



# 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 SINGAPORE CIVIL DEFENCE FORCE (MHA05)	Ref:	CS/SCD24070487/Aqp3
91 UBI AVE 4 SINGAPORE 408827	Date:	12/09/2024
	Code:	SCD

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	QX 1040A	Veh. Inspected	SNM 3744H
Policy No.	-	Coverage	0
Claim No.	2024 – 93	Excess	\$0.00
Assign From	SYABIL ISMAIL	Assign Date	30/07/2024

### 2. Vehicle Details

Make & Model	TOYOTA SIENTA HYBRID	C.C	1490
Engine No.	M15AY610278	Year of Reg.	18/09/2023
Chassis No.	MXPL101038451	Colour	WHITE
Odometer	58938 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	185/65 R15	TOURADOR	6
L/H Front Tyre	185/65 R15	TOURADOR	6
R/H Rear Tyre	185/65 R15	TOURADOR	6
L/H Rear Tyre	185/65 R15	TOURADOR	6

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.

DAMAGES SEE DETAILS.

### 5. General Information

Accident Date	26/07/2024	Inspection Date	31/07/2024
Survey held at	MCR MOTORS PTE LTD - 8 KAKI BUKIT AVE 4 #01-53, PREMIER @ KAKI BUKIT SINGAPORE 415875		

### 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 SNM 3744H

REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	TAILGATE	DENTED	\$1,817.57	\$1,380.00
1	TAILGATE CENTRE EMBLEM	NECESSARY	\$86.60	\$86.60
1	TAILGATE "HYBRID" EMBLEM	NECESSARY	\$121.39	\$121.39
1	TAILGATE WINDSCREEN GLASS RUBBER MOULDING	NECESSARY	\$93.10	\$93.10
1	TAILGATE LOCK	DAMAGED	\$463.40	\$463.40
1	TAILGATE LOCK CATCH	NOT NECESSARY	\$45.33	\$0.00
1	TAILGATE INNER TRIM BOARD	TORN	\$324.80	\$210.00
1	SET TAILGATE INNER TRIM BOARD CLIPS	NECESSARY	\$80.00	\$20.00
1	TAILGATE WIPER MOTOR	NOT NECESSARY	\$673.10	\$0.00
1	TAILGATE RH DAMPER STAY	NOT NECESSARY	\$233.10	\$0.00
1	TAILGATE LH DAMPER STAY	NOT NECESSARY	\$233.10	\$0.00
1	TAILGATE OUTER GARNISH	NOT NECESSARY	\$738.52	\$0.00
1	SET TAILGATE OUTER GARNISH CLIPS	NOT NECESSARY	\$70.00	\$0.00
1	TAILGATE WEATHERSTRIP	CUT	\$369.05	\$369.05
1	TAILGATE REVERSE CAMERA	NOT NECESSARY	\$849.39	\$0.00
1	REAR BUMPER	DEFORMED	\$711.23	\$595.00
1	SET REAR BUMPER CLIPS	NECESSARY	\$80.00	\$30.00
1	REAR BUMPER TOWING COVER	NOT NECESSARY	\$28.94	\$0.00
1	REAR BUMPER RH SIDE RETAINER	NOT NECESSARY	\$147.20	\$0.00
1	REAR BUMPER LH SIDE RETAINER	NOT NECESSARY	\$147.20	\$0.00
1	REAR BUMPER RH SIDE REVERSE SENSOR	NOT NECESSARY	\$329.60	\$0.00
1	REAR BUMPER RH CENTRE REVERSE SENSOR	NOT NECESSARY	\$329.60	\$0.00
1	REAR BUMPER LH CENTRE REVERSE SENSOR	DAMAGED	\$329.60	\$329.60
1	REAR BUMPER LH SIDE REVERSE SENSOR	NOT NECESSARY	\$329.60	\$0.00
1	REAR BUMPER RH SIDE REFLECTOR	NOT NECESSARY	\$168.44	\$0.00
1	REAR BUMPER LH SIDE REFLECTOR	NOT NECESSARY	\$168.44	\$0.00
1	RH TAILLAMP	NOT NECESSARY	\$553.28	\$0.00
1	RH TAILLAMP GASKET	NOT NECESSARY	\$34.21	\$0.00
1	SET RH TAILLAMP LOCK CLIPS	NOT NECESSARY	\$35.00	\$0.00
1	LH TAILLAMP	NOT NECESSARY	\$553.28	\$0.00



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REPLACEMENT OF PARTS				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	LH TAILLAMP GASKET	NOT NECESSARY	\$34.21	\$0.00
1	SET LH TAILLAMP LOCK CLIPS	NOT NECESSARY	\$35.00	\$0.00
1	END PANEL	DENTED	\$402.61	\$402.61
1	END PANEL INNER GARNISH	DEFORMED	\$265.36	\$265.36
1	SET END PANEL INNER GARNISH CLIPS	NECESSARY	\$50.00	\$20.00
1	END PANEL ANTENNA SENSOR	CRACKED	\$109.60	\$109.60
1	REAR RH FENDER INNER TRIM	NOT NECESSARY	\$687.43	\$0.00
1	SET REAR RH FENDER INNER TRIM CLIPS	NOT NECESSARY	\$70.00	\$0.00
1	REAR LH FENDER INNER TRIM	CRACKED	\$687.43	\$687.43
1	SET REAR LH FENDER INNER TRIM CLIPS	NECESSARY	\$70.00	\$30.00
1	REAR SPARE TYRE UPPER BOARD	NOT NECESSARY	\$342.19	\$0.00
	<b>LESS 25.00% DISCOUNT</b>		(\$3,224.48)	(\$1,303.29)
			\$9,673.42	\$3,909.85

Special Nett				
Qty	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
1	TAILGATE GLASS SEALANT (SN)	NECESSARY	\$80.00	\$40.00
1	TAILGATE GLASS INNER SEAL (SN)	NECESSARY	\$60.00	\$30.00
1	END PANEL JOINT SEALANT (SN)	NECESSARY	\$80.00	\$60.00
1	REAR NUMBER PLATE (SN)	NOT NECESSARY	\$80.00	\$0.00
			\$300.00	\$130.00

Labour				
	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
	LABOUR CHARGES TO THE AFFECTED AND CONSISTENT AREAS.		\$1,500.00	\$700.00
	SPRAY PAINTING ON AFFECTED AND CONSISTENT AREAS AND PANELS		\$1,400.00	\$700.00
	CHECK WIRING AND LIGHTING SYSTEM ON AFFECTED AREAS		\$80.00	\$30.00
	APPLY RUST COATING CHEMICAL ON AFFECTED AREAS AND PANELS		\$100.00	\$60.00
	REMOVE AND REFIT TAILGATE WINDSCREEN GLASS TO ASSIST REPAIR		\$220.00	\$120.00
	REMOVE AND REPLACE TAILGATE REVERSE CAMERA TO ASSIST REPAIR		\$100.00	\$50.00



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Labour				
	Description of Parts	Condition	Workshop Estimate (\$)	Our Adjusted (\$)
	REMOVE AND REPLACE TAILGATE INNER MECHANISM TO NEW TAILGATE		\$150.00	\$60.00
	REMOVE AND REPLACE REAR BUMPER REVERSE SENSORS TO ASSIST REPAIR (4 PCS)		\$120.00	\$50.00
	REMOVE AND REPLACE REAR INNER TRIMS AND BOARDS TO ASSIST REPAIRS		\$350.00	\$60.00
			\$4,020.00	\$1,830.00
GRAND TOTAL			\$13,993.42	\$5,869.85
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			\$4,600.00
Report Ref No: CS/SCD24070487/Aqp3				

**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 reposibility 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	26/07/2024 16:12 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	26/07/2024 10:30 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE / CHANGI EXIT 19.
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNM3744H
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TANG MENG LYE
NRIC No	S1605636G
Email Address	YITING93@HOTMAIL.COM
Mobile Phone No	(Phone) +65-94518197
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
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 car
Transmission	Auto
CC	1500

### INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2007696073-01

### DRIVER

Name of Driver	TANG MENG LYE
NRIC No	S1605636G
Date Of Birth	28/06/1963
Occupation	Indoor

Driving Pass Date	01/12/1983
Driving experience	40 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94518197
Alt. Phone Number	-
Email Address	YITING93@HOTMAIL.COM
Address	BLK 341 BUKIT BATOK ST 34 #02-58
Address complement	-
Postcode	650341
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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?	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?	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 POLICE REPORT NO.T/20240726/7073.

#### 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	QX1040A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEH B
No. Of Passenger (Including Driver)	4

SKETCH PLAN

IMPORTANT NOTICE

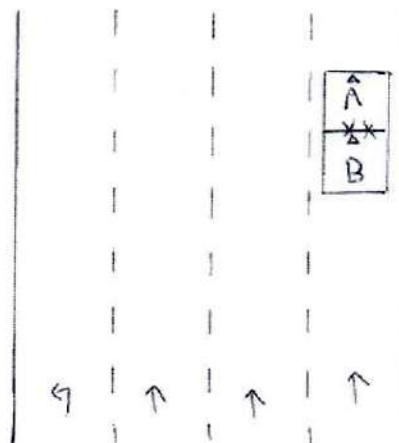
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts 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 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  
(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

Sketch Plan

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

Witnessed by Reporting Centre Personnel



A: SNM3744H

B: QX1040A

Along PIE/Changi  
before exit 19



Describe Circumstances of the Accident

- Refer to police report -

### Declaration

We declare the foregoing particulars are true in every respect

Policyholders Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel


**SINGAPORE  
POLICE FORCE**


T/20240726/7073

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

1 of 3

Report No: T/20240726/7073

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/07/2024 14:24	Video Report No:	Station Diary No:
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**Informant's Particulars**

Name of Informant: TAN MENG LYE			Address: 341 BUKIT BATOK STREET 34 #02-58 SINGAPORE 650341		
ID Type / ID No.: NRIC NO / S1605636G			Contact No.: Home/Office: Mobile: 94518197		
Nationality: SINGAPORE CITIZEN			Email: BENTAN.1963@GMAIL.COM		
Sex: Male	Age:	Date of Birth: 28/06/1963	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Private-hire car driver			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Additional Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 26/07/2024 10:30	Type of Location: Straight Road
Location:  MERRY ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: MOVING VEHICLE AGAINST - STATIONARY VEHICLE				Anyone conveyed by ambulance No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
QX1040A	Motor car					0
SNM3744H	Motor car	TOYOTA	SIENTA HYBRID 1.5G CVT	White		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNM3744H	ALLIANZ INSURANCE SINGAPORE PTE LTD.	SP2007696073	18/09/2023	17/09/2024



**SINGAPORE  
POLICE FORCE**



T/20240726/7073

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

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Report No: T/20240726/7073

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN MENG LYE	ID No	S1605636G
Related Vehicle	SNM3744H (Motor car)	Contact No	94518197
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)	NIL	Degree of Injury	Slight

**Brief Details.**

ON THE STATED DATE AND TIME I WAS THE DRIVER OF VEHICLE BEARING THE CAR PLATE NUMBER OF SNM 3744 H. I WAS TRAVELLING ALONG THE STATED LOCATION. AS THE TRAFFIC IN FRONT SLOWED DOWN TO A STOP, I FOLLOW SUIT. OUT OF A SUDDEN, I FELT AN IMPACT FROM THE REAR PORTION OF MY VEHICLE. I GOT DOWN AND REALISED THAT VEHICLE BEARING THE CAR PLATE NUMBER OF QX 1040 A HAD COLLIDED ONTO THE REAR PORTION OF MY VEHICLE. I AM INTENDING TO SEEK MEDICAL ADVISE.

**SINGAPORE  
POLICE FORCE**

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



T/20240726/7073

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Report No: T/20240726/7073

## CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
FAHKRUL RAZI BIN SUHAIME  
Contact No.: 65476404

NP168

Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
26/07/2024 14 24

Classification Of Case:







**PHOTOGRAPHS FOR VEHICLE NO. : SNM 3744H**





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**INSPECTION PHOTOS (Page 3 of 6)**

### PHOTOGRAPHS FOR VEHICLE NO. : SNM 3744H



**PHOTOGRAPHS FOR VEHICLE NO. : SNM 3744H**





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**PHOTOGRAPHS FOR VEHICLE NO. : SNM 3744H**



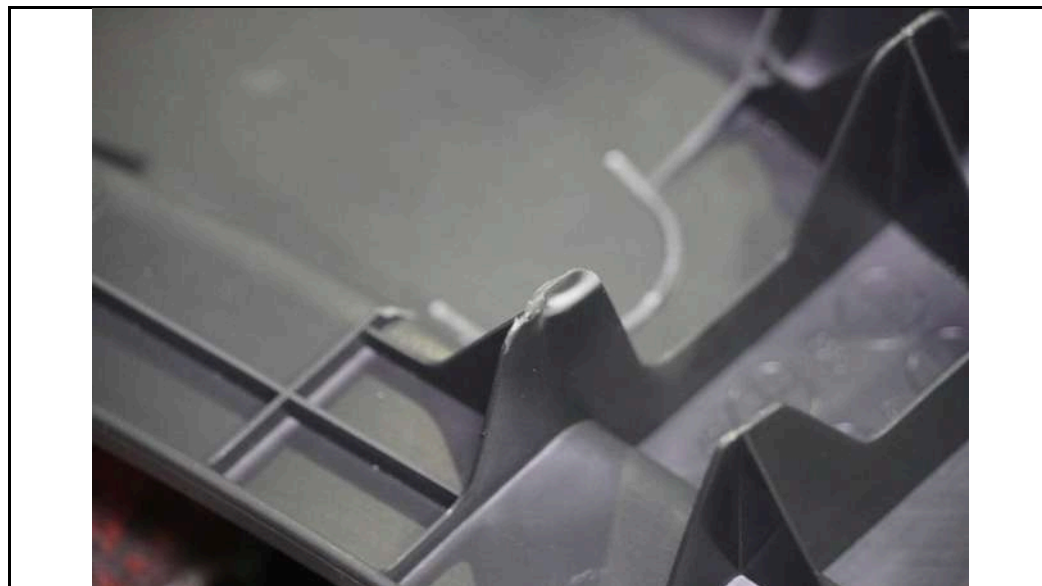


**PHOTOGRAPHS FOR VEHICLE NO. : SNM 3744H**





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REINSPECTION PHOTOS (Page 2 of 2)

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