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 SINGAPORE 757705

INV No.: SAC2400211

INV Date: 07-08-2024

Reference CS/SMR24070090/Rvp3m4

Code SMR

PROFESSIONAL SERVICE FEE

Vehicle No. SMN 9690X Insured Veh. SHF 341P

Claim No. TAX/07/24/2006

Policy No.

Accident Date 02/07/2024 Inspection Date 05/07/2024

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/SMR24070090/Rvp3m4 60 WOODLANDS INDUSTRIAL PARK E4 SINGAPORE Date: 07/08/2024 757705 Code: SMR 1. **Policy Particulars :- THIRD PARTY CLAIM** Insured Veh. **SHF 341P** Veh. Inspected **SMN 9690X** Policy No. Coverage Claim No. TAX/07/24/2006 **Excess** \$0.00 **HUA YEN Assign From** Assign Date 03/07/2024 2. **Vehicle Details** SKODA KAROQ 1.5 TSI AMBITION C.C Make & Model 1498 (A) **Engine No.** DAD349312 Year of Reg. 03/09/2019 Chassis No. TMBKR7NU1K5025756 Colour **BLUE IN ORDER** Odometer 89320 KM Steering **Brakes** IN ORDER General **FAIR** Modification(s) RIMS: SPORTS RIM 3. **Conditions of Tyres** Size Make Balance (mm) 215/60 R16 **MICHELIN** 6 R/H Front Tyre 6 L/H Front Tyre 215/60 R16 **MICHELIN** 6 215/60 R16 **MICHELIN** R/H Rear Tyre L/H Rear Tyre 215/60 R16 **MICHELIN** 6 **Description of Damages** THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION.

DAMAGES SEE DETAILS.

5. General Information				
Accident Date	02/07/2024	Inspection Date	05/07/2024	
Survey held at	VOLKSWAGEN GROUP SINGAPORE 247 ALEXANDRA ROAD SINGAPORE 159934	PTE LTD		

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 SMN 9690X

	Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)	
1	COVER FOR REAR BUMPER (TOP) (SN)	SCRATCHED	\$1,843.66	\$1,843.66	
1	COVER FOR REAR BUMPER (BOTTOM) (SN)	SCRATCHED	\$788.21	\$788.21	
1	GUIDE PIEC LHR BUMPER BRACKET (SIDE) (SN)	SERVICEABLE	\$77.13	\$0.00	
1	GUIDE PIEC RHR BUMPER BRACKET (SIDE) (SN)	SERVICEABLE	\$77.13	\$0.00	
1	GUIDE PIEC LHR BUMPER BRACKET (OUTER) (SN)	SERVICEABLE	\$88.45	\$0.00	
1	GUIDE PIEC RHR BUMPER BRACKET (OUTER) (SN)	SERVICEABLE	\$88.45	\$0.00	
1	ATTACHMENT REAR BUMPER BRACKET (CTR) (SN)	CRACKED	\$77.69	\$77.69	
4	SEAL RING SATIN BLACK (SN)	NECESSARY	\$6.52	\$6.52	
1	SENSOR PRIMED (SN)	SERVICEABLE	\$206.04	\$0.00	
1	REINFORCEMENT (SN)	BENT	\$529.95	\$529.95	
1	REFLECTOR LHR (SN)	CRACKED	\$58.34	\$58.34	
1	INSCRIPTIO "SKODA" LETTERING (SN)	NECESSARY	\$61.39	\$61.39	
1	LETTERING "KAROQ" LETTERING (SN)	NECESSARY	\$85.90	\$85.90	
1	SKODA EMBL (SN)	NECESSARY	\$76.74	\$76.74	
1	SENSOR BRACKET (SN) (ADDITIONAL)	NECESSARY	\$53.68	\$53.68	
1	SENSOR BRACKET (SN) (ADDITIONAL)	NECESSARY	\$53.68	\$53.68	
1	SENSOR BRACKET (SN) (ADDITIONAL)	NECESSARY	\$38.15	\$38.15	
1	SENSOR BRACKET (SN) (ADDITIONAL)	NECESSARY	\$38.15	\$38.15	
1	2K-PLASTIC ADHESIVE (SN) (ADDITIONAL)	NECESSARY	\$94.98	\$94.98	
1	BONDING AGENT FOR PLASTIC (SN) (ADDITIONAL)	NECESSARY	\$78.24	\$78.24	
2	EXPANDING NUT (SN) (ADDITIONAL)	NECESSARY	\$4.56	\$4.56	
			\$4,427.04	\$3,889.84	

Labour				
Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)	
B&P CHECK SHORT CIRCUIT/HARNESS REPAIR		\$280.00	\$280.00	
B&P DIAGNOSIS AND PROGRAMMING		\$480.00	\$480.00	
LABOUR		\$3,360.00	\$1,680.00	
SPRAY PAINTING		\$2,400.00	\$800.00	
LABOUR (REPAIR END PANEL) (ADDITIONAL)		\$840.00	\$840.00	



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Labour				
Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)	
SPRAY PAINT (END PANEL) (ADDITIONAL)		\$800.00	\$800.00	
		\$8,160.00	\$4,880.00	
GRAND TOTAL		\$12,587.04	\$8,769.84	
RECOMMENDED COST OF REPAIRS			\$8,769.84	
Report Ref No: CS/SMR24070090/Rvp3m4				

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.

Supplementary or Omitted List

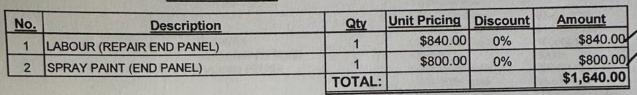
VEHICLE NUMBER:

SLE4271P

MODEL

Tiguan Highline 1.4 I TSI 110kW N6 DSG

CLAIMS DETAILS



No	Itom No	Description	Qty	Unit Pricing	Discount	Amount
No.	Item No.		1	\$53.68	0%	\$53.68
1	57A919485C	Sensor Bracket	Autoritie (1922)			\$53.68
2	57A919485B	Sensor Bracket	1	\$53.68	0%	The state of the s
	Control Charles Control Control Control	Sensor Bracket ~	1	\$38.15	0%	\$38.15
3	57A919486B		1	\$38.15		\$38.15
4	57A919486C	Sensor Bracket M				\$94.98
5	D 180KU2A1	2k-Plastic Adhesive ~	1	\$94.98	0%	THE RESERVE OF THE PERSON OF T
		Bonding Agent For Plastic	1	\$78.24	0%	\$78.24
6	D 822150A1		-	\$2.28		\$4.56
7	N 10621301	Expanding Nut / /	2		070	The same of the sa
			TOTAL:			\$278.64
					THE RESIDENCE TO SERVICE THE PARTY OF THE PA	

Total Labour & Parts

\$1,918.64

Total Working Days: 4 + 2 = 6 working days

Survey By:

Mr Rasul, LKK

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 02/07/2024 19:03 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 02/07/2024 16:20 (SGT) Exact Location of Accident Singapore Additional Location Information AT CLEMENTI ROAD NEAR MAJU CAMP JUNCTION Country/State of Loss Singapore **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMN9690X INSURED/POLICYHOLDER Is company? No Name Of Registered Owner **RYOO JAE KWAN** NRIC No SXXXX338I

Email Address Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Skoda Model Karog Variant Karoq Ambition 1.5 I TSI 110kW DSG w/PHI 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 1500

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2007399839

DRIVER

Name of Driver RYOO JAE KWAN NRIC No SXXXX338I Date Of Birth Occupation Indoor

Driving Pass Date Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	12/10/2010 13 YEARS AND 9 MONTHS Male - Yes - No -
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 No - Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver NRIC No	SHF341P Taxi TAN JOO LENG SXXXX368Z

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 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.
- 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>.
- 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.
- 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.
- 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)

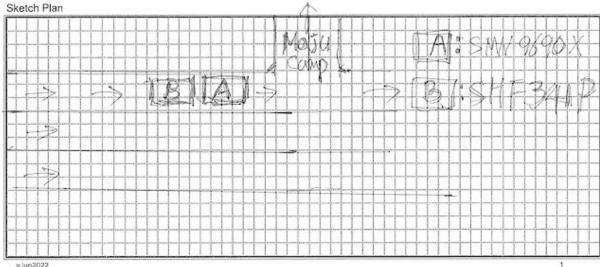
I understand, acknowledge, agree and consent that:

- (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' 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
- (a) 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 Poate & Time

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

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



Describe Circumstance of the Accident Location: On Chamenti Road near Majur	Car	np
"My care was startionary, waiting for light to change, Suddenly thre SMRT taxi collinded car from behind.		
· My cav: SMX 9690 X · 3rd pady cav: SFF 3/F P · accident the: 2 July 2024 · accident thee: 4:20 pm		
Declaration I/We declare the foregoing particulars are true in every respect.	dui	5

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

CACcident report SV1124720002

vJun2022



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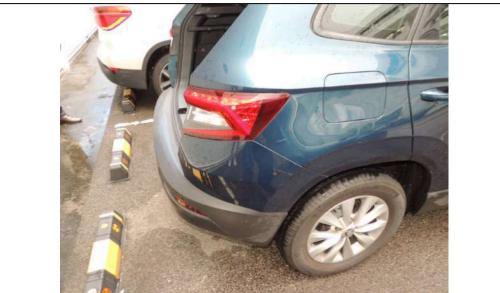




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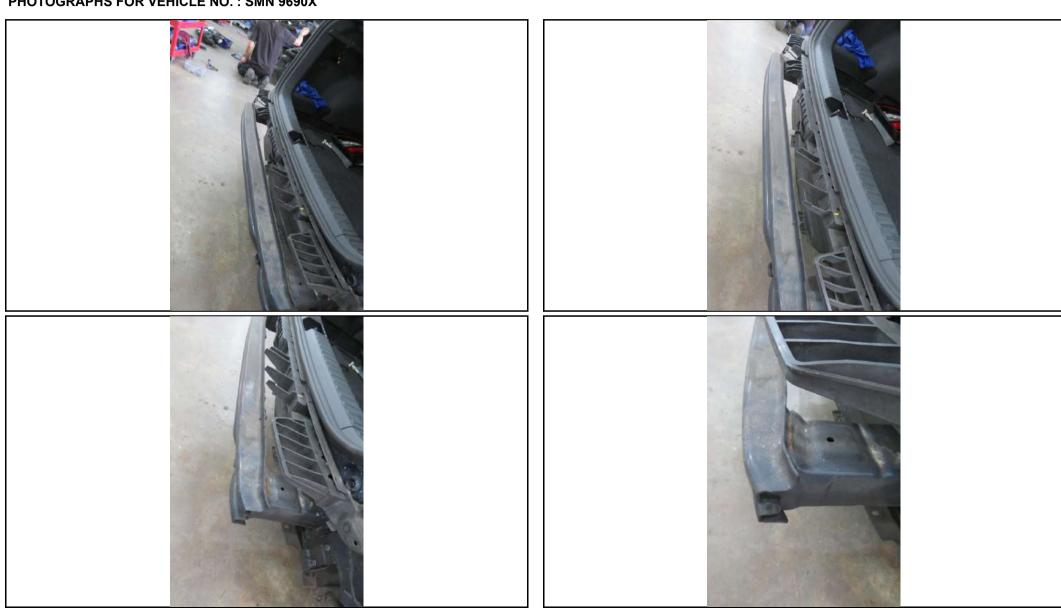








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PHOTOGRAPHS FOR VEHICLE NO.: SMN 9690X





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