOT NECESSARY	580.00	-
2	SET REAR FENDER INNER TRIM BOARD CLIPS @\$30.00 (SN)	NOT NECESSARY	60.00	-
2	SET REAR FENDER INNER SHIELD CLIPS @\$30.00 (SN)	NOT NECESSARY	60.00	-
1	FLOOR PANEL SEALANT (SN)	NOT NECESSARY	60.00	-
			1,540.00	210.00
	<u>LABOUR</u>			
	PANEL BEATING, REMOVE AND REFIT PARTS. INCLUSIVE OF THE REPAIR OF FLOOR PANEL.		1,600.00	700.00
	SPRAY PAINTING TO AFFECTED AREA.		1,600.00	700.00
	WIRING CHECK.		100.00	30.00
	TO APPLY TUFF COAT.		200.00	30.00
	TO REMOVE REAR UPHOLSTERY & REAR LH & RH SEATS.		380.00	60.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	TO REMOVE REAR CAMERA.		100.00	30.00
	TO REMOVE REAR VIDEO RECORDER.	NOT NECESSARY	100.00	-
	TO TRANSFER TAILGATE FITTINGS.		150.00	60.00
	TO REMOVE TAILGATE GLASS.	NOT NECESSARY	180.00	120.00
	TO REMOVE EXHAUST PIPE.		150.00	-
			4,560.00	1,730.00
	GRAND TOTAL		19,080.47	6,420.80

RECOMMENDED COST OF LUMP SUM REPAIRS		5,100.00
(TO ITS PRE-ACCIDENT CONDITION)		

Report Ref No. CS/SMR24110574/Tqp3m4(N)

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

ANG BRYAN TANI

Automotive Assessor / Investigator

Automotive Assessor

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 responsibility 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.

- 4. The issue and acceptance of this is form by instrained 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 23/11/2024 13:28 (SGT) Reported by **Actual Driver** Date of Accident 23/11/2024 06:10 (SGT) Exact Location of Accident Singapore Additional Location Information AMK AVE 1 TWDS CTE CITY SLIP ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SND8247R

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner AKA CAR LEASING PTE. LTD. Company Reg No 653E Email Address Mobile Phone No

VEHICLE PARTICULARS

Manufacturer

Alternative Phone No

Model Esquire Variant Exact purpose for which vehicle was being used at time of accident Private hire

Are you claiming under your own insurance policy for repair to your vehicle?

No - Claiming third party Vehicle Category Private hire Transmission Auto CC 1797 Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2031174750

DRIVER

Name of Driver NAH SOON HENG VINCENT NRIC No Date Of Birth Occupation Outdoor Driving Pass Date 18/11/1985 Driving License Pass Class Driving License Validity Valid Driving experience 39 YEARS Gender 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 Chain Collision Weather Conditions After Rain Road Surface Wet 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 phone number Translator's email Original language used in the statement PASSENGER 1 Name Unknown Gender Female PASSENGER 2 Name Unknown Gender Female 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

Accident report SA1A24BN0005

Please Refer To Accident Sketch Plan

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHF350M
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
Name of Driver	CHU CHIN SENG
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)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

SKETCH PLAN

Veh A: SND 8247R Veh B: SHF350M Veh C: SJU 3910A

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. The 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.
- 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.
- 8. 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' law yers/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.

CTE

(collectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

"I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY I WILL CHECK MY POLICY FOR MORE DETAILS

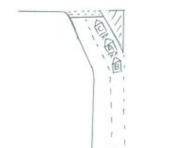
AKA CAR LEASING PTE LTD

Policyholder's Signature / Date & Time

1208

Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan



AM K AVE 1

A:	SHO 8247R							
В.	SHF350M							
	c: SJU 39	A01						
		Vehicle	3	bang me	Alom	behind to	neh why vehic	le
	inch	forward	and	touched	vehicle	C. buf	there were n	0
	visible	danages	øh	vehide C	, only	damages	on my vehic	le.
	on the	2/4			<i>2</i> 3		J	
	011 1110							

Declaration

IWe declare the foregoing particulars are true in every respect.

KA CAR LEASING PTE LTD

glicyholder's Signature / Date &

1208

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel

AKA CAR LEASING PTE LTD REG. NO. 201818653E





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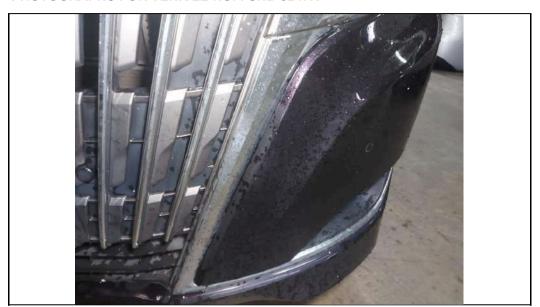








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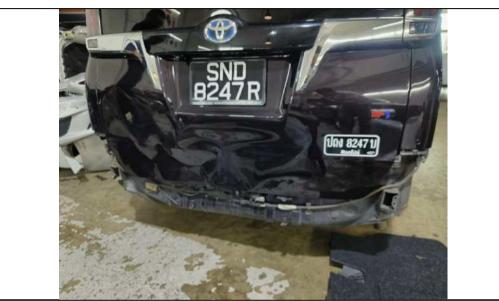








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