

INS. CASE OWNER:

CC 3 / III160

10590, 12293 9

LKK:

IDAC:

Surveyor:

KENNETH

DOI:

6/6/16

Date / Time:

6/6/16

Registered in Merimen:

8/6/16

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHC 6137P

Name of Insured:

PRGMIER TAXIS P/L

Insured Tel No.:

HP:

Excess Sec II :\$S

D.O.A.:

04-06-16

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

CHUA KIAN HENG

Driver Tel No.:

90935883

(V/L: YES / NO)

Claim No.:

Policy No.:

MPR0003

Make / Model:

KIA OPTIMA

Place of Accident:

BRAS BASAH ROAD / NICOLL HIGH

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHC 5912A



INSRS:

WSP:

Tel:

Liability:

RMKS:

Trans-cab



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE

Date/Time: 2nd lane. We are liable for the damage.

FINALIZATION

Date/Time:

Confirm with:

Confirm by: Kenneth.

Repair Cost: P/P

S\$ 7624.80 (5 days) Reduction: \$10204.79 % 57

Email

Call

FINAL SETTLEMENT

Date/Time: 19/9/19 4.30pm

Confirm with: Wai Yim

Email

Call

Final Liability:

% 100 58 (Agreed / Assessed) BOLA S/N No.: N/L

If NO or B 28, Ass. Lia:

Repair Cost: (w/GST)

S\$ 8158.53

Loss of Rental (LOR):

S\$ 928.76 (7 days) x \$132.68 VIDEO

Loss of Use (LOU):

S\$ - (5 x days)

Loss of Income (LOI):

S\$ 280.00 (\$40 x 7 days)

LOR only ☐ LOU only ☐LOR + LOU ☐ LOR + LOI ☐ [Tick only one]

GIA/LTA Search

S\$ -

Medical:

S\$ -

Disbursement:

S\$ -

(e.g. Tow/ Independent)

Legal Cost

S\$ -

Total:

S\$ 9767.29

Global Sum S\$:

Email

Call

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 9767.29

Name 1:

Trans-cab Auto Services Pte Ltd

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

COPY SENT
19/9/19

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: \$600/-

ASS. REC. BY:

REF:

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s *Tan's Car*

of _____

Insured: _____

Policy No. _____

Claims No. _____

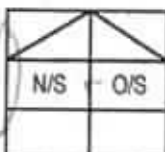
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: *05* days Res.: Yes or No

Lum Sum: *1.21* % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: *S11C 58121* Yr Regn: *03, 15*

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: *Pontiac Vibe* c.c. *1995*

Colour: *White* A/C: Insured / Std / NI / NA

Sp. Reading: *207378* T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: *VIC1ABL15AUC 281432*

Gen. Cond: *Good* / Fair / Poor / Burnt

Steering: *Inorder* / Jammed / Leaked / Burnt or

Brake: *Inorder* / Jammed / Leaked / Burnt or

Mod: *Nil* / S/Rim / STD A/Rim or

Tyre Size: *F: 215/60R16*

R: 215/60R16

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. *6* mm

L/Bal. *6* mm

D.O.A. *4/6/16*

Survey held at

Rear

R/Bal. *8* mm

L/Bal. *8* mm

D.O.I. *6/6/16*

Des. of Damages: *Frnt* / Rear / O/S / N/S / UIC / Rooftop or

N/S body

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
<i>6/6</i>	<i>GIA & Est not ready</i>
<i>8/6</i>	<i>87624.80 Payer (Red = \$10204.79 / 57%)</i>
<i>u</i>	<i>File pass to Catherine</i>
<i>2/12</i>	<i>87624.80 Confirmed Termine C5+1X132.68 + 240)</i>
<i>u</i>	<i>Assess for injury claim</i>
<i>u</i>	<i>5 repair days + 2 PRS = 7 days</i>

Date/Time, File Pass to?

☐ : Prell. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS \$ _____

Photos

Others

TOTAL

Report Format: _____

Lump Sum / I.B.I: (\$ _____)




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				
INDIA INTERNATIONAL INSURANCE PL		Ref : CC3/III16010590/Kza3		
64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711		Date : 08-06-2016		
		Code : III2		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHC 6137P	Veh. Inspected	SHC 5912A	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	08/06/2016	
2. Vehicle Particulars & Condition				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
4. Description of Damages				
5. General Information				
Accident Date	04/06/2016	Inspection Date	06/06/2016	
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

TRANS-CAB AUTO SERVICES PTE LT
 NO.2 ANG MO KIO ST 63 SINGAPORE 569111
 TEL NO.6287 6666 FAX NO.6257 1330
 CO/GST REG NO.201019626G
SHC 5912A - III

Candy

Not Authorised

1-B.1

B 7124.80
Returning B4 paint

Vehicle No.:	SHC 5912A - CANDY
Chassis No.:	VF1ABL15AUC281432
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE
Date of Accident :	04.06.2016
Third Party Insurer :	III

PART			LIST	
1	1	FENDER PANEL FRT LH	\$	<i>R</i> 602.95 ✓
2	1	FENDER WHEELARCH FRT LH (Linner)	\$	<i>Sm</i> 107.33 ✓
3	1	DOOR FRT LH	\$	<i>Bt</i> 2,188.20 ✓
4	1	DOOR HANDLE OUTER FRT LH	\$	<i>Sm</i> 198.55 ✓
5	1	DOOR HANDLE COVER FRT LH	\$	<i>Sm</i> 10.17 ✓
6	1	DOOR MIRROR LH	\$	<i>Sm</i> 1,141.08 ✓
7	1	DOOR SEAL FRT LH	\$	<i>Sm</i> 52.83 ✓
8	1	ROCKER PANEL OUTER LH	\$	<i>Bt</i> 759.61 ✓
9	1	DOOR REAR LH	\$	<i>Bt</i> 2,188.20 ✓
10	1	DOOR HANDLE OUTER REAR LH	\$	<i>Sm</i> 97.31 ✓
11	1	FENDER PANEL REAR LH	\$	<i>R</i> 2,537.80 ✓
12	1	FENDER WHEELARCH REAR LH (Linner)	\$	<i>Sm</i> 418.06 ✓
13	1	BUMPER COVER REAR	\$	<i>Bt</i> 852.66 ✓
14	1	BUMPER LOWER REAR	\$	<i>Sm</i> 591.41 ✓
15	1	BUMPER REFLECTOR LH	\$	<i>Sm</i> 33.55 ✓
16	1	BUMEPR BRACKET SIDE LH REAR(Taillamp lower)	\$	<i>Sm</i> 104.59 ✓
17	1	BUMEPR RETAINER LH REAR	\$	<i>Sm</i> 34.61 ✓
18	1	TAILLAMP LH	\$	<i>Sm</i> 425.04 ✓

TOTAL	\$	12,343.94
10%	\$	1,234.39
	\$	11,109.55

Special Nett

1	1	DOOR STICKER "Trans-cab"	\$	<i>Sm</i> 80.00 <i>60sm</i>
2	1	DOOR STICKER "Classic"	\$	<i>Sm</i> 30.00 <i>15sm</i>
3	1	DOOR STICKER "6555-3333"	\$	<i>Sm</i> 80.00 <i>60sm</i>

TOTAL	\$	190.00
TOTAL PARTS	\$	11,299.55

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same

\$ 2,800.00 *800*

TRANS-CAB AUTO SERVICES PTE LTD

NO.2 ANG MO KIO ST 63 SINGAPORE 569111

TEL NO.6287 6666 FAX NO.6257 1330

CO/GST REG NO.201019626G

SHC 5912A - III**Candy**

To Check Electrical Lighting Concerned.	\$	170.00 <i>2cl</i>
Putty and spray painting of the affected portion.	\$	3,000.00 <i>110cl</i>
To check steering geometry and computer wheel alignment	\$	<i>NN</i> 220.00 <i>X</i>
To transfer of door fittings, attachment and perform water seepage test.	\$	170.00 <i>12cl</i>
To rust-proofing of the affected areas.	\$	170.00 <i>6cl</i>

TOTAL	\$	6,530.00
Over All Total	\$	17,829.55

(PARTS BY PARTS) Repair Days**10 Days***5 days*

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey *before* after spray painting
- To display damaged parts during inspection
- Parts prices are subject to quotation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be re-surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

**ONE MOTORING**
Your Fast Track To Complete Motoring

Text size + -

Enquire PARF/COE Rebate for Registered Vehicle**Vehicle Owner Particulars**

Owner ID Type: Company

Owner ID: 3878K

Vehicle Details

Vehicle No.: SHC5912A

Vehicle to be Exported: Yes

Intended De-registration Date: 06 Jun 2016

Vehicle Make: RENAULT

Vehicle Model: LATITUDE 2.0L DCI AUTO D/AB 4DR

Primary Colour: Red

Manufacturing Year: 2015

Engine No.: M9R8839C002481

Chassis No.: VF1ABL15AUC281432

Maximum Power Output: 127.0 kW (170 bhp)

Open Market Value: \$19,998.00

Original Registration Date: 23 Mar 2015

First Registration Date: 23 Mar 2015

Transfer Count: 0

Actual ARF Paid: \$12,498.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 22 Mar 2023

PARF Rebate Amount: \$9,373.00

Intended COE Rebate Details

COE Expiry Date: 22 Mar 2023

COE Category: A - Car (up to 1600cc & 97kW (130bhp))

COE Period(Years): 8

PQP Paid: \$51,092.00

COE Rebate Amount: \$40,873.00

Total Rebate Amount: \$50,246.00**Message**

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 06 Jun 2016

OK

Land Transport Authority

[Please read through the Privacy Statement, Terms of Use and Disclaimer.](#)

Zayyer (LKKAuto)

From: Zayyer (LKKAuto)
Sent: Thursday, 4 August, 2016 4:38 PM
To: 'Zhe Wei'
Cc: jasminetan@transcab.com.sg
Subject: request video footage Date of accident on 04/06/2016 involving vehicles SHC 6137P & SHC 5912A
Attachments: STATEMENT OF OUR INSURED.pdf

WITHOUT PREJUDICE

Dear Zhe Wei,

Date of accident on 04/06/2016 involving vehicles SHC 6137P & SHC 5912A

We refer to the above matter.

Our insured driver mentioned that your client had collided into his vehicle by overtaking and changing lane. Enclosed herewith is the statement of our insured.

Therefore, we write to request a copy of video footage, witness (es), photos for our necessary action to follow. Thanks.

Best Regards,

Zayer | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841 2409, email: zayyer@lkkauto.com | fax: 6741 4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Print Received Message

This mail is associated with :

***SHC5912A (MCP151207)**
[SHC6137P]
TP
TRANS-CAB SERVICES PTE LTD
Jun 4 2016 8:00PM
[-]
Trans-cab Auto Services Pte Ltd

From India International Insurance Pte Ltd (HQ) (III_SG), sent on 02/09/2019 15:19 PM.
To LKK_HQ
Subject Alert - Adj Mandate Approved (S\$9367.30) - SHC5912A - Claim Handler: Sundari Nagarajan

Approved:9367.30.

To: Jay

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Our Ref : AAD1606-060

Your Ref : SHC5137P

Date : 21.March 2019

INDIA INT'L INS PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHC5912A AND SHC5137P ON 04/06/16 08:40 PM ALONG BRAS BASAH ROAD

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	\$	8,158.53
2.	Loss of Rental for <u>7</u> days @ \$ <u>124.68</u> per day	\$	928.76
3.	Loss of Income for <u>7</u> days @ \$ <u>40.00</u> per day	\$	280.00
4.	LTA Search Fee	\$	0.00
5.	Survey Fee	\$	0.00
	Total	\$	9,367.29

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver

Rental rate and mileage records

Certificate of Insurance

Authorization To Act

Original final repair bill

LTA Search Fee

Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.

Yours Faithfully

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager

Tel No. : 6603 1250 (DID)

Note : Please email any further correspondence to claims@transcab.com.sg (6603 1259)

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHC5912A and SHC5137P along BRAS BASAH ROAD on 04/06/16 08:40 PM.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 21 (day) of March 2019

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MCP151207
Claimant Ref: SHC 5912A

We/I, TRANS-CAB AUTO SERVICES PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of Surveyor) with respect to the amount claimed for S\$ 8,158.53 (repair cost), S\$ 1,208.76 (loss of income/rental), S\$ - (search fee), vehicle no. SHC 5912A that was damaged pursuant to the accident which occurred on 04/09/2016 (date) at BRAS BASAH RD // NICOLL HIGHWAY (location) involving vehicle no. SHC 6137P (insured vehicle). This is pursuant to the inspection conducted on 06/09/2016 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner TRANS-CAB SERVICES PTE LTD ("the third party claimant") of vehicle no. SHC 5912A to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SHC 5912A (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 9,367.29 to TRANS-CAB AUTO SERVICES PTE LTD.

Dated this 10 day of SEP 20 19

CLAIMANT:

Signature: [Signature]

Name: Ng Wai Yin

NRIC: G2815702P

Address: TRANS-CAB SERVICES PTE LTD
No. 2 Ang Mo Kio Street 63
Singapore 561111

Nationality: MISIAN

Occupation: ACC7-



Signed by "the workshop" (with chop)

WITNESS:

Signature: [Signature]

Name: LKK AUTO CONSULTANTS PTE LTD

NRIC: 199607198R

Address: 51 UBI AVE 1 #02-25
PAYA UBI INDUSTRIAL PARK S(408933)

Nationality: [Blank]

Occupation: [Blank]



Signed by appointed Surveyor

Trans-Cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666

Fax: 6287 7764

Co. Reg. No.: 201019626G

GST Reg. No.: 201019626G

Tax Invoice / Debit Note

TO: INDIA INTERNATIONAL INSURANCE PTE LTD 64 CECIL STREET #05-00 IOB BUILDING 049711 Singapore ATTENTION:	INVOICE NO. : INV1608-145 DATE : 22. August 2016 REFERENCE NO : AAD1606-060 TERMS : DUE DATE : 22. August 2016 PAGE : 1
--	--

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHC5912A;DOA 04.06.16(PART-BY-PART-16)	1	8,158.53	8,158.53

Total SGD Excl. GST : 7,624.79

7% GST : 533.74

****** EIGHT THOUSAND ONE HUNDRED FIFTY EIGHT AND FIFTY THREE SGD ONLY ******

Total SGD Incl. GST : 8,158.53

- 1) All cheques should be crossed and made payable to "Trans-Cab Auto Services Pte Ltd"
- 2) Please quote our Invoice Number during payment.
- 3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.
- 4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.

THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

21 March, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 04/06/16 08:40 PM at BRAS BASAH ROAD

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHC5912A. The taxi was hired to SEE GIM CHUAN a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate ~~\$128.4~~^(21.0) per day (inclusive of GST).
2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.
3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan
General Manager

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

04-06-2016

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
Accident No.	AAD1606-060	Accident Date 04-06-2016
4/6/2016 20:40	10/6/2016 17:50	SHC5912A

Yours Faithfully,

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

...CLAIM SUBFOLDER...(Pending for Survey Report)

Direct Settlement

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	08 Jun 2016 Edit Reg		06 Jun 2016 00:00 Edit Adj Rpt	S\$7,624.80 Edit Estimates	S\$7,624.80 View Rpt		Pending for Survey Report Cancel Case


Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured: PREMIER TAXIS PTE LTD , Co. Reg. No.: 200304975H									
Main Claimant: TRANS-CAB SERVICES PTE LTD , Co. Reg. No.: 200303878K									
Vehicle Reg. No.: SHC5912A		Date of Loss: 04/06/2016 20:00 - :59 [14 Months and 12 Days From LTA Reg. Date (Man Yr)]							
Claim Type: TP / MCP151207		Policy/Cover Note No.: MPRE0003							
Vehicle Reg. No. (Insured): SHC6137P		Policy No. (Claimant): VPX/P1680520							
		Excess:							
Repairer: Trans-cab Auto Services Pte Ltd (Ang Mo Kio) 2, Ang Mo Kio Street 63, 569111 Ang Mo Kio - Tel: 62876666									
Handling Insurer: India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Sundari Nagarajan - 6347 6071]									
Claimant's Insurer: AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288									
Adjuster: LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 17/06/2016]									
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> • III_SG (02/09/2019): Alert - Adj Mandate Approved (S\$9367.30) - SHC5912A - Claim Handler: Sundari Nag... • III_SG (26/07/2019): Alert - Adj Mandate Maintained - SHC5912A - Claim Handler: Sundari Nagarajan • III_SG (29/10/2018): Alert - Adj Mandate Approved (S\$0.00) - SHC5912A - Claim Handler: Harmeenita Ros... • III_SG (28/07/2016): Alert - Adj Mandate Approved (S\$0.00) - SHC5912A - Claim Handler: Bandiwadekar V... 									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									





















Claim Documents










*SHC5912A (MCP151207)
[SHC6137P]
TP
TRANS-CAB SERVICES PTE LTD
Jun 4 2016 8:00PM
[PREMIER TAXIS PTE LTD]
Trans-cab Auto Services Pte Ltd


[Upload Documents](#)
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View [View in Browser](#)

Video			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	29/10/18 17:05	Video - TP	 Load WMV	

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	08/06/16 15:52	Odometer Reading	 Load JPG	<input checked="" type="checkbox"/>
2	08/06/16 15:52	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
3	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
4	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
5	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
6	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
7	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
8	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
9	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
10	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
11	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
12	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
13	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
14	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
15	08/06/16 15:52	General View	 Load JPG	<input checked="" type="checkbox"/>
16	08/08/19 08:58	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
17	08/08/19 08:58	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
18	08/08/19 08:58	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
19	08/08/19 08:58	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
20	08/08/19 08:58	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>

Documentation			1 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	10/06/16 09:05	TP ESTIMATE - MARKED	 Load PDF	
2	10/06/16 09:05	TP GIA REPORT	 Load PDF	
3	10/06/16 09:05	TP POLICE REPORT	 Load PDF	
4	25/07/19 15:05	WORKSHOP INVOICE	 Load PDF	
5	25/07/19 15:05	RENTAL RECEIPT	 Load PDF	
6	25/07/19 15:05	RENTAL MILEAGE	 Load PDF	
7	25/07/19 15:05	LOD	 Load PDF	
8	24/09/19 08:44	DISCHARGE VOUCHER	 Load PDF	
9	24/09/19 08:44	AUTHORISATION TO ACT FORM	 Load PDF	

No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	09/06/16 16:09	IV Singapore Accident Statement	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

LKK Auto Consultants Pte Ltd (Co. Reg. No: 199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC3/III16010590/KGA3Q2

Date: 24/09/2019

REFERENCE

Handling Insurer: India International Insurance Pte Ltd Policy No: MPRE0003
 Claimant SHC5912A Insured Vehicle No: SHC6137P
 Vehicle No : SHC5912A
 Date of Loss: 04/06/2016 Nature of Claim: TP Claim No: MCP151207

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC5912A
 Make & Model: RENAULT LATITUDE, 2.0 D dCi (A) Engine No: M9R8839C002481
 Reg. Date: 23/03/2015 (Man. Year: 2015) Chassis No: VF1ABL15AUC281432
 Colour: Metallic White/Red Odometer: 207378 km
 Engine Capacity: 1995 cc
 Market Value/New Car Price: N/A
 Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Yes

CONDITION OF TYRES

Front Tyre Size: 215/60 R16 Rear Tyre Size: 215/60 R16
 Front Left Side: Falken 6 mm Rear Left Side: Linglong 8 mm
 Front Right Side: Falken 6 mm Rear Right Side: Linglong 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	11,299.55	5,524.80	5,774.75	51.11
Miscellaneous Items	0.00	0.00	0.00	
Labour	6,530.00	2,100.00	4,430.00	67.84
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	17,829.55	7,624.80	10,204.75	57.24
+ GST 7.00/7.00% (S\$)	1,248.07	533.74	714.33	57.23
Nett Amount (S\$)	19,077.62	8,158.54	10,919.08	57.24
+ Loss of Use (7.0 x S\$40.00/day) (S\$)		280.00		
+ Car Rental (7.0 x S\$132.68/day) (S\$)		928.76		
Nett Liability (S\$)		9,367.30		

INSPECTION

Date of Assignment: 06/06/2016
 Date Inspected: 06/06/2016 Inspected At: Trans-cab Auto Services Pte Ltd
 NO. 2ANG MO KIO, ST 63
 Singapore 569111
 Estimated Period of Repair: 5.0 days

Adjuster: KENNETH KONG

Manager: Chong Pui Lin

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference		
Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 25 Jul 2019)
Parts:	143	RENAULT LATITUDE 2.0 D dCi (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHC5912A)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FENDER PANEL FRT LH	Repair	602.95 FL	*- FL
2	1		*FENDER WHEELARCH FRT LH (LINNER)	Serviceable	107.33 FL	*- FL
3	1		*DOOR FRT LH	Bent	2,188.20 FL	*2,188.20 FL
4	1		*DOOR HANDLE OUTER FRT LH	Serviceable	198.55 FL	*- FL
5	1		*DOOR HANDLE COVER FRT LH	Serviceable	10.17 FL	*- FL
6	1		*DOOR MIRROR LH	Serviceable	1,141.08 FL	*- FL
7	1		*DOOR SEAL FRT LH	Serviceable	52.83 FL	*- FL
8	1		*ROCKER PANEL OUTER LH	Bent	759.61 FL	*759.61 FL
9	1		*DOOR REAR LH	Bent	2,188.20 FL	*2,188.20 FL
10	1		*DOOR HANDLE OUTER REAR LH	Serviceable	97.31 FL	*- FL
11	1		*FENDER PANEL REAR LH	Repair	2,537.80 FL	*- FL
12	1		*FENDER WHEELARCH REAR LH (LINNER)	Serviceable	418.06 FL	*- FL
13	1		*BUMPER COVER REAR	Buckled	852.66 FL	*852.66 FL
14	1		*BUMPER LOWER REAR	Serviceable	591.41 FL	*- FL
15	1		*BUMPER REFLECTOR LH	Serviceable	33.55 FL	*- FL
16	1		*BUMPER BRACKET SIDE LH REAR (TAILLAMP LOWER)	Serviceable	104.59 FL	*- FL
17	1		*BUMPER RETAINER LH REAR	Serviceable	34.61 FL	*- FL
18	1		*TAILLAMP LH	Serviceable	425.04 FL	*- FL
19	1		*DOOR STICKER TRANS-CAB	Necessary	80.00 FS	*60.00 FS
20	1		*DOOR STICKER CLASSIC	Necessary	30.00 FS	*15.00 FS
21	1		*DOOR STICKER 6555-3333	Necessary	80.00 FS	*60.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

Sub Total (\$\$)	12,533.95	6,123.67
- List Item Discount on L Items 10.00/10.00% (\$\$)	1,234.40	598.87
Total Parts (\$\$)	11,299.55	5,524.80

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS,ADJUST AND REALIGN THE SAME	New	2,800.00	800.00
2	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	170.00	20.00
3	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	3,000.00	1,100.00
4	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT	New	220.00	0.00
5	TO TRANSFER OF DOOR FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST	New	170.00	120.00
6	TO RUST-PROOFING OF THE AFFECTED AREAS	New	170.00	60.00
Gross Labour Cost (S\$)			6,530.00	2,100.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >