LKK

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.: SAC2401846

INV Date: 13-12-2024

Reference CS/SMR24070072/Rvp3m4

Code SMR

PROFESSIONAL SERVICE FEE

Vehicle No. SNL 6080A Insured Veh. SHF 387H

Claim No. TAX/02/24/2061

Policy No.

Accident Date 25/02/2024 Inspection Date 22/08/2024

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	



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 Internationa	le Des Experts En	Automobile			
MS	STRIDES PREMIER	RAUTOMOTIVE SERVICES PL.	Ref:	CS/SMR24070072/Rvp3m4			
	60 WOODLANDS IN 757705	IDUSTRIAL PARK E4 SINGAPORE	Date:	13/12/2024			
	737703		Code:	SMR			
1.		Policy Particulars :- T	HIRD PARTY CLA	IM			
	Insured Veh.	SHF 387H	Veh. Inspected	SNL 6080A			
	Policy No.	-	Coverage	0			
	Claim No.	TAX/02/24/2061	Excess	\$0.00			
	Assign From	HUA YEN	Assign Date	03/07/2024			
2.		Vehicle	Details				
	Make & Model	BYD ATTO 3 100KW SR	c.c	-			
	Engine No.	-	Year of Reg.	21/07/2023			
	Chassis No.	LGXCE4CB6P2145662	Colour	GREY			
	Odometer	20524 KM	Steering	IN ORDER			
	Brakes	IN ORDER	General	FAIR			
Modification(s) RIMS: SPORTS RIM							
3.		Conditions	s of Tyres				
		Size	Make	Balance (mm)			
	R/H Front Tyre	215/55R18	ATLAS	6			
	L/H Front Tyre	215/55R18	ATLAS	6			
	R/H Rear Tyre	215/55R18	ATLAS	6			
	L/H Rear Tyre	215/55R18	ATLAS	6			
4.		Description	of Damages				
THE	VEHICLE SUSTAIN	ED DAMAGES AT THE REAR PORTIO	N.				
DAM	AGES SEE DETAILS	S.					
5.	5. General Information						
	Accident Date	25/02/2024	Inspection Date	22/08/2024			
	Survey held at VANTAGE AUTOMOTIVE LTD 305 ALEXANDRA ROAD SINGAPORE 155942						
5a.		Rema	arks				
		AS CONDUCTED ON A"WITHOUT PRE YOUR INSTRUCTIONS, WE HAVE NO		REPAIRS.			
5b.		Estimate Day	ys of Repair				
	IMATED NORMAL D	ERIOD FOR REPAIR: 8 Working Days					



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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO SNL 6080A

	REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)	
1	BRACKET - LH REAR LOWER BUMPER	SERVICEABLE	\$32.00	\$0.00	
1	BRACKET - FRT LH REAR BUMPER	SERVICEABLE	\$31.00	\$0.00	
1	REAR BUMPER LR BRACKET ASSY	SERVICEABLE	\$18.00	\$0.00	
1	TRIM COVER OUTER LH - REAR BUMPER	SERVICEABLE	\$18.00	\$0.00	
1	TRIM COVER INNER LH - REAR BUMPER	SERVICEABLE	\$145.00	\$0.00	
1	TRIM OF REAR BUMPER	CRACKED	\$174.00	\$174.00	
1	TRIM - LOWER SURROUND REAR BUMPER	CRACKED	\$250.00	\$250.00	
1	BUMPER BODY ASSY.,REAR	DEFORMED	\$1,330.00	\$1,330.00	
2	PLATE CLIP @\$3.00	NOT NECESSARY	\$6.00	\$0.00	
2	CLIPS FOR BOARDS @\$3.00	NOT NECESSARY	\$6.00	\$0.00	
1	THROUGH-HOLE EMBEDDED PLASTIC NUT	NOT NECESSARY	\$1.50	\$0.00	
1	TRIM - LH REAR FENDER	SERVICEABLE	\$380.00	\$0.00	
1	BUILDYOURDREAM WORD MARK ASSY	NECESSARY	\$80.00	\$80.00	
1	ATTO WORD MARK ASSY	NECESSARY	\$23.00	\$23.00	
1	REAR PANEL ASSEMBLY	SERVICEABLE	\$1,100.00	\$0.00	
1	IMPACT BEAM.,REAR	SERVICEABLE	\$650.00	\$0.00	
1	BACK DOOR ASSEMBLY	BENT	\$3,480.00	\$3,480.00	
1	WINDSCREEN ASSY - REAR	NECESSARY	\$1,200.00	\$1,200.00	
1	SMALL PROBE (STANDARD BLACK)	SERVICEABLE	\$45.00	\$0.00	
1	SMALL PROBE (STANDARD BLACK)	SERVICEABLE	\$45.00	\$0.00	
1	REAR BUMEPR WIRE	CUT	\$250.00	\$250.00	
1	LEFT REAR REFLEX REFLECTOR	CRACKED	\$21.00	\$21.00	
1	REAR BUMPER WIRE (ADDITIONAL)	REPEATED	\$250.00	\$0.00	
1	FOG LAMP,REAR (ADDITIONAL)	CRACKED	\$132.00	\$132.00	
1	SMALL PROBE (STANDARD BLACK) (ADDITIONAL)	NECESSARY	\$45.00	\$45.00	
1	RR LICENSE PLATE BASE ASSY (ADDITIONAL)	CRACKED	\$60.00	\$60.00	
1	IMPACT BEAM,REAR (ADDITIONAL)	BENT	\$650.00	\$650.00	
	LESS 10.00% DISCOUNT		(\$1,042.25)	(\$769.50)	
			\$9,380.25	\$6,925.50	



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

	Special Nett						
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)			
1	REAR PLATE NUMBER WITH FRAME (SN)	DEFORMED	\$70.00	\$70.00			
1	SUNDRIES (SN)	NECESSARY	\$100.00	\$20.00			
			\$170.00	\$90.00			

		*	70000		
Labour					
Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)		
TO REMOVE & REPLACE REAR BUMPER, REAR TAILGATE, REAR END PANEL, REAR REINFORCEMENT BEAM }		\$2,450.00	\$1,500.00		
TO REMOVE & REPLACE REAR REINFORCEMENT BAR (ADDITIONAL) }		\$300.00	\$0.00		
TO REPAIR/PANEL BEAT REAR FLOOR PANEL		\$650.00	\$600.00		
TO REMOVE & INSTALL REAR WINDSCREEN GLASS AND CONDUCT WATER LEAK TEST		\$600.00	\$600.00		
TO SUPPLY & INSTALL 3M SOLAR FILM FOR REAR GLASS		\$350.00	\$350.00		
TO SPRAY PAINT REAR BUMPER, REAR TAILGATE, REAR END PANEL, REAR FLOOR PANEL, REAR REINFORCEMENT BEAM }		\$3,250.00	\$2,700.00		
TO SPRAY PAINT REAR END PANEL, REAR FLOOR PANEL, REAR REINFORCEMENT (ADDITIONAL) }		\$150.00	\$0.00		
TO CONDUCT BODY CAVITY PRESERVATIONS		\$200.00	\$100.00		
TO CONDUCT ECU RE-PROGRAMMING AND CLEAR OF FAULT CODES TO ENSURE PROPER FUNCTION		\$600.00	\$600.00		
TO REPAIR/ PANEL BEAT REAR END PANEL, REAR FLOOR PANEL (ADDITIONAL)		\$1,200.00	\$600.00		
		\$9,750.00	\$7,050.00		
GRAND TOTAL		\$19,300.25	\$14,065.50		
RECOMMENDED COST OF REPAIRS			\$14,065.50		

MRB

MOHAMMED RASUL BIN MOHD YUNUS

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 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.

Report Ref No: CS/SMR24070072/Rvp3m4

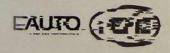
Vantage Automotive Limited Registration No. 53855563L GST Registration No. M2-0000551-1

385 Alexandra Road Singapore 159942 Tel: 64777499 Fax: 64777398









Car Reg No. : SNL6080A

RO No. : BY 311213

DATE: 12.09.24

NO.	Supplementary / Check Items Parts	Part Number	Qty	U / Price	Disc %	TOTAL
1	REAR BUMPER WIRE CONTROL repeated	13401407-00	1	\$250.00	10%	\$225.00
2	FOG LAMP, REAR CA	11721028-00	1	\$132.00	10%	\$118.80
3	SMALL PROBE (STANDARD BLACK) A	13195405-00	1	\$45.00	10%	\$40.50
4	RR LICENSE PLATE BASE ASSY	13678676-00	1	\$60.00	10%	\$54.00
5	IMPACT BEAM.,REAR	13777448-00	1	\$650.00	10%	\$585.00 /
					Parts Total:	\$1,023.30

NO.	Supplementary Labour Charges	Price	
1	TO REMOVE & REPLACE REAR REINFORCEMENT BAR	\$300.00	
2	TO REPAIR/ PANEL BEAT REAR END PANEL, REAR FLOOR PANEL TO SPRAY PAINT REAR END PANEL, REAR FLOOR PANEL, REAR REINFORCEMENT		
3			
	Total Labour:	\$1,650.00	
	Total Parts & Labour:	\$2,673.30	
	GST @ 9%:	\$240.60	
	Grand Total:	\$2,913.90	

Raised By Technician	Approved By CSA	Acknowledge By Parts Assistant	BO Parts: Yes / No
	DANIAL		ETA:

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 26/02/2024 13:12 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 25/02/2024 00:35 (SGT) Exact Location of Accident Near PIE, Singapore Additional Location Information LORONG 6 TOA PAYOH Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SNL6080A** INSURED/POLICYHOLDER Is company?

No Name Of Registered Owner WEE SUNG SENG NRIC No SXXXX787A Email Address Mobile Phone No

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Byd Model ATTO 3 Variant

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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

CC

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd Policy Number / Cover Note Number

DRIVER

Name of Driver JORDAN WEE WEI XIN NRIC No TXXXX074B Date Of Birth

Occupation Indoor



Driving Pass Date 01/11/2020 Driving experience 3 YEARS AND 3 MONTHS 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 Child 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 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 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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SNF387H

Toyota

Prius

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Taxi
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)	-

KETCH	PLAN				11111		
A= 8	SNL (6080A 387H	B	A A	N		
SCRIB	E CIRCUMST	TANCES OF THE AC	CCIDENT				
	٤.	- RFFE	r 49	Por	CE P	FPONT	-

DECLARATION

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

Date & Time:

Driver's Signature

(If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's S

Name: NRIC/FIN No.:

SKETCH PLAN

IMPORTANT NOTICE

- 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 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.
- Any false reporting may be referred to the Police for investigation.
- 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 lodgment 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.
- 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder)

Date & Time:

0

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240225/7008

REPORT	OF A	TRAFFIC	ACCIDENT

Date/Time Report Made: 25/02/2024 02:06		/lade:	Vide Report No.:	Station Diary No.		
Informa	nt's Partice	ulars				
Name of Informant: JORDAN WEE WEI XIN			Address:			
ID Type / ID No.: NRIC NO /			Contact No.: Home/Office:	Mobile.		
Nationality: SINGAPORE CITIZEN		EN	Email:	541		
Sex: Age: Date of Birth:		Date of Birth:	Type of Informant: Driver			
Race: Chinese		•	Language: English			
Occupation: National Service Full Time			Driving Licence Information: Class: 3	Date of Expiry:		

General Inform	mation of the Accide	ent			
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 25/02/2024 00:35	Type of Location filter lane	
Location:					
LORONG 6 T Weather: Clear	OA PAYOH	Road Surface: Dry			
Traffic Flow:		Traffic Control:		Traffic Volume:	
One Way	One Way			Light	
Type of Collis Between Mov	sion: ring Vehicles - Head "	To Rear		Anyone conveyed by ambulance: No	

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SHF387H	Car	тоуота	Prius	Maroon	Seriously Damaged	0
SNL6080A	Car	BYD	Atto 3	White	Slightly Damaged	0

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		



Details of Vehicle Insurance



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

2 of 3 Report No. T/20240225/7008

CONTINUATION OF REPORT

	1					-		-
Vehicle No.	Ins	surance Company Insu		Insura	nce No		Effective	Expiry Date
SNL6080A	libe	erty insurance						
Details of Po	erso	n Involved				177	V-18-7-1-1-1	
Any Pedestri	ian Ir	nvolved: No						
No. of Pedes	strian	s Injured: NIL		Use of Po	edestrian	Cross	ing: NA	
Driver	The second					of the same		
Name		JORDAN WEE WEI XIN			ID No.			
Related Veh	icle	SNL6080A (Car)		Contact No.		NIL		
Hospital/Clin	nic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL	
Date		NIL Dat			NIL			
No. of Days granted Medical Leave NIL			Degree o	Degree of NIL			55-55-5-5-5-5-6	
Driver	(E)				SHOULE	27133		
Name		JORDAN WEE WEI XIN			ID No.			
Related Veh	icle	SNL6080A (Car)			Contact No.			
Hospital/Clin	ic	NIL			Class of Driving Licence &		Class: 3 Date of Ex	opiry: NIL

Brief Details.

NIL

No. of Days granted Medical Leave

Date

I was giving way to oncoming vehicles when a taxi bearing registration number SHF387H hit onto the rear of my vehicle bearing registration number SNL6080A

NIL

Date

Degree of

Expiry

NIL

NIL





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20240225/7008

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: 25/02/2024 02:06
Officer In Charge Of Case: TP / AEIT / FAHKRUL RAZI BIN SUHAIME Contact No.: 65476404	Classification Of Case:

This report is lodged at Marine Parade NPC Kiosk 1

NP168



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

INSPECTION PHOTOS (Page 1 of 14)











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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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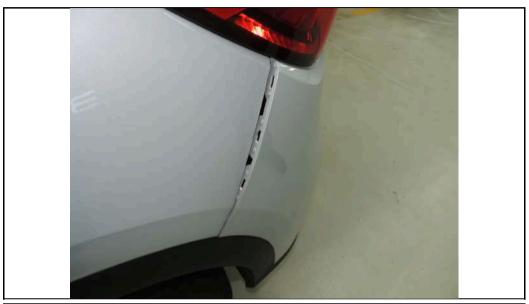


51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933 TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

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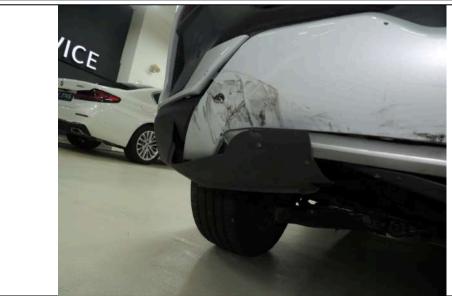


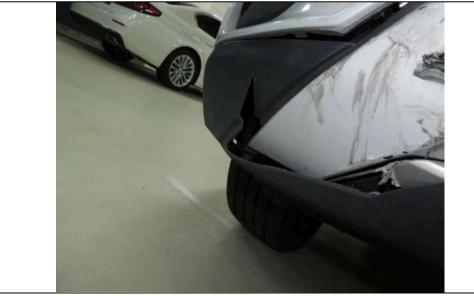


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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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19-9607198-R

REINSPECTION PHOTOS (Page 4 of 4)











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

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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Reg. No: 199607198R GST Reg. No. 19-9607198-R

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