



## 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	INV No.	AC2500896
60 WOODLANDS INDUSTRIAL PARK E4	INV Date	11/02/2025
SINGAPORE 757705	Reference	CS/SMR24120308/Tvp3m4
ATTN: HUA YEN	Code	SMR

### PROFESSIONAL SERVICE FEE

Vehicle No.	SLL 2998C
Insured Veh.	SMB 1466T
Claim No.	BUS/12/24/5032
Policy No.	
Accident Date	17/12/2024
Inspection Date	20/12/2024

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

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 Internationale Des Experts En Automobile				
STRIDES PREMIER AUTOMOTIVE SERVICES PL			Ref:	CS/SMR24120308/Tvp3m4 (N)
60 WOODLANDS INDUSTRIAL PARK			Date:	11/02/2025
E4SINGAPORE 757705			Code:	SMR
ATTN: HUA YEN				
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SMB 1466T	Veh. Inspected	SLL 2998C	
Policy No.		Coverage (\$)	0.00	
Claim No.	BUS/12/24/5032	Excess (\$)	0.00	
Assign From	HUA YEN	Assign Date	20/12/2024	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	HONDA VEZEL	c.c	1496	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	RU31215093	Colour	BRONZE	
Odometer	187735 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	215/60R16	FIRENZA	6 mm	
L/H Front Tyre	215/60R16	FIRENZA	6 mm	
R/H Rear Tyre	215/60R16	FIRENZA	6 mm	
L/H Rear Tyre	215/60R16	FIRENZA	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	17/12/2024	Inspection Date	20/12/2024	
Survey held at	LION CITY RENTALS PTE LTD			
	4 JALAN BESUT			
	SINGAPORE 619557			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.				
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:			5 Working Days	



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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLL 2998C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	TAILGATE	BENT	1,068.10	1,068.10
1	TAILGATE 'LOGO' EMBLEM	NECESSARY	24.80	24.80
1	TAILGATE 'VEZEL' EMBLEM	NECESSARY	58.50	58.50
1	TAILGATE 'HYBRID' EMBLEM	NECESSARY	61.20	61.20
1	TAILGATE MECHANISM LOCK	NOT NECESSARY	95.70	-
1	TAILGATE INNER TRIM BOARD	NOT NECESSARY	547.00	-
1	TAILGATE WEATHERSTRIP	NOT NECESSARY	105.20	-
1	TAILGATE REFLECTOR LAMP RH	CRACKED	449.40	350.00
1	TAILLAMP RH	CRACKED	486.70	486.70
1	REAR BUMPER TOP RH	DEFORMED	482.00	290.00
1	REAR BUMPER LOWER	DEFORMED	1,128.00	780.00
1	REAR BUMPER SIDE RETAINER RH	NOT NECESSARY	72.00	-
1	REAR BUMPER REFLECTOR RH	CUT	75.00	75.00
1	REAR END PANEL	TO REPAIR SEE LABOUR	762.00	-
1	REAR END PANEL TOP GARNISH	NOT NECESSARY	261.00	-
	LESS 20% DISCOUNT		-1,135.32	-638.86
			4,541.28	2,555.44
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	SET TAILGATE GLASS SEALANT WITH PRIMER (SN)	NECESSARY	60.00	60.00
1	SET TAILGATE INNER TRIM BOARD CLIPS (SN)	NOT NECESSARY	40.00	-
1	TAILLAMP INNER PANEL SEALANT (SN)	NOT NECESSARY	60.00	-
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	50.00	30.00
1	REVERSE SENSOR (SN)	CUT	280.00	200.00
1	REAR END PANEL SEALANT (SN)	NOT NECESSARY	100.00	-
1	SET REAR END PANEL TOP GARNISH CLIPS (SN)	NOT NECESSARY	40.00	-
			630.00	290.00

Report Ref No. CS/SMR24120308/Tvp3m4(N)



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>LABOUR</b>			
	TO REMOVE THE AFFECTED PARTS & FITTINGS TO COMMENCE REPAIRS; REPLACE DAMAGED PARTS AND COMPONENTS. INCLUSIVE OF THE REPAIR OF REAR END PANEL.		800.00	600.00
	TO SUPPLY PAINT MATERIALS, EXPANDABLE ITEMS & PUTTY, RESPRAY PAINT ON PARTS REPLACED.		800.00	600.00
	TO REMOVE AND RE-FIX WIRING AND CHECK ALL ELECTRICAL COMPONENTS AT DAMAGED AREAS FOR PROPER FUNCTIONS.		120.00	30.00
	TO REMOVE AND REFIX/REPLACE REAR TRIMS, GARNISH AND FITTINGS SO AS TO FACILITATE REPAIRS AT REAR COMPARTMENT.		180.00	60.00
	TO PROVIDE ANTI-RUST TREATMENT ON AFFECTED AREAS.		120.00	30.00
	TO REMOVE AND REPLACE REVERSE SENSORS.		120.00	30.00
	TO REMOVE AND REFIX REAR TAILGATE WINDSCREEN.		120.00	120.00
			2,260.00	1,470.00
<b>GRAND TOTAL</b>			<b>7,431.28</b>	<b>4,315.44</b>

<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>			<b>3,450.00</b>
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Report Ref No. CS/SMR24120308/Tvp3m4(N)

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ANG BRYAN TANI

Automotive Assessor / Investigator

**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 contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying 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 .....	17/12/2024 18:39 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	17/12/2024 14:00 (SGT)
Exact Location of Accident .....	Commonwealth Ave, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLL2998C
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	LION CITY RENTALS PTE LTD
Company Reg No .....	2XXXXX621K
Email Address .....	lcrarc@lioncityrentals.com.sg
Mobile Phone No .....	(Phone) +65-62525525
Alternative Phone No .....	(Office) +65-62525525

### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Vezel
Variant .....	HYBRID 1.5X AUTO
Exact purpose for which vehicle was being used at time of accident .....	Private use
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 .....	Petrol-Electric
First Registration Date .....	-
Chassis no .....	RU31215093
Effective Date/Time of Ownership .....	-

### INSURANCE COMPANY

Name of Insurance Company .....	India International Insurance Pte Ltd
Policy Number / Cover Note Number .....	D23MFL0002582_01

### DRIVER

Name of Driver .....	SEAN LOW KIA HNG
NRIC No .....	SXXXX391F
Date Of Birth .....	-
Occupation .....	Outdoor
Driving Pass Date .....	29/03/2023
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	1 YEAR AND 9 MONTHS
Gender .....	Male
Mobile Number .....	-
Alt. Phone Number .....	-
Email Address .....	lcrarc@lioncityrentals.com.sg
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 - 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 .....	2
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) .....	2
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

#### 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

ON THE DATE 17/12/2024 AT ABOUT 1400HRS I WAS DRIVING VEHICLE A BEARING REGISTRATION NUMBER SLL2998C ALONG COMMONWEALTH AVE TOWARDS WEST COAST.WHEN I TRY TO TURN RIGHT FOR THE JUNCTION SUDDENLY VEHICLE B BEARING REGISTRATION NUMBER SMB1466T HIT MY VEHICLE FROM BEHIND . NOBODY WAS INJURED.

#### 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 .....	SMB1466T
Vehicle Manufacturer .....	Man
Vehicle Model .....	NL 320F (A22) 11L AUTO ABS TURBO
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) .....	-

**SKETCH PLAN****IMPORTANT NOTICE**

1. Please correctly report the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized 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 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. 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.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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' 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 involvedisclosure 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.



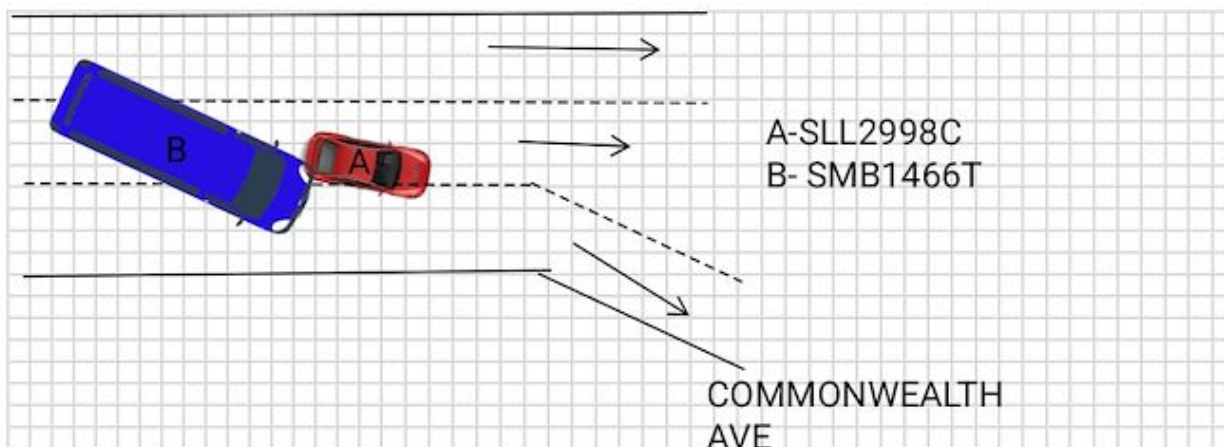

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**

17/12/2024  
1650HRS





## Describe Circumstances of the Accident

ON THE DATE 17/12/2024 AT ABOUT 1400HRS I WAS DRIVING VEHICLE A BEARING REGISTRATION NUMBER SLL2998C ALONG COMMONWEALTH AVE TOWARDS WEST COAST. WHEN I TRY TO TURN RIGHT FOR THE JUNCTION SUDDENLY VEHICLE B BEARING REGISTRATION NUMBER SMB1466T HIT MY VEHICLE FROM BEHIND . NOBODY WAS INJURED.

## Declaration

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



Policyholder's Signature / Date & Time

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

17/12/2024  
1650HRS



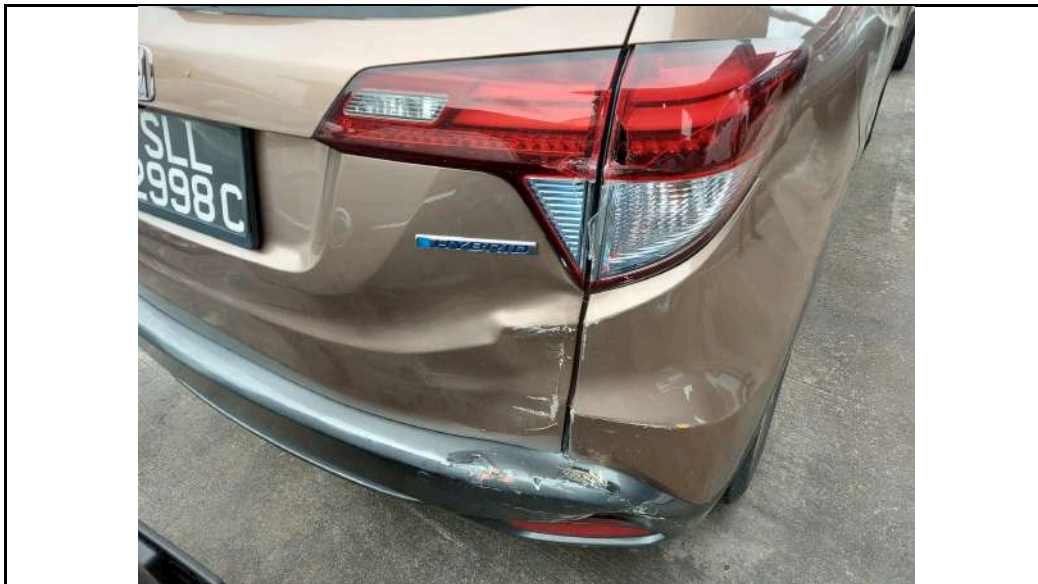
Witnessed by Reporting Centre Personnel

**PHOTOGRAPHS FOR VEHICLE NO. : SLL 2998C**



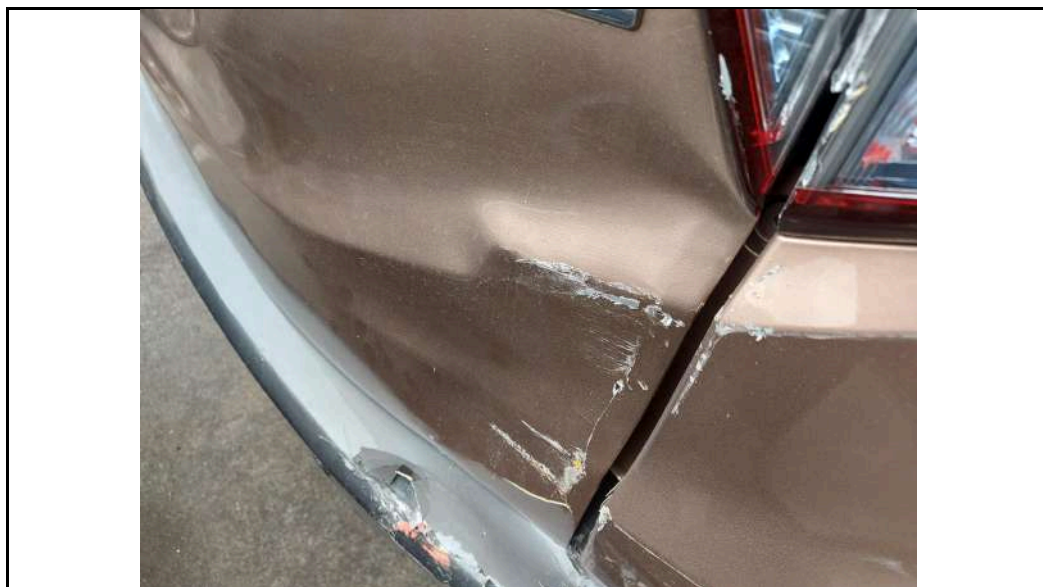


**PHOTOGRAPHS FOR VEHICLE NO. : SLL 2998C**



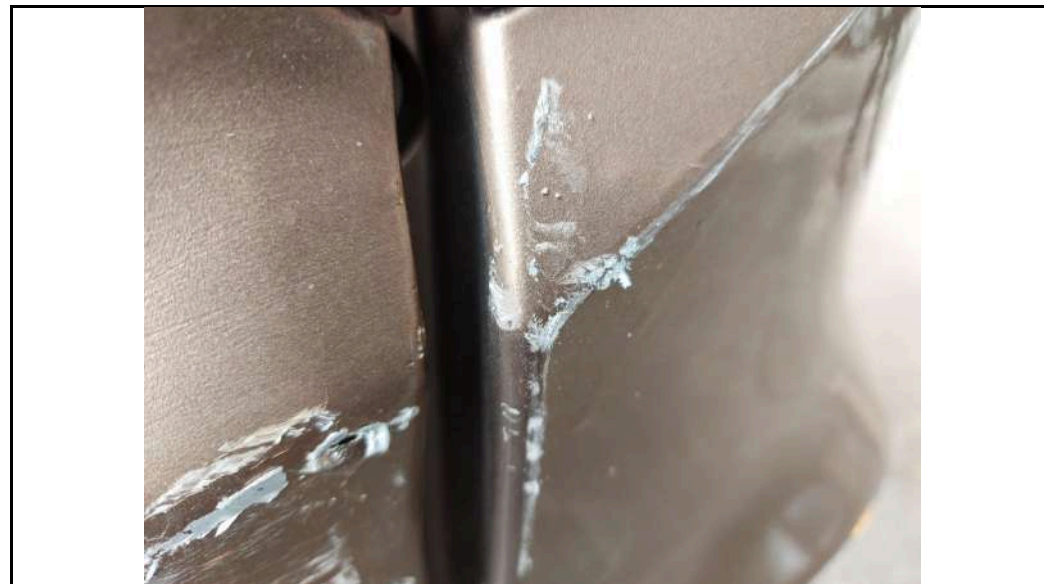


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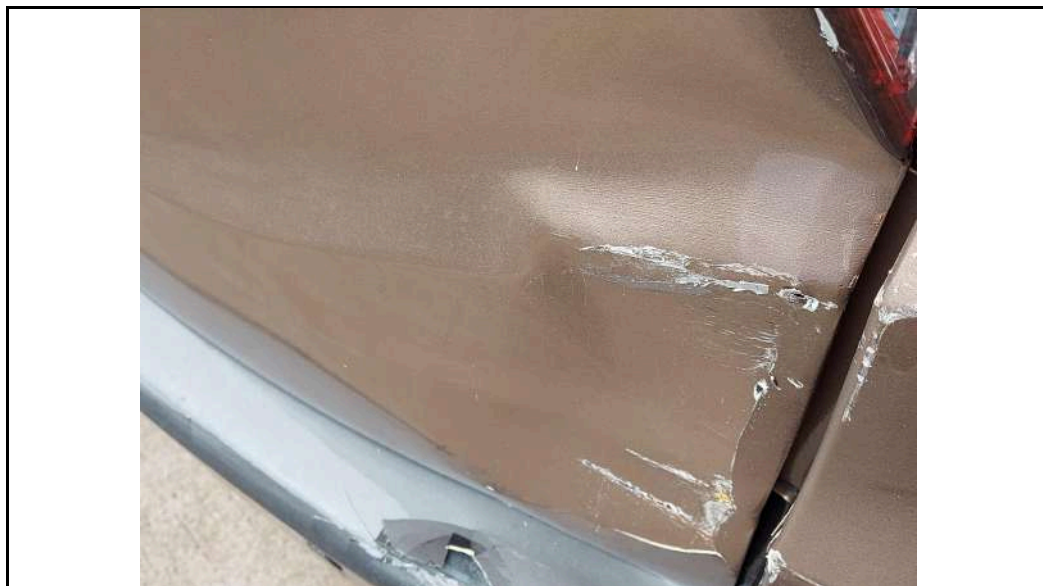




**PHOTOGRAPHS FOR VEHICLE NO. : SLL 2998C**



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

### PHOTOGRAPHS FOR VEHICLE NO. : SLL 2998C



**PHOTOGRAPHS FOR VEHICLE NO. : SLL 2998C**







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REINSPECTION PHOTOS (Page 2 of 2)

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